

Calendar No. 272

119TH CONGRESS
1ST SESSION

S. 607

To require the Secretary of Veterans Affairs to establish an integrated project team to improve the process for scheduling appointments for health care from the Department of Veterans Affairs, and for other purposes.

IN THE SENATE OF THE UNITED STATES

FEBRUARY 18, 2025

Ms. HASSAN (for herself, Mr. BOOZMAN, Mr. MORAN, and Mr. BLUMENTHAL) introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

DECEMBER 2, 2025

Reported by Mr. MORAN, with an amendment and an amendment to the title
[Strike out all after the enacting clause and insert the part printed in *italic*]

A BILL

To require the Secretary of Veterans Affairs to establish an integrated project team to improve the process for scheduling appointments for health care from 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,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Improving Veteran Ac-
3 cess to Care Act”.

4 **SEC. 2. ESTABLISHMENT OF INTEGRATED PROJECT TEAM**
5 **OF DEPARTMENT OF VETERANS AFFAIRS TO**
6 **IMPROVE HEALTH CARE APPOINTMENT**
7 **SCHEDULING.**

8 (a) ~~IN GENERAL.~~—The Secretary of Veterans Af-
9 fairs, through the Veterans Health Administration and the
10 Office of Information and Technology of the Department
11 of Veterans Affairs, or any successor offices or administra-
12 tions of similar function, shall establish an integrated
13 project team to improve the process for scheduling ap-
14 pointments for health care from the Department of Vet-
15 erans Affairs.

16 (b) ~~PURPOSE.~~—The purpose of this section is to en-
17 sure the Department of Veterans Affairs delivers to pa-
18 tients and employees of the Department in a timely man-
19 ner the scheduling capabilities developed by the integrated
20 project team established under subsection (a) to imme-
21 diately improve delivery of care, access to care, customer
22 experience and service, and efficiency with respect to the
23 delivery of care.

24 (c) ~~OBJECTIVES.~~—The objectives of the integrated
25 project team established under subsection (a) are the fol-
26 lowing:

1 (1) To develop or continue the development of
2 a scheduling system that enables both personnel and
3 patients of the Department of Veterans Affairs to
4 view available appointments for all care furnished by
5 the Department, including—

6 (A) available appointments for all pro-
7 viders of the Department;

8 (B) available appointments at all clinics,
9 hospitals, and other health care facilities of the
10 Department; and

11 (C) available appointments at all offices
12 providing patient care within the health care
13 system of the Department, including primary
14 care and all forms of specialty care.

15 (2) To develop or continue the development of
16 a self-service scheduling platform, available for use
17 by all patients of the Department, which shall—

18 (A) enable such patients to view available
19 appointments and fully schedule appointments
20 for all care furnished by the Department, in-
21 cluding—

22 (i) appointments for all providers of
23 the Department;

(ii) appointments at all clinics, hospitals, and other health care facilities of the Department; and

(iii) appointments at all offices providing patient care within the health care system of the Department, including primary care and all forms of specialty care;

(B) if a referral is required for an appointment, provide a method for the patient to request a referral and subsequently book an appointment if the referral is approved; and

(C) provide such patients with the ability to cancel or reschedule appointments.

(3) To create a process through which all patients of the Department can telephonically speak with a scheduler who can assist the patient to determine appointment availability and can fully schedule appointments on behalf of the patient for all care furnished by the Department, including—

(A) appointments for all providers of the Department;

(B) appointments at all clinics, hospitals, and other health care facilities of the Department; and

1 (C) appointments at all offices providing
2 patient care within the health care system of
3 the Department, including primary care and all
4 forms of specialty care.

5 (4) To carry out such other functions, over-
6 sight, metric development and tracking, change man-
7 agement, cross-Department coordination, and other
8 related matters as the Secretary determines appro-
9 priate as it relates to scheduling tools, functions,
10 and operations with respect to health care appoint-
11 ments furnished by the Department.

12 (d) COORDINATION WITH ELECTRONIC HEALTH
13 RECORD MODERNIZATION PROGRAM.—

14 (1) IN GENERAL.—The integrated project team
15 established under subsection (a) shall carry out the
16 objectives under subsection (c) in consultation and
17 coordination with the deployment schedule and capa-
18 bilities of the Electronic Health Record Moderniza-
19 tion Program of the Department of Veterans Affairs
20 to ensure a smooth transition to using the tools and
21 features, where relevant and appropriate, that may
22 be created pursuant to this section, along with the
23 features in the Electronic Health Record Moderniza-
24 tion Program.

1 (2) ~~RULE OF CONSTRUCTION.~~—Nothing in this
 2 subsection shall be construed to require the inte-
 3 grated project team established under subsection (a),
 4 the Veterans Health Administration, or the Office of
 5 Information and Technology of the Department to
 6 defer or delay the deployment of scheduling capabili-
 7 ties required by this section because of future poten-
 8 tial planned capabilities of the Electronic Health
 9 Record Modernization Program.

10 ~~(c) DEADLINES.~~—

11 (1) ~~ESTABLISHMENT.~~—Not later than 180 days
 12 after the date of the enactment of this Act, the Sec-
 13 retary of Veterans Affairs, through the Veterans
 14 Health Administration and the Office of Information
 15 and Technology of the Department of Veterans Af-
 16 fairs, or any successor office, shall fully establish the
 17 integrated project team under subsection (a).

18 (2) ~~COMPLETION OF OBJECTIVES.~~—Not later
 19 than one year after the date of the enactment of this
 20 Act, the integrated project team established under
 21 subsection (a) shall complete the objectives under
 22 subsection (c).

23 ~~(f) REPORT ON OBJECTIVES.~~—If the Secretary of
 24 Veterans Affairs determines that an objective under sub-
 25 section (c), or any feature or service in connection with

1 that objective, cannot be implemented or otherwise incor-
 2 porated into a final product, the Secretary shall, within
 3 45 days of that determination, submit to the appropriate
 4 committees of Congress a report—

5 (1) detailing that objective, feature, or service
 6 and providing an explanation as to why that objec-
 7 tive, feature, or service cannot be implemented or in-
 8 corporated, as the case may be; and

9 (2) setting forth a plan for implementing this
 10 section without that objective, feature, or service.

11 (g) IMPLEMENTATION REPORTS.—Not later than
 12 each of one year and two years after the date of the enact-
 13 ment of this Act, the Secretary of Veterans Affairs shall
 14 submit to the appropriate committees of Congress a report
 15 on the progress of the Secretary in fulfilling the require-
 16 ments of this section, including—

17 (1) costs incurred to implement such require-
 18 ments as of the date of the report;

19 (2) the expected costs to complete implementa-
 20 tion of such requirements (including costs for man-
 21 agement and technology);

22 (3) the schedule for deployment of any capabili-
 23 ties developed by the integrated project team estab-
 24 lished under subsection (a); and

1 (4) goals and metrics achieved, challenges, and
2 lessons learned.

3 (h) ~~RULE OF CONSTRUCTION.~~—Nothing in this sec-
4 tion shall be construed to preclude or impede the ability
5 of a veteran to contact or schedule an appointment directly
6 with a facility or provider through a non-online scheduling
7 process, should the veteran choose to do so.

8 (i) ~~DEFINITIONS.~~—In this section:

9 (1) ~~APPROPRIATE COMMITTEES OF CON-~~
10 ~~GRESS.~~—The term “appropriate committees of Con-
11 gress” means the Committee on Veterans’ Affairs of
12 the Senate and the Committee on Veterans’ Affairs
13 of the House of Representatives.

14 (2) ~~FULLY SCHEDULE.~~—The term “fully sched-
15 ule”, with respect to booking an appointment, means
16 that the appointment booking is completed, rather
17 than simply requested.

18 **SECTION 1. SHORT TITLE.**

19 *This Act may be cited as the “Improving Veteran Ac-*
20 *cess to Care Act”.*

1 **SEC. 2. IMPLEMENTATION OF AND REPORT ON EFFORTS OF**
 2 **DEPARTMENT OF VETERANS AFFAIRS TO IM-**
 3 **PROVE HEALTH CARE APPOINTMENT SCHED-**
 4 **ULING.**

5 (a) *IN GENERAL.*—Not later than one year after the
 6 date of the enactment of this Act, the Secretary of Veterans
 7 Affairs shall submit to the appropriate committees of Con-
 8 gress a plan to improve the process for scheduling appoint-
 9 ments for health care from the Department of Veterans Af-
 10 fairs, including improvements for both patients and em-
 11 ployees of the Department responsible for scheduling such
 12 appointments.

13 (b) *ELEMENTS OF PLAN.*—

14 (1) *IN GENERAL.*—The plan required by sub-
 15 section (a) shall include—

16 (A) such actions, resources, technology, and
 17 process improvements as the Secretary deter-
 18 mines necessary to ensure the Department
 19 achieves, in a timely manner, improved delivery
 20 of health care, access to health care, customer ex-
 21 perience and service relating to the receipt of
 22 health care, and efficiency with respect to the de-
 23 livery of health care; and

24 (B) a proposed schedule and timeline to
 25 carry out such plan.

26 (2) *OBJECTIVES.*—

1 (A) *IN GENERAL.*—*The Secretary shall en-*
2 *sure that the plan required by subsection (a) ad-*
3 *resses the following objectives:*

4 (i) *To develop or continue the develop-*
5 *ment of a scheduling system that enables*
6 *both personnel and patients of the Depart-*
7 *ment to view available appointments for*
8 *care furnished by the Department, includ-*
9 *ing primary care, mental health care, and*
10 *all forms of specialty care.*

11 (ii) *To develop or continue the develop-*
12 *ment of a self-service scheduling platform,*
13 *available for use by all patients of the De-*
14 *partment, which shall—*

15 (I) *enable such patients to view*
16 *available appointments and, subject to*
17 *the method provided under subclause*
18 *(II), fully schedule appointments for*
19 *all care furnished by the Department;*

20 (II) *if a referral is required for an*
21 *appointment, provide a method for the*
22 *patient to request a referral and subse-*
23 *quently book an appointment if the re-*
24 *ferral is approved; and*

1 (III) provide such patients with
2 the ability to cancel or reschedule ap-
3 pointments.

4 (iii) To create a process through which
5 all patients of the Department can tele-
6 phonically speak with a scheduler who can
7 assist the patient to determine appointment
8 availability and can fully schedule appoint-
9 ments on behalf of the patient for all care
10 furnished by the Department.

11 (iv) To carry out such other functions,
12 oversight, metric development and tracking,
13 change management, cross-Department co-
14 ordination, and other related matters, in-
15 cluding improvements to employee-facing
16 information technology, training, and proc-
17 esses, as the Secretary determines appro-
18 priate as it relates to scheduling tools, func-
19 tions, and operations with respect to health
20 care appointments furnished by the Depart-
21 ment.

22 (B) EXPLANATION OF INABILITY TO IMPLE-
23 MENT CERTAIN OBJECTIVES, FEATURES, OR
24 SERVICES.—If the Secretary determines that an
25 objective under subparagraph (A), or any feature

1 *or service in connection with that objective, can-*
 2 *not be implemented or otherwise incorporated*
 3 *into a final product pursuant to the plan re-*
 4 *quired by subsection (a), the Secretary shall in-*
 5 *clude with the plan submitted under such sub-*
 6 *section a report containing—*

7 *(i) an explanation as to why that ob-*
 8 *jective, feature, or service cannot be imple-*
 9 *mented or incorporated, as the case may be;*
 10 *and*

11 *(ii) a plan for implementing the plan*
 12 *required by subsection (a) without that ob-*
 13 *jective, feature, or service.*

14 *(c) IMPLEMENTATION.—Not later than two years after*
 15 *submitting to the appropriate committees of Congress the*
 16 *plan required by subsection (a), the Secretary shall fully*
 17 *implement the plan.*

18 *(d) COORDINATION WITH ELECTRONIC HEALTH*
 19 *RECORD MODERNIZATION PROGRAM.—In developing the*
 20 *plan required by subsection (a), the Secretary shall ensure*
 21 *that the elements and objectives of such plan set forth under*
 22 *subsection (b) are developed in consideration of the deploy-*
 23 *ment schedule and capabilities of the Electronic Health*
 24 *Record Modernization Program of the Department to ensure*

1 *a smooth transition to using the tools and features under*
 2 *such plan as relevant and appropriate.*

3 *(e) IMPLEMENTATION REPORTS.—Not later than each*
 4 *of one year and two years after the date on which the Sec-*
 5 *retary submits the plan required by subsection (a), the Sec-*
 6 *retary shall submit to the appropriate committees of Con-*
 7 *gress a report on the progress of the Secretary in imple-*
 8 *menting such plan, including—*

9 *(1) the costs incurred to implement the plan as*
 10 *of the date of the report;*

11 *(2) the expected costs to complete implementation*
 12 *of the plan (including costs for management and tech-*
 13 *nology);*

14 *(3) the schedule for deployment of any capabili-*
 15 *ties developed pursuant to the plan; and*

16 *(4) the goals and metrics achieved, challenges,*
 17 *and lessons learned in implementing the plan.*

18 *(f) RULE OF CONSTRUCTION.—Nothing in this section*
 19 *shall be construed to require the Secretary to include in the*
 20 *plan required by subsection (a) any technology or process*
 21 *that would preclude or impede the ability of a veteran to*
 22 *contact or schedule an appointment directly with a facility*
 23 *or provider through a non-online scheduling process, should*
 24 *the veteran choose to do so.*

25 *(g) DEFINITIONS.—In this section:*

- 1 (1) *APPROPRIATE COMMITTEES OF CONGRESS.*—
2 *The term “appropriate committees of Congress”*
3 *means the Committee on Veterans’ Affairs of the Sen-*
4 *ate and the Committee on Veterans’ Affairs of the*
5 *House of Representatives.*
- 6 (2) *FULLY SCHEDULE.*—*The term “fully sched-*
7 *ule”, with respect to an appointment for health care,*
8 *means that the appointment booking is completed,*
9 *rather than simply requested.*

Amend the title so as to read: “A bill to require the Secretary of Veterans Affairs to establish and implement a plan to improve the process for scheduling appointments for health care from the Department of Veterans Affairs, and for other purposes.”.

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