**NUTRITION CARE ACT**

(H.R. 1551/S. 584)

**EATING DISORDERS AND THE MEDICARE POPULATION**

- **3-4%** Rates of disordered eating in seniors are similar to those of the general population.
- **420K-560K** Approximate number of Medicare Part B beneficiaries that are Black, Indigenous and/or People of Color who have an eating disorder.
- **52 MINUTES** 1 death every 52 minutes from an eating disorder. (10,200 deaths annually)
- **3%** Estimated rates of disordered eating in the SSDI population.

**THE PROBLEM:** Medical Nutrition Therapy is an essential part of outpatient eating disorder treatment, yet is NOT a covered benefit for people with eating disorders under Medicare Part B.

**THE KEY COMPONENTS OF SUCCESSFUL EATING DISORDERS TREATMENT**

- **PSYCHIATRIC**
- **MEDICAL NUTRITION THERAPY**
- **THERAPY**
- **MEDICAL**

**LACK OF COMPREHENSIVE TREATMENT CAN LEAD TO:**

- **Co-occurring Medical Complications**
  - When left untreated, eating disorders can lead to heart failure, kidney failure, osteoporosis, Type II diabetes, stroke, gastric rupture, hypoglycemia, other medical injury, and death.
- **Economic Distress**
  - $64.7B Economic cost of eating disorders
  - $17.7B Cost to the Federal Government
  - 53,918 ER VISITS costing $29.3M
  - $23.5B COST TO INDIVIDUALS & FAMILIES
  - Caregivers provide 6 weeks of informal, unpaid care
  - 23,560 INPATIENT HOSPITALIZATIONS costing $209.7M

**THE SOLUTION:** The Nutrition CARE Act provides individuals with eating disorders on Medicare Part B coverage for Medical Nutrition Therapy benefits equal to other medical conditions.

**COVERAGE PROVISIONS:**

MNT coverage would be equal to the coverage that is currently available under Medicare Part B for diabetes.

**COST CONTROL PROVISIONS:**

The bill includes provisions that give the Secretary the ability to authorize higher amounts of coverage as well as place cost-control measures as needed within the Medicare program - in addition to the savings already created by treating at the outpatient level.

*For more information or to co-sponsor, please contact:*

Ellen Hamilton in Rep. Chu’s Office: Ellen.Hamilton@mail.house.gov
Martin Schultz in Rep. Walorski’s Office: Martin.Schultz@mail.house.gov
Kaitlyn Kelly in Sen. Hassan’s Office: Kaitlyn_Kelly@hassan.senate.gov
Angela Ramponi in Sen. Murkowski’s Office: Angela_Ramponi@murkowski.senate.gov
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