

HR 2516 - VETS Act of 2015

Rep. Rangel (D-NY), Thompson (R-PA), Pocan (D-WI), Lowenthal (D-CA), Thompson (D-CA), Kelly (R-PA), Rush (D-IL), Jones (R-NC), Bordallo (D-Guam), Serrano (D-NY), Polis (D-CO), Capps (D-CA), McDermott (D-WA)

<u>Author Intent</u>: To improve the ability of health care professionals to treat veterans via telemedicine.

BILL DRAFT CURRENT LAW

Allows a VA-employed or contracted health care professional to practice at any location in any state, DC, commonwealth, territory, or possession of the United States, regardless of patient or health professional location, if telemedicine is used.

This shall apply regardless of whether or not the patient or health care professional is located in a facility owned by the federal government.

Defines "telemedicine" as: "The use of telecommunication technology and information technology to support the provision of health care in situations where the patient and health care professional are separated by geographic distance."

State licensing laws prevent healthcare professionals from practicing outside of a federal facility in a state where they are not licensed.

Telemedicine is defined in Public Law 112-154 (Honoring America's Veterans and Caring for Camp Lejeune Families Act of 2012) as follows: "Telemedicine means the use by a health care provider of telecommunications to assist in the diagnosis or treatment of a patient's medical condition."

Impact and Analysis

If passed, this bill would allow health care professionals who are employed by, or have contracts with, the Department of Veterans Affairs (VA) to be able to treat VA patients in any state using telemedicine, even if neither the provider nor the patient is physically located in a facility owned by the federal government. Healthcare professionals are currently restricted from doing this because state licensing laws prevent them from practicing outside of a federal facility in a state where they are not licensed. If passed, HR 2516 would create an exception when telemedicine is used to deliver services.

The Secretary presently reimburses for health care services received by eligible veterans at non-department facilities, but only when it is for emergency treatment (38 USC Sec. 1725).

This will only impact the VA, and in no way affects licensure requirements for health care professionals not employed or contracting with the VA, or for any non-VA patients that they may have.

This bill also uses a new definition of telemedicine which is inclusive of both "telecommunication and information technology."