



EDC Applauds the Reintroduction of the Nutrition CARE Act in the House & Senate

WASHINGTON, D.C. (March 3, 2021) — The Eating Disorders Coalition for Research, Policy & Action (EDC) is pleased to announce that the bipartisan Nutrition Counseling Aiding Recovery for Eating Disorders Act, or Nutrition CARE Act, has been reintroduced in the United States House of Representatives and Senate. The House bill is led by Reps. Judy Chu (D-CA), Jackie Walorski (R-IN), and Lisa Blunt Rochester (D-DE) and the Senate bill is led by Sens. Maggie Hassan (D-NH) and Lisa Murkowski (R-AK).

Medical Nutrition Therapy (MNT), also known as dietitian services, is one of the key components of successful outpatient eating disorders treatment and recovery; however, it is not a covered benefit for people with eating disorders under Medicare Part B. The Nutrition CARE Act would provide MNT coverage for outpatient eating disorders treatment at the same coverage levels already afforded to individuals with diabetes and renal disease. This bill would fill a critical gap in eating disorders treatment coverage to ensure individuals have the resources they need on their journey toward recovery.

“Our seniors and millions of others rely on Medicare to meet their healthcare needs, and that must include all healthcare, including eating disorders,” **said Rep. Judy Chu (D-CA)**. “Contrary to most assumptions, eating disorders do not only impact younger people. It’s a serious problem for our seniors as well, and can lead to more serious health problems such as heart failure, stroke, or kidney failure if not addressed. That’s why I’m proud to work with Rep. Walorski to once again introduce this important bill to ensure eating disorder treatments are covered so more Americans can live full and healthy lives at every age.”

“Individuals with eating disorders as well as their families face many challenges, especially amid the coronavirus pandemic and social distancing. Now more than ever we need to ensure seniors and disabled Americans have access to the comprehensive treatment they need by including outpatient nutrition counseling in Medicare coverage,” **said Rep. Jackie Walorski (R-IN)**. “I’m grateful to work on the bipartisan Nutrition CARE Act with Rep. Judy Chu to help those with eating disorders recover and live healthier lives.”

“It’s estimated that over 35,000 Delawareans suffer from an eating disorder, which has the second highest mortality rate of any mental illness,” **said Rep. Lisa Blunt Rochester (D-DE)**. “Failure to get treatment for this medical condition can lead to health complications that can be life-threatening. I’m proud to join my colleagues Reps. Judy Chu and Jackie Walorski in introducing the Nutrition CARE Act so we can reduce barriers to accessing comprehensive and critically necessary treatment under Medicare.”

“Despite the perception that this is just a young person’s problem, older Americans struggle with eating disorders in significant numbers,” **said Sen. Maggie Hassan (D-NH)**. “For seniors and people who experience disabilities, eating disorders can pose a serious threat to their health by complicating existing health concerns that can become life-threatening. The bipartisan *Nutrition CARE Act* will help expand access to comprehensive nutritional therapy for Granite Staters and Americans who rely on Medicare and help them lead healthy lives. This is an important step to help older Americans receive the health care that they need and I urge my colleagues to join us in supporting this bipartisan legislation.”

“Recent studies show that over 30 million Americans experience a clinically significant eating disorder during their lifetime. These complex mental illnesses can have a devastating impact on individuals of all genders and ages,” **said Sen. Lisa Murkowski (R-AK)**. “The Nutrition CARE Act will help improve access to treatment for those impacted by eating disorders by allowing registered physicians, dietitians, nutrition specialists, and mental health professionals to provide medical nutrition therapy services to Medicare beneficiaries. Particularly for a state like Alaska, which is sorely lacking in resources to treat eating disorders, expanding access to this type of care is significant.”

“It is important to remember that eating disorders can impact anyone at any age, including our seniors,” **said Sen. Shelley Moore Capito (R-WV)**, an original sponsor of the legislation. “This legislation would ensure all of those

struggling with eating disorders can receive the proper, targeted treatment they need to address the challenges they are facing.”

Contrary to public perception that eating disorders only affect younger populations, studies show that eating disorder rates of seniors, who make up the majority of the Medicare Part B population, are similar to eating disorder rates of the general population. The Social Security Disability Insurance (SSDI) population, which also makes up a sizable percentage of the Medicare population, also experiences rates of disorder eating similar to the general population. This legislation would assist in providing treatment for the estimated 3 percent of men and 6 percent of women who have an eating disorder on disability insurance and the estimated 500,000 Medicare Part B beneficiaries who identify as Black, Indigenous and People of Color with an eating disorder.

“As a patient protection issue, access to professional nutrition help is of paramount importance for eating disorders which may impact every organ system,” said **Grace Ray Schumacher, CEDRD, RDN, LD, President of the Alaska Chapter of the International Association of Eating Disorders Professionals; Alaska Eating Disorders Alliance Board Member; and Advocate for the International Federation of Eating Disorder Dietitians.** “For the medical system at large, divergence to effectual dietitian services represents a potentially enormous cost savings at every level of the healthcare spectrum.”

In the United States, one person dies every 52 minutes as the direct result of an eating disorder, which is equivalent to 10,200 deaths per year. Eating disorders have the second highest mortality rate of any psychiatric condition, due to an elevated risk of suicide and serious medical comorbidities associated with untreated eating disorders. These comorbidities include heart failure, kidney failure, osteoporosis, Type II diabetes, stroke, gastric rupture, hypoglycemia, and other medical conditions that are especially deadly for members of the Medicare population.

“The EDC is excited to see the Nutrition CARE Act reintroduced today in both the United States House of Representatives and Senate,” said **EDC Board President Chase Bannister, MDiv, MSW, LCSW, CEDS.** “This legislation will help ensure those on Medicare Part B are able to receive coverage for outpatient Medical Nutrition Therapy, an essential element of the eating disorders recovery process.”

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. Additional resources can also be found at eatingdisorderscoalition.org.

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