

Senate File 8

Partial Bill History

- Bill Introduced: [S.J. 52](#)
- Committee Report Issued: [S.J. 114](#) [H.J. 952](#)
- Passed House: [H.J. 1287](#)
- Passed Senate: [S.J. 450](#) [S.J. 1216](#)
- Signed by Governor: [S.J. 1407](#)
- [Complete Bill History](#)

Bill Text

PAG LIN

1 1 SENATE FILE 8
1 2
1 3 AN ACT
1 4 RELATING TO COVERAGE UNDER A POLICY OR CONTRACT PROVIDING
1 5 FOR THIRD-PARTY PAYMENT OR PREPAYMENT OF HEALTH OR MEDICAL
1 6 EXPENSES BY PROVIDING COVERAGE FOR COSTS ASSOCIATED WITH
1 7 EQUIPMENT, SUPPLIES, AND EDUCATION FOR THE TREATMENT OF
1 8 DIABETES.
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1 10 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
1 11
1 12 Section 1. NEW SECTION. 514C.14 DIABETES COVERAGE.
1 13 1. Notwithstanding the uniformity of treatment
1 14 requirements of section 514C.6, a policy or contract providing
1 15 for third-party payment or prepayment of health or medical
1 16 expenses shall provide coverage benefits for the cost
1 17 associated with equipment, supplies, and self-management
1 18 training and education for the treatment of all types of
1 19 diabetes mellitus when prescribed by a physician licensed
1 20 under chapter 148, 150, or 150A. Coverage benefits shall
1 21 include coverage for the cost associated with all of the
1 22 following:
1 23 a. Blood glucose meter and glucose strips for home
1 24 monitoring.
1 25 b. Payment for diabetes self-management training and
1 26 education only under all of the following conditions:
1 27 (1) The physician managing the individual's diabetic
1 28 condition certifies that such services are needed under a
1 29 comprehensive plan of care related to the individual's
1 30 diabetic condition to ensure therapy compliance or to provide
1 31 the individual with necessary skills and knowledge to
1 32 participate in the management of the individual's condition.
1 33 (2) The diabetic self-management training and education

1 34 program is certified by the Iowa department of public health.
1 35 The department shall consult with the American diabetes
2 1 association, Iowa affiliate, in developing the standards for
2 2 certification of diabetes education programs as follows:
2 3 (a) Initial training shall cover up to ten hours of
2 4 initial outpatient diabetes self-management training within a
2 5 continuous twelve-month period for each individual that meets
2 6 any of the following conditions:
2 7 (i) A new onset of diabetes.
2 8 (ii) Poor glycemic control as evidenced by a glycosylated
2 9 hemoglobin of nine and five-tenths or more in the ninety days
2 10 before attending the training.
2 11 (iii) A change in treatment regimen from no diabetes
2 12 medications to any diabetes medication, or from oral diabetes
2 13 medication to insulin.
2 14 (iv) High risk for complications based on poor glycemic
2 15 control; documented acute episodes of severe hypoglycemia or
2 16 acute severe hyperglycemia occurring in the past year during
2 17 which the individual needed third-party assistance for either
2 18 emergency room visits or hospitalization.
2 19 (v) High risk based on documented complications of a lack
2 20 of feeling in the foot or other foot complications such as
2 21 foot ulcer or amputation, pre-proliferative or proliferative
2 22 retinopathy or prior laser treatment of the eye, or kidney
2 23 complications related to diabetes, such as macroalbuminuria or
2 24 elevated creatinine.
2 25 (b) An individual who receives the initial training shall
2 26 be eligible for a single follow-up training session of up to
2 27 one hour each year.
2 28 2. a. This section applies to the following classes of
2 29 third-party payment provider contracts or policies delivered,
2 30 issued for delivery, continued, or renewed in this state on or
2 31 after July 1, 1999:
2 32 (1) Individual or group accident and sickness insurance
2 33 providing coverage on an expense-incurred basis.
2 34 (2) An individual or group hospital or medical service
2 35 contract issued pursuant to chapter 509, 514, or 514A.
3 1 (3) An individual or group health maintenance organization
3 2 contract regulated under chapter 514B.
3 3 (4) Any other entity engaged in the business of insurance,
3 4 risk transfer, or risk retention, which is subject to the
3 5 jurisdiction of the commissioner.
3 6 (5) A plan established pursuant to chapter 509A for public
3 7 employees.
3 8 (6) An organized delivery system licensed by the director
3 9 of public health.

3 10 b. This chapter shall not apply to accident only,
3 11 specified disease, short-term hospital or medical, hospital
3 12 confinement indemnity, credit, dental, vision, Medicare
3 13 supplement, long-term care, basic hospital and medical-
3 14 surgical expense coverage as defined by the commissioner,
3 15 disability income insurance coverage, coverage issued as a
3 16 supplement to liability insurance, workers' compensation or
3 17 similar insurance, or automobile medical payment insurance.
3 18 Sec. 2. Section [509.3](#), subsection 6, Code 1999, is amended
3 19 by striking the subsection.
3 20 Sec. 3. Section [514.7](#), unnumbered paragraph 3, Code 1999,
3 21 is amended by striking the unnumbered paragraph.
3 22 Sec. 4. Section [514B.1](#), subsection 5, paragraph c, Code
3 23 1999, is amended by striking the paragraph.

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MARY E. KRAMER
President of the Senate

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RON J. CORBETT
Speaker of the House

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3 35 I hereby certify that this bill originated in the Senate and
4 1 is known as Senate File 8, Seventy-eighth General Assembly.

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MICHAEL E. MARSHALL
Secretary of the Senate

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4 7 Approved _____, 1999

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4 11 THOMAS J. VILSACK

4 12 Governor