To amend the Internal Revenue Code of 1986 to permit high deductible health plans to provide chronic disease prevention services to plan enrollees prior to satisfying their plan deductible.

IN THE SENATE OF THE UNITED STATES

Mr. Thune (for himself, Mr. Carper, Mr. Cramer, Ms. Smith, Ms. McSally, and Ms. Sinema) introduced the following bill; which was read twice and referred to the Committee on

A BILL

To amend the Internal Revenue Code of 1986 to permit high deductible health plans to provide chronic disease prevention services to plan enrollees prior to satisfying their plan deductible.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Chronic Disease Management Act of 2020”.

SEC. 2. CHRONIC DISEASE PREVENTION.

(a) In General.—Section 223(c)(2) of the Internal Revenue Code of 1986 is amended by redesignating sub-
paragraph (D) as subparagraph (E) and by inserting after subparagraph (C) the following new subparagraph:

“(D) Preventive care services and items for chronic conditions.—For purposes of subparagraph (C), preventive care shall include any service or item used to treat an individual with a chronic condition if—

“(i) such service or item is low-cost,

“(ii) in regards to such service or item, there is medical evidence supporting high cost efficiency of preventing exacerbation of the chronic condition or the development of a secondary condition, and

“(iii) there is a strong likelihood, documented by clinical evidence, that with respect to the class of individuals utilizing such service or item, the specific service or use of the item will prevent the exacerbation of the chronic condition or the development of a secondary condition that requires significantly higher cost treatments.”.

(b) Effective Date.—The amendments made by this section shall apply to coverage for months beginning after the date of the enactment of this Act.