

114TH CONGRESS
2D SESSION

H. R. 4989

To amend title XIX of the Social Security Act to require States to provide cranial prostheses under the Medicaid program when a physician finds such treatment necessary for individuals affected by diseases and medical conditions that cause hair loss.

IN THE HOUSE OF REPRESENTATIVES

APRIL 18, 2016

Ms. ROS-LEHTINEN (for herself, Ms. ESHOO, Mr. LOBIONDO, Mr. HUFFMAN, Ms. SPEIER, and Mr. ELLISON) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend title XIX of the Social Security Act to require States to provide cranial prostheses under the Medicaid program when a physician finds such treatment necessary for individuals affected by diseases and medical conditions that cause hair loss.

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 “Cranial Prosthetic
5 Medicaid Coverage Enhancement Act”.

6 **SEC. 2. FINDINGS.**

7 The Congress finds as follows:

1 (1) Individuals chronically affected by hair loss
2 due to diseases, such as the autoimmune skin condi-
3 tion alopecia areata, as well as individuals affected
4 by acute hair loss due to chemotherapy or medical
5 intervention face significant biological, social, and
6 psychological health challenges.

7 (2) Dermatologists, oncologists, and other
8 qualified medical professionals consider cranial pros-
9 thetics to be a medically necessary option when
10 treating individuals suffering from chronic, acute, or
11 cyclical hair loss caused by a medical condition.

12 (3) The cost of a cranial prosthetic can rep-
13 resent a significant financial burden for Medicaid
14 program beneficiaries and coverage benefits across
15 States are currently inconsistent and, in many cases,
16 nonexistent.

17 (4) While children participating in the Medicaid
18 program are often significantly impacted by the ad-
19 ditional health effects caused by medical condition-
20 related hair loss, inequitable and inconsistent cov-
21 erage benefits for cranial prosthetics means they can
22 face serious difficulty accessing treatment, even with
23 the assistance of a healthcare professional.

1 **SEC. 3. IMPROVEMENT OF CRANIAL PROSTHESES COV-**
2 **ERAGE UNDER MEDICAID.**

3 (a) IN GENERAL.—Section 1902(a)(10) of the Social
4 Security Act (42 U.S.C. 1396a(a)(10)) is amended—

5 (1) in subparagraph (F), at the end by striking
6 “and”;

7 (2) in subparagraph (G), at the end by adding
8 “and”; and

9 (3) by inserting after subparagraph (G) the fol-
10 lowing new subparagraph:

11 “(H) that if medical assistance is included
12 for inpatient hospital services for an individual,
13 then the plan must include making medical as-
14 sistance available to the individual for biennial
15 coverage of one cranial prosthesis with a benefit
16 up to \$400 if the dermatologist, oncologist, or
17 attending physician of the individual certifies in
18 writing the medical necessity of that proposed
19 course of rehabilitative treatment;”.

20 (b) EFFECTIVE DATE.—The amendments made by
21 subsection (a) shall apply with respect to items and serv-
22 ices furnished on or after January 1, 2017, without regard
23 to whether or not final regulations to carry out such
24 amendments have been promulgated by such date.

○