

In the House of Representatives, U. S.,

May 16, 2018.

Resolved, That the bill from the Senate (S. 2372) entitled “An Act to amend title 38, United States Code, to provide outer burial receptacles for remains buried in National Parks, and for other purposes.”, do pass with the following

AMENDMENT:

Strike out all after the enacting clause and insert:

1 ***SECTION 1. SHORT TITLE; TABLE OF CONTENTS.***

2 (a) *SHORT TITLE*.—*This Act may be cited as the*
3 *“John S. McCain III, Daniel K. Akaka, and Samuel R.*
4 *Johnson VA Maintaining Internal Systems and Strength-*
5 *ening Integrated Outside Networks Act of 2018” or the “VA*
6 *MISSION Act of 2018”.*

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

Sec. 1. Short title; table of contents.

TITLE I—CARING FOR OUR VETERANS

Sec. 100. Short title; references to title 38, United States Code.

Subtitle A—Developing an Integrated High-Performing Network

CHAPTER 1—ESTABLISHING COMMUNITY CARE PROGRAMS

Sec. 101. Establishment of Veterans Community Care Program.

*Sec. 102. Authorization of agreements between Department of Veterans Affairs
and non-Department providers.*

Sec. 103. Conforming amendments for State veterans homes.

Sec. 104. Access standards and standards for quality.

Sec. 105. Access to walk-in care.

- Sec. 106. Strategy regarding the Department of Veterans Affairs High-Performing Integrated Health Care Network.*
- Sec. 107. Applicability of Directive of Office of Federal Contract Compliance Programs.*
- Sec. 108. Prevention of certain health care providers from providing non-Department health care services to veterans.*
- Sec. 109. Remediation of medical service lines.*

CHAPTER 2—PAYING PROVIDERS AND IMPROVING COLLECTIONS

- Sec. 111. Prompt payment to providers.*
- Sec. 112. Authority to pay for authorized care not subject to an agreement.*
- Sec. 113. Improvement of authority to recover the cost of services furnished for non-service-connected disabilities.*
- Sec. 114. Processing of claims for reimbursement through electronic interface.*

CHAPTER 3—EDUCATION AND TRAINING PROGRAMS

- Sec. 121. Education program on health care options.*
- Sec. 122. Training program for administration of non-Department of Veterans Affairs health care.*
- Sec. 123. Continuing medical education for non-Department medical professionals.*

CHAPTER 4—OTHER MATTERS RELATING TO NON-DEPARTMENT OF VETERANS AFFAIRS PROVIDERS

- Sec. 131. Establishment of processes to ensure safe opioid prescribing practices by non-Department of Veterans Affairs health care providers.*
- Sec. 132. Improving information sharing with community providers.*
- Sec. 133. Competency standards for non-Department of Veterans Affairs health care providers.*
- Sec. 134. Department of Veterans Affairs participation in national network of State-based prescription drug monitoring programs.*

CHAPTER 5—OTHER NON-DEPARTMENT HEALTH CARE MATTERS

- Sec. 141. Plans for Use of Supplemental Appropriations Required.*
- Sec. 142. Veterans Choice Fund flexibility.*
- Sec. 143. Sunset of Veterans Choice Program.*
- Sec. 144. Conforming amendments.*

Subtitle B—Improving Department of Veterans Affairs Health Care Delivery

- Sec. 151. Licensure of health care professionals of the Department of Veterans Affairs providing treatment via telemedicine.*
- Sec. 152. Authority for Department of Veterans Affairs Center for Innovation for Care and Payment.*
- Sec. 153. Authorization to provide for operations on live donors for purposes of conducting transplant procedures for veterans.*

Subtitle C—Family Caregivers

- Sec. 161. Expansion of family caregiver program of Department of Veterans Affairs.*
- Sec. 162. Implementation of information technology system of Department of Veterans Affairs to assess and improve the family caregiver program.*

Sec. 163. Modifications to annual evaluation report on caregiver program of Department of Veterans Affairs.

TITLE II—VA ASSET AND INFRASTRUCTURE REVIEW

Subtitle A—Asset and Infrastructure Review

Sec. 201. Short title.

Sec. 202. The Commission.

Sec. 203. Procedure for making recommendations.

Sec. 204. Actions regarding infrastructure and facilities of the Veterans Health Administration.

Sec. 205. Implementation.

Sec. 206. Department of Veterans Affairs Asset and Infrastructure Review Account.

Sec. 207. Congressional consideration of Commission report.

Sec. 208. Other matters.

Sec. 209. Definitions.

Subtitle B—Other Infrastructure Matters

Sec. 211. Improvement to training of construction personnel.

Sec. 212. Review of enhanced use leases.

Sec. 213. Assessment of health care furnished by the Department to veterans who live in the Pacific territories.

TITLE III—IMPROVEMENTS TO RECRUITMENT OF HEALTH CARE PROFESSIONALS

Sec. 301. Designated scholarships for physicians and dentists under Department of Veterans Affairs Health Professional Scholarship Program.

Sec. 302. Increase in maximum amount of debt that may be reduced under Education Debt Reduction Program of Department of Veterans Affairs.

Sec. 303. Establishing the Department of Veterans Affairs Specialty Education Loan Repayment Program.

Sec. 304. Veterans healing veterans medical access and scholarship program.

Sec. 305. Bonuses for recruitment, relocation, and retention.

Sec. 306. Inclusion of Vet Center employees in Education Debt Reduction Program of Department of Veterans Affairs.

TITLE IV—HEALTH CARE IN UNDERSERVED AREAS

Sec. 401. Development of criteria for designation of certain medical facilities of the Department of Veterans Affairs as underserved facilities and plan to address problem of underserved facilities.

Sec. 402. Pilot program to furnish mobile deployment teams to underserved facilities.

Sec. 403. Pilot program on graduate medical education and residency.

TITLE V—OTHER MATTERS

Sec. 501. Annual report on performance awards and bonuses awarded to certain high-level employees of the department.

Sec. 502. Role of podiatrists in Department of Veterans Affairs.

Sec. 503. Definition of major medical facility project.

Sec. 504. Authorization of certain major medical facility projects of the Department of Veterans Affairs.

Sec. 505. Department of Veterans Affairs personnel transparency.

Sec. 506. Program on establishment of peer specialists in patient aligned care team settings within medical centers of Department of Veterans Affairs.

Sec. 507. Department of Veterans Affairs medical scribe pilot program.

Sec. 508. Extension of requirement to collect fees for housing loans guaranteed by Secretary of Veterans Affairs.

Sec. 509. Extension of reduction in amount of pension furnished by Department of Veterans Affairs for certain veterans covered by Medicaid plans for services furnished by nursing facilities.

Sec. 510. Appropriation of amounts.

Sec. 511. Technical correction.

Sec. 512. Budgetary effects.

TITLE I—CARING FOR OUR VETERANS

SEC. 100. SHORT TITLE; REFERENCES TO TITLE 38, UNITED STATES CODE.

*(a) SHORT TITLE.—This title may be cited as the
“Caring for Our Veterans Act of 2018”.*

*(b) REFERENCES TO TITLE 38, UNITED STATES
CODE.—Except as otherwise expressly provided, whenever
in this title an amendment or repeal is expressed in terms
of an amendment to, or repeal of, a section or other provi-
sion, the reference shall be considered to be made to a section
or other provision of title 38, United States Code.*

1 ***Subtitle A—Developing an Inte-***
 2 ***grated High-Performing Net-***
 3 ***work***

4 ***CHAPTER 1—ESTABLISHING COMMUNITY***
 5 ***CARE PROGRAMS***

6 ***SEC. 101. ESTABLISHMENT OF VETERANS COMMUNITY***
 7 ***CARE PROGRAM.***

8 *(a) ESTABLISHMENT OF PROGRAM.—*

9 *(1) IN GENERAL.—Section 1703 is amended to*
 10 *read as follows:*

11 ***“§ 1703. Veterans Community Care Program***

12 *“(a) IN GENERAL.—(1) There is established a program*
 13 *to furnish hospital care, medical services, and extended care*
 14 *services to covered veterans through health care providers*
 15 *specified in subsection (c).*

16 *“(2) The Secretary shall coordinate the furnishing of*
 17 *hospital care, medical services, and extended care services*
 18 *under this section to covered veterans, including coordina-*
 19 *tion of, at a minimum, the following:*

20 *“(A) Ensuring the scheduling of medical ap-*
 21 *pointments in a timely manner and the establishment*
 22 *of a mechanism to receive medical records from non-*
 23 *Department providers.*

24 *“(B) Ensuring continuity of care and services.*

1 “(C) *Ensuring coordination among regional net-*
 2 *works if the covered veteran accesses care and services*
 3 *in a different network than the regional network in*
 4 *which the covered veteran resides.*

5 “(D) *Ensuring that covered veterans do not expe-*
 6 *rience a lapse in care resulting from errors or delays*
 7 *by the Department or its contractors or an unusual*
 8 *or excessive burden in accessing hospital care, medical*
 9 *services, or extended care services.*

10 “(3) *A covered veteran may only receive care or serv-*
 11 *ices under this section upon the authorization of such care*
 12 *or services by the Secretary.*

13 “(b) *COVERED VETERANS.—For purposes of this sec-*
 14 *tion, a covered veteran is any veteran who—*

15 “(1) *is enrolled in the system of annual patient*
 16 *enrollment established and operated under section*
 17 *1705 of this title; or*

18 “(2) *is not enrolled in such system but is other-*
 19 *wise entitled to hospital care, medical services, or ex-*
 20 *tended care services under subsection (c)(2) of such*
 21 *section.*

22 “(c) *HEALTH CARE PROVIDERS SPECIFIED.—Health*
 23 *care providers specified in this subsection are the following:*

24 “(1) *Any health care provider that is partici-*
 25 *pating in the Medicare program under title XVIII of*

1 *the Social Security Act (42 U.S.C. 1395 et seq.), in-*
 2 *cluding any physician furnishing services under such*
 3 *a program.*

4 “(2) *The Department of Defense.*

5 “(3) *The Indian Health Service.*

6 “(4) *Any Federally-qualified health center (as*
 7 *defined in section 1905(l)(2)(B) of the Social Security*
 8 *Act (42 U.S.C. 1396d(l)(2)(B))).*

9 “(5) *Any health care provider not otherwise cov-*
 10 *ered under any of paragraphs (1) through (4) that*
 11 *meets criteria established by the Secretary for pur-*
 12 *poses of this section.*

13 “(d) *CONDITIONS UNDER WHICH CARE IS REQUIRED*
 14 *TO BE FURNISHED THROUGH NON-DEPARTMENT PRO-*
 15 *VIDERS.—(1) The Secretary shall, subject to the availability*
 16 *of appropriations, furnish hospital care, medical services,*
 17 *and extended care services to a covered veteran through*
 18 *health care providers specified in subsection (c) if—*

19 “(A) *the Department does not offer the care or*
 20 *services the veteran requires;*

21 “(B) *the Department does not operate a full-serv-*
 22 *ice medical facility in the State in which the covered*
 23 *veteran resides;*

24 “(C)(i) *the covered veteran was an eligible vet-*
 25 *eran under section 101(b)(2)(B) of the Veterans Ac-*

1 *cess, Choice, and Accountability Act of 2014 (Public*
 2 *Law 113–146; 38 U.S.C. 1701 note) as of the day be-*
 3 *fore the date of the enactment of the Caring for Our*
 4 *Veterans Act of 2018;*

5 *“(ii) continues to reside in a location that would*
 6 *qualify the veteran for eligibility under such section;*
 7 *and*

8 *“(iii) either—*

9 *“(I) resides in one of the five States with*
 10 *the lowest population density as determined by*
 11 *data from the 2010 decennial census; or*

12 *“(II) resides in a State not described in*
 13 *subclause (I) and—*

14 *“(aa) received care or services under*
 15 *this title in the year preceding the enact-*
 16 *ment of the Caring for Our Veterans Act of*
 17 *2018; and*

18 *“(bb) is seeking care or services within*
 19 *2 years of the date of the enactment of the*
 20 *Caring for Our Veterans Act of 2018;*

21 *“(D) the covered veteran has contacted the De-*
 22 *partment to request care or services and the Depart-*
 23 *ment is not able to furnish such care or services in*
 24 *a manner that complies with designated access stand-*

1 *ards developed by the Secretary under section 1703B*
2 *of this title; or*

3 *“(E) the covered veteran and the covered vet-*
4 *eran’s referring clinician agree that furnishing care*
5 *and services through a non-Department entity or pro-*
6 *vider would be in the best medical interest of the cov-*
7 *ered veteran based upon criteria developed by the Sec-*
8 *retary.*

9 *“(2) The Secretary shall ensure that the criteria devel-*
10 *oped under paragraph (1)(E) include consideration of the*
11 *following:*

12 *“(A) The distance between the covered veteran*
13 *and the facility that provides the hospital care, med-*
14 *ical services, or extended care services the veteran*
15 *needs.*

16 *“(B) The nature of the hospital care, medical*
17 *services, or extended care services required.*

18 *“(C) The frequency that the hospital care, med-*
19 *ical services, or extended care services needs to be fur-*
20 *nished.*

21 *“(D) The timeliness of available appointments*
22 *for the hospital care, medical services, or extended*
23 *care services the veteran needs.*

24 *“(E) Whether the covered veteran faces an un-*
25 *usual or excessive burden to access hospital care, med-*

1 *ical services, or extended care services from the De-*
2 *partment medical facility where a covered veteran*
3 *seeks hospital care, medical services, or extended care*
4 *services, which shall include consideration of the fol-*
5 *lowing:*

6 *“(i) Whether the covered veteran faces an*
7 *excessive driving distance, geographical chal-*
8 *lenge, or environmental factor that impedes the*
9 *access of the covered veteran.*

10 *“(ii) Whether the hospital care, medical*
11 *services, or extended care services sought by the*
12 *veteran is provided by a medical facility of the*
13 *Department that is reasonably accessible to a*
14 *covered veteran.*

15 *“(iii) Whether a medical condition of the*
16 *covered veteran affects the ability of the covered*
17 *veteran to travel.*

18 *“(iv) Whether there is compelling reason, as*
19 *determined by the Secretary, that the veteran*
20 *needs to receive hospital care, medical services,*
21 *or extended care services from a medical facility*
22 *other than a medical facility of the Department.*

23 *“(v) Such other considerations as the Sec-*
24 *retary considers appropriate.*

1 “(3) *If the Secretary has determined that the Depart-*
2 *ment does not offer the care or services the covered veteran*
3 *requires under subparagraph (A) of paragraph (1), that the*
4 *Department does not operate a full-service medical facility*
5 *in the State in which the covered veteran resides under sub-*
6 *paragraph (B) of such paragraph, that the covered veteran*
7 *is described under subparagraph (C) of such paragraph, or*
8 *that the Department is not able to furnish care or services*
9 *in a manner that complies with designated access standards*
10 *developed by the Secretary under section 1703B of this title*
11 *under subparagraph (D) of such paragraph, the decision*
12 *to receive hospital care, medical services, or extended care*
13 *services under such subparagraphs from a health care pro-*
14 *vider specified in subsection (c) shall be at the election of*
15 *the veteran.*

16 “(e) *CONDITIONS UNDER WHICH CARE IS AUTHOR-*
17 *IZED TO BE FURNISHED THROUGH NON-DEPARTMENT*
18 *PROVIDERS.—(1)(A) The Secretary may furnish hospital*
19 *care, medical services, or extended care services through a*
20 *health care provider specified in subsection (c) to a covered*
21 *veteran served by a medical service line of the Department*
22 *that the Secretary has determined is not providing care that*
23 *complies with the standards for quality the Secretary shall*
24 *establish under section 1703C.*

1 “(B) *In carrying out subparagraph (A), the Secretary*
2 *shall—*

3 “(i) *measure timeliness of the medical service*
4 *line at a facility of the Department when compared*
5 *with the same medical service line at different De-*
6 *partment facilities; and*

7 “(ii) *measure quality at a medical service line of*
8 *a facility of the Department by comparing it with*
9 *two or more distinct and appropriate quality meas-*
10 *ures at non-Department medical service lines.*

11 “(C)(i) *The Secretary may not concurrently furnish*
12 *hospital care, medical services, or extended care services*
13 *under subparagraph (A) with respect to more than three*
14 *medical service lines described in such subparagraph at any*
15 *one health care facility of the Department.*

16 “(ii) *The Secretary may not concurrently furnish hos-*
17 *pital care, medical services, or extended care services under*
18 *subparagraph (A) with respect to more than 36 medical*
19 *service lines nationally described in such subparagraph.*

20 “(2) *The Secretary may limit the types of hospital*
21 *care, medical services, or extended care services covered vet-*
22 *erans may receive under paragraph (1) in terms of the*
23 *length of time such care and services will be available, the*
24 *location at which such care and services will be available,*
25 *and the clinical care and services that will be available.*

1 “(3)(A) *Except as provided for in subparagraph (B),*
2 *the hospital care, medical services, and extended care serv-*
3 *ices authorized under paragraph (1) with respect to a med-*
4 *ical service line shall cease when the remediation described*
5 *in section 1706A with respect to such medical service line*
6 *is complete.*

7 “(B) *The Secretary shall ensure continuity and coordi-*
8 *nation of care for any veteran who elects to receive care*
9 *or services under paragraph (1) from a health care provider*
10 *specified in subsection (c) through the completion of an epi-*
11 *sode of care.*

12 “(4) *The Secretary shall publish in the Federal Reg-*
13 *ister, and shall take all reasonable steps to provide direct*
14 *notice to covered veterans affected under this subsection, at*
15 *least once each year stating the time period during which*
16 *such care and services will be available, the location or loca-*
17 *tions where such care and services will be available, and*
18 *the clinical services available at each location under this*
19 *subsection in accordance with regulations the Secretary*
20 *shall prescribe.*

21 “(5) *When the Secretary exercises the authority under*
22 *paragraph (1), the decision to receive care or services under*
23 *such paragraph from a health care provider specified in*
24 *subsection (c) shall be at the election of the covered veteran.*

1 “(f) *REVIEW OF DECISIONS.*—*The review of any deci-*
 2 *sion under subsection (d) or (e) shall be subject to the De-*
 3 *partment’s clinical appeals process, and such decisions may*
 4 *not be appealed to the Board of Veterans’ Appeals.*

5 “(g) *TIERED NETWORK.*—(1) *To promote the provi-*
 6 *sion of high-quality and high-value hospital care, medical*
 7 *services, and extended care services under this section, the*
 8 *Secretary may develop a tiered provider network of eligible*
 9 *providers based on criteria established by the Secretary for*
 10 *purposes of this section.*

11 “(2) *In developing a tiered provider network of eligible*
 12 *providers under paragraph (1), the Secretary shall not*
 13 *prioritize providers in a tier over providers in any other*
 14 *tier in a manner that limits the choice of a covered veteran*
 15 *in selecting a health care provider specified in subsection*
 16 *(c) for receipt of hospital care, medical services, or extended*
 17 *care services under this section.*

18 “(h) *CONTRACTS TO ESTABLISH NETWORKS OF*
 19 *HEALTH CARE PROVIDERS.*—(1) *The Secretary shall enter*
 20 *into consolidated, competitively bid contracts to establish*
 21 *networks of health care providers specified in paragraphs*
 22 *(1) and (5) of subsection (c) for purposes of providing suffi-*
 23 *cient access to hospital care, medical services, or extended*
 24 *care services under this section.*

1 “(2)(A) *The Secretary shall, to the extent practicable,*
 2 *ensure that covered veterans are able to make their own ap-*
 3 *pointments using advanced technology.*

4 “(B) *To the extent practicable, the Secretary shall be*
 5 *responsible for the scheduling of appointments for hospital*
 6 *care, medical services, and extended care services under this*
 7 *section.*

8 “(3)(A) *The Secretary may terminate a contract with*
 9 *an entity entered into under paragraph (1) at such time*
 10 *and upon such notice to the entity as the Secretary may*
 11 *specify for purposes of this section, if the Secretary notifies*
 12 *the appropriate committees of Congress that, at a min-*
 13 *imum—*

14 “(i) *the entity—*

15 “(I) *failed to comply substantially with the*
 16 *provisions of the contract or with the provisions*
 17 *of this section and the regulations prescribed*
 18 *under this section;*

19 “(II) *failed to comply with the access stand-*
 20 *ards or the standards for quality established by*
 21 *the Secretary;*

22 “(III) *is excluded from participation in a*
 23 *Federal health care program (as defined in sec-*
 24 *tion 1128B(f) of the Social Security Act (42*
 25 *U.S.C. 1320a-7b(f))) under section 1128 or*

1 *1128A of the Social Security Act (42 U.S.C.*
2 *1320a-7 and 1320a-7a);*

3 *“(IV) is identified as an excluded source on*
4 *the list maintained in the System for Award*
5 *Management, or any successor system; or*

6 *“(V) has been convicted of a felony or other*
7 *serious offense under Federal or State law and*
8 *the continued participation of the entity would*
9 *be detrimental to the best interests of veterans or*
10 *the Department;*

11 *“(ii) it is reasonable to terminate the contract*
12 *based on the health care needs of veterans; or*

13 *“(iii) it is reasonable to terminate the contract*
14 *based on coverage provided by contracts or sharing*
15 *agreements entered into under authorities other than*
16 *this section.*

17 *“(B) Nothing in subparagraph (A) may be construed*
18 *to restrict the authority of the Secretary to terminate a con-*
19 *tract entered into under paragraph (1) under any other*
20 *provision of law.*

21 *“(4) Whenever the Secretary provides notice to an enti-*
22 *ty that the entity is failing to meet contractual obligations*
23 *entered into under paragraph (1), the Secretary shall sub-*
24 *mit to the Committee on Veterans’ Affairs of the Senate and*
25 *the Committee on Veterans’ Affairs of the House of Rep-*

1 *representatives a report on such failure. Such report shall in-*
2 *clude the following:*

3 “(A) *An explanation of the reasons for providing*
4 *such notice.*

5 “(B) *A description of the effect of such failure,*
6 *including with respect to cost, schedule, and require-*
7 *ments.*

8 “(C) *A description of the actions taken by the*
9 *Secretary to mitigate such failure.*

10 “(D) *A description of the actions taken by the*
11 *contractor to address such failure.*

12 “(E) *A description of any effect on the commu-*
13 *nity provider market for veterans in the affected area.*

14 “(5)(A) *The Secretary shall instruct each entity*
15 *awarded a contract under paragraph (1) to recognize and*
16 *accept, on an interim basis, the credentials and qualifica-*
17 *tions of health care providers who are authorized to furnish*
18 *hospital care and medical services to veterans under a com-*
19 *munity care program of the Department in effect as of the*
20 *day before the date of the enactment of the Caring for Our*
21 *Veterans Act of 2018, including under the Patient-Centered*
22 *Community Care Program and the Veterans Choice Pro-*
23 *gram under section 101 of the Veterans Access, Choice, and*
24 *Accountability Act of 2014 (Public Law 113–146; 38 U.S.C.*

1 1701 note), as qualified providers under the program estab-
 2 lished under this section.

3 “(B) The interim acceptance period under subpara-
 4 graph (A) shall be determined by the Secretary based on
 5 the following criteria:

6 “(i) With respect to a health care provider, when
 7 the current certification agreement for the health care
 8 provider expires.

9 “(ii) Whether the Department has enacted cer-
 10 tification and eligibility criteria and regulatory pro-
 11 cedures by which non-Department providers will be
 12 authorized under this section.

13 “(6) The Secretary shall establish a system or systems
 14 for monitoring the quality of care provided to covered vet-
 15 erans through a network under this subsection and for as-
 16 sessing the quality of hospital care, medical services, and
 17 extended care services furnished through such network before
 18 the renewal of the contract for such network.

19 “(i) PAYMENT RATES FOR CARE AND SERVICES.—(1)
 20 Except as provided in paragraph (2), and to the extent
 21 practicable, the rate paid for hospital care, medical services,
 22 or extended care services under any provision in this title
 23 may not exceed the rate paid by the United States to a
 24 provider of services (as defined in section 1861(u) of the
 25 Social Security Act (42 U.S.C. 1395x(u))) or a supplier

1 *(as defined in section 1861(d) of such Act (42 U.S.C.*
 2 *1395x(d))) under the Medicare program under title XI or*
 3 *title XVIII of the Social Security Act (42 U.S.C. 1301 et*
 4 *seq.), including section 1834 of such Act (42 U.S.C. 1395m),*
 5 *for the same care or services.*

6 “(2)(A) *A higher rate than the rate paid by the United*
 7 *States as described in paragraph (1) may be negotiated*
 8 *with respect to the furnishing of care or services to a covered*
 9 *veteran who resides in a highly rural area.*

10 “(B) *In this paragraph, the term ‘highly rural area’*
 11 *means an area located in a county that has fewer than*
 12 *seven individuals residing in that county per square mile.*

13 “(3) *With respect to furnishing care or services under*
 14 *this section in Alaska, the Alaska Fee Schedule of the De-*
 15 *partment of Veterans Affairs shall be followed, except for*
 16 *when another payment agreement, including a contract or*
 17 *provider agreement, is in effect.*

18 “(4) *With respect to furnishing hospital care, medical*
 19 *services, or extended care services under this section in a*
 20 *State with an All-Payer Model Agreement under section*
 21 *1814(b)(3) of the Social Security Act (42 U.S.C.*
 22 *1395f(b)(3)) that became effective on or after January 1,*
 23 *2014, the Medicare payment rates under paragraph (2)(A)*
 24 *shall be calculated based on the payment rates under such*
 25 *agreement.*

1 “(5) *Notwithstanding paragraph (1), the Secretary*
 2 *may incorporate, to the extent practicable, the use of value-*
 3 *based reimbursement models to promote the provision of*
 4 *high-quality care.*

5 “(6) *With respect to hospital care, medical services, or*
 6 *extended care services for which there is not a rate paid*
 7 *under the Medicare program as described in paragraph (1),*
 8 *the rate paid for such care or services shall be determined*
 9 *by the Secretary.*

10 “(j) *TREATMENT OF OTHER HEALTH PLAN CON-*
 11 *TRACTS.—In any case in which a covered veteran is fur-*
 12 *nished hospital care, medical services, or extended care serv-*
 13 *ices under this section for a non-service-connected disability*
 14 *described in subsection (a)(2) of section 1729 of this title,*
 15 *the Secretary shall recover or collect reasonable charges for*
 16 *such care or services from a health plan contract described*
 17 *in section 1729 in accordance with such section.*

18 “(k) *PAYMENT BY VETERAN.—A covered veteran shall*
 19 *not pay a greater amount for receiving care or services*
 20 *under this section than the amount the veteran would pay*
 21 *for receiving the same or comparable care or services at a*
 22 *medical facility of the Department or from a health care*
 23 *provider of the Department.*

24 “(l) *TRANSPLANT AUTHORITY FOR IMPROVED AC-*
 25 *CESS.—(1) In the case of a covered veteran described in*

1 paragraph (2), the Secretary shall determine whether to au-
 2 thorize an organ or bone marrow transplant for that cov-
 3 ered veteran at a non-Department facility.

4 “(2) A covered veteran described in this paragraph—

5 “(A) requires an organ or bone marrow trans-
 6 plant; and

7 “(B) has, in the opinion of the primary care
 8 provider of the veteran, a medically compelling reason
 9 to travel outside the region of the Organ Procurement
 10 and Transplantation Network, established under sec-
 11 tion 372 of the National Organ Transplantation Act
 12 (Public Law 98–507; 42 U.S.C. 274), in which the
 13 veteran resides, to receive such transplant.

14 “(m) MONITORING OF CARE PROVIDED.—(1)(A) Not
 15 later than 540 days after the date of the enactment of the
 16 Caring for Our Veterans Act of 2018, and not less frequently
 17 than annually thereafter, the Secretary shall submit to ap-
 18 propriate committees of Congress a review of the types and
 19 frequency of care sought under subsection (d).

20 “(B) The review submitted under subparagraph (A)
 21 shall include an assessment of the following:

22 “(i) The top 25 percent of types of care and serv-
 23 ices most frequently provided under subsection (d) due
 24 to the Department not offering such care and services.

1 “(ii) *The frequency such care and services were*
2 *sought by covered veterans under this section.*

3 “(iii) *An analysis of the reasons the Department*
4 *was unable to provide such care and services.*

5 “(iv) *Any steps the Department took to provide*
6 *such care and services at a medical facility of the De-*
7 *partment.*

8 “(v) *The cost of such care and services.*

9 “(2) *In monitoring the hospital care, medical services,*
10 *and extended care services furnished under this section, the*
11 *Secretary shall do the following:*

12 “(A) *With respect to hospital care, medical serv-*
13 *ices, and extended care services furnished through*
14 *provider networks established under subsection (i)—*

15 “(i) *compile data on the types of hospital*
16 *care, medical services, and extended care services*
17 *furnished through such networks and how many*
18 *patients used each type of care and service;*

19 “(ii) *identify gaps in hospital care, medical*
20 *services, or extended care services furnished*
21 *through such networks;*

22 “(iii) *identify how such gaps may be fixed*
23 *through new contracts within such networks or*
24 *changes in the manner in which hospital care,*

1 *medical services, or extended care services are*
 2 *furnished through such networks;*

3 “(iv) *assess the total amounts spent by the*
 4 *Department on hospital care, medical services,*
 5 *and extended care services furnished through*
 6 *such networks;*

7 “(v) *assess the timeliness of the Department*
 8 *in referring hospital care, medical services, and*
 9 *extended care services to such networks; and*

10 “(vi) *assess the timeliness of such networks*
 11 *in—*

12 “(I) *accepting referrals; and*

13 “(II) *scheduling and completing ap-*
 14 *pointments.*

15 “(B) *Report the number of medical service lines*
 16 *the Secretary has determined under subsection (e)(1)*
 17 *not to be providing hospital care, medical services, or*
 18 *extended care services that comply with the standards*
 19 *for quality established by the Secretary.*

20 “(C) *Assess the use of academic affiliates and*
 21 *centers of excellence of the Department to furnish hos-*
 22 *pital care, medical services, and extended care serv-*
 23 *ices to covered veterans under this section.*

24 “(D) *Assess the hospital care, medical services,*
 25 *and extended care services furnished to covered vet-*

1 *erans under this section by medical facilities operated*
 2 *by Federal agencies other than the Department.*

3 *“(3) Not later than 540 days after the date of the en-*
 4 *actment of the Caring for Our Veterans Act of 2018 and*
 5 *not less frequently than once each year thereafter, the Sec-*
 6 *retary shall submit to the Committee on Veterans’ Affairs*
 7 *of the Senate and the Committee on Veterans’ Affairs of*
 8 *the House of Representatives a report on the information*
 9 *gathered under paragraph (2).*

10 *“(n) PROHIBITION ON CERTAIN LIMITATIONS.—(1)*
 11 *The Secretary shall not limit the types of hospital care,*
 12 *medical services, or extended care services covered veterans*
 13 *may receive under this section if it is in the best medical*
 14 *interest of the veteran to receive such hospital care, medical*
 15 *services, or extended care services, as determined by the vet-*
 16 *eran and the veteran’s health care provider.*

17 *“(2) No provision in this section may be construed to*
 18 *alter or modify any other provision of law establishing spe-*
 19 *cific eligibility criteria for certain hospital care, medical*
 20 *services, or extended care services.*

21 *“(o) DEFINITIONS.—In this section:*

22 *“(1) The term ‘appropriate committees of Con-*
 23 *gress’ means—*

1 “(A) *the Committee on Veterans’ Affairs*
 2 *and the Committee on Appropriations of the*
 3 *Senate; and*

4 “(B) *the Committee on Veterans’ Affairs*
 5 *and the Committee on Appropriations of the*
 6 *House of Representatives.*

7 “(2) *The term ‘medical service line’ means a*
 8 *clinic within a Department medical center.’.*

9 (2) *CLERICAL AMENDMENT.—The table of sec-*
 10 *tions at the beginning of chapter 17 is amended by*
 11 *striking the item relating to section 1703 and insert-*
 12 *ing the following new item:*

“1703. Veterans Community Care Program.”.

13 (b) *EFFECTIVE DATE.—Section 1703 of title 38,*
 14 *United States Code, as amended by subsection (a), shall*
 15 *take effect on the later of—*

16 (1) *the date that is 30 days after the date on*
 17 *which the Secretary of Veterans Affairs submits the*
 18 *report required under section 101(q)(2) of the Vet-*
 19 *erans Access, Choice, and Accountability Act of 2014*
 20 *(Public Law 113–146; 38 U.S.C. 1701 note); or*

21 (2) *the date on which the Secretary promulgates*
 22 *regulations pursuant to subsection (c).*

23 (c) *REGULATIONS.—*

24 (1) *IN GENERAL.—Not later than 1 year after*
 25 *the date of the enactment of this Act, the Secretary of*

1 *Veterans Affairs shall promulgate regulations to carry*
 2 *out section 1703 of title 38, United States Code, as*
 3 *amended by subsection (a) of this section.*

4 (2) *UPDATES.—*

5 (A) *PERIODIC.—Before promulgating the*
 6 *regulations required under paragraph (1), the*
 7 *Secretary shall provide to the appropriate com-*
 8 *mittees of Congress periodic updates to confirm*
 9 *the progress of the Secretary toward developing*
 10 *such regulations.*

11 (B) *FIRST UPDATE.—The first update*
 12 *under subparagraph (A) shall occur no later*
 13 *than 120 days from the date of the enactment of*
 14 *this Act.*

15 (C) *APPROPRIATE COMMITTEES OF CON-*
 16 *GRESS DEFINED.—In this paragraph, the term*
 17 *“appropriate committees of Congress” means—*

18 (i) *the Committee on Veterans’ Affairs*
 19 *and the Committee on Appropriations of the*
 20 *Senate; and*

21 (ii) *the Committee on Veterans’ Affairs*
 22 *and the Committee on Appropriations of the*
 23 *House of Representatives.*

24 (d) *CONTINUITY OF EXISTING AGREEMENTS.—*

1 (1) *IN GENERAL.*—Notwithstanding section 1703
2 of title 38, United States Code, as amended by sub-
3 section (a), the Secretary of Veterans Affairs shall
4 continue all contracts, memorandums of under-
5 standing, memorandums of agreements, and other ar-
6 rangements that were in effect on the day before the
7 date of the enactment of this Act between the Depart-
8 ment of Veterans Affairs and the American Indian
9 and Alaska Native health care systems as established
10 under the terms of the Department of Veterans Affairs
11 and Indian Health Service Memorandum of Under-
12 standing, signed October 1, 2010, the National Reim-
13 bursement Agreement, signed December 5, 2012, ar-
14 rangements under section 405 of the Indian Health
15 Care Improvement Act (25 U.S.C. 1645), and agree-
16 ments entered into under sections 102 and 103 of the
17 Veterans Access, Choice, and Accountability Act of
18 2014 (Public Law 113–146).

19 (2) *MODIFICATIONS.*—Paragraph (1) shall not be
20 construed to prohibit the Secretary and the parties to
21 the contracts, memorandums of understanding, memo-
22 randums of agreements, and other arrangements de-
23 scribed in such paragraph from making such changes
24 to such contracts, memorandums of understanding,
25 memorandums of agreements, and other arrangements

1 *as may be otherwise authorized pursuant to other*
 2 *provisions of law or the terms of the contracts, memo-*
 3 *randums of understanding, memorandums of agree-*
 4 *ments, and other arrangements.*

5 **SEC. 102. AUTHORIZATION OF AGREEMENTS BETWEEN DE-**
 6 **PARTMENT OF VETERANS AFFAIRS AND NON-**
 7 **DEPARTMENT PROVIDERS.**

8 *(a) IN GENERAL.—Subchapter I of chapter 17 is*
 9 *amended by inserting after section 1703 the following new*
 10 *section:*

11 **“§ 1703A. Agreements with eligible entities or pro-**
 12 **viders; certification processes**

13 *“(a) AGREEMENTS AUTHORIZED.—(1)(A) When hos-*
 14 *pital care, a medical service, or an extended care service*
 15 *required by a veteran who is entitled to such care or service*
 16 *under this chapter is not feasibly available to the veteran*
 17 *from a facility of the Department or through a contract*
 18 *or sharing agreement entered into pursuant to another pro-*
 19 *vision of law, the Secretary may furnish such care or service*
 20 *to such veteran through an agreement under this section*
 21 *with an eligible entity or provider to provide such hospital*
 22 *care, medical service, or extended care service.*

23 *“(B) An agreement entered into under this section to*
 24 *provide hospital care, a medical service, or an extended care*
 25 *service shall be known as a ‘Veterans Care Agreement’.*

1 “(C) *For purposes of subparagraph (A), hospital care,*
2 *a medical service, or an extended care service may be con-*
3 *sidered not feasibly available to a veteran from a facility*
4 *of the Department or through a contract or sharing agree-*
5 *ment described in such subparagraph when the Secretary*
6 *determines the veteran’s medical condition, the travel in-*
7 *volved, the nature of the care or services required, or a com-*
8 *bination of these factors make the use of a facility of the*
9 *Department or a contract or sharing agreement described*
10 *in such subparagraph impracticable or inadvisable.*

11 “(D) *A Veterans Care Agreement may be entered into*
12 *by the Secretary or any Department official authorized by*
13 *the Secretary.*

14 “(2)(A) *Subject to subparagraph (B), the Secretary*
15 *shall review each Veterans Care Agreement of material size,*
16 *as determined by the Secretary or set forth in paragraph*
17 *(3), for hospital care, a medical service, or an extended care*
18 *service to determine whether it is feasible and advisable to*
19 *provide such care or service within a facility of the Depart-*
20 *ment or by contract or sharing agreement entered into pur-*
21 *suant to another provision of law and, if so, take action*
22 *to do so.*

23 “(B)(i) *The Secretary shall review each Veterans Care*
24 *Agreement of material size that has been in effect for at*

1 *least 6 months within the first 2 years of its taking effect,*
 2 *and not less frequently than once every 4 years thereafter.*

3 “(ii) *If a Veterans Care Agreement has not been in*
 4 *effect for at least 6 months by the date of the review required*
 5 *by subparagraph (A), the agreement shall be reviewed dur-*
 6 *ing the next cycle required by subparagraph (A), and such*
 7 *review shall serve as its review within the first 2 years of*
 8 *its taking effect for purposes of clause (i).*

9 “(3)(A) *In fiscal year 2019 and in each fiscal year*
 10 *thereafter, in addition to such other Veterans Care Agree-*
 11 *ments as the Secretary may determine are of material size,*
 12 *a Veterans Care Agreement for the purchase of extended care*
 13 *services that exceeds \$5,000,000 annually shall be consid-*
 14 *ered of material size.*

15 “(B) *From time to time, the Secretary may publish*
 16 *a notice in the Federal Register to adjust the dollar amount*
 17 *specified in subparagraph (A) to account for changes in the*
 18 *cost of health care based upon recognized health care market*
 19 *surveys and other available data.*

20 “(b) *ELIGIBLE ENTITIES AND PROVIDERS.—For pur-*
 21 *poses of this section, an eligible entity or provider is—*

22 “(1) *any provider of services that has enrolled*
 23 *and entered into a provider agreement under section*
 24 *1866(a) of the Social Security Act (42 U.S.C.*
 25 *1395cc(a)) and any physician or other supplier who*

1 *has enrolled and entered into a participation agree-*
 2 *ment under section 1842(h) of such Act (42 U.S.C.*
 3 *1395u(h));*

4 *“(2) any provider participating under a State*
 5 *plan under title XIX of such Act (42 U.S.C. 1396 et*
 6 *seq.);*

7 *“(3) an Aging and Disability Resource Center,*
 8 *an area agency on aging, or a State agency (as de-*
 9 *defined in section 102 of the Older Americans Act of*
 10 *1965 (42 U.S.C. 3002));*

11 *“(4) a center for independent living (as defined*
 12 *in section 702 of the Rehabilitation Act of 1973 (29*
 13 *U.S.C. 796a)); or*

14 *“(5) any entity or provider not described in*
 15 *paragraph (1) or (2) of this subsection that the Sec-*
 16 *retary determines to be eligible pursuant to the cer-*
 17 *tification process described in subsection (c).*

18 *“(c) ELIGIBLE ENTITY OR PROVIDER CERTIFICATION*
 19 *PROCESS.—The Secretary shall establish by regulation a*
 20 *process for the certification of eligible entities or providers*
 21 *or recertification of eligible entities or providers under this*
 22 *section. Such a process shall, at a minimum—*

23 *“(1) establish deadlines for actions on applica-*
 24 *tions for certification;*

1 “(2) set forth standards for an approval or de-
2 nial of certification, duration of certification, revoca-
3 tion of an eligible entity or provider’s certification,
4 and recertification of eligible entities or providers;

5 “(3) require the denial of certification if the Sec-
6 retary determines the eligible entity or provider is ex-
7 cluded from participation in a Federal health care
8 program under section 1128 or section 1128A of the
9 Social Security Act (42 U.S.C. 1320a–7 or 1320a–7a)
10 or is currently identified as an excluded source on the
11 System for Award Management Exclusions list de-
12 scribed in part 9 of title 48, Code of Federal Regula-
13 tions, and part 180 of title 2 of such Code, or suc-
14 cessor regulations;

15 “(4) establish procedures for screening eligible
16 entities or providers according to the risk of fraud,
17 waste, and abuse that are similar to the standards
18 under section 1866(j)(2)(B) of the Social Security Act
19 (42 U.S.C. 1395cc(j)(2)(B)) and section 9.104 of title
20 48, Code of Federal Regulations, or successor regula-
21 tions; and

22 “(5) incorporate and apply the restrictions and
23 penalties set forth in chapter 21 of title 41 and treat
24 this section as a procurement program only for pur-
25 poses of applying such provisions.

1 “(d) *RATES.*—*To the extent practicable, the rates paid*
 2 *by the Secretary for hospital care, medical services, and ex-*
 3 *tended care services provided under a Veterans Care Agree-*
 4 *ment shall be in accordance with the rates paid by the*
 5 *United States under section 1703(i) of this title.*

6 “(e) *TERMS OF VETERANS CARE AGREEMENTS.*—(1)
 7 *Pursuant to regulations promulgated under subsection (k),*
 8 *the Secretary may define the requirements for providers and*
 9 *entities entering into agreements under this section based*
 10 *upon such factors as the number of patients receiving care*
 11 *or services, the number of employees employed by the entity*
 12 *or provider furnishing such care or services, the amount*
 13 *paid by the Secretary to the provider or entity, or other*
 14 *factors as determined by the Secretary.*

15 “(2) *To furnish hospital care, medical services, or ex-*
 16 *tended care services under this section, an eligible entity*
 17 *or provider shall agree—*

18 “(A) *to accept payment at the rates established*
 19 *in regulations prescribed under this section;*

20 “(B) *that payment by the Secretary under this*
 21 *section on behalf of a veteran to a provider of services*
 22 *or care shall, unless rejected and refunded by the pro-*
 23 *vider within 30 days of receipt, constitute payment in*
 24 *full and extinguish any liability on the part of the*
 25 *veteran for the treatment or care provided, and no*

1 *provision of a contract, agreement, or assignment to*
 2 *the contrary shall operate to modify, limit, or negate*
 3 *this requirement;*

4 *“(C) to provide only the care and services au-*
 5 *thorized by the Department under this section and to*
 6 *obtain the prior written consent of the Department to*
 7 *furnish care or services outside the scope of such au-*
 8 *thorization;*

9 *“(D) to bill the Department in accordance with*
 10 *the methodology outlined in regulations prescribed*
 11 *under this section;*

12 *“(E) to not seek to recover or collect from a*
 13 *health plan contract or third party, as those terms*
 14 *are defined in section 1729 of this title, for any care*
 15 *or service that is furnished or paid for by the Depart-*
 16 *ment;*

17 *“(F) to provide medical records to the Depart-*
 18 *ment in the time frame and format specified by the*
 19 *Department; and*

20 *“(G) to meet such other terms and conditions,*
 21 *including quality of care assurance standards, as the*
 22 *Secretary may specify in regulation.*

23 *“(f) DISCONTINUATION OR NONRENEWAL OF A VET-*
 24 *ERANS CARE AGREEMENT.—(1) An eligible entity or pro-*
 25 *vider may discontinue a Veterans Care Agreement at such*

1 *time and upon such notice to the Secretary as may be pro-*
 2 *vided in regulations prescribed under this section.*

3 “(2) *The Secretary may discontinue a Veterans Care*
 4 *Agreement with an eligible entity or provider at such time*
 5 *and upon such reasonable notice to the eligible entity or*
 6 *provider as may be specified in regulations prescribed*
 7 *under this section, if an official designated by the Sec-*
 8 *retary—*

9 “(A) *has determined that the eligible entity or*
 10 *provider failed to comply substantially with the pro-*
 11 *visions of the Veterans Care Agreement, or with the*
 12 *provisions of this section or regulations prescribed*
 13 *under this section;*

14 “(B) *has determined the eligible entity or pro-*
 15 *vider is excluded from participation in a Federal*
 16 *health care program under section 1128 or section*
 17 *1128A of the Social Security Act (42 U.S.C. 1320a–*
 18 *7 or 1320a–7a) or is identified on the System for*
 19 *Award Management Exclusions list as provided in*
 20 *part 9 of title 48, Code of Federal Regulations, and*
 21 *part 180 of title 2 of such Code, or successor regula-*
 22 *tions;*

23 “(C) *has ascertained that the eligible entity or*
 24 *provider has been convicted of a felony or other seri-*
 25 *ous offense under Federal or State law and deter-*

1 *mines the eligible entity or provider’s continued par-*
2 *ticipation would be detrimental to the best interests of*
3 *veterans or the Department; or*

4 *“(D) has determined that it is reasonable to ter-*
5 *minate the agreement based on the health care needs*
6 *of a veteran.*

7 *“(g) QUALITY OF CARE.—The Secretary shall establish*
8 *a system or systems for monitoring the quality of care pro-*
9 *vided to veterans through Veterans Care Agreements and*
10 *for assessing the quality of hospital care, medical services,*
11 *and extended care services furnished by eligible entities and*
12 *providers before the renewal of Veterans Care Agreements.*

13 *“(h) DISPUTES.—(1) The Secretary shall promulgate*
14 *administrative procedures for eligible entities and providers*
15 *to present all disputes arising under or related to Veterans*
16 *Care Agreements.*

17 *“(2) Such procedures constitute the eligible entities’*
18 *and providers’ exhaustive and exclusive administrative*
19 *remedies.*

20 *“(3) Eligible entities or providers must first exhaust*
21 *such administrative procedures before seeking any judicial*
22 *review under section 1346 of title 28 (known as the ‘Tucker*
23 *Act’).*

24 *“(4) Disputes under this section must pertain to either*
25 *the scope of authorization under the Veterans Care Agree-*

1 *ment or claims for payment subject to the Veterans Care*
 2 *Agreement and are not claims for the purposes of such laws*
 3 *that would otherwise require application of sections 7101*
 4 *through 7109 of title 41, United States Code.*

5 “(i) *APPLICABILITY OF OTHER PROVISIONS OF LAW.—*

6 *(1) A Veterans Care Agreement may be authorized by the*
 7 *Secretary or any Department official authorized by the Sec-*
 8 *retary, and such action shall not be treated as—*

9 “(A) *an award for the purposes of such laws that*
 10 *would otherwise require the use of competitive proce-*
 11 *dures for the furnishing of care and services; or*

12 “(B) *a Federal contract for the acquisition of*
 13 *goods or services for purposes of any provision of Fed-*
 14 *eral law governing Federal contracts for the acquisi-*
 15 *tion of goods or services except section 4706(d) of title*
 16 *41.*

17 “(2)(A) *Except as provided in the agreement itself, in*
 18 *subparagraph (B), and unless otherwise provided in this*
 19 *section or regulations prescribed pursuant to this section,*
 20 *an eligible entity or provider that enters into an agreement*
 21 *under this section is not subject to, in the carrying out of*
 22 *the agreement, any law to which providers of services and*
 23 *suppliers under the Medicare program under title XVIII of*
 24 *the Social Security Act (42 U.S.C. 1395 et seq.) are not*
 25 *subject.*

1 “(B) *An eligible entity or provider that enters into an*
 2 *agreement under this section is subject to—*

3 “(i) *all laws regarding integrity, ethics, or*
 4 *fraud, or that subject a person to civil or criminal*
 5 *penalties; and*

6 “(ii) *all laws that protect against employment*
 7 *discrimination or that otherwise ensure equal employ-*
 8 *ment opportunities.*

9 “(3) *Notwithstanding paragraph (2)(B)(i), an eligible*
 10 *entity or provider that enters into an agreement under this*
 11 *section shall not be treated as a Federal contractor or sub-*
 12 *contractor for purposes of chapter 67 of title 41 (commonly*
 13 *known as the ‘McNamara-O’Hara Service Contract Act of*
 14 *1965’).*

15 “(j) *PARITY OF TREATMENT.—Eligibility for hospital*
 16 *care, medical services, and extended care services furnished*
 17 *to any veteran pursuant to a Veterans Care Agreement shall*
 18 *be subject to the same terms as though provided in a facility*
 19 *of the Department, and provisions of this chapter applicable*
 20 *to veterans receiving such care and services in a facility*
 21 *of the Department shall apply to veterans treated under this*
 22 *section.*

23 “(k) *RULEMAKING.—The Secretary shall promulgate*
 24 *regulations to carry out this section.’’.*

1 (b) *CLERICAL AMENDMENT.*—*The table of sections at*
 2 *the beginning of such chapter is amended by inserting after*
 3 *the item relating to section 1703 the following new item:*

“1703A. Agreements with eligible entities or providers; certification processes.”.

4 **SEC. 103. CONFORMING AMENDMENTS FOR STATE VET-**
 5 **ERANS HOMES.**

6 (a) *IN GENERAL.*—*Section 1745(a) is amended—*

7 (1) *in paragraph (1), by striking “(or agreement*
 8 *under section 1720(c)(1) of this title)” and inserting*
 9 *“(or an agreement)”;* and

10 (2) *by adding at the end the following new para-*
 11 *graph:*

12 “(4)(A) *An agreement under this section may be au-*
 13 *thorized by the Secretary or any Department official au-*
 14 *thorized by the Secretary, and any such action is not an*
 15 *award for purposes of such laws that would otherwise re-*
 16 *quire the use of competitive procedures for the furnishing*
 17 *of hospital care, medical services, and extended care serv-*
 18 *ices.*

19 “(B)(i) *Except as provided in the agreement itself, in*
 20 *clause (ii), and unless otherwise provided in this section*
 21 *or regulations prescribed pursuant to this section, a State*
 22 *home that enters into an agreement under this section is*
 23 *not subject to, in the carrying out of the agreement, any*
 24 *provision of law to which providers of services and suppliers*

1 *under the Medicare program under title XVIII of the Social*
 2 *Security Act (42 U.S.C. 1395 et seq.) are not subject.*

3 “(ii) *A State home that enters into an agreement*
 4 *under this section is subject to—*

5 “(I) *all provisions of law regarding integrity,*
 6 *ethics, or fraud, or that subject a person to civil or*
 7 *criminal penalties;*

8 “(II) *all provisions of law that protect against*
 9 *employment discrimination or that otherwise ensure*
 10 *equal employment opportunities; and*

11 “(III) *all provisions in subchapter V of chapter*
 12 *17 of this title.*

13 “(iii) *Notwithstanding subparagraph (B)(ii)(I), a*
 14 *State home that enters into an agreement under this section*
 15 *may not be treated as a Federal contractor or subcontractor*
 16 *for purposes of chapter 67 of title 41 (known as the ‘McNa-*
 17 *mara-O’Hara Service Contract Act of 1965’).’.*

18 (b) *EFFECTIVE DATE.—The amendment made by sub-*
 19 *section (a) shall apply to care provided on or after the effec-*
 20 *tive date of regulations issued by the Secretary of Veterans*
 21 *Affairs to carry out this section.*

1 **SEC. 104. ACCESS STANDARDS AND STANDARDS FOR QUAL-**
 2 **ITY.**

3 (a) *IN GENERAL.*—Subchapter I of chapter 17, as
 4 amended by section 102, is further amended by inserting
 5 after section 1703A the following new sections:

6 **“§ 1703B. Access standards**

7 “(a)(1) *The Secretary shall establish access standards*
 8 *for furnishing hospital care, medical services, or extended*
 9 *care services to covered veterans for the purposes of section*
 10 *1703(d).*

11 “(2) *The Secretary shall ensure that the access stand-*
 12 *ards established under paragraph (1) define such categories*
 13 *of care to cover all care and services within the medical*
 14 *benefits package of the Department of Veterans Affairs.*

15 “(b) *The Secretary shall ensure that the access stand-*
 16 *ards provide covered veterans, employees of the Department,*
 17 *and health care providers in the network established under*
 18 *section 1703(h) with relevant comparative information that*
 19 *is clear, useful, and timely, so that covered veterans can*
 20 *make informed decisions regarding their health care.*

21 “(c) *The Secretary shall consult with all pertinent*
 22 *Federal entities (including the Department of Defense, the*
 23 *Department of Health and Human Services, and the Cen-*
 24 *ters for Medicare & Medicaid Services), entities in the pri-*
 25 *vate sector, and other nongovernmental entities in estab-*
 26 *lishing access standards.*

1 “(d)(1) Not later than 270 days after the date of the
2 enactment of the Caring for Our Veterans Act of 2018, the
3 Secretary shall submit to the appropriate committees of
4 Congress a report detailing the access standards.

5 “(2)(A) Before submitting the report required under
6 paragraph (1), the Secretary shall provide periodic updates
7 to the appropriate committees of Congress to confirm the
8 Department’s progress towards developing the access stand-
9 ards required by this section.

10 “(B) The first update under subparagraph (A) shall
11 occur no later than 120 days from the date of the enactment
12 of the Caring for Our Veterans Act of 2018.

13 “(3) Not later than 540 days after the date on which
14 the Secretary implements the access standards established
15 under subsection (a), the Secretary shall submit to the ap-
16 propriate committees of Congress a report detailing the im-
17 plementation of and compliance with such access standards
18 by Department and non-Department entities or providers.

19 “(e) Not later than 3 years after the date on which
20 the Secretary establishes access standards under subsection
21 (a) and not less frequently than once every 3 years there-
22 after, the Secretary shall—

23 “(1) conduct a review of such standards; and

24 “(2) submit to the appropriate committees of
25 Congress a report on the findings and any modifica-

1 *tion to the access standards with respect to the review*
2 *conducted under paragraph (1).*

3 *“(f) The Secretary shall ensure health care providers*
4 *specified under section 1703(c) are able to comply with the*
5 *applicable access standards established by the Secretary.*

6 *“(g) The Secretary shall publish in the Federal Reg-*
7 *ister and on an internet website of the Department the des-*
8 *ignated access standards established under this section for*
9 *purposes of section 1703(d)(1)(D).*

10 *“(h)(1) Consistent with paragraphs (1)(D) and (3) of*
11 *section 1703(d), covered veterans may contact the Depart-*
12 *ment at any time to request a determination regarding*
13 *whether they are eligible to receive care and services from*
14 *a non-Department entity or provider based on the Depart-*
15 *ment being unable to furnish such care and services in a*
16 *manner that complies with the designated access standards*
17 *established under this section.*

18 *“(2) The Secretary shall establish a process to review*
19 *such requests from covered veterans to determine whether—*

20 *“(A) the requested care is clinically necessary;*
21 *and*

22 *“(B) the Department is able to provide such care*
23 *in a manner that complies with designated access*
24 *standards established under this section.*

1 “(3) *The Secretary shall promptly respond to any such*
 2 *request by a covered veteran.*

3 “(i)(1) *The term ‘appropriate committees of Congress’*
 4 *means—*

5 “(A) *the Committee on Veterans’ Affairs and the*
 6 *Committee on Appropriations of the Senate; and*

7 “(B) *the Committee on Veterans’ Affairs and the*
 8 *Committee on Appropriations of the House of Rep-*
 9 *resentatives.*

10 “(2) *The term ‘covered veterans’ refers to veterans de-*
 11 *scribed in section 1703(b) of this title.*

12 **“§ 1703C. Standards for quality**

13 “(a) *IN GENERAL.—(1) The Secretary shall establish*
 14 *standards for quality regarding hospital care, medical serv-*
 15 *ices, and extended care services furnished by the Depart-*
 16 *ment pursuant to this title, including through non-Depart-*
 17 *ment health care providers pursuant to section 1703 of this*
 18 *title.*

19 “(2) *In establishing standards for quality under para-*
 20 *graph (1), the Secretary shall consider existing health qual-*
 21 *ity measures that are applied to public and privately spon-*
 22 *sored health care systems with the purpose of providing cov-*
 23 *ered veterans relevant comparative information to make in-*
 24 *formed decisions regarding their health care.*

1 “(3) *The Secretary shall collect and consider data for*
2 *purposes of establishing the standards under paragraph (1).*
3 *Such data collection shall include—*

4 “(A) *after consultation with veterans service or-*
5 *ganizations and other key stakeholders on survey de-*
6 *velopment or modification of an existing survey, a*
7 *survey of veterans who have used hospital care, med-*
8 *ical services, or extended care services furnished by*
9 *the Veterans Health Administration during the most*
10 *recent 2-year period to assess the satisfaction of the*
11 *veterans with service and quality of care; and*

12 “(B) *datasets that include, at a minimum, ele-*
13 *ments relating to the following:*

14 “(i) *Timely care.*

15 “(ii) *Effective care.*

16 “(iii) *Safety, including, at a minimum,*
17 *complications, readmissions, and deaths.*

18 “(iv) *Efficiency.*

19 “(4) *The Secretary shall consult with all pertinent*
20 *Federal entities (including the Department of Defense, the*
21 *Department of Health and Human Services, and the Cen-*
22 *ters for Medicare & Medicaid Services), entities in the pri-*
23 *vate sector, and other nongovernmental entities in estab-*
24 *lishing standards for quality.*

1 “(5)(A) Not later than 270 days after the date of the
 2 enactment of the Caring for Our Veterans Act of 2018, the
 3 Secretary shall submit to the appropriate committees of
 4 Congress a report detailing the standards for quality.

5 “(B)(i) Before submitting the report required under
 6 subparagraph (A), the Secretary shall provide periodic up-
 7 dates to the appropriate committees of Congress to confirm
 8 the Department’s progress towards developing the standards
 9 for quality required by this section.

10 “(ii) The first update under clause (i) shall occur no
 11 later than 120 days from the date of the enactment of the
 12 Caring for Our Veterans Act of 2018.

13 “(b) PUBLICATION AND CONSIDERATION OF PUBLIC
 14 COMMENTS.—(1) Not later than 1 year after the date on
 15 which the Secretary establishes standards for quality under
 16 subsection (a), the Secretary shall publish the quality rating
 17 of medical facilities of the Department in the publicly avail-
 18 able Hospital Compare website through the Centers for
 19 Medicare & Medicaid Services for the purpose of providing
 20 veterans with information that allows them to compare per-
 21 formance measure information among Department and
 22 non-Department health care providers.

23 “(2) Not later than 2 years after the date on which
 24 the Secretary establishes standards for quality under sub-
 25 section (a), the Secretary shall consider and solicit public

1 *comment on potential changes to the measures used in such*
 2 *standards to ensure that they include the most up-to-date*
 3 *and applicable industry measures for veterans.*

4 “(c)(1) *The term ‘appropriate committees of Congress’*
 5 *means—*

6 “(A) *the Committee on Veterans’ Affairs and the*
 7 *Committee on Appropriations of the Senate; and*

8 “(B) *the Committee on Veterans’ Affairs and the*
 9 *Committee on Appropriations of the House of Rep-*
 10 *resentatives.*

11 “(2) *The term ‘covered veterans’ refers to veterans de-*
 12 *scribed in section 1703(b) of this title.”.*

13 (b) *CLERICAL AMENDMENT.—The table of sections at*
 14 *the beginning of chapter 17, as amended by section 102,*
 15 *is further amended by inserting after the item relating to*
 16 *section 1703A the following new items:*

“1703B. Access standards.

“1703C. Standards for quality.”.

17 **SEC. 105. ACCESS TO WALK-IN CARE.**

18 (a) *IN GENERAL.—Chapter 17 is amended by insert-*
 19 *ing after section 1725 the following new section:*

20 **“§ 1725A. Access to walk-in care**

21 “(a) *PROCEDURES TO ENSURE ACCESS TO WALK-IN*
 22 *CARE.—The Secretary shall develop procedures to ensure*
 23 *that eligible veterans are able to access walk-in care from*
 24 *qualifying non-Department entities or providers.*

1 “(b) *ELIGIBLE VETERANS.*—*For purposes of this sec-*
 2 *tion, an eligible veteran is any individual who—*

3 “(1) *is enrolled in the health care system estab-*
 4 *lished under section 1705(a) of this title; and*

5 “(2) *has received care under this chapter within*
 6 *the 24-month period preceding the furnishing of walk-*
 7 *in care under this section.*

8 “(c) *QUALIFYING NON-DEPARTMENT ENTITIES OR*
 9 *PROVIDERS.*—*For purposes of this section, a qualifying*
 10 *non-Department entity or provider is a non-Department*
 11 *entity or provider that has entered into a contract or other*
 12 *agreement with the Secretary to furnish services under this*
 13 *section.*

14 “(d) *FEDERALLY-QUALIFIED HEALTH CENTERS.*—
 15 *Whenever practicable, the Secretary may use a Federally-*
 16 *qualified health center (as defined in section 1905(l)(2)(B)*
 17 *of the Social Security Act (42 U.S.C. 1396d(l)(2)(B))) to*
 18 *carry out this section.*

19 “(e) *CONTINUITY OF CARE.*—*The Secretary shall en-*
 20 *sure continuity of care for those eligible veterans who receive*
 21 *walk-in care services under this section, including through*
 22 *the establishment of a mechanism to receive medical records*
 23 *from walk-in care providers and provide pertinent patient*
 24 *medical records to providers of walk-in care.*

1 “(f) *COPAYMENTS.—(1)(A) The Secretary may require*
 2 *an eligible veteran to pay the United States a copayment*
 3 *for each episode of hospital care or medical services pro-*
 4 *vided under this section if the eligible veteran would be re-*
 5 *quired to pay a copayment under this title.*

6 “(B) *An eligible veteran not required to pay a copay-*
 7 *ment under this title may access walk-in care without a*
 8 *copayment for the first two visits in a calendar year. For*
 9 *any additional visits, a copayment at an amount deter-*
 10 *mined by the Secretary may be required.*

11 “(C) *An eligible veteran required to pay a copayment*
 12 *under this title may be required to pay a regular copayment*
 13 *for the first two walk-in care visits in a calendar year. For*
 14 *any additional visits, a higher copayment at an amount*
 15 *determined by the Secretary may be required.*

16 “(2) *After the first two episodes of care furnished to*
 17 *an eligible veteran under this section, the Secretary may*
 18 *adjust the copayment required of the veteran under this sub-*
 19 *section based upon the priority group of enrollment of the*
 20 *eligible veteran, the number of episodes of care furnished*
 21 *to the eligible veteran during a year, and other factors the*
 22 *Secretary considers appropriate under this section.*

23 “(3) *The amount or amounts of the copayments re-*
 24 *quired under this subsection shall be prescribed by the Sec-*
 25 *retary by rule.*

1 “(4) Section 8153(c) of this title shall not apply to
2 this subsection.

3 “(g) *REGULATIONS.*—Not later than 1 year after the
4 date of the enactment of the Caring for Our Veterans Act
5 of 2018, the Secretary shall promulgate regulations to carry
6 out this section.

7 “(h) *WALK-IN CARE DEFINED.*—In this section, the
8 term ‘walk-in care’ means non-emergent care provided by
9 a qualifying non-Department entity or provider that fur-
10 nishes episodic care and not longitudinal management of
11 conditions and is otherwise defined through regulations the
12 Secretary shall promulgate.”.

13 “(b) *EFFECTIVE DATE.*—Section 1725A of title 38,
14 United States Code, as added by subsection (a) shall take
15 effect on the date upon which final regulations imple-
16 menting such section take effect.

17 “(c) *CLERICAL AMENDMENT.*—The table of sections at
18 the beginning of such chapter is amended by inserting after
19 the item relating to section 1725 the following new item:
“1725A. Access to walk-in care.”.

20 **SEC. 106. STRATEGY REGARDING THE DEPARTMENT OF**
21 **VETERANS AFFAIRS HIGH-PERFORMING INTE-**
22 **GRATED HEALTH CARE NETWORK.**

23 “(a) *IN GENERAL.*—Subchapter II of chapter 73 is
24 amended by inserting after section 7330B the following new
25 section:

1 **“§ 7330C. Quadrennial Veterans Health Administra-**
 2 **tion review**

3 “(a) *MARKET AREA ASSESSMENTS.*—(1) *Not less fre-*
 4 *quently than every 4 years, the Secretary of Veterans Af-*
 5 *fairs shall perform market area assessments regarding the*
 6 *health care services furnished under the laws administered*
 7 *by the Secretary.*

8 “(2) *Each market area assessment established under*
 9 *paragraph (1) shall include the following:*

10 “(A) *An assessment of the demand for health*
 11 *care from the Department, disaggregated by geo-*
 12 *graphic market areas as determined by the Secretary,*
 13 *including the number of requests for health care serv-*
 14 *ices under the laws administered by the Secretary.*

15 “(B) *An inventory of the health care capacity of*
 16 *the Department of Veterans Affairs across the Depart-*
 17 *ment’s system of facilities.*

18 “(C) *An assessment of the health care capacity*
 19 *to be provided through contracted community care*
 20 *providers and providers who entered into a provider*
 21 *agreement with the Department under section 1703A*
 22 *of title 38, as added by section 102, including the*
 23 *number of providers, the geographic location of the*
 24 *providers, and categories or types of health care serv-*
 25 *ices provided by the providers.*

1 “(D) *An assessment obtained from other Federal*
2 *direct delivery systems of their capacity to provide*
3 *health care to veterans.*

4 “(E) *An assessment of the health care capacity*
5 *of non-contracted providers where there is insufficient*
6 *network supply.*

7 “(F) *An assessment of the health care capacity*
8 *of academic affiliates and other collaborations of the*
9 *Department as it relates to providing health care to*
10 *veterans.*

11 “(G) *An assessment of the effects on health care*
12 *capacity of the access standards and standards for*
13 *quality established under sections 1703B and 1703C*
14 *of this title.*

15 “(H) *The number of appointments for health*
16 *care services under the laws administered by the Sec-*
17 *retary, disaggregated by—*

18 “(i) *appointments at facilities of the De-*
19 *partment of Veterans Affairs; and*

20 “(ii) *appointments with non-Department*
21 *health care providers.*

22 “(3)(A) *The Secretary shall submit to the appropriate*
23 *committees of Congress the market area assessments estab-*
24 *lished in paragraph (1).*

1 “(B) *The Secretary also shall submit to the appro-*
 2 *priate committees of Congress the market area assessments*
 3 *completed by or being performed on the day before the date*
 4 *of the enactment of the Caring for Our Veterans Act of 2018.*

5 “(4)(A) *The Secretary shall use the market area assess-*
 6 *ments established under paragraph (1) to—*

7 “(i) *determine the capacity of the health care*
 8 *provider networks established under section 1703(h) of*
 9 *this title;*

10 “(ii) *inform the Department budget, in accord-*
 11 *ance with subparagraph (B); and*

12 “(iii) *inform and assess the appropriateness of*
 13 *the access standards established under section 1703B*
 14 *of this title and standards for quality under section*
 15 *1703C and to make recommendations for any changes*
 16 *to such standards.*

17 “(B) *The Secretary shall ensure that the Department*
 18 *budget for any fiscal year (as submitted with the budget*
 19 *of the President under section 1105(a) of title 31) reflects*
 20 *the findings of the Secretary with respect to the most recent*
 21 *market area assessments under paragraph (1) and health*
 22 *care utilization data from the Department and non-Depart-*
 23 *ment entities or providers furnishing care and services to*
 24 *covered veterans as described in section 1703(b).*

1 “(b) *STRATEGIC PLAN TO MEET HEALTH CARE DE-*
 2 *MAND.—(1) Not later than 1 year after the date of the enact-*
 3 *ment of the Caring for Our Veterans Act of 2018 and not*
 4 *less frequently than once every 4 years thereafter, the Sec-*
 5 *retary shall submit to the appropriate committees of Con-*
 6 *gress a strategic plan that specifies a 4-year forecast of—*

7 “(A) *the demand for health care from the De-*
 8 *partment, disaggregated by geographic area as deter-*
 9 *mined by the Secretary;*

10 “(B) *the health care capacity to be provided at*
 11 *each medical center of the Department; and*

12 “(C) *the health care capacity to be provided*
 13 *through community care providers.*

14 “(2) *In preparing the strategic plan under paragraph*
 15 *(1), the Secretary shall—*

16 “(A) *assess the access standards and standards*
 17 *for quality established under sections 1703B and*
 18 *1703C of this title;*

19 “(B) *assess the market area assessments estab-*
 20 *lished under subsection (a);*

21 “(C) *assess the needs of the Department based on*
 22 *identified services that provide management of condi-*
 23 *tions or disorders related to military service for which*
 24 *there is limited experience or access in the national*
 25 *market, the overall health of veterans throughout their*

1 *lifespan, or other services as the Secretary determines*
2 *appropriate;*

3 “(D) *consult with key stakeholders within the*
4 *Department, the heads of other Federal agencies, and*
5 *other relevant governmental and nongovernmental en-*
6 *tities, including State, local, and tribal government*
7 *officials, members of Congress, veterans service orga-*
8 *nizations, private sector representatives, academics,*
9 *and other policy experts;*

10 “(E) *identify emerging issues, trends, problems,*
11 *and opportunities that could affect health care serv-*
12 *ices furnished under the laws administered by the*
13 *Secretary;*

14 “(F) *develop recommendations regarding both*
15 *short- and long-term priorities for health care services*
16 *furnished under the laws administered by the Sec-*
17 *retary;*

18 “(G) *after consultation with veterans service or-*
19 *ganizations and other key stakeholders on survey de-*
20 *velopment or modification of an existing survey, con-*
21 *sider a survey of veterans who have used hospital*
22 *care, medical services, or extended care services fur-*
23 *nished by the Veterans Health Administration during*
24 *the most recent 2-year period to assess the satisfaction*
25 *of the veterans with service and quality of care;*

1 “(H) conduct a comprehensive examination of
 2 programs and policies of the Department regarding
 3 the delivery of health care services and the demand of
 4 health care services for veterans in future years;

5 “(I) assess the remediation of medical service
 6 lines of the Department as described in section 1706A
 7 in conjunction with the utilization of non-Depart-
 8 ment entities or providers to offset remediation; and

9 “(J) consider such other matters as the Secretary
 10 considers appropriate.

11 “(c) *RESPONSIBILITIES.*—The Secretary shall be re-
 12 sponsible for—

13 “(1) overseeing the transformation and organiza-
 14 tional change across the Department to achieve such
 15 high performing integrated health care network;

16 “(2) developing the capital infrastructure plan-
 17 ning and procurement processes, whether minor or
 18 major construction projects or leases; and

19 “(3) developing a multi-year budget process that
 20 is capable of forecasting future year budget require-
 21 ments and projecting the cost of delivering health care
 22 services under a high-performing integrated health
 23 care network.

1 “(d) *APPROPRIATE COMMITTEES OF CONGRESS DE-*
 2 *FINED.*—*In this section, the term ‘appropriate committees*
 3 *of Congress’ means—*

4 “(1) *the Committee on Veterans’ Affairs and the*
 5 *Committee on Appropriations of the Senate; and*

6 “(2) *the Committee on Veterans’ Affairs and the*
 7 *Committee on Appropriations of the House of Rep-*
 8 *resentatives.”.*

9 (b) *CLERICAL AMENDMENT.*—*The table of sections at*
 10 *the beginning of such chapter is amended by inserting after*
 11 *the item relating to section 7330B the following new item:*
 “7330C. Quadrennial Veterans Health Administration review.”.

12 ***SEC. 107. APPLICABILITY OF DIRECTIVE OF OFFICE OF FED-***
 13 ***ERAL CONTRACT COMPLIANCE PROGRAMS.***

14 (a) *IN GENERAL.*—*Notwithstanding the treatment of*
 15 *certain laws under subsection (i) of section 1703A of title*
 16 *38, United States Code, as added by section 102 of this title,*
 17 *Directive 2014–01 of the Office of Federal Contract Compli-*
 18 *ance Programs of the Department of Labor (effective as of*
 19 *May 7, 2014) shall apply to any entity entering into an*
 20 *agreement under such section 1703A or section 1745 of such*
 21 *title, as amended by section 103, in the same manner as*
 22 *such directive applies to subcontractors under the*
 23 *TRICARE program for the duration of the moratorium*
 24 *provided under such directive.*

1 (b) *APPLICABILITY PERIOD.*—*The directive described*
 2 *in subsection (a), and the moratorium provided under such*
 3 *directive, shall not be altered or rescinded before May 7,*
 4 *2019.*

5 (c) *TRICARE PROGRAM DEFINED.*—*In this section,*
 6 *the term “TRICARE program” has the meaning given that*
 7 *term in section 1072 of title 10, United States Code.*

8 **SEC. 108. PREVENTION OF CERTAIN HEALTH CARE PRO-**
 9 **VIDERS FROM PROVIDING NON-DEPARTMENT**
 10 **HEALTH CARE SERVICES TO VETERANS.**

11 (a) *IN GENERAL.*—*On and after the date that is 1 year*
 12 *after the date of the enactment of this Act, the Secretary*
 13 *of Veterans Affairs shall deny or revoke the eligibility of*
 14 *a health care provider to provide non-Department health*
 15 *care services to veterans if the Secretary determines that*
 16 *the health care provider—*

17 (1) *was removed from employment with the De-*
 18 *partment of Veterans Affairs due to conduct that vio-*
 19 *lated a policy of the Department relating to the deliv-*
 20 *ery of safe and appropriate health care; or*

21 (2) *violated the requirements of a medical license*
 22 *of the health care provider that resulted in the loss of*
 23 *such medical license.*

24 (b) *PERMISSIVE ACTION.*—*On and after the date that*
 25 *is 1 year after the date of the enactment of this Act, the*

1 *Secretary may deny, revoke, or suspend the eligibility of*
 2 *a health care provider to provide non-Department health*
 3 *care services if the Secretary determines such action is nec-*
 4 *essary to immediately protect the health, safety, or welfare*
 5 *of veterans and the health care provider is under investiga-*
 6 *tion by the medical licensing board of a State in which*
 7 *the health care provider is licensed or practices.*

8 (c) *SUSPENSION.—The Secretary shall suspend the eli-*
 9 *gibility of a health care provider to provide non-Depart-*
 10 *ment health care services to veterans if the health care pro-*
 11 *vider is suspended from serving as a health care provider*
 12 *of the Department.*

13 (d) *COMPTROLLER GENERAL REPORT.—Not later than*
 14 *2 years after the date of the enactment of this Act, the*
 15 *Comptroller General of the United States shall submit to*
 16 *Congress a report on the implementation by the Secretary*
 17 *of this section, including the following:*

18 (1) *The aggregate number of health care pro-*
 19 *viders denied or suspended under this section from*
 20 *participation in providing non-Department health*
 21 *care services.*

22 (2) *An evaluation of any impact on access to*
 23 *health care for patients or staffing shortages in pro-*
 24 *grams of the Department providing non-Department*
 25 *health care services.*

1 (3) *An explanation of the coordination of the De-*
 2 *partment with the medical licensing boards of States*
 3 *in implementing this section, the amount of involve-*
 4 *ment of such boards in such implementation, and ef-*
 5 *forts by the Department to address any concerns*
 6 *raised by such boards with respect to such implemen-*
 7 *tation.*

8 (4) *Such recommendations as the Comptroller*
 9 *General considers appropriate regarding harmonizing*
 10 *eligibility criteria between health care providers of the*
 11 *Department and health care providers eligible to pro-*
 12 *vide non-Department health care services.*

13 (e) *NON-DEPARTMENT HEALTH CARE SERVICES DE-*
 14 *FINED.—In this section, the term “non-Department health*
 15 *care services” means services—*

16 (1) *provided under subchapter I of chapter 17 of*
 17 *title 38, United States Code, at non-Department fa-*
 18 *cilities (as defined in section 1701 of such title);*

19 (2) *provided under section 101 of the Veterans*
 20 *Access, Choice, and Accountability Act of 2014 (Pub-*
 21 *lic Law 113–146; 38 U.S.C. 1701 note);*

22 (3) *purchased through the Medical Community*
 23 *Care account of the Department; or*

1 (4) *purchased with amounts deposited in the Vet-*
 2 *erans Choice Fund under section 802 of the Veterans*
 3 *Access, Choice, and Accountability Act of 2014.*

4 **SEC. 109. REMEDIATION OF MEDICAL SERVICE LINES.**

5 (a) *IN GENERAL.*—Subchapter I of chapter 17 is
 6 *amended by inserting after section 1706 the following new*
 7 *section:*

8 **“§ 1706A. Remediation of medical service lines**

9 “(a) *IN GENERAL.*—Not later than 30 days after deter-
 10 *mining under section 1703(e)(1) that a medical service line*
 11 *of the Department is providing hospital care, medical serv-*
 12 *ices, or extended care services that does not comply with*
 13 *the standards for quality established by the Secretary, the*
 14 *Secretary shall submit to Congress an assessment of the fac-*
 15 *tors that led the Secretary to make such determination and*
 16 *a plan with specific actions, and the time to complete them,*
 17 *to be taken to comply with such standards for quality, in-*
 18 *cluding the following:*

19 “(1) *Increasing personnel or temporary per-*
 20 *sonnel assistance, including mobile deployment teams.*

21 “(2) *Special hiring incentives, including the*
 22 *Education Debt Reduction Program under subchapter*
 23 *VII of chapter 76 of this title and recruitment, reloca-*
 24 *tion, and retention incentives.*

25 “(3) *Utilizing direct hiring authority.*

1 “(4) *Providing improved training opportunities*
2 *for staff.*

3 “(5) *Acquiring improved equipment.*

4 “(6) *Making structural modifications to the fa-*
5 *cility used by the medical service line.*

6 “(7) *Such other actions as the Secretary con-*
7 *siders appropriate.*

8 “(b) *RESPONSIBLE PARTIES.—In each assessment sub-*
9 *mitted under subsection (a) with respect to a medical serv-*
10 *ice line, the Secretary shall identify the individuals at the*
11 *Central Office of the Veterans Health Administration, the*
12 *facility used by the medical service line, and the central*
13 *office of the relevant Veterans Integrated Service Network*
14 *who are responsible for overseeing the progress of that med-*
15 *ical service line in complying with the standards for quality*
16 *established by the Secretary.*

17 “(c) *INTERIM REPORTS.—Not later than 180 days*
18 *after submitting an assessment under subsection (a) with*
19 *respect to a medical service line, the Secretary shall submit*
20 *to Congress a report on the progress of that medical service*
21 *line in complying with the standards for quality established*
22 *by the Secretary and any other measures the Secretary will*
23 *take to assist the medical service line in complying with*
24 *such standards for quality.*

1 “(d) *ANNUAL REPORTS*.—Not less frequently than once
2 each year, the Secretary shall—

3 “(1) submit to Congress an analysis of the reme-
4 diation actions and costs of such actions taken with
5 respect to each medical service line with respect to
6 which the Secretary submitted an assessment and
7 plan under paragraph (1) in the preceding year, in-
8 cluding an update on the progress of each such med-
9 ical service line in complying with the standards for
10 quality and timeliness established by the Secretary
11 and any other actions the Secretary is undertaking to
12 assist the medical service line in complying with
13 standards for quality as established by the Secretary;
14 and

15 “(2) publish such analysis on the internet
16 website of the Department.”.

17 (b) *CLERICAL AMENDMENT*.—The table of sections at
18 the beginning of such chapter is amended by inserting after
19 the item relating to section 1706 the following new item:

“1706A. Remediation of medical service lines.”.

20 **CHAPTER 2—PAYING PROVIDERS AND** 21 **IMPROVING COLLECTIONS**

22 **SEC. 111. PROMPT PAYMENT TO PROVIDERS.**

23 (a) *IN GENERAL*.—Subchapter I of chapter 17 is
24 amended by inserting after section 1703C, as added by sec-
25 tion 104 of this title, the following new section:

1 **“§ 1703D. Prompt payment standard**

2 “(a) *IN GENERAL.*—(1) *Notwithstanding any other*
 3 *provision of this title or of any other provision of law, the*
 4 *Secretary shall pay for hospital care, medical services, or*
 5 *extended care services furnished by health care entities or*
 6 *providers under this chapter within 45 calendar days upon*
 7 *receipt of a clean paper claim or 30 calendar days upon*
 8 *receipt of a clean electronic claim.*

9 “(2) *If a claim is denied, the Secretary shall, within*
 10 *45 calendar days of denial for a paper claim and 30 cal-*
 11 *endar days of denial for an electronic claim, notify the*
 12 *health care entity or provider of the reason for denying the*
 13 *claim and what, if any, additional information is required*
 14 *to process the claim.*

15 “(3) *Upon the receipt of the additional information,*
 16 *the Secretary shall ensure that the claim is paid, denied,*
 17 *or otherwise adjudicated within 30 calendar days from the*
 18 *receipt of the requested information.*

19 “(4) *This section shall only apply to payments made*
 20 *on an invoice basis and shall not apply to capitation or*
 21 *other forms of periodic payment to entities or providers.*

22 “(b) *SUBMITTAL OF CLAIMS BY HEALTH CARE ENTI-*
 23 *TIES AND PROVIDERS.*—*A health care entity or provider*
 24 *that furnishes hospital care, a medical service, or an ex-*
 25 *tended care service under this chapter shall submit to the*
 26 *Secretary a claim for payment for furnishing the hospital*

1 *care, medical service, or extended care service not later than*
 2 *180 days after the date on which the entity or provider fur-*
 3 *nished the hospital care, medical service, or extended care*
 4 *service.*

5 “(c) *FRAUDULENT CLAIMS.—(1) Sections 3729*
 6 *through 3733 of title 31 shall apply to fraudulent claims*
 7 *for payment submitted to the Secretary by a health care*
 8 *entity or provider under this chapter.*

9 “(2) *Pursuant to regulations prescribed by the Sec-*
 10 *retary, the Secretary shall bar a health care entity or pro-*
 11 *vider from furnishing hospital care, medical services, and*
 12 *extended care services under this chapter when the Sec-*
 13 *retary determines the entity or provider has submitted to*
 14 *the Secretary fraudulent health care claims for payment by*
 15 *the Secretary.*

16 “(d) *OVERDUE CLAIMS.—(1) Any claim that has not*
 17 *been denied with notice, made pending with notice, or paid*
 18 *to the health care entity or provider by the Secretary shall*
 19 *be overdue if the notice or payment is not received by the*
 20 *entity provider within the time periods specified in sub-*
 21 *section (a).*

22 “(2)(A) *If a claim is overdue under this subsection,*
 23 *the Secretary may, under the requirements established by*
 24 *subsection (a) and consistent with the provisions of chapter*

1 39 of title 31 (commonly referred to as the ‘Prompt Pay-
2 ment Act’), require that interest be paid on clean claims.

3 “(B) Interest paid under subparagraph (A) shall be
4 computed at the rate of interest established by the Secretary
5 of the Treasury under section 3902 of title 31 and published
6 in the Federal Register.

7 “(3) Not less frequently than annually, the Secretary
8 shall submit to Congress a report on payment of overdue
9 claims under this subsection, disaggregated by paper and
10 electronic claims, that includes the following:

11 “(A) The amount paid in overdue claims de-
12 scribed in this subsection, disaggregated by the
13 amount of the overdue claim and the amount of inter-
14 est paid on such overdue claim.

15 “(B) The number of such overdue claims and the
16 average number of days late each claim was paid,
17 disaggregated by facility of the Department and Vet-
18 erans Integrated Service Network region.

19 “(e) OVERPAYMENT.—(1) The Secretary shall deduct
20 the amount of any overpayment from payments due a
21 health care entity or provider under this chapter.

22 “(2) Deductions may not be made under this sub-
23 section unless the Secretary has made reasonable efforts to
24 notify a health care entity or provider of the right to dispute

1 *the existence or amount of such indebtedness and the right*
 2 *to request a compromise of such indebtedness.*

3 “(3) *The Secretary shall make a determination with*
 4 *respect to any such dispute or request prior to deducting*
 5 *any overpayment unless the time required to make such a*
 6 *determination before making any deductions would jeop-*
 7 *ardize the Secretary’s ability to recover the full amount of*
 8 *such indebtedness.*

9 “(f) *INFORMATION AND DOCUMENTATION RE-*
 10 *QUIRED.—(1) The Secretary shall provide to all health care*
 11 *entities and providers participating in a program to fur-*
 12 *nish hospital care, medical services, or extended care serv-*
 13 *ices under this chapter a list of information and docu-*
 14 *mentation that is required to establish a clean claim under*
 15 *this section.*

16 “(2) *The Secretary shall consult with entities in the*
 17 *health care industry, in the public and private sector, to*
 18 *determine the information and documentation to include in*
 19 *the list under paragraph (1).*

20 “(3) *If the Secretary modifies the information and doc-*
 21 *umentation included in the list under paragraph (1), the*
 22 *Secretary shall notify all health care entities and providers*
 23 *described in paragraph (1) not later than 30 days before*
 24 *such modifications take effect.*

1 “(g) *PROCESSING OF CLAIMS.*—(1) *In processing a*
 2 *claim for compensation for hospital care, medical services,*
 3 *or extended care services furnished by a non-Department*
 4 *health care entity or provider under this chapter, the Sec-*
 5 *retary may act through—*

6 “(A) *a non-Department entity that is under con-*
 7 *tract or agreement for the program established under*
 8 *section 1703(a) of this title; or*

9 “(B) *a non-Department entity that specializes in*
 10 *such processing for other Federal agency health care*
 11 *systems.*

12 “(2) *The Secretary shall seek to contract with a third*
 13 *party to conduct a review of claims described in paragraph*
 14 *(3) that includes—*

15 “(A) *a feasibility assessment to determine the ca-*
 16 *capacity of the Department to process such claims in a*
 17 *timely manner; and*

18 “(B) *a cost benefit analysis comparing the ca-*
 19 *capacity of the Department to a third party entity ca-*
 20 *pable of processing such claims.*

21 “(3) *The review required under paragraph (2) shall*
 22 *apply to claims for hospital care, medical services, or ex-*
 23 *tended care services furnished under section 1703 of this*
 24 *Act, as amended by the Caring for Our Veterans Act of*
 25 *2018, that are processed by the Department.*

1 “(h) *REPORT ON ENCOUNTER DATA SYSTEM.*—(1) *Not*
 2 *later than 90 days after the date of the enactment of the*
 3 *Caring for Our Veterans Act of 2018, the Secretary shall*
 4 *submit to the appropriate committees of Congress a report*
 5 *on the feasibility and advisability of adopting a funding*
 6 *mechanism similar to what is utilized by other Federal*
 7 *agencies to allow a contracted entity to act as a fiscal inter-*
 8 *mediary for the Federal Government to distribute, or pass*
 9 *through, Federal Government funds for certain non-under-*
 10 *written hospital care, medical services, or extended care*
 11 *services.*

12 “(2) *The Secretary may coordinate with the Depart-*
 13 *ment of Defense, the Department of Health and Human*
 14 *Services, and the Department of the Treasury in developing*
 15 *the report required by paragraph (1).*

16 “(i) *DEFINITIONS.*—*In this section:*

17 “(1) *The term ‘appropriate committees of Con-*
 18 *gress’ means—*

19 “(A) *the Committee on Veterans’ Affairs*
 20 *and the Committee on Appropriations of the*
 21 *Senate; and*

22 “(B) *the Committee on Veterans’ Affairs*
 23 *and the Committee on Appropriations of the*
 24 *House of Representatives.*

1 “(2) The term ‘clean electronic claim’ means the
2 transmission of data for purposes of payment of cov-
3 ered health care expenses that is submitted to the Sec-
4 retary which contains substantially all of the required
5 data elements necessary for accurate adjudication,
6 without obtaining additional information from the
7 entity or provider that furnished the care or service,
8 submitted in such format as prescribed by the Sec-
9 retary in regulations for the purpose of paying claims
10 for care or services.

11 “(3) The term ‘clean paper claim’ means a
12 paper claim for payment of covered health care ex-
13 penses that is submitted to the Secretary which con-
14 tains substantially all of the required data elements
15 necessary for accurate adjudication, without obtain-
16 ing additional information from the entity or pro-
17 vider that furnished the care or service, submitted in
18 such format as prescribed by the Secretary in regula-
19 tions for the purpose of paying claims for care or
20 services.

21 “(4) The term ‘fraudulent claims’ means the
22 knowing misrepresentation of a material fact or facts
23 by a health care entity or provider made to induce
24 the Secretary to pay a claim that was not legally
25 payable to that provider.

1 “(5) *The term ‘health care entity or provider’ in-*
 2 *cludes any non-Department health care entity or pro-*
 3 *vider, but does not include any Federal health care*
 4 *entity or provider.’”.*

5 (b) *CLERICAL AMENDMENT.—The table of sections at*
 6 *the beginning of such chapter is amended by inserting after*
 7 *the item relating to section 1703C, as added by section 104*
 8 *of this title, the following new item:*

“1703D. Prompt payment standard.”.

9 **SEC. 112. AUTHORITY TO PAY FOR AUTHORIZED CARE NOT**
 10 **SUBJECT TO AN AGREEMENT.**

11 (a) *IN GENERAL.—Subchapter IV of chapter 81 is*
 12 *amended by adding at the end the following new section:*
 13 **“§8159. Authority to pay for services authorized but**
 14 **not subject to an agreement**

15 “(a) *IN GENERAL.—If, in the course of furnishing hos-*
 16 *pital care, a medical service, or an extended care service*
 17 *authorized by the Secretary and pursuant to a contract,*
 18 *agreement, or other arrangement with the Secretary, a pro-*
 19 *vider who is not a party to the contract, agreement, or other*
 20 *arrangement furnishes hospital care, a medical service, or*
 21 *an extended care service that the Secretary considers nec-*
 22 *essary, the Secretary may compensate the provider for the*
 23 *cost of such care or service.*

24 “(b) *NEW CONTRACTS AND AGREEMENTS.—The Sec-*
 25 *retary shall take reasonable efforts to enter into a contract,*

1 *agreement, or other arrangement with a provider described*
 2 *in subsection (a) to ensure that future care and services au-*
 3 *thorized by the Secretary and furnished by the provider are*
 4 *subject to such a contract, agreement, or other arrange-*
 5 *ment.”.*

6 (b) *CLERICAL AMENDMENT.—The table of sections at*
 7 *the beginning of such chapter is amended by inserting after*
 8 *the item relating to section 8158 the following new item:*

“8159. Authority to pay for services authorized but not subject to an agreement.”.

9 **SEC. 113. IMPROVEMENT OF AUTHORITY TO RECOVER THE**
 10 **COST OF SERVICES FURNISHED FOR NON-**
 11 **SERVICE-CONNECTED DISABILITIES.**

12 (a) *BROADENING SCOPE OF APPLICABILITY.—Section*
 13 *1729 is amended—*

14 (1) *in subsection (a)—*

15 (A) *in paragraph (2)(A)—*

16 (i) *by striking “the veteran’s” and in-*
 17 *serting “the individual’s”; and*

18 (ii) *by striking “the veteran” and in-*
 19 *serting “the individual”; and*

20 (B) *in paragraph (3)—*

21 (i) *in the matter preceding subpara-*
 22 *graph (A), by striking “the veteran” and*
 23 *inserting “the individual”; and*

1 (ii) in subparagraph (A), by striking
2 “the veteran’s” and inserting “the individ-
3 ual’s”;

4 (2) in subsection (b)—

5 (A) in paragraph (1)—

6 (i) by striking “the veteran” and in-
7 serting “the individual”; and

8 (ii) by striking “the veteran’s” and in-
9 serting “the individual’s”; and

10 (B) in paragraph (2)—

11 (i) in subparagraph (A)—

12 (I) by striking “the veteran” and
13 inserting “the individual”; and

14 (II) by striking “the veteran’s”
15 and inserting “the individual’s”; and

16 (ii) in subparagraph (B)—

17 (I) in clause (i), by striking “the
18 veteran” and inserting “the indi-
19 vidual”; and

20 (II) in clause (ii)—

21 (aa) by striking “the vet-
22 eran” and inserting “the indi-
23 vidual”; and

1 (bb) by striking “the vet-
 2 eran’s” each place it appears and
 3 inserting “the individual’s”;

4 (3) in subsection (e), by striking “A veteran”
 5 and inserting “An individual”; and

6 (4) in subsection (h)—

7 (A) in paragraph (1)—

8 (i) in the matter preceding subpara-
 9 graph (A), by striking “a veteran” and in-
 10 serting “an individual”;

11 (ii) in subparagraph (A), by striking
 12 “the veteran” and inserting “the indi-
 13 vidual”; and

14 (iii) in subparagraph (B), by striking
 15 “the veteran” and inserting “the indi-
 16 vidual”; and

17 (B) in paragraph (2)—

18 (i) by striking “A veteran” and insert-
 19 ing “An individual”;

20 (ii) by striking “a veteran” and insert-
 21 ing “an individual”; and

22 (iii) by striking “the veteran” and in-
 23 serting “the individual”.

24 (b) *MODIFICATION OF AUTHORITY.*—Subsection (a)(1)
 25 of such section is amended by striking “(1) Subject” and

1 all that follows through the period and inserting the fol-
 2 lowing: “(1) Subject to the provisions of this section, in any
 3 case in which the United States is required by law to fur-
 4 nish or pay for care or services under this chapter for a
 5 non-service-connected disability described in paragraph (2)
 6 of this subsection, the United States has the right to recover
 7 or collect from a third party the reasonable charges of care
 8 or services so furnished or paid for to the extent that the
 9 recipient or provider of the care or services would be eligible
 10 to receive payment for such care or services from such third
 11 party if the care or services had not been furnished or paid
 12 for by a department or agency of the United States.”.

13 (c) *MODIFICATION OF ELIGIBLE INDIVIDUALS.*—Sub-
 14 paragraph (D) of subsection (a)(2) of such section is amend-
 15 ed to read as follows:

16 “(D) that is incurred by an individual who is
 17 entitled to care (or payment of the expenses of care)
 18 under a health-plan contract.”.

19 **SEC. 114. PROCESSING OF CLAIMS FOR REIMBURSEMENT**
 20 **THROUGH ELECTRONIC INTERFACE.**

21 The Secretary of Veterans Affairs may enter into an
 22 agreement with a third-party entity to process, through the
 23 use of an electronic interface, claims for reimbursement for
 24 health care provided under the laws administered by the
 25 Secretary.

1 **CHAPTER 3—EDUCATION AND TRAINING**
2 **PROGRAMS**

3 **SEC. 121. EDUCATION PROGRAM ON HEALTH CARE OP-**
4 **TIONS.**

5 (a) *IN GENERAL.*—*The Secretary of Veterans Affairs*
6 *shall develop and administer an education program that*
7 *teaches veterans about their health care options through the*
8 *Department of Veterans Affairs.*

9 (b) *ELEMENTS.*—*The program under subsection (a)*
10 *shall—*

11 (1) *teach veterans about—*

12 (A) *eligibility criteria for care from the De-*
13 *partment set forth under sections 1703, as*
14 *amended by section 101 of this title, and 1710*
15 *of title 38, United States Code;*

16 (B) *priority groups for enrollment in the*
17 *system of annual patient enrollment under sec-*
18 *tion 1705(a) of such title;*

19 (C) *the copayments and other financial ob-*
20 *ligations, if any, required of certain individuals*
21 *for certain services; and*

22 (D) *how to utilize the access standards and*
23 *standards for quality established under sections*
24 *1703B and 1703C of such title;*

1 (2) *teach veterans about the interaction between*
2 *health insurance (including private insurance, Medi-*
3 *care, Medicaid, the TRICARE program, the Indian*
4 *Health Service, tribal health programs, and other*
5 *forms of insurance) and health care from the Depart-*
6 *ment; and*

7 (3) *provide veterans with information on what*
8 *to do when they have a complaint about health care*
9 *received from the Department (whether about the pro-*
10 *vider, the Department, or any other type of com-*
11 *plaint).*

12 (c) *ACCESSIBILITY.—In developing the education pro-*
13 *gram under this section, the Secretary shall ensure that ma-*
14 *terials under such program are accessible—*

15 (1) *to veterans who may not have access to the*
16 *internet; and*

17 (2) *to veterans in a manner that complies with*
18 *the Americans with Disabilities Act of 1990 (42*
19 *U.S.C. 12101 et seq.).*

20 (d) *ANNUAL EVALUATION AND REPORT.—*

21 (1) *EVALUATION.—The Secretary shall develop a*
22 *method to evaluate the effectiveness of the education*
23 *program under this section and evaluate the program*
24 *using the method not less frequently than once each*
25 *year.*

1 (2) *REPORT*.—Not less frequently than once each
 2 year, the Secretary shall submit to Congress a report
 3 on the findings of the Secretary with respect to the
 4 most recent evaluation conducted by the Secretary
 5 under paragraph (1).

6 (e) *DEFINITIONS*.—In this section:

7 (1) *MEDICAID*.—The term “Medicaid” means the
 8 Medicaid program under title XIX of the Social Secu-
 9 rity Act (42 U.S.C. 1396 et seq.).

10 (2) *MEDICARE*.—The term “Medicare” means the
 11 Medicare program under title XVIII of such Act (42
 12 U.S.C. 1395 et seq.).

13 (3) *TRICARE PROGRAM*.—The term “TRICARE
 14 program” has the meaning given that term in section
 15 1072 of title 10, United States Code.

16 **SEC. 122. TRAINING PROGRAM FOR ADMINISTRATION OF**
 17 **NON-DEPARTMENT OF VETERANS AFFAIRS**
 18 **HEALTH CARE.**

19 (a) *ESTABLISHMENT OF PROGRAM*.—The Secretary of
 20 Veterans Affairs shall develop and implement a training
 21 program to train employees and contractors of the Depart-
 22 ment of Veterans Affairs on how to administer non-Depart-
 23 ment health care programs, including the following:

24 (1) *Reimbursement for non-Department emer-*
 25 gency room care.

1 (2) *The Veterans Community Care Program*
 2 *under section 1703 of such title, as amended by sec-*
 3 *tion 101.*

4 (3) *Management of prescriptions pursuant to*
 5 *improvements under section 131.*

6 (b) *ANNUAL EVALUATION AND REPORT.—The Sec-*
 7 *retary shall—*

8 (1) *develop a method to evaluate the effectiveness*
 9 *of the training program developed and implemented*
 10 *under subsection (a);*

11 (2) *evaluate such program not less frequently*
 12 *than once each year; and*

13 (3) *not less frequently than once each year, sub-*
 14 *mit to Congress the findings of the Secretary with re-*
 15 *spect to the most recent evaluation carried out under*
 16 *paragraph (2).*

17 **SEC. 123. CONTINUING MEDICAL EDUCATION FOR NON-DE-**
 18 **PARTMENT MEDICAL PROFESSIONALS.**

19 (a) *ESTABLISHMENT OF PROGRAM.—*

20 (1) *IN GENERAL.—The Secretary of Veterans Af-*
 21 *fairs shall establish a program to provide continuing*
 22 *medical education material to non-Department med-*
 23 *ical professionals.*

1 (2) *EDUCATION PROVIDED.*—*The program estab-*
2 *lished under paragraph (1) shall include education on*
3 *the following:*

4 (A) *Identifying and treating common men-*
5 *tal and physical conditions of veterans and fam-*
6 *ily members of veterans.*

7 (B) *The health care system of the Depart-*
8 *ment of Veterans Affairs.*

9 (C) *Such other matters as the Secretary*
10 *considers appropriate.*

11 (b) *MATERIAL PROVIDED.*—*The continuing medical*
12 *education material provided to non-Department medical*
13 *professionals under the program established under sub-*
14 *section (a) shall be the same material provided to medical*
15 *professionals of the Department to ensure that all medical*
16 *professionals treating veterans have access to the same ma-*
17 *terials, which supports core competencies throughout the*
18 *community.*

19 (c) *ADMINISTRATION OF PROGRAM.*—

20 (1) *IN GENERAL.*—*The Secretary shall admin-*
21 *ister the program established under subsection (a) to*
22 *participating non-Department medical professionals*
23 *through an internet website of the Department of Vet-*
24 *erans Affairs.*

1 (2) *CURRICULUM AND CREDIT PROVIDED.*—The
 2 *Secretary shall determine the curriculum of the pro-*
 3 *gram and the number of hours of credit to provide to*
 4 *participating non-Department medical professionals*
 5 *for continuing medical education.*

6 (3) *ACCREDITATION.*—The Secretary shall ensure
 7 *that the program is accredited in as many States as*
 8 *practicable.*

9 (4) *CONSISTENCY WITH EXISTING RULES.*—The
 10 *Secretary shall ensure that the program is consistent*
 11 *with the rules and regulations of the following:*

12 (A) *The medical licensing agency of each*
 13 *State in which the program is accredited.*

14 (B) *Such medical credentialing organiza-*
 15 *tions as the Secretary considers appropriate.*

16 (5) *USER COST.*—The Secretary shall carry out
 17 *the program at no cost to participating non-Depart-*
 18 *ment medical professionals.*

19 (6) *MONITORING, EVALUATION, AND REPORT.*—
 20 *The Secretary shall monitor the utilization of the pro-*
 21 *gram established under subsection (a), evaluate its ef-*
 22 *fectiveness, and report to Congress on utilization and*
 23 *effectiveness not less frequently than once each year.*

24 (d) *NON-DEPARTMENT MEDICAL PROFESSIONAL DE-*
 25 *FINED.*—In this section, the term “non-Department medical

1 *professional” means any individual who is licensed by an*
 2 *appropriate medical authority in the United States and is*
 3 *in good standing, is not an employee of the Department*
 4 *of Veterans Affairs, and provides care to veterans or family*
 5 *members of veterans under the laws administered by the*
 6 *Secretary of Veterans Affairs.*

7 **CHAPTER 4—OTHER MATTERS RELATING**
 8 **TO NON-DEPARTMENT OF VETERANS**
 9 **AFFAIRS PROVIDERS**

10 **SEC. 131. ESTABLISHMENT OF PROCESSES TO ENSURE**
 11 **SAFE OPIOID PRESCRIBING PRACTICES BY**
 12 **NON-DEPARTMENT OF VETERANS AFFAIRS**
 13 **HEALTH CARE PROVIDERS.**

14 (a) *RECEIPT AND REVIEW OF GUIDELINES.—The Sec-*
 15 *retary of Veterans Affairs shall ensure that all covered*
 16 *health care providers are provided a copy of and certify*
 17 *that they have reviewed the evidence-based guidelines for*
 18 *prescribing opioids set forth by the Opioid Safety Initiative*
 19 *of the Department of Veterans Affairs.*

20 (b) *INCLUSION OF MEDICAL HISTORY AND CURRENT*
 21 *MEDICATIONS.—The Secretary shall implement a process to*
 22 *ensure that, if care of a veteran by a covered health care*
 23 *provider is authorized under the laws administered by the*
 24 *Secretary, the document authorizing such care includes the*
 25 *available and relevant medical history of the veteran and*

1 *a list of all medications prescribed to the veteran as known*
 2 *by the Department.*

3 *(c) SUBMITTAL OF MEDICAL RECORDS AND PRESCRIP-*
 4 *TIONS.—*

5 *(1) IN GENERAL.—The Secretary shall, consistent*
 6 *with section 1703(a)(2)(A), as amended by section*
 7 *101 of this title, and section 1703A(e)(2)(F), as added*
 8 *by section 102 of this title, require each covered health*
 9 *care provider to submit medical records of any care*
 10 *or services furnished, including records of any pre-*
 11 *scriptions for opioids, to the Department in the time-*
 12 *frame and format specified by the Secretary.*

13 *(2) RESPONSIBILITY OF DEPARTMENT FOR RE-*
 14 *CORDING AND MONITORING.—In carrying out para-*
 15 *graph (1) and upon the receipt by the Department of*
 16 *the medical records described in paragraph (1), the*
 17 *Secretary shall—*

18 *(A) ensure the Department is responsible for*
 19 *the recording of the prescription in the electronic*
 20 *health record of the veteran; and*

21 *(B) enable other monitoring of the prescrip-*
 22 *tion as outlined in the Opioid Safety Initiative*
 23 *of the Department.*

24 *(3) REPORT.—Not less frequently than annually,*
 25 *the Secretary shall submit to the Committee on Vet-*

1 *erans' Affairs of the Senate and the Committee on*
 2 *Veterans' Affairs of the House of Representatives a re-*
 3 *port evaluating the compliance of covered health care*
 4 *providers with the requirements under this section.*

5 *(d) USE OF OPIOID SAFETY INITIATIVE GUIDE-*
 6 *LINES.—*

7 *(1) IN GENERAL.—If the Secretary determines*
 8 *that the opioid prescribing practices of a covered*
 9 *health care provider, when treating covered veterans,*
 10 *satisfy a condition described in paragraph (3), the*
 11 *Secretary shall take such action as the Secretary con-*
 12 *siders appropriate to ensure the safety of all veterans*
 13 *receiving care from that health care provider, includ-*
 14 *ing removing or directing the removal of any such*
 15 *health care provider from provider networks or other-*
 16 *wise refusing to authorize care of veterans by such*
 17 *health care provider in any program authorized*
 18 *under the laws administered by the Secretary.*

19 *(2) INCLUSION IN CONTRACTS.—The Secretary*
 20 *shall ensure that any contracts, agreements, or other*
 21 *arrangements entered into by the Secretary with third*
 22 *parties involved in administering programs that pro-*
 23 *vide care in the community to veterans under the*
 24 *laws administered by the Secretary specifically grant*

1 *the authority set forth in paragraph (1) to such third*
 2 *parties and to the Secretary, as the case may be.*

3 (3) *CONDITIONS FOR EXCLUSION OR LIMITA-*
 4 *TION.—The Secretary shall take such action as is con-*
 5 *sidered appropriate under paragraph (1) when the*
 6 *opioid prescribing practices of a covered health care*
 7 *provider when treating covered veterans—*

8 (A) *conflict with or are otherwise incon-*
 9 *sistent with the standards of appropriate and*
 10 *safe care;*

11 (B) *violate the requirements of a medical li-*
 12 *cense of the health care provider; or*

13 (C) *may place at risk the veterans receiving*
 14 *health care from the provider.*

15 (e) *COVERED HEALTH CARE PROVIDER DEFINED.—*
 16 *In this section, the term “covered health care provider”*
 17 *means a non-Department of Veterans Affairs health care*
 18 *provider who provides health care to veterans under the*
 19 *laws administered by the Secretary of Veterans Affairs, but*
 20 *does not include a health care provider employed by another*
 21 *agency of the Federal Government.*

22 **SEC. 132. IMPROVING INFORMATION SHARING WITH COM-**
 23 **MUNITY PROVIDERS.**

24 *Section 7332(b)(2) is amended by striking subpara-*
 25 *graph (H) and inserting the following new subparagraphs:*

1 “(H)(i) *To a non-Department entity (including*
2 *private entities and other Federal agencies) for pur-*
3 *poses of providing health care, including hospital*
4 *care, medical services, and extended care services, to*
5 *patients or performing other health care-related ac-*
6 *tivities or functions.*

7 “(ii) *An entity to which a record is disclosed*
8 *under this subparagraph may not disclose or use such*
9 *record for a purpose other than that for which the dis-*
10 *closure was made or as permitted by law.*

11 “(I) *To a third party in order to recover or col-*
12 *lect reasonable charges for care furnished to, or paid*
13 *on behalf of, a patient in connection with a non-serv-*
14 *ice connected disability as permitted by section 1729*
15 *of this title or for a condition for which recovery is*
16 *authorized or with respect to which the United States*
17 *is deemed to be a third party beneficiary under the*
18 *Act entitled ‘An Act to provide for the recovery from*
19 *tortiously liable third persons of the cost of hospital*
20 *and medical care and treatment furnished by the*
21 *United States’ (Public Law 87–693; 42 U.S.C. 2651*
22 *et seq.; commonly known as the ‘Federal Medical Care*
23 *Recovery Act’).*”.

1 **SEC. 133. COMPETENCY STANDARDS FOR NON-DEPART-**
2 **MENT OF VETERANS AFFAIRS HEALTH CARE**
3 **PROVIDERS.**

4 (a) *ESTABLISHMENT OF STANDARDS AND REQUIRE-*
5 *MENTS.—The Secretary of Veterans Affairs shall establish*
6 *standards and requirements for the provision of care by*
7 *non-Department of Veterans Affairs health care providers*
8 *in clinical areas for which the Department of Veterans Af-*
9 *airs has special expertise, including post-traumatic stress*
10 *disorder, military sexual trauma-related conditions, and*
11 *traumatic brain injuries.*

12 (b) *CONDITION FOR ELIGIBILITY TO FURNISH*
13 *CARE.—(1) Each non-Department of Veterans Affairs*
14 *health care provider shall, to the extent practicable as deter-*
15 *mined by the Secretary or otherwise provided for in para-*
16 *graph (2), meet the standards and requirements established*
17 *pursuant to subsection (a) before furnishing care pursuant*
18 *to a contract, agreement, or other arrangement with the De-*
19 *partment of Veterans Affairs. Non-Department of Veterans*
20 *Affairs health care providers furnishing care pursuant to*
21 *a contract, agreement, or other arrangement shall, to the*
22 *extent practicable as determined by the Secretary, fulfill*
23 *training requirements established by the Secretary on how*
24 *to deliver evidence-based treatments in the clinical areas for*
25 *which the Department of Veterans Affairs has special exper-*
26 *tise.*

1 (2) *Each non-Department of Veterans Affairs health*
 2 *care provider who enters into a contract, agreement, or*
 3 *other arrangement after the effective date identified in sub-*
 4 *section (c) shall, to the extent practicable, meet the stand-*
 5 *ards and requirements established pursuant to subsection*
 6 *(a) within 6 months of the contract, agreement, or other*
 7 *arrangement taking effect.*

8 (c) *EFFECTIVE DATE.*—*This section shall take effect*
 9 *on the day that is 1 year after the date of the enactment*
 10 *of this Act.*

11 **SEC. 134. DEPARTMENT OF VETERANS AFFAIRS PARTICIPA-**
 12 **TION IN NATIONAL NETWORK OF STATE-**
 13 **BASED PRESCRIPTION DRUG MONITORING**
 14 **PROGRAMS.**

15 (a) *IN GENERAL.*—*Chapter 17 is amended by insert-*
 16 *ing after section 1730A the following new section:*

17 **“§1730B. Access to State prescription drug moni-**
 18 **toring programs**

19 “(a) *ACCESS TO PROGRAMS.*—(1) *Any licensed health*
 20 *care provider or delegate of such a provider shall be consid-*
 21 *ered an authorized recipient or user for the purpose of*
 22 *querying and receiving data from the national network of*
 23 *State-based prescription drug monitoring programs to sup-*
 24 *port the safe and effective prescribing of controlled sub-*
 25 *stances to covered patients.*

1 “(2) Under the authority granted by paragraph (1)—

2 “(A) licensed health care providers or delegates of
3 such providers shall query such network in accordance
4 with applicable regulations and policies of the Vet-
5 erans Health Administration; and

6 “(B) notwithstanding any general or specific
7 provision of law, rule, or regulation of a State, no
8 State may restrict the access of licensed health care
9 providers or delegates of such providers from accessing
10 that State’s prescription drug monitoring programs.

11 “(3) No State shall deny or revoke the license, registra-
12 tion, or certification of a licensed health care provider or
13 delegate who otherwise meets that State’s qualifications for
14 holding the license, registration, or certification on the basis
15 that the licensed health care provider or delegate queried
16 or received data, or attempted to query or receive data, from
17 the national network of State-based prescription drug moni-
18 toring programs under this section.

19 “(b) COVERED PATIENTS.—For purposes of this sec-
20 tion, a covered patient is a patient who—

21 “(1) receives a prescription for a controlled sub-
22 stance; and

23 “(2) is not receiving palliative care or enrolled
24 in hospice care.

25 “(c) DEFINITIONS.—In this section:

1 “(1) The term ‘controlled substance’ has the
2 meaning given such term in section 102(6) of the
3 Controlled Substances Act (21 U.S.C. 802(6)).

4 “(2) The term ‘delegate’ means a person or auto-
5 mated system accessing the national network of State-
6 based prescription monitoring programs at the direc-
7 tion or under the supervision of a licensed health care
8 provider.

9 “(3) The term ‘licensed health care provider’
10 means a health care provider employed by the De-
11 partment who is licensed, certified, or registered with-
12 in any State to fill or prescribe medications within
13 the scope of his or her practice as a Department em-
14 ployee.

15 “(4) The term ‘national network of State-based
16 prescription monitoring programs’ means an inter-
17 connected nation-wide system that facilitates the
18 transfer to State prescription drug monitoring pro-
19 gram data across State lines.

20 “(5) The term ‘State’ means a State, as defined
21 in section 101(20) of this title, or a political subdivi-
22 sion of a State.”.

23 (b) CLERICAL AMENDMENT.—The table of sections at
24 the beginning of chapter 17 of such title is amended by in-

1 *serting after the item relating to section 1730A the following*
 2 *new item:*

“1730B. Access to State prescription drug monitoring programs.”.

3 **CHAPTER 5—OTHER NON-DEPARTMENT**
 4 **HEALTH CARE MATTERS**

5 **SEC. 141. PLANS FOR USE OF SUPPLEMENTAL APPROPRIA-**
 6 **TIONS REQUIRED.**

7 *Whenever the Secretary submits to Congress a request*
 8 *for supplemental appropriations or any other appropria-*
 9 *tion outside the standard budget process to address a budg-*
 10 *etary issue affecting the Department of Veterans Affairs, the*
 11 *Secretary shall, not later than 45 days before the date on*
 12 *which such budgetary issue would start affecting a program*
 13 *or service, submit to Congress a justification for the request,*
 14 *including a plan that details how the Secretary intends to*
 15 *use the requested appropriation and how long the requested*
 16 *appropriation is expected to meet the needs of the Depart-*
 17 *ment and certification that the request was made using an*
 18 *updated and sound actuarial analysis.*

19 **SEC. 142. VETERANS CHOICE FUND FLEXIBILITY.**

20 *Section 802 of the Veterans Access, Choice, and Ac-*
 21 *countability Act of 2014 (Public Law 113–146; 38 U.S.C.*
 22 *1701 note) is amended—*

23 *(1) in subsection (c)—*

1 (A) in paragraph (1), by striking “by para-
 2 graph (3)” and inserting “in paragraphs (3)
 3 and (4)”; and

4 (B) by adding at the end the following new
 5 paragraph:

6 “(4) *PERMANENT AUTHORITY FOR OTHER*
 7 *USES.—Beginning on March 1, 2019, amounts re-*
 8 *maining in the Veterans Choice Fund may be used to*
 9 *furnish hospital care, medical services, and extended*
 10 *care services to individuals pursuant to chapter 17 of*
 11 *title 38, United States Code, at non-Department fa-*
 12 *cilities, including pursuant to non-Department pro-*
 13 *vider programs other than the program established by*
 14 *section 101. Such amounts shall be available in addi-*
 15 *tion to amounts available in other appropriations ac-*
 16 *counts for such purposes.”; and*

17 (2) in subsection (d)(1), by striking “to sub-
 18 section (c)(3)” and inserting “to paragraphs (3) and
 19 (4) of subsection (c)”.

20 **SEC. 143. SUNSET OF VETERANS CHOICE PROGRAM.**

21 Subsection (p) of section 101 of the Veterans Access,
 22 Choice, and Accountability Act of 2014 (Public Law 113–
 23 146; 38 U.S.C. 1701 note) is amended to read as follows:

24 “(p) *AUTHORITY TO FURNISH CARE AND SERVICES.—*
 25 *The Secretary may not use the authority under this section*

1 *to furnish care and services after the date that is 1 year*
 2 *after the date of the enactment of the Caring for Our Vet-*
 3 *erans Act of 2018.”.*

4 **SEC. 144. CONFORMING AMENDMENTS.**

5 *(a) IN GENERAL.—*

6 *(1) TITLE 38.—Title 38, United States Code, is*
 7 *amended—*

8 *(A) in section 1712(a)—*

9 *(i) in paragraph (3), by striking*
 10 *“under clause (1), (2), or (5) of section*
 11 *1703(a) of this title” and inserting “or en-*
 12 *tered an agreement”; and*

13 *(ii) in paragraph (4)(A), by striking*
 14 *“under the provisions of this subsection and*
 15 *section 1703 of this title”;*

16 *(B) in section 1712A(e)(1)—*

17 *(i) by inserting “or agreements” after*
 18 *“contracts”; and*

19 *(ii) by striking “(under sections*
 20 *1703(a)(2) and 1710(a)(1)(B) of this title)”;*
 21 *and*

22 *(C) in section 2303(a)(2)(B)(i), by striking*
 23 *“with section 1703” and inserting “with sections*
 24 *1703A, 8111, and 8153”.*

1 (2) *SOCIAL SECURITY ACT.—Section*
 2 *1866(a)(1)(L) of the Social Security Act (42 U.S.C.*
 3 *1395cc(a)(1)(L)) is amended by striking “under sec-*
 4 *tion 603” and inserting “under chapter 17”.*

5 (3) *VETERANS’ BENEFITS IMPROVEMENTS ACT OF*
 6 *1994.—Section 104(a)(4)(A) of the Veterans’ Benefits*
 7 *Improvements Act of 1994 (Public Law 103–446; 38*
 8 *U.S.C. 1117 note) is amended by striking “in section*
 9 *1703” and inserting “in sections 1703A, 8111, and*
 10 *8153”.*

11 (b) *EFFECTIVE DATE.—The amendments made by sub-*
 12 *section (a) shall take effect on the date described in section*
 13 *101(b).*

14 ***Subtitle B—Improving Department***
 15 ***of Veterans Affairs Health Care***
 16 ***Delivery***

17 ***SEC. 151. LICENSURE OF HEALTH CARE PROFESSIONALS OF***
 18 ***THE DEPARTMENT OF VETERANS AFFAIRS***
 19 ***PROVIDING TREATMENT VIA TELEMEDICINE.***

20 (a) *IN GENERAL.—Chapter 17 is amended by insert-*
 21 *ing after section 1730B, as added by section 134, the fol-*
 22 *lowing new section:*

1 **“§ 1730C. Licensure of health care professionals pro-**
 2 **viding treatment via telemedicine**

3 “(a) *IN GENERAL.*—Notwithstanding any provision of
 4 *law regarding the licensure of health care professionals, a*
 5 *covered health care professional may practice the health*
 6 *care profession of the health care professional at any loca-*
 7 *tion in any State, regardless of where the covered health*
 8 *care professional or the patient is located, if the covered*
 9 *health care professional is using telemedicine to provide*
 10 *treatment to an individual under this chapter.*

11 “(b) *COVERED HEALTH CARE PROFESSIONALS.*—For
 12 *purposes of this section, a covered health care professional*
 13 *is any health care professional who—*

14 “(1) *is an employee of the Department appointed*
 15 *under the authority under section 7306, 7401, 7405,*
 16 *7406, or 7408 of this title or title 5;*

17 “(2) *is authorized by the Secretary to provide*
 18 *health care under this chapter;*

19 “(3) *is required to adhere to all standards for*
 20 *quality relating to the provision of medicine in ac-*
 21 *cordance with applicable policies of the Department;*
 22 *and*

23 “(4) *has an active, current, full, and unrestricted*
 24 *license, registration, or certification in a State to*
 25 *practice the health care profession of the health care*
 26 *professional.*

1 “(c) *PROPERTY OF FEDERAL GOVERNMENT.*—Sub-
 2 section (a) shall apply to a covered health care professional
 3 providing treatment to a patient regardless of whether the
 4 covered health care professional or patient is located in a
 5 facility owned by the Federal Government during such
 6 treatment.

7 “(d) *RELATION TO STATE LAW.*—(1) The provisions
 8 of this section shall supersede any provisions of the law of
 9 any State to the extent that such provision of State law
 10 are inconsistent with this section.

11 “(2) No State shall deny or revoke the license, registra-
 12 tion, or certification of a covered health care professional
 13 who otherwise meets the qualifications of the State for hold-
 14 ing the license, registration, or certification on the basis
 15 that the covered health care professional has engaged or in-
 16 tends to engage in activity covered by subsection (a).

17 “(e) *RULE OF CONSTRUCTION.*—Nothing in this sec-
 18 tion may be construed to remove, limit, or otherwise affect
 19 any obligation of a covered health care professional under
 20 the Controlled Substances Act (21 U.S.C. 801 et seq.).

21 “(f) *STATE DEFINED.*—In this section, the term ‘State’
 22 means a State, as defined in section 101(20) of this title,
 23 or a political subdivision of a State.”.

24 “(b) *CLERICAL AMENDMENT.*—The table of sections at
 25 the beginning of chapter 17 of such title is amended by in-

1 *serting after the item relating to section 1730B, as added*
 2 *by section 134, the following new item:*

“1730C. Licensure of health care professionals providing treatment via telemedicine.”.

3 *(c) REPORT ON TELEMEDICINE.—*

4 *(1) IN GENERAL.—Not later than 1 year after*
 5 *the earlier of the date on which services provided*
 6 *under section 1730B of title 38, United States Code,*
 7 *as added by subsection (a), first occur or regulations*
 8 *are promulgated to carry out such section, the Sec-*
 9 *retary of Veterans Affairs shall submit to the Com-*
 10 *mittee on Veterans’ Affairs of the Senate and the*
 11 *Committee on Veterans’ Affairs of the House of Rep-*
 12 *resentatives a report on the effectiveness of the use of*
 13 *telemedicine by the Department of Veterans Affairs.*

14 *(2) ELEMENTS.—The report required by para-*
 15 *graph (1) shall include an assessment of the following:*

16 *(A) The satisfaction of veterans with tele-*
 17 *medicine furnished by the Department.*

18 *(B) The satisfaction of health care providers*
 19 *in providing telemedicine furnished by the De-*
 20 *partment.*

21 *(C) The effect of telemedicine furnished by*
 22 *the Department on the following:*

23 *(i) The ability of veterans to access*
 24 *health care, whether from the Department*

1 or from non-Department health care pro-
2 viders.

3 (ii) The frequency of use by veterans of
4 telemedicine.

5 (iii) The productivity of health care
6 providers.

7 (iv) Wait times for an appointment for
8 the receipt of health care from the Depart-
9 ment.

10 (v) The use by veterans of in-person
11 services at Department facilities and non-
12 Department facilities.

13 (D) The types of appointments for the re-
14 ceipt of telemedicine furnished by the Depart-
15 ment that were provided during the 1-year pe-
16 riod preceding the submittal of the report.

17 (E) The number of appointments for the re-
18 ceipt of telemedicine furnished by the Depart-
19 ment that were requested during such period,
20 disaggregated by medical facility.

21 (F) Savings by the Department, if any, in-
22 cluding travel costs, from furnishing health care
23 through the use of telemedicine during such pe-
24 riod.

1 **SEC. 152. AUTHORITY FOR DEPARTMENT OF VETERANS AF-**
 2 **FAIRS CENTER FOR INNOVATION FOR CARE**
 3 **AND PAYMENT.**

4 (a) *IN GENERAL.*—Subchapter I of chapter 17, as
 5 amended by this title, is further amended by inserting after
 6 section 1703D, as added by section 111, the following new
 7 section:

8 **“§ 1703E. Center for Innovation for Care and Payment**

9 “(a) *IN GENERAL.*—(1) *There is established within the*
 10 *Department a Center for Innovation for Care and Payment*
 11 *(in this section referred to as the ‘Center’).*

12 “(2) *The Secretary, acting through the Center, may*
 13 *carry out such pilot programs the Secretary determines to*
 14 *be appropriate to develop innovative approaches to testing*
 15 *payment and service delivery models in order to reduce ex-*
 16 *penditures while preserving or enhancing the quality of care*
 17 *furnished by the Department.*

18 “(3) *The Secretary, acting through the Center, shall*
 19 *test payment and service delivery models to determine*
 20 *whether such models—*

21 “(A) *improve access to, and quality, timeliness,*
 22 *and patient satisfaction of care and services; and*

23 “(B) *create cost savings for the Department.*

24 “(4)(A) *The Secretary shall test a model in a location*
 25 *where the Secretary determines that the model will address-*

1 *es deficits in care (including poor clinical outcomes or po-*
 2 *tentially avoidable expenditures) for a defined population.*

3 “(B) *The Secretary shall focus on models the Secretary*
 4 *expects to reduce program costs while preserving or enhanc-*
 5 *ing the quality of care received by individuals receiving*
 6 *benefits under this chapter.*

7 “(C) *The models selected may include those described*
 8 *in section 1115A(b)(2)(B) of the Social Security Act (42*
 9 *U.S.C. 1315a(b)(2)(B)).*

10 “(5) *In selecting a model for testing, the Secretary may*
 11 *consider, in addition to other factors identified in this sub-*
 12 *section, the following factors:*

13 “(A) *Whether the model includes a regular proc-*
 14 *ess for monitoring and updating patient care plans*
 15 *in a manner that is consistent with the needs and*
 16 *preferences of individuals receiving benefits under this*
 17 *chapter.*

18 “(B) *Whether the model places the individual re-*
 19 *ceiving benefits under this chapter (including family*
 20 *members and other caregivers of such individual) at*
 21 *the center of the care team of such individual.*

22 “(C) *Whether the model uses technology or new*
 23 *systems to coordinate care over time and across set-*
 24 *tings.*

1 “(D) Whether the model demonstrates effective
 2 linkage with other public sector payers, private sector
 3 payers, or statewide payment models.

4 “(6)(A) Models tested under this section may not be
 5 designed in such a way that would allow the United States
 6 to recover or collect reasonable charges from a Federal
 7 health care program for care or services furnished by the
 8 Secretary to a veteran under pilot programs carried out
 9 under this section.

10 “(B) In this paragraph, the term ‘Federal health care
 11 program’ means—

12 “(i) an insurance program described in section
 13 1811 of the Social Security Act (42 U.S.C. 1395c) or
 14 established by section 1831 of such Act (42 U.S.C.
 15 1395j);

16 “(ii) a State plan for medical assistance ap-
 17 proved under title XIX of such Act (42 U.S.C. 1396
 18 et seq.); or

19 “(iii) a TRICARE program operated under sec-
 20 tions 1075, 1075a, 1076, 1076a, 1076c, 1076d, 1076e,
 21 or 1076f of title 10.

22 “(b) DURATION.—Each pilot program carried out by
 23 the Secretary under this section shall terminate no later
 24 than 5 years after the date of the commencement of the pilot
 25 program.

1 “(c) *LOCATION.*—*The Secretary shall ensure that each*
 2 *pilot program carried out under this section occurs in an*
 3 *area or areas appropriate for the intended purposes of the*
 4 *pilot program. To the extent practicable, the Secretary shall*
 5 *ensure that the pilot programs are located in geographically*
 6 *diverse areas of the United States.*

7 “(d) *BUDGET.*—*Funding for each pilot program car-*
 8 *ried out by the Secretary under this section shall come from*
 9 *appropriations—*

10 “(1) *provided in advance in appropriations acts*
 11 *for the Veterans Health Administration; and*

12 “(2) *provided for information technology sys-*
 13 *tems.*

14 “(e) *NOTICE.*—*The Secretary shall—*

15 “(1) *publish information about each pilot pro-*
 16 *gram under this section in the Federal Register; and*

17 “(2) *take reasonable actions to provide direct no-*
 18 *tice to veterans eligible to participate in such pilot*
 19 *programs.*

20 “(f) *WAIVER OF AUTHORITIES.*—(1) *Subject to report-*
 21 *ing under paragraph (2) and approval under paragraph*
 22 *(3), in implementing a pilot program under this section,*
 23 *the Secretary may waive such requirements in subchapters*
 24 *I, II, and III of this chapter as the Secretary determines*

1 *necessary solely for the purposes of carrying out this section*
 2 *with respect to testing models described in subsection (a).*

3 “(2) *Before waiving any authority under paragraph*
 4 *(1), the Secretary shall submit to the Speaker of the House*
 5 *of Representatives, the minority leader of the House of Rep-*
 6 *resentatives, the majority leader of the Senate, the minority*
 7 *leader of the Senate, and each standing committee with ju-*
 8 *risdiction under the rules of the Senate and of the House*
 9 *of Representatives to report a bill to amend the provision*
 10 *or provisions of law that would be waived by the Depart-*
 11 *ment, a report on a request for waiver that describes in*
 12 *detail the following:*

13 “(A) *The specific authorities to be waived under*
 14 *the pilot program.*

15 “(B) *The standard or standards to be used in the*
 16 *pilot program in lieu of the waived authorities.*

17 “(C) *The reasons for such waiver or waivers.*

18 “(D) *A description of the metric or metrics the*
 19 *Secretary will use to determine the effect of the waiver*
 20 *or waivers upon the access to and quality, timeliness,*
 21 *or patient satisfaction of care and services furnished*
 22 *through the pilot program.*

23 “(E) *The anticipated cost savings, if any, of the*
 24 *pilot program.*

1 “(F) *The schedule for interim reports on the*
2 *pilot program describing the results of the pilot pro-*
3 *gram so far and the feasibility and advisability of*
4 *continuing the pilot program.*

5 “(G) *The schedule for the termination of the pilot*
6 *program and the submission of a final report on the*
7 *pilot program describing the result of the pilot pro-*
8 *gram and the feasibility and advisability of making*
9 *the pilot program permanent.*

10 “(H) *The estimated budget of the pilot program.*

11 “(3)(A) *Upon receipt of a report submitted under*
12 *paragraph (2), each House of Congress shall provide copies*
13 *of the report to the chairman and ranking member of each*
14 *standing committee with jurisdiction under the rules of the*
15 *House of Representatives or the Senate to report a bill to*
16 *amend the provision or provisions of law that would be*
17 *waived by the Department under this subsection.*

18 “(B) *The waiver requested by the Secretary under*
19 *paragraph (2) shall be considered approved under this*
20 *paragraph if there is enacted into law a joint resolution*
21 *approving such request in its entirety.*

22 “(C) *For purposes of this paragraph, the term ‘joint*
23 *resolution’ means only a joint resolution which is intro-*
24 *duced within the period of five legislative days beginning*

1 *on the date on which the Secretary transmits the report to*
 2 *the Congress under such paragraph (2), and—*

3 *“(i) which does not have a preamble; and*

4 *“(ii) the matter after the resolving clause of*
 5 *which is as follows: ‘that Congress approves the re-*
 6 *quest for a waiver under section 1703E(f) of title 38,*
 7 *United States Code, as submitted by the Secretary on*
 8 *_____,’ the blank space being filled with the appro-*
 9 *priate date.*

10 *“(D)(i) Any committee of the House of Representatives*
 11 *to which a joint resolution is referred shall report it to the*
 12 *House without amendment not later than 15 legislative*
 13 *days after the date of introduction thereof. If a committee*
 14 *fails to report the joint resolution within that period, the*
 15 *committee shall be discharged from further consideration of*
 16 *the joint resolution.*

17 *“(ii) It shall be in order at any time after the third*
 18 *legislative day after each committee authorized to consider*
 19 *a joint resolution has reported or has been discharged from*
 20 *consideration of a joint resolution, to move to proceed to*
 21 *consider the joint resolution in the House. All points of*
 22 *order against the motion are waived. Such a motion shall*
 23 *not be in order after the House has disposed of a motion*
 24 *to proceed on a joint resolution addressing a particular sub-*
 25 *mission. The previous question shall be considered as or-*

1 *dered on the motion to its adoption without intervening mo-*
 2 *tion. The motion shall not be debatable. A motion to recon-*
 3 *sider the vote by which the motion is disposed of shall not*
 4 *be in order.*

5 “(iii) *The joint resolution shall be considered as read.*
 6 *All points of order against the joint resolution and against*
 7 *its consideration are waived. The previous question shall*
 8 *be considered as ordered on the joint resolution to its pas-*
 9 *sage without intervening motion except two hours of debate*
 10 *equally divided and controlled by the proponent and an op-*
 11 *ponent. A motion to reconsider the vote on passage of the*
 12 *joint resolution shall not be in order.*

13 “(E)(i) *A joint resolution introduced in the Senate*
 14 *shall be referred to the Committee on Veterans’ Affairs.*

15 “(ii) *Any committee of the Senate to which a joint res-*
 16 *olution is referred shall report it to the Senate without*
 17 *amendment not later than 15 session days after the date*
 18 *of introduction of a joint resolution described in paragraph*
 19 *(C). If a committee fails to report the joint resolution with-*
 20 *in that period, the committee shall be discharged from fur-*
 21 *ther consideration of the joint resolution and the joint reso-*
 22 *lution shall be placed on the calendar.*

23 “(iii)(I) *Notwithstanding Rule XXII of the Standing*
 24 *Rules of the Senate, it is in order at any time after the*
 25 *third session day on which the Committee on Veterans’ Af-*

1 *fairs has reported or has been discharged from consideration*
 2 *of a joint resolution described in paragraph (C) (even*
 3 *though a previous motion to the same effect has been dis-*
 4 *agreed to) to move to proceed to the consideration of the*
 5 *joint resolution, and all points of order against the joint*
 6 *resolution (and against consideration of the joint resolu-*
 7 *tion) are waived. The motion to proceed is not debatable.*
 8 *The motion is not subject to a motion to postpone. A motion*
 9 *to reconsider the vote by which the motion is agreed to or*
 10 *disagreed to shall not be in order. If a motion to proceed*
 11 *to the consideration of the resolution is agreed to, the joint*
 12 *resolution shall remain the unfinished business until dis-*
 13 *posed of.*

14 “(II) *Consideration of the joint resolution, and on all*
 15 *debatable motions and appeals in connection therewith,*
 16 *shall be limited to not more than two hours, which shall*
 17 *be divided equally between the majority and minority lead-*
 18 *ers or their designees. A motion further to limit debate is*
 19 *in order and not debatable. An amendment to, or a motion*
 20 *to postpone, or a motion to proceed to the consideration*
 21 *of other business, or a motion to recommit the joint resolu-*
 22 *tion is not in order.*

23 “(III) *If the Senate has voted to proceed to a joint reso-*
 24 *lution, the vote on passage of the joint resolution shall occur*
 25 *immediately following the conclusion of consideration of the*

1 *joint resolution, and a single quorum call at the conclusion*
 2 *of the debate if requested in accordance with the rules of*
 3 *the Senate.*

4 “(IV) *Appeals from the decisions of the Chair relating*
 5 *to the application of the rules of the Senate, as the case*
 6 *may be, to the procedure relating to a joint resolution shall*
 7 *be decided without debate.*

8 “(F) *A joint resolution considered pursuant to this*
 9 *paragraph shall not be subject to amendment in either the*
 10 *House of Representatives or the Senate.*

11 “(G)(i) *If, before the passage by one House of the joint*
 12 *resolution of that House, that House receives the joint reso-*
 13 *lution from the other House, then the following procedures*
 14 *shall apply:*

15 “(I) *The joint resolution of the other House shall*
 16 *not be referred to a committee.*

17 “(II) *With respect to the joint resolution of the*
 18 *House receiving the joint resolution—*

19 “(aa) *the procedure in that House shall*
 20 *be the same as if no joint resolution had*
 21 *been received from the other House; but*

22 “(bb) *the vote on passage shall be on*
 23 *the joint resolution of the other House.*

24 “(ii) *If the Senate fails to introduce or consider*
 25 *a joint resolution under this paragraph, the joint res-*

1 *olution of the House shall be entitled to expedited*
 2 *floor procedures under this subparagraph.*

3 *“(iii) If, following passage of the joint resolution*
 4 *in the Senate, the Senate then receives the companion*
 5 *measure from the House of Representatives, the com-*
 6 *panion measure shall not be debatable.*

7 *“(H) This subparagraph is enacted by Congress—*

8 *“(i) as an exercise of the rulemaking power of*
 9 *the Senate and House of Representatives, respectively,*
 10 *and as such it is deemed a part of the rules of each*
 11 *House, respectively, but applicable only with respect*
 12 *to the procedure to be followed in that House in the*
 13 *case of a joint resolution, and it supersedes other rules*
 14 *only to the extent that it is inconsistent with such*
 15 *rules; and*

16 *“(ii) with full recognition of the constitutional*
 17 *right of either House to change the rules (so far as re-*
 18 *lating to the procedure of that House) at any time,*
 19 *in the same manner, and to the same extent as in the*
 20 *case of any other rule of that House.*

21 *“(g) LIMITATIONS.—(1) The Secretary may not carry*
 22 *out more than 10 pilot programs concurrently.*

23 *“(2)(A) Subject to subparagraph (B), the Secretary*
 24 *may not expend more than \$50,000,000 in any fiscal year*
 25 *from amounts under subsection (d).*

1 “(B) *The Secretary may expend more than the amount*
2 *in subparagraph (A) if—*

3 “(i) *the Secretary determines that the additional*
4 *expenditure is necessary to carry out pilot programs*
5 *under this section;*

6 “(ii) *the Secretary submits to the Committees on*
7 *Veterans’ Affairs of the Senate and the House of Rep-*
8 *resentatives a report setting forth the amount of the*
9 *additional expenditure and a justification for the ad-*
10 *ditional expenditure; and*

11 “(iii) *the Chairmen of the Committees on Vet-*
12 *erans’ Affairs of the Senate and the House of Rep-*
13 *resentatives transmit to the Secretary a letter approv-*
14 *ing of the additional expenditure.*

15 “(3) *The waiver provisions in subsection (f) shall not*
16 *apply unless the Secretary, in accordance with the require-*
17 *ments in subsection (f), submits the first proposal for a pilot*
18 *program not later than 18 months after the date of the en-*
19 *actment of the Caring for Our Veterans Act of 2018.*

20 “(4) *Notwithstanding section 502 of this title, decisions*
21 *by the Secretary under this section shall, consistent with*
22 *section 511 of this title, be final and conclusive and may*
23 *not be reviewed by any other official or by any court, wheth-*
24 *er by an action in the nature of mandamus or otherwise.*

1 “(5)(A) *If the Secretary determines that a pilot pro-*
 2 *gram is not improving the quality of care or producing cost*
 3 *savings, the Secretary shall—*

4 “(i) *propose a modification to the pilot program*
 5 *in the interim report that shall also be considered a*
 6 *report under subsection (f)(2) and shall be subject to*
 7 *the terms and conditions of subsection (f)(2); or*

8 “(ii) *terminate such pilot program not later*
 9 *than 30 days after submitting the interim report to*
 10 *Congress.*

11 “(B) *If the Secretary terminates a pilot program*
 12 *under subparagraph (A)(ii), for purposes of subparagraphs*
 13 *(F) and (G) of subsection (f)(2), such interim report will*
 14 *also serve as the final report for that pilot program.*

15 “(h) *EVALUATION AND REPORTING REQUIREMENTS.—*
 16 *(1) The Secretary shall conduct an evaluation of each model*
 17 *tested, which shall include, at a minimum, an analysis of—*

18 “(A) *the quality of care furnished under the*
 19 *model, including the measurement of patient-level*
 20 *outcomes and patient-centeredness criteria determined*
 21 *appropriate by the Secretary; and*

22 “(B) *the changes in spending by reason of that*
 23 *model.*

24 “(2) *The Secretary shall make the results of each eval-*
 25 *uation under this subsection available to the public in a*

1 *timely fashion and may establish requirements for other en-*
 2 *tities participating in the testing of models under this sec-*
 3 *tion to collect and report information that the Secretary*
 4 *determines is necessary to monitor and evaluate such mod-*
 5 *els.*

6 “(i) *COORDINATION AND ADVICE.—(1) The Secretary*
 7 *shall obtain advice from the Under Secretary for Health*
 8 *and the Special Medical Advisory Group established pursu-*
 9 *ant to section 7312 of this title in the development and im-*
 10 *plementation of any pilot program operated under this sec-*
 11 *tion.*

12 “(2) *In carrying out the duties under this section, the*
 13 *Secretary shall consult representatives of relevant Federal*
 14 *agencies, and clinical and analytical experts with expertise*
 15 *in medicine and health care management. The Secretary*
 16 *shall use appropriate mechanisms to seek input from inter-*
 17 *ested parties.*

18 “(j) *EXPANSION OF SUCCESSFUL PILOT PROGRAMS.—*
 19 *Taking into account the evaluation under subsection (f), the*
 20 *Secretary may, through rulemaking, expand (including im-*
 21 *plementation on a nationwide basis) the duration and the*
 22 *scope of a model that is being tested under subsection (a)*
 23 *to the extent determined appropriate by the Secretary, if—*

24 “(1) *the Secretary determines that such expan-*
 25 *sion is expected to—*

1 “(A) *reduce spending without reducing the*
2 *quality of care; or*

3 “(B) *improve the quality of patient care*
4 *without increasing spending; and*

5 “(2) *the Secretary determines that such expan-*
6 *sion would not deny or limit the coverage or provi-*
7 *sion of benefits for individuals receiving benefits*
8 *under this chapter.”.*

9 (b) *CONFORMING AMENDMENT.—The table of sections*
10 *at the beginning of such chapter, as amended by this title,*
11 *is further amended by inserting after the item relating to*
12 *section 1703D the following new item:*

“1703E. Center for Innovation for Care and Payment.”.

13 **SEC. 153. AUTHORIZATION TO PROVIDE FOR OPERATIONS**
14 **ON LIVE DONORS FOR PURPOSES OF CON-**
15 **DUCTING TRANSPLANT PROCEDURES FOR**
16 **VETERANS.**

17 (a) *IN GENERAL.—Subchapter VIII of chapter 17 is*
18 *amended by adding at the end the following new section:*

19 **“§1788. Transplant procedures with live donors and**
20 **related services**

21 “(a) *IN GENERAL.—Subject to subsections (b) and (c),*
22 *in a case in which a veteran is eligible for a transplant*
23 *procedure from the Department, the Secretary may provide*
24 *for an operation on a live donor to carry out such procedure*

1 *for such veteran, notwithstanding that the live donor may*
 2 *not be eligible for health care from the Department.*

3 “(b) *OTHER SERVICES.*—Subject to the availability of
 4 appropriations for such purpose, the Secretary shall furnish
 5 to a live donor any care or services before and after con-
 6 ducting the transplant procedure under subsection (a) that
 7 may be required in connection with such procedure.

8 “(c) *USE OF NON-DEPARTMENT FACILITIES.*—In car-
 9 rying out this section, the Secretary may provide for the
 10 operation described in subsection (a) on a live donor and
 11 furnish to the live donor the care and services described in
 12 subsection (b) at a non-Department facility pursuant to an
 13 agreement entered into by the Secretary under this chapter.
 14 The live donor shall be deemed to be an individual eligible
 15 for hospital care and medical services at a non-Department
 16 facility pursuant to such an agreement solely for the pur-
 17 poses of receiving such operation, care, and services at the
 18 non-Department facility.”.

19 (b) *CLERICAL AMENDMENT.*—The table of sections at
 20 the beginning of chapter 17 is amended by inserting after
 21 the item relating to section 1787 the following new item:

“1788. Transplant procedures with live donors and related services.”.

22 ***Subtitle C—Family Caregivers***

23 ***SEC. 161. EXPANSION OF FAMILY CAREGIVER PROGRAM OF*** 24 ***DEPARTMENT OF VETERANS AFFAIRS.***

25 (a) *FAMILY CAREGIVER PROGRAM.*—

1 (1) *EXPANSION OF ELIGIBILITY.*—

2 (A) *IN GENERAL.*—Subparagraph (B) of
3 subsection (a)(2) of section 1720G is amended to
4 read as follows:

5 “(B) for assistance provided under this sub-
6 section—

7 “(i) before the date on which the Secretary
8 submits to Congress a certification that the De-
9 partment has fully implemented the information
10 technology system required by section 162(a) of
11 the Caring for Our Veterans Act of 2018, has a
12 serious injury (including traumatic brain in-
13 jury, psychological trauma, or other mental dis-
14 order) incurred or aggravated in the line of duty
15 in the active military, naval, or air service on
16 or after September 11, 2001;

17 “(ii) during the 2-year period beginning on
18 the date on which the Secretary submitted to
19 Congress the certification described in clause (i),
20 has a serious injury (including traumatic brain
21 injury, psychological trauma, or other mental
22 disorder) incurred or aggravated in the line of
23 duty in the active military, naval, or air serv-
24 ice—

25 “(I) on or before May 7, 1975; or

1 “(II) on or after September 11, 2001;

2 or

3 “(iii) after the date that is 2 years after the
4 date on which the Secretary submits to Congress
5 the certification described in clause (i), has a se-
6 rious injury (including traumatic brain injury,
7 psychological trauma, or other mental disorder)
8 incurred or aggravated in the line of duty in the
9 active military, naval, or air service; and”.

10 (B) *PUBLICATION IN FEDERAL REGISTER.*—
11 Not later than 30 days after the date on which
12 the Secretary of Veterans Affairs submits to Con-
13 gress the certification described in subsection
14 (a)(2)(B)(i) of section 1720G of such title, as
15 amended by subparagraph (A) of this paragraph,
16 the Secretary shall publish the date specified in
17 such subsection in the *Federal Register*.

18 (2) *EXPANSION OF NEEDED SERVICES IN ELIGI-*
19 *BILITY CRITERIA.*—Subsection (a)(2)(C) of such sec-
20 tion is amended—

21 (A) in clause (ii), by striking “; or” and in-
22 serting a semicolon;

23 (B) by redesignating clause (iii) as clause
24 (iv); and

1 (C) by inserting after clause (ii) the fol-
 2 lowing new clause (iii):

3 “(iii) a need for regular or extensive in-
 4 struction or supervision without which the abil-
 5 ity of the veteran to function in daily life would
 6 be seriously impaired; or”.

7 (3) *EXPANSION OF SERVICES PROVIDED.*—Sub-
 8 section (a)(3)(A)(ii) of such section is amended—

9 (A) in subclause (IV), by striking “; and”
 10 and inserting a semicolon;

11 (B) in subclause (V), by striking the period
 12 at the end and inserting “; and”; and

13 (C) by adding at the end the following new
 14 subclause:

15 “(VI) through the use of contracts with, or
 16 the provision of grants to, public or private enti-
 17 ties—

18 “(aa) financial planning services relat-
 19 ing to the needs of injured veterans and
 20 their caregivers; and

21 “(bb) legal services, including legal ad-
 22 vice and consultation, relating to the needs
 23 of injured veterans and their caregivers.”.

24 (4) *MODIFICATION OF STIPEND CALCULATION.*—
 25 Subsection (a)(3)(C) of such section is amended—

1 (A) by redesignating clause (iii) as clause
2 (iv); and

3 (B) by inserting after clause (ii) the fol-
4 lowing new clause (iii):

5 “(iii) In determining the amount and degree of per-
6 sonal care services provided under clause (i) with respect
7 to an eligible veteran whose need for personal care services
8 is based in whole or in part on a need for supervision or
9 protection under paragraph (2)(C)(ii) or regular instruc-
10 tion or supervision under paragraph (2)(C)(iii), the Sec-
11 retary shall take into account the following:

12 “(I) The assessment by the family caregiver of
13 the needs and limitations of the veteran.

14 “(II) The extent to which the veteran can func-
15 tion safely and independently in the absence of such
16 supervision, protection, or instruction.

17 “(III) The amount of time required for the fam-
18 ily caregiver to provide such supervision, protection,
19 or instruction to the veteran.”.

20 (5) PERIODIC EVALUATION OF NEED FOR CER-
21 TAIN SERVICES.—Subsection (a)(3) of such section is
22 amended by adding at the end the following new sub-
23 paragraph:

24 “(D) In providing instruction, preparation, and
25 training under subparagraph (A)(i)(I) and technical sup-

1 port under subparagraph (A)(i)(II) to each family care-
 2 giver who is approved as a provider of personal care serv-
 3 ices for an eligible veteran under paragraph (6), the Sec-
 4 retary shall periodically evaluate the needs of the eligible
 5 veteran and the skills of the family caregiver of such veteran
 6 to determine if additional instruction, preparation, train-
 7 ing, or technical support under those subparagraphs is nec-
 8 essary.”.

9 (6) *USE OF PRIMARY CARE TEAMS.*—Subsection
 10 (a)(5) of such section is amended, in the matter pre-
 11 ceding subparagraph (A), by inserting “(in collabora-
 12 tion with the primary care team for the eligible vet-
 13 eran to the maximum extent practicable)” after
 14 “evaluate”.

15 (7) *ASSISTANCE FOR FAMILY CAREGIVERS.*—Sub-
 16 section (a) of such section is amended by adding at
 17 the end the following new paragraph:

18 “(11)(A) In providing assistance under this subsection
 19 to family caregivers of eligible veterans, the Secretary may
 20 enter into contracts, provider agreements, and memoranda
 21 of understanding with Federal agencies, States, and pri-
 22 vate, nonprofit, and other entities to provide such assistance
 23 to such family caregivers.

24 “(B) The Secretary may provide assistance under this
 25 paragraph only if such assistance is reasonably accessible

1 *to the family caregiver and is substantially equivalent or*
 2 *better in quality to similar services provided by the Depart-*
 3 *ment.*

4 “(C) *The Secretary may provide fair compensation to*
 5 *Federal agencies, States, and other entities that provide as-*
 6 *sistance under this paragraph.*”.

7 (b) *MODIFICATION OF DEFINITION OF PERSONAL CARE*
 8 *SERVICES.—Subsection (d)(4) of such section is amended—*

9 (1) *in subparagraph (A), by striking “inde-*
 10 *pendent”;*

11 (2) *by redesignating subparagraph (B) as sub-*
 12 *paragraph (D); and*

13 (3) *by inserting after subparagraph (A) the fol-*
 14 *lowing new subparagraphs:*

15 “(B) *Supervision or protection based on*
 16 *symptoms or residuals of neurological or other*
 17 *impairment or injury.*

18 “(C) *Regular or extensive instruction or su-*
 19 *pervision without which the ability of the vet-*
 20 *eran to function in daily life would be seriously*
 21 *impaired.*”.

1 **SEC. 162. IMPLEMENTATION OF INFORMATION TECH-**
2 **NOLOGY SYSTEM OF DEPARTMENT OF VET-**
3 **ERANS AFFAIRS TO ASSESS AND IMPROVE**
4 **THE FAMILY CAREGIVER PROGRAM.**

5 *(a) IMPLEMENTATION OF NEW SYSTEM.—*

6 *(1) IN GENERAL.—Not later than October 1,*
7 *2018, the Secretary of Veterans Affairs shall imple-*
8 *ment an information technology system that fully*
9 *supports the Program and allows for data assessment*
10 *and comprehensive monitoring of the Program.*

11 *(2) ELEMENTS OF SYSTEM.—The information*
12 *technology system required to be implemented under*
13 *paragraph (1) shall include the following:*

14 *(A) The ability to easily retrieve data that*
15 *will allow all aspects of the Program (at the*
16 *medical center and aggregate levels) and the*
17 *workload trends for the Program to be assessed*
18 *and comprehensively monitored.*

19 *(B) The ability to manage data with respect*
20 *to a number of caregivers that is more than the*
21 *number of caregivers that the Secretary expects*
22 *to apply for the Program.*

23 *(C) The ability to integrate the system with*
24 *other relevant information technology systems of*
25 *the Veterans Health Administration.*

1 (b) *ASSESSMENT OF PROGRAM.*—Not later than 180
 2 days after implementing the system described in subsection
 3 (a), the Secretary shall, through the Under Secretary for
 4 Health, use data from the system and other relevant data
 5 to conduct an assessment of how key aspects of the Program
 6 are structured and carried out.

7 (c) *ONGOING MONITORING OF AND MODIFICATIONS TO*
 8 *PROGRAM.*—

9 (1) *MONITORING.*—The Secretary shall use the
 10 system implemented under subsection (a) to monitor
 11 and assess the workload of the Program, including
 12 monitoring and assessment of data on—

13 (A) the status of applications, appeals, and
 14 home visits in connection with the Program; and

15 (B) the use by caregivers participating in
 16 the Program of other support services under the
 17 Program such as respite care.

18 (2) *MODIFICATIONS.*—Based on the monitoring
 19 and assessment conducted under paragraph (1), the
 20 Secretary shall identify and implement such modi-
 21 fications to the Program as the Secretary considers
 22 necessary to ensure the Program is functioning as in-
 23 tended and providing veterans and caregivers partici-
 24 pating in the Program with services in a timely man-
 25 ner.

1 (d) *REPORTS.*—

2 (1) *INITIAL REPORT.*—

3 (A) *IN GENERAL.*—Not later than 90 days
4 after the date of the enactment of this Act, the
5 Secretary shall submit to the Committee on Vet-
6 erans' Affairs of the Senate, the Committee on
7 Veterans' Affairs of the House of Representatives,
8 and the Comptroller General of the United States
9 a report that includes—

10 (i) the status of the planning, develop-
11 ment, and deployment of the system re-
12 quired to be implemented under subsection
13 (a), including any changes in the timeline
14 for the implementation of the system; and

15 (ii) an assessment of the needs of fam-
16 ily caregivers of veterans described in sub-
17 paragraph (B), the resources needed for the
18 inclusion of such family caregivers in the
19 Program, and such changes to the Program
20 as the Secretary considers necessary to en-
21 sure the successful expansion of the Program
22 to include such family caregivers.

23 (B) *VETERANS DESCRIBED.*—Veterans de-
24 scribed in this subparagraph are veterans who
25 are eligible for the Program under clause (ii) or

(iii) of section 1720G(a)(2)(B) of title 38, United States Code, as amended by section 161(a)(1) of this title, solely due to a serious injury (including traumatic brain injury, psychological trauma, or other mental disorder) incurred or aggravated in the line of duty in the active military, naval, or air service before September 11, 2001.

(2) *NOTIFICATION BY COMPTROLLER GENERAL.*—

The Comptroller General shall review the report submitted under paragraph (1) and notify the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives with respect to the progress of the Secretary in—

(A) fully implementing the system required under subsection (a); and

(B) implementing a process for using such system to monitor and assess the Program under subsection (c)(1) and modify the Program as considered necessary under subsection (c)(2).

(3) *FINAL REPORT.*—

(A) IN GENERAL.—Not later than October 1, 2019, the Secretary shall submit to the Committee on Veterans' Affairs of the Senate, the Committee on Veterans' Affairs of the House of Representatives, and the Comptroller General a

1 *report on the implementation of subsections (a)*
 2 *through (c).*

3 *(B) ELEMENTS.—The report required by*
 4 *subparagraph (A) shall include the following:*

5 *(i) A certification by the Secretary*
 6 *that the information technology system de-*
 7 *scribed in subsection (a) has been imple-*
 8 *mented.*

9 *(ii) A description of how the Secretary*
 10 *has implemented such system.*

11 *(iii) A description of the modifications*
 12 *to the Program, if any, that were identified*
 13 *and implemented under subsection (c)(2).*

14 *(iv) A description of how the Secretary*
 15 *is using such system to monitor the work-*
 16 *load of the Program.*

17 *(e) DEFINITIONS.—In this section:*

18 *(1) ACTIVE MILITARY, NAVAL, OR AIR SERVICE.—*
 19 *The term “active military, naval, or air service” has*
 20 *the meaning given that term in section 101 of title*
 21 *38, United States Code.*

22 *(2) PROGRAM.—The term “Program” means the*
 23 *program of comprehensive assistance for family care-*
 24 *givers under section 1720G(a) of title 38, United*
 25 *States Code, as amended by section 161 of this title.*

1 **SEC. 163. MODIFICATIONS TO ANNUAL EVALUATION RE-**
 2 **PORT ON CAREGIVER PROGRAM OF DEPART-**
 3 **MENT OF VETERANS AFFAIRS.**

4 (a) *BARRIERS TO CARE AND SERVICES.*—Subpara-
 5 graph (A)(iv) of section 101(c)(2) of the Caregivers and Vet-
 6 erans Omnibus Health Services Act of 2010 (Public Law
 7 111–163; 38 U.S.C. 1720G note) is amended by inserting
 8 “, including a description of any barriers to accessing and
 9 receiving care and services under such programs” before the
 10 semicolon.

11 (b) *SUFFICIENCY OF TRAINING FOR FAMILY CARE-*
 12 *GIVER PROGRAM.*—Subparagraph (B) of such section is
 13 amended—

14 (1) in clause (i), by striking “; and” and insert-
 15 ing a semicolon;

16 (2) in clause (ii), by striking the period at the
 17 end and inserting “; and”; and

18 (3) by adding at the end the following new
 19 clause:

20 “(iii) an evaluation of the sufficiency
 21 and consistency of the training provided to
 22 family caregivers under such program in
 23 preparing family caregivers to provide care
 24 to veterans under such program.”.

**TITLE II—VA ASSET AND
INFRASTRUCTURE REVIEW**

***Subtitle A—Asset and
Infrastructure Review***

SEC. 201. SHORT TITLE.

This subtitle may be cited as the “VA Asset and Infrastructure Review Act of 2018”.

SEC. 202. THE COMMISSION.

(a) ESTABLISHMENT.—There is established an independent commission to be known as the “Asset and Infrastructure Review Commission” (in this subtitle referred to as the “Commission”).

(b) DUTIES.—The Commission shall carry out the duties specified for it in this subtitle.

(c) APPOINTMENT.—

(1) IN GENERAL.—

(A) APPOINTMENT.—The Commission shall be composed of nine members appointed by the President, by and with the advice and consent of the Senate.

(B) TRANSMISSION OF NOMINATIONS.—The President shall transmit to the Senate the nominations for appointment to the Commission not later than May 31, 2021.

1 (2) *CONSULTATION IN SELECTION PROCESS.*—*In*
 2 *selecting individuals for nominations for appoint-*
 3 *ments to the Commission, the President shall consult*
 4 *with—*

5 *(A) the Speaker of the House of Representa-*
 6 *tives;*

7 *(B) the majority leader of the Senate;*

8 *(C) the minority leader of the House of*
 9 *Representatives;*

10 *(D) the minority leader of the Senate; and*

11 *(E) congressionally chartered, membership*
 12 *based veterans service organizations concerning*
 13 *the appointment of three members.*

14 (3) *DESIGNATION OF CHAIR.*—*At the time the*
 15 *President nominates individuals for appointment to*
 16 *the Commission under paragraph (1)(B), the Presi-*
 17 *dent shall designate one such individual who shall*
 18 *serve as Chair of the Commission and one such indi-*
 19 *vidual who shall serve as Vice Chair of the Commis-*
 20 *sion.*

21 (4) *MEMBER REPRESENTATION.*—*In nominating*
 22 *individuals under this subsection, the President shall*
 23 *ensure that—*

24 *(A) veterans, reflecting current demo-*
 25 *graphics of veterans enrolled in the system of an-*

1 *nual patient enrollment under section 1705 of*
 2 *title 38, United States Code, are adequately rep-*
 3 *resented in the membership of the Commission;*

4 *(B) at least one member of the Commission*
 5 *has experience working for a private integrated*
 6 *health care system that has annual gross reve-*
 7 *nues of more than \$50,000,000;*

8 *(C) at least one member has experience as*
 9 *a senior manager for an entity specified in*
 10 *clause (ii), (iii), or (iv) of section 101(a)(1)(B)*
 11 *of the Veterans Access, Choice, and Account-*
 12 *ability Act of 2014 (Public Law 113–146; 38*
 13 *U.S.C. 1701 note);*

14 *(D) at least one member—*

15 *(i) has experience with capital asset*
 16 *management for the Federal Government;*
 17 *and*

18 *(ii) is familiar with trades related to*
 19 *building and real property, including con-*
 20 *struction, engineering, architecture, leasing,*
 21 *and strategic partnerships; and*

22 *(E) at least three members represent con-*
 23 *gressionally chartered, membership-based, vet-*
 24 *erans service organizations.*

25 *(d) MEETINGS.—*

1 (1) *IN GENERAL.*—*The Commission shall meet*
 2 *only during calendar years 2022 and 2023.*

3 (2) *PUBLIC NATURE OF MEETINGS AND PRO-*
 4 *CEEDINGS.*—

5 (A) *PUBLIC MEETINGS.*—*Each meeting of*
 6 *the Commission shall be open to the public.*

7 (B) *OPEN PARTICIPATION.*—*All the pro-*
 8 *ceedings, information, and deliberations of the*
 9 *Commission shall be available for review by the*
 10 *public.*

11 (e) *VACANCIES.*—*A vacancy in the Commission shall*
 12 *be filled in the same manner as the original appointment,*
 13 *but the individual appointed to fill the vacancy shall serve*
 14 *only for the unexpired portion of the term for which the*
 15 *individual's predecessor was appointed.*

16 (f) *PAY.*—

17 (1) *IN GENERAL.*—*Members of the Commission*
 18 *shall serve without pay.*

19 (2) *OFFICERS OR EMPLOYEES OF THE UNITED*
 20 *STATES.*—*Each member of the Commission who is an*
 21 *officer or employee of the United States shall serve*
 22 *without compensation in addition to that received for*
 23 *service as an officer or employee of the United States.*

24 (3) *TRAVEL EXPENSES.*—*Members shall receive*
 25 *travel expenses, including per diem in lieu of subsist-*

1 *ence, in accordance with sections 5702 and 5703 of*
 2 *title 5, United States Code.*

3 *(g) DIRECTOR OF STAFF.—*

4 *(1) APPOINTMENT.—The Commission shall ap-*
 5 *point a Director who—*

6 *(A) has not served as an employee of the*
 7 *Department of Veterans Affairs during the 1-*
 8 *year period preceding the date of such appoint-*
 9 *ment; and*

10 *(B) is not otherwise barred or prohibited*
 11 *from serving as Director under Federal ethics*
 12 *laws and regulations, by reason of post-employ-*
 13 *ment conflict of interest.*

14 *(2) RATE OF PAY.—The Director shall be paid at*
 15 *the rate of basic pay payable for level IV of the Exec-*
 16 *utive Schedule under section 5315 of title 5, United*
 17 *States Code.*

18 *(h) STAFF.—*

19 *(1) PAY OF PERSONNEL.—Subject to paragraphs*
 20 *(2) and (3), the Director, with the approval of the*
 21 *Commission, may appoint and fix the pay of addi-*
 22 *tional personnel.*

23 *(2) EXEMPTION FROM CERTAIN REQUIRE-*
 24 *MENTS.—The Director may make such appointments*
 25 *without regard to the provisions of title 5, United*

1 *States Code, governing appointments in the competi-*
 2 *tive service, and any personnel so appointed may be*
 3 *paid without regard to the provisions of chapter 51*
 4 *and subchapter III of chapter 53 of that title relating*
 5 *to classification and General Schedule pay rates, ex-*
 6 *cept that an individual so appointed may not receive*
 7 *pay in excess of the annual rate of basic pay payable*
 8 *for GS-15 of the General Schedule.*

9 (3) *DETAILEES.*—

10 (A) *LIMITATION ON NUMBER.*—*Not more*
 11 *than two-thirds of the personnel employed by or*
 12 *detailed to the Commission may be on detail*
 13 *from the Department of Veterans Affairs.*

14 (B) *PROFESSIONAL ANALYSTS.*—*Not more*
 15 *than half of the professional analysts of the Com-*
 16 *mission staff may be persons detailed from the*
 17 *Department of Veterans Affairs to the Commis-*
 18 *sion.*

19 (C) *PROHIBITION ON DETAIL OF CERTAIN*
 20 *PERSONNEL.*—*A person may not be detailed*
 21 *from the Department of Veterans Affairs to the*
 22 *Commission if, within 6 months before the detail*
 23 *is to begin, that person participated personally*
 24 *and substantially in any matter within the De-*
 25 *partment of Veterans Affairs concerning the*

1 *preparation of recommendations regarding fa-*
 2 *cilities of the Veterans Health Administration.*

3 (4) *AUTHORITY TO REQUEST DETAILED PER-*
 4 *SONNEL.—Subject to paragraph (3), the head of any*
 5 *Federal department or agency, upon the request of the*
 6 *Director, may detail any of the personnel of that de-*
 7 *partment or agency to the Commission to assist the*
 8 *Commission in carrying out its duties under this sub-*
 9 *title.*

10 (5) *INFORMATION FROM FEDERAL AGENCIES.—*
 11 *The Commission may secure directly from any Fed-*
 12 *eral agency such information the Commission con-*
 13 *siders necessary to carry out this subtitle. Upon re-*
 14 *quest of the Chair, the head of such agency shall fur-*
 15 *nish such information to the Commission.*

16 (i) *OTHER AUTHORITY.—*

17 (1) *TEMPORARY AND INTERMITTENT SERV-*
 18 *ICES.—The Commission may procure by contract, to*
 19 *the extent funds are available, the temporary or inter-*
 20 *mittent services of experts or consultants pursuant to*
 21 *section 3109 of title 5, United States Code.*

22 (2) *LEASING AND ACQUISITION OF PROPERTY.—*
 23 *To the extent funds are available, the Commission*
 24 *may lease real property and acquire personal prop-*

erty either of its own accord or in consultation with the General Services Administration.

(j) *TERMINATION.*—The Commission shall terminate on December 31, 2023.

(k) *PROHIBITION AGAINST RESTRICTING COMMUNICATIONS.*—

(1) *IN GENERAL.*—Except as provided in paragraph (2), no person may restrict an employee of the Department of Veterans Affairs in communicating with the Commission.

(2) *UNLAWFUL COMMUNICATIONS.*—Paragraph (1) does not apply to a communication that is unlawful.

SEC. 203. PROCEDURE FOR MAKING RECOMMENDATIONS.

(a) *SELECTION CRITERIA.*—

(1) *PUBLICATION.*—The Secretary shall, not later than February 1, 2021, and after consulting with veterans service organizations, publish in the Federal Register and transmit to the Committees on Veterans' Affairs of the Senate and the House of Representatives the criteria proposed to be used by the Department of Veterans Affairs in assessing and making recommendations regarding the modernization or realignment of facilities of the Veterans Health Administration under this subtitle. Such criteria shall in-

1 *clude the preferences of veterans regarding health care*
 2 *furnished by the Department.*

3 (2) *PUBLIC COMMENT.*—*The Secretary shall pro-*
 4 *vide an opportunity for public comment on the pro-*
 5 *posed criteria under paragraph (1) for a period of at*
 6 *least 90 days and shall include notice of that oppor-*
 7 *tunity in the publication required under such para-*
 8 *graph.*

9 (3) *PUBLICATION OF FINAL CRITERIA.*—*The Sec-*
 10 *retary shall, not later than May 31, 2021, publish in*
 11 *the Federal Register and transmit to the Committees*
 12 *on Veterans' Affairs of the Senate and the House of*
 13 *Representatives the final criteria to be used in mak-*
 14 *ing recommendations regarding the closure, mod-*
 15 *ernization, or realignment of facilities of the Veterans*
 16 *Health Administration under this subtitle.*

17 (b) *RECOMMENDATIONS OF THE SECRETARY.*—

18 (1) *PUBLICATION IN FEDERAL REGISTER.*—*The*
 19 *Secretary shall, not later than January 31, 2022, and*
 20 *after consulting with veterans service organizations,*
 21 *publish in the Federal Register and transmit to the*
 22 *Committees on Veterans' Affairs of the Senate and the*
 23 *House of Representatives and to the Commission a re-*
 24 *port detailing the recommendations regarding the*
 25 *modernization or realignment of facilities of the Vet-*

1 *erans Health Administration on the basis of the final*
2 *criteria referred to in subsection (a)(2) that are ap-*
3 *plicable.*

4 (2) *FACTORS FOR CONSIDERATION.—In making*
5 *recommendations under this subsection, the Secretary*
6 *shall consider each of the following factors:*

7 (A) *The degree to which any health care de-*
8 *livery or other site for providing services to vet-*
9 *erans reflect the metrics of the Department of*
10 *Veterans Affairs regarding market area health*
11 *system planning.*

12 (B) *The provision of effective and efficient*
13 *access to high-quality health care and services for*
14 *veterans.*

15 (C) *The extent to which the real property*
16 *that no longer meets the needs of the Federal*
17 *Government could be reconfigured, repurposed,*
18 *consolidated, realigned, exchanged, outleased, re-*
19 *placed, sold, or disposed.*

20 (D) *The need of the Veterans Health Ad-*
21 *ministration to acquire infrastructure or facili-*
22 *ties that will be used for the provision of health*
23 *care and services to veterans.*

24 (E) *The extent to which the operating and*
25 *maintenance costs are reduced through consoli-*

1 *dating, colocating, and reconfiguring space, and*
2 *through realizing other operational efficiencies.*

3 *(F) The extent and timing of potential costs*
4 *and savings, including the number of years such*
5 *costs or savings will be incurred, beginning with*
6 *the date of completion of the proposed rec-*
7 *ommendation.*

8 *(G) The extent to which the real property*
9 *aligns with the mission of the Department of*
10 *Veterans Affairs.*

11 *(H) The extent to which any action would*
12 *impact other missions of the Department (in-*
13 *cluding education, research, or emergency pre-*
14 *paredness).*

15 *(I) Local stakeholder inputs and any factors*
16 *identified through public field hearings.*

17 *(J) The assessments under paragraph (3).*

18 *(K) The extent to which the Veterans Health*
19 *Administration has appropriately staffed the*
20 *medical facility, including determinations*
21 *whether there has been insufficient resource allo-*
22 *cation or deliberate understaffing.*

23 *(L) Any other such factors the Secretary de-*
24 *termines appropriate.*

1 (3) *CAPACITY AND COMMERCIAL MARKET AS-*
2 *SESSMENTS.*—

3 (A) *ASSESSMENTS.*—*The Secretary shall as-*
4 *sess the capacity of each Veterans Integrated*
5 *Service Network and medical facility of the De-*
6 *partment to furnish hospital care or medical*
7 *services to veterans under chapter 17 of title 38,*
8 *United States Code. Each such assessment*
9 *shall—*

10 (i) *identify gaps in furnishing such*
11 *care or services at such Veterans Integrated*
12 *Service Network or medical facility;*

13 (ii) *identify how such gaps can be*
14 *filled by—*

15 (I) *entering into contracts or*
16 *agreements with network providers*
17 *under this section or with entities*
18 *under other provisions of law;*

19 (II) *making changes in the way*
20 *such care and services are furnished at*
21 *such Veterans Integrated Service Net-*
22 *work or medical facility, including—*

23 (aa) *extending hours of oper-*
24 *ation;*

25 (bb) *adding personnel; or*

1 (cc) expanding space through
2 the construction, leasing, or shar-
3 ing of health care facilities; and

4 (III) the building or realignment
5 of Department resources or personnel;

6 (iii) forecast, based on future projec-
7 tions and historical trends, both the short-
8 and long-term demand in furnishing care
9 or services at such Veterans Integrated Serv-
10 ice Network or medical facility and assess
11 how such demand affects the needs to use
12 such network providers;

13 (iv) include a commercial health care
14 market assessment of designated catchment
15 areas in the United States conducted by a
16 non-governmental entity; and

17 (v) consider the unique ability of the
18 Federal Government to retain a presence in
19 an area otherwise devoid of commercial
20 health care providers or from which such
21 providers are at risk of leaving.

22 (B) CONSULTATION.—In carrying out the
23 assessments under subparagraph (A), the Sec-
24 retary shall consult with veterans service organi-
25 zations and veterans served by each such Vet-

1 *erans Integrated Service Network and medical*
 2 *facility.*

3 (C) *SUBMITTAL.*—*The Secretary shall sub-*
 4 *mit such assessments to the Committees on Vet-*
 5 *erans' Affairs of the House of Representatives*
 6 *and the Senate with the recommendations of the*
 7 *Secretary under this subsection and make the as-*
 8 *sessments publicly available.*

9 (4) *SUMMARY OF SELECTION PROCESS.*—*The*
 10 *Secretary shall include, with the list of recommenda-*
 11 *tions published and transmitted pursuant to para-*
 12 *graph (1), a summary of the selection process that re-*
 13 *sulted in the recommendation for each facility of the*
 14 *Veterans Health Administration, including a jus-*
 15 *tification for each recommendation. The Secretary*
 16 *shall transmit the matters referred to in the preceding*
 17 *sentence not later than 7 days after the date of the*
 18 *transmittal to the Committees on Veterans' Affairs of*
 19 *the Senate and the House of Representatives and the*
 20 *Commission of the report referred to in paragraph*
 21 *(1).*

22 (5) *TREATMENT OF FACILITIES.*—*In assessing*
 23 *facilities of the Veterans Health Administration, the*
 24 *Secretary shall consider all such facilities equally*
 25 *without regard to whether the facility has been pre-*

1 *viously considered or proposed for reuse, closure, mod-*
2 *ernization, or realignment by the Department of Vet-*
3 *erans Affairs.*

4 (6) *AVAILABILITY OF INFORMATION TO CON-*
5 *GRESS.—In addition to making all information used*
6 *by the Secretary to prepare the recommendations*
7 *under this subsection available to Congress (including*
8 *any committee or Member of Congress), the Secretary*
9 *shall also make such information available to the*
10 *Commission and the Comptroller General of the*
11 *United States.*

12 (7) *CERTIFICATION OF ACCURACY.—*

13 (A) *IN GENERAL.—Each person referred to*
14 *in subparagraph (B), when submitting informa-*
15 *tion to the Secretary or the Commission con-*
16 *cerning the modernization or realignment of a*
17 *facility of the Veterans Health Administration,*
18 *shall certify that such information is accurate*
19 *and complete to the best of that person's knowl-*
20 *edge and belief.*

21 (B) *COVERED PERSONS.—Subparagraph*
22 *(A) applies to the following persons:*

23 (i) *Each Under Secretary of the De-*
24 *partment of Veterans Affairs.*

1 (ii) *Each director of a Veterans Inte-*
2 *grated Service Network.*

3 (iii) *Each director of a medical center*
4 *of the Department of Veterans Affairs.*

5 (iv) *Each director of a program office*
6 *of the Department of Veterans Affairs.*

7 (v) *Each person who is in a position*
8 *the duties of which include personal and*
9 *substantial involvement in the preparation*
10 *and submission of information and rec-*
11 *ommendations concerning the moderniza-*
12 *tion or realignment of facilities of the Vet-*
13 *erans Health Administration.*

14 (c) *REVIEW AND RECOMMENDATIONS BY THE COMMIS-*
15 *SION.—*

16 (1) *PUBLIC HEARINGS.—*

17 (A) *IN GENERAL.—After receiving the rec-*
18 *ommendations from the Secretary pursuant to*
19 *subsection (b), the Commission shall conduct*
20 *public hearings on the recommendations.*

21 (B) *LOCATIONS.—The Commission shall*
22 *conduct public hearings in regions affected by a*
23 *recommendation of the Secretary to close a facil-*
24 *ity of the Veterans Health Administration. To*
25 *the greatest extent practicable, the Commission*

1 *shall conduct public hearings in regions affected*
 2 *by a recommendation of the Secretary to mod-*
 3 *ernize or realign such a facility.*

4 (C) *REQUIRED WITNESSES.*—*Witnesses at*
 5 *each public hearing shall include at a min-*
 6 *imum—*

7 (i) *a veteran—*

8 (I) *enrolled under section 1705 of*
 9 *title 38, United States Code; and*

10 (II) *identified by a local veterans*
 11 *service organization; and*

12 (ii) *a local elected official.*

13 (2) *TRANSMITTAL TO PRESIDENT.*—

14 (A) *IN GENERAL.*—*The Commission shall,*
 15 *not later than January 31, 2023, transmit to the*
 16 *President a report containing the Commission’s*
 17 *findings and conclusions based on a review and*
 18 *analysis of the recommendations made by the*
 19 *Secretary, together with the Commission’s rec-*
 20 *ommendations, for modernizations and realign-*
 21 *ments of facilities of the Veterans Health Admin-*
 22 *istration.*

23 (B) *AUTHORITY TO MAKE CHANGES TO REC-*
 24 *OMMENDATIONS.*—*Subject to subparagraph (C),*
 25 *in making its recommendations, the Commission*

1 *may change any recommendation made by the*
2 *Secretary if the Commission—*

3 *(i) determines that the Secretary devi-*
4 *ated substantially from the final criteria re-*
5 *ferred to in subsection (a)(2) in making*
6 *such recommendation;*

7 *(ii) determines that the change is con-*
8 *sistent with the final criteria referred to in*
9 *subsection (a)(2);*

10 *(iii) publishes a notice of the proposed*
11 *change in the Federal Register not less than*
12 *45 days before transmitting its rec-*
13 *ommendations to the President pursuant to*
14 *subparagraph (A); and*

15 *(iv) conducts public hearings on the*
16 *proposed change.*

17 (3) *JUSTIFICATION FOR CHANGES.—The Com-*
18 *mission shall explain and justify in its report sub-*
19 *mitted to the President pursuant to paragraph (2)*
20 *any recommendation made by the Commission that is*
21 *different from the recommendations made by the Sec-*
22 *retary pursuant to subsection (b). The Commission*
23 *shall transmit a copy of such report to the Commit-*
24 *tees on Veterans' Affairs of the Senate and the House*
25 *of Representatives on the same date on which it*

1 *transmits its recommendations to the President under*
2 *paragraph (2).*

3 (4) *PROVISION OF INFORMATION TO CON-*
4 *GRESS.—After the Commission transmits its report to*
5 *the President, the Commission shall promptly pro-*
6 *vide, upon request, to any Member of Congress, infor-*
7 *mation used by the Commission in making its rec-*
8 *ommendations.*

9 (d) *REVIEW BY THE PRESIDENT.—*

10 (1) *REPORT.—The President shall, not later*
11 *than February 15, 2023, transmit to the Commission*
12 *and to the Congress a report containing the Presi-*
13 *dent’s approval or disapproval of the Commission’s*
14 *recommendations.*

15 (2) *PRESIDENTIAL APPROVAL.—If the President*
16 *approves all the recommendations of the Commission,*
17 *the President shall transmit a copy of such rec-*
18 *ommendations to the Congress, together with a certifi-*
19 *cation of such approval.*

20 (3) *PRESIDENTIAL DISAPPROVAL.—If the Presi-*
21 *dent disapproves the recommendations of the Commis-*
22 *sion, in whole or in part, the President shall transmit*
23 *to the Commission and the Congress, not later than*
24 *March 1, 2023, the reasons for that disapproval. The*
25 *Commission, after consideration of the President’s*

1 reasons for disapproval, shall then transmit to the
2 President, not later than March 15, 2023, a report
3 containing—

4 (A) the Commission's findings and conclu-
5 sions based on a review and analysis of those
6 reasons for disapproval provided by the Presi-
7 dent; and

8 (B) recommendations that the Commission
9 determines are appropriate for modernizations
10 and realignments of facilities of the Veterans
11 Health Administration.

12 (4) TRANSMITTAL OF RECOMMENDATIONS TO
13 CONGRESS.—If the President approves all rec-
14 ommendations of the Commission transmitted to the
15 President under paragraph (3), the President shall
16 transmit a copy of such recommendations to the Con-
17 gress, together with a certification of such approval.

18 (5) FAILURE TO TRANSMIT.—If the President
19 does not transmit to the Congress an approval and
20 certification described in paragraph (2) or (4) by
21 March 30, 2023, the process by which facilities of the
22 Veterans Health Administration may be selected for
23 modernization or realignment under this subtitle shall
24 be terminated.

1 **SEC. 204. ACTIONS REGARDING INFRASTRUCTURE AND FA-**
2 **CILITIES OF THE VETERANS HEALTH ADMIN-**
3 **ISTRATION.**

4 (a) *IN GENERAL.*—Subject to subsection (b), the Sec-
5 retary shall begin to implement the recommended mod-
6 ernizations and realignments in the report under section
7 203(d) not later than 3 years after the date on which the
8 President transmits such report to Congress. In any fiscal
9 year, such implementation includes—

10 (1) *the planning of modernizations and realign-*
11 *ments of facilities of the Veterans Health Administra-*
12 *tion as recommended in such report; and*

13 (2) *providing detailed information on the budget*
14 *for such modernizations or realignments in documents*
15 *submitted to Congress by the Secretary in support of*
16 *the President’s budget for that fiscal year.*

17 (b) *CONGRESSIONAL DISAPPROVAL.*—

18 (1) *IN GENERAL.*—The Secretary may not carry
19 out any modernization or realignment recommended
20 by the Commission in a report transmitted from the
21 President pursuant to section 203(d) if a joint resolu-
22 tion is enacted, in accordance with the provisions of
23 section 207, disapproving such recommendations of
24 the Commission before the earlier of—

1 (A) the end of the 45-day period beginning
 2 on the date on which the President transmits
 3 such report; or

4 (B) the adjournment of Congress sine die
 5 for the session during which such report is trans-
 6 mitted.

7 (2) COMPUTATION OF PERIOD.—For purposes of
 8 paragraph (1) and subsections (a) and (c) of section
 9 207, the days on which either House of Congress is
 10 not in session because of an adjournment of more
 11 than three days to a day certain shall be excluded in
 12 the computation of a period.

13 **SEC. 205. IMPLEMENTATION.**

14 (a) IN GENERAL.—

15 (1) MODERNIZING AND REALIGNING FACILI-
 16 TIES.—In modernizing or realigning any facility of
 17 the Veterans Health Administration under this sub-
 18 title, the Secretary may—

19 (A) take such actions as may be necessary
 20 to modernize or realign any such facility, in-
 21 cluding the alteration of such facilities, the ac-
 22 quisition of such land, the leasing or construc-
 23 tion of such replacement facilities, the disposi-
 24 tion of such land or facilities, the performance of
 25 such activities, and the conduct of such advance

1 *planning and design as may be required to*
 2 *transfer functions from a facility of the Veterans*
 3 *Health Administration to another such facility,*
 4 *and may use for such purpose funds in the Ac-*
 5 *count or funds appropriated to the Department*
 6 *of Veterans Affairs for such purposes;*

7 *(B) carry out activities for the purposes of*
 8 *environmental mitigation, abatement, or restora-*
 9 *tion at any such facility, and shall use for such*
 10 *purposes funds in the Account;*

11 *(C) reimburse other Federal agencies for ac-*
 12 *tions performed at the request of the Secretary*
 13 *with respect to any such closure or realignment,*
 14 *and may use for such purpose funds in the Ac-*
 15 *count or funds appropriated to the Department*
 16 *of Veterans Affairs and available for such pur-*
 17 *pose; and*

18 *(D) exercise the authority of the Secretary*
 19 *under subchapter V of chapter 81 of title 38,*
 20 *United States Code.*

21 *(2) ENVIRONMENTAL RESTORATION; HISTORIC*
 22 *PRESERVATION.—In carrying out any closure or re-*
 23 *alignment under this subtitle, the Secretary, with re-*
 24 *gards to any property made excess to the needs of the*
 25 *Department of Veterans Affairs as a result of such*

1 *closure or realignment, shall carry out, as soon as*
 2 *possible with funds available for such purpose, any of*
 3 *the following for which the Secretary is responsible:*

4 *(A) Environmental mitigation.*

5 *(B) Environmental abatement.*

6 *(C) Environmental restoration.*

7 *(D) Compliance with historic preservation*
 8 *requirements.*

9 *(b) MANAGEMENT AND DISPOSAL OF PROPERTY.—*

10 *(1) EXISTING DISPOSAL AUTHORITIES.—To*
 11 *transfer or dispose of surplus real property or infra-*
 12 *structure located at any facility of the Veterans*
 13 *Health Administration that is modernized or re-*
 14 *aligned under this title, the Secretary may exercise*
 15 *the authorities of the Secretary under subchapters I*
 16 *and II of chapter 81 of title 38, United States Code,*
 17 *or the authorities delegated to the Secretary by the*
 18 *Administrator of General Services under subchapter*
 19 *III of chapter 5 of title 40, United States Code.*

20 *(2) EFFECTS ON LOCAL COMMUNITIES.—*

21 *(A) CONSULTATION WITH STATE AND LOCAL*
 22 *GOVERNMENT.—Before any action may be taken*
 23 *with respect to the disposal of any surplus real*
 24 *property or infrastructure located at any facility*
 25 *of the Veterans Health Administration to be*

1 *closed or realigned under this subtitle, the Sec-*
 2 *retary of Veterans Affairs shall consult with the*
 3 *Governor of the State and the heads of the local*
 4 *governments concerned for the purpose of consid-*
 5 *ering any plan for the use of such property by*
 6 *the local community concerned.*

7 *(B) TREATMENT OF ROADS.—If infrastruc-*
 8 *ture or a facility of the Veterans Health Admin-*
 9 *istration to be closed or realigned under this sub-*
 10 *title includes a road used for public access*
 11 *through, into, or around the facility, the Sec-*
 12 *retary—*

13 *(i) shall consult with the Government*
 14 *of the State and the heads of the local gov-*
 15 *ernments concerned for the purpose of con-*
 16 *sidering the continued availability of the*
 17 *road for public use after the recommended*
 18 *action is complete; and*

19 *(ii) may exercise the authority of the*
 20 *Secretary under section 8108 of title 38,*
 21 *United States Code.*

22 *(3) LEASES; CERCLA.—*

23 *(A) LEASE AUTHORITY.—*

24 *(i) TRANSFER TO REDEVELOPMENT AU-*
 25 *THORITY FOR LEASE.—The Secretary may*

1 *transfer title to a facility of the Veterans*
 2 *Health Administration approved for closure*
 3 *or realignment under this subtitle (includ-*
 4 *ing property at a facility of the Veterans*
 5 *Health Administration approved for re-*
 6 *alignment which will be retained by the De-*
 7 *partment of Veterans Affairs or another*
 8 *Federal agency after realignment) to the re-*
 9 *development authority for the facility if the*
 10 *redevelopment authority agrees to lease, di-*
 11 *rectly upon transfer, one or more portions*
 12 *of the property transferred under this sub-*
 13 *paragraph to the Secretary or to the head*
 14 *of another department or agency of the Fed-*
 15 *eral Government.*

16 (ii) *TERM OF LEASE.—A lease under*
 17 *clause (i) shall be for a term of not to exceed*
 18 *50 years, but may provide for options for*
 19 *renewal or extension of the term by the de-*
 20 *partment or agency concerned.*

21 (iii) *LIMITATION.—A lease under*
 22 *clause (i) may not require rental payments*
 23 *by the United States.*

24 (iv) *TREATMENT OF REMAINDERED*
 25 *LEASE TERMS.—A lease under clause (i)*

1 *shall include a provision specifying that if*
 2 *the department or agency concerned ceases*
 3 *requiring the use of the leased property be-*
 4 *fore the expiration of the term of the lease,*
 5 *the remainder of the lease term may be sat-*
 6 *isfied by the same or another department or*
 7 *agency of the Federal Government using the*
 8 *property for a use similar to the use under*
 9 *the lease. Exercise of the authority provided*
 10 *by this clause shall be made in consultation*
 11 *with the redevelopment authority concerned.*

12 (v) *FACILITY SERVICES.*—*Notwith-*
 13 *standing clause (iii), if a lease under clause*
 14 *(i) involves a substantial portion of the fa-*
 15 *cility, the department or agency concerned*
 16 *may obtain facility services for the leased*
 17 *property and common area maintenance*
 18 *from the redevelopment authority or the re-*
 19 *development authority's assignee as a provi-*
 20 *sion of the lease. The facility services and*
 21 *common area maintenance shall be provided*
 22 *at a rate no higher than the rate charged to*
 23 *non-Federal tenants of the transferred prop-*
 24 *erty. Facility services and common area*

1 *maintenance covered by the lease shall not*
 2 *include—*

3 *(I) municipal services that a*
 4 *State or local government is required*
 5 *by law to provide to all landowners in*
 6 *its jurisdiction without direct charge;*
 7 *or*

8 *(II) firefighting or security-guard*
 9 *functions.*

10 *(B) APPLICATION OF CERCLA.—The provi-*
 11 *sions of section 120(h) of the Comprehensive En-*
 12 *vironmental Response, Compensation, and Li-*
 13 *ability Act of 1980 (42 U.S.C. 9620(h)) shall*
 14 *apply to any transfer of real property under this*
 15 *paragraph.*

16 *(C) ADDITIONAL TERMS AND CONDITIONS.—*
 17 *The Secretary may require any additional terms*
 18 *and conditions in connection with a transfer*
 19 *under this paragraph as such Secretary con-*
 20 *siders appropriate to protect the interests of the*
 21 *United States.*

22 *(4) APPLICATION OF MCKINNEY-VENTO HOME-*
 23 *LESS ASSISTANCE ACT.—Nothing in this subtitle shall*
 24 *limit or otherwise affect the application of the provi-*
 25 *sions of the McKinney-Vento Homeless Assistance Act*

1 (42 U.S.C. 11301 et seq.) to facilities of the Veterans
2 Health Administration closed under this subtitle.

3 (c) *APPLICABILITY OF NATIONAL ENVIRONMENTAL*
4 *POLICY ACT OF 1969.*—

5 (1) *IN GENERAL.*—*The provisions of the National*
6 *Environmental Policy Act of 1969 (42 U.S.C. 4321 et*
7 *seq.) shall not apply to the actions of the President,*
8 *the Commission, and, except as provided in para-*
9 *graph (2), the Department of Veterans Affairs in car-*
10 *rying out this subtitle.*

11 (2) *DEPARTMENT OF VETERANS AFFAIRS.*—

12 (A) *COVERED ACTIVITIES.*—*The provisions*
13 *of the National Environmental Policy Act of*
14 *1969 shall apply to actions of the Department of*
15 *Veterans Affairs under this subtitle—*

16 (i) *during the process of property dis-*
17 *posal; and*

18 (ii) *during the process of relocating*
19 *functions from a facility of the Veterans*
20 *Health Administration being closed or re-*
21 *aligned to another facility after the receiv-*
22 *ing facility has been selected but before the*
23 *functions are relocated.*

24 (B) *OTHER ACTIVITIES.*—*In applying the*
25 *provisions of the National Environmental Policy*

1 *Act of 1969 to the processes referred to in sub-*
 2 *paragraph (A), the Secretary shall not have to*
 3 *consider—*

4 *(i) the need for closing or realigning*
 5 *the facility of the Veterans Health Adminis-*
 6 *tration as recommended by the Commission;*

7 *(ii) the need for transferring functions*
 8 *to any facility of the Veterans Health Ad-*
 9 *ministration which has been selected as the*
 10 *receiving facility; or*

11 *(iii) facilities of the Veterans Health*
 12 *Administration alternative to those rec-*
 13 *ommended or selected.*

14 (d) *WAIVER.—*

15 (1) *RESTRICTIONS ON USE OF FUNDS.—The Sec-*
 16 *retary may close or realign facilities of the Veterans*
 17 *Health Administration under this subtitle without re-*
 18 *gard to any provision of law restricting the use of*
 19 *funds for closing or realigning facilities of the Vet-*
 20 *erans Health Administration included in any appro-*
 21 *priation or authorization Act.*

22 (2) *RESTRICTIONS ON AUTHORITIES.—The Sec-*
 23 *retary may close or realign facilities of the Veterans*
 24 *Health Administration under this subtitle without re-*

1 *gard to the restrictions of section 8110 of title 38,*
2 *United States Code.*

3 *(e) TRANSFER AUTHORITY IN CONNECTION WITH PAY-*
4 *MENT OF ENVIRONMENTAL REMEDIATION COSTS.—*

5 *(1) IN GENERAL.—*

6 *(A) TRANSFER BY DEED.—Subject to para-*
7 *graph (2) of this subsection and section 120(h)*
8 *of the Comprehensive Environmental Response,*
9 *Compensation, and Liability Act of 1980 (42*
10 *U.S.C. 9620(h)), the Secretary may enter into*
11 *an agreement to transfer by deed a facility of the*
12 *Veterans Health Administration with any person*
13 *who agrees to perform all environmental restora-*
14 *tion, waste management, and environmental*
15 *compliance activities that are required for the*
16 *property or facilities under Federal and State*
17 *laws, administrative decisions, agreements (in-*
18 *cluding schedules and milestones), and concur-*
19 *rences.*

20 *(B) ADDITIONAL TERMS OR CONDITIONS.—*

21 *The Secretary may require any additional terms*
22 *and conditions in connection with an agreement*
23 *authorized by subparagraph (A) as the Secretary*
24 *considers appropriate to protect the interests of*
25 *the United States.*

1 (2) *LIMITATION.*—A transfer of a facility of the
2 *Veterans Health Administration* may be made under
3 *paragraph (1)* only if the Secretary certifies to Con-
4 gress that—

5 (A) the costs of all environmental restora-
6 tion, waste management, and environmental
7 compliance activities otherwise to be paid by the
8 Secretary with respect to the facility of the *Vet-*
9 *erans Health Administration* are equal to or
10 greater than the fair market value of the prop-
11 erty or facilities to be transferred, as determined
12 by the Secretary; or

13 (B) if such costs are lower than the fair
14 market value of the facility of the *Veterans*
15 *Health Administration*, the recipient of such
16 transfer agrees to pay the difference between the
17 fair market value and such costs.

18 (3) *PAYMENT BY THE SECRETARY FOR CERTAIN*
19 *TRANSFERS.*—In the case of a facility of the *Veterans*
20 *Health Administration* covered by a certification
21 under *paragraph (2)(A)*, the Secretary may pay the
22 recipient of such facility an amount equal to the less-
23 er of—

24 (A) the amount by which the costs incurred
25 by the recipient of the facility of the *Veterans*

1 *Health Administration for all environmental res-*
2 *toration, waste, management, and environmental*
3 *compliance activities with respect to such facility*
4 *exceed the fair market value of such property as*
5 *specified in such certification; or*

6 *(B) the amount by which the costs (as deter-*
7 *mined by the Secretary) that would otherwise*
8 *have been incurred by the Secretary for such res-*
9 *toration, management, and activities with re-*
10 *spect to such facility of the Veterans Health Ad-*
11 *ministration exceed the fair market value of*
12 *property as so specified.*

13 *(4) DISCLOSURE.—As part of an agreement*
14 *under paragraph (1), the Secretary shall disclose to*
15 *the person to whom the facility of the Veterans Health*
16 *Administration will be transferred any information*
17 *of the Secretary regarding the environmental restora-*
18 *tion, waste management, and environmental compli-*
19 *ance activities described in paragraph (1) that relate*
20 *to the facility of the Veterans Health Administration.*
21 *The Secretary shall provide such information before*
22 *entering into the agreement.*

23 *(5) APPLICABILITY OF CERTAIN ENVIRONMENTAL*
24 *LAWS.—Nothing in this subsection shall be construed*
25 *to modify, alter, or amend the Comprehensive Envi-*

1 *ronmental Response, Compensation, and Liability*
 2 *Act of 1980 (42 U.S.C. 9601 et seq.) or the Solid*
 3 *Waste Disposal Act (42 U.S.C. 6901 et seq.).*

4 **SEC. 206. DEPARTMENT OF VETERANS AFFAIRS ASSET AND**
 5 **INFRASTRUCTURE REVIEW ACCOUNT.**

6 (a) *ESTABLISHMENT.*—*There is hereby established in*
 7 *the ledgers of the Treasury an account to be known as the*
 8 *“Department of Veterans Affairs Asset and Infrastructure*
 9 *Review Account” which shall be administered by the Sec-*
 10 *retary as a single account.*

11 (b) *CREDITS TO ACCOUNT.*—*There shall be credited to*
 12 *the Account the following:*

13 (1) *Funds authorized for and appropriated to*
 14 *the Account.*

15 (2) *Proceeds received from the lease, transfer, or*
 16 *disposal of any property at a facility of the Veterans*
 17 *Health Administration closed or realigned under this*
 18 *subtitle.*

19 (c) *USE OF ACCOUNT.*—*The Secretary may use the*
 20 *funds in the Account only for the following purposes:*

21 (1) *To carry out this subtitle.*

22 (2) *To cover property management and disposal*
 23 *costs incurred at facilities of the Veterans Health Ad-*
 24 *ministration closed, modernized, or realigned under*
 25 *this subtitle.*

1 (3) *To cover costs associated with supervision,*
 2 *inspection, overhead, engineering, and design of con-*
 3 *struction projects undertaken under this subtitle, and*
 4 *subsequent claims, if any, related to such activities.*

5 (4) *Other purposes that the Secretary determines*
 6 *support the mission and operations of the Department*
 7 *of Veterans Affairs.*

8 (d) *CONSOLIDATED BUDGET JUSTIFICATION DISPLAY*
 9 *FOR ACCOUNT.—*

10 (1) *CONSOLIDATED BUDGET INFORMATION RE-*
 11 *QUIRED.—The Secretary shall establish a consolidated*
 12 *budget justification display in support of the Account*
 13 *that for each fiscal year—*

14 (A) *details the amount and nature of credits*
 15 *to, and expenditures from, the Account during*
 16 *the preceding fiscal year;*

17 (B) *separately details the environmental re-*
 18 *mediation costs associated with facility of the*
 19 *Veterans Health Administration for which a*
 20 *budget request is made;*

21 (C) *specifies the transfers into the Account*
 22 *and the purposes for which these transferred*
 23 *funds will be further obligated, to include care-*
 24 *taker and environment remediation costs associ-*

1 *ated with each facility of the Veterans Health*
 2 *Administration; and*

3 *(D) details any intra-budget activity trans-*
 4 *fers within the Account that exceeded \$1,000,000*
 5 *during the preceding fiscal year or that are pro-*
 6 *posed for the next fiscal year and will exceed*
 7 *\$1,000,000.*

8 *(2) SUBMISSION.—The Secretary shall include*
 9 *the information required by paragraph (1) in the ma-*
 10 *terials that the Secretary submits to Congress in sup-*
 11 *port of the budget for a fiscal year submitted by the*
 12 *President pursuant to section 1105 of title 31, United*
 13 *States Code.*

14 *(e) CLOSURE OF ACCOUNT; TREATMENT OF REMAIN-*
 15 *ING FUNDS.—*

16 *(1) CLOSURE.—The Account shall be closed at*
 17 *the time and in the manner provided for appropria-*
 18 *tion accounts under section 1555 of title 31, United*
 19 *States Code, except that unobligated funds which re-*
 20 *main in the Account upon closure shall be held by the*
 21 *Secretary of the Treasury until transferred to the Sec-*
 22 *retary of Veterans Affairs by law after the Committees*
 23 *on Veterans' Affairs of the Senate and the House of*
 24 *Representatives receive the final report transmitted*
 25 *under paragraph (2).*

1 (2) *FINAL REPORT.*—No later than 60 days after
 2 the closure of the Account under paragraph (1), the
 3 Secretary shall transmit to the Committees on Vet-
 4 erans' Affairs of the Senate and the House of Rep-
 5 resentatives and the Committees on Appropriations of
 6 the House of Representatives and the Senate a report
 7 containing an accounting of—

8 (A) all the funds credited to and expended
 9 from the Account or otherwise expended under
 10 this subtitle; and

11 (B) any funds remaining in the Account.

12 **SEC. 207. CONGRESSIONAL CONSIDERATION OF COMMIS-**
 13 **SION REPORT.**

14 (a) *DISAPPROVAL RESOLUTION.*—For purposes of this
 15 subtitle, the term “joint resolution” means only a joint reso-
 16 lution which is introduced within the 5-day period begin-
 17 ning on the date on which the President transmits the re-
 18 port to the Congress under section 203(d), and—

19 (1) which does not have a preamble;

20 (2) the matter after the resolving clause of which
 21 is as follows: “that Congress disapproves the rec-
 22 ommendations of the VHA Asset and Infrastructure
 23 Review Commission as submitted by the President on
 24 _____”, the blank space being filled with the appro-
 25 priate date; and

1 (3) *the title of which is as follows: “Joint resolu-*
 2 *tion disapproving the recommendations of the VHA*
 3 *Asset and Infrastructure Review Commission.”.*

4 **(b) CONSIDERATION IN THE HOUSE OF REPRESENTA-**
 5 **TIVES.—**

6 **(1) REPORTING AND DISCHARGE.—***Any com-*
 7 *mittee of the House of Representatives to which a*
 8 *joint resolution is referred shall report it to the House*
 9 *without amendment not later than 15 legislative days*
 10 *after the date of introduction thereof. If a committee*
 11 *fails to report the joint resolution within that period,*
 12 *the committee shall be discharged from further consid-*
 13 *eration of the joint resolution.*

14 **(2) PROCEEDING TO CONSIDERATION.—***It shall*
 15 *be in order at any time after the third legislative day*
 16 *after each committee authorized to consider a joint*
 17 *resolution has reported or has been discharged from*
 18 *consideration of a joint resolution, to move to proceed*
 19 *to consider the joint resolution in the House. All*
 20 *points of order against the motion are waived. Such*
 21 *a motion shall not be in order after the House has*
 22 *disposed of a motion to proceed on a joint resolution*
 23 *addressing a particular submission. The previous*
 24 *question shall be considered as ordered on the motion*
 25 *to its adoption without intervening motion. The mo-*

1 *tion shall not be debatable. A motion to reconsider the*
 2 *vote by which the motion is disposed of shall not be*
 3 *in order.*

4 (3) *CONSIDERATION.*—*The joint resolution shall*
 5 *be considered as read. All points of order against the*
 6 *joint resolution and against its consideration are*
 7 *waived. The previous question shall be considered as*
 8 *ordered on the joint resolution to its passage without*
 9 *intervening motion except 2 hours of debate equally*
 10 *divided and controlled by the proponent and an oppo-*
 11 *nent. A motion to reconsider the vote on passage of*
 12 *the joint resolution shall not be in order.*

13 (c) *CONSIDERATION IN THE SENATE.*—

14 (1) *REFERRAL.*—*A joint resolution introduced in*
 15 *the Senate shall be referred to the Committee on Vet-*
 16 *erans' Affairs.*

17 (2) *REPORTING AND DISCHARGE.*—*Any com-*
 18 *mittee of the Senate to which a joint resolution is re-*
 19 *ferred shall report it to the Senate without amend-*
 20 *ment not later than 15 session days after the date of*
 21 *introduction of a joint resolution described in sub-*
 22 *section (a). If a committee fails to report the joint res-*
 23 *olution within that period, the committee shall be dis-*
 24 *charged from further consideration of the joint resolu-*

tion and the joint resolution shall be placed on the calendar.

(3) *FLOOR CONSIDERATION.*—

(A) *IN GENERAL.*—Notwithstanding Rule XXII of the Standing Rules of the Senate, it is in order at any time after the third session day on which the Committee on Veterans' Affairs has reported or has been discharged from consideration of a joint resolution described in subsection (a) (even though a previous motion to the same effect has been disagreed to) to move to proceed to the consideration of the joint resolution, and all points of order against the joint resolution (and against consideration of the joint resolution) are waived. The motion to proceed is not debatable. The motion is not subject to a motion to postpone. A motion to reconsider the vote by which the motion is agreed to or disagreed to shall not be in order. If a motion to proceed to the consideration of the resolution is agreed to, the joint resolution shall remain the unfinished business until disposed of.

(B) *CONSIDERATION.*—Consideration of the joint resolution, and on all debatable motions and appeals in connection therewith, shall be

1 *limited to not more than 2 hours, which shall be*
 2 *divided equally between the majority and minor-*
 3 *ity leaders or their designees. A motion further*
 4 *to limit debate is in order and not debatable. An*
 5 *amendment to, or a motion to postpone, or a mo-*
 6 *tion to proceed to the consideration of other busi-*
 7 *ness, or a motion to recommit the joint resolu-*
 8 *tion is not in order.*

9 (C) *VOTE ON PASSAGE.—If the Senate has*
 10 *voted to proceed to a joint resolution, the vote on*
 11 *passage of the joint resolution shall occur imme-*
 12 *diately following the conclusion of consideration*
 13 *of the joint resolution, and a single quorum call*
 14 *at the conclusion of the debate if requested in ac-*
 15 *cordance with the rules of the Senate.*

16 (D) *RULINGS OF THE CHAIR ON PROCE-*
 17 *DURE.—Appeals from the decisions of the Chair*
 18 *relating to the application of the rules of the*
 19 *Senate, as the case may be, to the procedure re-*
 20 *lating to a joint resolution shall be decided with-*
 21 *out debate.*

22 (d) *AMENDMENT NOT IN ORDER.—A joint resolution*
 23 *of disapproval considered pursuant to this section shall not*
 24 *be subject to amendment in either the House of Representa-*
 25 *tives or the Senate.*

1 (e) *COORDINATION WITH ACTION BY OTHER*
 2 *HOUSE.—*

3 (1) *IN GENERAL.—If, before the passage by one*
 4 *House of the joint resolution of that House, that*
 5 *House receives the joint resolution from the other*
 6 *House, then the following procedures shall apply:*

7 (A) *The joint resolution of the other House*
 8 *shall not be referred to a committee.*

9 (B) *With respect to the joint resolution of*
 10 *the House receiving the joint resolution—*

11 (i) *the procedure in that House shall be*
 12 *the same as if no joint resolution had been*
 13 *received from the other House; but*

14 (ii) *the vote on passage shall be on the*
 15 *joint resolution of the other House.*

16 (2) *TREATMENT OF JOINT RESOLUTION OF*
 17 *OTHER HOUSE.—If the Senate fails to introduce or*
 18 *consider a joint resolution under this section, the joint*
 19 *resolution of the House shall be entitled to expedited*
 20 *floor procedures under this section.*

21 (3) *TREATMENT OF COMPANION MEASURES.—If,*
 22 *following passage of the joint resolution in the Senate,*
 23 *the Senate then receives the companion measure from*
 24 *the House of Representatives, the companion measure*
 25 *shall not be debatable.*

1 (f) *RULES OF THE HOUSE OF REPRESENTATIVES AND*
 2 *SENATE.—This section is enacted by Congress—*

3 (1) *as an exercise of the rulemaking power of the*
 4 *Senate and House of Representatives, respectively,*
 5 *and as such it is deemed a part of the rules of each*
 6 *House, respectively, but applicable only with respect*
 7 *to the procedure to be followed in that House in the*
 8 *case of a joint resolution, and it supersedes other rules*
 9 *only to the extent that it is inconsistent with such*
 10 *rules; and*

11 (2) *with full recognition of the constitutional*
 12 *right of either House to change the rules (so far as re-*
 13 *lating to the procedure of that House) at any time,*
 14 *in the same manner, and to the same extent as in the*
 15 *case of any other rule of that House.*

16 **SEC. 208. OTHER MATTERS.**

17 (a) *ONLINE PUBLICATION OF COMMUNICATIONS.—*

18 (1) *IN GENERAL.—Not later than 24 hours after*
 19 *the transmission or receipt of any communication*
 20 *under this subtitle that is transmitted or received by*
 21 *a party specified in paragraph (2), the Secretary of*
 22 *Veterans Affairs shall publish such communication*
 23 *online.*

24 (2) *PARTIES SPECIFIED.—The parties specified*
 25 *under this paragraph are the following:*

1 (A) *The Secretary of Veterans Affairs.*

2 (B) *The Commission.*

3 (C) *The President.*

4 (b) *CONTINUATION OF EXISTING CONSTRUCTION*
 5 *PROJECTS AND PLANNING.*—*During activities that the*
 6 *Commission, President, or Congress carry out under this*
 7 *subtitle, the Secretary of Veterans Affairs may not stop,*
 8 *solely because of such activities—*

9 (1) *a construction or leasing project of the Vet-*
 10 *erans Health Administration;*

11 (2) *long term planning regarding infrastructure*
 12 *and assets of the Veterans Health Administration; or*

13 (3) *budgetary processes for the Veterans Health*
 14 *Administration.*

15 (c) *RECOMMENDATIONS FOR FUTURE ASSET RE-*
 16 *VIEWS.*—*The Secretary of Veterans Affairs may, after con-*
 17 *sulting with veterans service organizations, include in*
 18 *budget submissions the Secretary submits after the termi-*
 19 *nation of the Commission recommendations for future such*
 20 *commissions or other capital asset realignment and man-*
 21 *agement processes.*

22 **SEC. 209. DEFINITIONS.**

23 *In this subtitle:*

1 (1) *The term “Account” means the Department*
2 *of Veterans Affairs Asset and Infrastructure Review*
3 *Account established by section 206(a).*

4 (2) *The term “Commission” means the Commis-*
5 *sion established by section 202.*

6 (3) *The term “date of approval”, with respect to*
7 *a modernization or realignment of a facility of the*
8 *Veterans Health Administration, means the date on*
9 *which the authority of Congress to disapprove a rec-*
10 *ommendation of modernization or realignment, as the*
11 *case may be, of such facility under this subtitle ex-*
12 *pires.*

13 (4) *The term “facility of the Veterans Health Ad-*
14 *ministration”—*

15 (A) *means any land, building, structure, or*
16 *infrastructure (including any medical center,*
17 *nursing home, domiciliary facility, outpatient*
18 *clinic, center that provides readjustment coun-*
19 *seling, or leased facility) that is—*

20 (i) *under the jurisdiction of the De-*
21 *partment of Veterans Affairs;*

22 (ii) *under the control of the Veterans*
23 *Health Administration; and*

24 (iii) *not under the control of the Gen-*
25 *eral Services Administration; or*

1 (B) with respect to a colocated facility of
2 the Department of Veterans Affairs, includes any
3 land, building, or structure—

4 (i) under the jurisdiction of the De-
5 partment of Veterans Affairs;

6 (ii) under the control of another ad-
7 ministration of the Department of Veterans
8 Affairs; and

9 (iii) not under the control of the Gen-
10 eral Services Administration.

11 (5) The term “infrastructure” means improve-
12 ments to land other than buildings or structures.

13 (6) The term “modernization” includes—

14 (A) any action, including closure, required
15 to align the form and function of a facility of the
16 Veterans Health Administration to the provision
17 of modern day health care, including utilities
18 and environmental control systems;

19 (B) the construction, purchase, lease, or
20 sharing of a facility of the Veterans Health Ad-
21 ministration; and

22 (C) realignments, disposals, exchanges, col-
23 laborations between the Department of Veterans
24 Affairs and other Federal entities, and strategic

1 *collaborations between the Department and non-*
2 *Federal entities, including tribal organizations.*

3 *(7) The term “realignment”, with respect to a fa-*
4 *cility of the Veterans Health Administration, in-*
5 *cludes—*

6 *(A) any action that changes the numbers of*
7 *or relocates services, functions, and personnel po-*
8 *sitions;*

9 *(B) disposals or exchanges between the De-*
10 *partment of Veterans Affairs and other Federal*
11 *entities, including the Department of Defense;*
12 *and*

13 *(C) strategic collaborations between the De-*
14 *partment of Veterans Affairs and non-Federal*
15 *entities, including tribal organizations.*

16 *(8) The term “redevelopment authority”, in the*
17 *case of a facility of the Veterans Health Administra-*
18 *tion closed or modernized under this subtitle, means*
19 *any entity (including an entity established by a State*
20 *or local government) recognized by the Secretary of*
21 *Veterans Affairs as the entity responsible for devel-*
22 *oping the redevelopment plan with respect to the fa-*
23 *cility or for directing the implementation of such*
24 *plan.*

1 (9) *The term “redevelopment plan” in the case*
 2 *of a facility of the Veterans Health Administration to*
 3 *be closed or realigned under this subtitle, means a*
 4 *plan that—*

5 *(A) is agreed to by the local redevelopment*
 6 *authority with respect to the facility; and*

7 *(B) provides for the reuse or redevelopment*
 8 *of the real property and personal property of the*
 9 *facility that is available for such reuse and rede-*
 10 *velopment as a result of the closure or realign-*
 11 *ment of the facility.*

12 (10) *The term “Secretary” means the Secretary*
 13 *of Veterans Affairs.*

14 (11) *The term “tribal organization” has the*
 15 *meaning given such term in section 3765 of title 38,*
 16 *United States Code.*

17 ***Subtitle B—Other Infrastructure***
 18 ***Matters***

19 ***SEC. 211. IMPROVEMENT TO TRAINING OF CONSTRUCTION***
 20 ***PERSONNEL.***

21 *Subsection (g) of section 8103 of title 38, United States*
 22 *Code, is amended to read as follows:*

23 *“(g)(1)(A) Not later than September 30 of the fiscal*
 24 *year following the fiscal year during which the VA Asset*
 25 *and Infrastructure Review Act of 2018 is enacted, the Sec-*

1 *retary shall implement the covered training curriculum and*
 2 *the covered certification program.*

3 “(B) *In designing and implementing the covered*
 4 *training curriculum and the covered certification program*
 5 *under paragraph (1), the Secretary shall use as models ex-*
 6 *isting training curricula and certification programs that*
 7 *have been established under chapter 87 of title 10, United*
 8 *States Code, as determined relevant by the Secretary.*

9 “(2) *The Secretary may develop the training cur-*
 10 *riculum under paragraph (1)(A) in a manner that provides*
 11 *such training in any combination of—*

12 “(A) *training provided in person;*

13 “(B) *training provided over an internet website;*

14 *or*

15 “(C) *training provided by another department or*
 16 *agency of the Federal Government.*

17 “(3) *The Secretary may develop the certification pro-*
 18 *gram under paragraph (1)(A) in a manner that uses—*

19 “(A) *one level of certification; or*

20 “(B) *more than one level of certification, as de-*
 21 *termined appropriate by the Secretary with respect to*
 22 *the level of certification for different grades of the*
 23 *General Schedule.*

24 “(4) *The Secretary may enter into a contract with an*
 25 *appropriate entity to provide the covered training cur-*

1 *riculum and the covered certification program under para-*
2 *graph (1)(A).*

3 “(5)(A) *Not later than September 30 of the second fis-*
4 *cal year following the fiscal year during which the VA Asset*
5 *and Infrastructure Review Act of 2018 is enacted, the Sec-*
6 *retary shall ensure that the majority of employees subject*
7 *to the covered certification program achieve the certification*
8 *or the appropriate level of certification pursuant to para-*
9 *graph (3), as the case may be.*

10 “(B) *After carrying out subparagraph (A), the Sec-*
11 *retary shall ensure that each employee subject to the covered*
12 *certification program achieves the certification or the ap-*
13 *propriate level of certification pursuant to paragraph (3),*
14 *as the case may be, as quickly as practicable.*

15 “(6) *In this subsection:*

16 “(A) *The term ‘covered certification program’*
17 *means, with respect to employees of the Department*
18 *of Veterans Affairs who are members of occupational*
19 *series relating to construction or facilities manage-*
20 *ment, or employees of the Department who award or*
21 *administer contracts for major construction, minor*
22 *construction, or nonrecurring maintenance, including*
23 *as contract specialists or contracting officers’ rep-*
24 *resentatives, a program to certify knowledge and skills*
25 *relating to construction or facilities management and*

1 to ensure that such employees maintain adequate ex-
 2 pertise relating to industry standards and best prac-
 3 tices for the acquisition of design and construction
 4 services.

5 “(B) The term ‘covered training curriculum’
 6 means, with respect to employees specified in sub-
 7 paragraph (A), a training curriculum relating to
 8 construction or facilities management.”.

9 **SEC. 212. REVIEW OF ENHANCED USE LEASES.**

10 Section 8162(b)(6) is amended to read as follows:

11 “(6) The Office of Management and Budget shall re-
 12 view each enhanced-use lease before the lease goes into effect
 13 to determine whether the lease is in compliance with para-
 14 graph (5).”.

15 **SEC. 213. ASSESSMENT OF HEALTH CARE FURNISHED BY**
 16 **THE DEPARTMENT TO VETERANS WHO LIVE**
 17 **IN THE PACIFIC TERRITORIES.**

18 (a) *IN GENERAL.*—Not later than 180 days after the
 19 date of the enactment of this Act, the Secretary of Veterans
 20 Affairs shall submit to the Committees on Veterans’ Affairs
 21 of the Senate and the House of Representatives a report re-
 22 garding health care furnished by the Department of Vet-
 23 erans Affairs to veterans who live in the Pacific territories.

24 (b) *ELEMENTS.*—The report under subsection (a) shall
 25 include assessments of the following:

1 (1) *The ability of the Department to furnish to*
 2 *veterans who live in the Pacific territories the fol-*
 3 *lowing:*

4 (A) *Hospital care.*

5 (B) *Medical services.*

6 (C) *Mental health services.*

7 (D) *Geriatric services.*

8 (2) *The feasibility of establishing a community-*
 9 *based outpatient clinic of the Department in any Pa-*
 10 *cific territory that does not contain such a facility.*

11 (c) *DEFINITION.—In this section, the term “Pacific*
 12 *territories” means American Samoa, Guam, and the North-*
 13 *ern Mariana Islands.*

14 ***TITLE III—IMPROVEMENTS TO***
 15 ***RECRUITMENT OF HEALTH***
 16 ***CARE PROFESSIONALS***

17 ***SEC. 301. DESIGNATED SCHOLARSHIPS FOR PHYSICIANS***
 18 ***AND DENTISTS UNDER DEPARTMENT OF VET-***
 19 ***ERANS AFFAIRS HEALTH PROFESSIONAL***
 20 ***SCHOLARSHIP PROGRAM.***

21 (a) *SCHOLARSHIPS FOR PHYSICIANS AND DEN-*
 22 *TISTS.—Section 7612(b) of title 38, United States Code, is*
 23 *amended by adding at the end the following new paragraph:*

24 “(6)(A) *Of the scholarships awarded under this sub-*
 25 *chapter, the Secretary shall ensure that not less than 50*

1 *scholarships are awarded each year to individuals who are*
2 *accepted for enrollment or enrolled (as described in section*
3 *7602 of this title) in a program of education or training*
4 *leading to employment as a physician or dentist until such*
5 *date as the Secretary determines that the staffing shortage*
6 *of physicians and dentists in the Department is less than*
7 *500.*

8 “(B) *After such date, the Secretary shall ensure that*
9 *of the scholarships awarded under this subchapter, a num-*
10 *ber of scholarships is awarded each year to individuals re-*
11 *ferred to in subparagraph (A) in an amount equal to not*
12 *less than ten percent of the staffing shortage of physicians*
13 *and dentists in the Department, as determined by the Sec-*
14 *retary.*

15 “(C) *Notwithstanding subsection (c)(1), the agreement*
16 *between the Secretary and a participant in the Scholarship*
17 *Program who receives a scholarship pursuant to this para-*
18 *graph shall provide the following:*

19 “(i) *The Secretary’s agreement to provide the*
20 *participant with a scholarship under this subchapter*
21 *for a specified number (from two to four) of school*
22 *years during which the participant is pursuing a*
23 *course of education or training leading to employ-*
24 *ment as a physician or dentist.*

1 “(ii) *The participant’s agreement to serve as a*
 2 *full-time employee in the Veterans Health Adminis-*
 3 *tration for a period of time (hereinafter in this sub-*
 4 *chapter referred to as the ‘period of obligated service’)*
 5 *of 18 months for each school year or part thereof for*
 6 *which the participant was provided a scholarship*
 7 *under the Scholarship Program.*

8 “(D) *In providing scholarships pursuant to this para-*
 9 *graph, the Secretary may provide a preference for appli-*
 10 *cants who are veterans.*

11 “(E) *On an annual basis, the Secretary shall provide*
 12 *to appropriate educational institutions informational ma-*
 13 *terial about the availability of scholarships under this para-*
 14 *graph.”.*

15 (b) *BREACH OF AGREEMENT.—Section 7617 of such*
 16 *title is amended—*

17 (1) *by redesignating paragraphs (4) and (5) as*
 18 *paragraphs (5) and (6), respectively; and*

19 (2) *by inserting after paragraph (3) the fol-*
 20 *lowing new paragraph (4):*

21 “(4) *In the case of a participant who is enrolled*
 22 *in a program or education or training leading to em-*
 23 *ployment as a physician, the participant fails to suc-*
 24 *cessfully complete post-graduate training leading to*
 25 *eligibility for board certification in a specialty.”.*

1 (c) *EXTENSION OF PROGRAM.*—Section 7619 of such
 2 title is amended by striking “December 31, 2019” and in-
 3 serting “December 31, 2033”.

4 **SEC. 302. INCREASE IN MAXIMUM AMOUNT OF DEBT THAT**
 5 **MAY BE REDUCED UNDER EDUCATION DEBT**
 6 **REDUCTION PROGRAM OF DEPARTMENT OF**
 7 **VETERANS AFFAIRS.**

8 (a) *INCREASE IN AMOUNT.*—Section 7683(d)(1) is
 9 amended—

10 (1) by striking “\$120,000” and inserting
 11 “\$200,000”; and

12 (2) by striking “\$24,000” and inserting
 13 “\$40,000”.

14 (b) *STUDY.*—

15 (1) *IN GENERAL.*—Not later than 1 year after
 16 the date of the enactment of this Act, the Secretary of
 17 Veterans Affairs shall—

18 (A) conduct a study on the demand for edu-
 19 cation debt reduction under subchapter VII of
 20 chapter 76 of title 38, United States Code; and

21 (B) submit to the Committee on Veterans’
 22 Affairs of the Senate and the Committee on Vet-
 23 erans’ Affairs of the House of Representatives a
 24 report on the findings of the Secretary with re-

1 *spect to the study carried out under subpara-*
 2 *graph (A).*

3 (2) *CONSIDERATIONS.—In carrying out the*
 4 *study required by paragraph (1)(A), the Secretary*
 5 *shall consider the following:*

6 (A) *The total number of vacancies within*
 7 *the Veterans Health Administration whose appli-*
 8 *cants are eligible to participate in the Education*
 9 *Debt Reduction Program pursuant to section*
 10 *7682(a) of such title.*

11 (B) *The types of medical professionals in*
 12 *greatest demand in the United States.*

13 (C) *Projections by the Secretary of the num-*
 14 *bers and types of medical professions that meet*
 15 *the needs of veterans.*

16 **SEC. 303. ESTABLISHING THE DEPARTMENT OF VETERANS**
 17 **AFFAIRS SPECIALTY EDUCATION LOAN RE-**
 18 **PAYMENT PROGRAM.**

19 (a) *IN GENERAL.—Chapter 76 of title 38, United*
 20 *States Code, is amended by inserting after subchapter VII*
 21 *the following new subchapter:*

1 “SUBCHAPTER VIII—SPECIALTY EDUCATION
2 LOAN REPAYMENT PROGRAM

3 **“§ 7691. Establishment**

4 *“As part of the Educational Assistance Program, the*
5 *Secretary may carry out a student loan repayment pro-*
6 *gram under section 5379 of title 5. The program shall be*
7 *known as the Department of Veterans Affairs Specialty*
8 *Education Loan Repayment Program (in this chapter re-*
9 *ferred to as the ‘Specialty Education Loan Repayment Pro-*
10 *gram’).*

11 **“§ 7692. Purpose**

12 *“The purpose of the Specialty Education Loan Repay-*
13 *ment Program is to assist, through the establishment of an*
14 *incentive program for certain individuals employed in the*
15 *Veterans Health Administration, in meeting the staffing*
16 *needs of the Veterans Health Administration for physicians*
17 *in medical specialties for which the Secretary determines*
18 *recruitment or retention of qualified personnel is difficult.*

19 **“§ 7693. Eligibility; preferences; covered costs**

20 *“(a) ELIGIBILITY.—An individual is eligible to par-*
21 *ticipate in the Specialty Education Loan Repayment Pro-*
22 *gram if the individual—*

23 *“(1) is hired under section 7401 of this title to*
24 *work in an occupation described in section 7692 of*
25 *this title;*

1 “(2) owes any amount of principal or interest
 2 under a loan, the proceeds of which were used by or
 3 on behalf of that individual to pay costs relating to
 4 a course of education or training which led to a de-
 5 gree that qualified the individual for the position re-
 6 ferred to in paragraph (1); and

7 “(3) is—

8 “(A) recently graduated from an accredited
 9 medical or osteopathic school and matched to an
 10 accredited residency program in a medical spe-
 11 cialty described in section 7692 of this title; or

12 “(B) a physician in training in a medical
 13 specialty described in section 7692 of this title
 14 with more than 2 years remaining in such train-
 15 ing.

16 “(b) *PREFERENCES.*—In selecting individuals for par-
 17 ticipation in the Specialty Education Loan Repayment
 18 Program under this subchapter, the Secretary may give
 19 preference to the following:

20 “(1) Individuals who are, or will be, partici-
 21 pating in residency programs in health care facili-
 22 ties—

23 “(A) located in rural areas;

24 “(B) operated by Indian tribes, tribal orga-
 25 nizations, or the Indian Health Service; or

1 “(C) *affiliated with underserved health care*
 2 *facilities of the Department.*

3 “(2) *Veterans.*

4 “(c) *COVERED COSTS.—For purposes of subsection*
 5 *(a)(2), costs relating to a course of education or training*
 6 *include—*

7 “(1) *tuition expenses;*

8 “(2) *all other reasonable educational expenses,*
 9 *including expenses for fees, books, equipment, and lab-*
 10 *oratory expenses; and*

11 “(3) *reasonable living expenses.*

12 **“§ 7694. Specialty education loan repayment**

13 “(a) *IN GENERAL.—Payments under the Specialty*
 14 *Education Loan Repayment Program shall consist of pay-*
 15 *ments for the principal and interest on loans described in*
 16 *section 7682(a)(2) of this title for individuals selected to*
 17 *participate in the Program to the holders of such loans.*

18 “(b) *FREQUENCY OF PAYMENT.—The Secretary shall*
 19 *make payments for any given participant in the Specialty*
 20 *Education Loan Repayment Program on a schedule deter-*
 21 *mined appropriate by the Secretary.*

22 “(c) *MAXIMUM AMOUNT; WAIVER.—(1) The amount of*
 23 *payments made for a participant under the Specialty Edu-*
 24 *cation Loan Repayment Program may not exceed \$160,000*
 25 *over a total of 4 years of participation in the Program,*

1 *of which not more than \$40,000 of such payments may be*
 2 *made in each year of participation in the Program.*

3 “(2)(A) *The Secretary may waive the limitations*
 4 *under paragraph (1) in the case of a participant described*
 5 *in subparagraph (B). In the case of such a waiver, the total*
 6 *amount of payments payable to or for that participant is*
 7 *the total amount of the principal and the interest on the*
 8 *participant’s loans referred to in subsection (a).*

9 “(B) *A participant described in this subparagraph is*
 10 *a participant in the Program who the Secretary determines*
 11 *serves in a position for which there is a shortage of qualified*
 12 *employees by reason of either the location or the require-*
 13 *ments of the position.*

14 **“§ 7695. Choice of location**

15 “*Each participant in the Specialty Education Loan*
 16 *Repayment Program who completes residency may select,*
 17 *from a list of medical facilities of the Veterans Health Ad-*
 18 *ministration provided by the Secretary, at which such facil-*
 19 *ity the participant will work in a medical specialty de-*
 20 *scribed in section 7692 of this title.*

21 **“§ 7696. Term of obligated service**

22 “(a) *IN GENERAL.—In addition to any requirements*
 23 *under section 5379(c) of title 5, a participant in the Spe-*
 24 *cialty Education Loan Repayment Program must agree, in*

1 *writing and before the Secretary may make any payment*
 2 *to or for the participant, to—*

3 “(1) *obtain a license to practice medicine in a*
 4 *State;*

5 “(2) *successfully complete post-graduate training*
 6 *leading to eligibility for board certification in a spe-*
 7 *cialty;*

8 “(3) *serve as a full-time clinical practice em-*
 9 *ployee of the Veterans Health Administration for 12*
 10 *months for every \$40,000 in such benefits that the em-*
 11 *ployee receives, but in no case for fewer than 24*
 12 *months; and*

13 “(4) *except as provided in subsection (b), to*
 14 *begin such service as a full-time practice employee by*
 15 *not later than 60 days after completing a residency.*

16 “(b) *FELLOWSHIP.—In the case of a participant who*
 17 *receives an accredited fellowship in a medical specialty*
 18 *other than a medical specialty described in section 7692*
 19 *of this title, the Secretary, on written request of the partici-*
 20 *pant, may delay the term of obligated service under sub-*
 21 *section (a) for the participant until after the participant*
 22 *completes the fellowship, but in no case later than 60 days*
 23 *after completion of such fellowship.*

24 “(c) *PENALTY.—(1) An employee who does not com-*
 25 *plete a period of obligated service under this section shall*

1 *owe the Federal Government an amount determined in ac-*
 2 *cordance with the following formula: $A = B \times ((T - S)$*
 3 *$\div T$)).*

4 “(2) *In the formula in paragraph (1):*

5 “(A) ‘A’ *is the amount the employee owes the*
 6 *Federal Government.*

7 “(B) ‘B’ *is the sum of all payments to or for the*
 8 *participant under the Specialty Education Loan Re-*
 9 *payment Program.*

10 “(C) ‘T’ *is the number of months in the period*
 11 *of obligated service of the employee.*

12 “(D) ‘S’ *is the number of whole months of such*
 13 *period of obligated service served by the employee.*

14 **“§ 7697. Relationship to Educational Assistance Pro-**
 15 **gram**

16 “*Assistance under the Specialty Education Loan Re-*
 17 *payment Program may be in addition to other assistance*
 18 *available to individuals under the Educational Assistance*
 19 *Program.”.*

20 (b) *CONFORMING AND TECHNICAL AMENDMENTS.—*

21 (1) *CONFORMING AMENDMENTS.—*

22 (A) *Section 7601(a) of title 38, United*
 23 *States Code, is amended—*

24 (i) *in paragraph (4), by striking*
 25 *“and”;*

1 (ii) in paragraph (5), by striking the
2 period and inserting “; and”; and

3 (iii) by adding at the end the following
4 new paragraph:

5 “(6) the specialty education loan repayment pro-
6 gram provided for in subchapter VIII of this chap-
7 ter.”.

8 (B) Section 7603(a)(1) of title 38, United
9 States Code, is amended by striking “or VI” and
10 inserting “VI, or VIII”.

11 (C) Section 7604 of title 38, United States
12 Code, is amended by striking “or VI” each place
13 it appears and inserting “VI, or VIII”.

14 (D) Section 7631 of title 38, United States
15 Code, is amended—

16 (i) in subsection (a)(1)—

17 (I) by striking “and” after “schol-
18 arship amount,”; and

19 (II) by inserting “, and the max-
20 imum specialty education loan repay-
21 ment amount” after “reduction pay-
22 ments amount”; and

23 (ii) in subsection (b) by adding at the
24 end the following new paragraph:

1 “(7) *The term ‘specialty education loan repayment*
 2 *amount’ means the maximum amount of specialty edu-*
 3 *cation loan repayment payments payable to or for a partic-*
 4 *ipant in the Department of Veterans Affairs Specialty Edu-*
 5 *cation Loan Repayment Program under subchapter VIII of*
 6 *this chapter, as specified in section 7694(c)(1) of this title*
 7 *and as previously adjusted (if at all) in accordance with*
 8 *this section.”.*

9 *(E) Section 7632 of title 38, United States*
 10 *Code, is amended—*

11 *(i) in paragraph (1), by striking “and*
 12 *the Education Debt Reduction Program”*
 13 *and inserting “the Education Debt Reduc-*
 14 *tion Program, and the Specialty Education*
 15 *Loan Repayment Program”; and*

16 *(ii) in paragraph (4), by striking “and*
 17 *per participant in the Education Debt Re-*
 18 *duction Program” and inserting “per par-*
 19 *ticipant in the Education Debt Reduction*
 20 *Program, and per participant in the Spe-*
 21 *cialty Education Loan Repayment Pro-*
 22 *gram”.*

23 *(2) TABLE OF SECTIONS.—The table of sections*
 24 *at the beginning of chapter 76 of such title is amend-*

1 *ed by inserting after the items relating to subchapter*
 2 *VII the following:*

“SUBCHAPTER VIII—SPECIALTY EDUCATION LOAN REPAYMENT PROGRAM

“7691. *Establishment.*

“7692. *Purpose.*

“7693. *Eligibility; preferences; covered costs.*

“7694. *Specialty education loan repayment.*

“7695. *Choice of location.*

“7696. *Term of obligated service.*

“7697. *Relationship to Educational Assistance Program.*”.

3 *(c) NEEDS OF THE VHA.—In making determinations*
 4 *each year under section 7692 of title 38, United States*
 5 *Code, as enacted by subsection (a), the Secretary of Veterans*
 6 *Affairs shall consider the anticipated needs of the Veterans*
 7 *Health Administration during the period 2 to 6 years in*
 8 *the future.*

9 *(d) PREFERENCE.—In granting preference under sec-*
 10 *tion 7693 of title 38, United States Code, as enacted by*
 11 *subsection (a), the Secretary of Veterans Affairs shall deter-*
 12 *mine whether a facility of the Department is underserved*
 13 *based on the criteria developed under section 401 of this*
 14 *Act.*

15 *(e) OFFER DEADLINE.—In the case of an applicant*
 16 *who applies before receiving a residency match and whom*
 17 *the Secretary of Veterans Affairs selects for participation*
 18 *in the Specialty Education Loan Repayment Program es-*
 19 *tablished by subsection (a), the Secretary shall offer partici-*
 20 *pation to the applicant not later than 28 days after—*

1 (1) *the applicant matches with a residency in a*
 2 *medical specialty described in section 7692 of title 38,*
 3 *United States Code, as enacted by subsection (a); and*
 4 (2) *such match is published.*

5 (f) *PUBLICITY.—The Secretary of Veterans Affairs*
 6 *shall take such steps as the Secretary determines are appro-*
 7 *priate to publicize the Specialty Education Loan Repay-*
 8 *ment Program established under subchapter VIII of chapter*
 9 *76 of title 38, United States Code, as enacted by subsection*
 10 *(a).*

11 **SEC. 304. VETERANS HEALING VETERANS MEDICAL ACCESS**
 12 **AND SCHOLARSHIP PROGRAM.**

13 (a) *ESTABLISHMENT.—The Secretary of Veterans Af-*
 14 *fairs, acting through the Office of Academic Affiliations of*
 15 *the Department of Veterans Affairs, shall carry out a pilot*
 16 *program under which the Secretary shall provide funding*
 17 *for the medical education of a total of 18 eligible veterans.*
 18 *Such funding shall be provided for two veterans enrolled*
 19 *in each covered medical schools in accordance with this sec-*
 20 *tion.*

21 (b) *ELIGIBLE VETERANS.—To be eligible to receive*
 22 *funding for medical education under this section, a veteran*
 23 *shall—*

1 (1) *have been discharged from the Armed Forces*
 2 *not more than 10 years before the date of application*
 3 *for admission to a covered medical school;*

4 (2) *not be entitled to educational assistance*
 5 *under chapter 30, 31, 32, 33, 34, or 35 of title 38,*
 6 *United States Code, or chapter 1606 or 1607 of title*
 7 *10, United States Code;*

8 (3) *apply for admission to a covered medical*
 9 *school for the entering class of 2019;*

10 (4) *indicate on such application for admission*
 11 *that the veteran would like to be considered for an*
 12 *award of funding under this section;*

13 (5) *meet the minimum admissions criteria for*
 14 *the covered medical school to which the veteran ap-*
 15 *plies; and*

16 (6) *enter into an agreement described in sub-*
 17 *section (e).*

18 (c) *AWARD OF FUNDING.—*

19 (1) *IN GENERAL.—Each covered medical school*
 20 *that opts to participate in the program under this*
 21 *section shall reserve two seats in the entering class of*
 22 *2019 for eligible veterans who receive funding under*
 23 *such program. Such funding shall be awarded to the*
 24 *two eligible veterans with the highest admissions*
 25 *rankings for such class at such school.*

1 (2) *AMOUNT OF FUNDING.*—*Each eligible veteran*
 2 *who receives funding under this section shall receive*
 3 *an amount equal to the actual cost of—*

4 (A) *tuition at the covered medical school at*
 5 *which the veteran enrolls for 4 years;*

6 (B) *books, fees, and technical equipment;*

7 (C) *fees associated with the National Resi-*
 8 *dency Match Program;*

9 (D) *two away rotations performed during*
 10 *the fourth year at a Department of Veterans Af-*
 11 *fairs medical facility; and*

12 (E) *a monthly stipend for the 4-year period*
 13 *during which the veteran is enrolled in medical*
 14 *school in an amount to be determined by the*
 15 *Secretary.*

16 (3) *DISTRIBUTION OF FUNDING.*—*In the event*
 17 *that two or more eligible veterans do not apply for*
 18 *admission at one of the covered medical schools for the*
 19 *entering class of 2019, the Secretary shall distribute*
 20 *the available funding to eligible veterans who applied*
 21 *for admission at other covered medical schools.*

22 (d) *AGREEMENT.*—

23 (1) *TERMS OF AGREEMENT.*—*Each eligible vet-*
 24 *eran who accepts funding for medical education*

1 *under this section shall enter into an agreement with*
2 *the Secretary that provides that the veteran agrees—*

3 *(A) to maintain enrollment and attendance*
4 *in the medical school;*

5 *(B) while enrolled in such medical school, to*
6 *maintain an acceptable level of academic stand-*
7 *ing (as determined by the medical school under*
8 *regulations prescribed by the Secretary);*

9 *(C) to complete post-graduate training lead-*
10 *ing to eligibility for board certification in a spe-*
11 *ciality applicable to the Department of Veterans*
12 *Affairs, as determined by the Secretary;*

13 *(D) after completion of medical school, to*
14 *obtain a license to practice medicine in a State;*
15 *and*

16 *(E) after completion of medical school and*
17 *post-graduate training, to serve as a full-time*
18 *clinical practice employee in the Veterans Health*
19 *Administration for a period of 4 years.*

20 *(2) BREACH OF AGREEMENT.—If an eligible vet-*
21 *eran who accepts funding under this section breaches*
22 *the terms of the agreement described in paragraph*
23 *(1), the United States shall be entitled to recover*
24 *damages in an amount equal to the total amount of*
25 *such funding received by the veteran.*

1 (e) *RULE OF CONSTRUCTION.*—*Nothing in this section*
 2 *shall be construed to prevent any covered medical school*
 3 *from accepting more than two eligible veterans for the enter-*
 4 *ing class of 2019.*

5 (f) *REPORT TO CONGRESS.*—*Not later than December*
 6 *31, 2020, and annually thereafter for the subsequent 3*
 7 *years, the Secretary shall submit to Congress a report on*
 8 *the pilot program under this section. Such report shall in-*
 9 *clude the evaluation of the Secretary of the success of the*
 10 *pilot program, including the number of veterans who re-*
 11 *ceived funding under the program who matriculated and*
 12 *an evaluation of the academic progress of such veterans.*

13 (g) *COVERED MEDICAL SCHOOLS.*—*In this section, the*
 14 *term “covered medical school” means any of the following:*

15 (1) *The Teague-Cranston medical schools, con-*
 16 *sisting of—*

17 (A) *Texas A&M College of Medicine;*

18 (B) *Quillen College of Medicine at East*
 19 *Tennessee State University;*

20 (C) *Boonshoft School of Medicine at Wright*
 21 *State University;*

22 (D) *Joan C. Edwards School of Medicine at*
 23 *Marshall University; and*

24 (E) *University of South Carolina School of*
 25 *Medicine.*

1 (2) *Charles R Drew University of Medicine and*
2 *Science.*

3 (3) *Howard University College of Medicine.*

4 (4) *Meharry Medical College.*

5 (5) *Morehouse School of Medicine.*

6 **SEC. 305. BONUSES FOR RECRUITMENT, RELOCATION, AND**
7 **RETENTION.**

8 *Section 705(a) of the Veterans Access, Choice, and Ac-*
9 *countability Act of 2014 (Public Law 113–146; 38 U.S.C.*
10 *703 note) is amended—*

11 (1) *in paragraph (1), by striking*
12 *“\$230,000,000” and inserting “\$250,000,000, of*
13 *which not less than \$20,000,000 shall be for recruit-*
14 *ment, relocation, and retention bonuses”; and*

15 (2) *in paragraph (2), by striking*
16 *“\$225,000,000” and inserting “\$290,000,000, of*
17 *which not less than \$20,000,000 shall be for recruit-*
18 *ment, relocation, and retention bonuses”.*

19 **SEC. 306. INCLUSION OF VET CENTER EMPLOYEES IN EDU-**
20 **CATION DEBT REDUCTION PROGRAM OF DE-**
21 **PARTMENT OF VETERANS AFFAIRS.**

22 (a) *IN GENERAL.—The Secretary of Veterans Affairs*
23 *shall ensure that clinical staff working at Vet Centers are*
24 *eligible to participate in the Education Debt Reduction*

1 *Program of the Department of Veterans Affairs under sub-*
 2 *chapter VII of chapter 76 of title 38, United States Code.*

3 (b) *REPORT.*—*Not later than 1 year after the date of*
 4 *the enactment of this Act, the Secretary shall submit to the*
 5 *Committee on Veterans’ Affairs of the Senate and the Com-*
 6 *mittee on Veterans’ Affairs of the House of Representatives*
 7 *a report on the number of participants in the Education*
 8 *Debt Reduction Program of the Department under such sub-*
 9 *chapter who work at Vet Centers.*

10 (c) *VET CENTER DEFINED.*—*In this section, the term*
 11 *“Vet Center” has the meaning given that term in section*
 12 *1712A(h) of title 38, United States Code.*

13 ***TITLE IV—HEALTH CARE IN*** 14 ***UNDERSERVED AREAS***

15 ***SEC. 401. DEVELOPMENT OF CRITERIA FOR DESIGNATION*** 16 ***OF CERTAIN MEDICAL FACILITIES OF THE DE-*** 17 ***PARTMENT OF VETERANS AFFAIRS AS UN-*** 18 ***DERSERVED FACILITIES AND PLAN TO AD-*** 19 ***DRESS PROBLEM OF UNDERSERVED FACILI-*** 20 ***TIES.***

21 (a) *IN GENERAL.*—*Not later than 180 days after the*
 22 *date of the enactment of this Act, the Secretary of Veterans*
 23 *Affairs shall develop criteria to designate medical centers,*
 24 *ambulatory care facilities, and community based outpatient*

1 *clinics of the Department of Veterans Affairs as underserved*
2 *facilities.*

3 (b) *CONSIDERATION.*—*Criteria developed under sub-*
4 *section (a) shall include consideration of the following with*
5 *respect to a facility:*

6 (1) *The ratio of veterans to health care providers*
7 *of the Department of Veterans Affairs for a standard-*
8 *ized geographic area surrounding the facility, includ-*
9 *ing a separate ratio for general practitioners and spe-*
10 *cialists.*

11 (2) *The range of clinical specialties covered by*
12 *such providers in such area.*

13 (3) *Whether the local community is medically*
14 *underserved.*

15 (4) *The type, number, and age of open consults.*

16 (5) *Whether the facility is meeting the wait-time*
17 *goals of the Department.*

18 (6) *Such other criteria as the Secretary considers*
19 *important in determining which facilities are not*
20 *adequately serving area veterans.*

21 (c) *ANALYSIS OF FACILITIES.*—*Not less frequently*
22 *than annually, directors of Veterans Integrated Service Net-*
23 *works of the Department shall perform an analysis to deter-*
24 *mine which facilities within that Veterans Integrated Serv-*

1 ice Network qualify as underserved facilities pursuant to
 2 criteria developed under subsection (a).

3 (d) *ANNUAL PLAN TO ADDRESS UNDERSERVED FA-*
 4 *CILITIES.*—

5 (1) *PLAN REQUIRED.*—Not later than 1 year
 6 after the date of the enactment of this Act and not less
 7 frequently than once each year, the Secretary shall
 8 submit to Congress a plan to address the problem of
 9 underserved facilities of the Department, as des-
 10 ignated pursuant to criteria developed under sub-
 11 section (a).

12 (2) *CONTENTS.*—Each plan submitted under
 13 paragraph (1) shall address the following:

14 (A) *Increasing personnel or temporary per-*
 15 *sonnel assistance, including mobile deployment*
 16 *teams furnished under section 407 of this Act.*

17 (B) *Providing special hiring incentives, in-*
 18 *cluding under the Education Debt Reduction*
 19 *Program under subchapter VII of chapter 76 of*
 20 *title 38, United States Code, and recruitment,*
 21 *relocation, and retention incentives.*

22 (C) *Using direct hiring authority.*

23 (D) *Improving training opportunities for*
 24 *staff.*

1 (E) *Such other actions as the Secretary con-*
2 *siders appropriate.*

3 **SEC. 402. PILOT PROGRAM TO FURNISH MOBILE DEPLOY-**
4 **MENT TEAMS TO UNDERSERVED FACILITIES.**

5 (a) *IN GENERAL.*—*The Secretary of Veterans Affairs*
6 *shall carry out a pilot program to furnish mobile deploy-*
7 *ment teams of medical personnel to underserved facilities.*

8 (b) *ELEMENTS.*—*In furnishing mobile deployment*
9 *teams under subsection (a), the Secretary shall consider the*
10 *following elements:*

11 (1) *The medical positions of greatest need at un-*
12 *derserved facilities.*

13 (2) *The size and composition of teams to be de-*
14 *ployed.*

15 (3) *Such other elements as the Secretary con-*
16 *siders necessary for effective oversight of the program*
17 *established under subsection (a).*

18 (c) *USE OF ANNUAL ANALYSIS.*—*The Secretary shall*
19 *use the results of the annual analysis conducted under sec-*
20 *tion 401(c) of this Act to form mobile deployment teams*
21 *under subsection (a) that are composed of the most needed*
22 *medical personnel for underserved facilities.*

23 (d) *REPORTING.*—

24 (1) *PROGRESS REPORT.*—*Not later than 1 year*
25 *after the date of the enactment of this Act, the Sec-*

1 *retary shall submit a report to Congress on the imple-*
 2 *mentation of the pilot program under this section.*

3 *(2) FINAL REPORT.—Not later than the termi-*
 4 *nation of the pilot program under this section, the*
 5 *Secretary shall submit a final report to Congress that*
 6 *contains the recommendations of the Secretary re-*
 7 *garding the feasibility and advisability of—*

8 *(A) extending or expanding the pilot pro-*
 9 *gram; and*

10 *(B) making the pilot program (or any as-*
 11 *pect thereof) permanent.*

12 *(e) DURATION.—The pilot program under this section*
 13 *shall terminate 3 years after the date of the enactment of*
 14 *this Act.*

15 *(f) UNDERSERVED FACILITY DEFINED.—In this sec-*
 16 *tion, the term “underserved facility” means a medical cen-*
 17 *ter, ambulatory care facility, or community based out-*
 18 *patient clinic of the Department of Veterans Affairs des-*
 19 *ignated by the Secretary of Veterans Affairs as underserved*
 20 *pursuant to criteria developed under section 401 of this Act.*

21 **SEC. 403. PILOT PROGRAM ON GRADUATE MEDICAL EDU-**
 22 **CATION AND RESIDENCY.**

23 *(a) ESTABLISHMENT.—*

24 *(1) IN GENERAL.—Subject to paragraph (5), the*
 25 *Secretary of Veterans Affairs shall establish a pilot*

1 *program to establish medical residency positions au-*
2 *thorized under section 301(b)(2) of the Veterans Ac-*
3 *cess, Choice, and Accountability Act of 2014 (Public*
4 *Law 113–146; 38 U.S.C. 7302 note) at covered facili-*
5 *ties.*

6 (2) *COVERED FACILITIES.—For purposes of this*
7 *section, a covered facility is any of the following:*

8 (A) *A health care facility of the Department*
9 *of Veterans Affairs.*

10 (B) *A health care facility operated by an*
11 *Indian tribe or a tribal organization, as those*
12 *terms are defined in section 4 of the Indian Self-*
13 *Determination and Education Assistance Act (25*
14 *U.S.C. 5304).*

15 (C) *A health care facility operated by the*
16 *Indian Health Service.*

17 (D) *A Federally-qualified health center, as*
18 *defined in section 1905(l)(2)(B) of the Social Se-*
19 *curity Act (42 U.S.C. 1396d(l)(2)(B)).*

20 (E) *A health care facility operated by the*
21 *Department of Defense.*

22 (F) *Such other health care facility as the*
23 *Secretary considers appropriate for purposes of*
24 *this section.*

1 (3) *AGREEMENTS.*—To carry out the pilot pro-
 2 gram under this section, the Secretary may enter into
 3 agreements with entities that operate covered facilities
 4 in which the Secretary places residents under para-
 5 graph (1).

6 (4) *PARAMETERS FOR LOCATION, AFFILIATE*
 7 *SPONSOR, AND DURATION.*—When determining in
 8 which covered facilities to place residents under para-
 9 graph (1), the Secretary shall consider the extent to
 10 which there is a clinical need for providers in an
 11 area, as determined by the following:

12 (A) *The ratio of veterans to health care pro-*
 13 *viders of the Department for a standardized geo-*
 14 *graphic area surrounding a facility, including a*
 15 *separate ratio for general practitioners and spe-*
 16 *cialists.*

17 (B) *The range of clinical specialties of pro-*
 18 *viders in standardized geographic areas sur-*
 19 *rounding a facility.*

20 (C) *Whether the specialty of a provider is*
 21 *included in the most recent staffing shortage de-*
 22 *termination of the Department under section*
 23 *7412 of title 38, United States Code.*

24 (D) *Whether the local community is des-*
 25 *ignated by the Secretary of Veterans Affairs as*

1 *underserved pursuant to criteria developed under*
 2 *section 401 of this Act.*

3 *(E) Whether the facility is located in a com-*
 4 *munity that is designated by the Secretary of*
 5 *Health and Human Services as a health profes-*
 6 *sional shortage area under section 332 of the*
 7 *Public Health Service Act (42 U.S.C. 254e).*

8 *(F) Whether the facility is located in a*
 9 *rural or remote area.*

10 *(G) Such other criteria as the Secretary*
 11 *considers important in determining which facili-*
 12 *ties are not adequately serving area veterans.*

13 *(5) PRIORITY IN PLACEMENTS.—During the pilot*
 14 *program under this section, the Secretary shall place*
 15 *no fewer than 100 residents in covered facilities—*

16 *(A) operated by the Indian Health Service;*

17 *(B) operated by an Indian tribe;*

18 *(C) operated by a tribal organization; or*

19 *(D) located in communities designated by*
 20 *the Secretary as underserved pursuant to criteria*
 21 *developed under section 401 of this Act.*

22 *(6) STIPENDS AND BENEFITS.—The Secretary*
 23 *may pay stipends and provide benefits for residents*
 24 *in positions under paragraph (1), regardless of wheth-*
 25 *er they have been assigned in a Department facility.*

1 (b) *REIMBURSEMENT.*—*If a covered facility establishes*
 2 *a new residency program in which the Secretary places a*
 3 *resident under the pilot program, the Secretary shall reim-*
 4 *burse that covered facility for costs of the following:*

5 (1) *Curriculum development.*

6 (2) *Recruitment and retention of faculty.*

7 (3) *Accreditation of the program by the Accredi-*
 8 *tation Council for Graduate Medical Education.*

9 (4) *The portion of faculty salaries attributable to*
 10 *duties under an agreement subsection (a)(3).*

11 (5) *Expenses relating to educating a resident*
 12 *under the pilot program.*

13 (c) *REPORTING.*—

14 (1) *IN GENERAL.*—*Not later than 1 year after*
 15 *the date of the enactment of this Act and not less fre-*
 16 *quently than once each year thereafter until the ter-*
 17 *mination of the pilot program, the Secretary shall*
 18 *submit to Congress a report on the implementation of*
 19 *the pilot program.*

20 (2) *ELEMENTS.*—*Each report submitted under*
 21 *paragraph (1) shall include the following with regard*
 22 *to the immediately preceding year, and in compari-*
 23 *son to the year immediately preceding that year:*

24 (A) *The number of veterans who received*
 25 *care from residents under the pilot program.*

1 (B) *The number of veterans who received*
2 *care from each resident per position described in*
3 *subsection (a)(1) under the pilot program.*

4 (C) *The number of veterans who received*
5 *care from residents under the pilot program ex-*
6 *pressed as a percentage of all individuals who re-*
7 *ceived care from such residents.*

8 (D) *The number of clinical appointments*
9 *for veterans conducted by each resident under the*
10 *pilot program.*

11 (E) *The number of clinical appointments*
12 *for veterans conducted by residents per position*
13 *described in subsection (a)(1) under the pilot*
14 *program.*

15 (F) *The number of clinical appointments*
16 *for veterans expressed as a percentage of all clin-*
17 *ical appointments conducted by residents under*
18 *the pilot program.*

19 (G) *The number of positions described in*
20 *subsection (a)(1) at each covered facility under*
21 *the pilot program.*

22 (H) *For each position described in sub-*
23 *section (a)(1) in a residency program affiliated*
24 *with a health care facility of the Department, the*
25 *time a resident under the pilot program spent*

1 *training at that facility of the Department, ex-*
2 *pressed as a percentage of the total training time*
3 *for that resident position.*

4 (I) *For each residency program affiliated*
5 *with a health care facility of the Department, the*
6 *time all residents under the pilot program spent*
7 *training at that facility of the Department, ex-*
8 *pressed as a percentage of the total training time*
9 *for those residents.*

10 (J) *The time that all residents under the*
11 *pilot program who are assigned to programs af-*
12 *filiated with health care facilities of the Depart-*
13 *ment spent training at facilities of the Depart-*
14 *ment, expressed as a percentage of the total*
15 *training time for those residents.*

16 (K) *The cost to the Department of Veterans*
17 *Affairs under the pilot program in the year im-*
18 *mediately preceding the report and since the be-*
19 *ginning of the pilot program.*

20 (L) *The cost to the Department of Veterans*
21 *Affairs per resident placed under the pilot pro-*
22 *gram at each covered facility.*

23 (M) *The number of residents under the pilot*
24 *program hired by the Secretary to work in the*
25 *Veterans Health Administration after completion*

1 *of residency in the year immediately preceding*
 2 *the report and since the beginning of the pilot*
 3 *program.*

4 *(N) The medical specialties pursued by resi-*
 5 *dents under the pilot program.*

6 *(d) DURATION.—The pilot program under this section*
 7 *shall terminate on August 7, 2024.*

8 ***TITLE V—OTHER MATTERS***

9 ***SEC. 501. ANNUAL REPORT ON PERFORMANCE AWARDS*** 10 ***AND BONUSES AWARDED TO CERTAIN HIGH-*** 11 ***LEVEL EMPLOYEES OF THE DEPARTMENT.***

12 *(a) IN GENERAL.—Chapter 7 of title 38, United States*
 13 *Code, is amended by adding at the end the following new*
 14 *section:*

15 ***“§ 726. Annual report on performance awards and bo-*** 16 ***nuses awarded to certain high-level em-*** 17 ***ployees***

18 *“(a) IN GENERAL.—Not later than 100 days after the*
 19 *end of each fiscal year, the Secretary shall submit to the*
 20 *appropriate committees of Congress a report that contains,*
 21 *for the most recent fiscal year ending before the submittal*
 22 *of the report, a description of all performance awards or*
 23 *bonuses awarded to each of the following:*

24 *“(1) Regional Office Director of the Department.*

1 “(2) *Director of a Medical Center of the Depart-*
2 *ment.*

3 “(3) *Director of a Veterans Integrated Service*
4 *Network.*

5 “(4) *Senior executive of the Department.*

6 “(b) *ELEMENTS.—Each report submitted under sub-*
7 *section (a) shall include the following with respect to each*
8 *performance award or bonus awarded to an individual de-*
9 *scribed in such subsection:*

10 “(1) *The amount of each award or bonus.*

11 “(2) *The job title of the individual awarded the*
12 *award or bonus.*

13 “(3) *The location where the individual awarded*
14 *the award or bonus works.*

15 “(c) *DEFINITIONS.—In this section:*

16 “(1) *The term ‘appropriate committees of Con-*
17 *gress’ means the Committees on Veterans’ Affairs and*
18 *Appropriations of the Senate and House of Represent-*
19 *atives.*

20 “(2) *The term ‘senior executive’ means—*

21 “(A) *a career appointee; or*

22 “(B) *an individual—*

23 “(i) *in an administrative or executive*
24 *position; and*

1 “(ii) appointed under section 7306(a)
2 or section 7401(1) of this title.

3 “(3) The term ‘career appointee’ has the mean-
4 ing given that term in section 3132(a) of title 5,
5 United States Code.”.

6 (b) CLERICAL AMENDMENT.—The table of sections at
7 the beginning of such chapter is amended by inserting after
8 the item relating to section 725 the following new item:

“726. Annual report on performance awards and bonuses awarded to certain high-
level employees.”.

9 **SEC. 502. ROLE OF PODIATRISTS IN DEPARTMENT OF VET-**
10 **ERANS AFFAIRS.**

11 (a) INCLUSION AS PHYSICIAN.—

12 (1) IN GENERAL.—Subchapter I of chapter 74 is
13 amended by adding at the end the following new sec-
14 tion:

15 **“§ 7413. Treatment of podiatrists; clinical oversight**
16 **standards**

17 “(a) PODIATRISTS.—Except as provided by subsection
18 (b), a doctor of podiatric medicine who is appointed as a
19 podiatrist under section 7401(1) of this title is eligible for
20 any supervisory position in the Veterans Health Adminis-
21 tration to the same degree that a physician appointed under
22 such section is eligible for the position.

23 “(b) ESTABLISHMENT OF CLINICAL OVERSIGHT
24 STANDARDS.—The Secretary, in consultation with appro-

1 *priate stakeholders, shall establish standards to ensure that*
 2 *specialists appointed in the Veterans Health Administra-*
 3 *tion to supervisory positions do not provide direct clinical*
 4 *oversight for purposes of peer review or practice evaluation*
 5 *for providers of other clinical specialties.”.*

6 (2) *CLERICAL AMENDMENT.—The table of sec-*
 7 *tions at the beginning of chapter 74 is amended by*
 8 *inserting after the item relating to section 7412 the*
 9 *following new item:*

“7413. Treatment of podiatrists; clinical oversight standards.”.

10 (b) *MODIFICATION AND CLARIFICATION OF PAY*
 11 *GRADE.—*

12 (1) *GRADE.—The list in section 7404(b) of such*
 13 *title is amended—*

14 (A) *by striking “PHYSICIAN AND DEN-*
 15 *TIST SCHEDULE” and inserting “PHYSI-*
 16 *CIAN AND SURGEON (MD/DO), PODIATRIC*
 17 *SURGEON (DPM), AND DENTIST AND*
 18 *ORAL SURGEON (DDS, DMD) SCHEDULE”;*

19 (B) *by striking “Physician grade” and in-*
 20 *serting “Physician and surgeon grade”; and*

21 (C) *by striking “PODIATRIST, CHIRO-*
 22 *PRACTOR, AND” and inserting “CHIRO-*
 23 *PRACTOR AND”.*

24 (2) *APPLICATION.—The amendments made by*
 25 *paragraph (1) shall apply with respect to a pay pe-*

1 *riod of the Department of Veterans Affairs beginning*
 2 *on or after the date that is 30 days after the date of*
 3 *the enactment of this Act.*

4 **SEC. 503. DEFINITION OF MAJOR MEDICAL FACILITY**
 5 **PROJECT.**

6 (a) *MODIFICATION OF DEFINITION OF MEDICAL FA-*
 7 *CILITY.*—Section 8101(3) is amended by striking “Sec-
 8 *retary” and all that follows through “nursing home,” and*
 9 *inserting “Secretary, or as otherwise authorized by law, for*
 10 *the provision of health-care services (including hospital,*
 11 *outpatient clinic, nursing home,”.*

12 (b) *MODIFICATION OF DEFINITION OF MAJOR MED-*
 13 *ICAL FACILITY PROJECT.*—Paragraph (3) of section
 14 *8104(a) is amended to read as follows:*

15 “(3) *For purposes of this subsection, the term ‘major*
 16 *medical facility project’ means a project for the construc-*
 17 *tion, alteration, or acquisition of a medical facility involv-*
 18 *ing a total expenditure of more than \$20,000,000, but such*
 19 *term does not include an acquisition by exchange, non-*
 20 *recurring maintenance projects of the Department, or the*
 21 *construction, alteration, or acquisition of a shared Federal*
 22 *medical facility for which the Department’s estimated share*
 23 *of the project costs does not exceed \$20,000,000.”.*

1 **SEC. 504. AUTHORIZATION OF CERTAIN MAJOR MEDICAL**
2 **FACILITY PROJECTS OF THE DEPARTMENT**
3 **OF VETERANS AFFAIRS.**

4 (a) *AUTHORIZATION.*—*The Secretary of Veterans Af-*
5 *fairs may carry out the following major medical facility*
6 *project, to be carried out in an amount not to exceed the*
7 *amount specified for that project: Construction of the new*
8 *East Bay Community Based Outpatient Clinic and all as-*
9 *sociated site work, utilities, parking, and landscaping, con-*
10 *struction of the Central Valley Engineering and Logistics*
11 *support facility, and enhanced flood plain mitigation at the*
12 *Central Valley and East Bay Community Based Outpatient*
13 *Clinics as part of the realignment of medical facilities in*
14 *Livermore, California, in an amount not to exceed*
15 *\$117,300,000.*

16 (b) *AUTHORIZATION OF APPROPRIATIONS FOR CON-*
17 *STRUCTION.*—*There is authorized to be appropriated to the*
18 *Secretary of Veterans Affairs for fiscal year 2018 or the*
19 *year in which funds are appropriated for the Construction,*
20 *Major Projects account, \$117,300,000 for the project author-*
21 *ized in subsection (a).*

22 (c) *SUBMITTAL OF INFORMATION.*—*Not later than 90*
23 *days after the date of the enactment of this Act, for the*
24 *project authorized in subsection (a), the Secretary of Vet-*
25 *erans Affairs shall submit to the Committee on Veterans'*
26 *Affairs of the Senate and the Committee on Veterans' Af-*

1 *fairs of the House of Representatives the following informa-*
 2 *tion:*

3 (1) *A line item accounting of expenditures relat-*
 4 *ing to construction management carried out by the*
 5 *Department of Veterans Affairs for such project.*

6 (2) *The future amounts that are budgeted to be*
 7 *obligated for construction management carried out by*
 8 *the Department for such project.*

9 (3) *A justification for the expenditures described*
 10 *in paragraph (1) and the future amounts described in*
 11 *paragraph (2).*

12 (4) *Any agreement entered into by the Secretary*
 13 *regarding a non-Department of Veterans Affairs Fed-*
 14 *eral entity providing management services relating to*
 15 *such project, including reimbursement agreements*
 16 *and the costs to the Department for such services.*

17 **SEC. 505. DEPARTMENT OF VETERANS AFFAIRS PER-**
 18 **SONNEL TRANSPARENCY.**

19 (a) *PUBLICATION OF STAFFING AND VACANCIES.—*

20 (1) *WEBSITE REQUIRED.—Subject to paragraph*
 21 *(2) and not later than 90 days after the date of the*
 22 *enactment of this Act, the Secretary of Veterans Af-*
 23 *fairs shall make publicly available on an Internet*
 24 *website of the Department of Veterans Affairs the fol-*
 25 *lowing information, which shall, subject to subpara-*

1 *graph (D), be displayed by departmental component*
2 *or, in the case of information relating to Veterans*
3 *Health Administration positions, by medical facility:*

4 (A) *The number of personnel encumbering*
5 *positions.*

6 (B) *The number of accessions and separa-*
7 *tion actions processed during the quarter pre-*
8 *ceding the date of the publication of the informa-*
9 *tion.*

10 (C) *The number of vacancies, by occupa-*
11 *tion.*

12 (D) *The percentage of new hires for the De-*
13 *partment who were hired within the time-to-hire*
14 *target of the Office of Personnel Management,*
15 *disaggregated by administration.*

16 (2) *EXCEPTIONS.—The Secretary may withhold*
17 *from publication under paragraph (1) information*
18 *relating to law enforcement, information security, or*
19 *such positions in the Department that the Secretary*
20 *determines to be sensitive.*

21 (3) *UPDATE OF INFORMATION.—The Secretary*
22 *shall update the information on the website required*
23 *under paragraph (1) on a quarterly basis.*

24 (4) *TREATMENT OF CONTRACTOR POSITIONS.—*
25 *Any Department of Veterans Affairs position that is*

1 *filled with a contractor may not be treated as a De-*
 2 *partment position for purposes of the information re-*
 3 *quired to be published under paragraph (1).*

4 (5) *INSPECTOR GENERAL REVIEW.*—*On a semi-*
 5 *annual basis, the Inspector General of the Depart-*
 6 *ment shall review the administration of the website*
 7 *required under paragraph (1) and make recommenda-*
 8 *tions relating to the improvement of such administra-*
 9 *tion.*

10 (b) *REPORT TO CONGRESS.*—*The Secretary of Veterans*
 11 *Affairs shall submit to Congress an annual report on the*
 12 *steps the Department is taking to achieve full staffing ca-*
 13 *capacity. Each such report shall include the amount of addi-*
 14 *tional funds necessary to enable the Department to reach*
 15 *full staffing capacity.*

16 **SEC. 506. PROGRAM ON ESTABLISHMENT OF PEER SPECIAL-**
 17 **ISTS IN PATIENT ALIGNED CARE TEAM SET-**
 18 **TINGS WITHIN MEDICAL CENTERS OF DE-**
 19 **PARTMENT OF VETERANS AFFAIRS.**

20 (a) *PROGRAM REQUIRED.*—*The Secretary of Veterans*
 21 *Affairs shall carry out a program to establish not fewer*
 22 *than two peer specialists in patient aligned care teams at*
 23 *medical centers of the Department of Veterans Affairs to*
 24 *promote the use and integration of services for mental*

1 *health, substance use disorder, and behavioral health in a*
 2 *primary care setting.*

3 *(b) TIMEFRAME FOR ESTABLISHMENT OF PROGRAM.—*

4 *The Secretary shall carry out the program at medical cen-*
 5 *ters of the Department as follows:*

6 *(1) Not later than May 31, 2019, at not fewer*
 7 *than 15 medical centers of the Department.*

8 *(2) Not later than May 31, 2020, at not fewer*
 9 *than 30 medical centers of the Department.*

10 *(c) SELECTION OF LOCATIONS.—*

11 *(1) IN GENERAL.—The Secretary shall select*
 12 *medical centers for the program as follows:*

13 *(A) Not fewer than five shall be medical*
 14 *centers of the Department that are designated by*
 15 *the Secretary as polytrauma centers.*

16 *(B) Not fewer than 10 shall be medical cen-*
 17 *ters of the Department that are not designated*
 18 *by the Secretary as polytrauma centers.*

19 *(2) CONSIDERATIONS.—In selecting medical cen-*
 20 *ters for the program under paragraph (1), the Sec-*
 21 *retary shall consider the feasibility and advisability*
 22 *of selecting medical centers in the following areas:*

23 *(A) Rural areas and other areas that are*
 24 *underserved by the Department.*

1 (B) *Areas that are not in close proximity to*
2 *an active duty military installation.*

3 (C) *Areas representing different geographic*
4 *locations, such as census tracts established by the*
5 *Bureau of the Census.*

6 (d) *GENDER-SPECIFIC SERVICES.—In carrying out*
7 *the program at each location selected under subsection (c),*
8 *the Secretary shall ensure that—*

9 (1) *the needs of female veterans are specifically*
10 *considered and addressed; and*

11 (2) *female peer specialists are made available to*
12 *female veterans who are treated at each location.*

13 (e) *ENGAGEMENT WITH COMMUNITY PROVIDERS.—At*
14 *each location selected under subsection (c), the Secretary*
15 *shall consider ways in which peer specialists can conduct*
16 *outreach to health care providers in the community who*
17 *are known to be serving veterans to engage with those pro-*
18 *viders and veterans served by those providers.*

19 (f) *REPORTS.—*

20 (1) *PERIODIC REPORTS.—*

21 (A) *IN GENERAL.—Not later than 180 days*
22 *after the date of the enactment of this Act, and*
23 *not less frequently than once every 180 days*
24 *thereafter until the Secretary determines that the*
25 *program is being carried out at the last location*

1 to be selected under subsection (c), the Secretary
2 shall submit to Congress a report on the pro-
3 gram.

4 (B) *ELEMENTS.*—Each report required by
5 subparagraph (A) shall, with respect to the 180-
6 day period preceding the submittal of the report,
7 include the following:

8 (i) *The findings and conclusions of the*
9 Secretary with respect to the program.

10 (ii) *An assessment of the benefits of the*
11 program to veterans and family members of
12 veterans.

13 (iii) *An assessment of the effectiveness*
14 of peer specialists in engaging under sub-
15 section (e) with health care providers in the
16 community and veterans served by those
17 providers.

18 (2) *FINAL REPORT.*—Not later than 180 days
19 after the Secretary determines that the program is
20 being carried out at the last location to be selected
21 under subsection (c), the Secretary shall submit to
22 Congress a report detailing the recommendations of
23 the Secretary as to the feasibility and advisability of
24 expanding the program to additional locations.

1 **SEC. 507. DEPARTMENT OF VETERANS AFFAIRS MEDICAL**
2 **SCRIBE PILOT PROGRAM.**

3 (a) *IN GENERAL.*—*The Secretary of Veterans Affairs*
4 *shall carry out a 2-year pilot program under which the Sec-*
5 *retary shall increase the use of medical scribes at Depart-*
6 *ment of Veterans Affairs medical centers.*

7 (b) *LOCATIONS.*—*The Secretary shall carry out the*
8 *pilot program at the 10 medical centers of the Department*
9 *as follows:*

10 (1) *At least four such medical centers located in*
11 *rural areas.*

12 (2) *At least four such medical centers located in*
13 *urban areas.*

14 (3) *Two such medical centers located in areas*
15 *with need for increased access or increased efficiency,*
16 *as determine by the Secretary.*

17 (c) *MEDICAL SCRIBES.*—

18 (1) *HIRING.*—*Under the pilot program the Sec-*
19 *retary shall—*

20 (A) *hire 20 new Department of Veterans Af-*
21 *fairs term employees as medical scribes; and*

22 (B) *seek to enter into contracts with appro-*
23 *priate entities for the employment of 20 addi-*
24 *tional medical scribes.*

25 (2) *DISTRIBUTION.*—*The Secretary shall assign*
26 *four medical scribes to each of the 10 medical centers*

1 of the Department where the Secretary carries out the
2 pilot program as follows:

3 (A) Two scribes shall be assigned to each of
4 two physicians.

5 (B) Thirty percent of the scribes shall be
6 employed in the provision of emergency care.

7 (C) Seventy percent of the scribes shall be
8 employed in the provision of speciality care in
9 specialties with the longest patient wait times or
10 lowest efficiency ratings, as determined by the
11 Secretary.

12 (d) *REPORTS.*—

13 (1) *REPORTS TO CONGRESS.*—Not later than 180
14 days after the commencement of the pilot program re-
15 quired under this section, and every 180 days there-
16 after for the duration of the pilot program, the Sec-
17 retary of Veterans Affairs shall submit to Congress a
18 report on the pilot program. Each such report shall
19 include each of the following:

20 (A) A separate analysis of each the fol-
21 lowing with respect to medical scribes employed
22 by the Department of Veterans Affairs and med-
23 ical scribes performing Department of Veterans
24 Affairs functions under a contract:

25 (i) *Provider efficiency.*

1 (ii) *Patient satisfaction.*

2 (iii) *Average wait time.*

3 (iv) *The number of patients seen per*
4 *day by each physician or practitioner.*

5 (v) *The amount of time required to*
6 *hire and train an employee to perform med-*
7 *ical scribe functions under the pilot pro-*
8 *gram.*

9 (B) *Metrics and data for analyzing the ef-*
10 *fects of the pilot program, including an evalua-*
11 *tion of the each of the elements under clauses (i)*
12 *through (iv) of subparagraph (A) at medical cen-*
13 *ters who employed scribes under the pilot pro-*
14 *gram for an appropriate period preceding the*
15 *hiring of such scribes.*

16 (2) *COMPTROLLER GENERAL REPORT.*—*Not later*
17 *than 90 days after the termination of the pilot pro-*
18 *gram under this section, the Comptroller General of*
19 *the United States shall submit to Congress a report*
20 *on the pilot program. Such report shall include a*
21 *comparison of the pilot program with similar pro-*
22 *grams carried out in the private sector.*

23 (e) *DEFINITIONS.*—*In this section:*

24 (1) *The term “medical scribe” means an unli-*
25 *censed individual hired to enter information into the*

1 *electronic health record or chart at the direction of a*
2 *physician or licensed independent practitioner whose*
3 *responsibilities include the following:*

4 *(A) Assisting the physician or practitioner*
5 *in navigating the electronic health record.*

6 *(B) Responding to various messages as di-*
7 *rected by the physician or practitioner.*

8 *(C) Entering information into the electronic*
9 *health record, as directed by the physician or*
10 *practitioner.*

11 *(2) The terms “urban” and “rural” have the*
12 *meanings given such terms under the rural-urban*
13 *commuting codes developed by the Secretary of Agri-*
14 *culture and the Secretary of Health and Human*
15 *Services.*

16 *(f) FUNDING.—The pilot program under this section*
17 *shall be carried out using amounts otherwise authorized to*
18 *be appropriated for the Department of Veterans Affairs. No*
19 *additional amounts are authorized to be appropriated to*
20 *carry out such program.*

1 **SEC. 508. EXTENSION OF REQUIREMENT TO COLLECT FEES**
 2 **FOR HOUSING LOANS GUARANTEED BY SEC-**
 3 **RETARY OF VETERANS AFFAIRS.**

4 *Section 3729(b)(2) of title 38, United States Code, is*
 5 *amended by striking “2027” each place it appears and in-*
 6 *serting “2028”.*

7 **SEC. 509. EXTENSION OF REDUCTION IN AMOUNT OF PEN-**
 8 **SION FURNISHED BY DEPARTMENT OF VET-**
 9 **ERANS AFFAIRS FOR CERTAIN VETERANS**
 10 **COVERED BY MEDICAID PLANS FOR SERVICES**
 11 **FURNISHED BY NURSING FACILITIES.**

12 *Section 5503(d)(7) of title 38, United States Code, is*
 13 *amended by striking “September 30, 2027” and inserting*
 14 *“September 30, 2028”.*

15 **SEC. 510. APPROPRIATION OF AMOUNTS.**

16 *(a) VETERANS CHOICE PROGRAM.—There is author-*
 17 *ized to be appropriated, and is appropriated, to the Sec-*
 18 *retary of Veterans Affairs, out of any funds in the Treasury*
 19 *not otherwise appropriated, \$5,200,000,000 to be deposited*
 20 *in the Veterans Choice Fund under section 802 of the Vet-*
 21 *erans Access, Choice, and Accountability Act of 2014 (Pub-*
 22 *lic Law 113–146; 38 U.S.C. 1701 note).*

23 *(b) AVAILABILITY OF AMOUNTS.—The amounts appro-*
 24 *priated under subsection (a) shall be available for obliga-*
 25 *tion or expenditure without fiscal year limitation.*

1 **SEC. 511. TECHNICAL CORRECTION.**

2 *Section 1712I of title 38, United States Code, is redes-*
3 *ignated as section 1720I of such title.*

4 **SEC. 512. BUDGETARY EFFECTS.**

5 (a) *STATUTORY PAY-AS-YOU-GO SCORECARDS.—The*
6 *budgetary effects of this Act shall not be entered on either*
7 *PAYGO scorecard maintained pursuant to section 4(d) of*
8 *the Statutory Pay-As-You-Go Act of 2010.*

9 (b) *SENATE PAYGO SCORECARDS.—The budgetary ef-*
10 *fects of this Act shall not be entered on any PAYGO score-*
11 *card maintained for purposes of section 4106 of H. Con.*
12 *Res. 71 (115th Congress).*

Attest:

Clerk.

115TH CONGRESS
2^D SESSION

S. 2372

AMENDMENT