104TH CONGRESS 1ST SESSION S. 1359

To amend title 38, United States Code, to revise certain authorities relating to management and contracting in the provision of health care services.

IN THE SENATE OF THE UNITED STATES

October 24, 1995

Mr. SIMPSON introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

A BILL

- To amend title 38, United States Code, to revise certain authorities relating to management and contracting in the provision of health care services.
 - 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 "Veterans Health Care
- 5 Management and Contracting Flexibility Act of 1995".

6 SEC. 2. WAITING PERIOD FOR ADMINISTRATIVE REORGA 7 NIZATIONS.

8 Section 510(b) of title 38, United States Code, is9 amended—

1 (1) in the second sentence, by striking out "90-2 day period of continuous session of Congress following" and inserting in lieu thereof "45-day period be-3 4 ginning on"; and 5 (2) by striking out the third sentence. SEC. 3. REPEAL OF LIMITATIONS ON CONTRACTS FOR CON-6 7 **VERSION OF PERFORMANCE OF ACTIVITIES** 8 **OF DEPARTMENT HEALTH-CARE FACILITIES.** 9 Section 8110 of title 38, United States Code, is 10 amended by striking out subsection (c). SEC. 4. REVISION OF AUTHORITY TO SHARE MEDICAL FA-11 12 CILITIES, EQUIPMENT, AND INFORMATION.

(a) STATEMENT OF PURPOSE.—The text of section
8151 of title 38, United States Code, is amended to read
as follows:

16 "It is the purpose of this subchapter to improve the quality of health care provided veterans under this title 17 by authorizing the Secretary to enter into agreements with 18 health-care providers in order to share health-care re-19 20sources with, and receive health-care resources from, such 21 providers while ensuring no diminution of services to vet-22 erans. Among other things, it is intended by these means 23 to strengthen the medical programs at Department facili-24 ties located in small cities or rural areas which facilities 25 are remote from major medical centers.".

1 (b) DEFINITIONS.—Section 8152 of such title is 2 amended—

3 (1) by striking out paragraphs (1), (2) and (3)
4 and inserting in lieu thereof the following new para5 graphs (1) and (2):

6 "(1) The term 'health-care resource' includes 7 hospital care (as that term is defined in section 8 1701(5) of this title), any other health-care service, 9 and any health-care support or administrative re-10 source.

11 "(2) The term 'health-care providers' includes
12 health-care plans and insurers and any organiza13 tions, institutions, or other entities or individuals
14 that furnish health-care resources."; and

15 (2) by redesignating paragraph (4) as para-16 graph (3).

17 (c) AUTHORITY TO SECURE HEALTH-CARE RE-18 SOURCES.—(1) Section 8153 of such title is amended—

(A) by striking out paragraph (1) of subsection
(a) and inserting in lieu thereof the following new
paragraph (1):

"(1) The Secretary may, when the Secretary determines it to be necessary in order to secure health-care resources which otherwise might not be feasibly available or to utilize effectively health-care resources, make arrangements, by contract or other form of agreement, for the
 mutual use, or exchange of use, of health-care resources
 between Department health-care facilities and non-De partment health-care providers. The Secretary may make
 such arrangements without regard to any law or regula tion relating to competitive procedures."; and

7 (B) by striking out subsection (e).

8 (2)(A) The section heading of such section is amend-9 ed to read as follows:

10 "§ 8153. Sharing of health-care resources".

(B) The table of sections at the beginning of chapter
81 of such title is amended by striking out the item relating to section 8153 and inserting in lieu thereof the following new item:

"8153. Sharing of health-care resources.".