

115TH CONGRESS  
1ST SESSION

# H. R. 4642

To amend the Veterans Access, Choice, and Accountability Act of 2014 to include in the Veterans Choice Program all veterans enrolled in the patient enrollment system of the Department of Veterans Affairs, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

DECEMBER 14, 2017

Mr. TIPTON introduced the following bill; which was referred to the Committee on Veterans' Affairs

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## A BILL

To amend the Veterans Access, Choice, and Accountability Act of 2014 to include in the Veterans Choice Program all veterans enrolled in the patient enrollment system 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.**

4 This Act may be cited as the “Veterans Improved Ac-  
5 cess and Care Act of 2017”.

1 **SEC. 2. EXPANSION OF VETERANS CHOICE PROGRAM TO**  
2 **INCLUDE ALL ENROLLED VETERANS.**

3 Section 101 of the Veterans Access, Choice, and Ac-  
4 countability Act of 2014 (Public Law 113–146; 38 U.S.C.  
5 1701 note) is amended—

6 (1) in subsection (b), by amending paragraph  
7 (2) to read as follows:

8 “(2) the veteran elects to receive hospital care  
9 or medical services under this section.”;

10 (2) in subsection (c)(1)—

11 (A) in the matter preceding subparagraph  
12 (A), by striking “In the case of an eligible vet-  
13 eran described in subsection (b)(2)(A), the Sec-  
14 retary shall, at the election of the eligible vet-  
15 eran” and inserting “The Secretary shall, at  
16 the election of an eligible veteran”; and

17 (B) in subparagraph (A)—

18 (i) by striking “provide the veteran”  
19 and inserting “provide the eligible vet-  
20 eran”; and

21 (ii) by striking “described in such  
22 subsection” and inserting “of the Veterans  
23 Health Administration”;

24 (3) in subsection (g), by striking paragraph (3);

25 and

1           (4) in subsection (q)(2)(A), by striking “,  
2           disaggregated by” and all that follows through “sub-  
3           section (b)(2)(D)”.

4 **SEC. 3. PILOT PROGRAM ON EXPEDITING THE DEPART-**  
5 **MENT OF VETERANS AFFAIRS PROCESS FOR**  
6 **ONBOARDING NEW MEDICAL PROVIDERS.**

7           (a) PILOT PROGRAM AUTHORIZED.—The Secretary  
8 of Veterans Affairs shall carry out a pilot program to as-  
9 sess the feasibility and advisability of expediting the proc-  
10 ess of the Veterans Health Administration for onboarding  
11 new medical providers. Under the pilot program, the Sec-  
12 retary shall seek to reduce the length of time it takes to  
13 onboard medical providers to no more than 60 days.

14           (b) LOCATIONS.—The Secretary shall select medical  
15 facilities at which to carry out the pilot program. In select-  
16 ing such facilities, the Secretary shall give priority to med-  
17 ical facilities facing hiring shortages of licensed inde-  
18 pendent medical providers.

19           (c) ONBOARDING PROCESS DEFINED.—In this sec-  
20 tion, the term “onboarding process” means the process of  
21 bringing on a medical provider applicant after the medical  
22 provider is offered a tentative position, including certifi-  
23 cation of credentialing, background investigation, assess-  
24 ment of health status, and such other actions are nec-  
25 essary for starting employment.

1 **SEC. 4. STRATEGY TO REDUCE DURATION OF HIRING**  
2 **PROCESS OF DEPARTMENT OF VETERANS AF-**  
3 **FAIRS FOR LICENSED PROFESSIONAL MED-**  
4 **ICAL PROVIDERS.**

5 Not later than 180 days after the date of the enact-  
6 ment of this Act, the Secretary of Veterans Affairs shall  
7 submit to Congress a strategy to reduce the duration of  
8 the hiring process of the Department of Veterans Affairs  
9 for licensed professional medical providers by half. Such  
10 strategy shall describe how the overall certification of cre-  
11 dentials process for licensed professional medical providers  
12 can be expedited.

13 **SEC. 5. IMPROVING ACCOUNTABILITY WITHIN VETERANS**  
14 **HEALTH ADMINISTRATION BY REQUIRING**  
15 **REPORTING OF MAJOR ADVERSE ACTIONS**  
16 **TAKEN TO NATIONAL PRACTITIONER DATA**  
17 **BANK AND STATE LICENSING BOARDS.**

18 Section 7461 of title 38, United States Code, is  
19 amended by adding at the end the following new sub-  
20 section:

21 “(f) Whenever the Under Secretary for Health (or an  
22 official designated by the Under Secretary) brings charges  
23 based on conduct or performance against a section  
24 7401(1) employee and as a result of those charges a major  
25 adverse action is taken against the employee, the Under  
26 Secretary shall, not later than 30 days after the date on

1 which such major adverse action is carried out, transmit  
2 to the National Practitioner Data Bank and the applicable  
3 State licensing board the name of the employee, a descrip-  
4 tion of the major adverse action, and a description of the  
5 reason for the major adverse action.”.

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