



## **Bipartisan Congresswomen Introduce The Nutrition CARE Act First Eating Disorders Legislation to Improve Access to Care for Seniors and Persons with Disabilities on Medicare**

WASHINGTON, D.C. (July 11, 2019) –While often not discussed, eating disorders affect 3-4% of the senior population, and 6% of females and 3% of males with disabilities. Eating disorders for older Americans and Americans with disabilities are particularly serious given the likelihood of co-occurring chronic diseases or illnesses that already compromise a person’s health. Studies show this population is more likely to have an eating disorder compared to the general population.

Eating disorders can prevail throughout all stages of life, including those that begin in childhood or adolescence. As a result, a high prevalence in the senior population is not surprising as bulimia prevalence does not plateau until the late 40s and binge eating disorder prevalence until the 70s. Despite this occurrence, the US Medicare system provides limited treatment for beneficiaries to aid their recovery. Specifically, Medicare excludes coverage for outpatient nutrition counseling, which is one of the four pillars to comprehensive eating disorders treatment alongside therapy, psychiatry, and medical care.

“Nutritional rehabilitation and guidance are the foundation of eating disorder treatment, yet Medicare only provides them in the hospital,” says **Jessica Setnick, Director of the International Federation of Eating Disorders Dietitians (IFEDD)**. “Can you imagine your loved one improves to the point they can return home, only to find out the key to continued recovery is no longer a covered benefit?”

The Eating Disorders Coalition applauds US House of Representatives Ways & Means Committee Congresswomen **Judy Chu (D-CA-27)** and **Jackie Walorski (R-IN-02)** for introducing the **Nutrition Counseling Aiding Recovery for Eating Disorders (Nutrition CARE) Act of 2019** to ensure that every key pillar of eating disorders treatment, including medical nutrition therapy (nutrition counseling), is covered by Medicare. This legislation is also supported by **Tony Cardenas (D-CA)**, **Kathy Castor (D-FL)**, **Yvette Clarke (D-NY)**, **Brian Fitzpatrick (R-PA)**, **Susie Lee (D-NV)**, **Jamie Raskin (D-MD)**, **Harley Rouda (D-CA)**, **Paul Tonko (D-NY)**, and **Don Young (R-AK)**.

“Eating disorders are often thought of as a young person’s disease, but in fact it’s estimated that between 3-4% of Medicare beneficiaries have an eating disorder,” said **Congresswoman Judy Chu (D-CA-27)**. “When left untreated, eating disorders in this population can lead to heart failure, kidney failure, diabetes, hypoglycemia, and more. We know this can be prevented with treatment and therapy, but only if treatment and therapy are made accessible to seniors. That is why I’m proud to lead the Nutrition CARE Act to require Medicare to cover medical nutrition therapy for beneficiaries diagnosed with an eating disorder.”

“Medical nutrition therapy plays a critical role in helping people with eating disorders recover and live healthier lives,” **Congresswoman Jackie Walorski (R-IN-02)** said. “The Nutrition CARE Act will ensure seniors and disabled Americans have access to the comprehensive treatment they need by including outpatient nutrition counseling in Medicare coverage. I’m grateful to work across the aisle on this important issue and look forward to moving this bipartisan bill forward.”

The formal introduction of the bipartisan **Nutrition CARE Act** brings the eating disorders community one step closer to comprehensive and affordable treatment. If passed, the legislation provides outpatient Medicare coverage for medical nutrition therapy for eating disorders. Medical nutrition therapy is essential to reversing the physical damage and life-threatening complications of eating disorders.

“As a physician and Certified Eating Disorders Specialist, I have treated many seniors with eating disorders over the years. This disease does not discriminate; eating disorders affect individuals of all ages,” says **Molly McShane, Vice President of the Eating Disorders Coalition**. “To adequately treat eating disorders, nutrition services must be included in the comprehensive approach to recovery. Currently, eating disorders patients on Medicare do not have access to a dietitian. The Nutrition CARE Act aims to change that.”

Eating disorders affect 30 million Americans during their lifetime and have the second highest mortality rate of any psychiatric illness, second to opioid abuse. These disorders do not discriminate, and affects people of all genders, ages, sizes, sexual orientations, ethnicities, and socioeconomic statuses. Eating disorders are complex, biologically-based illnesses that include the specific disorders of anorexia nervosa, bulimia nervosa, binge eating disorder, avoidant/restrictive food intake disorder, and other specified feeding or eating disorders as recognized by the American Psychiatric Association's DSM 5. With interventions at the appropriate durations and levels of care, eating disorders can be successfully treated to recovery.

***The Eating Disorders Coalition for Research, Policy & Action (EDC) is a Washington, DC-based, federal advocacy organization comprised of advocacy organizations, academics, treatment providers, family/loved ones of children with eating disorders and people experiencing eating disorders nationwide. The EDC advances the recognition of eating disorders as a public health priority throughout the United States. EDC member organizations include the Academy for Eating Disorders, Alliance for Eating Disorders Awareness, Bannister Consultancy, Cambridge Eating Disorder Center, Center for Change, Center for Eating Disorders at Sheppard Pratt, Clementine, Donahue Foundation, Eating Disorder Coalition of Iowa (EDCI), Eating Disorders Center at Rogers Memorial Hospital, Eating Disorder Hope, Eating Disorder Therapy LA, Eating Recovery Center, The Emily Program, Families Empowered and Supporting Treatment of Eating Disorders (F.E.A.S.T.), Focus Treatment Center, Gail R. Schoenbach FREED Foundation, International Association of Eating Disorders Professionals (iaedep), International Federation of Eating Disorders Dietitians, Laureate Eating Disorders Program, Monte Nido, Mothers Against Eating Disorders, Mirasol Eating Disorder Recovery Center, Moonshadow's Spirit, Multi-Service Eating Disorders Association, National Eating Disorders Association (NEDA), The National Association of Anorexia Nervosa and Associated Eating Disorders, Oliver-Pyatt Centers, Park Nicollet Melrose Center, Project HEAL, Reasons Eating Disorder Center, Renfrew Center, Residential Eating Disorders Consortium, Rosewood Center for Eating Disorders, Stay Strong Virginia, Strategic Training Initiative for the Prevention of Eating Disorders (STRIPED), Timberline Knolls, Veritas Collaborative, Walden Behavioral Care, Wrobel & Smith PLLP, and WithAll. Additional resources can also be found at [www.eatingdisorderscoalition.org](http://www.eatingdisorderscoalition.org).###***

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