An innovative imaging technology for osteoporosis, dual-energy x-ray absorptiometry, illustrates the significant delays that medical technology companies and patients can encounter in obtaining Medicare coverage for new devices and diagnostics.

In 1987 the first dual-energy x-ray absorption (DEXA) system was introduced as a more accurate way to measure bone mineral density. By the mid-1990s, more advanced versions were introduced that could assess bone mineral density by scanning “peripheral” areas of the body like the wrist, shin bone or heel.

Giving Medicare patients full access to this important advance, however, proved just as difficult as developing it and getting it approved by FDA. In fact, getting DEXA technology through Medicare’s maze of complex rules was a seven-year process that finally took an act of Congress to complete.

DEXA technology’s journey through Medicare began in 1990. Even though Medicare already covered similar bone mineral density technologies, it refused to extend the national coverage policy to DEXA. Instead, it asked for six “technology assessments” to help determine whether the devices should be covered.

Without the national policy, obtaining reimbursement became more difficult and was handled inconsistently in different regions of the country.

It took federal health officials six years just to complete some of the assessments. Instead of deciding at that time to grant coverage, and in the face of rising patient demand for the procedure, Medicare decided to wait until the remaining assessments were completed.

Finally, under pressure from patient advocacy groups, Congress passed the Bone Mass Measurement Act in 1997 requiring Medicare to cover DEXA. National Medicare coverage took effect in July 1998.