

113TH CONGRESS  
2D SESSION

# S. 2009

To improve the provision of health care by the Department of Veterans Affairs to veterans in rural and highly rural areas, and for other purposes.

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IN THE SENATE OF THE UNITED STATES

FEBRUARY 10, 2014

Mr. UDALL of New Mexico (for himself and Mr. HELLER) introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

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## A BILL

To improve the provision of health care by the Department of Veterans Affairs to veterans in rural and highly rural areas, 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 “Rural Veterans Im-  
5 provement Act of 2014”.

1 **SEC. 2. PROVISION OF MENTAL HEALTH CARE TO CERTAIN**  
2 **VETERANS IN RURAL AND HIGHLY RURAL**  
3 **AREAS.**

4 (a) **IN GENERAL.**—The Secretary of Veterans Affairs  
5 shall provide mental health care to eligible veterans de-  
6 scribed in subsection (c) for which a determination has  
7 been made under subsection (d).

8 (b) **USE OF OTHER PROVIDERS.**—

9 (1) **IN GENERAL.**—The Secretary may provide  
10 mental health care under this section by contracting  
11 with or providing payments to mental health care  
12 providers that are not otherwise affiliated with the  
13 Department of Veterans Affairs and shall, to the ex-  
14 tent feasible, use health care resources pursuant to  
15 existing arrangements, contracts, or agreements en-  
16 tered into under section 8153 of title 38, United  
17 States Code.

18 (2) **PAYMENTS.**—The Secretary may not pro-  
19 vide payments described in paragraph (1) that ex-  
20 ceed the amount that the Secretary would otherwise  
21 expend in providing similar mental health care  
22 through the Department or under such existing ar-  
23 rangements, contracts, or agreements.

24 (c) **ELIGIBLE VETERANS.**—An eligible veteran de-  
25 scribed in this subsection is a veteran that—

1           (1) has a mental health issue resulting from  
2 post-traumatic stress disorder, traumatic brain in-  
3 jury, or any other health condition that was incurred  
4 or aggravated in line of duty in the active military,  
5 naval, or air service; and

6           (2) lives in a rural area or highly rural area.

7           (d) DETERMINATION.—The Secretary shall provide  
8 the care required by subsection (a) to an eligible veteran  
9 if the Secretary determines any of the following:

10           (1)(A) A mental health care provider affiliated  
11 with the Department is not available to provide men-  
12 tal health care services to the eligible veteran at the  
13 medical facility of the Department that is nearest to  
14 the residence of the eligible veteran; and

15           (B)(i) in-person and telehealth mental health  
16 care services from the Department are not available  
17 to the eligible veteran;

18           (ii) the eligible veteran requests that a mental  
19 health care provider affiliated with the Department  
20 provide mental health care services to the eligible  
21 veteran in private and the provider is unable or un-  
22 willing to do so; or

23           (iii) travel by the eligible veteran to a regional  
24 medical center of the Department is impractical or

1 severely detrimental to the health of the eligible vet-  
2 eran.

3 (2) That—

4 (A)(i) a mental health care provider affili-  
5 ated with the Department has recommended  
6 that a complementary and alternative therapy  
7 approved by the Food and Drug Administration  
8 be administered to the eligible veteran;

9 (ii) the eligible veteran is a member of an  
10 Indian tribe or a Native Hawaiian and requests  
11 a healing method that is a cultural tradition of  
12 the eligible veteran; or

13 (iii) a mental health care provider has rec-  
14 ommended a treatment for the eligible veteran  
15 that, based on the medical knowledge of the  
16 health care provider, is safe and would assist  
17 the eligible veteran in coping with post-trau-  
18 matic stress disorder, traumatic brain injury, or  
19 another mental health issue; and

20 (B)(i) the eligible veteran has not received  
21 the therapy, healing method, or treatment de-  
22 scribed in subparagraph (A) because of the in-  
23 accessibility or unavailability of such treatment  
24 from a medical facility of the Department; and

1 (ii) the eligible veteran, as a result of the  
2 mental health condition of the eligible veteran—

3 (I) cannot work or maintain employ-  
4 ment;

5 (II) is at increased risk of doing phys-  
6 ical harm to the eligible veteran or others;  
7 or

8 (III) cannot adequately manage activi-  
9 ties of daily life.

10 (e) INDIAN TRIBE DEFINED.—In this section, the  
11 term “Indian tribe” has the meaning given that term in  
12 section 4 of the Indian Self-Determination and Education  
13 Assistance Act (25 U.S.C. 450b).

14 **SEC. 3. REPORT ON EFFECTIVENESS OF COMPLEMENTARY**  
15 **AND ALTERNATIVE MEDICINE IN TREATING**  
16 **VETERANS WITH CERTAIN MENTAL ILL-**  
17 **NESSSES.**

18 Not later than one year after the date of the enact-  
19 ment of this Act, the Secretary of Veterans Affairs shall  
20 submit to the Committee on Veterans’ Affairs of the Sen-  
21 ate and the Committee on Veterans’ Affairs of the House  
22 of Representatives a report on the effectiveness of com-  
23plementary and alternative medicine used by the Depart-  
24ment of Veterans Affairs in treating veterans with mental  
25 health conditions resulting from post-traumatic stress dis-

1 order, traumatic brain injury, or any other health condi-  
2 tion that was incurred or aggravated in line of duty in  
3 the active military, naval, or air service.

4 **SEC. 4. GRANTS TO PROVIDE TRANSPORTATION TO COM-**  
5 **MUNITY-BASED OUTPATIENT CLINICS FOR**  
6 **VETERANS IN RURAL AND HIGHLY RURAL**  
7 **AREAS.**

8 (a) GRANTS AUTHORIZED.—

9 (1) IN GENERAL.—The Secretary of Veterans  
10 Affairs may award grants to eligible entities to pro-  
11 vide transportation to veterans in rural and highly  
12 rural areas who would otherwise be eligible for reim-  
13 bursement for or payment of travel expenses by the  
14 Department of Veterans Affairs pursuant to section  
15 111 or section 111A of title 38, United States Code.

16 (2) MAXIMUM AMOUNT.—The Secretary may  
17 not award a grant under this section in an amount  
18 that exceeds \$100,000.

19 (3) NO MATCHING REQUIRED.—The Secretary  
20 may not require that an eligible entity provide a con-  
21 tribution of funds as a condition of receiving the  
22 grant.

23 (b) ELIGIBLE ENTITIES.—The Secretary may award  
24 grants under this section to any of the following entities:

25 (1) State veterans agencies.

1           (2) Veterans service organizations.

2           (3) Tribal organizations.

3           (c) USE OF GRANTS.—Eligible entities in receipt of  
4 a grant under this section may use the grant amount as  
5 follows:

6           (1) To provide transportation to veterans in  
7 rural and highly rural areas to and from medical  
8 centers of the Department of Veterans Affairs, in-  
9 cluding transportation by air or sea if necessary.

10          (2) To otherwise assist veterans in rural and  
11 highly rural areas with transportation in connection  
12 with the provision of medical care to those veterans,  
13 including transportation by air or sea if necessary.

14          (d) APPLICATION.—

15          (1) IN GENERAL.—Each eligible entity seeking  
16 a grant under this section shall submit an applica-  
17 tion to the Secretary at such time, in such manner,  
18 and accompanied by such information as the Sec-  
19 retary may require.

20          (2) CONTENTS.—Each application submitted  
21 pursuant to paragraph (1) shall contain a proposal  
22 for the manner in which the eligible entity seeks to  
23 provide the transportation described in subsection  
24 (a).

1 (e) PRIORITY.—The Secretary shall give priority in  
2 the awarding of grants under this section to applications  
3 submitted under subsection (d) that contain proposals  
4 that comply with section 504 of the Rehabilitation Act of  
5 1973 (29 U.S.C. 794) and regulations issued by the Sec-  
6 retary of Transportation under such section 504.

7 (f) DEFINITIONS.—In this section:

8 (1) TRIBAL ORGANIZATION.—The term “tribal  
9 organization” has the meaning given that term in  
10 section 4 of the Indian Self-Determination and Edu-  
11 cation Assistance Act (25 U.S.C. 450b).

12 (2) VETERANS SERVICE ORGANIZATION.—The  
13 term “veterans service organization” means an orga-  
14 nization recognized by the Secretary of Veterans Af-  
15 fairs for the representation of veterans under section  
16 5902 of title 38, United States Code.

17 **SEC. 5. PILOT PROGRAM ON HOUSING ALLOWANCES FOR**  
18 **HEALTH CARE PROVIDERS OF THE DEPART-**  
19 **MENT OF VETERANS AFFAIRS ACCEPTING AS-**  
20 **SIGNMENT AT RURAL AND HIGHLY RURAL**  
21 **COMMUNITY-BASED OUTPATIENT CLINICS.**

22 (a) PILOT PROGRAM AUTHORIZED.—The Secretary  
23 of Veterans Affairs may carry out a pilot program to as-  
24 sess the feasibility and advisability of providing a housing  
25 allowance to health care providers of the Department of



1 Veterans Affairs who accept assignment at rural or highly  
2 rural community-based outpatient clinics as a means of  
3 encouraging such health care providers to accept assign-  
4 ment to such clinics.

5 (b) ELIGIBILITY.—An individual is eligible for par-  
6 ticipation in the pilot program if the individual—

7 (1) is a health care provider;

8 (2) is, or agrees to become, an employee of the  
9 Veterans Health Administration on a full-time basis  
10 in a health care position designated by the Secretary  
11 for purposes of the pilot program; and

12 (3) accepts an assignment in such position for  
13 a term of not less than 36 months at a rural or  
14 highly rural community-based outpatient clinic se-  
15 lected by the Secretary for purposes of the pilot pro-  
16 gram.

17 (c) CONDITIONS ON PAYMENT OF HOUSING ALLOW-  
18 ANCE.—Except as provided in subsection (d)(3), an indi-  
19 vidual may be provided a housing allowance under the  
20 pilot program only while—

21 (1) in good standing as a health care provider  
22 within the Veterans Health Administration; and

23 (2) assigned as a health care provider at a rural  
24 or highly rural community-based outpatient clinic.

25 (d) AMOUNT OF HOUSING ALLOWANCE.—

1           (1) MONTHLY AMOUNT DURING INITIAL  
2 TERM.—During the first 36 months of participation  
3 in the pilot program, the housing allowance provided  
4 a health care provider participating in the pilot pro-  
5 gram shall be provided on a monthly basis at a rate  
6 that is equivalent to the monthly rate of basic allow-  
7 ance for housing (BAH) payable under section 403  
8 of title 37, United States Code, to members of the  
9 uniformed services whose grade, dependency status,  
10 and geographic location most closely equals, as de-  
11 termined by the Secretary, the grade of such pro-  
12 vider under section 7404 of title 38, United States  
13 Code, and the dependency status and geographic lo-  
14 cation of such provider.

15           (2) MONTHLY AMOUNT FOR CERTAIN PRO-  
16 VIDERS FOR ADDITIONAL TERM.—If upon comple-  
17 tion of the first 36 months in the pilot program a  
18 health care provider accepts continuing participation  
19 in the pilot program at a rural or highly rural com-  
20 munity-based outpatient clinic for a term of not less  
21 than 12 additional months, the housing allowance  
22 provided the health care provider under the pilot  
23 program shall be provided on a monthly basis for  
24 such additional months at a rate determined in ac-  
25 cordance with paragraph (1).

1 (3) BONUS AMOUNT.—

2 (A) COMPLETION OF INITIAL TERM.—Any  
3 health care provider who successfully completes  
4 36 months of participation in the pilot program  
5 shall be paid upon completion of participation  
6 in the pilot program an amount equal to three  
7 months of the monthly rate of housing allow-  
8 ance provided the health care provider under  
9 paragraph (1) during the last month before the  
10 provider's completion of participation in the  
11 pilot program.

12 (B) COMPLETION OF ADDITIONAL ONE-  
13 YEAR TERM.—Any health care provider who  
14 successfully completes 48 months of participa-  
15 tion in the pilot program shall be paid upon  
16 completion of participation in the pilot program  
17 an amount equal to 12 months of the monthly  
18 rate of housing allowance provided the health  
19 care provider under paragraph (2) during the  
20 last month before the provider's completion of  
21 participation in the pilot program.

22 (C) COMPLETION OF ADDITIONAL TWO-  
23 YEAR TERM.—Any health care provider who  
24 successfully completes 60 months of participa-  
25 tion in the pilot program shall be paid upon

1 completion of participation in the pilot program  
2 an amount equal to 13 months of the monthly  
3 rate of housing allowance provided the health  
4 care provider under paragraph (2) during the  
5 last month before the provider's completion of  
6 participation in the pilot program.

7 (D) NO REQUIREMENT TO REMAIN ON AS-  
8 SIGNMENT.—An amount payable under this  
9 paragraph shall be paid whether or not the  
10 health care provider concerned remains in an  
11 assignment at a rural or highly rural commu-  
12 nity-based outpatient clinic.

13 (e) NATURE OF ALLOWANCE.—

14 (1) SUPPLEMENTAL AMOUNT.—Any housing al-  
15 lowance provided under the pilot program shall be in  
16 addition to any pay (including basic pay, special pay,  
17 and retirement or other bonus pay) payable to per-  
18 sonnel of the Veterans Health Administration per-  
19 sonnel under chapter 74 of title 38, United States  
20 Code, or any other provision of law.

21 (2) EXEMPTION FROM TAXATION.—For pur-  
22 poses of the Internal Revenue Code of 1986, any  
23 housing allowance provided under the pilot program  
24 shall not be included in gross income.

25 (f) ANNUAL REPORTS.—

1           (1) IN GENERAL.—Not later than one year  
2 after the date of the enactment of this Act and not  
3 less frequently than once each year thereafter while  
4 the pilot program is in effect, the Secretary shall  
5 submit to the Committee on Veterans' Affairs of the  
6 Senate and the Committee on Veterans' Affairs of  
7 the House of Representatives a report on the pilot  
8 program.

9           (2) ELEMENTS.—Each report submitted under  
10 paragraph (1) shall include the following:

11           (A) A current description of the pilot pro-  
12 gram, including the current number of partici-  
13 pants in the pilot program and the amounts of  
14 housing allowance being provided such partici-  
15 pants.

16           (B) A current assessment of the value of  
17 the housing allowance under the pilot program  
18 in encouraging health care providers in accept-  
19 ing assignment to rural and highly rural com-  
20 munity-based outpatient clinics.

21           (g) FUNDING.—Amounts for housing allowances  
22 under the pilot program shall be derived from amounts  
23 available for the Veterans Health Administration for Med-  
24 ical Services.

25           (h) SUNSET.—



1 professionals for assignment at community-based  
2 outpatient clinics that predominantly serve veterans  
3 who live in rural and highly rural areas.

4 (2) PARTNERSHIP WITH EDUCATIONAL INSTI-  
5 TUTIONS.—

6 (A) IN GENERAL.—In carrying out the  
7 program, the Secretary may enter into partner-  
8 ships with educational institutions.

9 (B) CONSULTATION.—If the Secretary en-  
10 ters into a partnership with an educational in-  
11 stitution to carry out the program, the Sec-  
12 retary shall consult with the head of such edu-  
13 cational institution with respect to the training  
14 and curriculum provided under the program at  
15 such educational institution.

16 (b) TRAINING.—The training provided to health care  
17 professionals under the program shall include the fol-  
18 lowing courses:

19 (1) Courses on general professional development  
20 of health care professionals.

21 (2) Courses on providing health care to rural  
22 populations and specifically to rural veterans.

23 (c) CURRICULUM.—The program shall include train-  
24 ing with respect to health issues that commonly afflict vet-  
25 erans as specified by the Secretary.

1 (d) HIRING PREFERENCE.—

2 (1) IN GENERAL.—Each health care profes-  
3 sional that completes the program and completes a  
4 three-year assignment at a community-based out-  
5 patient clinic that predominantly serves veterans  
6 who live in rural and highly rural areas shall receive  
7 a preference in selection for employment in the Vet-  
8 erans Health Administration at the end of such  
9 three-year assignment.

10 (2) DEGREE OF PREFERENCE.—

11 (A) IN GENERAL.—The preference received  
12 under paragraph (1) shall be less than the pref-  
13 erence given a veteran.

14 (B) VETERANS.—A veteran that receives a  
15 preference under paragraph (1) shall receive a  
16 greater preference than an individual that re-  
17 ceives a preference under such paragraph who  
18 is not a veteran.

19 **SEC. 7. ENCOURAGING AND FACILITATING TRANSITION OF**  
20 **MILITARY MEDICAL PROFESSIONALS INTO**  
21 **EMPLOYMENT WITH VETERANS HEALTH AD-**  
22 **MINISTRATION.**

23 (a) ENCOURAGING EMPLOYMENT WITH VETERANS  
24 HEALTH ADMINISTRATION.—The Secretary of Veterans  
25 Affairs and the Secretary of Defense shall jointly establish



1 a program to encourage an individual who serves in the  
2 Armed Forces with a military occupational specialty relat-  
3 ing to the provision of health care to seek employment  
4 with the Veterans Health Administration when the indi-  
5 vidual has been discharged or released from service in the  
6 Armed Forces or is contemplating separating from such  
7 service.

8 (b) MATCHING OF MILITARY OCCUPATIONAL SPE-  
9 CIALTIES.—The Secretary of Veterans Affairs and the  
10 Secretary of Defense shall jointly identify military occupa-  
11 tional specialties relating to the provision of health care  
12 and match such occupational specialties with occupations  
13 and positions of employment within the Veterans Health  
14 Administration for which experience in such military occu-  
15 pational specialty qualifies one for employment in such oc-  
16 cupation or position of employment.

17 (c) FACILITATION OF TRANSITION TO EMPLOYMENT  
18 WITH VETERANS HEALTH ADMINISTRATION.—The Sec-  
19 retary of Veterans Affairs and the Secretary of Defense  
20 shall prescribe such regulations and take such actions as  
21 may be necessary to facilitate the transition of individuals  
22 with military occupational specialties identified under sub-  
23 section (b) into the corresponding occupations and posi-  
24 tions of employment with the Veterans Health Administra-  
25 tion under such subsection.

1 **SEC. 8. ASSESSMENT OF COMMUNITY-BASED OUTPATIENT**  
2 **CLINICS IN RURAL AND HIGHLY RURAL**  
3 **AREAS.**

4 (a) ASSESSMENT.—

5 (1) IN GENERAL.—The Secretary of Veterans  
6 Affairs shall conduct a periodic assessment of com-  
7 munity-based outpatient clinics in rural and highly  
8 rural areas to determine whether expansion and im-  
9 provement of community-based outpatient clinics in  
10 those areas is feasible or advisable.

11 (2) ELEMENTS.—Each periodic assessment re-  
12 quired by subsection (a) shall include the following  
13 with respect to each community-based outpatient  
14 clinic assessed:

15 (A) An assessment of whether the facil-  
16 ity—

17 (i) meets applicable building code re-  
18 quirements;

19 (ii) meets applicable health care re-  
20 quirements related to privacy;

21 (iii) has the capacity to handle the  
22 number of patients that seek care at the  
23 facility;

24 (iv) has sufficient parking for patients  
25 that seek care at the facility;

1 (v) has adequate access to broadband  
2 technology to allow the use or expansion of  
3 telehealth services at the facility; and

4 (vi) has the capacity to properly store  
5 and dispose of medical and other haz-  
6 ardous waste.

7 (B) A survey of health care providers who  
8 practice at the facility with respect to—

9 (i) strengths of the facility;

10 (ii) weaknesses of the facility; and

11 (iii) areas in which the facility may be  
12 improved.

13 (b) REPORT.—Not later than one year after the date  
14 of the enactment of this Act, and not less frequently than  
15 once each year thereafter, the Secretary shall submit to  
16 the Committee on Veterans' Affairs and the Committee  
17 on Appropriations of the Senate and the Committee on  
18 Veterans' Affairs and the Committee on Appropriations  
19 of the House of Representatives a report on the findings  
20 of the Secretary with respect to the most recently com-  
21 pleted assessment conducted under subsection (a), includ-  
22 ing such recommendations as the Secretary may have for  
23 the expansion or improvement of community-based out-  
24 patient clinics in rural and highly rural areas.

1 **SEC. 9. REPORT ON ESTABLISHMENT OF POLYTRAUMA RE-**  
2 **HABILITATION CENTERS OR POLYTRAUMA**  
3 **NETWORK SITES OF THE DEPARTMENT OF**  
4 **VETERANS AFFAIRS IN RURAL AREAS.**

5 (a) IN GENERAL.—Not later than 180 days after the  
6 date of the enactment of this Act, the Secretary of Vet-  
7 erans Affairs shall submit to Congress a report on the fea-  
8 sibility and advisability of establishing a Polytrauma Re-  
9 habilitation Center or Polytrauma Network Site in each  
10 area in which the nearest Polytrauma Rehabilitation Cen-  
11 ter or Polytrauma Network Site is more than 300 miles  
12 away.

13 (b) REQUIREMENTS.—

14 (1) IN GENERAL.—The report required by this  
15 section shall include the following:

16 (A) An assessment of the adequacy of ex-  
17 isting Polytrauma Rehabilitation Centers and  
18 Polytrauma Network Sites in providing care to  
19 veterans that live more than 300 miles from  
20 such facilities.

21 (B) An assessment of the adequacy of ex-  
22 isting Polytrauma Rehabilitation Centers and  
23 Polytrauma Network Sites in providing rehabili-  
24 tation services pursuant to section 1710C of  
25 title 38, United States Code.

1 (C) An assessment of the feasibility and  
2 advisability of establishing a Polytrauma Reha-  
3 bilitation Center or Polytrauma Network Site in  
4 each State in which there is a medical center of  
5 the Department of Veterans Affairs.

6 (D) An assessment of whether establishing  
7 new Polytrauma Rehabilitation Centers and  
8 Polytrauma Network Sites would be bene-  
9 ficial—

10 (i) to the veteran population in gen-  
11 eral;

12 (ii) to veterans who live—

13 (I) more than 300 miles from the  
14 nearest Polytrauma Rehabilitation  
15 Center or Polytrauma Network Site;  
16 or

17 (II) in a State in which there is  
18 not a Polytrauma Rehabilitation Cen-  
19 ter or Polytrauma Network Site; and

20 (iii) to veterans who served in the ac-  
21 tive military, naval, or air service on or  
22 after September 11, 2001.

23 (2) BUDGET FOR ADDITIONAL FACILITIES.—If  
24 the Secretary determines that establishing additional  
25 Polytrauma Rehabilitation Centers and Polytrauma

1 Network Sites is feasible and advisable, the Sec-  
2 retary shall include with the report required by sub-  
3 section (a) a budget and plan for the establishment  
4 of those additional facilities.

5 **SEC. 10. DEFINITIONS.**

6 In this Act:

7 (1) ACTIVE MILITARY, NAVAL, OR AIR SERV-  
8 ICE.—The term “active military, naval, or air serv-  
9 ice” has the meaning given that term in section 101  
10 of title 38, United States Code.

11 (2) HIGHLY RURAL AREA.—The term “highly  
12 rural area” means an area located in a county that  
13 has less than seven individuals residing in that coun-  
14 ty per square mile.

15 (3) RURAL AREA.—The term “rural area”  
16 means any area that is not an urbanized area or a  
17 highly rural area.

18 (4) URBANIZED AREA.—The term “urbanized  
19 area” has the meaning given that term by the Direc-  
20 tor of the Bureau of the Census.

○