

112TH CONGRESS
1ST SESSION

H. R. 912

To amend the Public Health Service Act to establish a national screening program at the Centers for Disease Control and Prevention and to amend title XIX of the Social Security Act to provide States the option to increase screening in the United States population for the prevention, early detection, and timely treatment of colorectal cancer.

IN THE HOUSE OF REPRESENTATIVES

MARCH 3, 2011

Ms. GRANGER introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to establish a national screening program at the Centers for Disease Control and Prevention and to amend title XIX of the Social Security Act to provide States the option to increase screening in the United States population for the prevention, early detection, and timely treatment of colorectal cancer.

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 “Colorectal Cancer Pre-
5 vention, Early Detection, and Treatment Act”.

1 **SEC. 2. PREVENTIVE HEALTH MEASURES WITH RESPECT**
2 **TO COLORECTAL CANCER.**

3 Part B of title III of the Public Health Service Act
4 (42 U.S.C. 243 et seq.) is amended by inserting after sec-
5 tion 317T the following new section:

6 **“SEC. 317U. PREVENTIVE HEALTH MEASURES WITH RE-**
7 **SPECT TO COLORECTAL CANCER.**

8 “(a) GRANT PROGRAM AUTHORIZATION.—

9 “(1) IN GENERAL.—The Secretary, acting
10 through the Director of the Centers for Disease
11 Control and Prevention, may make grants to eligible
12 entities for the purpose of carrying out a program
13 described in subsection (b). An eligible entity that is
14 a recipient of a grant under this subsection may use
15 such grant to carry out such programs directly or
16 through grants to, or contracts with, public and not-
17 for-profit private entities.

18 “(2) ELIGIBLE ENTITY DEFINED.—For pur-
19 poses of this section, the term ‘eligible entity’ in-
20 cludes the following:

21 “(A) A State, including, in addition to the
22 several States, the District of Columbia, Guam,
23 the Commonwealth of Puerto Rico, the North-
24 ern Mariana Islands, the Virgin Islands, Amer-
25 ican Samoa, and the Trust Territory of the Pa-
26 cific Islands.

1 “(B) An Indian tribe or tribal organiza-
2 tion, as such terms are defined in section 4 of
3 the Indian Self-Determination and Education
4 Assistance Act.

5 “(b) PROGRAMS DESCRIBED.—

6 “(1) IN GENERAL.—Subject to paragraph (2), a
7 program described in this subsection shall use evi-
8 dence-based strategies and population-based public
9 health approaches, including public education and
10 outreach, professional training and development,
11 quality assurance monitoring, surveillance, and eval-
12 uation, to increase quality colorectal cancer screen-
13 ing in the population aged 50 years and older, or for
14 individuals under 50 who are at high risk. A pro-
15 gram described in this subsection is a program for
16 planning or implementing each of the following:

17 “(A) Providing evidence-based, rec-
18 ommended screenings for colorectal cancer to
19 individuals who—

20 “(i) are 50 years of age or older; or

21 “(ii)(I) are under 50 years of age; and

22 “(II) are at high risk for such cancer,

23 as determined in accordance with sub-

24 section (e)(2).

1 “(B) Providing appropriate case manage-
2 ment and referrals for medical treatment of in-
3 dividuals screened pursuant to subparagraph
4 (A).

5 “(C) Ensuring (directly or through coordi-
6 nation or an arrangement with health care pro-
7 viders or programs) the full continuum of fol-
8 low-up and cancer care for individuals so
9 screened, including appropriate follow-up for
10 abnormal tests, diagnostic services, therapeutic
11 services, and treatment of detected cancers and
12 management of unanticipated medical complica-
13 tions.

14 “(D) Carrying out activities to improve the
15 education, training, and skills of health profes-
16 sionals (including allied health professionals) to
17 ensure the use of evidence-based recommended
18 and quality screening and follow up in the pre-
19 vention, detection, and control of colorectal can-
20 cer, which activities are carried out pursuant to
21 the participation of the health professionals in
22 the program.

23 “(E) Establishing mechanisms through
24 which the eligible entity involved can monitor
25 the quality of screening and diagnostic follow-

1 up procedures for colorectal cancer, including
2 the interpretation of such procedures.

3 “(F) Evaluating the activities described in
4 this subsection through appropriate surveillance
5 and program monitoring activities.

6 “(G) Developing and disseminating find-
7 ings derived through such evaluations and the
8 collection of data on outcomes.

9 “(H) Developing and disseminating public
10 information and education programs for the
11 prevention, detection, and control of colorectal
12 cancer and promoting the benefits of receiving
13 screenings to populations recommended for
14 screening.

15 “(2) SUPPLEMENT NOT SUPPLANT.—In the
16 case of an eligible entity that implements a universal
17 colorectal screening program under which the eligi-
18 ble entity makes available funds for activities de-
19 scribed in subparagraph (A), (B), or (C) of para-
20 graph (1), such entity shall be able to receive grant
21 funds under subsection (a) only for purposes of—

22 “(A) carrying out those activities under
23 this subsection that are not so funded; or

1 “(B) supplementing (and not supplanting)
2 funds made available by the entity for such
3 funded program.

4 “(c) PRIORITY FOR LOW-INCOME, UNINSURED AND
5 UNDERINSURED INDIVIDUALS.—A grant may be made
6 under subsection (a) to an eligible entity only if the eligible
7 entity agrees that, in providing screenings under sub-
8 section (b)(1)(A), the eligible entity will give priority to
9 low-income individuals who lack adequate coverage, as de-
10 termined by the Secretary, under health insurance and
11 health plans with respect to screenings for colorectal can-
12 cer.

13 “(d) SPECIAL CONSIDERATION FOR CERTAIN APPLI-
14 CANTS.—In making grants under subsection (a) for a fis-
15 cal year, the Secretary shall give special consideration to
16 the following eligible entities:

17 “(1) In the case of services under such sub-
18 section for women, to such entities that, for such
19 year, are grantees under title XV.

20 “(2) In the case of services under such sub-
21 section for men, to such entities that, for such year,
22 are grantees under section 317D.

23 “(3) To such entities that coordinate with other
24 Federal, State, and local colorectal cancer programs.

1 “(4) To such entities with an existing program
2 to provide cancer screening to individuals.

3 “(e) USE OF CERTAIN STANDARDS UNDER MEDI-
4 CARE PROGRAM.—A grant may be made under subsection
5 (a) to an eligible entity only if the eligible entity provides,
6 as applicable, assurances as follows:

7 “(1) Screenings under subsection (b)(1)(A) will
8 be carried out as preventive health measures in ac-
9 cordance with evidence-based screening guidelines
10 and procedures and in accordance with the standard
11 of care required for purposes of title XVIII of the
12 Social Security Act to carry out colorectal screening
13 tests defined in section 1861(pp)(1) of such Act.

14 “(2) An individual will be considered high risk
15 for purposes of subsection (b)(1)(A)(ii) only if the
16 individual is high risk within the meaning of section
17 1861(pp)(2) of such Act.

18 “(3) The payment made from the grant for a
19 screening procedure under subsection (b)(1)(A) will
20 not exceed the amount that would be paid under
21 part B of title XVIII of such Act if payment were
22 made under such part for furnishing the procedure
23 to an individual enrolled under such part.

24 “(f) RELATIONSHIP TO ITEMS AND SERVICES UNDER
25 OTHER PROGRAMS.—A grant under subsection (a) may

1 be made to an eligible entity only if the eligible entity,
2 as applicable, provides assurances that the grant will not
3 be expended to make payment for any item or service to
4 the extent that payment has been made, or can reasonably
5 be expected to be made, with respect to such item or serv-
6 ice—

7 “(1) under any State compensation program,
8 under an insurance policy, or under any Federal or
9 State health benefits program; or

10 “(2) by an entity that provides health services
11 on a prepaid basis.

12 “(g) RECORDS AND AUDITS.—A grant under sub-
13 section (a) may be made to an eligible entity only if the
14 eligible entity provides assurances that the eligible entity
15 will—

16 “(1) establish such fiscal control and fund ac-
17 counting procedures as may be necessary to ensure
18 proper disbursement of, and accounting for, amounts re-
19 ceived under subsection (a); and

20 “(2) upon request, provide records maintained
21 pursuant to paragraph (1) to the Secretary or the
22 Comptroller General of the United States for pur-
23 poses of auditing the expenditures of the grant by
24 the eligible entity.

25 “(h) REQUIREMENT OF MATCHING FUNDS.—

1 “(1) IN GENERAL.—The Secretary may not
2 make a grant under subsection (a) to an eligible en-
3 tity for a fiscal year unless the eligible entity agrees,
4 with respect to the costs to be incurred by the eligi-
5 ble entity for such fiscal year in carrying out the ac-
6 tivities described in subsection (b), to make available
7 non-Federal contributions (in cash or in kind under
8 paragraph (2)) toward such costs in an amount
9 equal to not less than \$1 for each \$3 of Federal
10 funds provided in the grant for such fiscal year.
11 Such contributions may be made directly or through
12 donations from public or private entities.

13 “(2) DETERMINATION OF AMOUNT OF NON-
14 FEDERAL CONTRIBUTION.—

15 “(A) IN GENERAL.—Non-Federal contribu-
16 tions required in paragraph (1) may be in cash
17 or in kind, fairly evaluated, including equipment
18 or services (and excluding indirect or overhead
19 costs). Amounts provided by the Federal Gov-
20 ernment, or services assisted or subsidized to
21 any significant extent by the Federal Govern-
22 ment, may not be included in determining the
23 amount of such non-Federal contributions.

24 “(B) MAINTENANCE OF EFFORT.—In
25 making a determination of the amount of non-

1 Federal contributions for purposes of paragraph
2 (1), the Secretary may include only non-Federal
3 contributions in excess of the average amount
4 of non-Federal contributions made by the eligi-
5 ble entity involved toward the activities de-
6 scribed in subsection (b) for the 2-year period
7 preceding the first fiscal year for which the eli-
8 gible entity is applying to receive a grant under
9 subsection (a).

10 “(C) INCLUSION OF RELEVANT NON-FED-
11 ERAL CONTRIBUTIONS FOR MEDICAID.—In
12 making a determination of the amount of non-
13 Federal contributions for purposes of paragraph
14 (1), the Secretary shall, subject to subpara-
15 graphs (A) and (B) of this paragraph, include
16 any non-Federal amounts expended pursuant to
17 title XIX of the Social Security Act by the eligi-
18 ble entity involved toward the activities de-
19 scribed in subparagraphs (A) and (B) of sub-
20 section (b)(1).

21 “(i) ADDITIONAL REQUIREMENTS.—

22 “(1) LIMITATION ON ADMINISTRATIVE EX-
23 PENSES.—The Secretary may not make a grant to
24 an eligible entity under subsection (a) unless the eli-
25 gible entity provides assurances that not more than

1 10 percent of the grant will be expended for admin-
2 istrative expenses with respect to the activities fund-
3 ed by the grant.

4 “(2) STATEWIDE PROVISION OF SERVICES.—

5 “(A) IN GENERAL.—Subject to subpara-
6 graph (B), the Secretary may not make a grant
7 under subsection (a) to an eligible entity unless
8 the eligible entity provides assurances that any
9 program funded by such grant will be made
10 available throughout the State, including avail-
11 ability to members of an Indian tribe or tribal
12 organization (as such terms are defined in sec-
13 tion 4 of the Indian Self-Determination and
14 Education Assistance Act).

15 “(B) WAIVER.—The Secretary may waive
16 the requirement under subparagraph (A) for an
17 eligible entity if the Secretary determines that
18 compliance by the eligible entity with the re-
19 quirement would result in an inefficient alloca-
20 tion of resources with respect to carrying out
21 the purposes described in subsection (a).

22 “(j) TECHNICAL ASSISTANCE AND PROVISION OF
23 SUPPLIES AND SERVICES IN LIEU OF GRANT FUNDS.—

24 “(1) TECHNICAL ASSISTANCE.—The Secretary
25 may provide training and technical assistance with

1 respect to the planning, development, and operation
2 of any program funded by a grant under subsection
3 (a). The Secretary may provide such technical as-
4 sistance directly to eligible entities or through grants
5 to, or contracts with, public and private entities.

6 “(2) PROVISION OF SUPPLIES AND SERVICES IN
7 LIEU OF GRANT FUNDS.—

8 “(A) IN GENERAL.—Subject to subpara-
9 graph (B), upon the request of an eligible entity
10 receiving a grant under subsection (a), the Sec-
11 retary for the purpose of aiding the eligible en-
12 tity to carry out a program under subsection
13 (b)—

14 “(i) may provide supplies, equipment,
15 and services to the eligible entity; and

16 “(ii) may detail to the eligible entity
17 any officer or employee of the Department
18 of Health and Human Services.

19 “(B) CORRESPONDING REDUCTION IN PAY-
20 MENTS.—With respect to a request made by an
21 eligible entity under subparagraph (A), the Sec-
22 retary shall reduce the amount of payments
23 made under the grant under subsection (a) to
24 the eligible entity by an amount equal to the
25 fair market value of any supplies, equipment, or

1 services provided by the Secretary and the costs
2 of detailing personnel (including pay, allow-
3 ances, and travel expenses) under subparagraph
4 (A). The Secretary shall, for the payment of ex-
5 penses incurred in complying with such request,
6 expend the amounts withheld.

7 “(k) REPORTS.—A grant under subsection (a) may
8 be made only if the applicant involved agrees to submit
9 to the Secretary such reports as the Secretary may require
10 with respect to the grant.

11 “(l) AUTHORIZATION OF APPROPRIATIONS.—

12 “(1) IN GENERAL.—For the purpose of car-
13 rying out this section, there are authorized to be ap-
14 propriated \$120,000,000 for each of fiscal years
15 2012 through 2016.

16 “(2) SET-ASIDE FOR TECHNICAL ASSISTANCE
17 AND PROVISION OF SUPPLIES AND SERVICES.—Of
18 the amount appropriated under paragraph (1) for a
19 fiscal year, the Secretary shall reserve not to exceed
20 20 percent for carrying out subsection (j).”.

21 **SEC. 3. OPTIONAL MEDICAID COVERAGE OF CERTAIN PER-**
22 **SONS SCREENED AND FOUND TO HAVE**
23 **COLORECTAL CANCER.**

24 (a) COVERAGE AS OPTIONAL CATEGORICALLY
25 NEEDY GROUP.—

1 (1) IN GENERAL.—Section 1902(a)(10)(A)(ii)
2 of the Social Security Act (42 U.S.C.
3 1396a(a)(10)(A)(ii)) is amended—

4 (A) in subclause (XXI), by striking “or” at
5 the end;

6 (B) in subclause (XXII), by adding “or” at
7 the end; and

8 (C) by adding at the end the following:

9 “(XXIII) who are described in
10 subsection (ll) (relating to certain per-
11 sons screened and found to need
12 treatment from complications from
13 screening or have colorectal cancer);”.

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

17 “(ll) Individuals described in this subsection are indi-
18 viduals who—

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

21 “(2) have not attained age 65;

22 “(3) have been screened for colorectal cancer
23 and need treatment for complications due to screen-
24 ing or colorectal cancer; and

1 “(4) are not otherwise covered under creditable
2 coverage, as defined in section 2704(c) of the Public
3 Health Service Act.”.

4 (3) LIMITATION ON BENEFITS.—Section
5 1902(a)(10) of the Social Security Act (42 U.S.C.
6 1396a(a)(10)) is amended in the matter following
7 subparagraph (G)—

8 (A) by striking “(XV)” and inserting “,
9 (XV)”;

10 (B) by striking “setting and (XVI)” and
11 inserting “setting, (XVII)”;

12 (C) by inserting “, and (XVIII) the med-
13 ical assistance made available to an individual
14 described in subsection (II) who is eligible for
15 medical assistance only because of subpara-
16 graph (A)(10)(ii)(XXIII) shall be limited to
17 medical assistance provided during the period in
18 which such an individual requires treatment for
19 complications due to screening or colorectal
20 cancer” before the semicolon.

21 (4) CONFORMING AMENDMENTS.—Section
22 1905(a) of the Social Security Act (42 U.S.C.
23 1396d(a)) is amended in the matter preceding para-
24 graph (1)—

1 (A) in clause (xvi), by striking “or” at the
2 end;

3 (B) in clause (xvii), by adding “or” at the
4 end; and

5 (C) by inserting after clause (xvii) the fol-
6 lowing:

7 “(xviii) individuals described in sec-
8 tion 1902(ll),”.

9 (b) PRESUMPTIVE ELIGIBILITY.—

10 (1) IN GENERAL.—Title XIX of the Social Se-
11 curity Act (42 U.S.C. 1396 et seq.) is amended by
12 inserting after section 1920C the following:

13 “OPTIONAL APPLICATION OF PRESUMPTIVE ELIGIBILITY
14 PROVISIONS FOR CERTAIN PERSONS WITH
15 COLORECTAL CANCER

16 “SEC. 1920D. A State may elect to apply the provi-
17 sions of section 1920B to individuals described in section
18 1902(ll) (relating to certain colorectal cancer patients) in
19 the same manner as such section applies to individuals de-
20 scribed in section 1902(aa) (relating to certain breast or
21 cervical cancer patients).”.

22 (2) CONFORMING AMENDMENTS.—

23 (A) Section 1902(a)(47) of the Social Se-
24 curity Act (42 U.S.C. 1396a(a)(47)), as amend-
25 ed by sections 2202(a) and 2303(b)(2) of Pub-
26 lic Law 111–148, is amended—

1 (i) by inserting before the first semi-
2 colon the following: “ and provide for mak-
3 ing medical assistance available to individ-
4 uals described in section 1920D during a
5 presumptive eligibility period in accordance
6 with such section”; and

7 (ii) effective as of January 1, 2014, in
8 subparagraph (B), by striking “or 1920C”
9 and inserting “1920C, or 1920D”.

10 (B) Section 1903(u)(1)(D)(v) of such Act
11 (42 U.S.C. 1396b(u)(1)(d)(v)) is amended by
12 inserting “, or for medical assistance provided
13 to an individual described in section 1920D
14 during a presumptive eligibility period under
15 such section” after “1920B during a presump-
16 tive eligibility period under such section”.

17 (c) ENHANCED MATCH.—The first sentence of sec-
18 tion 1905(b) of the Social Security Act (42 U.S.C.
19 1396d(b)) is amended—

20 (1) by striking “and” before “(4)”; and

21 (2) by inserting before the period at the end the
22 following: “, and (5) the Federal medical assistance
23 percentage shall be equal to the enhanced FMAP de-
24 scribed in section 2105(b) with respect to medical
25 assistance provided to individuals who are eligible

1 for such assistance only on the basis of section
2 1902(a)(10)(A)(ii)(XXIII)”.
3

3 (d) **EFFECTIVE DATE.**—The amendments made by
4 this section apply to medical assistance for items and serv-
5 ices furnished on or after October 1, 2011, without regard
6 to whether final regulations to carry out such amendments
7 have been promulgated by such date.

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