

119TH CONGRESS
1ST SESSION

H. R. 1931

To amend title XVIII of the Social Security Act to facilitate patient access to certain pediatric technologies.

IN THE HOUSE OF REPRESENTATIVES

MARCH 6, 2025

Mr. JOYCE of Pennsylvania (for himself and Mrs. TRAHAN) 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 facilitate patient access to certain pediatric technologies.

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 “Access to Pediatric
5 Technologies Act of 2025”.

1 **SEC. 2. FACILITATING ACCESS TO PEDIATRIC TECH-**
2 **NOLOGIES.**

3 (a) IN GENERAL.—Section 1848 of the Social Secu-
4 rity Act (42 U.S.C. 1395w–4) is amended by adding at
5 the end the following new subsection:

6 “(u) FACILITATING ACCESS TO PEDIATRIC TECH-
7 NOLOGIES.—

8 “(1) IN GENERAL.—For each qualifying pedi-
9 atric technology (as defined in paragraph (4)) fur-
10 nished on or after January 1, 2026, the Secretary
11 shall, upon receipt of a manufacturer request under
12 paragraph (3), establish national relative value units
13 under the physician fee schedule established under
14 this section, to the extent no such national relative
15 value units have been established for such qualifying
16 pediatric technology under such fee schedule.

17 “(2) PAYMENT METHODOLOGY.—The Secretary
18 shall establish national relative value units for a
19 qualifying pediatric technology under this sub-
20 section—

21 “(A) in accordance with the payment
22 methodology established under this section and
23 applicable regulations; and

24 “(B) using available data related to the
25 qualifying pediatric technology, which may in-
26 clude applicable contractor pricing information,

1 claims data, time and motion studies, invoice
2 information, or other information used by the
3 Secretary in establishing payment rates.

4 “(3) IMPLEMENTATION.—

5 “(A) IN GENERAL.—Upon written request
6 to the Secretary from the manufacturer of a
7 qualifying pediatric technology, the Secretary
8 shall establish national relative value units
9 under paragraph (1) through the annual rule-
10 making process for the physician fee schedule
11 established under this section, in accordance
12 with the timeline described in subparagraph
13 (B).

14 “(B) TIMELINE.—

15 “(i) In the case where the Secretary
16 receives a request under this paragraph on
17 or before May 1 of a given year from a
18 manufacturer with respect to a qualifying
19 pediatric technology of the manufacturer,
20 the Secretary shall establish national rel-
21 ative value units for the qualifying pedi-
22 atric technology in the rulemaking process
23 during that year for the physician fee
24 schedule established under this section.

1 “(ii) In the case where the Secretary
2 receives a request under this paragraph
3 after May 1 of a given year from a manu-
4 facturer with respect to a qualifying pedi-
5 atric technology of the manufacturer, the
6 Secretary shall establish national relative
7 value units for the qualifying pediatric
8 technology in the rulemaking process dur-
9 ing the following year for the physician fee
10 schedule established under this section.

11 “(C) CONTENT OF MANUFACTURER RE-
12 QUESTS.—A manufacturer submitting a request
13 under paragraph with respect to a qualifying
14 pediatric technology of the manufacturer shall
15 include in such request information to verify
16 that the technology is a qualifying pediatric
17 technology and to allow the Secretary to estab-
18 lish national relative value units for such tech-
19 nology, including (to the extent available) con-
20 tractor pricing information, claims data, time
21 and motion studies, invoice information, or
22 other relevant information.

23 “(4) QUALIFYING PEDIATRIC TECHNOLOGY DE-
24 FINED.—In this subsection, the term ‘qualifying pe-
25 diatric technology’ means a medical device that is—

1 “(A) covered under this title;

2 “(B) approved, cleared, or authorized
3 under section 510(k), 513(f)(2), or 515 of the
4 Federal Food, Drug, and Cosmetic Act (21
5 U.S.C. 360(k), 360c(f)(2), 360e);

6 “(C) described by a temporary Level I
7 HCPCS Code intended for emerging tech-
8 nologies, services, or procedures; and

9 “(D)(i) used as part of a procedure pre-
10 dominantly performed on pediatric patients; or

11 “(ii) has otherwise been specifically de-
12 signed for safe and effective use in pediatric
13 populations.

14 “(5) RULE OF CONSTRUCTION.—Nothing in
15 this subsection shall be construed to require cov-
16 erage of a qualifying pediatric technology under this
17 title or alter the requirements of section
18 1862(a)(1)(A).”.

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