

117TH CONGRESS
2D SESSION

H. R. 9002

To direct the Secretary of Veterans Affairs to establish a pilot program for gynecologic cancer care coordination at the Department of Veterans Affairs, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 28, 2022

Ms. GARCIA of Texas introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To direct the Secretary of Veterans Affairs to establish a pilot program for gynecologic cancer care coordination at 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.**

4 This Act may be cited as the “Veterans’ Cancer Care
5 Coordinator Act of 2022”.

1 **SEC. 2. PILOT PROGRAM ON GYNECOLOGIC CANCER CARE**
2 **COORDINATION.**

3 (a) **ESTABLISHMENT.**—Not later than one year after
4 the date of the enactment of this Act, the Secretary of
5 Veterans Affairs shall establish a pilot program (in this
6 section referred to as the “Program”) for gynecologic can-
7 cer care coordination at the Department of Veterans Af-
8 fairs, including through the designation of a gynecologic
9 cancer care coordinator of the Department.

10 (b) **ELIGIBLE PARTICIPANTS.**—A veteran is eligible
11 to participate in the program if the veteran—

12 (1) has been diagnosed with a gynecologic can-
13 cer; and

14 (2) is eligible for health care furnished through
15 the Veterans Community Care Program under sec-
16 tion 1703 of title 38, United States Code, at a non-
17 Department facility.

18 (c) **LOCATIONS.**—The Secretary shall select not fewer
19 than five medical centers of the Department of Veterans
20 Affairs at which to carry out the Program, including one
21 medical center that primarily serves rural veterans, as de-
22 termined by the Secretary.

23 (d) **DUTIES OF GYNECOLOGIC CANCER CARE COOR-**
24 **DINATOR.**—Under the Program, the designated
25 gynecologic cancer care coordinator shall be responsible
26 for carrying out the following duties:

1 (1) Ensuring the coordination of care be-
2 tween—

3 (A) clinicians of the Department and com-
4 munity gynecologic cancer care providers;

5 (B) clinicians of the Department, Women’s
6 Veteran Program Managers, and Women’s
7 Health Medical Directors; and

8 (C) any other relevant clinicians of the De-
9 partment and community care providers who
10 provide care to participating veterans.

11 (2) Working with the Office of Community Care
12 of the relevant medical facility of the Department re-
13 garding authorizations of care in the community, in-
14 cluding for participating veterans whose mental
15 health screening results indicate the presence of
16 military sexual trauma, depression, domestic or inti-
17 mate partner violence, or post-traumatic stress dis-
18 order.

19 (3) Making regular contact with each partici-
20 pating veteran when the veteran receives care from
21 a community care provider to evaluate the needs of
22 the veteran, including through an assessment of the
23 mental health of the veteran (including as such men-
24 tal health and trauma history related to the cancer
25 diagnosis of the veteran).

1 (4) Monitoring—

2 (A) the services furnished under the Pro-
3 gram to participating veterans;

4 (B) the outcomes relating to the health of
5 such participating veterans, including remission,
6 metastasis, and death; and

7 (C) the data relating to gynecologic cancer
8 care collected at a medical facility of the De-
9 partment (using relevant databases of the Vet-
10 erans Health Administration or other Depart-
11 ment databases), including—

12 (i) the demographics of participating
13 veterans who have gynecologic cancer; and

14 (ii) the number of participating vet-
15 erans being treated for gynecologic cancer.

16 (5) Providing particular information to partici-
17 pating veterans, including—

18 (A) how to seek emergency care at the
19 emergency department closest to the veteran,
20 including the requirement for the veteran or the
21 community care provider to notify the Depart-
22 ment when the veteran receives emergency
23 treatment relating to the cancer of the veteran
24 for the Department to authorize payment for
25 such emergency treatment; and

1 (B) information about mental health re-
2 sources, including with respect to information
3 encouraging follow-up care for depression.

4 (6) Documenting certain information in the
5 electronic health records of participating veterans,
6 including—

7 (A) the documentation of the contact de-
8 scribed in paragraph (3);

9 (B) the contact information of the commu-
10 nity gynecologic cancer care providers of such
11 participating veterans; and

12 (C) the cancer diagnosis of such partici-
13 pating veterans.

14 (7) Carrying out such other duties as may be
15 determined appropriate by the Secretary.

16 (e) REPORT.—

17 (1) IN GENERAL.—Not later than two years
18 after the date on which the Secretary commences the
19 Program, the Secretary shall submit to the Commit-
20 tees on Veterans' Affairs of the Senate and the
21 House of Representatives a report containing the
22 following:

23 (A) A comparison of the outcomes of vet-
24 erans who have participated in the Program to
25 the outcomes of non-participating veterans de-

scribed in paragraph (2), including with respect
to the following:

(i) Health outcomes, including (for
the most recent two years of available
data)—

(I) the percentage of such vet-
erans who have experienced a cancer-
related death;

(II) the percentage of such vet-
erans who have entered remission for
gynecologic cancer; and

(III) the percentage of such vet-
erans who have been diagnosed with
mental health disorders determined
relevant by the Secretary for purposes
of the comparison (including anxiety,
depression, and post-traumatic stress
disorder).

(ii) Timeliness of care furnished under
chapter 17 of title 38, United States Code,
including the average time that elapses be-
tween the initial diagnosis and each succes-
sive stage of treatment for gynecologic can-
cer.

1 (iii) Patient safety associated with
2 such care, including the number of errors
3 in medical care that rise to the level of
4 “never events” (such as a foreign body left
5 in a veteran during surgery).

6 (iv) Patient satisfaction associated
7 with such care, including the results of a
8 patient satisfaction survey administered to
9 such veterans on the receipt of adequate
10 pain management from health care pro-
11 viders of the Department, mental health
12 resources from such providers, and overall
13 quality of such care.

14 (B) An evaluation of whether to expand
15 the Program or make such Program perma-
16 nent.

17 (C) Any other matter the Secretary deter-
18 mines appropriate.

19 (2) NON-PARTICIPATING VETERANS DE-
20 SCRIBED.—A non-participating veteran described in
21 this paragraph is a female veteran who—

22 (A) has not participated in the Program;

23 (B) is enrolled in the patient enrollment
24 system of the Department of Veterans Affairs

1 established and operated under section 1705 of
2 title 38, United States Code; and

3 (C) has been diagnosed with gynecologic
4 cancer.

5 (f) DEFINITIONS.—In this section:

6 (1) The term “community care provider” means
7 a health care provider located at a non-Department
8 facility who provides care (other than care related to
9 gynecologic cancer) to veterans under section 1703
10 of title 38, United States Code, or any other law ad-
11 ministered by the Secretary of Veterans Affairs.

12 (2) The term “community gynecologic cancer
13 care provider” means a gynecologic cancer care pro-
14 vider located at a non-Department facility who pro-
15 vides care related to gynecologic cancer to veterans
16 under section 1703 of title 38, United States Code,
17 or any other law administered by the Secretary of
18 Veterans Affairs.

19 (3) The term “gynecologic cancer” means cer-
20 vical cancer, ovarian cancer, uterine cancer, vaginal
21 cancer, and vulvar cancer.

22 (4) The term “non-Department facilities” has
23 the meaning given that term in section 1701 of title
24 38, United States Code.

1 (5) The term “participating veteran” means a
2 veteran who is participating in the Program.

3 (6) The term “Women’s Health Medical Direc-
4 tor” means a Women’s Health Medical Director de-
5 scribed in the directive of the Veterans Health Ad-
6 ministration titled “Health Care Services for Women
7 Veterans” (directive 1330.01), or any successor di-
8 rective.

9 (7) The term “Women’s Veteran Program Man-
10 ager” means a Women’s Veterans Program Manager
11 described in the directive of the Veterans Health Ad-
12 ministration titled “Women Veterans Program Man-
13 ager” (directive 1330.02), or any successor directive.

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