

119TH CONGRESS
1ST SESSION

S. _____

To amend title XVIII of the Social Security Act to improve the payment method for oxygen and oxygen related equipment, supplies, and services, to increase beneficiary access to oxygen and oxygen related equipment, supplies, and services, and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. CASSIDY (for himself, Ms. KLOBUCHAR, and Mr. WARNER) introduced the following bill; which was read twice and referred to the Committee on

A BILL

To amend title XVIII of the Social Security Act to improve the payment method for oxygen and oxygen related equipment, supplies, and services, to increase beneficiary access to oxygen and oxygen related equipment, supplies, and 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,*

3 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

4 (a) SHORT TITLE.—This Act may be cited as the
5 “Supplemental Oxygen Access Reform Act of 2025” or the
6 “SOAR Act of 2025”.

1 (b) TABLE OF CONTENTS.—The table of contents for
 2 this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—PROTECT BENEFICIARY ACCESS TO SUPPLEMENTAL
 OXYGEN THERAPY IN THE HOME AND COMMUNITY

Sec. 101. Reform of the medicare supplemental oxygen benefit.

Sec. 102. Establishment of supplemental oxygen responsibilities criteria.

Sec. 103. Technical corrections.

TITLE II—PROTECTING BENEFICIARY ACCESS TO RESPIRATORY
 THERAPISTS

Sec. 201. Reimbursement for respiratory therapists.

TITLE III—ADOPTION OF ELECTRONIC TEMPLATES TO
 STRENGTHEN FRAUD AND ABUSE PROTECTIONS AND ENSURE
 PROGRAM INTEGRITY

Sec. 301. Strengthening program integrity through the use of electronic templates to document medical necessity, and restoring clinical inference for oxygen and oxygen related equipment, supplies, and services.

Sec. 302. Establishing notice requirements for individuals receiving oxygen or oxygen related equipment, supplies, or services.

TITLE IV—ESTABLISHMENT OF BENEFICIARY RIGHTS

Sec. 401. Establishing protections for individuals receiving oxygen or oxygen related equipment, supplies, or services.

3 **TITLE I—PROTECT BENE-**
 4 **FICIARY ACCESS TO SUPPLE-**
 5 **MENTAL OXYGEN THERAPY**
 6 **IN THE HOME AND COMMU-**
 7 **NITY**

8 **SEC. 101. REFORM OF THE MEDICARE SUPPLEMENTAL OX-**
 9 **YGEN BENEFIT.**

10 (a) REMOVING OXYGEN AND OXYGEN RELATED
 11 EQUIPMENT, SUPPLIES, AND SERVICES FROM COMPETI-
 12 TIVE ACQUISITION PROGRAM TO IMPROVE PATIENT AC-
 13 CESS TO SUPPLEMENTAL OXYGEN THERAPY.—Section

1 1847(a)(3) of the Social Security Act (42 U.S.C. 1395w—
2 3(a)(3)) is amended by—

3 (1) inserting “AND EXCLUSION” after “EXCEP-
4 TION AUTHORITY”;

5 (2) by redesignating subparagraphs (A) and
6 (B) as clauses (i) and (ii), respectively, and moving
7 such clauses as so redesignated 2 ems to the right;

8 (3) by striking “In carrying out” and inserting
9 the following:

10 “(A) IN GENERAL.—In carrying out”; and

11 (4) by adding at the end the following new sub-
12 paragraph:

13 “(B) EXCLUSION OF OXYGEN, AND OXY-
14 GEN RELATED EQUIPMENT, SUPPLIES, AND
15 SERVICES.—Beginning on or after January 1,
16 2026, the Secretary shall exclude oxygen and
17 oxygen related equipment, supplies, and services
18 from the competitive acquisition program under
19 this section and payment for oxygen and oxygen
20 related equipment, supplies, and services shall
21 be made as prescribed under subparagraphs
22 (E), (F), and (H) of section 1834(a)(9).”.

23 (b) ESTABLISHING ADEQUATE PAYMENT FOR OXY-
24 GEN AND OXYGEN RELATED EQUIPMENT, SUPPLIES, AND

1 SERVICES.—Section 1834(a)(9) of the Social Security Act
2 (42 U.S.C. 1395m(a)(9)) is amended—

3 (1) in the first sentence of the matter preceding
4 subparagraph (A), by inserting the following before
5 the period: “(for oxygen and oxygen equipment fur-
6 nished before January 1, 2026) or the amount de-
7 termined under subparagraph (E), subject to sub-
8 paragraphs (F), (G), and (H) (for oxygen and oxy-
9 gen related equipment, supplies, and services fur-
10 nished on or after January 1, 2026);” and

11 (2) by adding at the end the following:

12 “(E) PAYMENT FOR OXYGEN AND OXYGEN
13 RELATED EQUIPMENT, SUPPLIES, AND SERV-
14 ICES EXCLUDED FROM COMPETITIVE ACQUISI-
15 TION PROGRAM.—Subject to subparagraphs
16 (F), (G), and (H) in the case of oxygen and ox-
17 ygen related equipment, supplies, and services
18 furnished on or after January 1, 2026—

19 “(i) in areas that are competitive bid-
20 ding areas in which a competitive bidding
21 program is implemented for other covered
22 items, the payment amount is equal to—

23 “(I) for 2026, the fee schedule
24 amounts for the area for items and

1 services in effect on December 31,
2 2025; and

3 “(II) for each subsequent year,
4 the amount determined under this
5 clause for the preceding year, in-
6 creased by the percentage increase in
7 the consumer price index for all urban
8 consumers (United States city aver-
9 age) for the 12-month period ending
10 on December 31 of the previous year;

11 “(ii) in rural areas and non-contig-
12 uous areas (Alaska, Hawaii, and United
13 States territories), the payment amount is
14 equal to—

15 “(I) 50 percent of 110 percent of
16 the national average price for the item
17 or service determined under section
18 414.210(g)(1)(ii) of title 42, Code of
19 Federal Regulations; and

20 “(II) 50 percent of—

21 “(aa) for 2026, the fee
22 schedule amount for the area in
23 effect on December 31, 2025;
24 and

1 “(bb) for each subsequent
2 year, the amount determined
3 under this subclause for the pre-
4 ceding year, increased by the per-
5 centage increase in the consumer
6 price index for all urban con-
7 sumers (United States city aver-
8 age) for the 12-month period
9 ending on December 31 of the
10 previous year; and

11 “(iii) in areas other than those de-
12 scribed in clauses (i) and (ii), the payment
13 amount is equal to the sum of 75 percent
14 of the adjusted payment amount estab-
15 lished under clause (i) and 25 percent of
16 the unadjusted fee schedule amount other-
17 wise determined without taking into ac-
18 count this subparagraph.

19 “(F) SPECIAL RULE FOR LIQUID OXY-
20 GEN.—

21 “(i) PAYMENT.—

22 “(I) IN GENERAL.—In lieu of the
23 volume adjustment established under
24 paragraph (5)(C), not later than Jan-
25 uary 1, 2026, the Secretary in con-

1 sultation with suppliers, manufactur-
2 ers, patients and patient advocates,
3 and physicians, and through notice-
4 and-comment rulemaking, shall estab-
5 lish a separate payment amount that
6 meets the requirements of this sub-
7 paragraph made to a supplier for the
8 provision of liquid oxygen and liquid
9 oxygen related equipment, supplies,
10 and services that meets the require-
11 ments described in subparagraph (G).

12 “(II) PAYMENT FLOOR.—The
13 payment amount established under
14 subclause (I) may not be less than an
15 amount equal to 200 percent of the
16 2015 Durable Medical Equipment,
17 Prosthetics/Orthotics & Supplies Fee
18 Schedule updated by the consumer
19 price index for all urban consumers
20 (United States city average) for years
21 2016 through 2025.

22 “(III) UPDATE MECHANISM.—
23 Beginning on January 1, 2027, the
24 payment amount described in sub-
25 clause (I) shall be increased annually

1 by the projected percentage increase
2 in the consumer price index for all
3 urban consumers (United States city
4 average) for the 12-month period end-
5 ing December 31 of the previous year.

6 “(ii) CONSIDERATIONS.—In imple-
7 menting the payment amount under this
8 subparagraph, the Secretary shall take into
9 account the cost of liquid oxygen on a per
10 pound basis, the cost of liquid oxygen
11 equipment, the infrastructure costs associ-
12 ated with providing liquid oxygen equip-
13 ment and supplies (including labor, stor-
14 age, transportation, maintenance, and
15 similar costs), the cost of complying with
16 Federal and State regulations specific to
17 the delivery and transportation of liquid
18 oxygen, and any other cost factors the Sec-
19 retary deems appropriate after consulting
20 with stakeholders such as suppliers, pro-
21 viders, patients and patient advocates, and
22 manufacturers.

23 “(iii) MONTHLY ADD-ON FOR HIGH-
24 FLOW PATIENTS.—

1 “(I) IN GENERAL.—Subject to
2 subclause (II), the Secretary shall es-
3 tablish a non-budget neutral add-on to
4 the payment amount under clause (i)
5 when the prescribing practitioner or-
6 ders an oxygen flow rate equal to or
7 greater than 6 liters per minute.

8 “(II) ADD-ON AMOUNT.—The
9 add-on amount shall equal the per
10 pound cost of the oxygen exceeding
11 the amount required to provide a liter
12 flow that is equal to or greater than
13 6 liters per minute.

14 “(iv) PERIODIC ASSESSMENT OF THE
15 BASE RATE.—The Secretary shall assess at
16 least once every 3 years the adequacy of
17 the payment amounts under this subpara-
18 graph on a cost-related basis or other eco-
19 nomical and equitable basis.

20 “(v) TRANSITIONAL INTERIM PAY-
21 MENT.—

22 “(I) IN GENERAL.—For items
23 and services furnished on or after the
24 date of the enactment of the SOAR
25 Act of 2025 and prior to the imple-

1 mentation of the payment amount es-
2 tablished under this subparagraph,
3 the Secretary shall adopt a transi-
4 tional interim payment amount for
5 liquid oxygen, and liquid oxygen
6 equipment, supplies, and services in
7 an amount equal to 200 percent of
8 the 2015 Durable Medical Equipment,
9 Prosthetics/Orthotics & Supplies Fee
10 Schedule updated by the consumer
11 price index for all urban consumers
12 (United States city average) for years
13 2016 through 2025.

14 “(II) UPDATE.—This amount
15 shall be updated annually by the pro-
16 jected percentage change in the con-
17 sumer price index for all urban con-
18 sumers (United States city average)
19 for the 12-month period ending on
20 December 31 of the previous year,
21 until the Secretary implements the
22 payment amount under this subpara-
23 graph.

24 “(vi) COVERAGE CRITERIA.—

1 “(I) IN GENERAL.—Not later
2 than January 1, 2026, the Secretary,
3 in consultation with stakeholders,
4 shall establish objective clinical cri-
5 teria for the coverage of liquid oxygen,
6 and liquid oxygen equipment, supplies,
7 and services under this title.

8 “(II) UPDATE OF CRITERIA.—
9 The Secretary shall review and update
10 the coverage standards under this
11 clause every 5 years to ensure the
12 standards take into consideration cur-
13 rent medical and clinical guidelines
14 and take into effect modality in order
15 to maximize beneficiary independ-
16 ence.”.

17 **SEC. 102. ESTABLISHMENT OF SUPPLEMENTAL OXYGEN RE-**
18 **SPONSIBILITIES CRITERIA.**

19 (a) IN GENERAL.—Section 1834(a)(9) of the Social
20 Security Act (42 U.S.C. 1395m(a)(9)), as amended by
21 section 101(b), is further amended by inserting the fol-
22 lowing new subparagraph:

23 “(G) OXYGEN AND OXYGEN RELATED
24 EQUIPMENT, SUPPLIES, AND SERVICES.—In
25 consultation with stakeholders, the Secretary

shall define the scope of services a supplier of oxygen and oxygen related equipment, supplies, and services must provide to receive payment under this part, to include—

“(i) conducting an initial evaluation of the beneficiary using the uniform oxygen patient evaluation form described in paragraph (5)(G) to determine the appropriate use of oxygen and oxygen related equipment, supplies, and services by the beneficiary, including the use of portable equipment;

“(ii) ensuring the beneficiary has appropriate access to portable oxygen, and portable oxygen equipment, supplies, and services based on the mobility needs of the beneficiary, including the needs of the beneficiary outside the home of the beneficiary;

“(iii) providing written and verbal beneficiary and caregiver education regarding oxygen and oxygen related equipment, supplies, and services, stationary and portable options, and oxygen safety, which includes evaluating the environment of the

1 beneficiary for safety risks or hazards,
2 such as fire and fall hazards;

3 “(iv) providing appropriate delivery,
4 set-up, and coordination of oxygen services
5 (including the delivery of any oxygen
6 equipment or supplies to a beneficiary
7 prior to such beneficiary being discharged,
8 delivering such equipment, and setting up
9 the equipment), as needed, in a timely
10 manner as agreed upon by the beneficiary
11 or caregiver, supplier, and prescribing
12 practitioner;

13 “(v) evaluating the ability of the bene-
14 ficiary to operate the equipment safely and
15 effectively;

16 “(vi) providing infection control infor-
17 mation and instructions about all equip-
18 ment and supplies;

19 “(vii) providing equipment-related
20 services, including checking oxygen system
21 purity levels and flow rates, changing and
22 cleaning filters, and assuring the integrity
23 of alarms and back-up systems, consistent
24 with the manufacturer specifications and

1 in accordance with all Federal, State, and
2 local laws and regulations;

3 “(viii) monitoring visits when nec-
4 essary by appropriate personnel, including
5 a respiratory therapist to evaluate all as-
6 pects of the services being provided to the
7 beneficiary by the provider;

8 “(ix) documenting exception reporting
9 by the supplier to the prescribing physician
10 when changes occur in the compliance of
11 the beneficiary with the beneficiary’s plan
12 of care;

13 “(x) providing, as needed, continued
14 education to the beneficiary or caregiver
15 regarding appropriate oxygen equipment
16 maintenance practices and performance;

17 “(xi) providing, as prescribed by the
18 plan of care of the prescribing practitioner,
19 appropriate oxygen and oxygen related
20 equipment, supplies, and services (includ-
21 ing supplemental supplies and emergency
22 oxygen back-ups as appropriate);

23 “(xii) ensuring oxygen and oxygen
24 equipment can be used appropriately out-

1 side the home of a beneficiary based on ne-
2 cessity;

3 “(xiii) providing 24-hour on-call cov-
4 erage to respond to beneficiary needs relat-
5 ing to oxygen and oxygen related equip-
6 ment, supplies, and services; and

7 “(xiv) assisting the beneficiary with
8 the coordination of oxygen and oxygen re-
9 lated equipment, supplies, and services, in-
10 cluding by assisting the beneficiary find a
11 different supplier if the beneficiary tempo-
12 rarily travels outside of the service area of
13 the supplier. If the beneficiary relocates
14 permanently, the new supplier caring for
15 the beneficiary will assume responsibility
16 for billing the Medicare program directly.”.

17 (b) EFFECTIVE DATE.—The amendment made by
18 this section shall take effect on the date that is 1 year
19 after the date of enactment of this Act.

20 **SEC. 103. TECHNICAL CORRECTIONS.**

21 Section 1861(n) is amended by striking “iron lungs,
22 oxygen tents” and inserting “oxygen and oxygen related
23 equipment, supplies, and services”.

1 **TITLE II—PROTECTING BENE-**
2 **FICIARY ACCESS TO RES-**
3 **PIRATORY THERAPISTS**

4 **SEC. 201. REIMBURSEMENT FOR RESPIRATORY THERA-**
5 **PISTS.**

6 (a) PROTECTING ACCESS TO RESPIRATORY THERA-
7 PIST SERVICES.—

8 (1) ADDING RESPIRATORY THERAPIST SERV-
9 ICES TO THE DEFINITION OF MEDICAL AND OTHER
10 HEALTH SERVICES.—Section 1861(s)(2) of the So-
11 cial Security Act (42 U.S.C. 1395x(s)(2)) is amend-
12 ed—

13 (A) in subparagraph (JJ), by inserting
14 “and” after the semicolon; and

15 (B) by adding at the end the following new
16 subparagraph:

17 “(KK) respiratory therapist services (as
18 defined in subsection (nnn)) furnished on or
19 after January 1, 2026.”.

20 (2) DEFINITION OF RESPIRATORY THERAPIST
21 SERVICES.—Section 1861 of the Social Security Act
22 (42 U.S.C. 1395x) is amended by adding at the end
23 the following new subsection:

24 “(nnn) RESPIRATORY THERAPIST SERVICES.—The
25 term ‘respiratory therapist services’ means services per-

1 formed by a respiratory therapist within the scope of prac-
2 tice of a respiratory therapist as defined by State law, reg-
3 ulations, and applicable accreditation standards for the as-
4 sessment, treatment, and monitoring of patients requiring
5 oxygen and oxygen related equipment, supplies, or serv-
6 ices.”.

7 (b) ADD-ON PAYMENT ADJUSTMENT.—Section
8 1834(a)(9) of the Social Security Act (42 U.S.C.
9 1395m(a)(9)), as amended by sections 101(b) and 102(a),
10 is further amended by adding at the end the following new
11 subparagraph:

12 “(H) MONTHLY PAYMENT ADD-ON AD-
13 JUSTMENT FOR RESPIRATORY THERAPIST SERV-
14 ICES.—For respiratory therapist services fur-
15 nished on or after January 1, 2026, the Sec-
16 retary shall implement through notice and com-
17 ment rulemaking and in consultation with
18 stakeholders a non-budget neutral add-on pay-
19 ment adjustment to the payment amount estab-
20 lished under this paragraph that reflects the
21 cost of providing respiratory therapist services
22 as clinically appropriate under State law.”.

1 **TITLE III—ADOPTION OF ELEC-**
2 **TRONIC TEMPLATES TO**
3 **STRENGTHEN FRAUD AND**
4 **ABUSE PROTECTIONS AND**
5 **ENSURE PROGRAM INTEG-**
6 **RITY**

7 **SEC. 301. STRENGTHENING PROGRAM INTEGRITY**
8 **THROUGH THE USE OF ELECTRONIC TEM-**
9 **PLATES TO DOCUMENT MEDICAL NECESSITY,**
10 **AND RESTORING CLINICAL INFERENCE FOR**
11 **OXYGEN AND OXYGEN RELATED EQUIPMENT,**
12 **SUPPLIES, AND SERVICES.**

13 (a) ADOPTING ELECTRONIC TEMPLATES FOR DE-
14 TERMINING MEDICAL NECESSITY.—Section 1834(a)(5) of
15 the Social Security Act (42 U.S.C. 1395m(a)(5)) is
16 amended by adding at the end the following:

17 “(G) ADOPTION OF ELECTRONIC TEM-
18 PLATES TO DOCUMENT MEDICAL NECESSITY
19 AND STRENGTHEN PROGRAM INTEGRITY.—

20 “(i) IN GENERAL.—For any oxygen
21 and oxygen related equipment, supplies, or
22 service, including liquid oxygen, furnished
23 on or after January 1, 2026, the Secretary
24 shall adopt a template in an electronic for-
25 mat that meets the requirements of clause

(ii) to be completed by the prescribing practitioner (as defined by the Secretary) that shall constitute the complete request for information to determine whether payment for such service, equipment, or supplies is covered by this title and is reasonable and necessary for the diagnosis or treatment of illness or injury (under section 1862(a)(1)(A)).

“(ii) **TEMPLATE REQUIREMENTS.**—
The template shall require the prescribing practitioner to provide each of the following:

“(I) Documentation that the beneficiary was seen by a prescribing practitioner within the appropriate timeframes for certification of the need for the services, equipment, or supplies.

“(II) Documentation of the qualifying blood gas or saturation test results.

“(III) Documentation indicating that the beneficiary needs or is using

1 the appropriate equipment, supplies,
2 and services.

3 “(IV) Any other documentation
4 determined appropriate by the Sec-
5 retary, except the Secretary shall not
6 require the prescribing practitioner to
7 provide medical record notes regard-
8 ing the beneficiary.

9 “(iii) CONTRACTOR ADJUDICATION.—
10 The Secretary shall require Medicare ad-
11 ministrative contractors to adjudicate
12 claims for payment for oxygen and oxygen
13 related equipment, supplies, and services
14 using electronic transactions.

15 “(H) RESTORATION OF CLINICAL INFER-
16 ENCE AND JUDGMENT.—For claims submitted
17 on or after the date of enactment of this sub-
18 paragraph with respect to the conduct of pay-
19 ment audits of suppliers of oxygen and oxygen
20 related equipment, supplies, and services under
21 this part the Secretary shall use clinical infer-
22 ence and clinical judgment in the evaluation of
23 templates, medical records, and orders when
24 conducting such audits in the same manner as
25 the Secretary interpreted and applied such clin-

1 ical judgment to claim reviews before 2009 pur-
2 suant to the Secretary’s instruction to contrac-
3 tors.”.

4 **SEC. 302. ESTABLISHING NOTICE REQUIREMENTS FOR IN-**
5 **DIVIDUALS RECEIVING OXYGEN OR OXYGEN**
6 **RELATED EQUIPMENT, SUPPLIES, OR SERV-**
7 **ICES.**

8 (a) ANNUAL NOTICE OF COST-SHARING OBLIGA-
9 TIONS FOR SUPPLEMENTAL OXYGEN.—Section 1804 of
10 the Social Security Act (42 U.S.C. 1395b–2) is amended
11 by adding at the end the following new subsection:

12 “(e) The notice provided under subsection (a) shall
13 include—

14 “(1) a description of—

15 “(A) the 36-month rental period for sup-
16 plemental oxygen equipment under section
17 1834(a)(5)(F);

18 “(B) the right of a beneficiary to discuss
19 their prescription for supplemental oxygen
20 equipment with their prescribing physician or
21 practitioner; and

22 “(C) any cost sharing requirements for
23 supplemental oxygen equipment, supplies, and
24 services under this title and the termination of

1 such requirements when a beneficiary refuses or
2 discontinues supplemental oxygen therapy; and
3 “(2) information on the internal and external
4 grievance processes of suppliers of oxygen and oxy-
5 gen related equipment, supplies, and services under
6 this title (as well as how to contact Medicare
7 through a hotline or beneficiary ombudsman), in-
8 cluding the right of a beneficiary to file, personally
9 or through a representative of the beneficiary’s
10 choosing, an internal or external grievance without
11 retaliation or denial of services from a supplier.”.

12 (b) TIMELY NOTICE OF END OF COST-SHARING OB-
13 LIGATIONS FOR SUPPLEMENTAL OXYGEN.—Section
14 1834(a)(5)(F) of the Social Security Act (42 U.S.C.
15 1395m(a)(5)(F)), is amended by adding at the end the
16 following new clause:

17 “(iii) TIMELY NOTICE OF END OF
18 COST-SHARING OBLIGATIONS FOR SUPPLE-
19 MENTAL OXYGEN.—The Secretary, in con-
20 sultation with patient advocates, physi-
21 cians, supplemental oxygen suppliers, res-
22 piratory therapists, and other stakeholders,
23 shall distribute a monthly notice to each
24 individual receiving supplemental oxygen
25 equipment, supplies, and services stating

1 the number of months remaining within
2 the rental cap period under this subpara-
3 graph during which the beneficiary is re-
4 sponsible for the copayment amount for
5 such equipment.”.

6 **TITLE IV—ESTABLISHMENT OF**
7 **BENEFICIARY RIGHTS**

8 **SEC. 401. ESTABLISHING PROTECTIONS FOR INDIVIDUALS**
9 **RECEIVING OXYGEN OR OXYGEN RELATED**
10 **EQUIPMENT, SUPPLIES, OR SERVICES.**

11 Section 1834(a)(5) of the Social Security Act (42
12 U.S.C. 1395m(a)(5)), as amended by section 301, is fur-
13 ther amended by adding at the end the following new sub-
14 paragraph:

15 “(H) ESTABLISHING PROTECTIONS FOR
16 INDIVIDUALS RECEIVING OXYGEN OR OXYGEN
17 RELATED EQUIPMENT, SUPPLIES, OR SERV-
18 ICES.—The Secretary shall establish through
19 regulation protections for any individual receiv-
20 ing oxygen or oxygen related equipment, sup-
21 plies, or services under this part where such in-
22 dividual shall have the right to—

23 “(i) choose the local supplier of such
24 services from among qualified suppliers
25 and to change such supplier;

1 “(ii) receive communications from the
2 supplier in a clear and understandable
3 manner;

4 “(iii) ensure privacy and confiden-
5 tiality in all aspects of treatment and the
6 personal health information of such indi-
7 vidual consistent with Federal and State
8 laws;

9 “(iv) be informed by the supplier of
10 such services regarding—

11 “(I) all aspects of the services
12 being furnished by such supplier;

13 “(II) the right to refuse treat-
14 ment and to discontinue treatment,
15 including informing the individual’s
16 physician and indicating when indi-
17 vidual cost-sharing requirements end;
18 and

19 “(III) the right to refuse to par-
20 ticipate in experimental research;

21 “(v) be informed by the supplier of
22 policies and expectations of the supplier re-
23 garding patient conduct and responsibil-
24 ities;

1 “(vi) be informed by the supplier
2 about treatment modalities and categories
3 of equipment relating to oxygen services
4 for use by the individual and offered by the
5 supplier;

6 “(vii) be informed by the supplier of
7 the policies of such supplier regarding 24-
8 hour on-call coverage;

9 “(viii) be informed by the supplier of
10 the financial responsibilities of the indi-
11 vidual with regard to such services, includ-
12 ing the number of months remaining with-
13 in the rental cap period under subpara-
14 graph (F) during which the patient is re-
15 sponsible for the copayment amount;

16 “(ix) be provided with the appropriate
17 gaseous or liquid oxygen equipment, sup-
18 plies, and services to ensure the mobility of
19 the beneficiary, as well as the clinically ap-
20 propriate amount of oxygen and oxygen re-
21 lated equipment, supplies, and services as
22 agreed upon by the individual (or the indi-
23 vidual’s representative), the supplier, and
24 the prescribing practitioner;

1 “(x) receive equipment that is main-
2 tained to the guidelines of the manufac-
3 turer;

4 “(xi) have broken or faulty equipment
5 repaired or replaced in a timely manner;

6 “(xii) have oxygen or oxygen related
7 equipment or supplies delivered by the sup-
8 plier and to be contacted consistent with
9 the requirements of section 410.38 of title
10 42, Code of Federal Regulations;

11 “(xiii) in the case of a supplier invol-
12 untary discharging an individual—

13 “(I) receive from such supplier a
14 written notice that is provided to the
15 individual no later than 30 days in
16 advance of the involuntary discharge
17 of the individual; and

18 “(II) have such supplier—

19 “(aa) follow established in-
20 voluntary discharge procedures;
21 or

22 “(bb) in the case of an im-
23 mediate threat to the health and
24 safety of others, follow an abbre-

1 viated involuntary discharge pro-
2 cedure;

3 “(xiv) be assisted by the supplier in
4 obtaining the oxygen equipment and sup-
5 plies prescribed by the treating physician
6 of the individual when the individual is
7 traveling;

8 “(xv) receive from the supplier oxygen
9 supplies, refills, and emergency back-up
10 equipment, as appropriate;

11 “(xvi) be informed of a plan by the
12 supplier in case of a power outage or other
13 natural emergency, so that the individual
14 will continue to receive the necessary oxy-
15 gen supplies and equipment; and

16 “(xvii) be informed by the supplier
17 of—

18 “(I) any potential changes to the
19 equipment, supplies, or services being
20 furnished to the individual and the
21 right to consult with the prescribing
22 physician or practitioner regarding
23 such changes to ensure they are ap-
24 propriate and necessary and to be in-
25 formed of the exceptions, as specified

1 by the Secretary, when a supple-
2 mental oxygen services supplier may
3 change the oxygen equipment of the
4 individual; and
5 “(II) the internal and external
6 grievance processes of the supplier (as
7 well as how to contact Medicare
8 through a hotline or beneficiary om-
9 budsman), which shall include the
10 right of an individual to file, person-
11 ally or through a representative of the
12 individual’s choosing, an internal or
13 external grievance without retaliation
14 or denial of services from such sup-
15 plier.”.