

**[DISCUSSION DRAFT]**

118TH CONGRESS  
1ST SESSION

**H. R.** \_\_\_\_\_

To amend titles XI and XVIII of the Social Security Act to require each outpatient department of a provider to include a unique identification number on claims for services, and to require hospitals with an outpatient department of a provider to submit to the Centers for Medicare & Medicaid Services an attestation with respect to each such outpatient department.

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IN THE HOUSE OF REPRESENTATIVES

M. \_\_\_\_\_ introduced the following bill; which was referred to the  
Committee on \_\_\_\_\_

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**A BILL**

To amend titles XI and XVIII of the Social Security Act to require each outpatient department of a provider to include a unique identification number on claims for services, and to require hospitals with an outpatient department of a provider to submit to the Centers for Medicare & Medicaid Services an attestation with respect to each such outpatient department.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. REQUIRING A SEPARATE IDENTIFICATION**  
2 **NUMBER AND AN ATTESTATION FOR EACH**  
3 **DEPARTMENT OF A PROVIDER.**

4 (a) SEPARATE IDENTIFICATION NUMBER FOR EACH  
5 OUTPATIENT DEPARTMENT OF A PROVIDER.—

6 (1) IN GENERAL.—Section 1173(b) of the So-  
7 cial Security Act (42 U.S.C. 1320d–2(b)) is amend-  
8 ed by adding at the end the following new para-  
9 graph:

10 “(3) ENSURING SEPARATE IDENTIFIERS FOR  
11 EACH OUTPATIENT DEPARTMENT OF A PROVIDER.—

12 The standards specified under paragraph (1) shall  
13 ensure that, not later than January 1, 2026, each  
14 outpatient department of a provider (as defined in  
15 section 413.65(a)(2) of title 42, Code of Federal  
16 Regulations) is assigned a separate unique health  
17 identifier from such provider.”.

18 (2) PROCESS FOR REVIEW OF IDENTIFICATION  
19 NUMBERS.—Not later than 1 year after the date of  
20 enactment of this Act, the Secretary of Health and  
21 Human Services shall, through notice and comment  
22 rulemaking, establish a process to review each sepa-  
23 rate unique health identifier assigned to an out-  
24 patient department of provider and confirm such  
25 provider is compliant with the requirements de-

1 scribed in section 413.65 of title 42, Code of Federal  
2 Regulations (or a successor regulation).

3 (b) ATTESTATION FOR EACH DEPARTMENT OF A  
4 PROVIDER.—Section 1833(t) of the Social Security Act  
5 (42 U.S.C. 1395l(t)) is amended by adding at the end the  
6 following new paragraph:

7 “(23) REQUIRED ATTESTATION FOR DEPART-  
8 MENT OF A PROVIDER.—

9 “(A) IN GENERAL.—In order to receive  
10 payment under this subsection, or under an ap-  
11 plicable payment system pursuant to paragraph  
12 (21), for items and services furnished on or  
13 after January 1, 2026, by a department of a  
14 provider (as defined in section 413.65 of title  
15 42, Code of Federal Regulations), a hospital  
16 shall submit to the Secretary, not less fre-  
17 quently than once every 2 years, an attestation  
18 that such provider is compliant with the re-  
19 quirements described in section 413.65 of title  
20 42, Code of Federal Regulations (or a successor  
21 regulation).

22 “(B) PROCESS FOR SUBMISSION AND RE-  
23 VIEW.—Not later than 1 year after the date of  
24 enactment of this Act, the Secretary shall,  
25 through notice and comment rulemaking, estab-

1           lish a process for each hospital to submit an at-  
2           testation pursuant to subparagraph (A), and  
3           for the Secretary to review each such attesta-  
4           tion and determine whether such hospital is  
5           compliant with the requirements described in  
6           such subparagraph.”.