AMENDMENT TO H.R. 4368, AS REPORTED (AGRI-CULTURE, RURAL DEVELOPMENT, FOOD AND DRUG ADMINISTRATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2024) OFFERED BY MRS. MILLER-MEEKS OF IOWA

At the end of the bill (before the short title), insert the following:

1	SEC REPORT ON THE INTEROPERABILITY OF MED-
2	ICAL DEVICES.
3	(a) In General.—Not later than 1 year after the
4	date of the enactment of this Act, the Commissioner on
5	Food and Drugs, in consultation with the National Coordi-
6	nator for Health Information Technology, shall prepare
7	and submit to the Committee on Energy and Commerce
8	of the House of Representatives and the Committee on
9	Health, Education, Labor, and Pensions of the Senate,
10	and make publicly available (including through posting on
11	the website of the Food and Drug Administration), a re-
12	port on the state of interoperability of medical devices and
13	the implications of such state for the safety and effective-
14	ness of such medical devices.
15	(b) CONTENTS.—The report described in subsection
16	(a) shall include—

1	(1) a review of existing medical device inter-
2	operability standards and the extent to which such
3	standards have been adopted, including—
4	(A) whether medical device interoperability
5	standards included in the Recognized Con-
6	sensus Standards Database of the Food and
7	Drug Administration were widely adopted by
8	the medical device industry upon inclusion in
9	the Database;
10	(B) a discussion of how adoption of inter-
11	operability standards for medical devices sup-
12	port patient access to data, home-based care,
13	telemedicine, and data sharing among devices
14	used in the clinical setting;
15	(C) a comparison of the standards used for
16	device interoperability with the standards used
17	for other aspects of clinical care, such as stand-
18	ards to ensure the security of health informa-
19	tion and standards to support interoperability
20	among electronic health record systems;
21	(D) an assessment of the ability of patients
22	to obtain standard data from the devices they
23	use, and the associated standards used to facili-
24	tate access to such data; and

1	(E) an analysis of the cost burden on
2	health care providers, the medical device indus-
3	try, and other entities associated with the adop-
4	tion of medical device interoperability stand-
5	ards;
6	(2) recommendations to improve adoption of de-
7	vice interoperability standards, including any needed
8	guidance, regulatory or statutory changes, or incen-
9	tives for such adoption; and
10	(3) a summary of recommendations or informa-
11	tion submitted to the Commissioner by stakeholders
12	under subsection (c).
13	(c) Stakeholder Comment.—Not later than 180
14	days prior to the submission of the report under sub-
15	section (a), the Commissioner shall consult with represent-
16	atives of regulated industry groups, patient groups, aca-
17	demia, and other interested parties to obtain recommenda-
18	tions or information relevant to the report.

