

[DISCUSSION DRAFT]

119TH CONGRESS
1ST SESSION

H. R. _____

To amend title XVIII of the Social Security Act to ensure transparency in the national coverage determination process under the Medicare program and to make certain adjustments to Medicare local coverage determinations.

IN THE HOUSE OF REPRESENTATIVES

M____ introduced the following bill; which was referred to the
Committee on _____

A BILL

To amend title XVIII of the Social Security Act to ensure transparency in the national coverage determination process under the Medicare program and to make certain adjustments to Medicare local coverage determinations.

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 “_____ Act
5 of 2025”.

1 **SEC. 2. ENSURING TRANSPARENCY IN THE NATIONAL COV-**
2 **ERAGE DETERMINATION PROCESS UNDER**
3 **THE MEDICARE PROGRAM.**

4 (a) IN GENERAL.—Section 1862(l) of the Social Se-
5 curity Act (42 U.S.C. 1395y(l)) is amended by adding at
6 the end the following new paragraph:

7 “(7) TRANSPARENCY IN NATIONAL COVERAGE
8 DETERMINATIONS.—

9 “(A) IN GENERAL.—With respect to each
10 document received by the Secretary on or after
11 the date that is 6 months after the date of the
12 enactment of this paragraph that identifies
13 itself as a complete, formal request for a na-
14 tional coverage determination (as described in
15 the notice entitled ‘Medicare Program; Revised
16 Process for Making National Coverage Deter-
17 minations’ (78 Fed. Reg. 48164) or a successor
18 regulation), including a request for a reconsid-
19 eration of such a determination, the Secretary
20 shall, not later than 90 calendar days after re-
21 ceipt of such document—

22 “(i) determine whether such document
23 is a complete, formal request for a national
24 coverage determination; and

25 “(ii) in the case that the Secretary
26 finds that such document is not a com-

plete, formal request for a national coverage determination, directly transmit to the entity submitting such document an explanation of such finding that includes a specification of additional information needed to make such document a complete, formal request for a national coverage determination.

“(B) RESUBMISSION OF DOCUMENT.—

“(i) IN GENERAL.—In the case of a document described in subparagraph (A) with respect to which the Secretary has made a finding described in clause (ii) of such subparagraph, the entity submitting such document may submit to the Secretary a revised document that includes the additional information specified in such clause with respect to such document. Such revised document shall be treated as a newly-received document for purposes of subparagraph (A).

“(ii) TECHNICAL ASSISTANCE.—The Secretary shall provide such technical assistance as is practicable in order to assist

1 entities in submitting revised documents
2 under clause (i).

3 “(C) PUBLICATION.—The Secretary shall
4 make available on a publicly accessible website
5 of the Centers for Medicare & Medicaid Serv-
6 ices or other appropriate means a concise sum-
7 mary of each complete, formal request for a na-
8 tional coverage determination (as determined by
9 the Secretary as described in subparagraph
10 (A)(i)) not later than 30 business days after the
11 date of such finding.”.

12 (b) INCLUSION OF CERTAIN TIME PERIODS IN AN-
13 NUAL REPORTS.—Section 1869(f)(7)(A) of the Social Se-
14 curity Act (42 U.S.C. 1395ff(f)(7)(A)) is amended by add-
15 ing at the end the following new sentence: “Each such re-
16 port submitted on or after the date that is 6 months after
17 the date of the enactment of this sentence shall include
18 in such actual time periods with respect to such a request
19 any intervening time between the receipt of such request
20 by the Secretary and the Secretary’s determination that
21 such request was a complete, formal request.”.

1 **SEC. 3. IMPROVING ACCESS TO ITEMS AND SERVICES**
2 **UNDER MEDICARE LOCAL COVERAGE DETER-**
3 **MINATIONS.**

4 Section 1862(l)(5) of the Social Security Act (42
5 U.S.C. 1395y(l)(5)) is amended by adding at the end the
6 following new subparagraph:

7 “(E) ENSURING CONSISTENCY WITH AP-
8 PLICABLE RULES.—The Secretary shall require
9 each Medicare administrative contractor that
10 develops a local coverage determination to en-
11 sure that any such local coverage determination
12 does not conflict with any law, ruling, regula-
13 tion, national coverage determination, payment
14 policy, or coding policy.”.