

115TH CONGRESS
2D SESSION

H. R. 6066

To amend title 38, United States Code, to improve the productivity of the management of Department of Veterans Affairs health care, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JUNE 8, 2018

Mr. WENSTRUP introduced the following bill; which was referred to the
Committee on Veterans' Affairs

A BILL

To amend title 38, United States Code, to improve the productivity of the management of Department of Veterans Affairs health 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. DEPARTMENT OF VETERANS AFFAIRS HEALTH**
4 **CARE PRODUCTIVITY IMPROVEMENT.**

5 (a) IN GENERAL.—Subchapter I of chapter 17 of title
6 38, United States Code, is amended by inserting after sec-
7 tion 1705A the following new section:

1 **“§ 1705B. Management of health care: productivity**

2 “(a) RELATIVE VALUE UNIT TRACKING.—The Sec-
3 retary shall track relative value units for all Department
4 providers.

5 “(b) CLINICAL PROCEDURE CODING TRAINING.—
6 The Secretary shall require all Department providers to
7 attend training on clinical procedure coding.

8 “(c) PERFORMANCE STANDARDS.—(1) The Secretary
9 shall establish for each Department facility—

10 “(A) in accordance with paragraph (2), stand-
11 ardized performance standards based on nationally
12 recognized relative value unit production standards
13 applicable to each specific profession in order to
14 evaluate clinical productivity at the provider and fa-
15 cility level;

16 “(B) remediation plans to address low clinical
17 productivity and clinical inefficiency; and

18 “(C) an ongoing process to systematically re-
19 view the content, implementation, and outcome of
20 the plans developed under subparagraph (B).

21 “(2) In establishing the performance standards under
22 paragraph (1)(A), the Secretary may—

23 “(A) incorporate values-based productivity mod-
24 els; and

25 “(B) take into account non-clinical duties, in-
26 cluding with respect to training and research.

1 “(d) DEFINITIONS.—In this section:

2 “(1) The term ‘Department provider’ means an
3 employee of the Department whose primary respon-
4 sibilities include furnishing hospital care or medical
5 services, including a physician, a dentist, an optom-
6 etrist, a podiatrist, a chiropractor, an advanced
7 practice registered nurse, and a physician’s assistant
8 acting as an independent provider.

9 “(2) The term ‘relative value unit’ means a unit
10 for measuring workload by determining the time,
11 mental effort and judgment, technical skill, physical
12 effort, and stress involved in delivering a proce-
13 dure.”.

14 (b) CLERICAL AMENDMENT.—The table of sections
15 at the beginning of such chapter is amended by inserting
16 after the item relating to section 1705A the following new
17 item:

“1705B. Management of health care: productivity.”.

18 (c) REPORT.—Not later than one year after the date
19 of the enactment of this Act, the Secretary of Veterans
20 Affairs shall submit to Congress a report on the implemen-
21 tation of section 1705B of title 38, United States Code,
22 as added by subsection (a). Such report shall include, for
23 each professional category of Department of Veterans Af-
24 fairs providers, the relative value unit of such category of

- 1 providers at the national, Veterans Integrated Service
- 2 Network, and facility levels.

