

114TH CONGRESS
2D SESSION

S. _____

To eliminate the sunset date for the Veterans Choice Program of the Department of Veterans Affairs, to expand eligibility for such program, and to extend certain operating hours for pharmacies and medical facilities of the Department, and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. MCCAIN introduced the following bill; which was read twice and referred to the Committee on _____

A BILL

To eliminate the sunset date for the Veterans Choice Program of the Department of Veterans Affairs, to expand eligibility for such program, and to extend certain operating hours for pharmacies and medical facilities of the Department, 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 “Care Veterans Deserve
5 Act of 2016”.

6 **SEC. 2. EXPANSION OF VETERANS CHOICE PROGRAM.**

7 (a) **ELIMINATION OF SUNSET.**—

1 (1) IN GENERAL.—Section 101 of the Veterans
2 Access, Choice, and Accountability Act of 2014
3 (Public Law 113–146; 38 U.S.C. 1701 note) is
4 amended—

5 (A) by striking subsection (p); and

6 (B) by redesignating subsections (q), (r),
7 (s), and (t) as subsections (p), (q), (r), and (s),
8 respectively.

9 (2) CONFORMING AMENDMENTS.—Such section
10 is amended—

11 (A) in subsection (i)(2), by striking “dur-
12 ing the period in which the Secretary is author-
13 ized to carry out this section pursuant to sub-
14 section (p)”;

15 (B) in subsection (p)(2), as redesignated
16 by paragraph (1)(B), by striking subparagraph
17 (F).

18 (b) EXPANSION OF ELIGIBILITY FOR PROGRAM.—

19 (1) IN GENERAL.—Subsection (b) of such sec-
20 tion is amended to read as follows:

21 “(b) ELIGIBLE VETERANS.—A veteran is an eligible
22 veteran for purposes of this section if the veteran is en-
23 rolled in the system of annual patient enrollment estab-
24 lished and operated under section 1705 of title 38, United
25 States Code.”.

1 (2) CONFORMING AMENDMENTS.—Such section
2 is amended—

3 (A) in subsection (c)(1)—

4 (i) in the matter preceding subpara-
5 graph (A), by striking “In the case of an
6 eligible veteran described in subsection
7 (b)(2)(A), the Secretary shall, at the elec-
8 tion of the eligible veteran” and inserting
9 “The Secretary shall, at the election of an
10 eligible veteran”; and

11 (ii) in subparagraph (A), by striking
12 “described in such subsection” and insert-
13 ing “of the Veterans Health Administra-
14 tion”;

15 (B) in subsection (f)(1), by striking “sub-
16 section (b)(1)” and inserting “subsection (b)”;

17 (C) by amending subsection (g) to read as
18 follows:

19 “(g) INFORMATION ON AVAILABILITY OF CARE.—

20 “(1) IN GENERAL.—The Secretary shall provide
21 information to a veteran about the availability of
22 care and services under this section when the vet-
23 eran enrolls in the system of annual patient enroll-
24 ment established and operated under section 1705 of
25 title 38, United States Code.

1 “(2) INDIVIDUALS ALREADY ENROLLED.—With
2 respect to veterans enrolled in such system of annual
3 patient enrollment as of the date of the enactment
4 of the Care Veterans Deserve Act of 2016 who have
5 not received information about the availability of
6 care and services under this section, the Secretary
7 shall provide such information to such veterans not
8 later than 120 days after such date of enactment.”;
9 and

10 (D) in subsection (p)(2)(A), as redesignig-
11 nated by subsection (a)(1)(B), by striking “,
12 disaggregated by—” and all that follows
13 through “subsection (b)(2)(D)”.

14 **SEC. 3. ACCESS OF VETERANS TO WALK-IN CLINICS.**

15 (a) IN GENERAL.—Subchapter I of chapter 17 of title
16 38, United States Code, is amended by inserting after sec-
17 tion 1703 the following new section:

18 **“§ 1703A. Hospital care and medical services at walk-**
19 **in clinics**

20 “(a) IN GENERAL.—The Secretary shall enter into
21 a contract with a national chain of walk-in clinics to pro-
22 vide the hospital care and medical services offered in such
23 clinics to veterans enrolled in the system of annual patient
24 enrollment established and operated under section 1705
25 of this title.

1 “(b) NO AUTHORIZATION OR COPAYMENT RE-
2 QUIRED.—In receiving hospital care or medical services at
3 a walk-in clinic under subsection (a), a veteran is not re-
4 quired—

5 “(1) to obtain authorization before receiving
6 such care or services at the clinic; or

7 “(2) to pay a copayment to the clinic or the De-
8 partment in connection with the receipt of such care
9 or services.

10 “(c) LOCATIONS.—The Secretary may not require a
11 national chain of walk-in clinics to expand their locations
12 as a condition of a contract entered into under subsection
13 (a).

14 “(d) TRANSMITTAL OF INFORMATION.—(1) The na-
15 tional chain of walk-in clinics with which the Secretary
16 has entered into a contract under subsection (a) shall es-
17 tablish an automated system that transmits to the Sec-
18 retary on a weekly basis information regarding the hos-
19 pital care or medical services provided to veterans under
20 this section during such week.

21 “(2) The automated system under paragraph (1)
22 shall be established in a manner that allows the system
23 to securely transmit information to the electronic health
24 record of a veteran regarding the hospital care and med-
25 ical services provided to the veteran under this section.

1 “(3) Transmittal of information under paragraph (1)
2 may not be required as a condition of payment for hospital
3 care or medical services provided under this section.”.

4 (b) CLERICAL AMENDMENT.—The table of sections
5 at the beginning of chapter 17 of such title is amended
6 by inserting after the item relating to section 1703 the
7 following new item:

“1703A. Hospital care and medical services at walk-in clinics.”.

8 **SEC. 4. LICENSURE OF HEALTH CARE PROFESSIONALS OF**
9 **THE DEPARTMENT OF VETERANS AFFAIRS**
10 **PROVIDING TREATMENT VIA TELEMEDICINE.**

11 (a) IN GENERAL.—Subchapter III of chapter 17 of
12 title 38, United States Code, is amended by inserting after
13 section 1730A the following new section:

14 **“§ 1730B. Licensure of health care professionals pro-**
15 **viding treatment via telemedicine**

16 “(a) IN GENERAL.—Notwithstanding any provision
17 of law regarding the licensure of health care professionals,
18 a covered health care professional may practice the health
19 care profession of the health care professional at any loca-
20 tion in any State, regardless of where such health care
21 professional or the patient is located, if the health care
22 professional is using telemedicine to provide treatment to
23 an individual under this chapter.

24 “(b) LOCATION OF CARE.—Subsection (a) shall apply
25 to a covered health care professional providing treatment

1 to a patient regardless of whether such health care profes-
2 sional or patient is located in a facility owned by the Fed-
3 eral Government during such treatment.

4 “(c) RULE OF CONSTRUCTION.—Nothing in this sec-
5 tion may be construed to remove, limit, or otherwise affect
6 any obligation of a covered health care professional under
7 the Controlled Substances Act (21 U.S.C. 801 et seq.).

8 “(d) DEFINITIONS.—In this section:

9 “(1) The term ‘covered health care professional’
10 means a health care professional who is—

11 “(A) authorized by the Secretary to pro-
12 vide health care under this chapter, including a
13 private health care professional who provides
14 such care under a contract or agreement en-
15 tered into with the Secretary, including a con-
16 tract entered into under section 1703 of this
17 title; and

18 “(B) licensed, registered, or certified in a
19 State to practice the health care profession of
20 the health care professional.

21 “(2) The term ‘telemedicine’ means the use of
22 telecommunication technology and information tech-
23 nology to provide health care or support the provi-
24 sion of health care in situations in which the patient

1 and health care professional are separated by geo-
2 graphic distance.”.

3 (b) CLERICAL AMENDMENT.—The table of sections
4 at the beginning of chapter 17 of such title is amended
5 by inserting after the item relating to section 1730A the
6 following new item:

“1730B. Licensure of health care professionals providing treatment via telemedi-
cine.”.

7 (c) REPORT ON TELEMEDICINE.—

8 (1) IN GENERAL.—Not later than one year
9 after the date of the enactment of this Act, the Sec-
10 retary of Veterans Affairs shall submit to the Com-
11 mittee on Veterans’ Affairs of the Senate and the
12 Committee on Veterans’ Affairs of the House of
13 Representatives a report on the effectiveness of the
14 use of telemedicine by the Department of Veterans
15 Affairs.

16 (2) ELEMENTS.—The report required by para-
17 graph (1) shall include an assessment of the fol-
18 lowing:

19 (A) The satisfaction of veterans with tele-
20 medicine furnished by the Department.

21 (B) The satisfaction of health care pro-
22 viders in providing telemedicine furnished by
23 the Department.

1 (C) The effect of telemedicine furnished by
2 the Department on the following:

3 (i) The ability of veterans to access
4 health care, whether from the Department
5 or from non-Department health care pro-
6 viders.

7 (ii) The frequency of use by veterans
8 of telemedicine.

9 (iii) The productivity of health care
10 providers.

11 (iv) Wait times for an appointment
12 for the receipt of health care from the De-
13 partment.

14 (v) The reduction, if any, in the use
15 by veterans of services at Department fa-
16 cilities and non-Department facilities.

17 (D) The types of appointments for the re-
18 ceipt of telemedicine furnished by the Depart-
19 ment that were provided during the one-year
20 period preceding the submittal of the report.

21 (E) The number of appointments for the
22 receipt of telemedicine furnished by the Depart-
23 ment that were requested during such period,
24 disaggregated by Veterans Integrated Service
25 Network.

1 (F) Savings by the Department, if any, in-
2 cluding travel costs, of furnishing health care
3 through the use of telemedicine during such pe-
4 riod.

5 (3) **TELEMEDICINE DEFINED.**—In this sub-
6 section, the term “telemedicine” has the meaning
7 given that term in section 1730B(d)(2) of title 38,
8 United States Code, as added by subsection (a).

9 **SEC. 5. EXTENSION OF OPERATING HOURS FOR PHAR-**
10 **MACIES AND MEDICAL FACILITIES OF THE**
11 **DEPARTMENT OF VETERANS AFFAIRS.**

12 (a) **EXTENSION OF OPERATING HOURS FOR PHAR-**
13 **MACIES.**—The Secretary of Veterans Affairs shall extend
14 the operating hours for each pharmacy of the Department
15 of Veterans Affairs during which the pharmacy offers
16 services comparable to retail pharmacies to include—

17 (1) operation on Saturday, Sunday, and Fed-
18 eral holidays; and

19 (2) operation until 8:00 p.m. on weekdays that
20 are not Federal holidays.

21 (b) **CONTRACTS WITH PROVIDERS DURING NIGHTS**
22 **AND WEEKENDS.**—The Secretary shall enter into con-
23 tracts, including through locum tenens arrangements, with
24 physicians and nurses that meet qualifications set forth
25 by the Secretary for purposes of this section under which

1 such physicians and nurses work at medical facilities of
2 the Department during nights and weekends.

3 (c) SUPPORT STAFF.—The Secretary may obtain ad-
4 ditional support staff as necessary to carry out this sec-
5 tion, including by hiring employees or contracting for serv-
6 ices.

7 **SEC. 6. CONDUCT OF BEST-PRACTICES PEER REVIEW OF**
8 **EACH MEDICAL CENTER OF THE DEPART-**
9 **MENT OF VETERANS AFFAIRS.**

10 (a) IN GENERAL.—The Secretary of Veterans Affairs
11 may provide for the conduct by a nongovernmental hos-
12 pital organization of a best-practices peer review of each
13 medical center of the Department of Veterans Affairs to
14 evaluate the efficacy of health care delivered at each such
15 medical center.

16 (b) PRIORITY.—The Secretary shall give priority for
17 peer review conducted under subsection (a) to the medical
18 centers of the Department with the longest wait times for
19 an appointment or the worst health outcomes, as deter-
20 mined by the Secretary.