

2 **2SSB 5178 - H AMD 529 ADOPTED 4-11-97**

3 By Representative Dyer

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5 Strike everything after the enacting clause and insert the
6 following:

7 "NEW SECTION. **Sec. 1.** A new section is added to chapter 41.05 RCW
8 to read as follows:

9 The legislature finds that diabetes imposes a significant health
10 risk and tremendous financial burden on the citizens and government of
11 the state of Washington, and that access to the medically accepted
12 standards of care for diabetes, its treatment and supplies, and self-
13 management training and education is crucial to prevent or delay the
14 short and long-term complications of diabetes and its attendant costs.

15 (1) The definitions in this subsection apply throughout this
16 section unless the context clearly requires otherwise.

17 (a) "Person with diabetes" means a person diagnosed by a health
18 care provider as having insulin using diabetes, noninsulin using
19 diabetes, or elevated blood glucose levels induced by pregnancy; and

20 (b) "Health care provider" means a health care provider as defined
21 in RCW 48.43.005.

22 (2) All state-purchased health care purchased or renewed after the
23 effective date of this act, except the basic health plan described in
24 chapter 70.47 RCW, shall provide benefits for at least the following
25 services and supplies for persons with diabetes:

26 (a) For state-purchased health care that includes coverage for
27 pharmacy services, appropriate and medically necessary equipment and
28 supplies, as prescribed by a health care provider, that includes but is
29 not limited to insulin, syringes, injection aids, blood glucose
30 monitors, test strips for blood glucose monitors, visual reading and
31 urine test strips, insulin pumps and accessories to the pumps, insulin
32 infusion devices, prescriptive oral agents for controlling blood sugar
33 levels, foot care appliances for prevention of complications associated
34 with diabetes, and glucagon emergency kits; and

35 (b) For all state-purchased health care, outpatient self-management
36 training and education, including medical nutrition therapy, as ordered

1 by the health care provider. Diabetes outpatient self-management
2 training and education may be provided only by health care providers
3 with expertise in diabetes. Nothing in this section prevents any state
4 agency purchasing health care according to this section from
5 restricting patients to seeing only health care providers who have
6 signed participating provider agreements with that state agency or an
7 insuring entity under contract with that state agency.

8 (3) Coverage required under this section may be subject to
9 customary cost-sharing provisions established for all other similar
10 services or supplies within a policy.

11 (4) Health care coverage may not be reduced or eliminated due to
12 this section.

13 (5) Services required under this section shall be covered when
14 deemed medically necessary by the medical director, or his or her
15 designee, subject to any referral and formulary requirements.

16 NEW SECTION. **Sec. 2.** A new section is added to chapter 48.20 RCW
17 to read as follows:

18 The legislature finds that diabetes imposes a significant health
19 risk and tremendous financial burden on the citizens and government of
20 the state of Washington, and that access to the medically accepted
21 standards of care for diabetes, its treatment and supplies, and self-
22 management training and education is crucial to prevent or delay the
23 short and long-term complications of diabetes and its attendant costs.

24 (1) The definitions in this subsection apply throughout this
25 section unless the context clearly requires otherwise.

26 (a) "Person with diabetes" means a person diagnosed by a health
27 care provider as having insulin using diabetes, noninsulin using
28 diabetes, or elevated blood glucose levels induced by pregnancy; and

29 (b) "Health care provider" means a health care provider as defined
30 in RCW 48.43.005.

31 (2) All disability insurance contracts providing health care
32 services, delivered or issued for delivery in this state and issued or
33 renewed after the effective date of this act, shall provide benefits
34 for at least the following services and supplies for persons with
35 diabetes:

36 (a) For disability insurance contracts that include pharmacy
37 services, appropriate and medically necessary equipment and supplies,
38 as prescribed by a health care provider, that includes but is not

1 limited to insulin, syringes, injection aids, blood glucose monitors,
2 test strips for blood glucose monitors, visual reading and urine test
3 strips, insulin pumps and accessories to the pumps, insulin infusion
4 devices, prescriptive oral agents for controlling blood sugar levels,
5 foot care appliances for prevention of complications associated with
6 diabetes, and glucagon emergency kits; and

7 (b) For all disability insurance contracts providing health care
8 services, outpatient self-management training and education, including
9 medical nutrition therapy, as ordered by the health care provider.
10 Diabetes outpatient self-management training and education may be
11 provided only by health care providers with expertise in diabetes.
12 Nothing in this section prevents the insurer from restricting patients
13 to seeing only health care providers who have signed participating
14 provider agreements with the insurer or an insuring entity under
15 contract with the insurer.

16 (3) Coverage required under this section may be subject to
17 customary cost-sharing provisions established for all other similar
18 services or supplies within a policy.

19 (4) Health care coverage may not be reduced or eliminated due to
20 this section.

21 (5) Services required under this section shall be covered when
22 deemed medically necessary by the medical director, or his or her
23 designee, subject to any referral and formulary requirements.

24 (6) The insurer need not include the coverage required in this
25 section in a group contract offered to an employer or other group that
26 offers to its eligible enrollees a self-insured health plan not subject
27 to mandated benefits status under this title that does not offer
28 coverage similar to that mandated under this section.

29 (7) This section does not apply to the health benefit plan that
30 provides benefits identical to the schedule of services covered by the
31 basic health plan, as required by RCW 48.20.028.

32 NEW SECTION. **Sec. 3.** A new section is added to chapter 48.21 RCW
33 to read as follows:

34 The legislature finds that diabetes imposes a significant health
35 risk and tremendous financial burden on the citizens and government of
36 the state of Washington, and that access to the medically accepted
37 standards of care for diabetes, its treatment and supplies, and self-

1 management training and education is crucial to prevent or delay the
2 short and long-term complications of diabetes and its attendant costs.

3 (1) The definitions in this subsection apply throughout this
4 section unless the context clearly requires otherwise.

5 (a) "Person with diabetes" means a person diagnosed by a health
6 care provider as having insulin using diabetes, noninsulin using
7 diabetes, or elevated blood glucose levels induced by pregnancy; and

8 (b) "Health care provider" means a health care provider as defined
9 in RCW 48.43.005.

10 (2) All group disability insurance contracts and blanket disability
11 insurance contracts providing health care services, issued or renewed
12 after the effective date of this act, shall provide benefits for at
13 least the following services and supplies for persons with diabetes:

14 (a) For group disability insurance contracts and blanket disability
15 insurance contracts that include coverage for pharmacy services,
16 appropriate and medically necessary equipment and supplies, as
17 prescribed by a health care provider, that includes but is not limited
18 to insulin, syringes, injection aids, blood glucose monitors, test
19 strips for blood glucose monitors, visual reading and urine test
20 strips, insulin pumps and accessories to the pumps, insulin infusion
21 devices, prescriptive oral agents for controlling blood sugar levels,
22 foot care appliances for prevention of complications associated with
23 diabetes, and glucagon emergency kits; and

24 (b) For all group disability insurance contracts and blanket
25 disability insurance contracts providing health care services,
26 outpatient self-management training and education, including medical
27 nutrition therapy, as ordered by the health care provider. Diabetes
28 outpatient self-management training and education may be provided only
29 by health care providers with expertise in diabetes. Nothing in this
30 section prevents the insurer from restricting patients to seeing only
31 health care providers who have signed participating provider agreements
32 with the insurer or an insuring entity under contract with the insurer.

33 (3) Coverage required under this section may be subject to
34 customary cost-sharing provisions established for all other similar
35 services or supplies within a policy.

36 (4) Health care coverage may not be reduced or eliminated due to
37 this section.

1 (5) Services required under this section shall be covered when
2 deemed medically necessary by the medical director, or his or her
3 designee, subject to any referral and formulary requirements.

4 (6) The insurer need not include the coverage required in this
5 section in a group contract offered to an employer or other group that
6 offers to its eligible enrollees a self-insured health plan not subject
7 to mandated benefits status under this title that does not offer
8 coverage similar to that mandated under this section.

9 (7) This section does not apply to the health benefit plan that
10 provides benefits identical to the schedule of services covered by the
11 basic health plan, as required by RCW 48.21.045.

12 NEW SECTION. **Sec. 4.** A new section is added to chapter 48.44 RCW
13 to read as follows:

14 The legislature finds that diabetes imposes a significant health
15 risk and tremendous financial burden on the citizens and government of
16 the state of Washington, and that access to the medically accepted
17 standards of care for diabetes, its treatment and supplies, and self-
18 management training and education is crucial to prevent or delay the
19 short and long-term complications of diabetes and its attendant costs.

20 (1) The definitions in this subsection apply throughout this
21 section unless the context clearly requires otherwise.

22 (a) "Person with diabetes" means a person diagnosed by a health
23 care provider as having insulin using diabetes, noninsulin using
24 diabetes, or elevated blood glucose levels induced by pregnancy; and

25 (b) "Health care provider" means a health care provider as defined
26 in RCW 48.43.005.

27 (2) All health benefit plans offered by health care service
28 contractors, issued or renewed after the effective date of this act,
29 shall provide benefits for at least the following services and supplies
30 for persons with diabetes:

31 (a) For health benefit plans that include coverage for pharmacy
32 services, appropriate and medically necessary equipment and supplies,
33 as prescribed by a health care provider, that includes but is not
34 limited to insulin, syringes, injection aids, blood glucose monitors,
35 test strips for blood glucose monitors, visual reading and urine test
36 strips, insulin pumps and accessories to the pumps, insulin infusion
37 devices, prescriptive oral agents for controlling blood sugar levels,

1 foot care appliances for prevention of complications associated with
2 diabetes, and glucagon emergency kits; and

3 (b) For all health benefit plans, outpatient self-management
4 training and education, including medical nutrition therapy, as ordered
5 by the health care provider. Diabetes outpatient self-management
6 training and education may be provided only by health care providers
7 with expertise in diabetes. Nothing in this section prevents the
8 health care services contractor from restricting patients to seeing
9 only health care providers who have signed participating provider
10 agreements with the health care services contractor or an insuring
11 entity under contract with the health care services contractor.

12 (3) Coverage required under this section may be subject to
13 customary cost-sharing provisions established for all other similar
14 services or supplies within a policy.

15 (4) Health care coverage may not be reduced or eliminated due to
16 this section.

17 (5) Services required under this section shall be covered when
18 deemed medically necessary by the medical director, or his or her
19 designee, subject to any referral and formulary requirements.

20 (6) The health care service contractor need not include the
21 coverage required in this section in a group contract offered to an
22 employer or other group that offers to its eligible enrollees a self-
23 insured health plan not subject to mandated benefits status under this
24 title that does not offer coverage similar to that mandated under this
25 section.

26 (7) This section does not apply to the health benefit plans that
27 provide benefits identical to the schedule of services covered by the
28 basic health plan, as required by RCW 48.44.022 and 48.44.023.

29 NEW SECTION. **Sec. 5.** A new section is added to chapter 48.46 RCW
30 to read as follows:

31 The legislature finds that diabetes imposes a significant health
32 risk and tremendous financial burden on the citizens and government of
33 the state of Washington, and that access to the medically accepted
34 standards of care for diabetes, its treatment and supplies, and self-
35 management training and education is crucial to prevent or delay the
36 short and long-term complications of diabetes and its attendant costs.

37 (1) The definitions in this subsection apply throughout this
38 section unless the context clearly requires otherwise.

1 (a) "Person with diabetes" means a person diagnosed by a health
2 care provider as having insulin using diabetes, noninsulin using
3 diabetes, or elevated blood glucose levels induced by pregnancy; and

4 (b) "Health care provider" means a health care provider as defined
5 in RCW 48.43.005.

6 (2) All health benefit plans offered by health maintenance
7 organizations, issued or renewed after the effective date of this act,
8 shall provide benefits for at least the following services and supplies
9 for persons with diabetes:

10 (a) For health benefit plans that include coverage for pharmacy
11 services, appropriate and medically necessary equipment and supplies,
12 as prescribed by a health care provider, that includes but is not
13 limited to insulin, syringes, injection aids, blood glucose monitors,
14 test strips for blood glucose monitors, visual reading and urine test
15 strips, insulin pumps and accessories to the pumps, insulin infusion
16 devices, prescriptive oral agents for controlling blood sugar levels,
17 foot care appliances for prevention of complications associated with
18 diabetes, and glucagon emergency kits; and

19 (b) For all health benefit plans, outpatient self-management
20 training and education, including medical nutrition therapy, as ordered
21 by the health care provider. Diabetes outpatient self-management
22 training and education may be provided only by health care providers
23 with expertise in diabetes. Nothing in this section prevents the
24 health maintenance organization from restricting patients to seeing
25 only health care providers who have signed participating provider
26 agreements with the health maintenance organization or an insuring
27 entity under contract with the health maintenance organization.

28 (3) Coverage required under this section may be subject to
29 customary cost-sharing provisions established for all other similar
30 services or supplies within a policy.

31 (4) Health care coverage may not be reduced or eliminated due to
32 this section.

33 (5) Services required under this section shall be covered when
34 deemed medically necessary by the medical director, or his or her
35 designee, subject to any referral and formulary requirements.

36 (6) The health maintenance organization need not include the
37 coverage required in this section in a group contract offered to an
38 employer or other group that offers to its eligible enrollees a self-
39 insured health plan not subject to mandated benefits status under this

1 title that does not offer coverage similar to that mandated under this
2 section.

3 (7) This section does not apply to the health benefit plans that
4 provide benefits identical to the schedule of services covered by the
5 basic health plan, as required by RCW 48.46.064 and 48.46.066.

6 NEW SECTION. **Sec. 6.** This act takes effect January 1, 1998.

7 NEW SECTION. **Sec. 7.** A new section is added to chapter 43.131 RCW
8 to read as follows:

9 The diabetes cost reduction act shall be terminated on June 30,
10 2001.

11 NEW SECTION. **Sec. 8.** A new section is added to chapter 43.131 RCW
12 to read as follows:

13 The following acts or parts of acts, as now existing or hereafter
14 amended, are each repealed, effective June 30, 2002:

- 15 (1) RCW 41.05.--- and 1997 c . . . s 1 (section 1 of this act);
- 16 (2) RCW 48.20.--- and 1997 c . . . s 2 (section 2 of this act);
- 17 (3) RCW 48.21.--- and 1997 c . . . s 3 (section 3 of this act);
- 18 (4) RCW 48.44.--- and 1997 c . . . s 4 (section 4 of this act); and
- 19 (5) RCW 48.46.--- and 1997 c . . . s 5 (section 5 of this act)."

20 Correct the title.

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