

109TH CONGRESS
1ST SESSION

S. 1182

AN ACT

To amend title 38, United States Code, to improve health care for veterans, 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; REFERENCES TO TITLE 38,**
4 **UNITED STATES CODE; TABLE OF CONTENTS.**

5 (a) **SHORT TITLE.**—This Act may be cited as the
6 “Veterans Health Care Act of 2005”.

1 (b) REFERENCES.—Except as otherwise expressly
 2 provided, whenever in this Act an amendment or repeal
 3 is expressed in terms of an amendment or repeal to a sec-
 4 tion or other provision, the reference shall be considered
 5 to be made to a section or other provision of title 38,
 6 United States Code.

7 (c) TABLE OF CONTENTS.—The table of contents for
 8 this Act is as follows:

- Sec. 1. Short title; references to title 38, United States Code; table of contents.
- Sec. 2. Care for newborn children of women veterans receiving maternity care.
- Sec. 3. Enhancement of payer provisions for health care furnished to certain children of Vietnam veterans.
- Sec. 4. Improvements to homeless veterans service providers programs.
- Sec. 5. Additional mental health providers.
- Sec. 6. Pay comparability for chief nursing officer, office of nursing services.
- Sec. 7. Cost comparison studies.
- Sec. 8. Improvements and expansion of mental health services.
- Sec. 9. Disclosure of medical records.
- Sec. 10. Expansion of National Guard Outreach Program.
- Sec. 11. Expansion of tele-health services.
- Sec. 12. Mental health data sources report.
- Sec. 13. Strategic plan for long-term care.
- Sec. 14. Blind rehabilitation outpatient specialists.
- Sec. 15. Compliance report.
- Sec. 16. Health care and services for veterans affected by hurricane Katrina.
- Sec. 17. Reimbursement for certain veterans' outstanding emergency treatment expenses.
- Sec. 18. Conveyance of Federal land in exchange for fair market value consideration.
- Sec. 19. Technical and clerical amendments.

9 **SEC. 2. CARE FOR NEWBORN CHILDREN OF WOMEN VET-**
 10 **ERANS RECEIVING MATERNITY CARE.**

11 (a) IN GENERAL.—Subchapter VIII of chapter 17 is
 12 amended by adding at the end the following:

1 **“§ 1786. Care for newborn children of women vet-**
 2 **erans receiving maternity care**

3 “The Secretary may furnish care to a newborn child
 4 of a woman veteran, who is receiving maternity care fur-
 5 nished by the Department, for not more than 14 days
 6 after the birth of the child if the veteran delivered the child
 7 in a Department facility or in another facility pursuant
 8 to a Department contract for the delivery services.”.

9 (b) CLERICAL AMENDMENT.—The table of sections
 10 at the beginning of chapter 17 is amended by inserting
 11 after the item relating to section 1785 the following:

“1786. Care for newborn children of women veterans receiving maternity care.”.

12 **SEC. 3. ENHANCEMENT OF PAYER PROVISIONS FOR**
 13 **HEALTH CARE FURNISHED TO CERTAIN**
 14 **CHILDREN OF VIETNAM VETERANS.**

15 (a) HEALTH CARE FOR SPINA BIFIDA AND ASSOCI-
 16 ATED DISABILITIES.—Section 1803 is amended—

17 (1) by redesignating subsection (c) as sub-
 18 section (d); and

19 (2) by inserting after subsection (b) the fol-
 20 lowing:

21 “(c)(1) If a payment made by the Secretary for
 22 health care under this section is less than the amount
 23 billed for such health care, the health care provider or
 24 agent of the health care provider may, in accordance with
 25 paragraphs (2) through (4), seek payment for the dif-

1 ference between the amount billed and the amount paid
2 by the Secretary from a responsible third party to the ex-
3 tent that the provider or agent would be eligible to receive
4 payment for such health care from such third party.

5 “(2) The health care provider or agent may not im-
6 pose any additional charge on the beneficiary who received
7 the health care, or the family of such beneficiary, for any
8 service or item for which the Secretary has made payment
9 under this section.

10 “(3) The total amount of payment a health care pro-
11 vider or agent may receive for health care furnished under
12 this section may not exceed the amount billed to the Sec-
13 retary.

14 “(4) The Secretary, upon request, shall disclose to
15 such third party information received for the purposes of
16 carrying out this section.”.

17 (b) HEALTH CARE FOR BIRTH DEFECTS AND ASSO-
18 CIATED DISABILITIES.—Section 1813 is amended—

19 (1) by redesignating subsection (c) as sub-
20 section (d); and

21 (2) by inserting after subsection (b) the fol-
22 lowing:

23 “(c)(1) If payment made by the Secretary for health
24 care under this section is less than the amount billed for
25 such health care, the health care provider or agent of the

1 health care provider may, in accordance with paragraphs
 2 (2) through (4), seek payment for the difference between
 3 the amount billed and the amount paid by the Secretary
 4 from a responsible third party to the extent that the pro-
 5 vider or agent would be eligible to receive payment for
 6 such health care from such third party.

7 “(2) The health care provider or agent may not im-
 8 pose any additional charge on the beneficiary who received
 9 health care, or the family of such beneficiary, for any serv-
 10 ice or item for which the Secretary has made payment
 11 under this section.

12 “(3) The total amount of payment a health care pro-
 13 vider or agent may receive for health care furnished under
 14 this section may not exceed the amount billed to the Sec-
 15 retary.

16 “(4) The Secretary, upon request, shall disclose to
 17 such third party information received for the purposes of
 18 carrying out this section.”

19 **SEC. 4. IMPROVEMENTS TO HOMELESS VETERANS SERVICE**
 20 **PROVIDERS PROGRAMS.**

21 (a) PERMANENT AUTHORITY.—Section 2011 (a) is
 22 amended—

23 (1) in paragraph (1), by striking “(1)”; and

24 (2) by striking paragraph (2).

25 (b) AUTHORIZATION OF APPROPRIATIONS.—

1 (1) COMPREHENSIVE SERVICE PROGRAMS FOR
2 HOMELESS VETERANS.—Section 2013 is amended to
3 read as follows:

4 **“§ 2013. Authorization of appropriations**

5 “There are authorized to be appropriated
6 \$130,000,000 for fiscal year 2006 and each subsequent
7 fiscal year to carry out this subchapter.”.

8 (2) HOMELESS VETERAN SERVICE PROVIDER
9 TECHNICAL ASSISTANCE PROGRAM.—Section
10 2064(b) is amended to read as follows:

11 “(b) AUTHORIZATION OF APPROPRIATIONS.—There
12 are authorized to be appropriated \$1,000,000 for each of
13 fiscal years 2006 through 2011 to carry out the programs
14 under this section.”.

15 **SEC. 5. ADDITIONAL MENTAL HEALTH PROVIDERS.**

16 (a) QUALIFICATIONS.—Section 7402(b) is
17 amended—

18 (1) by redesignating paragraph (10) as para-
19 graph (12); and

20 (2) by inserting after paragraph (9) the fol-
21 lowing:

22 “(10) MARRIAGE AND FAMILY THERAPIST.—To be
23 eligible to be appointed to a marriage and family therapist
24 position, a person shall—

1 “(A) hold a master’s degree in marriage and
2 family therapy, or a comparable degree in mental
3 health, from a college or university approved by the
4 Secretary; and

5 “(B) be licensed or certified to independently
6 practice marriage and family therapy in a State, ex-
7 cept that the Secretary may waive the requirement
8 of licensure or certification for an individual mar-
9 riage and family therapist for a reasonable period of
10 time recommended by the Under Secretary for
11 Health.

12 “(11) LICENSED PROFESSIONAL MENTAL HEALTH
13 COUNSELORS.—To be eligible to be appointed to a licensed
14 professional mental health counselor position, a person
15 shall—

16 “(A) hold a master’s degree in mental health
17 counseling, or a related field, from a college or uni-
18 versity approved by the Secretary; and

19 “(B) be licensed or certified to independently
20 practice mental health counseling.”.

21 (b) REPORT ON MARRIAGE AND FAMILY THERAPY
22 WORKLOAD.—

23 (1) IN GENERAL.—Not later than 90 days after
24 the date of enactment of this Act, the Under Sec-
25 retary for Health, Department of Veterans Affairs,

1 shall submit to the Committee on Veterans' Affairs
2 of the Senate and the Committee on Veterans' Af-
3 fairs of the House of Representatives a report on the
4 provisions of post-traumatic stress disorder treat-
5 ment by marriage and family therapists.

6 (2) CONTENTS.—The report submitted under
7 paragraph (1) shall include—

8 (A) the actual and projected workloads in
9 facilities of the Veterans Readjustment Coun-
10 seling Service and the Veterans Health Admin-
11 istration for the provision of marriage and fam-
12 ily counseling for veterans diagnosed with, or
13 otherwise in need of treatment for, post-trau-
14 matic stress disorder;

15 (B) the resources available and needed to
16 support the workload projections described in
17 subparagraph (A);

18 (C) an assessment by the Under Secretary
19 for Health of the effectiveness of treatment by
20 marriage and family therapists; and

21 (D) recommendations, if any, for improve-
22 ments in the provision of such counseling treat-
23 ment.

1 **SEC. 6. PAY COMPARABILITY FOR CHIEF NURSING OFFI-**
2 **CER, OFFICE OF NURSING SERVICES.**

3 Section 7404 is amended—

4 (1) in subsection (d), by striking “subchapter
5 III and in” and inserting “subsection (e), sub-
6 chapter III, and”; and

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

8 “(e) The position of Chief Nursing Officer, Office of
9 Nursing Services, shall be exempt from the provisions of
10 section 7451 of this title and shall be paid at a rate not
11 to exceed the maximum rate established for the Senior Ex-
12 ecutive Service under section 5382 of title 5 United States
13 Code, as determined by the Secretary.”.

14 **SEC. 7. COST COMPARISON STUDIES.**

15 (a) STUDIES AUTHORIZED.—

16 (1) IN GENERAL.—Notwithstanding section
17 8110(a)(5), the Secretary of Veterans Affairs may
18 conduct studies to compare the amount that would
19 be expended if private contractors provided specific
20 commercial or industrial products and services for
21 the Veterans Health Administration with the
22 amount that would be expended if the Department
23 of Veterans Affairs provided such products and serv-
24 ices for the Veterans Health Administration.

25 (2) LIMITATION.—In the course of conducting
26 the private-public cost comparison studies under

1 paragraph (1), a private contractor may not receive
2 an advantage for a proposal that would reduce costs
3 for the Department of Veterans Affairs by—

4 (A) not making an employer-sponsored
5 health insurance plan available to the workers
6 who are to be employed in the performance of
7 that activity or function under the contract; or

8 (B) offering to such workers an employer-
9 sponsored health benefits plan that requires the
10 employer to contribute less towards the pre-
11 mium or subscription share than the amount
12 that is paid by the Department of Veterans Af-
13 fairs for health benefits for civilian employees
14 under chapter 89 of title 5, United States Code.

15 (3) AUTHORIZATION OF APPROPRIATIONS.—

16 (A) IN GENERAL.—There are authorized to
17 be appropriated \$15,000,000 to carry out para-
18 graph (1), of which—

19 (i) not more than \$7,500,000 shall be
20 available to evaluate activities that have
21 been performed by employees of the Fed-
22 eral Government; and

23 (ii) not more than \$7,500,000 shall be
24 available to evaluate activities that have
25 been performed by private contractors.

1 (B) SUNSET DATE.—This paragraph is re-
2 pealed on September 30, 2007.

3 (b) REPORT.—Not later than March 15, 2007, the
4 Secretary of Veterans Affairs shall submit to the Com-
5 mittee on Veterans' Affairs of the Senate and the Com-
6 mittee on Veterans' Affairs of the House of Representa-
7 tives a report that—

8 (1) identifies the amount expended by the De-
9 partment of Veterans Affairs during fiscal year 2006
10 to conduct cost comparison studies, including—

11 (A) studies conducted in accordance with
12 Office of Management and Budget Circular A-
13 76; and

14 (B) studies to identify the most efficient
15 internal processes for the Department of Vet-
16 erans Affairs;

17 (2) summarizes the benefits and burdens of the
18 studies described in paragraph (1);

19 (3) analyzes each approach for determining—

20 (A) the best method of allocating the re-
21 sources of the Department of Veterans Affairs;
22 and

23 (B) the appropriate use of nongovern-
24 mental employees; and

1 (4) identifies the amount of savings (calculated
2 in terms of full-time employee reinvestment), if any,
3 to the Department of Veterans Affairs as a result
4 of—

5 (A) the private-public cost comparison
6 studies conducted under subsection (a); and

7 (B) the Department of Veterans Affairs in-
8 ternal processes for the same positions.

9 **SEC. 8. IMPROVEMENTS AND EXPANSION OF MENTAL**
10 **HEALTH SERVICES.**

11 (a) FINDINGS.—Congress makes the following find-
12 ings:

13 (1) Mental health treatment capacity at com-
14 munity-based outpatient clinics remains inadequate
15 and inconsistent, despite the requirement under sec-
16 tion 1706(c) of title 38, United States Code, that
17 every primary care health care facility of the De-
18 partment of Veterans Affairs develop and carry out
19 a plan to meet the mental health care needs of vet-
20 erans who require such services.

21 (2) In 2001, the minority staff of the Com-
22 mittee on Veterans' Affairs of the Senate conducted
23 a survey of community-based outpatient clinics and
24 found that there was no established systemwide

1 baseline of acceptable mental health service levels at
2 such clinics.

3 (3) In February 2005, the Government Ac-
4 countability Office reported that the Department of
5 Veterans Affairs had not fully met any of the 24
6 clinical care and education recommendations made
7 in 2004 by the Special Committee on Post-Trau-
8 matic Stress Disorder of the Under Secretary for
9 Health, Veterans Health Administration.

10 (b) CLINICAL SERVICES AND EDUCATION.—

11 (1) IN GENERAL.—The Secretary of Veterans
12 affairs shall—

13 (A) expand the number of clinical treat-
14 ment teams principally dedicated to the treat-
15 ment of post-traumatic stress disorder in med-
16 ical facilities of the Department of Veterans Af-
17 fairs;

18 (B) expand and improve the services avail-
19 able to diagnose and treat substance abuse;

20 (C) expand and improve tele-health initia-
21 tives to provide better access to mental health
22 services in areas of the country in which the
23 Secretary determines that a need for such serv-
24 ices exist due to the distance of such locations

1 from an appropriate facility of the Department
2 of Veterans Affairs;

3 (D) improve education programs available
4 to primary care delivery professionals and dedi-
5 cate such programs to recognize, treat, and
6 clinically manage veterans with mental health
7 care needs;

8 (E) expand the delivery of mental health
9 services in community-based outpatient clinics
10 of the Department of Veterans Affairs in which
11 such services are not available as of the date of
12 enactment of this Act; and

13 (F) expand and improve the Mental Health
14 Intensive Case Management Teams for the
15 treatment and clinical case management of vet-
16 erans with serious or chronic mental illness.

17 (2) AUTHORIZATION OF APPROPRIATIONS.—

18 There are authorized to be appropriated
19 \$95,000,000 in each of fiscal years 2006 and 2007
20 to improve and expand the treatment services and
21 options available to veterans in need of mental
22 health treatment from the Department of Veterans
23 Affairs, of which—

24 (A) \$5,000,000 shall be allocated to carry
25 out paragraph (1)(A);

1 (B) \$50,000,000 shall be allocated to carry
2 out paragraph (1)(B);

3 (C) \$10,000,000 shall be allocated to carry
4 out paragraph (1)(C);

5 (D) \$1,000,000 shall be allocated to carry
6 out paragraph (1)(D);

7 (E) \$20,000,000 shall be allocated to carry
8 out paragraph (1)(E); and

9 (F) \$5,000,000 shall be allocated to carry
10 out paragraph (1)(F).

11 (c) REQUIRED CAPACITY FOR COMMUNITY-BASED
12 OUTPATIENT CLINICS.—

13 (1) ACCOUNTABILITY FOR THE PROVISION OF
14 MENTAL HEALTH SERVICES.—The Under Secretary
15 shall take appropriate steps and provide necessary
16 incentives (including appropriate performance incen-
17 tives) to ensure that each Regional Director of the
18 Veterans Health Administration is encouraged to—

19 (A) prioritize the provision of mental
20 health services to veterans in need of such serv-
21 ices;

22 (B) foster collaborative working environ-
23 ments among clinicians for the provision of
24 mental health services; and

1 (C) conduct mental health consultations
2 during primary care appointments.

3 (2) MENTAL HEALTH AND SUBSTANCE ABUSE
4 SERVICES.—

5 (A) IN GENERAL.—The Secretary shall en-
6 sure that each community-based outpatient clin-
7 ic of the Department has the capacity to pro-
8 vide, or monitor the provision of, mental health
9 services to enrolled veterans in need of such
10 services.

11 (B) SETTINGS.—In carrying out subpara-
12 graph (A), the Secretary shall ensure that men-
13 tal health services are provided through—

14 (i) a community-based outpatient clin-
15 ic of the Department by an employee of
16 the Department;

17 (ii) referral to another facility of the
18 Department;

19 (iii) contract with an appropriate
20 mental health professional in the local
21 community; or

22 (iv) tele-mental health service.

23 (3) REPORTING REQUIREMENT.—Not later than
24 January 31, 2008, the Secretary of Veterans Affairs
25 shall submit a report to Congress that—

1 (A) describes the status and availability of
2 mental health services at community-based out-
3 patient clinics;

4 (B) describes the substance of services
5 available at such clinics; and

6 (C) includes the ratios between mental
7 health staff and patients at such clinics.

8 (d) COOPERATION ON MENTAL HEALTH AWARENESS
9 AND PREVENTION.—

10 (1) AGREEMENT.—The Secretary of Defense
11 and the Secretary of Veterans Affairs shall enter
12 into a Memorandum of Understanding—

13 (A) to ensure that separating service mem-
14 bers receive standardized individual mental
15 health and sexual trauma assessments as part
16 of separation exams; and

17 (B) that includes the development of
18 shared guidelines on how to conduct the assess-
19 ments.

20 (2) ESTABLISHMENT OF JOINT VETERANS AF-
21 FAIRS—DEPARTMENT OF DEFENSE WORKGROUP ON
22 MENTAL HEALTH.—

23 (A) IN GENERAL.—Not later than 180
24 days after the date of enactment of this Act,
25 the Secretary of Defense and the Secretary of

1 Veterans Affairs shall establish a joint
2 workgroup on mental health, which shall be
3 comprised of not less than 7 leaders in the field
4 of mental health appointed from their respective
5 departments.

6 (B) STUDY.—Not later than 1 year after
7 the establishment of the workgroup under sub-
8 paragraph (A), the workgroup shall analyze the
9 feasibility, content, and scope of initiatives re-
10 lated to—

11 (i) combating stigmas and prejudices
12 associated with service members who suffer
13 from mental health disorders or readjust-
14 ment issues, through the use of peer coun-
15 seling programs or other educational initia-
16 tives;

17 (ii) ways in which the Department of
18 Veterans Affairs can make their expertise
19 in treating mental health disorders more
20 readily available to Department of Defense
21 mental health care providers;

22 (iii) family and spousal education to
23 assist family members of veterans and
24 service members to recognize and deal with

1 signs of potential readjustment issues or
2 other mental health disorders; and

3 (iv) the seamless transition of service
4 members who have been diagnosed with
5 mental health disorders from active duty to
6 veteran status (in consultation with the
7 Seamless Transition Task Force and other
8 entities assisting in this effort).

9 (C) REPORT.—Not later than June 30,
10 2007, the Secretary of Defense and the Sec-
11 retary of Veterans Affairs shall submit a report
12 to Congress containing the findings and rec-
13 ommendations of the workgroup established
14 under this paragraph.

15 (e) PRIMARY CARE CONSULTATIONS FOR MENTAL
16 HEALTH.—

17 (1) GUIDELINES.—The Under Secretary for
18 Health, Veterans Health Administration, shall estab-
19 lish systemwide guidelines for screening primary
20 care patients for mental health disorders and ill-
21 nesses.

22 (2) TRAINING.—Based upon the guidelines es-
23 tablished under paragraph (1), the Under Secretary
24 for Health, Veterans Health Administration, shall
25 conduct appropriate training for clinicians of the De-

1 partment of Veterans Affairs to carry out mental
2 health consultations.

3 (f) CLINICAL TRAINING AND PROTOCOLS.—

4 (1) FINDINGS.—Congress finds that—

5 (A) the Iraq War Clinician Guide has tre-
6 mendous value; and

7 (B) the Secretary of Defense and the Na-
8 tional Center on Post Traumatic Stress Dis-
9 order should continue to work together to en-
10 sure that the mental health care needs of serv-
11 ice members and veterans are met.

12 (2) COLLABORATION.—The National Center on
13 Post Traumatic Stress Disorder shall collaborate
14 with the Secretary of Defense—

15 (A) to enhance the clinical skills of military
16 clinicians through training, treatment protocols,
17 web-based interventions, and the development of
18 evidence-based interventions; and

19 (B) to promote pre-deployment resilience
20 and post-deployment readjustment among serv-
21 ice members serving in Operation Iraqi Free-
22 dom and Operation Enduring Freedom.

23 (3) TRAINING.—The National Center on Post
24 Traumatic Stress Disorder shall work with the Sec-
25 retary of Defense to ensure that clinicians in the De-

1 partment of Defense are provided with the training
2 and protocols developed pursuant to paragraph
3 (2)(A).

4 (4) AUTHORIZATION OF APPROPRIATIONS.—
5 There are authorized to be appropriated \$2,000,000
6 for 2006 to carry out this subsection.

7 **SEC. 9. DISCLOSURE OF MEDICAL RECORDS.**

8 (a) LIMITED EXCEPTION TO CONFIDENTIALITY OF
9 MEDICAL RECORDS.—Section 5701 is amended by adding
10 at the end the following:

11 “(k)(1)(A) The Secretary may disclose the name and
12 address of any individual described in subparagraph (C)
13 to an entity described in subparagraph (B) in order to
14 facilitate the determination by such entity whether the in-
15 dividual is, or after death will be, a suitable organ, tissue,
16 or eye donor if—

17 “(i) the individual is near death (as determined
18 by the Secretary) or is deceased; and

19 “(ii) the disclosure is permitted under regula-
20 tions promulgated pursuant to section 264 of the
21 Health Insurance Portability and Accountability Act
22 of 1996 (42 U.S.C. 1320d–2 note).

23 “(B) An entity described in this subparagraph is—

24 “(i) an organ procurement organization; or

1 “(ii) an entity that the Secretary has
2 determined—

3 “(I) is substantially similar in function,
4 professionalism, and reliability to an organ pro-
5 curement organization; and

6 “(II) should be treated for purposes of this
7 subsection in the same manner as an organ pro-
8 curement organization.

9 “(C) An individual described in this subparagraph
10 is—

11 “(i) a member or former member of the Armed
12 Forces; or

13 “(ii) a dependent of a member or former mem-
14 ber of the Armed Forces.

15 “(2) In this subsection, the term ‘organ procurement
16 organization’ has the meaning given the term ‘qualified
17 organ procurement organization’ in section 371(b) of the
18 Public Health Service Act (42 U.S.C. 273(b)).

19 (b) DISCLOSURES FROM CERTAIN MEDICAL
20 RECORDS.—Section 7332(b)(2) is amended by adding at
21 the end the following:

22 “(E) To an entity described in paragraph
23 (1)(B) of section 5701(k) of this title, but only to
24 the extent authorized by such section.”.

1 **SEC. 10. EXPANSION OF NATIONAL GUARD OUTREACH PRO-**
2 **GRAM.**

3 (a) REQUIREMENT.—The Secretary of Veterans Af-
4 fairs shall expand the total number of personal employed
5 by the Department of Veterans Affairs as part of the Re-
6 adjustment Counseling Service’s Global War on Terrorism
7 Outreach Program (referred to in this section as the “Pro-
8 gram”).

9 (b) COORDINATION.—In carrying out subsection (a),
10 the Secretary shall coordinate participation in the Pro-
11 gram by appropriate employees of the Veterans Benefits
12 Administration and the Veterans Health Administration.

13 (c) INFORMATION AND ASSESSMENTS.—The Sec-
14 retary shall ensure that—

15 (1) all appropriate health, education, and bene-
16 fits information is available to returning members of
17 the National Guard; and

18 (2) proper assessments of the needs in each of
19 these areas is made by the Department of Veterans
20 Affairs.

21 (d) COLLABORATION.—The Secretary of Veterans
22 Affairs shall collaborate with appropriate State National
23 Guard officials and provide such officials with any assets
24 or services of the Department of Veterans Affairs that the
25 Secretary determines to be necessary to carry out the
26 Global War on Terrorism Outreach Program.

1 **SEC. 11. EXPANSION OF TELE-HEALTH SERVICES.**

2 (a) IN GENERAL.—The Secretary shall increase the
3 number of Veterans Readjustment Counseling Service fa-
4 cilities capable of providing health services and counseling
5 through tele-health linkages with facilities of the Veterans
6 Health Administration.

7 (b) PLAN.—The Secretary shall submit to the Com-
8 mittee on Veterans' Affairs of the Senate and the Com-
9 mittee on Veterans' Affairs of the House of Representa-
10 tives a plan to implement the requirement under sub-
11 section (a), which shall describe the facilities that will have
12 such capabilities at the end of each of fiscal years 2005,
13 2006, and 2007.

14 **SEC. 12. MENTAL HEALTH DATA SOURCES REPORT.**

15 (a) IN GENERAL.—Not less than 180 days after the
16 date of enactment of this Act, the Secretary of Veterans
17 Affairs shall submit a report to the Committee on Vet-
18 erans' Affairs of the Senate and the Committee on Vet-
19 erans' Affairs of the House of Representatives describing
20 the mental health data maintained by the Department of
21 Veterans Affairs.

22 (b) CONTENTS.—The report submitted under sub-
23 section (a) shall include—

24 (1) a comprehensive list of the sources of all
25 such data, including the geographic locations of fa-

1 facilities of the Department of Veterans Affairs main-
2 taining such data;

3 (2) an assessment of the limitations or advan-
4 tages to maintaining the current data configuration
5 and locations; and

6 (3) any recommendations, if any, for improving
7 the collection, use, and location of mental health
8 data maintained by the Department of Veterans Af-
9 fairs.

10 **SEC. 13. STRATEGIC PLAN FOR LONG-TERM CARE.**

11 (a) PUBLICATION.—Not later than 180 days after the
12 date of enactment of this Act, the Secretary of Veterans
13 Affairs shall publish a strategic plan for long-term care.

14 (b) CONTENTS.—The plan published under sub-
15 section (a) shall—

16 (1) contain policies and strategies for—

17 (A) the delivery of care in domiciliaries,
18 residential treatment facilities, and nursing
19 homes, and for seriously mentally ill veterans;

20 (B) maximizing the use of State veterans
21 homes;

22 (C) locating domiciliary units as close to
23 patient populations as feasible; and

24 (D) identifying freestanding nursing homes
25 as an acceptable care model;

1 (2) include data on—

2 (A) the care of catastrophically disabled
3 veterans; and

4 (B) the geographic distribution of cata-
5 strophically disabled veterans;

6 (3) address the spectrum of noninstitutional
7 long-term care options, including—

8 (A) respite care;

9 (B) home-based primary care;

10 (C) geriatric evaluation;

11 (D) adult day health care;

12 (E) skilled home health care; and

13 (F) community residential care; and

14 (4) provide—

15 (A) cost and quality comparison analyses
16 of all the different levels of care;

17 (B) detailed information about geographic
18 distribution of services and gaps in care; and

19 (C) specific plans for working with Medi-
20 care, Medicaid, and private insurance compa-
21 nies to expand care.

22 **SEC. 14. BLIND REHABILITATION OUTPATIENT SPECIAL-**
23 **ISTS.**

24 (a) FINDINGS.—Congress makes the following find-
25 ings:

1 (1) There are approximately 135,000 blind vet-
2 erans throughout the United States, including ap-
3 proximately 35,000 who are enrolled with the De-
4 partment of Veterans Affairs. An aging veteran pop-
5 ulation and injuries incurred in Operation Iraqi
6 Freedom and Operation Enduring Freedom are in-
7 creasing the number of blind veterans.

8 (2) Since 1996, when the Department of Vet-
9 erans Affairs hired its first 14 blind rehabilitation
10 outpatient specialists (referred to in this section as
11 “Specialists”, Specialists have been a critical part of
12 the continuum of care for blind and visually im-
13 paired veterans.

14 (3) The Department of Veterans Affairs oper-
15 ates 10 residential blind rehabilitation centers that
16 are considered among the best in the world. These
17 centers have had long waiting lists, with as many as
18 1,500 blind veterans waiting for openings in 2004.

19 (4) Specialists provide—

20 (A) critically needed services to veterans
21 who are unable to attend residential centers or
22 are waiting to enter such a program;

23 (B) a range of services, including training
24 with living skills, mobility, and adaptation of
25 manual skills; and

1 (C) pre-admission screening and follow-up
2 care for blind rehabilitation centers.

3 (5) There are not enough Specialist positions to
4 meet the increased numbers and needs of blind vet-
5 erans.

6 (b) ESTABLISHMENT OF SPECIALIST POSITIONS.—
7 Not later than 30 months after the date of enactment of
8 this Act, the Secretary of Veterans Affairs shall establish
9 an additional Specialist position at not fewer than 35 addi-
10 tional facilities of the Department of Veterans Affairs.

11 (c) SELECTION OF FACILITIES.—In identifying the
12 most appropriate facilities to receive a Specialist position
13 under this section, the Secretary shall—

14 (1) give priority to facilities with large numbers
15 of enrolled legally blind veterans;

16 (2) ensure that each facility does not have such
17 a position; and

18 (3) ensure that each facility is in need of the
19 services of such Specialists.

20 (d) COORDINATION.—The Secretary shall coordinate
21 the provision of blind rehabilitation services for veterans
22 with services for the care of the visually impaired offered
23 by State and local agencies, especially if such State and
24 local agencies can provide similar services to veterans in
25 settings located closer to the residences of such veterans.

1 (e) AUTHORIZATION OF APPROPRIATIONS.—There
2 are authorized to be appropriated to carry out this section
3 \$3,500,000 for each of the fiscal years 2006 through
4 2011.

5 **SEC. 15. COMPLIANCE REPORT.**

6 Section 1706(b)(5)(A) is amended by striking
7 “2004” and inserting “2006”.

8 **SEC. 16. HEALTH CARE AND SERVICES FOR VETERANS AF-**
9 **FECTED BY HURRICANE KATRINA.**

10 (a) REQUIREMENT FOR HOSPITAL CARE AND MED-
11 ICAL SERVICES FOR PRIORITY 8 VETERANS AFFECTED BY
12 HURRICANE KATRINA.—

13 (1) IN GENERAL.—Notwithstanding any other
14 provision of law and any notwithstanding any pre-
15 vious decisions made by the Secretary of Veterans
16 Affairs pursuant to chapter 17 of title 38 United
17 States Code, the Secretary shall provide necessary
18 medical and health care services to any veteran af-
19 fected by Hurricane Katrina as if such veteran was
20 enrolled for care under section 1705 of title 38,
21 United States Code.

22 (2) STATUS OF VETERANS.—For purposes of
23 managing the health care system, as required under
24 section 1705 of title 38, United States Code, a vet-
25 eran who seeks care under paragraph (1) shall not

1 be considered to be an enrollee of the health care
2 system under such section unless the Secretary sub-
3 sequently designates such a veteran as such an en-
4 rollee.

5 (b) PROHIBITION ON COLLECTION OF COPAYMENTS
6 FOR VETERANS AFFECTED BY HURRICANE KATRINA.—
7 In furnishing hospital care and medical services to any
8 veteran affected by Hurricane Katrina, the Secretary shall
9 not collect from, or with respect to, such veteran any pay-
10 ment for such care and services otherwise required under
11 any provision of law, including any copayment for medica-
12 tions otherwise required under section 1722A of title 38,
13 United States Code.

14 (c) DEFINITION.—In this section, the term “veteran
15 affected by Hurricane Katrina” means any veteran who,
16 as of August 29, 2005, resided in the catchment region
17 of the Department of Veterans Affairs medical center in—

- 18 (1) New Orleans, Louisiana;
19 (2) Biloxi, Mississippi; or
20 (3) Gulfport, Mississippi.

21 (d) SUNSET PROVISION.—The authority under this
22 section shall expire on January 31, 2006.

1 **SEC. 17. REIMBURSEMENT FOR CERTAIN VETERANS' OUT-**
 2 **STANDING EMERGENCY TREATMENT EX-**
 3 **PENSES.**

4 (a) IN GENERAL.—Subchapter III of chapter 17 is
 5 amended by inserting after section 1725 the following:

6 **“§ 1725A. Reimbursement for emergency treatment**
 7 **expenses for which certain veterans re-**
 8 **main personally liable**

9 “(a)(1) Subject to subsection (c), the Secretary may
 10 reimburse a veteran described in subsection (b) for ex-
 11 penses resulting from emergency treatment furnished to
 12 the veteran in a non-Department facility for which the vet-
 13 eran remains personally liable.

14 “(2) In any case in which reimbursement is author-
 15 ized under subsection (a)(1), the Secretary, in the Sec-
 16 retary’s discretion, may, in lieu of reimbursing the vet-
 17 eran, make payment—

18 “(A) to a hospital or other health care provider
 19 that furnished the treatment; or

20 “(B) to the person or organization that paid for
 21 such treatment on behalf of the veteran.

22 “(b) A veteran referred to in subsection (a) is an indi-
 23 vidual who—

24 “(1) is enrolled in the health care system estab-
 25 lished under section 1705(a) of this title;

1 “(2) received care under this chapter during the
2 24-month period preceding the furnishing of such
3 emergency treatment;

4 “(3) is entitled to care or services under a
5 health-plan contract that partially reimburses the
6 cost of the veteran’s emergency treatment;

7 “(4) is financially liable to the provider of emer-
8 gency care treatment for costs not covered by the
9 veteran’s health-plan contract, including copayments
10 and deductibles; and

11 “(5) is not eligible for reimbursement for med-
12 ical care or services under section 1725 or 1728 of
13 this title.

14 “(c)(1) Any amount paid by the Secretary under sub-
15 section (a) shall exclude the amount of any payment the
16 veteran would have been required to make to the United
17 States under this chapter if the veteran had received the
18 emergency treatment from the Department.

19 “(2) The Secretary may not provide reimbursement
20 under this section with respect to any item or service—

21 “(A) provided or for which payment has been
22 made, or can reasonably be expected to be made,
23 under the veteran’s health-plan contract; or

24 “(B) for which payment has been made or can
25 reasonably be expected to be made by a third party.

1 “(3)(A) Payment by the Secretary under this section
2 on behalf of a veteran to a provider of emergency treat-
3 ment shall, unless rejected and refunded by the provider
4 within 30 days of receipt, extinguish any liability on the
5 part of the veteran for that treatment.

6 “(B) The absence of a contract or agreement between
7 the Secretary and the provider, any provision of a contract
8 or agreement, or an assignment to the contrary shall not
9 operate to modify, limit, or negate the requirement under
10 subparagraph (A).

11 “(4) In accordance with regulations prescribed by the
12 Secretary, the Secretary shall—

13 “(A) establish criteria for determining the
14 amount of reimbursement (which may include a
15 maximum amount) payable under this section; and

16 “(B) delineate the circumstances under which
17 such payment may be made, including requirements
18 for requesting reimbursement.

19 “(d)(1) In accordance with regulations prescribed by
20 the Secretary, the United States shall have the inde-
21 pendent right to recover any amount paid under this sec-
22 tion if, and to the extent that, a third party subsequently
23 makes a payment for the same emergency treatment.

24 “(2) Any amount paid by the United States to the
25 veteran, the veteran’s personal representative, successor,

1 dependents, or survivors, or to any other person or organi-
2 zation paying for such treatment shall constitute a lien
3 in favor of the United States against any recovery the
4 payee subsequently receives from a third party for the
5 same treatment.

6 “(3) Any amount paid by the United States to the
7 provider that furnished the veteran’s emergency treatment
8 shall constitute a lien against any subsequent amount the
9 provider receives from a third party for the same emer-
10 gency treatment for which the United States made pay-
11 ment.

12 “(4) The veteran or the veteran’s personal represent-
13 ative, successor, dependents, or survivors shall—

14 “(A) ensure that the Secretary is promptly noti-
15 fied of any payment received from any third party
16 for emergency treatment furnished to the veteran;

17 “(B) immediately forward all documents relat-
18 ing to a payment described in subparagraph (A);

19 “(C) cooperate with the Secretary in an inves-
20 tigation of a payment described in subparagraph
21 (A); and

22 “(D) assist the Secretary in enforcing the
23 United States right to recover any payment made
24 under subsection (c)(3).

1 “(e) The Secretary may waive recovery of a payment
2 made to a veteran under this section that is otherwise re-
3 quired under subsection (d)(1) if the Secretary determines
4 that such waiver would be in the best interest of the
5 United States, as defined by regulations prescribed by the
6 Secretary.

7 “(f) For purposes of this section—

8 “(1) the term ‘health-plan contract’ includes—

9 “(A) an insurance policy or contract, med-
10 ical or hospital service agreement, membership
11 or subscription contract, or similar arrange-
12 ment, under which health services for individ-
13 uals are provided or the expenses of such serv-
14 ices are paid;

15 “(B) an insurance program described in
16 section 1811 of the Social Security Act (42
17 U.S.C. 1395e) or established by section 1831 of
18 that Act (42 U.S.C. 1395j);

19 “(C) a State plan for medical assistance
20 approved under title XIX of such Act (42
21 U.S.C. 1396 et seq.); and

22 “(D) a workers’ compensation law or plan
23 described in section 1729(A)(2)(B) of this title;

24 “(2) the term ‘third party’ means—

25 “(A) a Federal entity;

1 (3) FEDERAL LAND.—The term “Federal land”
2 means an approximately 11.75 acre parcel of feder-
3 ally-owned property, including the 15 structures lo-
4 cated on such property, which is managed by the
5 Department of Veterans Affairs and located in the
6 northeastern portion of Tower Park in the City.

7 (4) SECRETARY.—The term “Secretary” means
8 the Secretary of Veterans Affairs.

9 (b) IN GENERAL.—Subject to valid existing rights,
10 easements, and rights-of-way, the Secretary may convey
11 all right, title, and interest of the United States in and
12 to the Federal land to the City in exchange for fair market
13 value consideration.

14 (c) RELEASE FROM LIABILITY.—Effective on the
15 date of conveyance to the City of the parcel of Federal
16 land under subsection (b), the United States shall not be
17 liable for damages arising out of any act, omission, or oc-
18 currence relating to the Federal land and facilities con-
19 veyed, but shall continue to be liable for damages caused
20 by acts of negligence committed by the United States or
21 by any employee or agent of the United States before the
22 date of conveyance, consistent with chapter 171 of title
23 28, United States Code.

24 (d) ADMINISTRATIVE COSTS.—All administrative
25 costs relating to the conveyance of the Federal land under

1 subsection (b) shall be paid by the City to the United
2 States.

3 **SEC. 19. TECHNICAL AND CLERICAL AMENDMENTS.**

4 (a) TITLE 38, UNITED STATES CODE.—Title 38,
5 United States Code, is amended as follows:

6 (1) TYPOGRAPHICAL ERROR.—Section
7 1117(h)(1) is amended by striking
8 “notwithstanding” and inserting “notwith-
9 standing”.

10 (2) INSERTION OF MISSING WORD.—Section
11 1513(a) is amended by inserting “section” after
12 “prescribed by”.

13 (3) CITATION CORRECTION.—Section
14 1718(e)(2) is amended by inserting “of 1938” after
15 “Act”.

16 (4) CITATION CORRECTION.—Section
17 1785(b)(1) is amended by striking “Robert B.” and
18 inserting “Robert T.”.

19 (5) PUNCTUATION CORRECTION.—Section
20 2002(1) is amended by inserting a closing paren-
21 thesis before the period at the end.

22 (6) PUNCTUATION CORRECTION.—Section
23 2011(a)(1)(C) is amended by inserting a period at
24 the end.

1 (7) CROSS REFERENCE CORRECTION.—Section
2 2041(a)(3)(A)(i) is amended by striking “under this
3 chapter” and inserting “established under section
4 3722 of this title”.

5 (8) DELETION OF EXTRA WORDS.—Section
6 3012(a)(1)(C)(ii) is amended by striking “on or”.

7 (9) CROSS REFERENCE CORRECTION.—Section
8 3017(b)(1)(D) is amended by striking “3011(c)”
9 and inserting “3011(e)”.

10 (10) STYLISTIC AMENDMENTS.—Section 3018A
11 is amended—

12 (A) in subsections (b) and (c), by striking
13 “of this section” each place it appears;

14 (B) in subsections (a)(4), (a)(5), (d)(1),
15 and (d)(3) by striking “of this subsection” each
16 place it appears; and

17 (C) in subsection (d)(3), by striking “of
18 this chapter” and inserting “of this title”.

19 (11) CROSS REFERENCE CORRECTION.—Section
20 3117(b)(1) is amended—

21 (A) by striking “section 8” and inserting
22 “section 4(b)(1)”; and

23 (B) by striking “633(b)” and inserting
24 “633(b)(1)”.

1 (12) INSERTION OF MISSING WORD.—Section
2 3511(a)(1) is amended by inserting “sections” after
3 “under both”.

4 (13) SUBSECTION HEADINGS.—

5 (A) Sections 3461, 3462, 3481, 3565,
6 3680, and 3690 are each amended by revising
7 each subsection heading for a subsection therein
8 (appearing as a centered heading immediately
9 before the text of the subsection) so that such
10 heading appears immediately after the sub-
11 section designation and is set forth in capitals-
12 and-small-capitals typeface, followed by a period
13 and a one-em dash.

14 (B) Section 3461(c) is amended by insert-
15 ing after the subsection designation the fol-
16 lowing: “DURATION OF ENTITLEMENT.—”.

17 (C) Section 3462 is amended—

18 (i) in subsection (d), by inserting after
19 the subsection designation the following:
20 “PRISONERS OF WAR.—”; and

21 (ii) in subsection (e), by inserting
22 after the subsection designation the fol-
23 lowing: “TERMINATION OF ASSISTANCE.—
24 ”.

1 (14) CROSS REFERENCE CORRECTION.—Section
2 3732(e)(10)(D) is amended by striking “clause (B)
3 of paragraphs (5), (6), (7), and (8) of this sub-
4 section” and inserting “paragraphs (5)(B), (6),
5 (7)(B), and (8)(B)”.

6 (15) DATE OF ENACTMENT REFERENCE.—Sec-
7 tion 3733(a)(7) is amended by striking “the date of
8 the enactment of the Veterans’ Benefits Act of
9 2003” and inserting “December 16, 2003”.

10 (16) REPEAL OF OBSOLETE PROVISIONS.—Sec-
11 tion 4102A(e)(7) is amended—

12 (A) by striking “With respect to program
13 years beginning during or after fiscal year
14 2004, one percent of” and inserting “Of”; and

15 (B) by striking “for the program year”
16 and inserting “for any program year, one per-
17 cent”.

18 (17) REPEAL OF OBSOLETE PROVISIONS.—Sec-
19 tion 4105(b) is amended—

20 (A) by striking “shall provide,” and all
21 that follows through “Affairs with” and insert-
22 ing “shall, on the 15th day of each month, pro-
23 vide the Secretary and the Secretary of Vet-
24 erans Affairs with updated information regard-
25 ing”; and

1 (B) by striking “and shall” and all that
2 follows through “regarding the list”.

3 (18) CITATION CORRECTION.—Section 4110B is
4 amended—

5 (A) by striking “this Act” and inserting
6 “the Workforce Investment Act of 1998”; and

7 (B) by striking “the Workforce Investment
8 Act of 1998” and inserting “that Act (29
9 U.S.C. 2822(b))”.

10 (19) CROSS-REFERENCE CORRECTION.—Section
11 4331(b)(2)(C) is amended by striking “section
12 2303(a)(2)(C)(ii)” and inserting “section
13 2302(a)(2)(C)(ii)”

14 (20) CAPITALIZATION CORRECTION.—Section
15 7253(d)(5) is amended by striking “court” and in-
16 serting “Court”.

17 (21) CITATION CORRECTION.—Section
18 8111(b)(1) is amended by striking “into the stra-
19 tegic” and all that follows through “and Results
20 Act” and inserting “into the strategic plan of each
21 Department under section 306 of title 5 and the
22 performance plan of each Department under section
23 1115 of title 31”.

24 (22) REPEAL OF OBSOLETE PROVISIONS.—Sec-
25 tion 8111 is amended further—

1 (A) in subsection (d)—

2 (i) in paragraph (2), by striking “ef-
3 fective October 1, 2003,”; and

4 (ii) in paragraph (3)(A), by striking
5 the last sentence; and

6 (B) in subsection (e)(2)—

7 (i) in the second sentence, by striking
8 “shall be implemented no later than Octo-
9 ber 1, 2003, and”; and

10 (ii) in the third sentence, by striking
11 “, following implementation of the sched-
12 ule,”.

13 (23) CITATION CORRECTION.—Section
14 8111A(a)(2)(B)(i) is amended by striking “Robert
15 B.” and inserting “Robert T.”.

16 (b) PUBLIC LAW 107–296.—

17 (1) IN GENERAL.—Section 1704(d) of the
18 Homeland Security Act of 2002 (Public Law 107–
19 296; 116 Stat. 2315) is amended—

20 (A) by striking “101(25)(d)” and inserting
21 “101(25)(D)”; and

22 (B) by striking “3011(a)(1)(A)(ii)(II)”
23 and inserting “3011(a)(1)(A)(ii)(III)”.

1 (2) EFFECTIVE DATE.—The amendments made
2 by paragraph (1) shall be effective as of November
3 25, 2002.

 Passed the Senate December 22 (legislative day, De-
cember 21), 2005.

Attest:

Secretary.

109TH CONGRESS
1ST SESSION

S. 1182

AN ACT

To amend title 38, United States Code, to improve health care for veterans, and for other purposes.