

**SUBSTITUTE FOR  
SENATE BILL NO. 261**

A bill to amend 1956 PA 218, entitled  
"The insurance code of 1956,"  
(MCL 500.100 to 500.8302) by adding section 3406n.

**THE PEOPLE OF THE STATE OF MICHIGAN ENACT:**

**1** SEC. 3406N. (1) AN EXPENSE-INCURRED HOSPITAL, MEDICAL, OR  
**2** SURGICAL POLICY OR CERTIFICATE DELIVERED OR ISSUED FOR DELIVERY  
**3** IN THIS STATE SHALL INCLUDE COVERAGE FOR THE FOLLOWING EQUIPMENT,  
**4** SUPPLIES, AND EDUCATIONAL TRAINING FOR THE TREATMENT OF DIABETES,  
**5** IF PRESCRIBED BY AN ALLOPATHIC OR OSTEOPATHIC PHYSICIAN:  
**6** (A) BLOOD GLUCOSE MONITORS AND BLOOD GLUCOSE MONITORS FOR  
**7** THE LEGALLY BLIND.  
**8** (B) TEST STRIPS FOR GLUCOSE MONITORS, VISUAL READING AND  
**9** URINE TESTING STRIPS, LANCETS, AND SPRING-POWERED LANCET  
**10** DEVICES.

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1 (C) MECHANICAL INJECTION AIDS.

2 (D) CARTRIDGES FOR THE LEGALLY BLIND.

3 (E) SYRINGES.

4 (F) INSULIN PUMPS AND APPURTENANCES THERETO.

5 (G) INSULIN INFUSION DEVICES.

6 (H) DIABETES SELF-MANAGEMENT TRAINING TO ENSURE THAT PERSONS  
7 WITH DIABETES ARE TRAINED AS TO THE PROPER SELF-MANAGEMENT AND  
8 TREATMENT OF THEIR DIABETIC CONDITION, INCLUDING INFORMATION ON  
9 MEDICAL NUTRITION THERAPY.

10 (2) AN EXPENSE-INCURRED HOSPITAL, MEDICAL, OR SURGICAL  
11 POLICY OR CERTIFICATE DELIVERED OR ISSUED FOR DELIVERY IN THIS  
12 STATE THAT PROVIDES OUTPATIENT PHARMACEUTICAL COVERAGE DIRECTLY  
13 OR BY RIDER SHALL INCLUDE THE FOLLOWING COVERAGE FOR THE TREAT-  
14 MENT OF DIABETES, IF PRESCRIBED BY AN ALLOPATHIC OR OSTEOPATHIC  
15 PHYSICIAN:

16 (A) INSULIN.

17 (B) ORAL AGENTS FOR CONTROLLING BLOOD SUGAR AND OTHER MEDI-  
18 CATIONS IF FILLED BY A PHARMACIST.

19 (3) AN EXPENSE-INCURRED HOSPITAL, MEDICAL, OR SURGICAL  
20 POLICY OR CERTIFICATE DELIVERED OR ISSUED FOR DELIVERY IN THIS  
21 STATE SHALL INCLUDE COVERAGE FOR THE FOLLOWING EQUIPMENT, SUP-  
22 PLIES, AND EDUCATIONAL TRAINING FOR THE TREATMENT OF DIABETES:

23 (A) MEDICATIONS PRESCRIBED BY A PODIATRIST AND USED IN THE  
24 TREATMENT OF FOOT AILMENTS, INFECTIONS, AND OTHER MEDICAL CONDI-  
25 TIONS OF THE FOOT, ANKLE, OR NAILS ASSOCIATED WITH DIABETES.

26 (B) DIABETES SELF-MANAGEMENT TRAINING PROVIDED BY A  
27 PODIATRIST TO ENSURE THAT PERSONS WITH DIABETES ARE TRAINED AS TO

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1 THE PROPER SELF-MANAGEMENT AND TREATMENT OF THEIR DIABETIC  
2 CONDITION RELATED TO CONDITIONS OF THE FOOT, ANKLE, AND NAILS  
3 ATTRIBUTABLE TO DIABETES.

4 (4) COVERAGE UNDER THIS SECTION FOR SELF-MANAGEMENT TRAINING  
5 AND MEDICAL NUTRITION THERAPY TRAINING IS SUBJECT TO ALL OF THE  
6 FOLLOWING:

7 (A) IS LIMITED TO 1 ALLOPATHIC OR OSTEOPATHIC PHYSICIAN OR  
8 PODIATRIST VISIT OR COMPLETION OF A CERTIFIED DIABETES EDUCATION  
9 PROGRAM UPON EACH OCCURRENCE OF ANY OF THE FOLLOWING:

10 (i) IF CONSIDERED MEDICALLY NECESSARY UPON THE DIAGNOSIS OF  
11 DIABETES BY AN ALLOPATHIC OR OSTEOPATHIC PHYSICIAN.

12 (ii) IF AN ALLOPATHIC OR OSTEOPATHIC PHYSICIAN DIAGNOSES A  
13 SIGNIFICANT CHANGE IN THE PATIENT'S SYMPTOMS OR CONDITIONS THAT  
14 NECESSITATES CHANGES IN A PATIENT'S SELF-MANAGEMENT OR A SIGNIFI-  
15 CANT CHANGE IN MEDICAL PROTOCOL OR TREATMENT MODALITIES.

16 (iii) IF REEDUCATION OR REFRESHER TRAINING IS NECESSARY AND  
17 IS PRESCRIBED BY AN ALLOPATHIC OR OSTEOPATHIC PHYSICIAN.

18 (B) MAY BE PROVIDED BY THE ALLOPATHIC OR OSTEOPATHIC PHYSI-  
19 CIAN AS PART OF AN OFFICE VISIT FOR DIABETES DIAGNOSIS OR  
20 TREATMENT.

21 (C) MAY BE PROVIDED BY A DIABETES OUTPATIENT TRAINING PRO-  
22 GRAM CERTIFIED TO RECEIVE MEDICAID OR MEDICARE REIMBURSEMENT OR  
23 CERTIFIED BY THE DEPARTMENT OF COMMUNITY HEALTH. TRAINING PRO-  
24 VIDED UNDER THIS SUBDIVISION MAY BE LIMITED TO GROUP SETTINGS  
25 WHENEVER PRACTICABLE.

26 (D) INCLUDES HOME VISITS IF MEDICALLY NECESSARY AND  
27 PRESCRIBED BY AN ALLOPATHIC OR OSTEOPATHIC PHYSICIAN.

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1 (5) COVERAGE UNDER THIS SECTION IS NOT SUBJECT TO DOLLAR  
2 LIMITS, DEDUCTIBLES, OR COINSURANCE PROVISIONS THAT ARE GREATER  
3 THAN THOSE FOR PHYSICAL ILLNESS GENERALLY.

4 (6) AS USED IN THIS SECTION, "DIABETES" INCLUDES ALL OF THE  
5 FOLLOWING:

- 6 (A) GESTATIONAL DIABETES.
- 7 (B) INSULIN-USING DIABETES.
- 8 (C) NON-INSULIN-USING DIABETES.