

116TH CONGRESS 1ST SESSION

H. R. 4858

To require the Secretary of Veterans Affairs to enter into a contract or other agreement with a third party to review appointees in the Veterans Health Administration who had a license terminated for cause by a State licensing board for care or services rendered at a non-Veterans Health Administration facility and to provide individuals treated by such an appointee with notice if it is determined that an episode of care or services to which they received was below the standard of care, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

OCTOBER 24, 2019

Mr. NORMAN (for himself and Mr. Hudson) introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To require the Secretary of Veterans Affairs to enter into a contract or other agreement with a third party to review appointees in the Veterans Health Administration who had a license terminated for cause by a State licensing board for care or services rendered at a non-Veterans Health Administration facility and to provide individuals treated by such an appointee with notice if it is determined that an episode of care or services to which they received was below the standard of care, 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 "Ensuring Quality Care
5	for Our Veterans Act''.
6	SEC. 2. THIRD-PARTY REVIEW OF APPOINTEES IN VET-
7	ERANS HEALTH ADMINISTRATION WHO HAD
8	A LICENSE TERMINATED FOR CAUSE AND NO-
9	TICE TO INDIVIDUALS TREATED BY THOSE
10	APPOINTEES IF DETERMINED THAT AN EPI-
11	SODE OF CARE OR SERVICES TO WHICH THEY
12	RECEIVED WAS BELOW THE STANDARD OF
13	CARE.
1314	CARE. (a) Third-Party Review.—
14	(a) Third-Party Review.—
14 15	(a) Third-Party Review.— (1) In general.—Not later than 180 days
141516	(a) Third-Party Review.—(1) In general.—Not later than 180 days after the date of the enactment of this Act, the Sec-
14151617	 (a) Third-Party Review.— (1) In General.—Not later than 180 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall enter into a contract
14 15 16 17 18	(a) Third-Party Review.— (1) In general.—Not later than 180 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall enter into a contract or other agreement with an organization that is not
14 15 16 17 18 19	(a) Third-Party Review.— (1) In General.—Not later than 180 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall enter into a contract or other agreement with an organization that is not part of the Federal Government to conduct a clinical
14 15 16 17 18 19 20	(a) Third-Party Review.— (1) In general.—Not later than 180 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall enter into a contract or other agreement with an organization that is not part of the Federal Government to conduct a clinical review for quality management of hospital care or
14 15 16 17 18 19 20 21	(a) Third-Party Review.— (1) In General.—Not later than 180 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall enter into a contract or other agreement with an organization that is not part of the Federal Government to conduct a clinical review for quality management of hospital care or medical services furnished by covered providers.

1	licensed in the same specialty as the covered pro-
2	vider.
3	(b) Notice to Patients Treated by Covered
4	PROVIDERS.—With respect to hospital care or medical
5	services furnished by a covered provider under the laws
6	administered by the Secretary, if a clinical review for qual-
7	ity management under subsection (a) determines that the
8	standard of care was not met during an episode of care,
9	the Secretary shall notify the individual who received such
10	care or services from the covered provider as described in
11	applicable policy of the Veterans Heath Administration.
12	(e) Definitions.—In this section:
13	(1) COVERED PROVIDER.—The term "covered
14	provider" means an individual who—
15	(A) was appointed to the Veterans Health
16	Administration under section 7401 of title 38,
17	United States Code; and
18	(B) had a license terminated for cause by
19	a State licensing board for hospital care or
20	medical services provided in a facility that is
21	not a facility of the Veterans Health Adminis-
22	tration.
23	(2) Hospital care or medical services.—
24	The terms "hospital care" and "medical services"

- 1 have the meanings given those terms in section 1701
- of title 38, United States Code.

 \bigcirc