

REFERENCES IN TEXT

Public Law 87-693, popularly known as the Federal Medical Care Recovery Act, referred to in subsec. (b)(10), is Pub. L. 87-693, Sept. 25, 1962, 76 Stat. 593, which is classified generally to chapter 32 (§2651 et seq.) of Title 42, The Public Health and Welfare. For complete classification of this Act to the Code, see Tables.

AMENDMENTS

2003—Subsec. (b). Pub. L. 108-183, §708(a)(2)(A), struck out “after June 30, 1997,” after “collected” in introductory provisions.

Subsec. (b)(8) to (10). Pub. L. 108-7 added pars. (8) and (9) and redesignated former par. (8) as (10).

Subsec. (c)(3). Pub. L. 108-183, §708(a)(2)(B), struck out par. (3) which related to duties of the Secretary for fiscal year 1998.

Subsecs. (e), (f). Pub. L. 108-183, §708(a)(2)(C), (D), redesignated subsec. (f) as (e) and struck out former subsec. (e) which required the Secretary to submit to the Committees on Veterans' Affairs of the Senate and House of Representatives quarterly reports on the operation of the section for fiscal years 1998, 1999, and 2000 and for the first quarter of fiscal year 2001.

2002—Subsec. (b)(7), (8). Pub. L. 107-135 added par. (7) and redesignated former par. (7) as (8).

1999—Subsec. (b)(5) to (7). Pub. L. 106-117, §111(b)(1), added par. (5) and redesignated former pars. (5) and (6) as (6) and (7), respectively.

Subsec. (d). Pub. L. 106-117, §203, struck out par. (1) designation, substituted “each Department health care facility” for “each designated health care region” and “each facility” for “each region”, substituted “such facility” for “such region” in two places, and struck out par. (2) which read as follows: “In this subsection, the term ‘designated health care regions of the Department’ means the geographic areas designated by the Secretary for purposes of the management of, and allocation of resources for, health care services provided by the Department.”

EFFECTIVE DATE OF 1999 AMENDMENT

Amendment by section 111(b)(1) of Pub. L. 106-117 effective 180 days after Nov. 30, 1999, see section 111(c) of Pub. L. 106-117, set out as an Effective Date note under section 1725 of this title.

EFFECTIVE DATE

Section effective Oct. 1, 1997, see section 8023(g) of Pub. L. 105-33, set out as an Effective Date of 1997 Amendment note under section 1710 of this title.

MEDICAL SERVICES ACCOUNTS

Pub. L. 108-447, div. I, title I, §115, Dec. 8, 2004, 118 Stat. 3293, provided that:

“(a) Hereafter receipts that would otherwise be credited to the accounts listed in subsection (c) shall be deposited into the Medical Care Collections Fund, and shall be transferred to and merged with the ‘Medical services’ account, in fiscal year 2005 and subsequent years, to remain available until expended, to carry out the purposes of the ‘Medical services’ account.

“(b) The unobligated balances in the accounts listed in subsection (c), shall be transferred to and merged with the ‘Medical services’ account in fiscal year 2005 and subsequent years, and remain available until expended, to carry out the purposes of the ‘Medical services’ account: *Provided*, That the obligated balances in these accounts may be transferred to the ‘Medical services’ account at the discretion of the Secretary of Veterans Affairs and shall remain available until expended.

“(c) Veterans Extended Care Revolving Fund; Medical Facilities Revolving Fund; Special Therapeutic and Rehabilitation Fund; Nursing Home Revolving Fund; Veterans Health Services Improvement Fund; and Parking Revolving Fund.”

Similar provisions were contained in the following prior appropriation act:

Pub. L. 108-199, div. G, title I, §115, Jan. 23, 2004, 118 Stat. 370.

REPORT ON IMPLEMENTATION OF SECTION 8023 OF
PUB. L. 105-33

Section 8023(f) of Pub. L. 105-33 provided that: “Not later than January 1, 1999, the Secretary of Veterans Affairs shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report on the implementation of this section [enacting this section, amending sections 712, 1710, 1722A, and 1729 of this title, and enacting provisions set out as notes under sections 712 and 1729 of this title]. The report shall describe the collections under each of the provisions specified in section 1729A(b) of title 38, United States Code, as added by subsection (a). Information on such collections shall be shown for each of the health service networks (known as Veterans Integrated Service Networks) and, to the extent practicable for each facility within each such network. The Secretary shall include in the report an analysis of differences among the networks with respect to (A) the market in which the networks operates, (B) the effort expended to achieve collections, (C) the efficiency of such effort, and (D) any other relevant information.”

§ 1729B. Repealed. Pub. L. 108-7, div. K, title I, § 113(a)(1), Feb. 20, 2003, 117 Stat. 482]

Section, added Pub. L. 106-117, title II, §202(a), Nov. 30, 1999, 113 Stat. 1561; amended Pub. L. 107-103, title V, §509(c), Dec. 27, 2001, 115 Stat. 997; Pub. L. 107-330, title III, §308(g)(7), Dec. 6, 2002, 116 Stat. 2829, related to the Department of Veterans Affairs Health Services Improvement Fund.

TRANSFER OF BALANCE

Pub. L. 108-7, div. K, title I, §113(a)(1), Feb. 20, 2003, 117 Stat. 482, provided that: “Section 1729B of title 38, United States Code, is repealed. Any balance as of the date of the enactment of this Act [Feb. 20, 2003] in the Department of Veterans Affairs Health Services Improvement Fund established under such section shall be transferred to the Department of Veterans Affairs Medical Care Collections Fund established under section 1729A of title 38, United States Code.”

§ 1730. Community residential care

(a) Subject to this section and regulations to be prescribed by the Secretary under this section, the Secretary may assist a veteran by referring such veteran for placement in, and aiding such veteran in obtaining placement in, a community residential-care facility if—

(1) at the time of initiating the assistance the Secretary—

(A) is furnishing the veteran medical services on an outpatient basis or hospital, domiciliary, or nursing home care; or

(B) has furnished the veteran such care or services within the preceding 12 months; and

(2) placement of the veteran in a community residential-care facility is appropriate.

(b)(1) The Secretary may not provide assistance under subsection (a) of this section with respect to a community residential-care facility unless such facility is approved by the Secretary for the purposes of this section.

(2) The Secretary's approval of a facility for the purposes of this section shall be based upon the Secretary's determination, after inspection of the facility, that the facility meets the standards established in regulations prescribed under this section. Such standards shall include the following: