

112TH CONGRESS  
1ST SESSION

# H. R. 3723

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to enter into contracts with health care providers to improve access to health care for veterans who have difficulty receiving treatment at a health care facility of the Department of Veterans Affairs, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

DECEMBER 16, 2011

Mr. SCHILLING (for himself, Mr. HULTGREN, Mr. MCKINLEY, Mr. SCHOCK, and Mr. WALSH of Illinois) introduced the following bill; which was referred to the Committee on Veterans' Affairs

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## A BILL

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to enter into contracts with health care providers to improve access to health care for veterans who have difficulty receiving treatment at a health care facility of the Department of Veterans Affairs, 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; SENSE OF CONGRESS.**

4 (a) **SHORT TITLE.**—This Act may be cited as the  
5 “Enhanced Veteran Healthcare Experience Act of 2011”.

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

3 (1) the current health care system of the De-  
4 partment of Veterans Affairs is neither fiscally effi-  
5 cient nor effective in providing easily accessible  
6 treatment for all veterans;

7 (2) health care can be provided more efficiently  
8 to provide veterans with care that is available closer  
9 to where they live and to allow veterans more flexi-  
10 bility in choosing their own doctors; and

11 (3) better health care can be provided to vet-  
12 erans at little-to-no increased cost to the taxpayer by  
13 replacing the fee-based care system of the Depart-  
14 ment with the veterans enhanced care program, as  
15 described under section 2, and reprogramming funds  
16 to this program.

17 **SEC. 2. ENHANCED CONTRACT CARE AUTHORITY FOR**  
18 **HEALTH CARE NEEDS OF VETERANS.**

19 (a) IN GENERAL.—

20 (1) TYPE OF CARE.—Subsection (a) of section  
21 1703 of title 38, United States Code, is amended to  
22 read as follows:

23 “(a)(1) The Secretary shall provide an eligible vet-  
24 eran with covered health services that are provided by a  
25 non-Department provider whom the Secretary enters into

1 a contract with under this section if the Secretary deter-  
2 mines that facilities of the Department are not capable  
3 of—

4 “(A) economically furnishing covered health  
5 services to such veteran because of geographical in-  
6 accessibility; or

7 “(B) furnishing covered health services to such  
8 veteran because such facilities lack the required per-  
9 sonnel, resources, or ability.

10 “(2) In this subsection:

11 “(A) The term ‘covered health services’ means,  
12 with respect to an eligible veteran, any hospital care,  
13 medical service, rehabilitative service, or preventative  
14 health service that is authorized to be provided by  
15 the Secretary to the veteran under this chapter or  
16 any other provision of law.

17 “(B) The term ‘eligible veteran’ means a vet-  
18 eran enrolled in the health care system established  
19 under section 1705(a) of this title who elects to re-  
20 ceive care under this section.”.

21 (2) QUALIFIED PROVIDERS; QUALITY OF  
22 CARE.—Such section is amended by adding at the  
23 end the following new subsections:

1       “(e) The Secretary may enter into a contract with  
2 a non-Department provider under this section if such pro-  
3 vider—

4               “(1) demonstrates the ability to provide non-  
5 Department health care services to veterans;

6               “(2) meets or exceeds internal credentialing  
7 standards of the Department and standards of the  
8 Utilization Review Accreditation Commission;

9               “(3) has care coordinators who help veterans  
10 make, confirm, and keep medical appointments;

11              “(4) has—

12                      “(A) a system that allows veterans to file  
13 complaints; and

14                      “(B) a demonstrated ability to respond to  
15 potential quality indicators and patient safety  
16 events; and

17              “(5) has the ability to—

18                      “(A) process claims from others in the net-  
19 work of the provider;

20                      “(B) bill a third party (as defined in sec-  
21 tion 1725(f)(2) of this title) for care provided  
22 under this section, as appropriate; and

23                      “(C) transmit directly to the Secretary any  
24 amounts received pursuant to subparagraph  
25 (B).

1 “(f) In carrying out this section, the Secretary shall  
2 ensure the following:

3 “(1) With respect to each medical center of the  
4 Department, the Secretary is consistent in deter-  
5 mining the eligibility of veterans under subsection  
6 (a).

7 “(2) The Secretary includes care coordinators  
8 of a non-Department provider described in sub-  
9 section (e)(3) in initiatives of the Department to  
10 provide patient-centered care and uses such coordi-  
11 nators when the Secretary is unable to assign a vet-  
12 eran a case manager from the Department.

13 “(3) The Department and a non-Department  
14 provider under this section exchange clinical infor-  
15 mation to improve both clinical decision-making and  
16 the care a veteran receives.

17 “(4) Both non-Department facilities under this  
18 section and Department facilities meet performance  
19 metrics regarding—

20 “(A) the quality of health care provided;  
21 and

22 “(B) the satisfaction of veterans.

23 “(5) A non-Department facility under this sec-  
24 tion or employee of the Department who exceeds

1 performance metrics under paragraph (4) are eligi-  
2 ble for incentive or bonus payments.

3 “(g)(1) Not later than October 31 of each year, the  
4 Secretary shall submit to the Committee of Veterans’ Af-  
5 fairs of the Senate and the Committee on Veterans’ Af-  
6 fairs of the House of Representatives a report on care pro-  
7 vided under this section, including—

8 “(A) the cost to the Department;

9 “(B) the number of veterans receiving care  
10 under this section;

11 “(C) the quality of such care and the satisfac-  
12 tion of such veterans; and

13 “(D) other matters the Secretary considers ap-  
14 propriate.

15 “(2) Not later than March 1 of each odd-numbered  
16 year, the Secretary shall submit to the Committee of Vet-  
17 erans’ Affairs of the Senate and the Committee on Vet-  
18 erans’ Affairs of the House of Representatives a report  
19 on the allocation of resources with respect to care provided  
20 by the Department and by non-Department facilities.”.

21 (3) EFFECTIVE DATE.—The amendments made  
22 by paragraphs (1) and (2) shall take effect on Octo-  
23 ber 1, 2012.

24 (b) AUTHORIZATION OF APPROPRIATIONS.—There is  
25 authorized to be appropriated to the Secretary to carry

1 out section 1703 of title 38, United States Code, as  
2 amended by this section, for fiscal year 2013  
3 \$5,000,000,000.

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