

118TH CONGRESS
2D SESSION

H. R. 7856

To amend title XVIII of the Social Security Act to provide for coverage of the Medicare Diabetes Prevention program, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

APRIL 2, 2024

Ms. DEGETTE (for herself, Mr. BILIRAKIS, and Mr. CROW) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend title XVIII of the Social Security Act to provide for coverage of the Medicare Diabetes Prevention program, 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 “Promoting Responsible
5 and Effective Virtual Experiences through Novel Tech-
6 nology to Deliver Improved Access and Better Engage-
7 ment with Tested and Evidence-based Strategies Act” or
8 the “PREVENT DIABETES Act”.

1 **SEC. 2. MEDICARE DIABETES PREVENTION PROGRAM.**

2 (a) COVERAGE.—

3 (1) IN GENERAL.—Section 1861 of the Social

4 Security Act (42 U.S.C. 1395x) is amended—

5 (A) in subsection (s)(2), by adding at the

6 end the following new subparagraph:

7 “(KK) diabetes prevention program services (as

8 defined in subsection (nnn));”; and

9 (B) by adding at the end the following new

10 subsection:

11 “(nnn) DIABETES PREVENTION PROGRAM SERV-

12 ICES.—

13 “(1) IN GENERAL.—The term ‘diabetes preven-
14 tion program services’ means structured behavioral
15 health change sessions that—

16 “(A) are furnished to an eligible individual
17 described in paragraph (2) by a diabetes pre-
18 vention program supplier for the purpose of
19 preventing or delaying the onset of type II dia-
20 betes;

21 “(B) follow a CDC-approved curriculum;

22 and

23 “(C) are furnished on or after January 1,
24 2025.

1 “(2) ELIGIBLE INDIVIDUAL DESCRIBED.—An
2 eligible individual described in this paragraph is an
3 individual that—

4 “(A) is entitled to benefits under part A
5 and is enrolled under part B;

6 “(B) has no previous diagnosis of diabetes
7 (other than gestational diabetes);

8 “(C) does not have end-stage renal disease;
9 and

10 “(D) meets additional medical criteria
11 specified by the Secretary.

12 “(3) NO LIFETIME LIMIT ON PARTICIPATION.—
13 There shall be no limitation on the number of times
14 an eligible individual may enroll in the diabetes pre-
15 vention program.”.

16 (2) CONFORMING CHANGE.—Section 1862(a)(1)
17 of the Social Security Act (42 U.S.C. 1395y(a)(1))
18 is amended—

19 (A) in subparagraph (O), by striking
20 “and” at the end;

21 (B) in subparagraph (P), by striking the
22 semicolon at the end and inserting “, and”; and

23 (C) by adding at the end the following new
24 subparagraph:

1 “(Q) in the case of diabetes prevention program
2 services (as defined in section 1861(nn)(1)), which
3 are furnished to an individual who is not an eligible
4 individual (as defined in section 1861(nn)(2));”.

5 (b) DIABETES PREVENTION PROGRAM SUPPLIERS.—
6 Section 1866 of the Social Security Act (42 U.S.C.
7 1395cc) is amended by adding at the end the following
8 new subsection:

9 “(l) DIABETES PREVENTION PROGRAM SUP-
10 PLIERS.—

11 “(1) DIABETES PREVENTION PROGRAM SUP-
12 PLIER.—In this subsection, the term ‘diabetes pre-
13 vention program supplier’ means an entity that—

14 “(A) is recognized under the Centers for
15 Disease Control and Prevention Diabetes Pre-
16 vention Recognition Program and offers a pro-
17 gram through an allowable Diabetes Prevention
18 Recognition Program delivery mode including
19 in-person, online, distance learning, combina-
20 tion, and other synchronous and asynchronous
21 modalities as determined by the Secretary;

22 “(B) is enrolled under the diabetes preven-
23 tion program in accordance with paragraph (2);
24 and

1 “(C) meets the requirements described in
2 paragraph (2)(B).

3 “(2) ENROLLMENT IN DIABETES PREVENTION
4 PROGRAM.—

5 “(A) APPLICATION.—An entity seeking to
6 enroll as a diabetes prevention program supplier
7 under this section shall submit to the Secretary
8 an application for enrollment at such time and
9 in such manner as specified by the Secretary.
10 Such application must meet all elements as
11 specified by the Secretary.

12 “(B) REQUIREMENTS.—

13 “(i) ADMINISTRATIVE REQUIRE-
14 MENTS.—Each diabetes prevention pro-
15 gram supplier shall maintain—

16 “(I) administrative requirements
17 as outlined by the Secretary;

18 “(II) active enrollment as a dia-
19 betes prevention program supplier
20 under subsection (j); and

21 “(III) at least one administrative
22 location.

23 “(ii) DOCUMENTATION; DATA SUBMIS-
24 SION.—

1 “(I) DOCUMENTATION.—Each di-
2 abetes prevention program supplier
3 shall maintain documentation in ac-
4 cordance with standards specified by
5 the Secretary.

6 “(II) DATA SUBMISSION.—Each
7 diabetes prevention program supplier
8 shall maintain information as speci-
9 fied by the Secretary and submit it to
10 the Secretary in the form and manner
11 specified by the Secretary.

12 “(iii) INSPECTION AND REVIEW RE-
13 QUIREMENTS.—Each diabetes prevention
14 program supplier shall allow the Secretary,
15 or any person or organization designated
16 by the Secretary, to conduct inspections of
17 any administrative location of a diabetes
18 prevention program supplier, or of any eli-
19 gible setting in which diabetes prevention
20 program services are furnished, as well as
21 review all documentation and records
22 maintained by such supplier for purposes
23 of the diabetes prevention program.

24 “(C) DIABETES PREVENTION PROGRAM
25 SUPPLIER TERMINATION.—The Secretary may

1 terminate the enrollment of a diabetes preven-
2 tion program supplier for purposes of participa-
3 tion in the diabetes prevention program if such
4 supplier—

5 “(i) fails to meet the requirements de-
6 scribed in subparagraph (B);

7 “(ii) improperly denies services to an
8 eligible individual (as defined in section
9 1861(nnn)(2)), including a denial on the
10 basis of an eligible individual’s weight,
11 health status, or achievement of perform-
12 ance goals; or

13 “(iii) fails to comply with additional
14 standards established by the Secretary.

15 “(3) ADMINISTRATIVE LOCATION DEFINED.—In
16 this subsection, the term ‘administrative location’
17 means a physical location in which a diabetes pre-
18 vention program supplier is the primary operator of
19 such location or the location from which the diabetes
20 prevention program supplier’s business is run in the
21 case of an online or combination program, and
22 where in-person diabetes prevention program serv-
23 ices may or may not be furnished.”.

24 (c) PAYMENT FOR DIABETES PREVENTION PROGRAM
25 SERVICES.—Section 1834 of the Social Security Act (42

1 U.S.C. 1395m) is amended by adding at the end the fol-
2 lowing subsection:

3 “(aa) PAYMENT FOR DIABETES PREVENTION PRO-
4 GRAM SERVICES.—

5 “(1) IN GENERAL.—The Secretary shall estab-
6 lish an appropriate payment structure under which
7 the Secretary shall make payments to a diabetes
8 prevention program supplier for diabetes prevention
9 program services furnished to an eligible individual
10 (as defined in section 1861(nnn)(2)).

11 “(2) ANNUAL UPDATE.—The Secretary shall
12 update the payment structure under this subsection
13 annually by the percentage increase in the Consumer
14 Price Index for all urban consumers (all items;
15 United States city average) for the 12-month period
16 ending with June of the preceding year.

17 “(3) TERMINATION OF PARTICIPATION.—

18 “(A) IN GENERAL.—A diabetes prevention
19 program supplier may terminate the participa-
20 tion of an individual participating in the diabe-
21 tes prevention program if the individual is no
22 longer an eligible individual (as defined in sec-
23 tion 1862(nnn)(2)).

24 “(B) DOCUMENTATION SUPPORTING TER-
25 MINATION.—In the case of a diabetes preven-

1 tion program supplier that terminates the par-
2 ticipation of an individual participating in the
3 diabetes prevention program, such supplier shall
4 maintain records supporting such termination,
5 including the date of the termination, the rea-
6 son for the termination, the details of any inci-
7 dents leading to such termination, any remedi-
8 ation efforts taken by such supplier, and any
9 final actions taken by such supplier.

10 “(4) CONTINUATION OF MEDICARE DIABETES
11 PREVENTION PROGRAM EXPANDED MODEL STAND-
12 ARDS.—Except as specified otherwise in this Act,
13 the Secretary shall extend the standards of the
14 Medicare Diabetes Prevention Program Expanded
15 Model (in effect as of the date of enactment of the
16 PREVENT DIABETES Act) to govern the diabetes
17 prevention program.

18 “(5) DIABETES PREVENTION PROGRAM.—In
19 this subsection, the term ‘diabetes prevention pro-
20 gram’ means the payment structure described in this
21 subsection.”.

22 **SEC. 3. SUNSET OF MDPP EXPANDED MODEL.**

23 No payment shall be made for services furnished
24 under the Medicare Diabetes Prevention Program Ex-
25 panded Model conducted under section 1115A of the So-

1 cial Security Act (42 U.S.C. 1315a) after January 1,
2 2025.

3 **SEC. 4. UPDATE TO REGULATIONS.**

4 Not later than November 30, 2024, the Secretary of
5 Health and Human Services shall update the regulations
6 in sections 410.79, 414.84, 424.200, and 424.205 of title
7 42, Code of Federal Regulations, and any other relevant
8 regulations, in accordance with sections 2 and 3 of this
9 Act.

10 **SEC. 5. REPORT.**

11 Not later than January 1, 2028, the Secretary of
12 Health and Human Services shall submit to Congress a
13 report on the diabetes prevention program. Such report
14 shall include a description of the impact of such program
15 on—

16 (1) participation of eligible individuals and dia-
17 betes prevention program suppliers in the diabetes
18 prevention program as compared to the Medicare
19 Diabetes Prevention Program Expanded Model;
20 (2) weight loss among eligible individuals;
21 (3) health outcomes of eligible individuals; and
22 (4) diagnoses and costs relating to type 2 dia-
23 betes for eligible individuals who have received dia-

- 1 betes prevention plan services versus those who have
2 not.

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