

115TH CONGRESS
2D SESSION

H. R. 5500

To direct the Secretary of Veterans Affairs to conduct outreach to veterans regarding the effect of delayed payments of claims for emergency medical care furnished by non-Department of Veterans Affairs medical providers by the Office of Community Care and to direct the Secretary to submit to Congress an annual report regarding such delayed payments.

IN THE HOUSE OF REPRESENTATIVES

APRIL 12, 2018

Mr. ROUZER introduced the following bill; which was referred to the
Committee on Veterans' Affairs

A BILL

To direct the Secretary of Veterans Affairs to conduct outreach to veterans regarding the effect of delayed payments of claims for emergency medical care furnished by non-Department of Veterans Affairs medical providers by the Office of Community Care and to direct the Secretary to submit to Congress an annual report regarding such delayed payments.

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’ Credit Pro-
5 tection Act”.

1 **SEC. 2. OUTREACH TO VETERANS REGARDING EFFECT OF**
2 **CERTAIN DELAYED PAYMENTS BY DEPART-**
3 **MENT OF VETERANS AFFAIRS OFFICE OF**
4 **COMMUNITY CARE.**

5 (a) **OUTREACH.**—The Secretary of Veterans Affairs
6 shall conduct outreach, including through national and
7 local veterans service organizations, to inform veterans of
8 how to resolve credit issues caused by delayed payment
9 of an eligible claim for emergency hospital care, emergency
10 medical services, or other emergency health care furnished
11 through a non-Department of Veterans Affairs provider.

12 (b) **ANNUAL REPORT.**—

13 (1) **IN GENERAL.**—During the five-year period
14 following the date of the enactment of this Act, the
15 Secretary of Veterans Affairs shall annually submit
16 to Congress a report on the effectiveness of the Of-
17 fice of Community Care (or successor office) in pro-
18 viding timely payment of proper invoices for emer-
19 gency hospital care, emergency medical services, or
20 other emergency health care furnished through non-
21 Department of Veterans Affairs providers by the re-
22 quired payment date.

23 (2) **PERIODS COVERED.**—

24 (A) The first report submitted under para-
25 graph (1) shall cover the five-year period pre-
26 ceding the date of the report, to the greatest

1 extent practicable. With respect to covering the
2 part of such period that occurred before Octo-
3 ber 1, 2014, the report shall evaluate the provi-
4 sion by the Veterans Integrated Service Net-
5 works of payments described in such paragraph.

6 (B) The reports following the first report
7 shall each cover the period following the date on
8 which the prior report was submitted.

9 (3) MATTERS INCLUDED.—The reports under
10 paragraph (1) shall include, for the period covered
11 by the report, the following:

12 (A) The number of veterans who contacted
13 the Secretary regarding a delayed payment that
14 negatively affected, or will potentially negatively
15 affect, the credit of the veteran.

16 (B) The number of proper invoices sub-
17 mitted, listed in a table for each quarter and
18 fiscal year of each such period that includes—

19 (i) the total amount owed by the Sec-
20 retary under the proper invoices;

21 (ii) the payment status of each proper
22 invoice, as of the date of the report; and

23 (iii) the period that elapsed until each
24 proper invoice was paid, including an ex-
25 planation of any delayed payment.

1 (C) Any comments regarding delayed pay-
2 ments made by medical providers.

3 (D) A description of the best practices that
4 the Office of Community Care (or successor of-
5 fice) can carry out to provide timely payment of
6 a proper invoice, including a plan to improve
7 such timely payments.

8 (E) With respect to pending claims for re-
9 imbursement for emergency hospital care, emer-
10 gency medical services, and other emergency
11 health care furnished through non-Department
12 of Veterans Affairs providers—

13 (i) the total number of such pending
14 claims for each hospital system of the De-
15 partment, as of the last day of the period
16 covered by the report;

17 (ii) the total number of veterans who
18 submitted such a pending claim in each
19 State, as of such day;

20 (iii) the aggregate amount of all such
21 pending claims in each State, as of such
22 day;

23 (iv) as of such day—

1 (I) the number of such pending
2 claims that have been pending for 30
3 days or longer;

4 (II) the number of such pending
5 claims that have been pending for 90
6 days or longer; and

7 (III) the number of such pending
8 claims that have been pending for 365
9 days or longer; and

10 (v) for each hospital system, for the
11 period covered by the report—

12 (I) the number of claims for re-
13 imbursement for emergency hospital
14 care, emergency medical services, and
15 other emergency health care furnished
16 through non-Department of Veterans
17 Affairs providers approved during
18 such quarter;

19 (II) the number of such claims
20 denied during such quarter; and

21 (III) the number of such claims
22 denied listed by each denial reason
23 group.

24 (c) COMPTROLLER GENERAL STUDY.—

1 (1) IN GENERAL.—The Comptroller General of
2 the United States shall conduct a study that evalu-
3 ates the effectiveness of the Office of Community
4 Care in providing timely payment of a proper invoice
5 for emergency hospital care, emergency medical serv-
6 ices, or other emergency health care furnished
7 through non-Department of Veterans Affairs pro-
8 viders by the required payment date.

9 (2) SUBMITTAL.—The Comptroller General
10 shall submit to Congress a report on the study con-
11 ducted under paragraph (1), including the total
12 amount of interest penalties paid by the Secretary of
13 Veterans Affairs under section 3902 of title 31,
14 United States Code, by reason of a delayed payment.

15 (d) DEFINITIONS.—In this section:

16 (1) The term “delayed payment” means a prop-
17 er invoice that is not paid by the Secretary of Vet-
18 erans Affairs until after the required payment date.

19 (2) The term “proper invoice” has the meaning
20 given that term in section 3901(a) of title 31,
21 United States Code.

22 (3) The term “required payment date” means,
23 with respect to proper invoices for emergency hos-
24 pital care, emergency medical services, or other
25 emergency health care, the date that payment is due

- 1 pursuant to standards determined appropriate by
- 2 the Secretary.

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