

106TH CONGRESS  
1ST SESSION

# S. 110

To amend title XIX of the Social Security Act to provide medical assistance for breast and cervical cancer-related treatment services to certain women screened and found to have breast or cervical cancer under a federally funded screening program.

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## IN THE SENATE OF THE UNITED STATES

JANUARY 19, 1999

Mr. SMITH of Oregon introduced the following bill; which was read twice and referred to the Committee on Finance

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## A BILL

To amend title XIX of the Social Security Act to provide medical assistance for breast and cervical cancer-related treatment services to certain women screened and found to have breast or cervical cancer under a federally funded screening program.

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 “Breast and Cervical  
5 Cancer Treatment Act of 1999”.

1 **SEC. 2. OPTIONAL MEDICAID COVERAGE OF CERTAIN**  
 2 **BREAST OR CERVICAL CANCER PATIENTS.**

3 (a) COVERAGE AS OPTIONAL CATEGORICALLY  
 4 NEEDY GROUP.—Section 1902(a)(10)(A)(ii) of the Social  
 5 Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)) is  
 6 amended—

7 (1) in subclause (XIII), by striking “or” at the  
 8 end;

9 (2) in subclause (XIV), by adding “or” at the  
 10 end; and

11 (3) by adding at the end the following:

12 “(XV) who are described in sub-  
 13 section (aa)(1) (relating to certain  
 14 breast or cervical cancer patients);”.

15 (b) GROUP AND BENEFIT DESCRIBED.—Section  
 16 1902 of the Social Security Act (42 U.S.C. 1396a) is  
 17 amended by adding at the end the following:

18 “(aa)(1) Individuals described in this paragraph are  
 19 individuals who—

20 “(A) are not described in subsection  
 21 (a)(10)(A)(i);

22 “(B) have not attained age 65;

23 “(C) satisfy income and resource requirements  
 24 to be treated as a low-income woman for purposes  
 25 of being given priority under section 1504 of the  
 26 Public Health Service Act (42 U.S.C. 300n); and



1 spect to an individual described in subsection (a),  
 2 the period that—

3 “(A) begins with the date on which a  
 4 qualified entity determines, on the basis of pre-  
 5 liminary information, that the individual is de-  
 6 scribed in section 1902(aa)(1), and

7 “(B) ends with (and includes) the earlier  
 8 of—

9 “(i) the day on which a determination  
 10 is made with respect to the eligibility of  
 11 such individual for services under the State  
 12 plan, or

13 “(ii) in the case of such an individual  
 14 who does not file an application by the last  
 15 day of the month following the month dur-  
 16 ing which the entity makes the determina-  
 17 tion referred to in subparagraph (A), such  
 18 last day.

19 “(2) QUALIFIED ENTITY.—

20 “(A) IN GENERAL.—Subject to subpara-  
 21 graph (B), the term ‘qualified entity’ means  
 22 any entity that—

23 “(i) is eligible for payments under a  
 24 State plan approved under this title and

1 provides breast or cervical cancer-related  
2 treatment services; and

3 “(ii) is determined by the State agen-  
4 cy to be capable of making determinations  
5 of the type described in paragraph (1)(A).

6 “(B) REGULATIONS.—The Secretary may  
7 issue regulations further limiting those entities  
8 that may become qualified entities in order to  
9 prevent fraud and abuse and for other reasons.

10 “(C) RULE OF CONSTRUCTION.—Nothing  
11 in this paragraph shall be construed as prevent-  
12 ing a State from limiting the classes of entities  
13 that may become qualified entities, consistent  
14 with any limitations imposed under subpara-  
15 graph (B).

16 “(c) ADMINISTRATION.—

17 “(1) IN GENERAL.—The State agency shall pro-  
18 vide qualified entities with—

19 “(A) such forms as are necessary for an  
20 application to be made by an individual de-  
21 scribed in subsection (a) for medical assistance  
22 under the State plan, and

23 “(B) information on how to assist such in-  
24 dividuals in completing and filing such forms.

1           “(2) NOTIFICATION REQUIREMENTS.—A quali-  
2           fied entity that determines under subsection  
3           (b)(1)(A) that an individual described in subsection  
4           (a) is presumptively eligible for medical assistance  
5           for breast or cervical cancer-related treatment serv-  
6           ices under a State plan shall—

7                   “(A) notify the State agency of the deter-  
8                   mination within 5 working days after the date  
9                   on which determination is made, and

10                   “(B) inform such individual at the time  
11                   the determination is made that an application  
12                   for medical assistance under the State plan is  
13                   required to be made by not later than the last  
14                   day of the month following the month during  
15                   which the determination is made.

16           “(3) APPLICATION FOR MEDICAL ASSIST-  
17           ANCE.—In the case of an individual described in  
18           subsection (a) who is determined by a qualified en-  
19           tity to be presumptively eligible for medical assist-  
20           ance for breast or cervical cancer-related treatment  
21           services under a State plan, the individual shall  
22           apply for medical assistance under such plan by not  
23           later than the last day of the month following the  
24           month during which the determination is made.

1       “(d) PAYMENT.—Notwithstanding any other provi-  
2 sion of this title, medical assistance for breast or cervical  
3 cancer-related treatment services that—

4               “(1) are furnished to an individual described in  
5 subsection (a)—

6                       “(A) during a presumptive eligibility pe-  
7 riod,

8                       “(B) by a entity that is eligible for pay-  
9 ments under the State plan; and

10               “(2) are included in the care and services cov-  
11 ered by the State plan;

12 shall be treated as medical assistance provided by such  
13 plan for purposes of section 1903(a)(5)(B).”.

14               (2) PRESUMPTIVE ELIGIBILITY CONFORMING  
15 AMENDMENTS.—

16                       (A) Section 1902(a)(47) of the Social Se-  
17 curity Act (42 U.S.C. 1396a(a)(47)) is amend-  
18 ed by inserting before the semicolon at the end  
19 the following: “and provide for making medical  
20 assistance for breast or cervical cancer-related  
21 treatment services available to individuals de-  
22 scribed in subsection (a) of section 1920B dur-  
23 ing a presumptive eligibility period in accord-  
24 ance with such section”.

1 (B) Section 1903(u)(1)(D)(v) of such Act  
2 (42 U.S.C. 1396b(u)(1)(D)(v)) is amended—

3 (i) by striking “or for” and inserting  
4 “, for”; and

5 (ii) by inserting before the period the  
6 following: “, or for medical assistance for  
7 breast or cervical cancer-related treatment  
8 services provided to an individual described  
9 in subsection (a) of section 1920B during  
10 a presumptive eligibility period under such  
11 section”.

12 (d) ENHANCED MATCH.—Section 1903(a)(5) of the  
13 Social Security Act (42 U.S.C. 1396b(a)(5)) is amended—

14 (1) by striking “an” and inserting “(A) an”;  
15 (2) by adding “plus” after the semicolon; and  
16 (3) by adding at the end the following:

17 “(B) an amount equal to 75 percent of the  
18 sums expended during such quarter which are at-  
19 tributable to the offering, arranging, and furnishing  
20 (directly or on a contract basis) of breast or cervical  
21 cancer-related treatment services; plus”.

22 (e) LIMITATION ON BENEFITS.—Section 1902(a)(10)  
23 of the Social Security Act (42 U.S.C. 1396a(a)(10)) is  
24 amended in the matter following subparagraph (F)—

1           (1) by striking “and (XIII)” and inserting  
2           “(XIII)”; and

3           (2) by inserting before the semicolon at the end  
4           the following: “, and (XIV) the medical assistance  
5           made available to an individual described in sub-  
6           section (aa)(1) who is eligible for medical assistance  
7           only because of subparagraph (A)(ii)(XV) shall be  
8           limited to medical assistance for breast or cervical  
9           cancer-related treatment services”.

10          (f) CONFORMING AMENDMENTS.—Section 1905(a) of  
11          the Social Security Act (42 U.S.C. 1396d(a)) is amended  
12          in the matter preceding paragraph (1)—

13                 (1) in clause (x), by striking “or” at the end;

14                 (2) in clause (xi), by adding “or” at the end;

15          and

16                 (3) by inserting after clause (xi) the following:

17                         “(xii) individuals described in section  
18                         1902(aa)(1),”.

19          (g) EFFECTIVE DATE.—The amendments made by  
20          this section apply to medical assistance furnished on or  
21          after October 1, 2000, without regard to whether or not  
22          final regulations to carry out such amendments have been  
23          promulgated by such date.

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