

115TH CONGRESS  
2D SESSION

# H. R. 5047

To direct the Secretary of Veterans Affairs to carry out a demonstration program to provide expanded access to medical services through partnerships between Department of Veterans Affairs medical centers and Federally Qualified Health Centers, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 15, 2018

Mr. BILIRAKIS (for himself, Ms. KUSTER of New Hampshire, Mr. ARRINGTON, Mr. COFFMAN, and Mr. PETERS) introduced the following bill; which was referred to the Committee on Veterans' Affairs

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## A BILL

To direct the Secretary of Veterans Affairs to carry out a demonstration program to provide expanded access to medical services through partnerships between Department of Veterans Affairs medical centers and Federally Qualified Health Centers, 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.**

4       This Act may be cited as the “VA Community Care  
5       Enhancement Act”.

1 **SEC. 2. DEPARTMENT OF VETERANS AFFAIRS DEMONSTRATION PROGRAM ON EXPANDED AVAILABILITY**  
2 **OF MEDICAL SERVICES THROUGH CONTRACTS WITH FEDERALLY QUALIFIED**  
3 **HEALTH CENTERS.**

6 (a) DEMONSTRATION PROGRAM.—The Secretary of  
7 Veterans Affairs shall carry out a demonstration program  
8 under which the Secretary shall furnish certain medical  
9 services under chapter 17 of title 38, United States Code,  
10 through contracts between Department of Veterans Af-  
11 fairs medical centers and Federally Qualified Health Cen-  
12 ters (hereinafter referred to as “FQHCs”).

13 (b) COMMUNITY-CARE COLLABORATIVE ARRANGEMENTS.—Under the demonstration program, the Sec-  
14 retary shall enter into contracts, on behalf of Department  
15 medical centers, with not less than five separate FQHCs  
16 that meet the selection criteria under subsection (c). Such  
17 a contract shall provide that—

19 (1) a Department medical provider at the med-  
20 ical center may refer patients directly to the FQHC,  
21 without any requirement to consult with other agen-  
22 cies, offices, or units within the Department or with  
23 entities under contract with the Department;

24 (2) all patient referrals to the FQHC are at the  
25 discretion of the Department medical provider, and

1 the decision whether to accept such a referral will be  
2 at the discretion of the patient;

3 (3) if a patient accepts such a referral, the  
4 FQHC agrees to accept the patient;

5 (4) if the FQHC accepts the patient, the  
6 FQHC shall provide medical services to the patient  
7 only to the extent that such services are available  
8 from the FQHC pursuant to section 330 of the Pub-  
9 lic Health Service Act (42 U.S.C. 254b);

10 (5) if a patient accepted by the FQHC is a vet-  
11 eran, the FQHC shall accept the family members of  
12 the veteran and shall provide care and services to  
13 such family members in accordance with chapter 17  
14 of title 38, United States Code, if such family mem-  
15 bers are eligible for medical services under such  
16 chapter;

17 (6) if a patient referred under the demonstra-  
18 tion program is not eligible for a type of care or  
19 service needed by the patient under chapter 17 of  
20 title 38, United States Code, the FQHC agrees to  
21 provide such care or service to the patient, and ac-  
22 cept payment for such care or service, in accordance  
23 with section 330 of the Public Health Service Act  
24 (42 U.S.C. 254b);

1           (7) the FQHC agrees to provide to patients re-  
2       ferred under the demonstration program—

3           (A) in consultation with the Department  
4       medical center, appropriate education on what  
5       care and services may be provided to the pa-  
6       tient under chapter 17 of title 38, United  
7       States Code, and what care and services may  
8       not be provided under such title; and

9           (B) appropriate education on what care  
10      and services are provided under section 330 of  
11      the Public Health Service Act (42 U.S.C. 254b)  
12      and what care and services are not provided  
13      under such section;

14          (8) the FQHC agrees to provide medical serv-  
15      ices to the veteran in a context that sufficiently  
16      takes into account the culture of members of the  
17      uniformed services, veterans, and family members  
18      and caregivers of members of the uniformed services  
19      and veterans, including the experience of combat  
20      and the experience of military sexual trauma;

21          (9) the medical center and the FQHC agree to  
22      cooperate to ensure that patients referred under the  
23      demonstration program are patients of both the  
24      medical center and the FQHC and, for such pur-  
25      poses, to ensure interoperability, to the extent prac-

1        ticable, in terms of sharing the electronic health  
2        records of the patients;

3            (10) the FQHC agrees to begin providing care  
4        and services to a referred patient promptly after re-  
5        ceiving the referral, without regard to whether the  
6        patient has completed the process of enrolling in the  
7        patient enrollment system under section 1705 of  
8        title 38, United States Code;

9            (11) with respect to a patient who is a veteran  
10       who has not completed such enrollment process as of  
11       the time the referral is made, the FQHC agrees to—

12            (A) in coordination with the medical cen-  
13        ter, make available to the veteran assistance  
14        with the enrollment process; and

15            (B) accept that reimbursement from the  
16        Secretary for providing care or services to the  
17        veteran will be delayed until after the enroll-  
18        ment process is completed;

19            (12) the FQHC agrees to accept the financial  
20        risk that a patient referred under the demonstration  
21        program may not qualify for care or services fur-  
22        nished by the Secretary under title 38, United  
23        States Code;

24            (13) the FQHC agrees to make available to re-  
25        ferred patients, at one or more services sites of the

1 FQHC and in accordance with the limitations on the  
2 scope of services applicable under section 330 of the  
3 Public Health Service Act (42 U.S.C. 245b)—

4 (A) behavioral and mental health and sub-  
5 stance abuse services;

6 (B) women's health services, including  
7 OBGYN services;

8 (C) audiology;

9 (D) HIV and hepatitis C treatment;

10 (E) dental care;

11 (F) optometry and ophthalmology;

12 (G) pain management;

13 (H) internal medicine;

14 (I) cancer detection and screening;

15 (J) podiatry; and

16 (K) urgent care;

17 (14) the FQHC agrees to provide additional  
18 services to referred patients to enable such patients  
19 to access medical services furnished under the dem-  
20 onstration program, including outreach and trans-  
21 portation services;

22 (15) the Secretary agrees to provide timely re-  
23 imbursement to the FQHC for medical services, pro-  
24 vided to referred patients at the applicable rate for  
25 the State in which the FQHC is located under sec-

1       tion 1902(bb) of the Social Security Act (42 U.S.C.  
2       1396a);

3           (16) the FQHC agrees to undergo periodic au-  
4       dits in accordance with section 330 of the Public  
5       Health Service Act (42 U.S.C. 254b) and title XIX  
6       of the Social Security Act (42 U.S.C. 1396 et seq.);  
7       and

8           (17) to the extent practicable, the medical cen-  
9       ter agrees to provide information to patients on the  
10      availability in such area of medical services through  
11      the participation of the FQHC in the demonstration  
12      program, including information on the particular  
13      services that are available from the FQHC and on  
14      the extent to which the patient will be required to  
15      make payments for such service.

16      (c) SELECTION CRITERIA.—

17           (1) IN GENERAL.—In order to select FQHCs  
18      with which to enter into contracts under subsection  
19      (b), the Secretary shall develop selection criteria.  
20      Such selection criteria shall—

21           (A) take into account geographic and de-  
22      mographic differences across catchment areas,  
23      as defined by the Veterans Health Administra-  
24      tion;

1 (B) provide for the selection of one or  
2 more FQHCs that have not fewer than two  
3 service sites, including one service site in a  
4 highly rural area;

5 (C) provide for the selection of one or more  
6 FQHCs that—

7 (i) have a large number of service  
8 sites;

9 (ii) have a service area—  
10 (I) in which a significant number  
11 of veterans reside;

12 (II) that includes both rural and  
13 urban areas, and one or more Depart-  
14 ment medical centers; and

15 (III) that is located within 100  
16 miles of a military base;

17 (iii) is participating in a network  
18 that—

19 (I) provides connectivity with re-  
20 spect to electronic health records; and

21 (II) includes one or more Depart-  
22 ment medical centers as participants;  
23 and

24 (iv) has engaged in outreach to one or  
25 more Department medical centers toward



1 collaborating on the provision of services to  
2 veterans;

3 (D) require that a selected FQHC has the  
4 capability to assist veterans in navigating the  
5 benefits available to them under the laws ad-  
6 ministered by the Secretary of Veterans Affairs;  
7 and

8 (E) require a selected FQHC to commit to  
9 establishing a program to educate health pro-  
10 fessionals employed by the FQHC on cultural  
11 competency in providing services to veterans.

12 (2) APPROVAL OF CERTAIN FQHCS.—Each con-  
13 tract entered into under subsection (b) shall specify  
14 the date on which the FQHC agrees to begin pro-  
15 viding medical services to patients referred by a  
16 medical provider at a Department of Veterans Af-  
17 fairs medical center under the contract. Such date  
18 may not be later than 180 days after the date on  
19 which the Secretary and the FQHC enter into the  
20 contract.

21 (d) COORDINATION WITH DEPARTMENT OF HEALTH  
22 AND HUMAN SERVICES.—In carrying out the demonstra-  
23 tion program under this section, the Secretary of Veterans  
24 Affairs shall consult with the Secretary of Health and  
25 Human Services (acting through the Administrator of the

1 Health Resources and Services Administration), who shall  
2 provide to the Secretary of Veterans Affairs information  
3 on the capacity of FQHCs to serve veterans. With respect  
4 to FQHCs that are participating in such demonstration  
5 program, the Secretary of Health and Human Services  
6 may, subject to that availability of appropriations for such  
7 purpose, make payments to such FQHCs to increase such  
8 capacity.

9 (e) PATIENT ENROLLMENT.—

10 (1) NON-ENROLLED VETERANS.—Notwith-  
11 standing subsection (c) of section 1705 of title 38,  
12 United States Code, the Secretary shall develop a  
13 process to refer veterans who are not enrolled in the  
14 patient enrollment system of the Department of Vet-  
15 erans Affairs under such section to an FQHC for  
16 the provision of medical services to the veteran  
17 under the pilot program.

18 (2) FACILITATION OF ENROLLMENT.—The Sec-  
19 retary shall develop a process by which FQHCs that  
20 have entered into a contract with the Secretary  
21 under subsection (b) are able to facilitate the enroll-  
22 ment of veterans referred to the FQHC under para-  
23 graph (1) in such patient enrollment system.

24 (f) ELECTRONIC HEALTH RECORDS.—The Secretary  
25 of Veterans Affairs shall provide notice to any veteran ac-

1 cepting a referral to an FQHC under the demonstration  
2 program that such acceptance shall serve as consent for  
3 the Department medical center and the FQHC to share  
4 electronic health records unless the veteran elects not to  
5 authorize such sharing of records using a form provided  
6 by the Secretary for such purpose.

7 (g) RULE OF CONSTRUCTION.—Nothing in this sec-  
8 tion shall be construed as affecting—

9 (1) any authority or obligation of the Secretary  
10 of Veterans Affairs to furnish medical services under  
11 chapter 17 of title 38, United States Code, to a pa-  
12 tient who is referred to an FQHC under the dem-  
13 onstration program;

14 (2) the eligibility of any individual to receive  
15 medical services under chapter 17 of title 38, United  
16 States Code; or

17 (3) section 330 of the Public Health Service  
18 Act (42 U.S.C. 254b).

19 (h) FUNDING.—No additional amounts are author-  
20 ized to be appropriated to carry out this section. The Sec-  
21 retary shall carry out the demonstration program using  
22 amounts otherwise available to the Secretary for Medical  
23 Community Care for fiscal years 2018 through 2022.

24 (i) DURATION; TERMINATION.—

1           (1) DURATION.—The Secretary of Veterans Af-  
2           fairs may enter into contracts under the demonstra-  
3           tion program during the three-year period beginning  
4           on the date of the enactment of this Act. Such pe-  
5           riod may be extended or made permanent at the dis-  
6           cretion of the Secretary.

7           (2) PROVISION OF CARE.—If the Secretary ter-  
8           minates the demonstration program under this sec-  
9           tion, the Secretary shall ensure that patients receiv-  
10          ing care or services through a FQHC pursuant to a  
11          contract entered into under subsection (b) are able  
12          to receive medical services provided by the FQHC  
13          under such contract until the conclusion of the rel-  
14          evant episode of care.

15          (j) DEFINITION OF FEDERALLY QUALIFIED HEALTH  
16          CENTER.—The term “Federally Qualified Health Center”  
17          means an entity receiving a grant under section 330 of  
18          the Public Health Service Act (42 U.S.C. 254b) or any  
19          other entity described in section 1861(aa)(4) of the Social  
20          Security Act.

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