

115TH CONGRESS
2^D SESSION

S. 925

AN ACT

To amend title 38, United States Code, to improve the ability of health care professionals to treat veterans through the use of telemedicine, and for other purposes.

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

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Veterans E-Health and
3 Telemedicine Support Act of 2017” or the “VETS Act
4 of 2017”.

5 **SEC. 2. LICENSURE OF HEALTH CARE PROFESSIONALS OF**
6 **THE DEPARTMENT OF VETERANS AFFAIRS**
7 **PROVIDING TREATMENT VIA TELEMEDICINE.**

8 (a) IN GENERAL.—Chapter 17 of title 38, United
9 States Code, is amended by inserting after section 1730A
10 the following new section:

11 **“§ 1730B. Licensure of health care professionals pro-**
12 **viding treatment via telemedicine**

13 “(a) IN GENERAL.—Notwithstanding any provision
14 of law regarding the licensure of health care professionals,
15 a covered health care professional may practice the health
16 care profession of the health care professional at any loca-
17 tion in any State, regardless of where the covered health
18 care professional or the patient is located, if the covered
19 health care professional is using telemedicine to provide
20 treatment to an individual under this chapter.

21 “(b) COVERED HEALTH CARE PROFESSIONALS.—
22 For purposes of this section, a covered health care profes-
23 sional is any health care professional who—

24 “(1) is an employee of the Department ap-
25 pointed under the authority under section 7306,
26 7401, 7405, 7406, or 7408 of this title or title 5;

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

3 “(3) is required to adhere to all standards of
4 quality relating to the provision of medicine in ac-
5 cordance with applicable policies of the Department;
6 and

7 “(4) has an active, current, full, and unre-
8 stricted license, registration, or certification in a
9 State to practice the health care profession of the
10 health care professional.

11 “(c) PROPERTY OF FEDERAL GOVERNMENT.—Sub-
12 section (a) shall apply to a covered health care professional
13 providing treatment to a patient regardless of whether the
14 covered health care professional or patient is located in
15 a facility owned by the Federal Government during such
16 treatment.

17 “(d) RELATION TO STATE LAW.—(1) The provisions
18 of this section shall supersede any provisions of the law
19 of any State to the extent that such provision of State
20 law are inconsistent with this section.

21 “(2) No State shall deny or revoke the license, reg-
22 istration, or certification of a covered health care profes-
23 sional who otherwise meets the qualifications of the State
24 for holding the license, registration, or certification on the
25 basis that the covered health care professional has en-

1 gaged or intends to engage in activity covered by sub-
2 section (a).

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

7 (b) **CLERICAL AMENDMENT.**—The table of sections
8 at the beginning of chapter 17 of such title is amended
9 by inserting after the item relating to section 1730A the
10 following new item:

“1730B. Licensure of health care professionals providing treatment via telemedi-
cine.”.

11 (c) **REPORT ON TELEMEDICINE.**—

12 (1) **IN GENERAL.**—Not later than one year
13 after the earlier of the date on which services pro-
14 vided under section 1730B of title 38, United States
15 Code, as added by subsection (a), first occur or reg-
16 ulations are promulgated to carry out such section,
17 the Secretary of Veterans Affairs shall submit to the
18 Committee on Veterans’ Affairs of the Senate and
19 the Committee on Veterans’ Affairs of the House of
20 Representatives a report on the effectiveness of the
21 use of telemedicine by the Department of Veterans
22 Affairs.

1 (2) ELEMENTS.—The report required by para-
2 graph (1) shall include an assessment of the fol-
3 lowing:

4 (A) The satisfaction of veterans with tele-
5 medicine furnished by the Department.

6 (B) The satisfaction of health care pro-
7 viders in providing telemedicine furnished by
8 the Department.

9 (C) The effect of telemedicine furnished by
10 the Department on the following:

11 (i) The ability of veterans to access
12 health care, whether from the Department
13 or from non-Department health care pro-
14 viders.

15 (ii) The frequency of use by veterans
16 of telemedicine.

17 (iii) The productivity of health care
18 providers.

19 (iv) Wait times for an appointment
20 for the receipt of health care from the De-
21 partment.

22 (v) The use by veterans of in-person
23 services at Department facilities and non-
24 Department facilities.

1 (D) The types of appointments for the re-
2 receipt of telemedicine furnished by the Depart-
3 ment that were provided during the one-year
4 period preceding the submittal of the report.

5 (E) The number of appointments for the
6 receipt of telemedicine furnished by the Depart-
7 ment that were requested during such period,
8 disaggregated by medical facility.

9 (F) Savings by the Department, if any, in-
10 cluding travel costs, from furnishing health care
11 through the use of telemedicine during such pe-
12 riod.

Passed the Senate January 3, 2018.

Attest:

Secretary.

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