

117TH CONGRESS  
2D SESSION

# H. R. 9002

To direct the Secretary of Veterans Affairs to establish a pilot program for gynecologic cancer care coordination at the Department of Veterans Affairs, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 28, 2022

Ms. GARCIA of Texas introduced the following bill; which was referred to the Committee on Veterans' Affairs

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## A BILL

To direct the Secretary of Veterans Affairs to establish a pilot program for gynecologic cancer care coordination at 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’ Cancer Care

5       Coordinator Act of 2022”.

1   **SEC. 2. PILOT PROGRAM ON GYNECOLOGIC CANCER CARE**

2                   **COORDINATION.**

3         (a) ESTABLISHMENT.—Not later than one year after  
4   the date of the enactment of this Act, the Secretary of  
5   Veterans Affairs shall establish a pilot program (in this  
6   section referred to as the “Program”) for gynecologic can-  
7   cer care coordination at the Department of Veterans Af-  
8   fairs, including through the designation of a gynecologic  
9   cancer care coordinator of the Department.

10       (b) ELIGIBLE PARTICIPANTS.—A veteran is eligible  
11   to participate in the program if the veteran—

12               (1) has been diagnosed with a gynecologic can-  
13   cer; and

14               (2) is eligible for health care furnished through  
15   the Veterans Community Care Program under sec-  
16   tion 1703 of title 38, United States Code, at a non-  
17   Department facility.

18       (c) LOCATIONS.—The Secretary shall select not fewer  
19   than five medical centers of the Department of Veterans  
20   Affairs at which to carry out the Program, including one  
21   medical center that primarily serves rural veterans, as de-  
22   termined by the Secretary.

23       (d) DUTIES OF GYNECOLOGIC CANCER CARE COOR-  
24   DINATOR.—Under the Program, the designated  
25   gynecologic cancer care coordinator shall be responsible  
26   for carrying out the following duties:

1                             (1) Ensuring the coordination of care be-  
2                             tween—

3                                 (A) clinicians of the Department and com-  
4                             munity gynecologic cancer care providers;

5                                 (B) clinicians of the Department, Women's  
6                             Veteran Program Managers, and Women's  
7                             Health Medical Directors; and

8                                 (C) any other relevant clinicians of the De-  
9                             partment and community care providers who  
10                          provide care to participating veterans.

11                             (2) Working with the Office of Community Care  
12                          of the relevant medical facility of the Department re-  
13                          garding authorizations of care in the community, in-  
14                          cluding for participating veterans whose mental  
15                          health screening results indicate the presence of  
16                          military sexual trauma, depression, domestic or inti-  
17                          mate partner violence, or post-traumatic stress dis-  
18                          order.

19                             (3) Making regular contact with each partici-  
20                          pating veteran when the veteran receives care from  
21                          a community care provider to evaluate the needs of  
22                          the veteran, including through an assessment of the  
23                          mental health of the veteran (including as such men-  
24                          tal health and trauma history related to the cancer  
25                          diagnosis of the veteran).

1                             (4) Monitoring—

2                                 (A) the services furnished under the Pro-  
3                                 gram to participating veterans;

4                                 (B) the outcomes relating to the health of  
5                                 such participating veterans, including remission,  
6                                 metastasis, and death; and

7                                 (C) the data relating to gynecologic cancer  
8                                 care collected at a medical facility of the De-  
9                                 partment (using relevant databases of the Vet-  
10                                 erans Health Administration or other Depart-  
11                                 ment databases), including—

- 12                                     (i) the demographics of participating  
13                                 veterans who have gynecologic cancer; and  
14                                     (ii) the number of participating vet-  
15                                 erans being treated for gynecologic cancer.

16                                 (5) Providing particular information to partici-  
17                                 pating veterans, including—

18                                 (A) how to seek emergency care at the  
19                                 emergency department closest to the veteran,  
20                                 including the requirement for the veteran or the  
21                                 community care provider to notify the Depart-  
22                                 ment when the veteran receives emergency  
23                                 treatment relating to the cancer of the veteran  
24                                 for the Department to authorize payment for  
25                                 such emergency treatment; and

(B) information about mental health resources, including with respect to information encouraging follow-up care for depression.

(6) Documenting certain information in the electronic health records of participating veterans, including—

(A) the documentation of the contact described in paragraph (3);

(B) the contact information of the community gynecologic cancer care providers of such participating veterans; and

(C) the cancer diagnosis of such participating veterans.

(7) Carrying out such other duties as may be determined appropriate by the Secretary.

(e) REPORT.—

(1) IN GENERAL.—Not later than two years after the date on which the Secretary commences the Program, the Secretary shall submit to the Committees on Veterans' Affairs of the Senate and the House of Representatives a report containing the following:

(A) A comparison of the outcomes of veterans who have participated in the Program to the outcomes of non-participating veterans de-

1 scribed in paragraph (2), including with respect  
2 to the following:

3 (i) Health outcomes, including (for  
4 the most recent two years of available  
5 data)—

6 (I) the percentage of such veter-  
7 ans who have experienced a cancer-  
8 related death;

9 (II) the percentage of such veter-  
10 ans who have entered remission for  
11 gynecologic cancer; and

12 (III) the percentage of such veter-  
13 ans who have been diagnosed with  
14 mental health disorders determined  
15 relevant by the Secretary for purposes  
16 of the comparison (including anxiety,  
17 depression, and post-traumatic stress  
18 disorder).

19 (ii) Timeliness of care furnished under  
20 chapter 17 of title 38, United States Code,  
21 including the average time that elapses be-  
22 tween the initial diagnosis and each succes-  
23 sive stage of treatment for gynecologic can-  
24 cer.

6 (iv) Patient satisfaction associated  
7 with such care, including the results of a  
8 patient satisfaction survey administered to  
9 such veterans on the receipt of adequate  
10 pain management from health care pro-  
11 viders of the Department, mental health  
12 resources from such providers, and overall  
13 quality of such care.

14 (B) An evaluation of whether to expand  
15 the Program or make such Program perma-  
16 nent.

22 (A) has not participated in the Program;

(B) is enrolled in the patient enrollment system of the Department of Veterans Affairs

1           established and operated under section 1705 of  
2           title 38, United States Code; and  
3           (C) has been diagnosed with gynecologic  
4           cancer.

5       (f) DEFINITIONS.—In this section:

6           (1) The term “community care provider” means  
7           a health care provider located at a non-Department  
8           facility who provides care (other than care related to  
9           gynecologic cancer) to veterans under section 1703  
10          of title 38, United States Code, or any other law ad-  
11          ministered by the Secretary of Veterans Affairs.

12          (2) The term “community gynecologic cancer  
13          care provider” means a gynecologic cancer care pro-  
14          vider located at a non-Department facility who pro-  
15          vides care related to gynecologic cancer to veterans  
16          under section 1703 of title 38, United States Code,  
17          or any other law administered by the Secretary of  
18          Veterans Affairs.

19          (3) The term “gynecologic cancer” means cer-  
20          vical cancer, ovarian cancer, uterine cancer, vaginal  
21          cancer, and vulvar cancer.

22          (4) The term “non-Department facilities” has  
23          the meaning given that term in section 1701 of title  
24          38, United States Code.

1                   (5) The term “participating veteran” means a  
2                   veteran who is participating in the Program.

3                   (6) The term “Women’s Health Medical Direc-  
4                   tor” means a Women’s Health Medical Director de-  
5                   scribed in the directive of the Veterans Health Ad-  
6                   ministration titled “Health Care Services for Women  
7                   Veterans” (directive 1330.01), or any successor di-  
8                   rective.

9                   (7) The term “Women’s Veteran Program Man-  
10                  ager” means a Women’s Veterans Program Manager  
11                  described in the directive of the Veterans Health Ad-  
12                  ministration titled “Women Veterans Program Man-  
13                  ager” (directive 1330.02), or any successor directive.

