

117TH CONGRESS
1ST SESSION

H. R. 4794

To improve mammography services furnished by the Department of Veterans Affairs, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JULY 29, 2021

Ms. BROWNLEY (for herself and Mrs. MILLER-MEEKS) introduced the following bill; which was referred to the Committee on Veterans' Affairs, and in addition to the Committee on Armed Services, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To improve mammography services furnished by the Department of Veterans Affairs, 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; TABLE OF CONTENTS.**

4 (a) SHORT TITLE.—This Act may be cited as the
5 “Making Advances in Mammography and Medical Options
6 for Veterans Act”.

7 (b) TABLE OF CONTENTS.—The table of contents for
8 this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—SCREENING AND EARLY DETECTION

- Sec. 101. Strategic plan for breast imaging services for veterans.
 Sec. 102. Telemammography pilot program of Department of Veterans Affairs.
 Sec. 103. Upgrade of breast imaging at facilities of Department of Veterans Affairs to three-dimensional digital mammography.
 Sec. 104. Study on availability of testing for breast cancer gene among veterans and expansion of availability of such testing.
 Sec. 105. Mammography accessibility for paralyzed and disabled veterans.
 Sec. 106. Report on access to and quality of mammography screenings furnished by Department of Veterans Affairs.

TITLE II—PARTNERSHIPS FOR RESEARCH AND ACCESS TO CARE

- Sec. 201. Partnerships with National Cancer Institute to expand access of veterans to cancer care.
 Sec. 202. Report by Department of Veterans Affairs and Department of Defense on interagency collaboration on treating and researching breast cancer.

1 **TITLE I—SCREENING AND** 2 **EARLY DETECTION**

3 **SEC. 101. STRATEGIC PLAN FOR BREAST IMAGING SERV-** 4 **ICES FOR VETERANS.**

5 (a) IN GENERAL.—Not later than one year after the
 6 date of the enactment of this Act, the Secretary of Vet-
 7 erans Affairs shall submit to the Committee on Veterans’
 8 Affairs of the Senate and the Committee on Veterans’ Af-
 9 fairs of the House of Representatives a strategic plan for
 10 improving breast imaging services for veterans.

11 (b) ELEMENTS.—The strategic plan required by sub-
 12 section (a) shall—

- 13 (1) cover the evolving needs of women veterans;
 14 (2) address geographic disparities of breast im-
 15 aging furnished at a facility of the Department of
 16 Veterans Affairs and the use of breast imaging

1 through non-Department providers in the commu-
2 nity;

3 (3) address the use of digital breast
4 tomosynthesis (DBT–3D breast imaging);

5 (4) address the needs of male veterans who re-
6 quire breast cancer screening services; and

7 (5) provide recommendations on—

8 (A) potential expansion of breast imaging
9 services furnished at facilities of the Depart-
10 ment, including infrastructure and staffing
11 needs;

12 (B) the use of digital breast tomosynthesis;

13 (C) the use of mobile mammography; and

14 (D) other access and equity improvements
15 for breast imaging.

16 **SEC. 102. TELEMAMMOGRAPHY PILOT PROGRAM OF DE-**
17 **PARTMENT OF VETERANS AFFAIRS.**

18 (a) IN GENERAL.—Commencing not later than one
19 year after the date of the enactment of this Act, the Sec-
20 retary of Veterans Affairs shall carry out a pilot program
21 to provide telemammography services for veterans who live
22 in—

23 (1) States where the Department of Veterans
24 Affairs does not offer breast imaging services at a
25 facility of the Department; or

1 (2) locations where access to breast imaging
2 services at a facility of the Department is difficult
3 or not feasible, as determined by the Secretary.

4 (b) DURATION.—The Secretary shall carry out the
5 pilot program under subsection (a) for a three-year period
6 beginning on the commencement of the pilot program.

7 (c) LOCATIONS.—In carrying out the pilot program
8 under subsection (a), the Secretary may use community-
9 based outpatient clinics, mobile mammography, Federally
10 qualified health centers (as defined in section 1861(aa)(4)
11 of the Social Security Act (42 U.S.C. 1395x(aa)(4)), rural
12 health clinics, critical access hospitals, clinics of the Indian
13 Health Service, and such other sites as the Secretary de-
14 termines feasible to provide mammograms under the pilot
15 program.

16 (d) SHARING OF IMAGES AND RESULTS.—Under the
17 pilot program under subsection (a)—

18 (1) mammography images generated shall be
19 sent to the centralized telemammography center of
20 the Department for interpretation by expert radiolo-
21 gists; and

22 (2) results shall be shared with the veteran and
23 their primary care provider.

24 (e) REPORT.—

1 (1) IN GENERAL.—Not later than one year
2 after the conclusion of the pilot program under sub-
3 section (a), the Secretary shall submit to the Com-
4 mittee on Veterans’ Affairs of the Senate and the
5 Committee on Veterans’ Affairs of the House of
6 Representatives a report evaluating the pilot pro-
7 gram.

8 (2) ELEMENTS.—The report required by para-
9 graph (1) shall include the following:

10 (A) An assessment of the quality of the
11 mammography provided under the pilot pro-
12 gram under subsection (a).

13 (B) Feedback from veterans and providers
14 participating in the pilot program.

15 (C) A recommendation of the Secretary on
16 the continuation or discontinuation of the pilot
17 program.

18 **SEC. 103. UPGRADE OF BREAST IMAGING AT FACILITIES OF**
19 **DEPARTMENT OF VETERANS AFFAIRS TO**
20 **THREE-DIMENSIONAL DIGITAL MAMMOG-**
21 **RAPHY.**

22 Not later than two years after the date of the enact-
23 ment of this Act, the Secretary of Veterans Affairs shall—

24 (1) upgrade all mammography services at facili-
25 ties of the Department of Veterans Affairs that pro-

vide such services to use digital breast tomosynthesis technology, also known as three-dimensional breast imaging; and

(2) submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a report—

(A) indicating that the upgrade under paragraph (1) has been completed; and

(B) listing the facilities or other locations of the Department at which digital breast tomosynthesis technology is used.

SEC. 104. STUDY ON AVAILABILITY OF TESTING FOR BREAST CANCER GENE AMONG VETERANS AND EXPANSION OF AVAILABILITY OF SUCH TESTING.

(a) STUDY.—

(1) IN GENERAL.—The Secretary of Veterans Affairs shall conduct a study on the availability of access to testing for the breast cancer gene for veterans diagnosed with breast cancer, as recommended by the guidelines set forth by the National Comprehensive Cancer Network.

(2) ELEMENTS.—In conducting the study under paragraph (1), the Secretary shall examine—

1 (A) the feasibility of expanding the Joint
2 Medicine Service of the Department of Veterans
3 Affairs to provide genetic testing and coun-
4 seling for veterans with breast cancer across the
5 country; and

6 (B) access to such testing and counseling
7 for veterans living in rural or highly rural
8 areas, and any gaps that may exist with respect
9 to such access.

10 (b) EXPANSION OF AVAILABILITY OF TESTING.—

11 (1) IN GENERAL.—The Secretary shall update
12 guidelines or institute new guidelines to increase the
13 use of testing for the breast cancer gene and genetic
14 counseling for veterans diagnosed with breast can-
15 cer.

16 (2) DECISION SUPPORT TOOLS.—In updating or
17 instituting guidelines under paragraph (1), the Sec-
18 retary may develop clinical decision support tools to
19 facilitate delivery of breast cancer care that is in line
20 with national cancer guidelines.

21 (c) REPORT.—Not later than two years after the date
22 of the enactment of this Act, the Secretary shall submit
23 to the Committee on Veterans' Affairs of the Senate and
24 the Committee on Veterans' Affairs of the House of Rep-
25 resentatives a report on—

1 (1) the results of the study under subsection
2 (a);

3 (2) any updates to guidelines or new guidelines
4 instituted under subsection (b); and

5 (3) any progress of the Department in improv-
6 ing access to and usage of testing for the breast can-
7 cer gene among veterans diagnosed with breast can-
8 cer, including for veterans living in rural or highly
9 rural areas.

10 (d) DEFINITIONS.—In this section, the terms “rural”
11 and “highly rural” have the meanings given those terms
12 in the Rural-Urban Commuting Areas coding system of
13 the Department of Agriculture.

14 **SEC. 105. MAMMOGRAPHY ACCESSIBILITY FOR PARALYZED**
15 **AND DISABLED VETERANS.**

16 (a) STUDY.—

17 (1) IN GENERAL.—The Secretary of Veterans
18 Affairs shall conduct a study on the accessibility of
19 breast imaging services at facilities of the Depart-
20 ment of Veterans Affairs for veterans with paralysis,
21 spinal cord injury or disorder (SCI/D), or another
22 disability.

23 (2) ACCESSIBILITY.—The study required by
24 paragraph (1) shall include an assessment of the ac-
25 cessibility of the physical infrastructure at breast

1 imaging facilities of the Department, including the
2 imaging equipment, transfer assistance, and the
3 room in which services will be provided as well as
4 adherence to best practices for screening and treat-
5 ing veterans with a spinal cord injury or disorder.

6 (3) SCREENING RATES.—

7 (A) MEASUREMENT.—The study required
8 by paragraph (1) shall include a measurement
9 of breast cancer screening rates for veterans
10 with a spinal cord injury or disorder during the
11 two-year period preceding the commencement of
12 the study, including a breakout of the screening
13 rates for such veterans living in rural or highly
14 rural areas.

15 (B) DEVELOPMENT OF METHOD.—If the
16 Secretary is unable to provide the measurement
17 required under subparagraph (A), the Secretary
18 shall develop a method to track breast cancer
19 screening rates for veterans with a spinal cord
20 injury or disorder.

21 (4) REPORT.—Not later than two years after
22 the date of the enactment of this Act, the Secretary
23 shall submit to the Committee on Veterans' Affairs
24 of the Senate and the Committee on Veterans' Af-
25 fairs of the House of Representatives a report on the

1 findings of the study required by paragraph (1), in-
2 cluding—

3 (A) the rates of screening among veterans
4 with a spinal cord injury or disorder, including
5 veterans living in rural or highly rural areas, as
6 required under paragraph (3)(A); or

7 (B) if such rates are not available, a de-
8 scription of the method developed to measure
9 such rates as required under paragraph (3)(B).

10 (b) CARE FROM NON-DEPARTMENT PROVIDERS.—

11 The Secretary shall update the policies and directives of
12 the Department to ensure that, in referring a veteran with
13 a spinal cord injury or disorder for care from a non-De-
14 partment provider, the Secretary shall—

15 (1) confirm with the provider the accessibility
16 of the breast imaging site, including the imaging
17 equipment, transfer assistance, and the room in
18 which services will be provided; and

19 (2) provide additional information to the pro-
20 vider on best practices for screening and treating
21 veterans with a spinal cord injury or disorder.

22 (c) DEFINITIONS.—In this section, the terms “rural”
23 and “highly rural” have the meanings given those terms
24 in the Rural-Urban Commuting Areas coding system of
25 the Department of Agriculture.

1 **SEC. 106. REPORT ON ACCESS TO AND QUALITY OF MAM-**
2 **MOGRAPHY SCREENINGS FURNISHED BY DE-**
3 **PARTMENT OF VETERANS AFFAIRS.**

4 (a) IN GENERAL.—Not later than two years after the
5 date of the enactment of this Act, the Inspector General
6 of the Department of Veterans Affairs shall submit to the
7 Secretary of Veterans Affairs, the Committee on Veterans’
8 Affairs of the Senate, and the Committee on Veterans’ Af-
9 fairs of the House of Representatives a report on mam-
10 mography services furnished by the Department of Vet-
11 erans Affairs.

12 (b) ELEMENTS.—The report required by subsection
13 (a) shall include an assessment of—

14 (1) the access of veterans to mammography
15 screenings, whether at a facility of the Department
16 or through a non-Department provider, including
17 any staffing concerns of the Department in pro-
18 viding such screenings;

19 (2) the quality of such screenings and reading
20 of the images from such screenings, including wheth-
21 er such screenings use three-dimensional mammog-
22 raphy;

23 (3) the communication of the results of such
24 screenings, including whether results are shared in a
25 timely manner, whether results are shared via the
26 Joint Health Information Exchange or another elec-

1 tronic mechanism, and whether results are incor-
 2 porated into the electronic health record of the vet-
 3 eran;

4 (4) the performance of the Women’s Breast On-
 5 cology System of Excellence of the Department; and

6 (5) the access of veterans diagnosed with breast
 7 cancer to a comprehensive breast cancer care team
 8 of the Department.

9 (c) FOLLOW-UP.—Not later than 180 days after the
 10 submittal of the report under subsection (a), the Secretary
 11 shall submit to the Committee on Veterans’ Affairs of the
 12 Senate and the Committee on Veterans’ Affairs of the
 13 House of Representatives a plan to address the defi-
 14 ciencies identified in the report under subsection (a), if
 15 any.

16 **TITLE II—PARTNERSHIPS FOR** 17 **RESEARCH AND ACCESS TO** 18 **CARE**

19 **SEC. 201. PARTNERSHIPS WITH NATIONAL CANCER INSTI-** 20 **TUTE TO EXPAND ACCESS OF VETERANS TO** 21 **CANCER CARE.**

22 (a) ACCESS TO CARE IN EACH VISN.—

23 (1) IN GENERAL.—The Secretary of Veterans
 24 Affairs shall enter into a partnership with not fewer
 25 than one cancer center of the National Cancer Insti-

1 tute of the National Institutes of Health in each
2 Veterans Integrated Service Network of the Depart-
3 ment of Veterans Affairs to expand access to high-
4 quality cancer care for women veterans.

5 (2) TREATMENT OF RURAL VETERANS.—The
6 Secretary, in carrying out partnerships entered into
7 under paragraph (1), shall ensure that veterans with
8 breast cancer who reside in rural areas or States
9 without a cancer center that has entered into such
10 a partnership with the Secretary are able to receive
11 care through such a partnership via telehealth.

12 (b) REPORT ON PARTNERSHIP TO INCREASE ACCESS
13 TO CLINICAL TRIALS.—Not later than 180 days after the
14 date of the enactment of this Act, the Secretary shall sub-
15 mit to the Committee on Veterans’ Affairs of the Senate
16 and the Committee on Veterans’ Affairs of the House of
17 Representatives a report on—

18 (1) how the Secretary will ensure that the ad-
19 vancements made through the existing partnership
20 between the Department of Veterans Affairs and the
21 National Cancer Institute to provide veterans with
22 access to clinical cancer research trials (commonly
23 referred to as “NAVIGATE”) are permanently im-
24 plemented; and

1 (2) the determination of the Secretary of
2 whether expansion of such partnership to more than
3 the original 12 facilities of the Department that
4 were selected under such partnership is feasible.

5 (c) PERIODIC REPORTS.—Not later than three years
6 after the date of the enactment of this Act, and every
7 three years thereafter, the Secretary shall submit to the
8 Committee on Veterans’ Affairs of the Senate and the
9 Committee on Veterans’ Affairs of the House of Rep-
10 resentatives a report—

11 (1) assessing how the partnerships entered into
12 under subsection (a)(1) have impacted access by vet-
13 erans to cancer centers of the National Cancer Insti-
14 tute, including an assessment of the telehealth op-
15 tions made available and used pursuant to such
16 partnerships; and

17 (2) describing the advancements made with re-
18 spect to access by veterans to clinical cancer re-
19 search trials through the partnership described in
20 subsection (b)(1), including how many of those vet-
21 erans were women veterans, minority veterans (in-
22 cluding racial and ethnic minorities), and rural vet-
23 erans, and identifying opportunities for further inno-
24 vation.

1 **SEC. 202. REPORT BY DEPARTMENT OF VETERANS AFFAIRS**
2 **AND DEPARTMENT OF DEFENSE ON INTER-**
3 **AGENCY COLLABORATION ON TREATING AND**
4 **RESEARCHING BREAST CANCER.**

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, in collaboration with the Secretary of De-
8 fense, shall submit to Congress a report on all current re-
9 search and health care collaborations between the Depart-
10 ment of Veterans Affairs and the Department of Defense
11 on treating veterans and members of the Armed Forces
12 with breast cancer.

13 (b) ELEMENTS.—The report required by subsection
14 (a)—

15 (1) shall include a description of potential op-
16 portunities for future interagency collaboration be-
17 tween the Department of Veterans Affairs and the
18 Department of Defense with respect to treating and
19 researching breast cancer; and

20 (2) may include a focus on—

21 (A) with respect to women members of the
22 Armed Forces with a diagnosis of or who are
23 undergoing screening for breast cancer, transi-
24 tion of such members from receiving care from
25 the Department of Defense to receiving care
26 from the Department of Veterans Affairs;

- 1 (B) collaborative breast cancer research
2 opportunities between the Department of Vet-
3 erans Affairs and the Department of Defense;
4 (C) access to clinical trials; and
5 (D) such other matters as the Secretary of
6 Veterans Affairs and the Secretary of Defense
7 consider appropriate.

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