

115TH CONGRESS
2D SESSION

H. R. 3642

IN THE SENATE OF THE UNITED STATES

MAY 22, 2018

Received; read twice and referred to the Committee on Veterans' Affairs

AN ACT

To direct the Secretary of Veterans Affairs to carry out a pilot program to improve the access to private health care for veterans who are survivors of military sexual trauma.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Military Sexual Assault
3 Victims Empowerment Act” or the “Military SAVE Act”.

4 **SEC. 2. PILOT PROGRAM FOR PRIVATE HEALTH CARE FOR**
5 **VETERANS WHO ARE SURVIVORS OF MILI-**
6 **TARY SEXUAL TRAUMA.**

7 (a) **ESTABLISHMENT.**—The Secretary of Veterans
8 Affairs shall carry out a pilot program to furnish hospital
9 care and medical services to eligible veterans through non-
10 Department health care providers to treat injuries or ill-
11 nesses which, in the judgment of a professional employed
12 by the Department, resulted from a physical assault of
13 a sexual nature, battery of a sexual nature, or sexual har-
14 assment which occurred while the veteran was serving on
15 active duty, active duty for training, or inactive duty train-
16 ing.

17 (b) **DURATION.**—The Secretary shall carry out the
18 pilot program under subsection (a) for a 3-year period.
19 If at the completion of the pilot program an eligible vet-
20 eran is receiving hospital care and medical services from
21 a non-Department health care provider under the pilot
22 program, the Secretary may approve, on a case-by-case
23 basis, the continuation of such hospital care and medical
24 services from that non-Department health care provider
25 until the completion of the episode of care.

1 (c) ELIGIBLE VETERANS.—A veteran is eligible to
2 participate in the pilot program under subsection (a) if
3 the veteran—

4 (1) is eligible to receive counseling and appro-
5 priate care and services under section 1720D of title
6 38, United States Code; and

7 (2) resides in a site selected under subsection
8 (d).

9 (d) SITES.—

10 (1) SELECTION.—The Secretary shall select not
11 more than five sites in which to carry out the pilot
12 program under subsection (a). Each site shall meet
13 each of the following criteria:

14 (A) Except as provided by paragraph (2),
15 the site consists of a city with a population be-
16 tween 200,000 and 500,000, as determined by
17 the Bureau of the Census as of the first day of
18 the pilot program.

19 (B) The site is in a State in which the Na-
20 tional Violence Against Women Prevention Re-
21 search Center or the Centers for Disease Con-
22 trol and Prevention, or both, has determined
23 the rate of sexual assault to be a substantial
24 problem.

1 (C) The site is in a State that, as of the
2 first day of the pilot program, has a weighted
3 percentage of reported rape of not less than 20
4 percent but not more than 30 percent of sexual
5 assault cases, in accordance with the finding of
6 the Centers for Disease Control and Prevention
7 contained in the “‘Lifetime Prevalence of Sex-
8 ual Violence by any Perpetrator” (NISVS
9 2010).

10 (2) RURAL SITE.—Not fewer than one site se-
11 lected under paragraph (1) shall be rural, as deter-
12 mined by the Secretary.

13 (e) PARTICIPATION.—

14 (1) ELECTION.—Subject to paragraph (2), an
15 eligible veteran may elect to participate in the pilot
16 program under subsection (a). Such election shall
17 not affect the ability of the veteran to receive health
18 care furnished by Department providers.

19 (2) NUMBER.—Not more than 75 veterans may
20 participate in the pilot program under subsection (a)
21 at each site selected under subsection (d).

22 (3) CHOICE OF NON-DEPARTMENT HEALTH
23 CARE PROVIDERS.—An eligible veteran who partici-
24 pates in the pilot program under subsection (a) may
25 freely choose from which non-Department health

1 care provider the veteran receives hospital care or
2 medical services under the pilot program, except that
3 the Secretary shall—

4 (A) ensure that each such non-Department
5 health care provider maintains at least the
6 same or similar credentials and licenses as
7 those credentials and licenses that are required
8 of health care providers of the Department, as
9 determined by the Secretary for the purposes of
10 this section; and

11 (B) make a reasonable effort to ensure
12 that such non-Department health care provider
13 is familiar with the conditions and concerns
14 that affect members of the Armed Forces and
15 veterans and is trained in evidence-based psy-
16 chotherapy.

17 (4) PROVISION OF INFORMATION.—The Sec-
18 retary shall—

19 (A) notify eligible veterans of the ability to
20 make an election under paragraph (1); and

21 (B) provide to such veterans educational
22 referral materials, including through pamphlets
23 and internet websites, on the non-Department
24 providers in the sites selected under subsection
25 (d).

1 (f) AUTHORIZATION AND MONITORING OF CARE.—

2 In accordance with subsection (e), the Secretary shall en-
3 sure that the Department of Veterans Affairs authorizes
4 and monitors the hospital care and medical services fur-
5 nished under the pilot program for appropriateness and
6 necessity. In authorizing and monitoring such care, the
7 Secretary shall—

8 (1) treat a non-Department health care pro-
9 vider that furnishes to such a veteran hospital care
10 or medical services under the pilot program as an
11 authorized recipient of records of such veteran for
12 purposes of section 7332(b) of title 38, United
13 States Code; and

14 (2) ensure that such non-Department health
15 care provider transmits to the Department such
16 records as the Secretary determines appropriate.

17 (g) PAYMENTS.—

18 (1) CURRENT PROVIDERS.—If a non-Depart-
19 ment health care provider has entered into a con-
20 tract, agreement, or other arrangement with the
21 Secretary pursuant to another provision of law to
22 furnish hospital care or medical services to veterans,
23 the Secretary shall pay the health care provider for
24 hospital care or medical services furnished under
25 this section using the same rates and payment

1 schedules as provided for in such contract, agree-
2 ment, or other arrangement.

3 (2) NEW PROVIDERS.—If a non-Department
4 health care provider has not entered into a contract,
5 agreement, or other arrangement with the Secretary
6 pursuant to another provision of law to furnish hos-
7 pital care or medical services to veterans, the Sec-
8 retary shall pay the health care provider for hospital
9 care or medical services furnished under this section
10 using the same rates and payment schedule as if
11 such care and services was furnished pursuant to
12 section 1703 of title 38, United States Code.

13 (3) NEW CONTRACTS AND AGREEMENTS.—The
14 Secretary shall take reasonable efforts to enter into
15 a contract, agreement, or other arrangement with a
16 non-Department health care provider described in
17 subsection (a) to ensure that future care and serv-
18 ices authorized by the Secretary and furnished by
19 the provider are subject to such a contract, agree-
20 ment, or other arrangement.

21 (h) SURVEYS.—The Secretary shall conduct a survey
22 of a sample of eligible veterans to assess the hospital care
23 and medical services furnished to such veterans either pur-
24 suant to this section or section 1720D of title 38, United
25 States Code, as the case may be.

1 (i) REPORT.—Not later than 60 days before the com-
2 pletion of the pilot program under subsection (a), the Sec-
3 retary shall submit to the Committees on Veterans’ Affairs
4 of the House of Representatives and the Senate a report
5 on the pilot program. The report shall include the fol-
6 lowing:

7 (1) The results of the pilot program, including,
8 to the extent possible, an assessment of the health
9 outcomes of veterans who participated in the pilot
10 program.

11 (2) The recommendation of the Secretary with
12 respect to extending or making permanent the pilot
13 program.

14 (j) DEFINITIONS.—In this section:

15 (1) The term “non-Department health care pro-
16 vider” means an entity specified in section
17 101(a)(1)(B) of section 101 of the Veterans Access,
18 Choice, and Accountability Act of 2015 (Public Law
19 113–146; 38 U.S.C. 1701) or any other health care
20 provider that has entered into a contract, agreement,
21 or other arrangement with the Secretary pursuant to
22 another provision of law to furnish hospital care or
23 medical services to veterans.

1 (2) The term “sexual harassment” has the
2 meaning given that term in section 1720D of title
3 38, United States Code.

4 (3) The term “State” has the meaning given
5 that term in section 101(20) of title 38, United
6 States Code.

7 **SEC. 3. NO ADDITIONAL FUNDS AUTHORIZED.**

8 No additional funds are authorized to be appro-
9 priated to carry out the requirements of this Act. Such
10 requirements shall be carried out using amounts otherwise
11 authorized to be appropriated.

Passed the House of Representatives May 21, 2018.

Attest:

KAREN L. HAAS,

Clerk.