	(Original Signature of Member)
114TH CONGRESS 1ST SESSION	I. R
	States Code, to clarify the emergency hospital stary of Veterans Affairs to certain veterans.

## IN THE HOUSE OF REPRESENTATIVES

Mr. Newhouse introduced the following bill; which was referred to the Committee on \_\_\_\_\_

## A BILL

To amend title 38, United States Code, to clarify the emergency hospital care furnished by the Secretary of Veterans Affairs to certain veterans.

- 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 "Veterans Emergency
- 5 Treatment Act" or the "VET Act".

1	SEC. 2. CLARIFICATION OF EMERGENCY HOSPITAL CARE
2	FURNISHED BY THE SECRETARY OF VET-
3	ERANS AFFAIRS TO CERTAIN VETERANS.
4	(a) In General.—Chapter 17 of title 38, United
5	States Code, is amended by inserting after section 1730A
6	the following new section:
7	"§ 1730B. Examination and treatment for emergency
8	medical conditions and women in labor
9	"(a) Medical Screening Examinations.—In car-
10	rying out this chapter, if any enrolled veteran requests,
11	or a request is made on behalf of the veteran, for examina-
12	tion or treatment for a medical condition, regardless of
13	whether such condition is service-connected, at a hospital
14	emergency department of a medical facility of the Depart-
15	ment, the Secretary shall ensure that the veteran is pro-
16	vided an appropriate medical screening examination within
17	the capability of the emergency department, including an-
18	cillary services routinely available to the emergency de-
19	partment, to determine whether an emergency medical
20	condition exists.
21	"(b) Necessary Stabilizing Treatment for
22	Emergency Medical Conditions and Labor.—(1) If
23	an enrolled veteran comes to a medical facility of the De-
24	partment and the Secretary determines that the veteran
25	has an emergency medical condition, the Secretary shall
26	provide either—

1	"(A) such further medical examination and
2	such treatment as may be required to stabilize the
3	medical condition; or
4	"(B) for the transfer of the veteran to another
5	medical facility of the Department or a non-Depart-
6	ment facility in accordance with subsection (c).
7	"(2) The Secretary is deemed to meet the require-
8	ment of paragraph (1)(A) with respect to an enrolled vet-
9	eran if the Secretary offers the veteran the further medical
10	examination and treatment described in such paragraph
11	and informs the veteran (or an individual acting on behalf
12	of the veteran) of the risks and benefits to the veteran
13	of such examination and treatment, but the veteran (or
14	individual) refuses to consent to the examination and
15	treatment. The Secretary shall take all reasonable steps
16	to secure the written informed consent of such veteran (or
17	individual) to refuse such examination and treatment.
18	"(3) The Secretary is deemed to meet the require-
19	ment of paragraph (1) with respect to an enrolled veteran
20	if the Secretary offers to transfer the individual to another
21	medical facility in accordance with subsection (c) of this
22	section and informs the veteran (or an individual acting
23	on behalf of the veteran) of the risks and benefits to the
24	veteran of such transfer, but the veteran (or individual)
25	refuses to consent to the transfer. The hospital shall take

1	all reasonable steps to secure the written informed consent
2	of such veteran (or individual) to refuse such transfer.
3	"(c) Restriction of Transfers Until Veteran
4	STABILIZED.—(1) If an enrolled veteran at a medical fa-
5	cility of the Department has an emergency medical condi-
6	tion that has not been stabilized, the Secretary may not
7	transfer the veteran to another medical facility of the De-
8	partment or a non-Department facility unless—
9	"(A)(i) the veteran (or a legally responsible in-
10	dividual acting on behalf of the veteran), after being
11	informed of the obligation of the Secretary under
12	this section and of the risk of transfer, requests in
13	writing a transfer to another medical facility;
14	"(ii) a physician has signed a certification (in-
15	cluding a summary of the risks and benefits) that,
16	based upon the information available at the time of
17	transfer, the medical benefits reasonably expected
18	from the provision of appropriate medical treatment
19	at another medical facility outweigh the increased
20	risks to the veteran and, in the case of labor, to the
21	unborn child from effecting the transfer; or
22	"(iii) if a physician is not physically present in
23	the emergency department at the time a veteran is
24	transferred, a qualified medical person (as defined
25	by the Secretary in regulations) has signed a certifi-

1	cation described in clause (ii) after a physician, in
2	consultation with the person, has made the deter-
3	mination described in such clause, and subsequently
4	countersigns the certification; and
5	"(B) the transfer is an appropriate transfer as
6	described in paragraph (2).
7	"(2) An appropriate transfer to a medical facility is
8	a transfer—
9	"(A) in which the transferring medical facility
10	provides the medical treatment within the capacity
11	of the facility that minimizes the risks to the health
12	of the enrolled veteran and, in the case of a woman
13	in labor, the health of the unborn child;
14	"(B) in which the receiving facility—
15	"(i) has available space and qualified per-
16	sonnel for the treatment of the veteran; and
17	"(ii) has agreed to accept transfer of the
18	veteran and to provide appropriate medical
19	treatment;
20	"(C) in which the transferring facility sends to
21	the receiving facility all medical records (or copies
22	thereof), related to the emergency condition for
23	which the veteran has presented, available at the
24	time of the transfer, including records related to the
25	emergency medical condition of the veteran, observa-

1	tions of signs or symptoms, preliminary diagnosis,
2	treatment provided, results of any tests and the in-
3	formed written consent or certification (or copy
4	thereof) provided under paragraph (1)(A), and the
5	name and address of any on-call physician (de-
6	scribed in subsection $(d)(1)(C)$ of this section) who
7	has refused or failed to appear within a reasonable
8	time to provide necessary stabilizing treatment;
9	"(D) in which the transfer is effected through
10	qualified personnel and transportation equipment, as
11	required including the use of necessary and medi-
12	cally appropriate life support measures during the
13	transfer; and
14	"(E) that meets such other requirements as the
15	Secretary may find necessary in the interest of the
16	health and safety of veterans transferred.
17	"(d) Charges.—(1) Nothing in this section may be
18	construed to affect any charges that the Secretary may
19	collect from a veteran or third party.
20	"(2) The Secretary shall treat any care provided by
21	a non-Department facility pursuant to this section as care
22	otherwise provided by a non-Department facility pursuant
23	to this chapter for purposes of paying such non-Depart-
24	ment facility for such care.

1	"(e) Nondiscrimination.—A medical facility of the
2	Department or a non-Department facility, as the case may
3	be, that has specialized capabilities or facilities (such as
4	burn units, shock-trauma units, neonatal intensive care
5	units, or (with respect to rural areas) regional referral
6	centers as identified by the Secretary in regulation) shall
7	not refuse to accept an appropriate transfer of an enrolled
8	veteran who requires such specialized capabilities or facili-
9	ties if the facility has the capacity to treat the veteran
10	"(f) No Delay in Examination or Treatment.—
11	A medical facility of the Department or a non-Department
12	facility, as the case may be, may not delay provision of
13	an appropriate medical screening examination required
14	under subsection (a) or further medical examination and
15	treatment required under subsection (b) of this section in
16	order to inquire about the method of payment or insurance
17	status of an enrolled veteran.
18	"(g) Whistleblower Protections.—The Sec-
19	retary may not take adverse action against an employee
20	of the Department because the employee refuses to au-
21	thorize the transfer of an enrolled veteran with an emer-
22	gency medical condition that has not been stabilized or
23	because the employee reports a violation of a requirement
24	of this section.
25	"(h) Definitions.—In this section:

1	"(1) The term 'emergency medical condition'
2	means—
3	"(A) a medical condition manifesting itself
4	by acute symptoms of sufficient severity (in-
5	cluding severe pain) such that the absence of
6	immediate medical attention could reasonably
7	be expected to result in—
8	"(i) placing the health of the enrolled
9	veteran (or, with respect to an enrolled vet-
10	eran who is a pregnant woman, the health
11	of the woman or her unborn child) in seri-
12	ous jeopardy;
13	"(ii) serious impairment to bodily
14	functions; or
15	"(iii) serious dysfunction of any bodily
16	organ or part; or
17	"(B) with respect to an enrolled veteran
18	who is a pregnant woman having contractions—
19	"(i) that there is inadequate time to
20	effect a safe transfer to another hospital
21	before delivery; or
22	"(ii) that transfer may pose a threat
23	to the health or safety of the woman or the
24	unborn child.

1	"(2) The term 'enrolled veteran' means a vet-
2	eran who is enrolled in the health care system estab-
3	lished under section 1705(a) of this title.
4	"(3) The term 'to stabilize' means, with respect
5	to an emergency medical condition described in
6	paragraph (1)(A), to provide such medical treatment
7	of the condition as may be necessary to assure, with-
8	in reasonable medical probability, that no material
9	deterioration of the condition is likely to result from
10	or occur during the transfer of the enrolled veteran
11	from a facility, or, with respect to an emergency
12	medical condition described in paragraph (1)(B), to
13	deliver (including the placenta).
14	"(4) The term 'stabilized' means, with respect
15	to an emergency medical condition described in
16	paragraph (1)(A), that no material deterioration of
17	the condition is likely, within reasonable medical
18	probability, to result from or occur during the trans-
19	fer of the individual from a facility, or, with respect
20	to an emergency medical condition described in
21	paragraph (1)(B), that the woman has delivered (in-
22	cluding the placenta).
23	"(5) The term 'transfer' means the movement
24	(including the discharge) of an enrolled veteran out-
25	side the facilities of a medical facility of the Depart-

1	ment at the direction of any individual employed by
2	(or affiliated or associated, directly or indirectly,
3	with) the Department, but does not include such a
4	movement of an individual who—
5	"(A) has been declared dead; or
6	"(B) leaves the facility without the permis-
7	sion of any such person.".
8	(b) CLERICAL AMENDMENT.—The table of sections
9	of such chapter is amended by inserting after the item
10	relating to section 1730A the following new item:
	"1730B. Examination and treatment for emergency medical conditions and women in labor.".