

116TH CONGRESS
1ST SESSION

S. 3041

To amend title 38, United States Code, to ensure that medical professionals employed by the Veterans Health Administration are properly credentialed, and for other purposes.

IN THE SENATE OF THE UNITED STATES

DECEMBER 12, 2019

Ms. HASSAN (for herself, Ms. ERNST, and Ms. SINEMA) introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

A BILL

To amend title 38, United States Code, to ensure that medical professionals employed by the Veterans Health Administration are properly credentialed, and for other purposes.

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

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Veterans Health Ad-
5 ministration Caregiver Retention and Eligibility Deter-
6 mination Act of 2019” or the “VHA CRED Act of 2019”.

1 **SEC. 2. FINDINGS; SENSE OF CONGRESS.**

2 (a) FINDINGS.—Congress makes the following find-
3 ings:

4 (1) A report prepared by the Comptroller Gen-
5 eral of the United States in 2019 entitled “Veterans
6 Health Administration: Greater Focus on Creden-
7 tialing Needed to Prevent Disqualified Providers
8 from Delivering Patient Care” (GAO–19–6) (in this
9 subsection referred to as the “Report”) troublingly
10 found that facilities of the Veterans Health Adminis-
11 tration lack adequate safeguards to ensure that vet-
12 erans are not treated by health care providers whose
13 licenses have been revoked or surrendered for cause.

14 (2) The Report reviewed 57 health care pro-
15 viders at facilities of the Veterans Health Adminis-
16 tration across the United States who had an issue
17 reported on the National Practitioner Data Bank,
18 such as prior instances of poor patient care, dis-
19 regard for public safety, substance misuse, or unpro-
20 fessional conduct.

21 (3) Although the Veterans Health Administra-
22 tion requires all health care providers to be
23 credentialed by personnel of the Administration
24 prior to providing care to veterans, the Report re-
25 vealed disturbing lapses and inconsistencies in ad-

1 herence to that policy due in part to a lack of man-
2 datory training for credentialing personnel.

3 (4) In addition to endangering the care of vet-
4 erans at facilities of the Veterans Health Adminis-
5 tration, the hiring of health care providers who lack
6 proper credentials wastes time and financial re-
7 sources of the Administration.

8 (b) SENSE OF CONGRESS.—It is the sense of Con-
9 gress that—

10 (1) without the implementation of uniform poli-
11 cies for credentialing health care providers and a
12 periodic review of all provider credentials, the Vet-
13 erans Health Administration will continue to hire or
14 retain providers who lack proper credentials to the
15 detriment of patients seeking the services of the Ad-
16 ministration; and

17 (2) the Veterans Health Administration must
18 act swiftly to ensure that—

19 (A) all health care providers are properly
20 credentialed;

21 (B) all credentialing personnel are properly
22 trained to identify adverse actions in the history
23 of a provider that are disqualifying; and

24 (C) all Veterans Integrated Service Net-
25 works, and the facilities that comprise those

1 networks, are able to communicate credentialing
2 information to other networks or facilities to
3 avoid hiring health care providers who lack
4 proper credentials.

5 **SEC. 3. IMPROVEMENT OF PROVIDER CREDENTIALING**
6 **PRACTICES OF THE DEPARTMENT OF VET-**
7 **ERANS AFFAIRS THROUGH TRAINING AND**
8 **TRANSPARENCY.**

9 (a) IN GENERAL.—Section 7402 of title 38, United
10 States Code, is amended by adding at the end the fol-
11 lowing new subsection:

12 “(h)(1) The Under Secretary for Health shall pre-
13 scribe regulations, administrative guidance, and manage-
14 ment controls applicable to the credentialing of persons
15 appointed to a position under this section and, to the max-
16 imum extent feasible, provide advice, assistance, and guid-
17 ance to personnel of the Administration to improve the
18 credentialing process and ensure that all persons ap-
19 pointed to such a position meet the qualifications for that
20 position.

21 “(2)(A) The Under Secretary for Health shall require
22 that all personnel of the Administration who verify creden-
23 tials for persons appointed under this section, review
24 qualifications for such persons, or hire such persons peri-
25 odically undergo training to review relevant law and policy

1 regarding provider qualifications for employment with the
2 Administration.

3 “(B) Training required under subparagraph (A) for
4 personnel described in that subparagraph shall include—

5 “(i) the establishment of uniform credentialing
6 standards and protocols for all facilities of the Ad-
7 ministration;

8 “(ii) training on laws and regulations relating
9 to health care providers in the area in which the per-
10 sonnel are located and how those laws and regula-
11 tions should be considered in the credentialing proc-
12 ess; and

13 “(iii) any other information that the Under Sec-
14 retary for Health considers relevant to include for
15 the benefit of the personnel or those served by the
16 Administration.

17 “(C) All newly hired personnel described in subpara-
18 graph (A) shall complete training under this paragraph
19 before being allowed to verify credentials for persons ap-
20 pointed under this section, review qualifications for such
21 persons, or hire such persons.

22 “(D) The Under Secretary for Health shall review
23 and update training under this paragraph according to
24 changes in law, guidance issued by the Under Secretary,

1 or any other circumstance that affects the content of the
2 training.

3 “(3) The Under Secretary for Health—

4 “(A) shall enroll all persons appointed under
5 this section in continuous query of their record with-
6 in the National Practitioner Data Bank; and

7 “(B) shall develop and implement a mechanism
8 for monitoring the continuous query described in
9 subparagraph (A) and updating credential informa-
10 tion of persons appointed under this section within
11 the VetPro System, or successor system, to facilitate
12 the sharing of credential information between Vet-
13 erans Integrated Service Networks and facilities of
14 the Administration.

15 “(4)(A) Not less frequently than annually, the Under
16 Secretary for Health shall submit to the Committee on
17 Veterans’ Affairs and the Committee on Homeland Secu-
18 rity and Governmental Affairs of the Senate and the Com-
19 mittee on Veterans’ Affairs and the Committee on Over-
20 sight and Reform of the House of Representatives an
21 audit of all persons employed by the Administration pur-
22 suant to an appointment described in this section who
23 have an adverse action reported on the National Practi-
24 tioner Data Bank.

1 “(B) The audit required under subparagraph (A)
2 shall include for each person covered by the audit the fol-
3 lowing:

4 “(i) The Veterans Integrated Service Network
5 and State where the person works or worked.

6 “(ii) The occupation of the person.

7 “(iii) The date the person was hired and the
8 date of removal or resignation of the person, if ap-
9 plicable.

10 “(iv) A brief summary of the report provided by
11 the National Practitioner Data Bank describing the
12 lack of qualifications, disciplinary actions, or adverse
13 findings with respect to the person that impact the
14 ability of the person to perform the duties of the po-
15 sition to which the person was appointed under this
16 section.

17 “(v) The response of the Under Secretary for
18 Health to the report under clause (iv) regarding the
19 eligibility of the person to continue employment at
20 the Administration, including a brief explanation or
21 citation of relevant policy of the Administration used
22 in making such response.

23 “(C) Nothing in this paragraph shall be construed to
24 require the disclosure of information that is otherwise pro-
25 tected from mandatory disclosure by law.”.

1 (b) EFFECTIVE DATE.—The amendment made by
2 this section shall take effect 90 days after the date of the
3 enactment of this Act.

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