

Union Calendar No. 625

114TH CONGRESS
2D SESSION

H. R. 1192

[Report No. 114–801]

To amend the Public Health Service Act to foster more effective implementation and coordination of clinical care for people with pre-diabetes, diabetes, and the chronic diseases and conditions that result from diabetes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 2, 2015

Mr. OLSON (for himself, Mr. LOEBSACK, Mr. WHITFIELD, Ms. DEGETTE, Ms. NORTON, Mr. FARENTHOLD, Mr. KELLY of Pennsylvania, Mr. GUTHRIE, Mr. TAKANO, Mr. BISHOP of Georgia, Mr. BLUMENAUER, Mr. GRIJALVA, Mr. HECK of Nevada, Ms. FRANKEL of Florida, Mr. COLLINS of New York, Mr. MCKINLEY, Mr. SESSIONS, Mr. SMITH of New Jersey, Mr. RODNEY DAVIS of Illinois, Mr. DUNCAN of South Carolina, Mr. LEVIN, Mr. JOYCE, Mr. NEAL, Ms. SLAUGHTER, Ms. GRANGER, Mr. SCHIFF, Mr. RUSH, Ms. BROWN of Florida, Mr. BARLETTA, Mr. BUCSHON, Mr. BUCHANAN, Mr. DAVID SCOTT of Georgia, Ms. SPEIER, Ms. EDWARDS, Mr. LONG, Mr. HASTINGS, Ms. DELBENE, Ms. TITUS, Mr. LIPINSKI, Mr. WITTMAN, Mr. YOUNG of Indiana, Ms. BORDALLO, Mr. YARMUTH, Mr. BUTTERFIELD, Mr. HIMES, Mr. RANGEL, Ms. CASTOR of Florida, Mr. JOHNSON of Ohio, Mr. DELANEY, Mr. SMITH of Texas, Mr. PETERS, Mr. PETERSON, Mr. RUIZ, and Mr. BURGESS) introduced the following bill; which was referred to the Committee on Energy and Commerce

NOVEMBER 14, 2016

Additional sponsors: Mr. POLIS, Mr. CARTWRIGHT, Ms. TSONGAS, Mr. MCGOVERN, Mr. GOHMERT, Ms. MCCOLLUM, Mr. ROE of Tennessee, Mr. PRICE of North Carolina, Mr. HIGGINS, Mrs. BEATTY, Mr. GOWDY, Mr. WALZ, Mr. YOUNG of Iowa, Ms. MATSUI, Mr. VARGAS, Mr. POMPEO, Mrs. BUSTOS, Mr. WILSON of South Carolina, Mr. BARR, Mr. KILDEE, Ms. KUSTER, Mr. AMODEI, Mr. TIBERI, Mr. FORTENBERRY, Ms. BROWNLEY of California, Mr. STIVERS, Mr. HUFFMAN, Mr. FRELINGHUYSEN, Mr. NOLAN, Mr. YOUNG of Alaska, Mr. PAULSEN, Mr. ROGERS of Kentucky, Mr. TURNER, Mr. WILLIAMS, Mr. JOLLY, Mr. LATTA, Mr. POCAN, Mr. MOULTON, Ms. LEE, Mr. MOONEY of West Virginia, Mrs.

BROOKS of Indiana, Mrs. ELLMERS of North Carolina, Ms. CLARKE of New York, Mr. RYAN of Ohio, Mr. HARPER, Ms. PINGREE, Mr. ALLEN, Mr. CONNOLLY, Mr. KIND, Mr. LANCE, Mr. ROTHFUS, Mr. TONKO, Mr. ISRAEL, Mrs. HARTZLER, Mr. PASCRELL, Ms. SCHAKOWSKY, Mr. HECK of Washington, Mrs. KIRKPATRICK, Mr. REED, Mr. PAYNE, Ms. CLARK of Massachusetts, Mr. COHEN, Mr. VEASEY, Mr. COSTELLO of Pennsylvania, Mrs. WATSON COLEMAN, Mr. CULBERSON, Mr. HENSARLING, Mr. SABLAN, Mr. FLORES, Ms. EDDIE BERNICE JOHNSON of Texas, Mrs. NAPOLITANO, Mr. MEEHAN, Mr. GENE GREEN of Texas, Ms. ESHOO, Mr. CARSON of Indiana, Ms. MAXINE WATERS of California, Mr. JOHNSON of Georgia, Mr. BILIRAKIS, Mrs. BLACKBURN, Mr. KENNEDY, Mr. GUINTA, Mr. FORBES, Mr. TAKAI, Mr. DEFazio, Ms. SINEMA, Mr. LYNCH, Ms. LOFGREN, Mr. RIBBLE, Mr. SENSENBRENNER, Mr. BEN RAY LUJÁN of New Mexico, Mr. ROSS, Ms. SEWELL of Alabama, Mr. WELCH, Mr. RIGELL, Mr. THOMPSON of Mississippi, Mr. LANGEVIN, Mr. HUNTER, Mr. YODER, Mr. SHIMKUS, Mr. SCHRADER, Ms. JUDY CHU of California, Mr. GUTIÉRREZ, Mr. WENSTRUP, Mr. KING of New York, Mr. MULLIN, Mr. SAM JOHNSON of Texas, Mr. KILMER, Mr. GIBSON, Mrs. DAVIS of California, Mr. LEWIS, Ms. LINDA T. SÁNCHEZ of California, Mr. SIRES, Mr. HONDA, Mr. GRAYSON, Mr. PIERLUISI, Mr. BARTON, Mr. RUPPERSBERGER, Mr. MURPHY of Pennsylvania, Mr. SHUSTER, Mr. KINZINGER of Illinois, Mr. FATTAH, Ms. WILSON of Florida, Mr. NUGENT, Mr. ROKITA, Ms. KAPTUR, Mr. THORNBERRY, Mr. FITZPATRICK, Mr. SWALWELL of California, Mr. DUNCAN of Tennessee, Mr. DEUTCH, Mr. JONES, Mr. PERRY, Mr. ZELDIN, Mr. SCOTT of Virginia, Mr. VAN HOLLEN, Mrs. MILLER of Michigan, Mr. ROUZER, Mr. CONYERS, Mr. WALBERG, Mr. BRADY of Pennsylvania, Mr. BABIN, Miss RICE of New York, Ms. VELÁZQUEZ, Mr. BLUM, Mr. WALDEN, Mr. ASHFORD, Mr. GARRETT, Mrs. COMSTOCK, Mr. BEYER, Ms. HAHN, Mr. CUMMINGS, Mr. THOMPSON of Pennsylvania, Mr. HOLDING, Mr. VELA, Mr. MARCHANT, Mrs. LAWRENCE, Mr. NADLER, Mr. VALADAO, Ms. MENG, Mr. SERRANO, Mr. SEAN PATRICK MALONEY of New York, Mr. BENISHEK, Ms. ROYBAL-ALLARD, Mr. GRAVES of Louisiana, Mr. BRENDAN F. BOYLE of Pennsylvania, Mr. CARTER of Texas, Ms. MICHELLE LUJAN GRISHAM of New Mexico, Mr. BYRNE, Mr. TED LIEU of California, Mr. GROTHMAN, Ms. ADAMS, Mr. DOGGETT, Mr. AGUILAR, Mr. LOBIONDO, Mr. CRAMER, and Mr. RICE of South Carolina

NOVEMBER 14, 2016

Reported with amendments, committed to the Committee of the Whole House
on the State of the Union, and ordered to be printed

[Strike out all after the enacting clause and insert the part printed in italic]

[For text of introduced bill, see copy of bill as introduced on March 2, 2015]

A BILL

To amend the Public Health Service Act to foster more effective implementation and coordination of clinical care for people with pre-diabetes, diabetes, and the chronic diseases and conditions that result from diabetes.

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 “National Clinical Care*
5 *Commission Act”.*

6 **SEC. 2. ESTABLISHMENT OF THE NATIONAL CLINICAL CARE**
7 **COMMISSION.**

8 *Part P of title III of the Public Health Service Act*
9 *(42 U.S.C. 280g et seq.) is amended by adding at the end*
10 *the following new section:*

11 **“SEC. 399V-7. NATIONAL CLINICAL CARE COMMISSION.**

12 *“(a) ESTABLISHMENT.—There is hereby established,*
13 *within the Department of Health and Human Services, a*
14 *National Clinical Care Commission (in this section referred*
15 *to as the ‘Commission’) to evaluate, and recommend solu-*
16 *tions regarding better coordination and leveraging of, pro-*
17 *grams within the Department and other Federal agencies*
18 *that relate in any way to supporting appropriate clinical*
19 *care (such as any interactions between physicians and other*
20 *health care providers and their patients related to treatment*
21 *and care management) for individuals with—*

22 *“(1) a complex metabolic or autoimmune disease;*

23 *“(2) a disease resulting from insulin deficiency*
24 *or insulin resistance; or*

25 *“(3) complications caused by any such disease.*

1 “(b) *MEMBERSHIP.*—

2 “(1) *IN GENERAL.*—*The Commission shall be*
3 *composed of the following voting members:*

4 “(A) *The heads (or their designees) of the*
5 *following Federal agencies and departments:*

6 “(i) *The Centers for Medicare & Med-*
7 *icaid Services.*

8 “(ii) *The Agency for Healthcare Re-*
9 *search and Quality.*

10 “(iii) *The Centers for Disease Control*
11 *and Prevention.*

12 “(iv) *The Indian Health Service.*

13 “(v) *The Department of Veterans Af-*
14 *fairs.*

15 “(vi) *The National Institutes of*
16 *Health.*

17 “(vii) *The Food and Drug Administra-*
18 *tion.*

19 “(viii) *The Health Resources and Serv-*
20 *ices Administration.*

21 “(ix) *The Department of Defense.*

22 “(B) *Twelve additional voting members ap-*
23 *pointed under paragraph (2).*

24 “(C) *Such additional voting members as*
25 *may be appointed by the Secretary, at the Sec-*

1 *retary’s discretion, from among the heads (or*
2 *their designees) of governmental or nongovern-*
3 *mental entities that impact clinical care of indi-*
4 *viduals with any of the diseases and complica-*
5 *tions described in subsection (a).*

6 *“(2) ADDITIONAL MEMBERS.—The Commission*
7 *shall include additional voting members appointed by*
8 *the Secretary, in consultation with national medical*
9 *societies and patient advocacy organizations with ex-*
10 *pertise in the care and epidemiology of any of the dis-*
11 *eases and complications described in subsection (a),*
12 *including one or more such members from each of the*
13 *following categories:*

14 *“(A) Clinical endocrinologists.*

15 *“(B) Physician specialties (other than as*
16 *described in subparagraph (A)) that play a role*
17 *in diseases and complications described in sub-*
18 *section (a), such as cardiologists, nephrologists,*
19 *and eye care professionals.*

20 *“(C) Primary care physicians.*

21 *“(D) Non-physician health care profes-*
22 *sionals, such as certified diabetes educators, reg-*
23 *istered dieticians and nutrition professionals,*
24 *nurses, nurse practitioners, and physician assist-*
25 *ants.*

1 “(E) *Patient advocates.*

2 “(F) *National experts in the duties listed*
3 *under subsection (c).*

4 “(G) *Health care providers furnishing serv-*
5 *ices to a patient population that consists of a*
6 *high percentage (as specified by the Secretary) of*
7 *individuals who are enrolled in a State plan*
8 *under title XIX of the Social Security Act or*
9 *who are not covered under a health plan or*
10 *health insurance coverage.*

11 “(3) *CHAIRPERSON.—The voting members of the*
12 *Commission shall select a chairperson from the mem-*
13 *bers appointed under paragraph (2) from the category*
14 *under paragraph (2)(A).*

15 “(4) *MEETINGS.—The Commission shall meet at*
16 *least twice, and not more than 4 times, a year.*

17 “(5) *BOARD TERMS.—Members of the Commis-*
18 *sion appointed pursuant to subparagraph (B) or (C)*
19 *of paragraph (1), including the chairperson, shall*
20 *serve for a 3-year term. A vacancy on the Commis-*
21 *sion shall be filled in the same manner as the original*
22 *appointments.*

23 “(c) *DUTIES.—The Commission shall—*

24 “(1) *evaluate programs of the Department of*
25 *Health and Human Services regarding the utilization*

1 of diabetes screening benefits, annual wellness visits,
2 and other preventive health benefits that may reduce
3 the incidence of the diseases and complications de-
4 scribed in subsection (a), including explaining prob-
5 lems regarding such utilization and related data col-
6 lection mechanisms;

7 “(2) identify current activities and critical gaps
8 in Federal efforts to support clinicians in providing
9 integrated, high-quality care to individuals with any
10 of the diseases and complications described in sub-
11 section (a);

12 “(3) make recommendations regarding the co-
13 ordination of clinically-based activities that are being
14 supported by the Federal Government with respect to
15 the diseases and complications described in subsection
16 (a);

17 “(4) make recommendations regarding the devel-
18 opment and coordination of federally funded clinical
19 practice support tools for physicians and other health
20 care professionals in caring for and managing the
21 care of individuals with any of the diseases and com-
22 plications described in subsection (a), specifically
23 with regard to implementation of new treatments and
24 technologies;

1 “(5) evaluate programs described in subsection
2 (a) that are in existence as of the date of the enact-
3 ment of this section and determine if such programs
4 are meeting the needs identified in paragraph (2)
5 and, if such programs are determined as not meeting
6 such needs, recommend programs that would be more
7 appropriate;

8 “(6) recommend, with respect to the diseases and
9 complications described in subsection (a), clinical
10 pathways for new technologies and treatments, in-
11 cluding future data collection activities, that may be
12 developed and then used to evaluate—

13 “(A) various care models and methods; and

14 “(B) the impact of such models and methods
15 on quality of care as measured by appropriate
16 care parameters (such as A1C, blood pressure,
17 and cholesterol levels);

18 “(7) evaluate and expand education and aware-
19 ness activities provided to physicians and other health
20 care professionals regarding clinical practices for the
21 prevention of the diseases and complications described
22 in subsection (a);

23 “(8) review and recommend appropriate methods
24 for outreach and dissemination of educational re-
25 sources that—

1 “(A) regard the diseases and complications
2 described in subsection (a);

3 “(B) are funded by the Federal Government;
4 and

5 “(C) are intended for health care profes-
6 sionals and the public; and

7 “(9) carry out other activities, such as activities
8 relating to the areas of public health and nutrition,
9 that the Commission deems appropriate with respect
10 to the diseases and complications described in sub-
11 section (a).

12 “(d) OPERATING PLAN.—

13 “(1) INITIAL PLAN.—Not later than 90 days
14 after its first meeting, the Commission shall submit to
15 the Secretary and the Congress an operating plan for
16 carrying out the activities of the Commission as de-
17 scribed in subsection (c). Such operating plan may
18 include—

19 “(A) a list of specific activities that the
20 Commission plans to conduct for purposes of
21 carrying out the duties described in each of the
22 paragraphs in subsection (c);

23 “(B) a plan for completing the activities;

24 “(C) a list of members of the Commission
25 and other individuals who are not members of

1 *the Commission who will need to be involved to*
2 *conduct such activities;*

3 “(D) *an explanation of Federal agency in-*
4 *volvement and coordination needed to conduct*
5 *such activities;*

6 “(E) *a budget for conducting such activi-*
7 *ties;*

8 “(F) *a plan for evaluating the value and*
9 *potential impact of the Commission’s work and*
10 *recommendations, including the possible continu-*
11 *ation of the Commission for the purposes of over-*
12 *seeing their implementation; and*

13 “(G) *other information that the Commission*
14 *deems appropriate.*

15 “(2) *UPDATES.—The Commission shall periodi-*
16 *cally update the operating plan under paragraph (1)*
17 *and submit such updates to the Secretary and the*
18 *Congress.*

19 “(e) *FINAL REPORT.—By not later than 3 years after*
20 *the date of the Commission’s first meeting, the Commission*
21 *shall submit to the Secretary and the Congress a final re-*
22 *port containing all of the findings and recommendations*
23 *required by this section. Not later than 120 days after the*
24 *submission of the final report, the Secretary shall review*
25 *the plan required by subsection (d)(1)(F) and submit to the*

1 *Congress a recommendation on whether the Commission*
2 *should be reauthorized to operate after fiscal year 2019.*

3 “(f) *SUNSET.—The Commission shall terminate at the*
4 *end of fiscal year 2019.*”

Amend the title so as to read: “A bill to amend the Public Health Service Act to foster more effective implementation and coordination of clinical care for people with a complex metabolic or autoimmune disease, a disease resulting from insulin deficiency or insulin resistance, or complications caused by such a disease, and for other purposes.”

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