

115TH CONGRESS  
1ST SESSION

# H. R. 2123

---

IN THE SENATE OF THE UNITED STATES

NOVEMBER 8, 2017

Received; read twice and referred to the Committee on Veterans' Affairs

---

## AN ACT

To amend title 38, United States Code, to improve the ability of health care professionals to treat veterans through the use of telemedicine, 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,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Veterans E-Health and  
3 Telemedicine Support Act of 2017” or the “VETS Act  
4 of 2017”.

5 **SEC. 2. LICENSURE OF HEALTH CARE PROFESSIONALS OF**  
6 **THE DEPARTMENT OF VETERANS AFFAIRS**  
7 **PROVIDING TREATMENT VIA TELEMEDICINE.**

8 (a) IN GENERAL.—Chapter 17 of title 38, United  
9 States Code, is amended by inserting after section 1730A  
10 the following new section:

11 **“§ 1730B. Licensure of health care professionals pro-**  
12 **viding treatment via telemedicine**

13 “(a) IN GENERAL.—Notwithstanding any provision  
14 of law regarding the licensure of health care professionals,  
15 a covered health care professional may practice the health  
16 care profession of the health care professional at any loca-  
17 tion in any State, regardless of where the covered health  
18 care professional or the patient is located, if the covered  
19 health care professional is using telemedicine to provide  
20 treatment to an individual under this chapter.

21 “(b) PROPERTY OF FEDERAL GOVERNMENT.—Sub-  
22 section (a) shall apply to a covered health care professional  
23 providing treatment to a patient regardless of whether the  
24 covered health care professional or patient is located in  
25 a facility owned by the Federal Government during such  
26 treatment.

1       “(c) CONSTRUCTION.—Nothing in this section may  
2 be construed to remove, limit, or otherwise affect any obli-  
3 gation of a covered health care professional under the Con-  
4 trolled Substances Act (21 U.S.C. 801 et seq.).

5       “(d) COVERED HEALTH CARE PROFESSIONAL DE-  
6 FINED.—In this section, the term ‘covered health care pro-  
7 fessional’ means a health care professional who—

8               “(1) is an employee of the Department ap-  
9 pointed under the authority under sections 7306,  
10 7401, 7405, 7406, or 7408 of this title, or title 5;

11              “(2) is authorized by the Secretary to provide  
12 health care under this chapter;

13              “(3) is required to adhere to all quality stand-  
14 ards relating to the provision of telemedicine in ac-  
15 cordance with applicable policies of the Department;  
16 and

17              “(4) has an active, current, full, and unre-  
18 stricted license, registration, or certification in a  
19 State to practice the health care profession of the  
20 health care professional.”.

21       (b) CLERICAL AMENDMENT.—The table of sections  
22 at the beginning of chapter 17 of such title is amended  
23 by inserting after the item relating to section 1730A the  
24 following new item:

“1730B. Licensure of health care professionals providing treatment via telemedi-  
cine.”.

1 (c) REPORT ON TELEMEDICINE.—

2 (1) IN GENERAL.—Not later than 1 year after  
3 the date of the enactment of this Act, the Secretary  
4 of Veterans Affairs shall submit to the Committee  
5 on Veterans' Affairs of the Senate and the Com-  
6 mittee on Veterans' Affairs of the House of Rep-  
7 resentatives a report on the effectiveness of the use  
8 of telemedicine by the Department of Veterans Af-  
9 fairs.

10 (2) ELEMENTS.—The report required by para-  
11 graph (1) shall include an assessment of the fol-  
12 lowing:

13 (A) The satisfaction of veterans with tele-  
14 medicine furnished by the Department.

15 (B) The satisfaction of health care pro-  
16 viders in providing telemedicine furnished by  
17 the Department.

18 (C) The effect of telemedicine furnished by  
19 the Department on the following:

20 (i) The ability of veterans to access  
21 health care, whether from the Department  
22 or from non-Department health care pro-  
23 viders.

24 (ii) The frequency of use by veterans  
25 of telemedicine.

1 (iii) The productivity of health care  
2 providers.

3 (iv) Wait times for an appointment  
4 for the receipt of health care from the De-  
5 partment.

6 (v) The reduction, if any, in the use  
7 by veterans of in-person services at De-  
8 partment facilities and non-Department fa-  
9 cilities.

10 (D) The types of appointments for the re-  
11 ceipt of telemedicine furnished by the Depart-  
12 ment that were provided during the 1-year pe-  
13 riod preceding the submittal of the report.

14 (E) The number of appointments for the  
15 receipt of telemedicine furnished by the Depart-  
16 ment that were requested during such period,  
17 disaggregated by Veterans Integrated Service  
18 Network.

19 (F) Savings by the Department, if any, in-  
20 cluding travel costs, of furnishing health care

1 through the use of telemedicine during such pe-  
2 riod.

Passed the House of Representatives November 7,  
2017.

Attest:

KAREN L. HAAS,

*Clerk.*