

119TH CONGRESS
1ST SESSION

H. R. 6721

To amend title XVIII of the Social Security Act to encourage Medicare beneficiaries to voluntarily adopt advance directives guiding the medical care they receive.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 15, 2025

Mr. MURPHY (for himself and Mr. THOMPSON of California) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend title XVIII of the Social Security Act to encourage Medicare beneficiaries to voluntarily adopt advance directives guiding the medical care they receive.

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 “Medicare Advance
5 Planning for Care Act” or the “MAP for Care Act”.

1 **SEC. 2. MEDICARE ADVANCE DIRECTIVE CERTIFICATION**
 2 **PROGRAM.**

3 Part B of title XVIII of the Social Security Act (42
 4 U.S.C. 1395j et seq.) is amended by adding at the end
 5 the following new section:

6 “MEDICARE ADVANCE DIRECTIVE CERTIFICATION
 7 PROGRAM

8 “SEC. 1849. (a) IN GENERAL.—

9 “(1) ESTABLISHMENT OF PROGRAM.—The Sec-
 10 retary shall establish and implement an Advance Di-
 11 rective Certification Program (in this section re-
 12 ferred to as the ‘Program’) under which the Sec-
 13 retary shall encourage eligible beneficiaries to adopt
 14 and maintain certified advance directives to guide
 15 the delivery of health care to such beneficiaries. The
 16 Secretary shall implement the Program not later
 17 than 5 years after the date of enactment of this sec-
 18 tion.

19 “(2) DEFINITIONS.—In this section:

20 “(A) CERTIFIED ADVANCE DIRECTIVE.—

21 The term ‘certified advance directive’ means an
 22 electronically stored written instruction by an
 23 eligible beneficiary, such as a living will or du-
 24 rable power of attorney for health care, recog-
 25 nized under State law (whether statutory or as
 26 recognized by the courts of the State) and relat-

ing to the provision of such care when the individual is incapacitated that—

“(i) provides instructions that outline the kind of medical treatments and care that such beneficiary would want or not want under particular conditions, and may also include the identification of a health care proxy or legal representative to make medical treatment decisions for the beneficiary if the beneficiary becomes unable to make or communicate those decisions on their own; and

“(ii) is offered by an entity that has received accreditation from the Secretary under subsection (c).

“(B) ELIGIBLE BENEFICIARY.—The term ‘eligible beneficiary’ means an individual entitled to, or enrolled for benefits, under part A or enrolled for benefits under this part.

“(C) PROGRAM PARTICIPANT.—The term ‘Program participant’ means an eligible beneficiary who is enrolled in the Program.

“(3) VOLUNTARY PARTICIPATION.—An eligible beneficiary who has registered a certified advance directive with a advance directive vendor accredited

1 under subsection (c) may disenroll and terminate
2 such directive at any time.

3 “(4) BEST PRACTICES.—In establishing and im-
4 plementing the Program, the Secretary shall con-
5 sider best practices—

6 “(A) within existing advance directive reg-
7 istry technologies, programs, and systems, in-
8 cluding web-based or cloud-based advance direc-
9 tive technologies—

10 “(i) which may utilize time and date
11 stamps, video, or other innovative meas-
12 ures to protect the authenticity, improve
13 the quality of, and enhance the security of
14 such directives; and

15 “(ii) which may utilize secure email
16 and messaging technologies and nationally
17 recognized health care information tech-
18 nology standards to improve the accessi-
19 bility and interoperability of such direc-
20 tives; and

21 “(B) for educating beneficiaries on ways
22 to—

23 “(i) communicate their authenticated
24 wishes to applicable family members, legal
25 representatives, and providers or health

1 care proxies, including through the use of
2 email or other mail formats; and

3 “(ii) access certified advance direc-
4 tives, including through the use of mobile
5 devices.

6 “(5) STATE LAW.—The provisions of this sec-
7 tion shall not preempt any State or local law re-
8 quirement governing advance directives.

9 “(6) DISPLAY OF STATUTORY AND ALTER-
10 NATIVE ADVANCE DIRECTIVE FORMS.—Under the
11 Program, the Secretary shall provide, on the Inter-
12 net website of the Centers for Medicare & Medicaid
13 Services, links to statutory advance directive forms
14 (as described in subsection (d)(1)(C)), alternative
15 advance directive forms (as described in subsection
16 (d)(1)(D)), and a State-by-State index to such forms
17 to allow a Program participant to create, adopt,
18 modify, and terminate a certified advance directive
19 with any content permitted or required under this
20 section, and in any form authorized by a State.

21 “(b) ENROLLMENT IN THE PROGRAM AND REG-
22 ISTRATION OF ADVANCE DIRECTIVES.—

23 “(1) REQUIRED INFORMATION.—In addition to
24 such other information as the Secretary determines
25 is appropriate, a Program participant seeking to

1 register a certified advance directive under the Pro-
2 gram shall indicate where the advance directive is
3 maintained or how it may be accessed.

4 “(2) NOTIFICATION REGARDING PROGRAM.—
5 During the annual, coordinated election period under
6 section 1851(e)(3), the Secretary shall notify each
7 eligible beneficiary of the Program.

8 “(3) PRIVACY AND SECURITY.—

9 “(A) IN GENERAL.—The Secretary shall
10 ensure that all aspects of the enrollment and
11 registration system comply with the Federal
12 regulations (concerning the privacy and security
13 of individually identifiable health information)
14 promulgated under the Health Insurance Port-
15 ability and Accountability Act of 1996 subject
16 to the access authorized under subsection
17 (c)(2)(E) and in accordance with subsection
18 (c)(2)(F).

19 “(B) ACCESS.—The Secretary shall utilize
20 standardized data protections and privacy
21 standards, including the Federal regulations de-
22 scribed in subparagraph (A), to ensure that the
23 registration record of a Program participant
24 can only be accessed by—

1 “(i) the Program participant, through
2 the process established under subsection
3 (c)(2)(B);

4 “(ii) those authorized to access the
5 certified advance directive under subsection
6 (c)(2)(E); and

7 “(iii) providers of services and sup-
8 pliers participating under this title who
9 furnish items or services to the Program
10 participant, through a process established
11 by the Secretary.

12 “(c) ACCREDITATION.—

13 “(1) IN GENERAL.—

14 “(A) ACCREDITATION BY THE SEC-
15 RETARY.—Under the Program, the Secretary
16 shall—

17 “(i) accredit advance directive vendors
18 and other entities providing advance direc-
19 tives that meet the accreditation criteria
20 established under paragraph (2) and any
21 other criteria determined appropriate by
22 the Secretary; and

23 “(ii) establish a process whereby ad-
24 vance directive vendors and other entities

1 providing advance directives may obtain
2 accreditation under this subsection.

3 “(B) ACCREDITATION BY ADVANCE DIREC-
4 TIVE ACCREDITATION ORGANIZATION.—The
5 Secretary may contract with an advance direc-
6 tive accreditation organization to accredit ad-
7 vance directive vendors and other entities under
8 subparagraph (A)(i).

9 “(2) ACCREDITATION CRITERIA.—The Sec-
10 retary, in consultation with the Comptroller General
11 of the United States, shall establish accreditation
12 criteria for advance directive vendors and other enti-
13 ties providing advance directives to be certified
14 under the Program. Such criteria shall consist of
15 each of the following:

16 “(A) CERTIFIED ADVANCE DIRECTIVES.—
17 The advance directive vendor or other entity
18 shall agree to offer certified advance directives
19 to eligible beneficiaries.

20 “(B) PROCEDURES FOR ENROLLMENT.—

21 “(i) IN GENERAL.—The advance di-
22 rective vendor or other entity shall estab-
23 lish procedures that—

24 “(I) allow for a Program partici-
25 pant to—

1 “(aa) enroll in and disenroll
2 from the Program; and

3 “(bb) register or update a
4 certified advance directive adopt-
5 ed by the participant; and

6 “(II) ensure that a Program par-
7 ticipant is able to—

8 “(aa) create, adopt, modify,
9 update, amend, or terminate a
10 certified advance directive in a
11 timely and secure manner;

12 “(bb) update previously reg-
13 istered information; and

14 “(cc) indicate that a pre-
15 viously registered certified ad-
16 vance directive has been termi-
17 nated.

18 “(ii) ONLINE ENROLLMENT AND REG-
19 ISTRATION.—The procedures established
20 pursuant to clause (i) shall ensure that
21 such enrollment and registration is avail-
22 able through an online process, or other
23 means determined appropriate by the ad-
24 vance directive vendor or other entity.

25 “(C) QUALITY REVIEW.—

1 “(i) IN GENERAL.—For purposes of
2 determining compliance with the require-
3 ments of this section, the advance directive
4 vendor or other entity shall comply with an
5 annual quality review to be conducted by
6 the Secretary.

7 “(ii) ENFORCEMENT.—If the Sec-
8 retary determines that an advance directive
9 vendor or other entity is not in compliance
10 with the requirements of this section, the
11 Secretary shall remove any certified ad-
12 vance directive of such advance directive
13 vendor or other entity from the Internet
14 website of the Centers for Medicare &
15 Medicaid Services.

16 “(D) USE OF STATUTORY AND ALTER-
17 NATIVE ADVANCE DIRECTIVE FORMS.—The ad-
18 vance directive vendor or other entity shall
19 allow a Program participant to—

20 “(i) access, complete, modify, and
21 adopt any advance directive forms de-
22 scribed in subparagraphs (C) and (D) of
23 subsection (d)(1); and

24 “(ii) search for such forms by State.

1 “(E) ACCESS.—The advance directive ven-
2 dor or other entity shall—

3 “(i) provide near real-time online ac-
4 cess to the certified advance directive of a
5 Program participant for purposes of view-
6 ing and sharing such advance directive, in-
7 cluding communicating the certified ad-
8 vance directive and the Program partici-
9 pant’s authenticated wishes using nation-
10 ally recognized standards for securely
11 transferring sensitive data specified by the
12 Secretary to—

13 “(I) the Program participant;

14 “(II) any family member, legal
15 representative, or health care proxy le-
16 gally designated by the participant;
17 and

18 “(III) a provider of services or
19 supplier that furnishes items or serv-
20 ices to the participant; and

21 “(ii) at the request of the Program
22 participant or any family member, legal
23 representative, or health care proxy legally
24 designated by the Program participant,
25 provide a hard copy of the certified ad-

1 vance directive of the Program participant
2 to a provider of services or supplier.

3 “(F) PRIVACY PROTECTIONS.—

4 “(i) IN GENERAL.—The advance di-
5 rective vendor or other entity shall comply
6 with the Federal regulations (concerning
7 the privacy of individually identifiable
8 health information) promulgated under
9 section 264(c) of the Health Insurance
10 Portability and Accountability Act of 1996,
11 subject to the access authorized under sub-
12 paragraph (E).

13 “(ii) ACCESS.—Such vendor or entity
14 shall comply with standardized data pro-
15 tections and privacy standards, including
16 the Federal Regulations described in clause
17 (i), to ensure that the content of a Pro-
18 gram participant’s certified advance direc-
19 tive is owned and maintained by the partic-
20 ipant and can only be accessed by those
21 authorized to access the advance directive
22 under subparagraph (E).

23 “(G) SECURITY AND TESTING.—The ad-
24 vance directive vendor or other entity shall cer-
25 tify that—

1 “(i) all data management and data
2 transfer elements involved in adopting,
3 maintaining, and accessing a certified ad-
4 vance directive of a Program participant—

5 “(I) have successfully passed rig-
6 orous independent testing regarding
7 standards of timeliness, accuracy, and
8 efficiency; and

9 “(II) meet widely accepted indus-
10 try security standards (as determined
11 by the Secretary); and

12 “(ii) the system that provides access
13 to a certified advance directive of a Pro-
14 gram participant has passed real-time tests
15 simulating a realistic volume of Program
16 participants, their family members, legal
17 representatives, and legally designated
18 health care proxies, providers of services,
19 and suppliers accessing such directives si-
20 multaneously.

21 “(H) BENEFICIARY SURVEYS.—

22 “(i) IN GENERAL.—The advance di-
23 rective vendor or other entity shall admin-
24 ister an annual survey of Program partici-
25 pants on the information described in

1 clause (ii) and submit the results of such
2 survey to the Secretary.

3 “(ii) INFORMATION.—The information
4 described in this clause, with respect to a
5 Program participant and a certified ad-
6 vance directive of such participant, is the
7 following:

8 “(I) Whether the participant had
9 to pay any third party for the cre-
10 ation, storage, or retrieval of the cer-
11 tified advance directive.

12 “(II) Whether the participant
13 had a health care encounter or emer-
14 gency that required the location, ac-
15 cess, retrieval, or consultation of the
16 certified advance directive and if so,
17 whether the certified advance directive
18 was accessible online and in near real-
19 time, as required under this section.

20 “(III) Whether the certified ad-
21 vance directive was sufficiently clear
22 and actionable.

23 “(IV) Whether medical personnel
24 followed the certified advance direc-
25 tive.

1 “(I) PROCESS FOR COMPLYING WITH
2 STATE LAW.—The advance directive vendor or
3 other entity shall enable a Program participant
4 using their services to complete a certified ad-
5 vance directive that fully complies with the law
6 governing advance directives of the applicable
7 State.

8 “(J) ACCESS IN CASES OF DISPUTE OVER
9 TREATMENT.—

10 “(i) SPECIAL ACCESS.—The advance
11 directive vendor or other entity shall estab-
12 lish a process whereby, with respect to a
13 Program participant, an interested indi-
14 vidual described in clause (ii) may obtain
15 access to the certified advance directive of
16 the Program participant for the purposes
17 of viewing and sharing such advance direc-
18 tive when—

19 “(I) the provisions of the cer-
20 tified advance directive have come into
21 force under the law of the applicable
22 State because the Program partici-
23 pant has become incapable of making
24 health care decisions on their own or

1 under other circumstances provided
2 under State law; and

3 “(II) at least 1 person described
4 in clause (ii) is questioning or dis-
5 puting the provision, withholding, or
6 withdrawal of medical treatment,
7 food, or fluids with respect to the Pro-
8 gram participant.

9 “(ii) INTERESTED INDIVIDUALS.—

10 “(I) IN GENERAL.—An interested
11 individual described in this clause,
12 with respect to a Program participant,
13 is—

14 “(aa) any individual who is
15 a member of any class of persons
16 who, under the law of the appli-
17 cable State, would potentially be
18 eligible to serve as a health care
19 decision maker for the Program
20 participant if an advance direc-
21 tive had not been executed, re-
22 gardless of whether another indi-
23 vidual would have higher priority
24 for such eligibility; or

1 “(bb) if the law of the appli-
2 cable State does not designate a
3 person or class of persons de-
4 scribed in item (aa), any indi-
5 vidual related within the third
6 degree of consanguinity or affini-
7 ty to the Program participant
8 identified by the Program partici-
9 pant in the certified advance di-
10 rective.

11 “(II) PERIODIC UPDATE.—In the
12 case that the law of the applicable
13 State does not designate a person or
14 class of persons described in subclause
15 (I)(aa) and the Program participant
16 has identified in a certified advance
17 directive an individual within the third
18 degree of consanguinity or affinity of
19 such participant, the advance directive
20 vendor or other entity shall annually
21 during the annual, coordinated elec-
22 tion period under section 1851(e)(3)
23 prompt the Program participant to
24 update such individual.

25 “(d) EDUCATION AND OUTREACH.—

1 “(1) IN GENERAL.—The Secretary shall—

2 “(A) include a statement described in
3 paragraph (3) in the notice described in section
4 1804(a) and provide for the inclusion of such
5 statement on the Internet website of the Cen-
6 ters for Medicare & Medicaid Services;

7 “(B) communicate the benefits of elec-
8 tronic advance directives services, as they be-
9 come available;

10 “(C) provide for the inclusion, under the
11 heading ‘Statutory Advance Directive Forms’,
12 of any relevant forms, whether mandatory or
13 optional, specified in the statutes or regulations
14 of States to be displayed on a such website;

15 “(D) provide for the inclusion, under the
16 heading ‘Alternative Advance Directive Forms’,
17 on such website, and in accordance with para-
18 graph (2)—

19 “(i) of other advance directive forms
20 submitted to the Secretary by individuals
21 and groups in an electronic format speci-
22 fied by the Secretary for which the submit-
23 ting entity includes, for each form sub-
24 mitted, an opinion by an attorney licensed
25 to practice in the relevant State dem-

onstrating that the submitted form complies with the law of that State; and

“(ii) of the following disclaimer, which shall be prominently posted on the website: ‘This website includes for your consideration alternative advance directive forms submitted by individuals or groups reflecting different perspectives on advance health care decisions which you may wish to review before completing your own advance directive.’; and

“(E) provide for the inclusion of a user-friendly index on the website by State and, in the case of the ‘Alternative Advance Directive Forms’, by the name of the individual or group who provided each alternative advance directive, so that a user may readily access those statutory and alternative forms.

“(2) ALTERNATIVE ADVANCE DIRECTIVE FORMS.—

“(A) IN GENERAL.—For purposes of paragraph (1)(D), the following shall apply:

“(i) Not later than 60 days after receiving an alternative advance directive form submitted under such paragraph, the

1 Secretary shall either post the submitted
2 form on the Internet website of the Cen-
3 ters for Medicare & Medicaid Services or
4 provide to the submitting entity an expla-
5 nation of the basis for the Secretary’s de-
6 termination that the submitted form does
7 not comply with relevant State or Federal
8 law, which determination shall be subject
9 to judicial review under section 702 of title
10 5 of the United States Code.

11 “(ii) The Secretary shall either re-
12 move or refuse to post any submitted form
13 if provided with an official determination
14 by the attorney general of the applicable
15 State that the form is not in compliance
16 with State law, subject to applicable State
17 law described in subparagraph (B).

18 “(B) STATE LAW DESCRIBED.—For pur-
19 poses of subparagraph (A), State law described
20 in this subparagraph is—

21 “(i) a ruling by a court of the applica-
22 ble State, or by a Federal court applying
23 that State’s law, subject to subsequent rul-
24 ings by a court or courts with authority to
25 supercede that ruling; or

1 “(ii) a statute or regulation of the ap-
2 plicable State that provides for a specific
3 procedure for officially determining wheth-
4 er particular advance directive forms com-
5 ply with State law.

6 “(3) STATEMENT.—For purposes of paragraph
7 (1)(A), the statement described in this paragraph is
8 a statement of the reasons why beneficiaries may
9 want to consider advance directives, a suggestion for
10 the beneficiary to carefully consider decisions re-
11 garding advance directives, and references to re-
12 sources about advance directives.

13 “(e) ADVANCE DIRECTIVE INFORMATION IN MEDI-
14 CARE ENROLLMENT FORMS.—After the Secretary imple-
15 ments the Program, the Secretary shall include on each
16 application for enrollment of an individual in part A, this
17 part, or part C a link to an Internet website with resources
18 to assist in completing an advance directive.”.

○