

116TH CONGRESS
1ST SESSION

S. _____

To require the Secretary of Veterans Affairs to review the processes and requirements of the Department of Veterans Affairs for scheduling appointments for health care and conducting consultations under the laws administered by the Secretary, 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 require the Secretary of Veterans Affairs to review the processes and requirements of the Department of Veterans Affairs for scheduling appointments for health care and conducting consultations under the laws administered by the Secretary, 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 “Accountability in De-
5 partment of Veterans Affairs Scheduling and Consult
6 Management Act”.

1 **SEC. 2. PROCESSES AND REQUIREMENTS FOR SCHED-**
2 **ULING APPOINTMENTS FOR HEALTH CARE**
3 **FROM DEPARTMENT OF VETERANS AFFAIRS.**

4 (a) PROCESSES AND REQUIREMENTS.—

5 (1) IN GENERAL.—Not later than 60 days after
6 the date of the enactment of this Act, the Secretary
7 of Veterans Affairs shall submit to the Committee
8 on Veterans' Affairs of the Senate and the Com-
9 mittee on Veterans' Affairs of the House of Rep-
10 resentatives a description of the processes and re-
11 quirements of the Department of Veterans Affairs
12 for scheduling appointments for health care from the
13 Department at the medical facility level.

14 (2) PERIODIC REVISION.—

15 (A) IN GENERAL.—The Secretary may re-
16 vise the processes and requirements required
17 under paragraph (1) as the Secretary considers
18 necessary.

19 (B) SUBMITTAL TO CONGRESS.—Not later
20 than 30 days before revising the processes and
21 requirements under subparagraph (A), the Sec-
22 retary shall submit to the Committee on Vet-
23 erans' Affairs of the Senate and the Committee
24 on Veterans' Affairs of the House of Represent-
25 ative a description of those revised processes
26 and requirements, including a description of

1 any modifications to the certification and train-
2 ing under subsection (b).

3 (b) TRAINING ON PROCESSES AND REQUIRE-
4 MENTS.—

5 (1) CERTIFICATION.—Not later than one year
6 after the date of the enactment of this Act, the Sec-
7 retary shall require individuals involved in the sched-
8 uling of appointments for health care from the De-
9 partment to certify to the Secretary that the indi-
10 vidual understands the processes and requirements
11 described in subsection (a), including the maximum
12 number of days allowed to complete each step of the
13 scheduling process.

14 (2) NEW EMPLOYEES.—The Secretary shall re-
15 quire all employees hired by the Department after
16 the date of the enactment of this Act who are to be
17 involved in the scheduling of appointments for health
18 care from the Department to undergo training on
19 the processes and requirements described in sub-
20 section (a) as part of the onboarding process.

21 (c) METHOD TO MONITOR COMPLIANCE.—

22 (1) IN GENERAL.—Not later than 180 days
23 after the date of the enactment of this Act, the Sec-
24 retary shall establish or maintain a method or tool
25 to enable real-time monitoring of and ensure that

1 each medical facility of the Department complies
2 with the scheduling processes and requirements de-
3 scribed in subsection (a), including compliance with
4 policies of the Department relating to the maximum
5 number of days allowed to complete each step of the
6 scheduling process.

7 (2) USE THROUGHOUT DEPARTMENT.—

8 (A) IN GENERAL.—The Secretary shall re-
9 quire each medical facility of the Department to
10 use the method or tool described in paragraph
11 (1).

12 (B) CERTIFICATION.—Not later than one
13 year after the date of the enactment of this Act,
14 the Secretary shall require the director of each
15 medical facility of the Department to certify to
16 the Secretary that the director is using the
17 method or tool described in paragraph (1).

18 (d) COMPTROLLER GENERAL REPORT.—Not later
19 than two years after the date of the enactment of this Act,
20 the Comptroller General of the United States shall submit
21 to the Committee on Veterans' Affairs of the Senate and
22 the Committee on Veterans' Affairs of the House of Rep-
23 resentatives a report on the compliance of the Secretary
24 with the requirements of this section.

1 **SEC. 3. AUDITS REGARDING SCHEDULING OF APPOINT-**
2 **MENTS AND MANAGEMENT OF CONSULTA-**
3 **TIONS FOR HEALTH CARE FROM DEPART-**
4 **MENT OF VETERANS AFFAIRS.**

5 (a) **IN GENERAL.**—Not later than one year after the
6 date of the enactment of this Act, and not less frequently
7 than annually thereafter, the Secretary of Veterans Af-
8 fairs shall provide for the conduct of facility-level audits
9 of the scheduling of appointments and the management
10 of consultations for health care under the laws adminis-
11 tered by the Secretary.

12 (b) **ELEMENTS.**—Each audit conducted under sub-
13 section (a) shall include the following:

14 (1) With respect to each medical center of the
15 Department of Veterans Affairs, an assessment of
16 any scheduling or consultation management issues
17 at that medical center, including the following:

18 (A) An assessment of non-compliance with
19 policies of the Veterans Health Administration
20 relating to scheduling appointments and man-
21 aging consultations.

22 (B) An assessment of the extent to which
23 appointments or consultations are not timely
24 processed.

1 (C) A description of any backlogs in ap-
2 pointments or consultations that are awaiting
3 action.

4 (D) An assessment of whether consulta-
5 tions are appropriately processed.

6 (E) Data with respect to consultations as
7 follows:

8 (i) Consultations that were scheduled
9 within the request window.

10 (ii) Duplicate consultation requests.

11 (iii) Consultations that were discon-
12 tinued.

13 (iv) Delays in consultations.

14 (v) Consultations that were not prop-
15 erly closed or discontinued, including a de-
16 scription of remediation attempts.

17 (F) A review for accuracy with respect to
18 consultation management as follows:

19 (i) A review of the accuracy of the
20 type of service, either administrative or
21 clinical, that is inputted in the electronic
22 health record.

23 (ii) A review of the accuracy of the
24 type of consultation setting, either impa-

1 tient or outpatient, that is inputted in the
2 electronic health record.

3 (iii) A review of the appropriateness
4 of the level of urgency of the consultation
5 that is inputted in the electronic health
6 record.

7 (iv) A review of any delayed or unre-
8 solved consultations.

9 (2) An identification of such recommendations
10 for corrective action as the Secretary considers nec-
11 essary, including additional training, increased per-
12 sonnel, and other resources

13 (3) A certification that the director of each
14 medical center of the Department is in compliance
15 with the processes and requirements described in
16 section 2(a) and such other requirements relating to
17 the scheduling of appointments and management of
18 consultations as the Secretary considers appropriate.

19 (4) With respect to referrals for health care be-
20 tween health care providers or facilities of the De-
21 partment, a measurement of, for each medical facil-
22 ity of the Department, the time it takes from the
23 date that a clinician of the Department determines
24 that a veteran requires care from another health
25 care provider or facility to each of the following:

1 (A) The date that the referral for care is
2 sent to the other health care provider or facil-
3 ity.

4 (B) The date that the other health care
5 provider or facility accepts the referral.

6 (C) The date that the appointment with
7 the other health care provider or at the other
8 facility is made.

9 (D) The date of the appointment with the
10 other health care provider or at the other facil-
11 ity.

12 (E) Any other step that the Secretary de-
13 termines necessary to measure.

14 (c) CONDUCT OF AUDIT BY THIRD PARTY.—Each
15 audit conducted under subsection (a) with respect to a
16 medical facility of the Department shall be conducted by
17 an individual or entity that is not affiliated with the facil-
18 ity.

19 (d) TRANSMITTAL TO VHA.—Each audit conducted
20 under subsection (a) shall be transmitted to the Under
21 Secretary for Health of the Department so that the Under
22 Secretary can—

23 (1) strengthen oversight of the scheduling of
24 appointments and management of consultations
25 throughout the Department;

1 (2) monitor national policy on such scheduling
2 and management;

3 (3) determine if a mobile deployment team fur-
4 nished under the pilot program established under
5 section 402 of the VA MISSION Act of 2018 (Pub-
6 lic Law 115–182) is warranted; and

7 (4) develop a remediation plan to address issues
8 uncovered by those audits.

9 (e) ANNUAL REPORT.—

10 (1) IN GENERAL.—Not later than December 31
11 of each year, the Secretary shall submit to the Com-
12 mittee on Veterans’ Affairs of the Senate and the
13 Committee on Veterans’ Affairs of the House of
14 Representatives a report on the audits conducted
15 under subsection (a) during the year ending on that
16 date.

17 (2) ELEMENTS.—The Secretary shall include in
18 each report required by paragraph (1)—

19 (A) a description of the audits conducted
20 under subsection (a) with respect to each facil-
21 ity of the Department;

22 (B) an assessment of how the Department
23 strengthened oversight of the scheduling of ap-
24 pointments and management of consultations at
25 that facility as a result of those audits;

1 (C) an assessment of how those audits in-
2 formed the national policy of the Department
3 with respect to the scheduling of appointments
4 and management of consultations; and

5 (D) a description of any remediation plans
6 to address issues raised by those audits that
7 were completed.

8 **SEC. 4. ADMINISTRATION OF NON-DEPARTMENT OF VET-**
9 **ERANS AFFAIRS HEALTH CARE.**

10 (a) CERTIFICATION OF PROPER ADMINISTRATION.—

11 (1) REVIEW.—

12 (A) IN GENERAL.—The Secretary of Vet-
13 erans Affairs shall conduct a review of the
14 staffing, training, and other requirements nec-
15 essary to administer section 101 of the Vet-
16 erans Access, Choice, and Accountability Act of
17 2014 (Public Law 113–146; 38 U.S.C. 1701
18 note), section 1703 of title 38, United States
19 Code (as in effect on the date specified in sec-
20 tion 101(b) of the Caring for Our Veterans Act
21 of 2018 (title I of Public Law 115–182)), and
22 any other community care program of the De-
23 partment of Veterans Affairs.

1 (B) ELEMENTS.—The review conducted
2 under paragraph (1) shall include, with respect
3 to each medical facility of the Department—

4 (i) an assessment of the type of posi-
5 tions required to be staffed at the medical
6 facility;

7 (ii) the number of such positions au-
8 thorized;

9 (iii) the number of such positions
10 filled; and

11 (iv) the number of additional such po-
12 sitions required to be authorized.

13 (2) CERTIFICATION.—Not later than 180 days
14 after the date of the enactment of this Act, and
15 every 180 days thereafter, the Secretary of Veterans
16 Affairs shall submit to the Committee on Veterans'
17 Affairs of the Senate and the Committee on Vet-
18 erans' Affairs of the House of Representatives the
19 results of the review conducted under paragraph (1),
20 including a certification that all staffing, training,
21 and other requirements described in paragraph
22 (1)(A) are fulfilled.

23 (b) SCHEDULING OF APPOINTMENTS.—

24 (1) IN GENERAL.—The Secretary shall be re-
25 sponsible for ensuring that appointments for health

1 care from non-Department health care providers
2 under the laws administered by the Secretary are
3 scheduled.

4 (2) TIMELINESS GOALS.—Not later than 30
5 days after the date of the enactment of this Act, the
6 Secretary shall establish timeliness goals for each
7 step in scheduling an appointment for health care
8 from a non-Department health care provider set
9 forth under subparagraphs (A) through (F) of para-
10 graph (3).

11 (3) MEASUREMENT OF TIMELINESS FOR EACH
12 FACILITY.—Not later than 120 days after the date
13 of the enactment of this Act, the Secretary shall
14 measure, for each medical facility of the Depart-
15 ment, the time it takes from the date that a clinician
16 of the Department determines that a veteran re-
17 quires care from a non-Department health care pro-
18 vider to each of the following:

19 (A) The date that the referral for care is
20 sent to the non-Department health care pro-
21 vider.

22 (B) The date that the non-Department
23 health care provider accepts the referral.

1 (C) The date that the appointment with
2 the non-Department health care provider is
3 made.

4 (D) The date that the appointment with
5 the non-Department health care provider oc-
6 curs.

7 (E) The date that the referral to the non-
8 Department health care provider is completed.

9 (F) Any other step that the Secretary de-
10 termines necessary to measure.

11 (4) PUBLICATION OF DATA.—

12 (A) IN GENERAL.—Not later than one year
13 after the date of the enactment of this Act, the
14 Secretary shall publish the data measured
15 under paragraph (3), disaggregated by medical
16 facility, on a publicly available Internet website
17 of the Department.

18 (B) UPDATE.—Not less frequently than bi-
19 weekly, the Secretary shall update the data
20 published under subparagraph (A).

21 (c) COMPTROLLER GENERAL REPORT.—

22 (1) REVIEW.—Beginning not later than one
23 year after the date of the enactment of this Act, the
24 Comptroller General of the United States shall re-
25 view compliance by the Secretary with the require-

1 ments of this section, including a review of the valid-
2 ity and reliability of data published by the Secretary
3 under subsection (b)(4).

4 (2) COMPLETION.—Not later than three years
5 after the date of the enactment of this Act, the
6 Comptroller General shall submit to the Committee
7 on Veterans' Affairs of the Senate and the Com-
8 mittee on Veterans' Affairs of the House of Rep-
9 resentatives the results of the review conducted
10 under paragraph (1).

11 **SEC. 5. REQUESTS FOR MOBILE DEPLOYMENT TEAMS BY**
12 **DIRECTORS OF MEDICAL CENTERS OF DE-**
13 **PARTMENT OF VETERANS AFFAIRS.**

14 (a) IN GENERAL.—A director of a medical center of
15 the Department of Veterans Affairs shall request from the
16 Secretary of Veterans Affairs a mobile deployment team
17 under the pilot program established under section 402 of
18 the VA MISSION Act of 2018 (Public Law 115–182) if
19 requirements of the Department under sections 2 and 4
20 have not been met with respect to a facility under the ju-
21 risdiction of the director.

22 (b) REPORT.—Not less frequently than once every
23 180 days, the Secretary shall submit to the appropriate
24 committees of Congress a report setting forth each request
25 under subsection (a) during the period covered by the re-

1 port, including an explanation of why a mobile deployment
2 team was or was not provided, as the case may be.

3 (c) APPROPRIATE COMMITTEES OF CONGRESS DE-
4 FINED.—In this section, the term “appropriate commit-
5 tees of Congress” means—

6 (1) the Committee on Veterans’ Affairs and the
7 Committee on Appropriations of the Senate; and

8 (2) the Committee on Veterans’ Affairs and the
9 Committee on Appropriations of the House of Rep-
10 resentatives.

11 **SEC. 6. EXAMINATION OF HEALTH CARE CONSULTATION**
12 **AND SCHEDULING POSITIONS OF DEPART-**
13 **MENT OF VETERANS AFFAIRS.**

14 (a) PROPER GRADING OF CONSULTATION AND
15 SCHEDULING POSITIONS.—

16 (1) IN GENERAL.—The Secretary of Veterans
17 Affairs shall conduct an examination of health care
18 positions of the Department of Veterans Affairs to
19 determine whether health care positions involved in
20 the consultation and scheduling processes are appro-
21 priately graded.

22 (2) CONSULTATION.—In conducting the exam-
23 ination under paragraph (1), the Secretary shall
24 consult with health care staffing experts in the Fed-
25 eral Government and the private sector.

1 (3) SUBMITTAL TO CONGRESS.—Not later than
2 120 days after the date of the enactment of this Act,
3 the Secretary shall submit to the appropriate com-
4 mittees of Congress the results of the examination
5 conducted under paragraph (1).

6 (b) REVIEW OF ONBOARDING PROCESS.—Not later
7 than 180 days after the date of the enactment of this Act,
8 the Secretary shall submit to the appropriate committees
9 of Congress—

10 (1) a review of the onboarding process of indi-
11 viduals in health care positions described in sub-
12 section (a), including how long it takes to hire those
13 individuals; and

14 (2) a description of any changes that the Sec-
15 retary has made or plans to make to improve that
16 process.

17 (c) APPROPRIATE COMMITTEES OF CONGRESS DE-
18 FINED.—In this section, the term “appropriate commit-
19 tees of Congress” means—

20 (1) the Committee on Veterans’ Affairs and the
21 Committee on Appropriations of the Senate; and

22 (2) the Committee on Veterans’ Affairs and the
23 Committee on Appropriations of the House of Rep-
24 resentatives.