

110TH CONGRESS
1ST SESSION

S. 755

To amend title XIX of the Social Security Act to require States to provide diabetes screening tests under the Medicaid program for adult enrollees with diabetes risk factors, to ensure that States offer a comprehensive package of benefits under that program for individuals with diabetes, and for other purposes.

IN THE SENATE OF THE UNITED STATES

MARCH 2, 2007

Mr. SCHUMER (for himself and Mr. DOMENICI) introduced the following bill;
which was read twice and referred to the Committee on Finance

A BILL

To amend title XIX of the Social Security Act to require States to provide diabetes screening tests under the Medicaid program for adult enrollees with diabetes risk factors, to ensure that States offer a comprehensive package of benefits under that program for individuals with diabetes, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Diabetes Screening
5 and Medicaid Savings Act of 2007”.

1 **SEC. 2. IMPROVEMENT OF DIABETES SCREENING AND**
 2 **TREATMENT UNDER MEDICAID.**

3 (a) DIABETES SCREENING TESTS FOR ADULT EN-
 4 ROLLEES WITH DIABETES RISK FACTORS.—Section
 5 1905(a)(4) of the Social Security Act (42 U.S.C.
 6 1396d(a)(4)) is amended—

7 (1) in subsection (a)(4)—

8 (A) by striking “and” before “(C)”; and

9 (B) by inserting after the semicolon at the
 10 end the following “and (D) diabetes screening
 11 tests (as defined in section 1861(yy)(1)) for an
 12 individual at risk for diabetes (as defined in
 13 subsection (y)) at such intervals as are con-
 14 sistent with the requirements of subparagraph
 15 (B), or in the case of an individual 21 years of
 16 age or older, standards established by the Sec-
 17 retary under section 1861(yy)(3);” and

18 (2) by adding at the end the following new sub-
 19 section:

20 “(y) For purposes of subsection (a)(4)(D), the term
 21 ‘individual at risk for diabetes’ means—

22 “(1) an individual 45 years of age or older who
 23 is overweight, defined as a body mass index greater
 24 than 25 kg/m²; and

1 “(2) an individual under 45 years of age who
2 is overweight (as so defined) and who has any of the
3 following risk factors for diabetes:

4 “(A) A first-degree relative with diabetes.

5 “(B) Hypertension.

6 “(C) Dyslipidemia.

7 “(D) Habitually inactive.

8 “(E) Member of a high risk ethnic popu-
9 lation for diabetes, including a member of the
10 following populations:

11 “(i) African American.

12 “(ii) Latino/Hispanic.

13 “(iii) American Indian.

14 “(iv) Alaskan Native.

15 “(v) Asian American.

16 “(vi) Pacific Islander.

17 “(F) Previous identification of an impaired
18 fasting glucose or an impaired glucose toler-
19 ance.

20 “(G) A history of gestational diabetes
21 mellitus or delivery of a baby weighing greater
22 than 9 pounds.

23 “(H) Polycystic ovarian disease.

24 “(I) A history of vascular disease.”.

1 (b) COMPREHENSIVE PACKAGE OF BENEFITS FOR
 2 INDIVIDUALS WITH DIABETES.—

3 (1) IN GENERAL.—Section 1902(a) of the So-
 4 cial Security Act (42 U.S.C. 1396a(a)) is amend-
 5 ed—

6 (A) in paragraph (69), by striking “and”
 7 at the end;

8 (B) in paragraph (70)(B)(iv), by striking
 9 the period at the end and inserting “; and”;
 10 and

11 (C) by inserting after paragraph
 12 (70)(B)(iv), the following new paragraph:

13 “(71) provide that the medical assistance fur-
 14 nished to any individual who has been determined to
 15 be eligible for such assistance and diagnosed with di-
 16 abetes shall include, in addition to any other items
 17 and services required to be furnished to the indi-
 18 vidual under this title, at least the following items
 19 and services as required by the individual’s treating
 20 physician or healthcare provider:

21 “(A) The care and services listed in para-
 22 graphs (1), (2), (3), (4)(B), (4)(D), (5), (10),
 23 and (12) (without regard, in the case of pre-
 24 scribed drugs, to any limit imposed under the
 25 State plan on the number of prescriptions filled

per month, but subject to any such limit imposed by the treating physician or healthcare provider) of section 1905(a).

“(B) Durable medical equipment (as defined in section 1861(n)) and other durable medical equipment covered under title XVIII through national coverage determinations, including insulin pumps and associated supplies.

“(C) Services related to pregnancy (including prenatal, delivery, and post partum services).

“(D) A yearly dilated eye exam by an eye care professional with appropriate follow-up care as medically needed.

“(E) Podiatric services.

“(F) Diabetes education, including diabetes outpatient self-management training services (as defined in section 1861(qq)).

“(G) Medical nutrition therapy services (as defined in section 1861(vv)(1)).”.

(2) PROHIBITION ON COST SHARING.—

(A) IN GENERAL.—Section 1916 of the Social Security Act (42 U.S.C. 1396o) is amended by adding at the end the following new subsection:

1 “(j) In the case of an individual who has been deter-
 2 mined to be eligible for medical assistance and diagnosed
 3 with diabetes—

4 “(1) no deduction, cost sharing, or similar
 5 charge shall be imposed for any item or service listed
 6 in subparagraph (A) through (G) of section
 7 1902(a)(71) that is provided to the individual as a
 8 result of the individual’s diagnosis with diabetes or
 9 complications related to such diagnosis; and

10 “(2) the State option to impose cost sharing
 11 under section 1916A shall not apply with respect to
 12 the provision of medical assistance to such individual
 13 for any item or service listed in subparagraph (A)
 14 through (G) of section 1902(a)(71) that is provided
 15 to the individual as a result of the individual’s diag-
 16 nosis with diabetes or complications related to such
 17 diagnosis.”.

18 (B) CONFORMING AMENDMENT.—The sec-
 19 ond sentence of section 1916A(a)(1) of the So-
 20 cial Security Act (42 U.S.C. 1396o–1(a)(1)) is
 21 amended by striking “section 1916(g)” and in-
 22 serting “subsection (g) or (j) of section 1916”.

23 (c) EFFECTIVE DATE.—

1 (1) IN GENERAL.—Except as provided in para-
2 graph (2), the amendments made by this section
3 take effect on October 1, 2007.

4 (2) EXTENSION OF EFFECTIVE DATE FOR
5 STATE LAW AMENDMENT.—In the case of a State
6 plan under title XIX of the Social Security Act (42
7 U.S.C. 1396 et seq.) which the Secretary of Health
8 and Human Services determines requires State legis-
9 lation in order for the plan to meet the additional
10 requirements imposed by the amendments made by
11 this section, the State plan shall not be regarded as
12 failing to comply with the requirements of such title
13 solely on the basis of its failure to meet these addi-
14 tional requirements before the first day of the first
15 calendar quarter beginning after the close of the
16 first regular session of the State legislature that be-
17 gins after the date of enactment of this Act. For
18 purposes of the previous sentence, in the case of a
19 State that has a 2-year legislative session, each year
20 of the session is considered to be a separate regular
21 session of the State legislature.

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