

117TH CONGRESS
1ST SESSION

S. 1536

To amend title XVIII of the Social Security Act to expand the availability of medical nutrition therapy services under the Medicare program.

IN THE SENATE OF THE UNITED STATES

MAY 10, 2021

Ms. COLLINS (for herself and Mr. PETERS) introduced the following bill;
which was read twice and referred to the Committee on Finance

A BILL

To amend title XVIII of the Social Security Act to expand the availability of medical nutrition therapy services under the Medicare 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 “Medical Nutrition
5 Therapy Act of 2021”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

8 (1) Over two-thirds of Medicare fee-for-service
9 beneficiaries have 2 or more chronic conditions,

1 many of which can be prevented, delayed, treated, or
2 managed through nutrition.

3 (2) Individuals from many racial and ethnic mi-
4 nority backgrounds are more likely to be diagnosed
5 with chronic diseases such as diabetes, prediabetes,
6 chronic kidney disease, end-stage renal disease, and
7 obesity.

8 (3) The Centers for Disease Control and Pre-
9 vention finds that individuals are at an increased
10 risk of severe illness from COVID-19 if they have
11 cancer, chronic kidney disease, diabetes, heart condi-
12 tions such as health failure or coronary artery dis-
13 ease, or obesity.

14 (4) Coverage for medical nutrition therapy is
15 only available to Medicare Part B beneficiaries with
16 diabetes or a renal disease, despite medical nutrition
17 therapy being part of the standard of care, in clin-
18 ical guidelines, and medically necessary for many
19 more chronic conditions.

20 (5) Medical nutrition therapy has been shown
21 to be a cost-effective component of treatment for
22 obesity, diabetes, hypertension, dyslipidemia, HIV
23 infection, unintended weight loss in older adults, and
24 other chronic conditions.

1 **SEC. 3. EXPANDING THE AVAILABILITY OF MEDICAL NU-**
 2 **TRITION THERAPY SERVICES UNDER THE**
 3 **MEDICARE PROGRAM.**

4 (a) IN GENERAL.—Section 1861 of the Social Secu-
 5 rity Act (42 U.S.C. 1395x) is amended—

6 (1) in subsection (s)(2)(V), by striking “in the
 7 case of” and all that follows through “organiza-
 8 tions”; and

9 (2) in subsection (vv)—

10 (A) in paragraph (1)—

11 (i) by striking “disease management”
 12 and inserting “the prevention, manage-
 13 ment, or treatment of a disease or condi-
 14 tion specified in paragraph (4)”;

15 (ii) by inserting “, physician assistant,
 16 nurse practitioner, clinical nurse specialist
 17 (as such terms are defined in subsection
 18 (aa)(5)), or, in the case of such services
 19 furnished to manage such a disease or con-
 20 dition that is an eating disorder, clinical
 21 psychologist (as defined by the Secretary)”
 22 before the period at the end; and

23 (iii) by adding at the end the fol-
 24 lowing new sentence: “Such term shall not
 25 include any such services furnished to an
 26 individual for the prevention, management,

1 or treatment of a renal disease if such in-
 2 dividual is receiving maintenance dialysis
 3 for which payment is made under section
 4 1881.”; and

5 (B) by adding at the end the following new
 6 paragraph:

7 “(4) For purposes of paragraph (1), the diseases and
 8 conditions specified in this paragraph are the following:

9 “(A) Diabetes and prediabetes.

10 “(B) A renal disease.

11 “(C) Obesity (as defined for purposes of sub-
 12 section (yy)(2)(C) or as otherwise defined by the
 13 Secretary).

14 “(D) Hypertension.

15 “(E) Dyslipidemia.

16 “(F) Malnutrition.

17 “(G) Eating disorders.

18 “(H) Cancer.

19 “(I) Gastrointestinal diseases, including Celiac
 20 disease.

21 “(J) HIV.

22 “(K) AIDS.

23 “(L) Cardiovascular disease.

24 “(M) Any other disease or condition—

1 “(i) specified by the Secretary relating to
2 unintentional weight loss;

3 “(ii) for which the Secretary determines
4 the services described in paragraph (1) to be
5 medically necessary and appropriate for the
6 prevention, management, or treatment of such
7 disease or condition, consistent with any appli-
8 cable recommendations of the United States
9 Preventive Services Task Force; or

10 “(iii) for which the Secretary determines
11 the services described in paragraph (1) are
12 medically necessary, consistent with either pro-
13 tocols established by registered dietitians or nu-
14 trition professional organizations or with ac-
15 cepted clinical guidelines identified by the Sec-
16 retary.”.

17 (b) EXCLUSION MODIFICATION.—Section 1862(a)(1)
18 is amended—

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

21 (2) in subparagraph (P), by striking the semi-
22 colon at the end and inserting “, and”; and

23 (3) by adding at the end the following new sub-
24 paragraph:

1 “(Q) in the case of medical nutrition therapy
2 services (as defined in section 1861(vv)), which are
3 not furnished for the prevention, management, or
4 treatment of a disease or condition specified in para-
5 graph (4) of such section;”.

6 (c) EFFECTIVE DATE.—The amendments made by
7 this section shall apply with respect to items and services
8 furnished on or after January 1, 2023.

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