

119TH CONGRESS  
1ST SESSION

# S. 575

To amend titles XVIII and XIX of the Social Security Act to increase access to services provided by advanced practice registered nurses under the Medicare and Medicaid programs, and for other purposes.

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## IN THE SENATE OF THE UNITED STATES

FEBRUARY 13, 2025

Mr. MERKLEY (for himself and Ms. LUMMIS) introduced the following bill;  
which was read twice and referred to the Committee on Finance

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## A BILL

To amend titles XVIII and XIX of the Social Security Act to increase access to services provided by advanced practice registered nurses under the Medicare and Medicaid programs, and for other purposes.

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; TABLE OF CONTENTS.**

4       (a) SHORT TITLE.—This Act may be cited as the  
5       “Improving Care and Access to Nurses Act” or the “I  
6       CAN Act”.

7       (b) TABLE OF CONTENTS.—The table of contents of  
8       this Act is as follows:

Sec. 1. Short title; table of contents.

## TITLE I—REMOVAL OF BARRIERS TO PRACTICE ON NURSE PRACTITIONERS

- Sec. 101. Expanding access to cardiac rehabilitation programs and pulmonary rehabilitation programs under Medicare program.
- Sec. 102. Permitting nurse practitioners and physician assistants to satisfy Medicare documentation requirement for coverage of certain shoes for individuals with diabetes.
- Sec. 103. Improvements to the assignment of beneficiaries under the Medicare shared savings program.
- Sec. 104. Expanding the availability of medical nutrition therapy service Medicare program.
- Sec. 105. Preserving access to home infusion therapy.
- Sec. 106. Increasing access to hospice care services.
- Sec. 107. Streamlining care delivery in skilled nursing facilities and nursing facilities; authorizing Medicare and Medicaid inpatient hospital patients to be under the care of a nurse practitioner.
- Sec. 108. Improving access to Medicaid clinic services.

## TITLE II—REMOVAL OF BARRIERS TO PRACTICE ON CERTIFIED REGISTERED NURSE ANESTHETISTS

- Sec. 201. Clarifying that certified registered nurse anesthetists can be reimbursed by Medicare for evaluation and management services.
- Sec. 202. Revision of conditions of payment relating to services ordered and referred by certified registered nurse anesthetists.
- Sec. 203. Special payment rule for teaching student registered nurse anesthetists.
- Sec. 204. Removing unnecessary and costly supervision of certified registered nurse anesthetists.
- Sec. 205. CRNA services as a Medicaid-required benefit.

## TITLE III—REMOVAL OF BARRIERS TO PRACTICE ON CERTIFIED NURSE-MIDWIVES

- Sec. 301. Improving access to training in maternity care.
- Sec. 302. Improving Medicare patient access to home health services provided by certified nurse-midwives.
- Sec. 303. Improving access to DMEPOS for Medicare beneficiaries.
- Sec. 304. Technical changes to qualifications and conditions with respect to the services of certified nurse-midwives.

## TITLE IV—IMPROVING FEDERAL HEALTH PROGRAMS FOR ALL ADVANCED PRACTICE REGISTERED NURSES

- Sec. 401. Revising the local coverage determination process under the Medicare program.
- Sec. 402. Locum tenens.

## TITLE V—EFFECTIVE DATE

- Sec. 501. Effective date.

1 **TITLE I—REMOVAL OF BAR-**  
 2 **RIERS TO PRACTICE ON**  
 3 **NURSE PRACTITIONERS**

4 **SEC. 101. EXPANDING ACCESS TO CARDIAC REHABILITA-**  
 5 **TION PROGRAMS AND PULMONARY REHA-**  
 6 **BILITATION PROGRAMS UNDER MEDICARE**  
 7 **PROGRAM.**

8 (a) CARDIAC REHABILITATION PROGRAMS.—Section  
 9 1861(eee) of the Social Security Act (42 U.S.C.  
 10 1395x(eee)) is amended—

11 (1) in paragraph (2)—

12 (A) in subparagraph (A)(i), by striking “a  
 13 physician’s office” and inserting “the office set-  
 14 ting”; and

15 (B) in subparagraph (C), by inserting after  
 16 “physician” the following: “(as defined in sub-  
 17 section (r)(1)) or a physician assistant, nurse  
 18 practitioner, or clinical nurse specialist (as  
 19 those terms are defined in subsection (aa)(5))”;

20 (2) in paragraph (3)(A), by striking “physician-  
 21 prescribed exercise” and inserting “exercise pre-  
 22 scribed by a physician (as defined in subsection  
 23 (r)(1)) or a physician assistant, nurse practitioner,  
 24 or clinical nurse specialist (as those terms are de-  
 25 fined in subsection (aa)(5))”; and

1           (3) in paragraph (5), by inserting after “physi-  
 2       cian” the following: “(as defined in subsection  
 3       (r)(1)) or a physician assistant, nurse practitioner,  
 4       or clinical nurse specialist (as those terms are de-  
 5       fined in subsection (aa)(5))”.

6       (b) PULMONARY REHABILITATION PROGRAMS.—Sec-  
 7       tion 1861(fff) of the Social Security Act (42 U.S.C.  
 8       1395x(fff)) is amended—

9           (1) in paragraph (2)(A), by striking “physician-  
 10      prescribed exercise” and inserting “exercise pre-  
 11      scribed by a physician (as defined in subsection  
 12      (r)(1)) or a physician assistant, nurse practitioner,  
 13      or clinical nurse specialist (as those terms are de-  
 14      fined in subsection (aa)(5))”; and

15          (2) in paragraph (3), by inserting after “physi-  
 16      cian” the following: “(as defined in subsection  
 17      (r)(1)) or a physician assistant, nurse practitioner,  
 18      or clinical nurse specialist (as those terms are de-  
 19      fined in subsection (aa)(5))”.

1 **SEC. 102. PERMITTING NURSE PRACTITIONERS AND PHYSI-**  
 2 **CIAN ASSISTANTS TO SATISFY MEDICARE**  
 3 **DOCUMENTATION REQUIREMENT FOR COV-**  
 4 **ERAGE OF CERTAIN SHOES FOR INDIVIDUALS**  
 5 **WITH DIABETES.**

6 Section 1861(s)(12) of the Social Security Act (42  
 7 U.S.C. 1395x(s)(12)) is amended—

8 (1) in subparagraph (A), by inserting “, nurse  
 9 practitioner, or physician assistant” after “physi-  
 10 cian”; and

11 (2) in subparagraph (C), by inserting “, nurse  
 12 practitioner, or physician assistant” after each oc-  
 13 currence of “physician”.

14 **SEC. 103. IMPROVEMENTS TO THE ASSIGNMENT OF BENE-**  
 15 **FICIARIES UNDER THE MEDICARE SHARED**  
 16 **SAVINGS PROGRAM.**

17 Section 1899(c)(1) of the Social Security Act (42  
 18 U.S.C. 1395jjj(c)(1)) is amended—

19 (1) in subparagraph (A), by striking “and” at  
 20 the end;

21 (2) in subparagraph (B), by striking the period  
 22 at the end and inserting “; and”; and

23 (3) by adding at the end the following new sub-  
 24 paragraph:

25 “(C) in the case of performance years be-  
 26 ginning on or after January 1, 2026, primary

1           care services provided under this title by an  
 2           ACO professional described in subsection  
 3           (h)(1)(B).”.

4   **SEC. 104. EXPANDING THE AVAILABILITY OF MEDICAL NU-**  
 5                   **TRITION THERAPY SERVICE MEDICARE PRO-**  
 6                   **GRAM.**

7           Section 1861(vv)(1) of the Social Security Act (42  
 8   U.S.C. 1395x(vv)(1)) is amended by inserting “ or a nurse  
 9   practitioner, a clinical nurse specialist, or a physician as-  
 10   sistant (as such terms are defined in subsection (aa)(5))”  
 11   before the period at the end.

12   **SEC. 105. PRESERVING ACCESS TO HOME INFUSION THER-**  
 13                   **APY.**

14           (a) ALLOWING APPLICABLE PROVIDERS TO ESTAB-  
 15   LISH HOME INFUSION THERAPY PLANS.—Section  
 16   1861(iii)(1)(B) of the Social Security Act (42 U.S.C.  
 17   1395x(iii)(1)(B)) is amended—

18               (1) by striking “a physician (as defined in sub-  
 19           section (r)(1))” and inserting “an applicable pro-  
 20           vider (as defined in paragraph (3)(A))”; and

21               (2) by striking “a physician (as so defined)”  
 22           and inserting “an applicable provider (as so de-  
 23           fined)”.

24           (b) CONFORMING AMENDMENT.—Section 1834(u)(6)  
 25   of the Social Security Act (42 U.S.C. 1395m(u)(6)) is

1 amended by striking “physician” and inserting “applicable  
2 provider (as defined in section 1861(iii)(3)(A))”.

3 **SEC. 106. INCREASING ACCESS TO HOSPICE CARE SERV-**  
4 **ICES.**

5 (a) IN GENERAL.—Section 1814(a)(7)(A) of the So-  
6 cial Security Act (42 U.S.C. 1395f(a)(7)(A)) is amend-  
7 ed—

8 (1) in clause (i)—

9 (A) in subclause (I), by striking “a nurse  
10 practitioner or”;

11 (B) in subclause (II), by inserting “or  
12 nurse practitioner” after “physician”; and

13 (C) in the flush matter following subclause  
14 (II), by inserting “, nurse practitioner’s,” after  
15 “physician’s”; and

16 (2) in clause (ii), by striking “or physician” and  
17 inserting “, physician, or nurse practitioner”.

18 (b) HOSPICE CARE DEFINITION.—Section  
19 1861(dd)(1)(C) of the Social Security Act (42 U.S.C.  
20 1395x(dd)(1)(C)) is amended by inserting “or nurse prac-  
21 tititioner” after “physician”.

22 (c) NURSE PRACTITIONER BILLING.—Not later than  
23 90 days after the date of the enactment of this Act, the  
24 Secretary of Health and Human Services shall revise sec-  
25 tion 418.304 of title 42, Code of Federal Regulations, to

1 allow nurse practitioners to bill for services not described  
 2 in paragraph (a) of such section in the same manner as  
 3 physicians may bill for such services in accordance with  
 4 paragraph (b) of such section. Such revision shall provide  
 5 that such services furnished by a nurse practitioner shall  
 6 be payable at the percent of the physician fee schedule  
 7 specified in section 1833(a)(1)(O) of the Social Security  
 8 Act (42 U.S.C. 1395l(a)(1)(O)).

9 **SEC. 107. STREAMLINING CARE DELIVERY IN SKILLED**  
 10 **NURSING FACILITIES AND NURSING FACILI-**  
 11 **TIES; AUTHORIZING MEDICARE AND MED-**  
 12 **ICAID INPATIENT HOSPITAL PATIENTS TO BE**  
 13 **UNDER THE CARE OF A NURSE PRACTI-**  
 14 **TIONER.**

15 (a) MEDICARE.—

16 (1) CERTIFICATION OF POST-HOSPITAL EX-  
 17 TENDED CARE SERVICES.—Section 1814(a)(2) of the  
 18 Social Security Act (42 U.S.C. 1395f(a)(2)) is  
 19 amended, in the matter preceding subparagraph (A),  
 20 by striking “, or a nurse practitioner,” and inserting  
 21 “or a nurse practitioner (in accordance with State  
 22 law), or”.

23 (2) CERTIFICATION AUTHORITY FOR NURSE  
 24 PRACTITIONERS.—Section 1814(a)(3) of the Social



Security Act (42 U.S.C. 1395f(a)(3)) is amended by inserting “or nurse practitioner” after “physician”.

(3) SUPERVISION REQUIREMENT IN SKILLED NURSING FACILITY SERVICES AND RESIDENT’S RIGHTS.—Section 1819 of the Social Security Act (42 U.S.C. 1395i–3(b)(6)) is amended—

(A) in subsection (b)—

(i) in paragraph (2)(B), by inserting “or nurse practitioner” after “attending physician”; and

(ii) in paragraph (6)—

(I) in the heading, by striking “PHYSICIAN SUPERVISION” and inserting “SUPERVISION”; and

(II) in subparagraph (A), by inserting “or a nurse practitioner, in accordance with State law” after “physician”; and

(B) in subsection (c)—

(i) in subparagraph (1)(A)(i), by inserting “or nurse practitioner” after “attending physician”;

(ii) in the flush matter at the end of subparagraph (2)(A), by inserting “or

nurse practitioner” after “physician” in each occurrence; and

(iii) in subparagraph (3)(A), by inserting “or nurse practitioner” after “physician”.

(4) ADMINISTRATION OF PART B.—Section 1842(b)(2)(C) of the Social Security Act (42 U.S.C. 1395u(b)(2)(C)) is amended, in the second sentence—

(A) by inserting “or a nurse practitioner” after “a physician”; and

(B) by striking “or a nurse practitioner working in collaboration with that physician, or both”.

(5) PROVISION OF MEDICAL AND OTHER HEALTH SERVICES.—Section 1861(s)(2)(K)(ii) of the Social Security Act (42 U.S.C. 1395x(s)(2)(K)(ii)) is amended by striking “or clinical nurse specialist (as defined in subsection (aa)(5)) working in collaboration (as defined in subsection (aa)(6)) with a physician (as defined in subsection (r)(1))” and inserting “(as defined in subsection (aa)(5)(A)), or by a clinical nurse specialist (as defined in subsection (aa)(5)(B)) working in col-

laboration with a physician (as defined in subsection (r)(1)),”.

(6) PRIVILEGES FOR NURSE PRACTITIONERS.—  
Section 1861 of the Social Security Act (42 U.S.C. 1395x) is amended—

(A) in subsection (e)(4), by inserting “(or nurse practitioner, in accordance with State law)” after “physician”;

(B) in subsection (f)(1), by inserting “or nurse practitioner” after “physician”; and

(C) in each of subparagraphs (B) and (F) of subsection (ee)(2), by inserting “or nurse practitioner” after “physician”.

(b) MEDICAID.—

(1) CERTIFICATION AUTHORITY FOR NURSE PRACTITIONERS.—Section 1902(a)(44) of the Social Security Act (42 U.S.C. 1396a(a)(44)) is amended to read as follows:

“(44) in each case for which payment for inpatient hospital services, skilled nursing facility services, services in an intermediate care facility described in section 1905(d), or inpatient mental hospital services is made under the State plan—

“(A) a physician or nurse practitioner (or, in the case of skilled nursing facility services or

1 intermediate care facility services, a physician  
2 or nurse practitioner, or a clinical nurse spe-  
3 cialist who is not an employee of the facility but  
4 is working in collaboration with a physician)  
5 certifies at the time of admission, or, if later,  
6 the time the individual applies for medical as-  
7 sistance under the State plan (and a physician  
8 or nurse practitioner, or a physician assistant  
9 under the supervision of a physician, or, in the  
10 case of skilled nursing facility services or inter-  
11 mediate care facility services, a physician or  
12 nurse practitioner, or a clinical nurse specialist  
13 who is not an employee of the facility but is  
14 working in collaboration with a physician, recer-  
15 tifies, where such services are furnished over a  
16 period of time, in such cases, at least as often  
17 as required under section 1903(g)(6) (or, in the  
18 case of services that are services provided in an  
19 intermediate care facility, every year), and ac-  
20 companied by such supporting material, appro-  
21 priate to the case involved, as may be provided  
22 in regulations of the Secretary), that such serv-  
23 ices are or were required to be given on an in-  
24 patient basis because the individual needs or  
25 needed such services, and

“(B) such services were furnished under a plan established and periodically reviewed and evaluated by a physician or nurse practitioner, or, in the case of skilled nursing facility services or intermediate care facility services, by a physician or nurse practitioner, or a clinical nurse specialist who is not an employee of the facility but is working in collaboration with a physician;”.

(2) NURSING FACILITY SERVICES SUPERVISION AND CLINICAL RECORDS.—Section 1919(b)(6)(A) of the Social Security Act (42 U.S.C. 1396r(b)(6)(A)) is amended to read as follows:

“(A) require that the health care of every resident be provided under the supervision of a physician or nurse practitioner (or, at the option of a State, under the supervision of a clinical nurse specialist or physician assistant who is not an employee of the facility but who is working in collaboration with a physician);”.

**SEC. 108. IMPROVING ACCESS TO MEDICAID CLINIC SERVICES.**

Section 1905(a)(9) of the Social Security Act (42 U.S.C. 1396d(a)(9)) is amended by adding “or nurse

1 practitioner” after “physician” in both places that it ap-  
 2 pears.

3 **TITLE II—REMOVAL OF BAR-**  
 4 **RIERS TO PRACTICE ON CER-**  
 5 **TIFIED REGISTERED NURSE**  
 6 **ANESTHETISTS**

7 **SEC. 201. CLARIFYING THAT CERTIFIED REGISTERED**  
 8 **NURSE ANESTHETISTS CAN BE REIMBURSED**  
 9 **BY MEDICARE FOR EVALUATION AND MAN-**  
 10 **AGEMENT SERVICES.**

11 Section 1861(bb)(1) of the Social Security Act (42  
 12 U.S.C. 1395x(bb)(1)) is amended by inserting “, including  
 13 pre-anesthesia evaluation and management services,”  
 14 after “and related care”.

15 **SEC. 202. REVISION OF CONDITIONS OF PAYMENT RELAT-**  
 16 **ING TO SERVICES ORDERED AND REFERRED**  
 17 **BY CERTIFIED REGISTERED NURSE ANES-**  
 18 **THETISTS.**

19 Not later than 3 months after the date of enactment  
 20 of this Act, the Secretary of Health and Human Services  
 21 shall revise section 410.69 of title 42, Code of Federal  
 22 Regulations, to clarify that, for purposes of payment  
 23 under part B of title XVIII of the Social Security Act—

24 (1) certified registered nurse anesthetists are  
 25 authorized to order, certify, and refer services to the

1 extent allowed under the law of the State in which  
 2 the services are furnished; and

3 (2) payment shall be made under such part for  
 4 such services so ordered, certified, or referred by  
 5 certified registered nurse anesthetists.

6 **SEC. 203. SPECIAL PAYMENT RULE FOR TEACHING STU-**  
 7 **DENT REGISTERED NURSE ANESTHETISTS.**

8 Section 1848(a)(6) of the Social Security Act (42  
 9 U.S.C. 1395w-4(a)(6)) is amended, in the matter pre-  
 10 ceding subparagraph (A), by inserting “or student reg-  
 11 istered nurse anesthetists” after “physician residents”.

12 **SEC. 204. REMOVING UNNECESSARY AND COSTLY SUPER-**  
 13 **VISION OF CERTIFIED REGISTERED NURSE**  
 14 **ANESTHETISTS.**

15 Section 1861(bb)(2) of the Social Security Act (42  
 16 U.S.C. 1395x(bb)(2)) is amended—

17 (1) in the second sentence, by inserting “, but  
 18 may not require that certified registered nurse anes-  
 19 thetists provide services under the supervision of a  
 20 physician” after “certification of nurse anes-  
 21 thetists”; and

22 (2) in the third sentence, by inserting “under  
 23 the supervision of an anesthesiologist” after “an an-  
 24 esthesiologist assistant”.

1 **SEC. 205. CRNA SERVICES AS A MEDICAID-REQUIRED BEN-**  
 2 **EFIT.**

3 (a) IN GENERAL.—Section 1905(a)(5) of the Social  
 4 Security Act (42 U.S.C. 1396d(a)(5)) is amended—

5 (1) by striking “and (B)” and inserting “(B)”;  
 6 and

7 (2) by inserting before the semicolon at the end  
 8 the following: “, and (C) services furnished by a cer-  
 9 tified registered nurse anesthetist (as defined in sec-  
 10 tion 1861(bb)(2)), which such certified registered  
 11 nurse anesthetist is authorized to perform under  
 12 State law (or the State regulatory mechanism as  
 13 provided by State law)”.

14 (b) PAYMENT.—Section 1902(a) of the Social Secu-  
 15 rity Act (42 U.S.C. 1396d(a)) is amended—

16 (1) in paragraph (86), by striking “and” at the  
 17 end;

18 (2) in paragraph (87), by striking the period  
 19 and inserting “; and”; and

20 (3) by inserting after paragraph (87) the fol-  
 21 lowing new paragraph:

22 “(88) provide for payment for the services of a  
 23 certified registered nurse anesthetist (as defined in  
 24 section 1861(bb)(1)) in amounts no lower than the  
 25 amounts, using the same methodology, used for pay-  
 26 ment for amounts under section 1833(a)(1)(H).”.



1 **TITLE III—REMOVAL OF BAR-**  
 2 **RIERS TO PRACTICE ON CER-**  
 3 **TIFIED NURSE-MIDWIVES**

4 **SEC. 301. IMPROVING ACCESS TO TRAINING IN MATERNITY**  
 5 **CARE.**

6 (a) MEDICARE PAYMENTS FOR SUPERVISION BY  
 7 CERTIFIED NURSE-MIDWIVES.—Paragraph (1) of section  
 8 1861(gg) of the Social Security Act (42 U.S.C. 1395x(gg))  
 9 is amended to read as follows:

10 “(1) The term ‘certified nurse-midwife services’  
 11 means—

12 “(A) such services furnished by a certified  
 13 nurse-midwife (as defined in paragraph (2));  
 14 and

15 “(B) such services (and such supplies and  
 16 services furnished as an incident to the nurse-  
 17 midwife’s service) which—

18 “(i) the certified nurse-midwife is le-  
 19 gally authorized to perform under State  
 20 law (or the State regulatory mechanism  
 21 provided by State law) as would otherwise  
 22 be covered if furnished by a physician;

23 “(ii) are furnished under the super-  
 24 vision of a certified-nurse midwife by an

1 intern or resident-in-training (as described  
2 in subsection (b)(6));

3 “(iii) would otherwise be described in  
4 subparagraph (A) if furnished by a cer-  
5 tified nurse-midwife; and

6 “(iv) would otherwise be covered if  
7 furnished under the supervision of a physi-  
8 cian.”.

9 (b) CLARIFYING PERMISSIBILITY OF USING CERTAIN  
10 GRANTS FOR CLINICAL TRAINING BY CERTIFIED NURSE-  
11 MIDWIVES.—Section 811(a)(1) of the Public Health Serv-  
12 ice Act (42 U.S.C. 296j(a)(1)) is amended by inserting  
13 “, including clinical training,” after “projects”.

14 **SEC. 302. IMPROVING MEDICARE PATIENT ACCESS TO**  
15 **HOME HEALTH SERVICES PROVIDED BY CER-**  
16 **TIFIED NURSE-MIDWIVES.**

17 (a) IN GENERAL.—Section 1835(a) of the Social Se-  
18 curity Act (42 U.S.C. 1395n(a)) is amended—

19 (1) in paragraph (2)—

20 (A) in the matter preceding subparagraph  
21 (A), by inserting “or a certified nurse-midwife  
22 (as defined in section 1861(gg)),” after “or a  
23 physician assistant (as defined in section  
24 1861(aa)(5)) who is working in accordance with  
25 State law,”; and

1 (B) in subparagraph (A)—

2 (i) in each of clauses (ii) and (iii), by  
3 striking “or a physician assistant (as the  
4 case may be)” and inserting “a physician  
5 assistant, or a certified nurse-midwife (as  
6 the case may be)”; and

7 (ii) in clause (iv), by—

8 (I) inserting “or by a certified  
9 nurse-midwife (as defined in section  
10 1861(gg))” after “(but in no case  
11 later than the date that is 6 months  
12 after the date of the enactment of the  
13 CARES Act)”; and

14 (II) by striking “(as defined in  
15 section 1861(gg))”; and

16 (2) in the matter following paragraph (2), by  
17 striking “or physician assistant (as the case may  
18 be)” and inserting “physician assistant, or certified  
19 nurse-midwife (as the case may be)” each place it  
20 appears.

21 (b) CONFORMING AMENDMENTS.—Section 1895 of  
22 the Social Security Act (42 U.S.C. 1395(fff)) is amend-  
23 ed—

24 (1) in subsection (c)(1), by inserting “the cer-  
25 tified nurse-midwife (as defined in section

1 1861(gg)),” after “clinical nurse specialist (as those  
2 terms are defined in section 1861(aa)(5)),”; and

3 (2) in subsection (e)(1)(A), by striking “a phy-  
4 sician a nurse practitioner or clinical nurse spe-  
5 cialist,” and inserting “a physician, a nurse practi-  
6 tioner, a clinical nurse specialist, a certified nurse-  
7 midwife,”.

8 **SEC. 303. IMPROVING ACCESS TO DMEPOS FOR MEDICARE**  
9 **BENEFICIARIES.**

10 Section 1834(a) of the Social Security Act (42 U.S.C.  
11 1395m(a)) is amended—

12 (1) in paragraph (1)(E)(ii) by striking “or a  
13 clinical nurse specialist (as those terms are defined  
14 in section 1861(aa)(5))” and inserting “, a clinical  
15 nurse specialist (as those terms are defined in sec-  
16 tion 1861(aa)(5)), or a certified nurse-midwife (as  
17 defined in section 1861(gg))”; and

18 (2) in paragraph (11)(B)(ii)—

19 (A) by striking “or a clinical nurse spe-  
20 cialist (as those terms are defined in section  
21 1861(aa)(5))” and inserting “a clinical nurse  
22 specialist (as those terms are defined in section  
23 1861(aa)(5)), or a certified nurse-midwife (as  
24 defined in section 1861(gg))”; and

(B) by striking “or specialist” and inserting “specialist, or nurse-midwife”.

**SEC. 304. TECHNICAL CHANGES TO QUALIFICATIONS AND  
CONDITIONS WITH RESPECT TO THE SERVICES OF CERTIFIED NURSE-MIDWIVES.**

Section 1861(gg)(2) of the Social Security Act (42 U.S.C. 1395x(gg)(2)) is amended by striking “, or has been certified by an organization recognized by the Secretary” and inserting “and has been certified by the American Midwifery Certification Board (or a successor organization)”.

**TITLE IV—IMPROVING FEDERAL  
HEALTH PROGRAMS FOR ALL  
ADVANCED PRACTICE REGISTERED NURSES**

**SEC. 401. REVISING THE LOCAL COVERAGE DETERMINATION PROCESS UNDER THE MEDICARE PROGRAM.**

(a) IN GENERAL.—Section 1862(l)(5) of the Social Security Act (42 U.S.C. 1395y(l)(5)) is amended—

(1) in subparagraph (D), by adding at the end the following new clauses:

“(vi) Identification of any medical or scientific experts whose advice was obtained by such contractor during the devel-

opment of such determination, whether or  
not such contractor relied on such advice  
in developing such determination.

“(vii) A hyperlink to any written communication between such contractor and another entity that such contractor relied on when developing such determination.

“(viii) A hyperlink to any rule, guideline, protocol, or other criterion that such contractor relied on when developing such determination.”; and

(2) by adding at the end the following new subparagraphs:

“(E) PROHIBITION ON IMPOSITION OF PRACTITIONER QUALIFICATIONS.—The Secretary shall prohibit a Medicare administrative contractor that develops a local coverage determination from imposing such determination on any coverage limitation with respect to the qualifications of a physician (as defined in section 1861(r)) or a practitioner described in section 1842(b)(18)(C) who may furnish the item or service that is the subject of such determination.

1           “(F) CIVIL MONETARY PENALTY.—A  
 2 Medicare administrative contractor that devel-  
 3 ops a local coverage determination that fails to  
 4 make information described in subparagraph  
 5 (D) available as required by the Secretary  
 6 under such subparagraph or comply with the  
 7 prohibition under subparagraph (E) is subject  
 8 to a civil monetary penalty of not more than  
 9 \$10,000 for each such failure. The provisions of  
 10 section 1128A (other than subsections (a) and  
 11 (b)) shall apply to a civil money penalty under  
 12 the previous sentence in the same manner as  
 13 such provisions apply to a penalty or proceeding  
 14 under section 1128A(a).”.

15       (b) TIMING OF REVIEW.—Section 1869(f)(2) of the  
 16 Social Security Act (42 U.S.C. 1395ff(f)(2)) is amended  
 17 by adding at the end the following new subparagraph:

18           “(D) TIMING OF REVIEW.—An aggrieved  
 19 party may file a complaint described in sub-  
 20 paragraph (A) with respect to a local coverage  
 21 determination on or after the date that such de-  
 22 termination is posted, in accordance with sec-  
 23 tion 1862(l)(5)(D), on the Internet website of  
 24 the Medicare administrative contractor making

1           such determination, whether or not such deter-  
 2           mination has taken effect.”.

3           (c) EFFECTIVE DATE.—The amendments made by  
 4 this section shall apply to local coverage determinations  
 5 made available on the internet website of a Medicare ad-  
 6 ministrative contractor and on the Medicare internet  
 7 website on or after the date of the enactment of this Act.

8 **SEC. 402. LOCUM TENENS.**

9           Section 1842(b)(6) of the Social Security Act (42  
 10 U.S.C. 1395u(b)(6)) is amended, in the first sentence—

11           (1) by striking “and (J)” and inserting “(J)”;  
 12           and

13           (2) by inserting before the period at the end the  
 14 following: “, and (K) in the case of services fur-  
 15 nished by a certified registered nurse anesthetist (as  
 16 defined in section 1861(bb)(2)), nurse practitioner,  
 17 or clinical nurse specialist (as defined in section  
 18 1861(aa)(5)), or a certified nurse midwife (as de-  
 19 fined in section 1861(gg)(2)), subparagraph (D) of  
 20 this sentence shall apply to such services and such  
 21 anesthetist, practitioner, specialist, or nurse-midwife  
 22 in the same manner as such subparagraph applies to  
 23 physicians’ services furnished by physicians”.



1       **TITLE V—EFFECTIVE DATE**

2   **SEC. 501. EFFECTIVE DATE.**

3       The provisions of, including the amendments made  
4 by, this Act (other than sections 103 and 401) shall apply  
5 with respect to items and services furnished on or after  
6 the date that is 90 days after the date of the enactment  
7 of this Act. Notwithstanding any other provision of law,  
8 the Secretary of Health and Human Services shall imple-  
9 ment such provisions, including such amendments,  
10 through interim final rule or subregulatory guidance if the  
11 Secretary determines such implementation to be necessary  
12 for purposes of complying with the preceding sentence or  
13 with any other effective date provided in this Act.

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