Public Law 89-785

AN ACT

To amend title 38 of the United States Code to clarify, improve, and add additional programs relating to the Department of Medicine and Surgery of the Veterans' Administration, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. That this Act may be cited as the "Veterans Hospitalization and Medical Services Modernization Amendments of 1966".

TITLE I—AMENDMENTS TO CHAPTER 73 OF TITLE 38, UNITED STATES CODE—DEPARTMENT OF MEDICINE AND SURGERY

TRAINING AND EDUCATION OF HEALTH SERVICE PERSONNEL

SEC. 101. Section 4101 of title 38, United States Code, is amended by inserting "(a)" immediately before the first sentence and by adding at the end thereof the following new subsection:

"(b) In order to more effectively carry out the functions imposed on the Department of Medicine and Surgery by subsection (a) of this section, the Administrator shall carry out a program of training and education of health service personnel, acting in cooperation with schools of medicine, dentistry, osteopathy, and nursing; other institutions of higher learning; medical centers; hospitals; and such other public or nonprofit agencies, institutions, or organizations as the Administrator deems appropriate."

DEPARTMENTAL DIVISIONS

SEC. 102. Section 4102 of title 38, United States Code, is amended by deleting "Medical Service, Dental Service, Nursing Service, and Auxiliary Service" and inserting in lieu thereof the following: "a Medical Service, a Dental Service, a Nursing Service, and such other professional and auxiliary services as the Administrator may find to be necessary to carry out the functions of the Department."

ASSOCIATE DEPUTY CHIEF MEDICAL DIRECTOR; ADDITIONAL ASSISTANT CHIEF MEDICAL DIRECTOR

SEC. 103. (a) (1) Section 4103 (a) of title 38, United States Code, is amended by redesignating paragraphs (3), (4), (5), (6), and (7) as paragraphs (4), (5), (6), (7), and (8), respectively, and inserting a new paragraph (3) to read as follows:

"(3) The Associate Deputy Chief Medical Director, who shall be an assistant to the Chief Medical Director and the Deputy Chief Medical Director. He shall be a qualified doctor of medicine, appointed by the Administrator."

(2) Such section 4103 (a) is further amended by deleting "five", immediately preceding "Assistant Chief Medical Directors," in the first sentence of redesignated paragraph (4), and substituting therefor, "six".

(b) Such section 4103 is further amended by amending subsection (b) thereof to read as follows:

"(b) Except as provided in subsection (c) of this section—

"(1) any appointment under this section shall be for a period of four years, with reappointment permissible for successive like periods,
“(2) any such appointment or reappointment may be extended by the Administrator for a period not in excess of three years, and
“(3) any person so appointed or reappointed shall be subject to removal by the Administrator for cause.”

c) The compensation of the Associate Deputy Chief Medical Director of the Department of Medicine and Surgery of the Veterans’ Administration shall be the same as that of an Assistant Chief Medical Director in such Department.

DELETION OF OBSCURE LANGUAGE

SEC. 101. Section 4104 of title 38, United States Code, is amended by deleting “(2) Managers, pharmacists” and inserting in lieu thereof “(2) Pharmacists”, and by deleting “pathologists,” in subparagraph (2).

CITIZENSHIP REQUIREMENTS APPLICABLE TO PHYSICIANS, DENTISTS, AND NURSES

SEC. 105. Section 4105 of title 38, United States Code, is amended to read as follows:

§ 4105. Qualifications of appointees

“(a) Any person to be eligible for appointment to the following positions in the Department of Medicine and Surgery must have the applicable qualifications:

“(1) Physician—
“hold the degree of doctor of medicine or of doctor of osteopathy from a college or university approved by the Administrator, have completed an internship satisfactory to the Administrator, and be licensed to practice medicine, surgery, or osteopathy in a State;

“(2) Dentist—
“hold the degree of doctor of dental surgery or dental medicine from a college or university approved by the Administrator, and be licensed to practice dentistry in a State;

“(3) Nurse—
“have successfully completed a full course of nursing in a recognized school of nursing, approved by the Administrator, and be registered as a graduate nurse in a State;

“(4) Director of a hospital, domiciliary, center or outpatient clinic—
“have such business and administrative experience and qualifications as the Administrator shall prescribe;

“(5) Optometrist—
“be licensed to practice optometry in a State;

“(6) Pharmacist—
“hold the degree of bachelor of science in pharmacy, or its equivalent, from a school of pharmacy, approved by the Administrator, and be registered as a pharmacist in a State;

“(7) Physical therapists, occupational therapists, dietitians, and other employees shall have such scientific or technical qualifications as the Administrator shall prescribe.

“(b) Except as provided in section 4114 of this title, no person may be appointed in the Department of Medicine and Surgery as a physician, dentist, or nurse unless he is a citizen of the United States.”

GRADE AND SALARY ADJUSTMENTS

SEC. 106. Section 4106 of title 38, United States Code, is amended by—
(a) deleting the words “Automatic promotions” in the second sentence of subsection (e) and inserting in lieu thereof the word “Advancement”; and
(b) adding at the end thereof the following new subsection (e):

“(e) In accordance with regulations prescribed by the Administrator, the grade level and salary of a physician, dentist, or nurse changed from a level of assignment where the grade level is based on both the nature of the assignment and personal qualifications, may be adjusted to the grade and salary otherwise appropriate.”

PAY GRADE—HOSPITAL, DOMICILIARY AND CLINIC DIRECTORS

SEC. 107. (a) Section 4107 of title 38, United States Code, is amended by—

(1) deleting “and Deputy Chief Medical Director” in the first sentence of subsection (a), and substituting therefor, “, Deputy Chief Medical Director and Associate Deputy Chief Medical Director,“.
(2) deleting “or the position of clinic director at an outpatient clinic,” in the second sentence of paragraph (2) of subsection (b), and
(3) adding at the end thereof the following new subsection (c):

“(c) Notwithstanding any other provision of law, the per annum salary rate of each individual serving as a director of a hospital, domiciliary, or center who is not a physician shall not be less than the salary rate which he would receive under this section if his service as a director of a hospital, domiciliary, or center had been service as a physician in the director grade. The position of the director of a hospital, domiciliary, or center shall not be subject to the provisions of the Classification Act of 1949 as amended.”

(b) Any physician or dentist in the executive grade on the date of enactment of this Act by virtue of his holding the position of clinic director at an outpatient clinic may be continued in such grade so long as he continues to hold the same position, notwithstanding the amendment made in section 4107(b) of title 38, United States Code, by section 106(b) of this Act.

TECHNICAL AMENDMENT—DELETION OF OBSOLETE LANGUAGE

SEC. 108. Section 4111 of title 38, United States Code, is amended by deleting “(a)” in the first line and subsection (b) in its entirety.

SPECIAL MEDICAL ADVISORY GROUP; OTHER ADVISORY BODIES

SEC. 109. (a) Section 4112 of title 38, United States Code, is amended (1) by amending the catchline thereof to read “§ 4112. Special Medical Advisory Group and Other Advisory Bodies”, (2) by inserting “[a]” immediately before the first sentence thereof, (3) by deleting “conduct regular calendar quarterly meetings.” in the second sentence thereof, and substituting therefor, “meet on a regular basis as prescribed by the Administrator.”, and (4) by adding at the end thereof the following new subsection:

“(b) In each case where the Administrator has a contract or agreement with any school, institution of higher learning, medical center, hospital, or other public or nonprofit agency, institution, or organization, for the training or education of health service personnel, he shall establish an advisory committee (that is, deans committee, medical advisory committee or the like). Such advisory committee shall advise the Administrator and the Chief Medical Director with respect
to policy matters arising in connection with, and the operation of, the
program with respect to which it was appointed and may be estab­
lished on an institutionwide, multidisciplinary basis or on a regional
basis whenever such is found to be feasible. Members of each such
advisory committee shall be appointed by the Administrator and shall
include personnel of the Veterans' Administration and of the entity
with which the Administrator has entered into such contract or agree­
ment. The number of members and terms of members of each advisory
committee shall be prescribed by the Administrator."

(b) The analysis at the head of chapter 73 of title 38, United States
Code, is amended by deleting:

"4112. Medical advisory group."

and inserting in lieu thereof:

"4112. Special Medical Advisory Group; other advisory bodies."

TRAVEL EXPENSES FOR PART-TIME EMPLOYEES

SEC. 110. Section 4113 of title 38, United States Code, is amended
by deleting "and paragraph (1) of section 4104" and inserting in lieu
thereof , paragraph (1) of section 4104 and physicians, dentists, and
nurses appointed on a temporary full-time or part-time basis under
section 4114."

WAIVING LICENSURE REQUIREMENTS FOR PART-TIME EMPLOYEES

SEC. 111. (a) Section 4114 of title 38, United States Code, is amended
by deleting the words "or part-time" in paragraph (a)(1)(A) and inserting in lieu thereof , part-time, or without
compensation".

(b) Such section 4114 is further amended by adding at the end
thereof the following new subsection:

"(d) The Chief Medical Director may waive for the purpose of
appointments under this section the requirements of section 4105(a)
of this title that the licensure of a physician or dentist, or the registra-
tion of a nurse must be in a "State", if—

"(1) in the case of a physician, he is to be used on a research
or an academic post or where there is no direct responsibility for
the care of patients; or

"(2) in any case, where the individual is to serve in a country
other than the United States and his licensure or registration is
in the country in which he is to serve."

(c) The catchline of such section 4114 is amended to read "Tempo-
rary full-time, part-time, and without compensation appointments;
residencies or internships".

(d) The analysis at the head of chapter 73 of title 38, United States
Code, is amended by deleting:

"4114. Temporary and part-time appointments; residencies and internships."

and inserting in lieu thereof:

"4114. Temporary full-time, part-time, and without compensation appointments;
residencies or internships."

CONTRACTING FOR SCARCE MEDICAL SERVICES

SEC. 112. (a) Chapter 73 of title 38, United States Code, is amended
by adding at the end thereof the following new section:
§ 4117. Contracts for scarce medical specialist services

“The Administrator may enter into contracts with medical schools and clinics to provide scarce medical specialist services at Veterans' Administration facilities (including, but not limited to, services of radiologists, pathologists, and psychiatrists).”

(b) The analysis of such chapter 73 is amended by adding at the end thereof the following:

“4117. Contracts for scarce medical specialist services.”

TITLE II—AMENDMENTS TO CHAPTER 81 OF TITLE 38, UNITED STATES CODE—ACQUISITION AND OPERATION OF HOSPITAL AND DOMICILIARY FACILITIES; PROCUREMENT AND SUPPLY

ACQUISITION, MAINTENANCE, AND CHARGE FOR PARKING FACILITIES

72 Stat. 1252.

Sec. 201. (a) Section 5004 of title 38, United States Code, is amended to read as follows:

§ 5004. Garages and parking facilities

“(a) The Administrator may construct and maintain on reservations of Veterans' Administration hospitals and domiciliaries, garages for the accommodation of privately owned automobiles of employees of such hospitals and domiciliaries. Employees using such garages shall make such reimbursement therefor as the Administrator may deem reasonable.

“(b) (1) The Administrator may establish, operate, and maintain, in conjunction with Veterans' Administration hospitals and domiciliaries, parking facilities for the accommodation of privately owned vehicles of Federal employees, and vehicles of visitors and other individuals having business at such hospitals and domiciliaries.

“(2) The Administrator may establish and collect (or provide for the collection of) fees, for the use of the parking facilities, authorized by subsection (b) (1) of this section, at such rate or rates which he determines would be reasonable under the particular circumstances; but no fee may be charged for the accommodation of any privately owned vehicle used in connection with the transportation of a veteran to or from such a hospital or domiciliary for the purpose of examination or treatment or in connection with a visit to a patient or member in such hospital or domiciliary.

“(3) The Administrator may contract, by lease or otherwise, with responsible persons, firms or corporations, for the operation of such parking facilities, under such terms and conditions as he may prescribe, and without regard to the laws concerning advertising for competitive bids.

“(c) Money received from the use of the garages and from the parking facilities operations authorized by this section, may be credited to the applicable appropriation charged with the cost of operating and maintaining these facilities. Any amount not needed for the maintenance, operation, and repair of these facilities shall be covered into the Treasury of the United States as miscellaneous receipts.”

(b) The table of sections, appearing at the beginning of chapter 81 of such title 38, is amended by deleting therefrom:

“5004. Garages on hospital and domiciliary reservations,”

and inserting in lieu thereof:

“5004. Garages and parking facilities.”
Sec. 202. (a) Section 5012 of title 38, United States Code, is amended by adding a new subsection (c) thereto to read as follows:

"(c) The Administrator may procure laundry services, and other common services as specifically approved by him from nonprofit, tax-exempt educational, medical or community institutions, without regard to the requirements of section 302(c) of the Federal Property and Administrative Services Act of 1949, as amended (41 U.S.C. 252(c)), whenever such services are not reasonably available from private commercial sources. Notwithstanding this exclusion, the provisions of section 304 of that Act shall apply to procurement authorized by this subsection."

(b) The catchline of such section 5012 is amended to read:

"Authority to procure and dispose of property and to negotiate for common services".

(c) The table of sections at the head of chapter 81 of title 38, United States Code, is amended by deleting:

"5012. Authority to procure and dispose of property."

and inserting in lieu thereof:

"5012. Authority to procure and dispose of property and to negotiate for common services."

Sec. 203. Chapter 81 of title 38, United States Code, is amended by adding at the end thereof a new subchapter as follows:

"Subchapter IV—Sharing of Medical Facilities, Equipment, and Information

§ 5051. Statement of congressional purpose

"It is the purpose of this subchapter to improve the quality of hospital care and other medical service provided veterans under this title, by authorizing the Administrator to enter into agreements with medical schools, hospitals, and research centers throughout the country in order to receive from and share with such medical schools, hospitals, and research centers the most advanced medical techniques and information, as well as certain specialized medical resources which otherwise might not be feasibly available or to effectively utilize other medical resources with the surrounding medical community, without diminution of services to veterans. Among other things, it is intended, by these means, to strengthen the medical programs at those Veterans' Administration hospitals which are located in small cities or rural areas and thus are remote from major medical centers."

§ 5052. Definitions

"For the purposes of this subchapter—

(a) The term ‘research center’ means an institution (or part of an institution), the primary function of which is research, training of specialists, and demonstrations and which, in connection therewith, provides specialized, high quality diagnostic and treatment services for inpatients and outpatients.

(b) The term ‘specialized medical resources’ means medical resources (whether equipment, space, or personnel) which, because of cost, limited availability, or unusual nature, are either unique in the medical community or are subject to maximum utilization only through mutual use.
(c) The term ‘hospital’, unless otherwise specified, includes any Federal, State, local, or other public or private hospital.

§ 5053. Specialized medical resources

(a) To secure certain specialized medical resources which otherwise might not be feasibly available, or to effectively utilize certain other medical resources, the Administrator may, when he determines it to be in the best interest of the prevailing standards of the Veterans’ Administration medical care program, make arrangements, by contract or other form of agreement, as set forth in paragraphs (1) and (2) below, between Veterans’ Administration hospitals and other hospitals (or medical schools or other medical installations having hospital facilities) in the medical community:

(1) for the exchange of use of specialized medical resources when such an agreement will obviate the need for a similar resource to be provided in a Veterans’ Administration facility; or

(2) for the mutual use, or exchange of use, of specialized medical resources in a Veterans’ Administration facility, which have been justified on the basis of veterans’ care, but which are not utilized to their maximum effective capacity.

The Administrator may determine the geographical limitations of a medical community as used in this section.

(b) Arrangements entered into under this section shall provide for reciprocal reimbursement based on a charge which covers the full cost of services rendered, supplies used, and including normal depreciation and amortization costs of equipment. Any proceeds to the Government received therefrom shall be credited to the applicable Veterans’ Administration medical appropriation.

(c) Eligibility for hospital care and medical services furnished any veteran pursuant to this section shall be subject to the same terms as though provided in a Veterans’ Administration facility, and provisions of this title applicable to persons receiving hospital care or medical services in a Veterans’ Administration facility shall apply to veterans treated hereunder.

§ 5054. Exchange of medical information

(a) The Administrator is authorized to enter into agreements with medical schools, hospitals, research centers, and individual members of the medical profession under which medical information and techniques will be freely exchanged and the medical information services of all parties to the agreement will be available for use by any party to the agreement under conditions specified in the agreement. In carrying out the purposes of this section, the Administrator shall utilize recent developments in electronic equipment to provide a close educational, scientific, and professional link between Veterans’ Administration hospitals and major medical centers. Such agreements shall be utilized by the Administrator to the maximum extent practicable to create, at each Veterans’ Administration hospital which is a part of any such agreement, an environment of academic medicine which will help such hospital attract and retain highly trained and qualified members of the medical profession.

(b) In order to bring about utilization of all medical information in the surrounding medical community, particularly in remote areas, and to foster and encourage the widest possible cooperation and consultation among all members of the medical profession in such community, the educational facilities and programs established at Veterans’ Administration hospitals and the electronic link to medical centers shall be made available for use by surrounding medical community. The Administrator may charge a fee for such services (on
annual or like basis) at rates which he determines, after appropriate
study, to be fair and equitable. The financial status of any user of
such services shall be taken into consideration by the Administrator
in establishing the amount of the fee to be paid.

§ 5055. Pilot programs; grants to medical schools

(a) The Administrator may establish an Advisory Subcommittee
on Programs for Exchange of Medical Information, of the Special
Medical Advisory Group, established under section 4112 of this title,
to advise him on matters regarding the administration of this section
and to coordinate these functions with other research and education
programs in the Department of Medicine and Surgery. The Assistant
Chief Medical Director for Research and Education in Medicine
shall be an ex officio member of this Subcommittee.

(b) The Administrator, upon the recommendation of the Sub-
committee, is authorized to make grants to medical schools, hospitals,
and research centers to assist such medical schools, hospitals, and
research centers in planning and carrying out agreements authorized
by section 5054 of this title. Such grants may be used for the employ-
ment of personnel, the construction of facilities, the purchasing of
equipment when necessary to implement such programs, and for such
other purposes as will facilitate the administration of this section.

(c) (1) There is hereby authorized to be appropriated an amount
not to exceed $3,000,000 for each of the first four fiscal years following
the fiscal year in which this subchapter is enacted for the purpose of
developing and carrying out medical information programs under
this section on a pilot program basis and for the grants authority in
subsection (b) of this section. Pilot programs authorized by this
subsection shall be carried out at Veterans' Administration hospitals
in geographically dispersed areas of the United States.

(2) Funds authorized under this section shall not be available to
pay the cost of hospital, medical, or other care of patients except to
the extent that such cost is determined by the Administrator to be
incident to research, training, or demonstration activities carried out
under this section.

(d) The Administrator, after consultation with the Subcommittee
shall prescribe regulations covering the terms and conditions for
making grants under this section.

(e) Each recipient of a grant under this section shall keep such
records as the Administrator may prescribe, including records which
fully disclose the amount and disposition by such recipient of the pro-
ceeds of such grant, the total cost of the project or undertaking in
connection with which such grant is made or used, and the amount of
that portion of the cost of the project or undertaking supplied by
other sources, and such records as will facilitate an effective audit.

(f) The Administrator and the Comptroller General of the
United States, or any of their duly authorized representatives, shall
have access, for the purpose of audit and examination, to any books,
documents, papers, and records of the recipient of any grant under this
section which are pertinent to any such grant.

§ 5056. Coordination with programs carried out under the Heart
Disease, Cancer, and Stroke Amendments of 1965

The Administrator and the Secretary of Health, Education, and
Welfare shall, to the maximum extent practicable, coordinate pro-
grams carried out under this subchapter and programs carried out
under title IX of the Public Health Service Act.
"§ 5057. Reports to Congress

"The Administrator shall submit to the Congress not more than sixty days after the end of each fiscal year separate reports on the activities carried out under sections 5053 and 5054 of this subchapter, each report to include (1) an appraisal of the effectiveness of the programs authorized herein and the degree of cooperation from other sources, financial and otherwise, and (2) recommendations for the improvement or more effective administration of such programs."

Sec. 2. The section analysis at the beginning of chapter 81 of title 38, United States Code, is amended by adding at the end thereof the following:

"SUBCHAPTER IV—SHARING OF MEDICAL FACILITIES, EQUIPMENT, AND INFORMATION

"5051. Statement of congressional purpose.
"5052. Definitions.
"5053. Specialized medical resources.
"5054. Exchange of medical information.
"5055. Pilot programs; grants to medical schools.
"5056. Coordination with programs carried out under the Heart Disease, Cancer, and Stroke Amendments of 1965.
"5075. Reports to Congress."

TITLE III—MISCELLANEOUS AMENDMENTS

CORRECTION OF ADMINISTRATIVE ERROR

72 Stat. 1114.

Sec. 301. Section 210 of title 38, United States Code, is amended by adding "(1)" immediately after "(c)" and the following new paragraph:

"(2) If the Administrator determines that benefits administered by the Veterans' Administration have not been provided by reason of administrative error on the part of the Federal Government or any of its employees, he is authorized to provide such relief on account of such error as he determines equitable, including the payment of moneys to any person whom he determines equitably entitled thereto."

LEASE OF MOTOR VEHICLES OR AIRCRAFT

Sec. 302. Section 213 of title 38, United States Code, is amended by adding the following sentence: "The Administrator may also enter into contracts or agreements with private concerns or public agencies for the hiring of passenger motor vehicles or aircraft for official travel whenever, in his judgment, such arrangements are in the interest of efficiency or economy."

TRANSPORTATION OF EMPLOYEES IN EMERGENCIES

Sec. 303. (a) Section 233 of title 38, United States Code, is amended by inserting "(a)" at the beginning thereof, and by adding a new subsection "(b)" to read as follows:

"(b) The Administrator, when he determines that an emergency situation exists and that such action is necessary for the effective conduct of the affairs of the Veterans' Administration, may utilize Government-owned, or leased, vehicles to transport employees to and from their place of employment and the nearest adequate public transportation, or, if such public transportation is either unavailable or not feasible to use, to and from their place of employment and their home. The Administrator shall establish reasonable rates to cover the cost of the service rendered, and all proceeds collected therefrom shall be applied to the applicable appropriation."
(b) The catchline of such section 233 is amended to read:

"§ 233. Employees' apparel; school transportation; recreational equipment; visual exhibits; personal property; emergency transportation of employees."

(c) The analysis at the head of chapter 3 of title 38, United States Code, is amended by deleting:

"233. Employees' apparel; school transportation; recreational equipment; visual exhibits; personal property."

and inserting in lieu thereof:

"233. Employees' apparel; school transportation; recreational equipment; visual exhibits; personal property; emergency transportation of employees."

AUTHORIZING TREATMENT OF NON-SERVICE-CONNECTED DISABILITY OF VETERAN HOSPITALIZED FOR SERVICE-CONNECTED CONDITION

Sec. 304. That section 610 of title 38, United States Code, is amended by adding at the end thereof the following new subsection:

"(c) While any veteran is receiving hospital care in any Veterans' Administration facility, the Administrator may, within the limits of Veterans' Administration facilities, furnish medical services to correct or treat any non-service-connected disability of such veteran, in addition to treatment incident to the disability for which he is hospitalized, if the veteran is willing, and the Administrator determines that the furnishing of such medical services (1) would be in the interest of the veteran, (2) would not prolong the hospitalization of such veteran, and (3) would not interfere with the furnishing of medical services to other veterans under authority other than this subsection."

Approved November 7, 1966.

Public Law 89-786

AN ACT

To authorize the erection of a memorial in the District of Columbia to General John J. Pershing.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That the American Battle Monuments Commission is authorized to provide for the erection of a memorial to the late John J. Pershing, General of the Armies of the United States, and to the officers and men under his command, such memorial to be erected—

(1) in accordance with a design to be submitted by the American Battle Monuments Commission and approved by the President's Temporary Commission on Pennsylvania Avenue or its successor in interest; and

(2) on that parcel of federally owned land in the northwest section of the District of Columbia, bounded on the north by Pennsylvania Avenue, on the south by E Street, on the west by Fifteenth Street, and on the east by Fourteenth Street.

Sec. 2. The maintenance and care of the memorial herein authorized to be erected shall, upon completion, be the responsibility of the Secretary of the Interior.

Sec. 3. There is hereby authorized to be appropriated such amounts as may be necessary to carry out the provisions of this Act.

Approved November 7, 1966.