

117TH CONGRESS
1ST SESSION

H. R. 107

To provide funds to the Centers for Medicare & Medicaid Services to provide grants to entities to establish lung cancer screening registries approved by the Centers for Medicare & Medicaid Services for submission of certain data required for reimbursement under the Medicare program for certain screening services, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 4, 2021

Mr. HIGGINS of New York 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 provide funds to the Centers for Medicare & Medicaid Services to provide grants to entities to establish lung cancer screening registries approved by the Centers for Medicare & Medicaid Services for submission of certain data required for reimbursement under the Medicare program for certain screening services, 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,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Lung Cancer Screen-
3 ing Registry and Quality Improvement Act of 2021.”

4 **SEC. 2. GRANTS TO ESTABLISH LUNG CANCER SCREENING**
5 **REGISTRIES APPROVED BY THE CENTERS**
6 **FOR MEDICARE & MEDICAID SERVICES FOR**
7 **SUBMISSION OF CERTAIN DATA REQUIRED**
8 **FOR REIMBURSEMENT UNDER THE MEDI-**
9 **CARE PROGRAM FOR CERTAIN SCREENING**
10 **SERVICES.**

11 (a) GRANTS.—There is appropriated to the Centers
12 for Medicare & Medicaid Services, out of any moneys in
13 the Treasury not otherwise appropriated, \$2,000,000 for
14 each of fiscal years 2022 through 2026 to make grants
15 to entities to establish and carry out registries that are
16 approved by the Centers for Medicare & Medicaid Services
17 as meeting the requirements described in the Final Na-
18 tional Coverage Determination on Screening for Lung
19 Cancer with Low Dose Computed Tomography published
20 on February 5, 2015.

21 (b) LIMITATION.—As a condition of receiving a grant
22 pursuant to subsection (a), with respect to a registry de-
23 scribed in such subsection, an entity may not charge any
24 fee for access to such registry.

1 **SEC. 3. ENCOURAGING DATA INTEROPERABILITY AMONG**
2 **LUNG CANCER SCREENING REGISTRIES.**

3 The Secretary of Health and Human Services shall
4 take such actions as may be necessary to ensure data
5 interoperability between all registries described in section
6 1(a) (including such registries established using funds pro-
7 vided under such section, interoperability between all
8 CMS-approved lung cancer screening registries), including
9 by—

10 (1) requiring interoperability as a condition of
11 receiving any Federal funding for such a registry;
12 and

13 (2) revoking any such funding for such a reg-
14 istry if the registry is not interoperable with other
15 such registries.

16 **SEC. 4. GRANTS FOR THE DEVELOPMENT OF LUNG CANCER**
17 **SCREENING, DETECTION, AND PREVENTION**
18 **QUALITY MEASURES.**

19 (a) IN GENERAL.—Subject to subsection (c), the Sec-
20 retary of Health and Human Services shall award com-
21 petitive grants to organizations with quality measure de-
22 velopment expertise to develop, using data contained in
23 registries described in section 1(a) (including such a reg-
24 istry established using funds provided under such section),
25 quality and efficiency measures described in subsection (b)
26 for review and potential endorsement by a consensus-

1 based entity with a contract in effect under section 1890
2 of the Social Security Act (42 U.S.C. 1395aaa) for uses
3 including as described in subsection (b)(7)(B) of such sec-
4 tion.

5 (b) QUALITY AND EFFICIENCY MEASURES DE-
6 SCRIBED.—For purposes of subsection (a), quality and ef-
7 ficiency measures described in this subsection are quality
8 and efficiency measures to improve health care efficiency
9 and outcomes with respect to lung cancer screening prac-
10 tices, early detection of lung cancer, and lung cancer pre-
11 vention.

12 (c) AUTHORIZATION OF APPROPRIATIONS.—There is
13 authorized to be appropriated to carry out subsection (a)
14 \$1,000,000 for each of fiscal years 2022 through 2026.

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