

106TH CONGRESS
2D SESSION

H. R. 4575

To amend title 38, United States Code, to improve the provision of inpatient medical care services by the Department of Veterans Affairs to veterans in areas remote from Department of Veterans Affairs medical centers.

IN THE HOUSE OF REPRESENTATIVES

MAY 25, 2000

Mr. WELDON of Florida (for himself, Mrs. CAPPS, Mr. MCCOLLUM, Mr. WAMP, and Mr. HILL of Montana) introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To amend title 38, United States Code, to improve the provision of inpatient medical care services by the Department of Veterans Affairs to veterans in areas remote from Department of Veterans Affairs medical centers.

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 Service Im-
5 provement Act of 2000”.

1 **SEC. 2. COORDINATION OF BENEFITS PROGRAM.**

2 (a) IN GENERAL.—Chapter 17 of title 38, United
3 States Code, is amended by inserting after section 1724
4 the following new section:

5 **“§ 1725. Coordination of benefits program**

6 “(a) Notwithstanding any other provision of law, the
7 Secretary may carry out a program in not more than four
8 geographic areas of the United States to improve access
9 to and coordination of inpatient care of eligible veterans.
10 Under such program, the Secretary, subject to subsection
11 (b), may, as a secondary payor, pay certain costs described
12 in subsection (b) that a veteran would otherwise incur.

13 “(b)(1) In carrying out the program described in sub-
14 section (a), the Secretary may, as a secondary payor, pay
15 reasonable costs of hospital care and services furnished in
16 a non-Department hospital to a veteran participating in
17 the program. Subject to paragraph (2), such costs may
18 include costs for deductibles and coinsurance and reason-
19 able costs of services not covered by the applicable health
20 plan of the veteran to the extent such services are covered
21 under this title.

22 “(2) In the case of a veteran who under section 1710
23 of this title is required to pay a copayment to the United
24 States for hospital care furnished the veteran under that
25 section, the Secretary shall reduce any amount that the
26 Secretary would otherwise pay under this subsection for

1 costs of hospital care and services furnished to that vet-
2 eran in a non-Department hospital by the amount of the
3 copayment that the veteran would be required to pay the
4 United States if such care and services were furnished in
5 a Department medical center.

6 “(c) A veteran may participate in the program if the
7 veteran—

8 “(1) is enrolled to receive medical services from
9 an outpatient clinic operated by the Secretary;

10 “(2) in the judgment of the Secretary (A) re-
11 quires such hospital care and services for a non-
12 service-connected condition, and (B) could not re-
13 ceive such services from a clinic operated by the Sec-
14 retary; and

15 “(3) elects to receive such care under a health
16 plan (other than under this title) under which such
17 individual is entitled to receive such care.

18 “(d) As part of the program, the Secretary shall co-
19 ordinate the care being furnished directly by the Secretary
20 and care furnished under the program in non-Department
21 hospitals to veterans participating in the program.

22 “(e)(1) In designating geographic areas in which to
23 establish the program under subsection (a), the Secretary
24 shall ensure that—

1 “(A) the areas designated are geographically
2 dispersed; and

3 “(B) at least 60 percent of the veterans who re-
4 side in a designated area reside at least two hours
5 driving distance from the closest medical center
6 (which provides hospital care) operated by the Sec-
7 retary.

8 “(2) Notwithstanding paragraph (1)(B), the Sec-
9 retary may designate at least one area which is in prox-
10 imity to a Department medical center which, as a result
11 of a change in mission of that center, does not provide
12 hospital care.

13 “(f)(1) Not later than 12 months after implementing
14 the program under subsection (a) at any one site, the Sec-
15 retary shall submit to the Committees on Veterans’ Affairs
16 of the Senate and House of Representatives a report on
17 the experience in implementing such program.

18 “(2) Not later than three years after implementing
19 the program at any one site, the Secretary shall submit
20 to such committees a report on the first two years’ experi-
21 ence in operating the program. The report shall include—

22 “(A) a comparison of the costs incurred by the
23 Secretary under the program and the cost experience
24 for the calendar year preceding establishment of the
25 program at each such site;

1 “(B) an assessment of the satisfaction of the
2 participants in the program; and

3 “(C) an analysis of the effect of the program on
4 access and quality of care for veterans.”.

5 (b) CLERICAL AMENDMENT.—The table of sections
6 at the beginning of such chapter is amended by inserting
7 after the item relating to section 1724 the following new
8 item:

“1725. Coordination of benefits program.”.

