

115TH CONGRESS
1ST SESSION

S. _____

To appropriate amounts to the Department of Veterans Affairs to improve the provision of health care to veterans, and for other purposes.

IN THE SENATE OF THE UNITED STATES

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

A BILL

To appropriate amounts to the Department of Veterans Affairs to improve the provision of health care to veterans, 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; TABLE OF CONTENTS.**

4 (a) SHORT TITLE.—This Act may be cited as the
5 “Veterans Access to Care Act of 2017”.

6 (b) TABLE OF CONTENTS.—The table of contents for
7 this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—APPROPRIATION OF AMOUNTS FOR HEALTH CARE FOR
VETERANS

Sec. 101. Appropriation of amounts for Veterans Choice Program.

Sec. 102. Appropriation of amounts for health care from Department of Veterans Affairs.

TITLE II—IMPROVEMENT OF HEALTH CARE FROM DEPARTMENT OF VETERANS AFFAIRS

Sec. 201. Program to increase number of graduate medical education residency positions of Department of Veterans Affairs.

Sec. 202. Expansion of eligibility for participation in and services provided under family caregiver program of Department of Veterans Affairs.

Sec. 203. Authorization of certain major medical facility leases of the Department of Veterans Affairs.

TITLE III—ADMINISTRATION OF HEALTH CARE FROM NON-DEPARTMENT OF VETERANS AFFAIRS PROVIDERS

Sec. 301. Modification of process through which Department of Veterans Affairs records obligations for non-Department care.

Sec. 302. Modification of report on amounts available under Veterans Choice Program.

TITLE IV—OTHER MATTERS

Sec. 401. Emergency designations.

1 **TITLE I—APPROPRIATION OF**
 2 **AMOUNTS FOR HEALTH CARE**
 3 **FOR VETERANS**

4 **SEC. 101. APPROPRIATION OF AMOUNTS FOR VETERANS**
 5 **CHOICE PROGRAM.**

6 (a) IN GENERAL.—There is authorized to be appro-
 7 priated, and is appropriated, to the Secretary of Veterans
 8 Affairs, out of any funds in the Treasury not otherwise
 9 appropriated, \$4,300,000,000 to be deposited in the Vet-
 10 erans Choice Fund under section 802 of the Veterans Ac-
 11 cess, Choice, and Accountability Act of 2014 (Public Law
 12 113–146; 38 U.S.C. 1701 note).

1 (b) AVAILABILITY OF AMOUNTS.—The amount ap-
2 propriated under subsection (a) shall be available for obli-
3 gation or expenditure without fiscal year limitation.

4 **SEC. 102. APPROPRIATION OF AMOUNTS FOR HEALTH**
5 **CARE FROM DEPARTMENT OF VETERANS AF-**
6 **FAIRS.**

7 (a) IN GENERAL.—There is authorized to be appro-
8 priated, and is appropriated, to the Secretary of Veterans
9 Affairs, out of any funds in the Treasury not otherwise
10 appropriated, \$4,300,000,000 to carry out subsection (c).

11 (b) AVAILABILITY OF AMOUNTS.—The amount ap-
12 propriated under subsection (a) shall be available for obli-
13 gation or expenditure without fiscal year limitation.

14 (c) USE OF AMOUNTS.—The amount appropriated
15 under subsection (a) shall be used by the Secretary as fol-
16 lows:

17 (1) To increase the access of veterans to care
18 as follows:

19 (A) To hire primary care and specialty
20 care physicians for employment in the Depart-
21 ment of Veterans Affairs.

22 (B) To hire other medical staff, including
23 the following:

24 (i) Physicians.

25 (ii) Gynecologists.

- 1 (iii) Nurses.
- 2 (iv) Social workers.
- 3 (v) Mental health professionals.
- 4 (vi) Physician assistants.
- 5 (vii) Other health care professionals
- 6 as the Secretary considers appropriate.

7 (C) To carry out the following:

- 8 (i) Section 7412 of title 38, United
- 9 States Code.
- 10 (ii) Section 7302(e) of such title.
- 11 (iii) Subchapters II and VII of chap-
- 12 ter 76 of such title.
- 13 (iv) Section 301(b)(2) of the Veterans
- 14 Access, Choice, and Accountability Act of
- 15 2014 (Public Law 113–146; 38 U.S.C.
- 16 7302 note).

17 (D) To pay for expenses, equipment, and

18 other costs associated with the hiring of pri-

19 mary care, specialty care physicians, and other

20 medical staff under subparagraphs (A), (B),

21 and (C).

22 (2) To improve the physical infrastructure of

23 the Department as follows:

24 (A) To maintain and operate hospitals,

25 nursing homes, domiciliary facilities, and other

1 facilities of the Veterans Health Administra-
2 tion.

3 (B) To enter into contracts or hire tem-
4 porary employees to repair, alter, or improve fa-
5 cilities under the jurisdiction of the Department
6 that are not otherwise provided for under this
7 paragraph.

8 (C) To carry out leases for facilities of the
9 Department.

10 (D) To carry out minor construction
11 projects of the Department.

12 (3) To carry out the program to increase the
13 number of graduate medical education residency po-
14 sitions of the Department under section 201.

15 (4) To carry out the major medical facility
16 leases authorized under section 203.

17 (d) REPORT.—

18 (1) IN GENERAL.—Not later than one year
19 after the date of the enactment of this Act, the Sec-
20 retary of Veterans Affairs shall submit to the appro-
21 priate committees of Congress a report on how the
22 Secretary has obligated the amount appropriated
23 under subsection (a) as of the date of the submittal
24 of the report.

1 (2) APPROPRIATE COMMITTEES OF CONGRESS
2 DEFINED.—In this subsection, the term “ appro-
3 priate committees of Congress” means—

4 (A) the Committee on Veterans’ Affairs
5 and the Committee on Appropriations of the
6 Senate; and

7 (B) the Committee on Veterans’ Affairs
8 and the Committee on Appropriations of the
9 House of Representatives.

10 (e) FUNDING PLAN.—The Secretary shall submit to
11 Congress a funding plan describing how the Secretary in-
12 tends to use the amount appropriated under subsection
13 (a).

14 **TITLE II—IMPROVEMENT OF**
15 **HEALTH CARE FROM DE-**
16 **PARTMENT OF VETERANS AF-**
17 **FAIRS**

18 **SEC. 201. PROGRAM TO INCREASE NUMBER OF GRADUATE**
19 **MEDICAL EDUCATION RESIDENCY POSITIONS**
20 **OF DEPARTMENT OF VETERANS AFFAIRS.**

21 (a) IN GENERAL.—The Secretary of Veterans Affairs
22 shall conduct a program to increase the number of grad-
23 uate medical education residency positions at covered fa-
24 cilities by not more than 1,500 positions through the pay-

1 ment of educational assistance to participants in the pro-
2 gram.

3 (b) APPLICATION.—To participate in the program
4 under this section, an individual shall submit to the Sec-
5 retary an application for such participation together with
6 an agreement described in subsection (d) under which the
7 individual agrees to serve a period of obligated service in
8 the Veterans Health Administration as provided in the
9 agreement in return for payment of educational assistance
10 as provided in the agreement.

11 (c) APPROVAL BY SECRETARY.—

12 (1) IN GENERAL.—An individual becomes a
13 participant in the program under this section upon
14 the approval by the Secretary of the application of
15 the individual and the acceptance by the Secretary
16 of an agreement described in subsection (d) with re-
17 spect to the individual.

18 (2) NOTIFICATION.—Upon the approval by the
19 Secretary under paragraph (1) of the participation
20 of an individual in the program and the acceptance
21 of an agreement described in subsection (d), the Sec-
22 retary shall promptly notify the individual in writing
23 of that approval and acceptance.

24 (d) AGREEMENT.—An agreement between the Sec-
25 retary and a participant in the program under this section

1 shall be in writing and shall be signed by the participant
2 containing such terms as the Secretary may specify.

3 (e) CONDITIONS FOR MEDICAL RESIDENCY.—The
4 Secretary may prescribe the conditions of employment of
5 individuals participating in a medical residency under the
6 program under this section, including necessary training,
7 and the customary amount and terms of pay for such indi-
8 viduals during the period of such employment and training
9 as a medical resident.

10 (f) OBLIGATED SERVICE.—

11 (1) IN GENERAL.—Each participant in the pro-
12 gram under this section shall serve as a full-time
13 employee of the Department of Veterans Affairs for
14 a period of obligated service provided in the agree-
15 ment entered into by the participant under sub-
16 section (d).

17 (2) PRACTICE AREA.—Service by a participant
18 under paragraph (1) shall be in the full-time clinical
19 practice of the profession of the participant or in an-
20 other health care position in an assignment or loca-
21 tion determined by the Secretary.

22 (3) NOTIFICATION.—Not later than 60 days be-
23 fore the date of the beginning of the period of obli-
24 gated service of a participant, the Secretary shall
25 notify the participant of that date.

1 (g) BREACH OF AGREEMENT; LIABILITY.—

2 (1) LIQUIDATED DAMAGES FOR FAILURE TO
3 ACCEPT PAYMENT.—

4 (A) IN GENERAL.—A participant in the
5 program under this section (other than a par-
6 ticipant described in paragraph (2)) who fails to
7 accept payment, or instructs the covered facility
8 at which the participant is a medical resident
9 not to accept payment, in whole or in part, of
10 educational assistance under the agreement en-
11 tered into under subsection (d) shall be liable to
12 the United States for liquidated damages in the
13 amount of \$1,500.

14 (B) TREATMENT OF OTHER OBLIGA-
15 TIONS.—Liability for liquidated damages under
16 subparagraph (A) is in addition to any period
17 of obligated service or other obligation or liabil-
18 ity under the agreement entered into under sub-
19 section (d).

20 (2) LIABILITY FOR CERTAIN BREACHES.—

21 (A) IN GENERAL.—A participant in the
22 program under this section shall be liable to the
23 United States for the amount that has been
24 paid to or on behalf of the participant under
25 the agreement if any of the following occurs:

1 (i) The participant is dismissed from
2 serving as a medical resident at a covered
3 facility for disciplinary reasons.

4 (ii) The participant voluntarily termi-
5 nates service as a medical resident at a
6 covered facility before completion of such
7 service.

8 (iii) The participant loses his or her
9 license, registration, or certification to
10 practice his or her health care profession
11 in a State.

12 (B) TREATMENT OF PERIOD OF OBLI-
13 GATED SERVICE.—Liability under subparagraph
14 (A) is in lieu of any period of obligated service
15 under the agreement entered into under sub-
16 section (d).

17 (3) LIABILITY FOR FAILING TO COMPLETE PE-
18 RIOD OF SERVICE.—

19 (A) IN GENERAL.—If a participant in the
20 program under this section breaches the agree-
21 ment under subsection (d) by failing (for any
22 reason) to complete the period of obligated serv-
23 ice of the participant, the United States shall
24 be entitled to recover from the participant an

1 amount determined in accordance with the fol-
2 lowing formula: $A=3\Phi(t-s/t)$.

3 (B) FORMULA VARIABLES.—In the for-
4 mula specified in subparagraph (A):

5 (i) “A” is the amount the United
6 States is entitled to recover from the par-
7 ticipant.

8 (ii) “ Φ ” is the sum of—

9 (I) the amounts paid under this
10 section to or on behalf of the partici-
11 pant; and

12 (II) the interest on such amounts
13 which would be payable if at the time
14 the amounts were paid they were
15 loans bearing interest at the max-
16 imum legal prevailing rate, as deter-
17 mined by the Treasurer of the United
18 States.

19 (iii) “t” is the total number of months
20 in the period of obligated service of the
21 participant.

22 (iv) “s” is the number of months of
23 such period served by the participant.

24 (4) PAYMENT DEADLINE.—Any amount of
25 damages that the United States is entitled to recover

1 under this subsection shall be paid to the United
2 States within the one-year period beginning on the
3 date of the breach of the agreement under sub-
4 section (d).

5 (h) COVERED FACILITIES DEFINED.—In this section,
6 the term “covered facilities” means any of the following:

7 (1) A Department facility.

8 (2) A facility operated by an Indian tribe or a
9 tribal organization, as those terms are defined in
10 section 4 of the Indian Self-Determination and Edu-
11 cation Assistance Act (25 U.S.C. 5304).

12 (3) A facility operated by the Indian Health
13 Service.

14 (4) A Federally-qualified health center, as de-
15 fined in section 1905(l)(2)(B) of the Social Security
16 Act (42 U.S.C. 1396d(l)(2)(B)).

17 (5) A community health center.

18 (6) A facility operated by the Department of
19 Defense.

20 (7) Any other health care facility designated by
21 the Secretary of Veterans Affairs.

1 **SEC. 202. EXPANSION OF ELIGIBILITY FOR PARTICIPATION**
2 **IN AND SERVICES PROVIDED UNDER FAMILY**
3 **CAREGIVER PROGRAM OF DEPARTMENT OF**
4 **VETERANS AFFAIRS.**

5 (a) FAMILY CAREGIVER PROGRAM.—

6 (1) EXPANSION OF ELIGIBILITY.—Subsection
7 (a)(2)(B) of section 1720G of title 38, United States
8 Code, is amended by striking “on or after September
9 11, 2001”.

10 (2) CLARIFICATION OF ELIGIBILITY FOR ILL-
11 NESS.—Such subsection is further amended by in-
12 serting “or illness” after “serious injury”.

13 (3) EXPANSION OF NEEDED SERVICES IN ELI-
14 GIBILITY CRITERIA.—Subsection (a)(2)(C) of such
15 section is amended—

16 (A) in clause (ii), by striking “; or” and in-
17 serting a semicolon;

18 (B) by redesignating clause (iii) as clause
19 (iv); and

20 (C) by inserting after clause (ii) the fol-
21 lowing new clause (iii):

22 “(iii) a need for regular or extensive in-
23 struction or supervision without which the abil-
24 ity of the veteran to function in daily life would
25 be seriously impaired; or”.

1 (4) EXPANSION OF SERVICES PROVIDED.—Sub-
2 section (a)(3)(A)(ii) of such section is amended—

3 (A) in subclause (IV), by striking “; and”
4 and inserting a semicolon;

5 (B) in subclause (V), by striking the period
6 at the end and inserting a semicolon; and

7 (C) by adding at the end the following new
8 subclauses:

9 “(VI) child care services or a monthly sti-
10 pend for such services if such services are not
11 readily available from the Department;

12 “(VII) financial planning services relating
13 to the needs of injured and ill veterans and
14 their caregivers; and

15 “(VIII) legal services, including legal ad-
16 vice and consultation, relating to the needs of
17 injured and ill veterans and their caregivers.”.

18 (5) EXPANSION OF RESPITE CARE PROVIDED.—
19 Subsection (a)(3)(B) of such section is amended by
20 striking “shall be” and all that follows through the
21 period at the end and inserting “shall—

22 “(i) be medically and age-appropriate;

23 “(ii) include in-home care; and

24 “(iii) include peer-oriented group activities.”.

1 (6) MODIFICATION OF STIPEND CALCULA-
2 TION.—Subsection (a)(3)(C) of such section is
3 amended—

4 (A) by redesignating clause (iii) as clause
5 (iv); and

6 (B) by inserting after clause (ii) the fol-
7 lowing new clause (iii):

8 “(iii) In determining the amount and degree of per-
9 sonal care services provided under clause (i) with respect
10 to an eligible veteran whose need for personal care services
11 is based in whole or in part on a need for supervision or
12 protection under paragraph (2)(C)(ii) or regular or exten-
13 sive instruction or supervision under paragraph (2)(C)(iii),
14 the Secretary shall take into account the following:

15 “(I) The assessment by the family caregiver of
16 the needs and limitations of the veteran.

17 “(II) The extent to which the veteran can func-
18 tion safely and independently in the absence of such
19 supervision, protection, or instruction.

20 “(III) The amount of time required for the
21 family caregiver to provide such supervision, protec-
22 tion, or instruction to the veteran.”.

23 (7) PERIODIC EVALUATION OF NEED FOR CER-
24 TAIN SERVICES.—Subsection (a)(3) of such section

1 is amended by adding at the end the following new
2 subparagraph:

3 “(D) In providing instruction, preparation, and train-
4 ing under subparagraph (A)(i)(I) and technical support
5 under subparagraph (A)(i)(II) to each family caregiver
6 who is approved as a provider of personal care services
7 for an eligible veteran under paragraph (6), the Secretary
8 shall periodically evaluate the needs of the eligible veteran
9 and the skills of the family caregiver of such veteran to
10 determine if additional instruction, preparation, training,
11 or technical support under those subparagraphs is nec-
12 essary.”.

13 (8) USE OF PRIMARY CARE TEAMS.—Subsection
14 (a)(5) of such section is amended, in the matter pre-
15 ceding subparagraph (A), by inserting “(in collabo-
16 ration with the primary care team for the eligible
17 veteran to the maximum extent practicable)” after
18 “evaluate”.

19 (9) ELIGIBILITY OF AND ASSISTANCE FOR FAM-
20 ILY CAREGIVERS.—Subsection (a) of such section is
21 amended by adding at the end the following new
22 paragraphs:

23 “(11) Notwithstanding any other provision of this
24 subsection, a family caregiver of an eligible veteran who
25 is eligible under paragraph (2) solely because of a serious

1 injury or illness (including traumatic brain injury, psycho-
2 logical trauma, or other mental disorder) incurred or ag-
3 gravated in the line of duty in the active military, naval,
4 or air service before September 11, 2001, is eligible for
5 assistance under this subsection as follows:

6 “(A) Not earlier than October 1, 2018, if the
7 family caregiver would merit a monthly personal
8 caregiver stipend under paragraph (3)(A)(ii)(V) in
9 an amount that is in the highest tier specified in the
10 schedule established by the Secretary under para-
11 graph (3)(C)(i).

12 “(B) Not earlier than October 1, 2020, if the
13 family caregiver would merit such a stipend in an
14 amount that is in the middle tier specified in such
15 schedule.

16 “(C) Not earlier than October 1, 2022, if the
17 family caregiver would merit such a stipend in an
18 amount that is in the lowest tier specified in such
19 schedule.

20 “(12)(A) In providing assistance under this sub-
21 section to family caregivers of eligible veterans, the Sec-
22 retary may enter into contracts, provider agreements, and
23 memoranda of understanding with Federal agencies,
24 States, and private, nonprofit, and other entities to pro-
25 vide such assistance to such family caregivers.

1 “(B) The Secretary may provide assistance under
2 this paragraph only if such assistance is reasonably acces-
3 sible to the family caregiver and is substantially equivalent
4 or better in quality to similar services provided by the De-
5 partment.

6 “(C) The Secretary may provide fair compensation
7 to Federal agencies, States, and other entities that provide
8 assistance under this paragraph.”.

9 (b) TERMINATION OF GENERAL CAREGIVER SUP-
10 PORT PROGRAM.—

11 (1) IN GENERAL.—Subsection (b) of such sec-
12 tion is amended by adding at the end the following
13 new paragraph:

14 “(6) The authority of the Secretary to provide sup-
15 port services for caregivers of covered veterans under this
16 subsection shall terminate on October 1, 2022.”.

17 (2) CONTINUATION OF CERTAIN ASSISTANCE.—

18 The Secretary of Veterans Affairs shall ensure that
19 any activities carried out under subsection (b) of
20 such section on September 30, 2022, are continued
21 under subsection (a) of such section on and after
22 October 1, 2022.

23 (c) MODIFICATION OF DEFINITION OF FAMILY MEM-
24 BER.—Subparagraph (B) of subsection (d)(3) of such sec-
25 tion is amended to read as follows:

1 “(B) is not a member of the family of the
2 veteran and does not provide care to the vet-
3 eran on a professional basis.”.

4 (d) MODIFICATION OF DEFINITION OF PERSONAL
5 CARE SERVICES.—Subsection (d)(4) of such section is
6 amended—

7 (1) in subparagraph (A), by striking “inde-
8 pendent”;

9 (2) by redesignating subparagraph (B) as sub-
10 paragraph (D); and

11 (3) by inserting after subparagraph (A) the fol-
12 lowing new subparagraphs:

13 “(B) Supervision or protection based on
14 symptoms or residuals of neurological or other
15 impairment or injury.

16 “(C) Regular or extensive instruction or
17 supervision without which the ability of the vet-
18 eran to function in daily life would be seriously
19 impaired.”.

20 (e) ANNUAL EVALUATION REPORT.—Paragraph (2)
21 of section 101(c) of the Caregivers and Veterans Omnibus
22 Health Services Act of 2010 (Public Law 111–163; 38
23 U.S.C. 1720G note) is amended to read as follows:

24 “(2) CONTENTS.—Each report required by
25 paragraph (1) after the date of the enactment of the

1 Veterans Choice Act of 2017 shall include the fol-
2 lowing with respect to the program of comprehensive
3 assistance for family caregivers required by sub-
4 section (a)(1) of such section 1720G:

5 “(A) The number of family caregivers that
6 received assistance under such program.

7 “(B) The cost to the Department of pro-
8 viding assistance under such program.

9 “(C) A description of the outcomes
10 achieved by, and any measurable benefits of,
11 carrying out such program.

12 “(D) An assessment of the effectiveness
13 and the efficiency of the implementation of such
14 program, including a description of any barriers
15 to accessing and receiving care and services
16 under such program.

17 “(E) A description of the outreach activi-
18 ties carried out by the Secretary under such
19 program.

20 “(F) An assessment of the manner in
21 which resources are expended by the Secretary
22 under such program, particularly with respect
23 to the provision of monthly personal caregiver
24 stipends under subsection (a)(3)(A)(ii)(V) of
25 such section 1720G.

1 “(G) An evaluation of the sufficiency and
2 consistency of the training provided to family
3 caregivers under such program in preparing
4 family caregivers to provide care to veterans
5 under such program.

6 “(H) Such recommendations, including
7 recommendations for legislative or administra-
8 tive action, as the Secretary considers appro-
9 priate in light of carrying out such program.”.

10 **SEC. 203. AUTHORIZATION OF CERTAIN MAJOR MEDICAL**
11 **FACILITY LEASES OF THE DEPARTMENT OF**
12 **VETERANS AFFAIRS.**

13 The Secretary of Veterans Affairs may carry out the
14 following major medical facility leases at the locations
15 specified and in an amount for each lease not to exceed
16 the amount specified for such location (not including any
17 estimated cancellation costs):

18 (1) For an outpatient clinic, Ann Arbor, Michi-
19 gan, an amount not to exceed \$4,247,000.

20 (2) For an outpatient mental health clinic, Bir-
21 mingham, Alabama, an amount not to exceed
22 \$6,649,000.

23 (3) For research space, Boston, Massachusetts,
24 an amount not to exceed \$6,224,000.

1 (4) For research space, Charleston, South
2 Carolina, an amount not to exceed \$7,274,000.

3 (5) For an outpatient clinic, Corpus Christi,
4 Texas, an amount not to exceed \$6,556,000.

5 (6) For an outpatient clinic, Daytona Beach,
6 Florida, an amount not to exceed \$12,198,000.

7 (7) For Chief Business Office Purchased Care
8 office space, Denver, Colorado, an amount not to ex-
9 ceed \$14,784,000.

10 (8) For an outpatient clinic, Fredericksburg,
11 Virginia, an amount not to exceed \$45,015,000.

12 (9) For an outpatient clinic, Gainesville, Flor-
13 ida, an amount not to exceed \$7,891,000.

14 (10) For an outpatient mental health clinic,
15 Gainesville, Florida, an amount not to exceed
16 \$4,320,000.

17 (11) For an outpatient clinic, Hampton Roads,
18 Virginia, an amount not to exceed \$18,141,000.

19 (12) For a replacement outpatient clinic, Indi-
20 anapolis, Indiana, an amount not to exceed
21 \$7,876,000.

22 (13) For a replacement outpatient clinic, Jack-
23 sonville, Florida, an amount not to exceed
24 \$18,623,000.

1 (14) For an outpatient clinic, Missoula, Mon-
2 tana, an amount not to exceed \$6,942,000.

3 (15) For an outpatient mental health clinic,
4 Northern Colorado, Colorado, an amount not to ex-
5 ceed \$8,904,000.

6 (16) For an outpatient clinic, Ocala, Florida,
7 an amount not to exceed \$5,026,000.

8 (17) For an outpatient clinic, Oxnard, Cali-
9 fornia, an amount not to exceed \$5,274,000.

10 (18) For an outpatient clinic, Pike County,
11 Georgia, an amount not to exceed \$5,565,000.

12 (19) For a replacement outpatient clinic, Pitts-
13 burgh, Pennsylvania, an amount not to exceed
14 \$6,247,000.

15 (20) For an outpatient clinic, Portland, Maine,
16 an amount not to exceed \$6,808,000.

17 (21) For an outpatient clinic, Raleigh, North
18 Carolina, an amount not to exceed \$21,870,000.

19 (22) For a replacement outpatient clinic, phase
20 II, Rochester, New York, an amount not to exceed
21 \$3,645,000.

22 (23) For research space, San Diego, California,
23 an amount not to exceed \$4,852,000.

24 (24) For an outpatient clinic, Santa Rosa, Cali-
25 fornia, an amount not to exceed \$6,922,000.

1 (25) For a replacement mental health clinic,
2 Tampa, Florida, an amount not to exceed
3 \$13,387,000.

4 (26) For a replacement outpatient clinic, Lake-
5 land, Tampa, Florida, an amount not to exceed
6 \$10,760,000.

7 (27) For a replacement outpatient clinic, Terre
8 Haute, Indiana, an amount not to exceed
9 \$4,102,000.

10 **TITLE III—ADMINISTRATION OF**
11 **HEALTH CARE FROM NON-DE-**
12 **PARTMENT OF VETERANS AF-**
13 **FAIRS PROVIDERS**

14 **SEC. 301. MODIFICATION OF PROCESS THROUGH WHICH**
15 **DEPARTMENT OF VETERANS AFFAIRS**
16 **RECORDS OBLIGATIONS FOR NON-DEPART-**
17 **MENT CARE.**

18 (a) IN GENERAL.—Subchapter III of chapter 17 of
19 title 38, United States Code, is amended by adding at the
20 end the following new section:

21 **“§ 1730B. Recording obligations for care at non-De-**
22 **partment facilities**

23 “Notwithstanding sections 1341(a)(1) and 1501 of
24 title 31, the Secretary may record as an obligation of the
25 United States Government amounts owed for hospital care

1 or medical services furnished under this chapter at non-
2 Department facilities on the date on which a claim by a
3 health care provider for payment is approved rather than
4 on the date that the hospital care or medical services are
5 authorized by the Secretary.”.

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

“1730B. Recording obligations for care at non-Department facilities.”.

10 **SEC. 302. MODIFICATION OF REPORT ON AMOUNTS AVAIL-**
11 **ABLE UNDER VETERANS CHOICE PROGRAM.**

12 Section 101(q)(2) of the Veterans Access, Choice,
13 and Accountability Act of 2014 (Public Law 113–146; 38
14 U.S.C. 1701 note) is amended—

15 (1) in the matter preceding subparagraph (A),
16 by striking “30 days” and inserting “14 days”;

17 (2) by redesignating subparagraph (F) as sub-
18 paragraph (H); and

19 (3) by inserting after subparagraph (E) the fol-
20 lowing new subparagraphs:

21 “(F) An assessment of the rate at which
22 amounts deposited in the Veterans Choice Fund
23 have been exhausted during the 90-day period
24 preceding the submittal of the report, including
25 an identification of any major factors that are

1 causing amounts to be exhausted quickly or
2 slowly.

3 “(G) An estimate of when amounts in the
4 Veterans Choice Fund will be completely ex-
5 hausted.”.

6 **TITLE IV—OTHER MATTERS**

7 **SEC. 401. EMERGENCY DESIGNATIONS.**

8 (a) IN GENERAL.—This Act is designated as an
9 emergency requirement pursuant to section 4(g) of the
10 Statutory Pay-As-You-Go Act of 2010 (2 U.S.C. 933(g)).

11 (b) DESIGNATION IN SENATE.—In the Senate, this
12 Act is designated as an emergency requirement pursuant
13 to section 403(a) of S. Con. Res. 13 (111th Congress),
14 the concurrent resolution on the budget for fiscal year
15 2010.