

118TH CONGRESS
1ST SESSION

H. R. 5287

To direct the Secretary of Veterans Affairs to establish a pilot program to provide veteran health savings accounts to allow veterans to receive primary care furnished under non-Department direct primary care service arrangements, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

AUGUST 25, 2023

Mr. ROY (for himself, Mr. CRANE, Mr. GOODEN of Texas, Mrs. MILLER of Illinois, Mr. WILLIAMS of Texas, and Mr. BISHOP of North Carolina) introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To direct the Secretary of Veterans Affairs to establish a pilot program to provide veteran health savings accounts to allow veterans to receive primary care furnished under non-Department direct primary care service arrangements, 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 Access to
5 Direct Primary Care Act”.

1 **SEC. 2. PILOT PROGRAM ON ESTABLISHMENT OF VETERAN**
2 **HEALTH SAVINGS ACCOUNTS TO ALLOW VET-**
3 **ERANS TO ACCESS DIRECT PRIMARY CARE**
4 **SERVICE ARRANGEMENTS.**

5 (a) ESTABLISHMENT.—Beginning one year after the
6 date of the enactment of this Act, the Secretary of Vet-
7 erans Affairs shall carry out a five-year pilot program
8 under which the Secretary shall provide eligible veterans
9 with the option to choose to receive primary care services
10 furnished by a non-Department of Veterans Affairs health
11 care provider under a direct primary care service arrange-
12 ment through the use of a veteran health savings account
13 described in subsection (c). The pilot program shall be
14 conducted under the Center for Innovation for Care and
15 Payment under section 1703E of title 38, United States
16 Code.

17 (b) ELIGIBLE VETERAN.—For purposes of the pilot
18 program under this section, an eligible veteran is a veteran
19 who is enrolled in the patient enrollment system of the
20 Department of Veterans Affairs under section 1705 of
21 title 38, United States Code.

22 (c) VETERAN HEALTH SAVINGS ACCOUNTS.—The
23 Secretary shall provide to an eligible veteran who partici-
24 pates in the pilot program a veterans health savings ac-
25 count that may be used—

1 (1) to purchase primary care services furnished
2 through a non-Department direct primary care serv-
3 ice arrangement; and

4 (2) for associated costs, including—

5 (A) periodic fees paid to a physician for a
6 defined set of medical services or for the right
7 to receive medical services on an as-needed
8 basis;

9 (B) amounts paid or prepaid for medical
10 services designed to screen for, diagnose, cure,
11 mitigate, treat, or prevent disease and promote
12 wellness; and

13 (C) prescription or non-prescription medi-
14 cines or drugs.

15 (d) ELIGIBILITY FOR DEPARTMENT MEDICAL
16 CARE.—A veteran who chooses to receive a veteran health
17 savings account described under subsection (c) may not
18 receive medical care furnished by the Department of Vet-
19 erns Affairs that is included in the direct primary care
20 service arrangement described in such subsection during
21 the period the veteran participates in the pilot program.

22 (e) PREVENTION OF FRAUDULENT ACTIVITY.—The
23 Secretary shall establish a mechanism to prevent fraudu-
24 lent activity in connection with payments made under this

1 section and to ensure participating veterans use health
2 savings accounts only as authorized under this section.

3 (f) AMOUNTS DEPOSITED IN ACCOUNTS.—The Sec-
4 retary of Veterans Affairs shall—

5 (1) determine the annual amount to be depos-
6 ited in a veteran health savings account described in
7 subsection (c) using calculations conducted by the
8 Secretary and in consultation with an actuarial serv-
9 ice; and

10 (2) ensure that each participating eligible vet-
11 eran receives such amount on an annual basis dur-
12 ing the period the veteran participates in the pilot
13 program.

14 (g) DIRECT PRIMARY CARE SERVICE ARRANGE-
15 MENT.—In this section, the term “direct primary care
16 service arrangement” means an agreement under which
17 a defined set of medical services are provided to a patient
18 by a physician for fixed periodic fees.

19 (h) REPORTS.—

20 (1) IMPLEMENTATION REPORTS.—For each cal-
21 endar quarter during the two-year period beginning
22 on the date of the enactment of this Act, the Sec-
23 retary shall submit to the Committees on Veterans’
24 Affairs of the Senate and House of Representatives
25 a report on the implementation of this section. One

1 such report shall include a description of the final
2 design of the pilot program.

3 (2) ANNUAL REPORTS.—Not later than one
4 year after the date on which the final implementa-
5 tion report required by paragraph (1) is submitted,
6 and annually thereafter, the Secretary shall submit
7 to the Committees on Veterans' Affairs of the Sen-
8 ate and House of Representatives a report on the re-
9 sults of the pilot program under this section.

10 (i) NO ADDITIONAL APPROPRIATIONS.—Amounts re-
11 quired to carry out this section shall be made available
12 from amounts otherwise authorized to be appropriated for
13 the Veterans Health Administration.

14 (j) TERMINATION.—The authority of the Secretary to
15 deposit funds in a veteran health savings account under
16 this section shall terminate on the date that is five years
17 after the date of the enactment of this Act.

