

## ***2019 UOAA Federal Advocacy Priorities***

UOAA is the leading organization advocating for the 725,000 to 1,000,000 people living with an ostomy or continent diversion in the United States as well as the approximate 100,000 new patients facing ostomy surgery annually.

### ***Patient Access to Affordable Quality Care***

As the White House Administration and 116<sup>th</sup> Congress considers changes to the U.S. healthcare system, they must work together to find bipartisan solutions, and it is critical that basic patient protections are maintained including limiting patient out-of-pocket spending and the prohibition on discrimination against pre-existing conditions.

### ***Preserving and Promoting Access, Choice and Value for Consumers of Ostomy and Urological Products***

We want to ensure that all individuals with a medical condition or disability requiring urological or ostomy prosthetic supplies have access to the supplies prescribed by their health care providers. Policymakers need to 1) recognize that individuals require access to urological and ostomy prosthetic supplies that meet their specific medical needs, and that such products are not generic, one-type-fits-all commodities and 2) ensure Medicare, Medicaid, and private insurers within state/federal health care marketplaces cover the full range of prescribed urological and ostomy prosthetic supplies, and do so in a manner that is not economically burdensome for the consumer.

### ***UOAA also supports the passage of the following legislation:***

- **Removing Barriers to Colorectal Cancer Screening Act:** This would eliminate cost-sharing for initial and follow-up colorectal cancer screening tests for Medicare beneficiaries.
- **Disability Integration Act (DIA) (S117/HR555):** This civil rights bipartisan legislation would require insurance providers to cover community-based health care services for people with disabilities as an alternative to institutionalization. DIA would ensure that people could not be prematurely forced into nursing facilities because they couldn't get assistance with health-related tasks such as maintenance and use of a stable ostomy.

The above list is not all-inclusive. We also support the public policy agendas of our partner coalitions such as the Access and Care Coalition (ACC), and the Digestive Diseases National Coalition (DDNC).

Contact: Jeanine Gleba, UOAA Advocacy Manager, [advocacy@ostomy.org](mailto:advocacy@ostomy.org)