

113TH CONGRESS
1ST SESSION

H. R. 635

To amend title 38, United States Code, to require the Secretary of Veterans Affairs to enter into contracts with community health care providers to improve access to health care for veterans in highly rural areas, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 13, 2013

Mr. PEARCE (for himself, Mr. TIPTON, Mr. YOUNG of Alaska, Mr. FORBES, Mr. HARRIS, Mr. HALL, Mr. MARCHANT, Mr. WILSON of South Carolina, Mr. FLORES, Mr. GOHMERT, Mr. WESTMORELAND, Mr. CONAWAY, Mr. RAHALL, Mr. JONES, Mr. GOSAR, and Mr. POSEY) introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To amend title 38, United States Code, to require the Secretary of Veterans Affairs to enter into contracts with community health care providers to improve access to health care for veterans in highly rural areas, 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 “Help Establish Access
5 to Local Timely Healthcare for Your Vets Act of 2013”
6 or the “HEALTHY Vets Act of 2013”.

1 **SEC. 2. ENHANCED CONTRACT CARE AUTHORITY FOR**
2 **HEALTH CARE NEEDS OF VETERANS IN HIGH-**
3 **LY RURAL AREAS.**

4 (a) RURAL VETERANS.—Section 1703 of title 38,
5 United States Code, is amended by adding at the end the
6 following new subsection:

7 “(e)(1) In the case of a veteran for whom Depart-
8 ment facilities are geographically inaccessible (as provided
9 in paragraph (2)), the Secretary shall use the contract au-
10 thority provided in subsection (a) for the following care:

11 “(A) Primary care.

12 “(B) Acute or chronic symptom management.

13 “(C) Nontherapeutic medical services.

14 “(D) Other medical services as determined ap-
15 propriate by the director of the appropriate geo-
16 graphic service region of the Department, after con-
17 sultation with the Department physician responsible
18 for primary care of the veteran.

19 “(2) Department facilities shall be deemed to be geo-
20 graphically inaccessible for purposes of paragraph (1) in
21 the case of a veteran whose residence meets any of the
22 following criteria:

23 “(A) The residence is in a county with a popu-
24 lation density of less than 7.0 people per square mile
25 and is more than 75 miles from the nearest Depart-
26 ment health care facility.

1 “(B) The residence is in a county with a popu-
2 lation density of more than 7.0 and less than 8.0
3 people per square mile and is more than 100 miles
4 from the nearest Department health care facility.

5 “(C) The residence is in a county with a popu-
6 lation density of more than 8.0 and less than 9.0
7 people per square mile and is more than 125 miles
8 from the nearest Department health care facility.

9 “(D) The residence is more than 150 miles
10 from the nearest Department health care facility.

11 “(3) The Secretary may waive the requirement in
12 paragraph (1) in the case of a particular veteran if the
13 Secretary demonstrates on an individual basis through a
14 cost-benefit analysis that the costs to the Department of
15 providing care to that veteran pursuant to paragraph (1)
16 significantly outweigh the benefits of localized health care
17 for the individual veteran.

18 “(4) For purposes of paragraph (2), a distance in
19 miles shall be determined on the basis of the most conven-
20 ient highway route that is available to the veteran, as de-
21 termined by the Secretary.”.

22 (b) EFFECTIVE DATE.—Subsection (e) of section
23 1703 of title 38, United States Code, as added by sub-

- 1 section (a), shall take effect on the date that is 120 days
- 2 after the date of the enactment of this Act.

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