Sec. 2. Section 4(a)(2) of the Land and Water Conservation Fund Act of 1965, as amended (78 Stat. 879; 16 U.S.C. 460l-5), is amended to read as follows:

"Reasonable admission fees for a single visit at any designated area shall be established by the administering Secretary for persons who choose not to purchase the annual permit or who enter such an area by means other than by private, noncommercial vehicle. A 'single visit' means that length of time a visitor remains within the exterior boundary of a designated fee area beginning from the day he first enters the area until he leaves, except that on the same day such admission fee is paid, the visitor may leave and reenter without the payment of an additional admission fee to the same area."

Approved August 1, 1973.

Public Law 93-82

AN ACT
To amend title 38 of the United States Code to provide improved and expanded medical and nursing home care to veterans; to provide hospital and medical care to certain dependents and survivors of veterans; to provide for improved structural safety of Veterans' Administration facilities; to improve recruitment and retention of career personnel in the Department of Medicine and Surgery; and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That this Act may be cited as the "Veterans Health Care Expansion Act of 1973".

TITLE I—HOSPITAL, DOMICILIARY, AND MEDICAL CARE BENEFITS

Sec. 101. (a) Subparagraph (C) of section 601(4) of title 38, United States Code, is amended to read as follows:

"(C) private facilities for which the Administrator contracts in order to provide (i) hospital care or medical services for persons suffering from service-connected disabilities or from disabilities for which such persons were discharged or released from the active military, naval, or air service; (ii) hospital care for women veterans; or (iii) hospital care for veterans in a State, territory, Commonwealth, or possession of the United States not contiguous to the forty-eight contiguous States, except that the annually determined average hospital patient load per thousand veteran population hospitalized at Veterans' Administration expense in Government and private facilities in each such non-contiguous State may not exceed the average patient load per thousand veteran population hospitalized by the Veterans' Administration within the forty-eight contiguous States; but authority under this clause (iii) shall expire on December 31, 1978.

(b) Section 601(5) of such title is amended to read as follows:

"(5) The term 'hospital care' includes—"

"(A) (i) medical services rendered in the course of the hospitalization of any veteran, and (ii) transportation and incidental expenses for any veteran who is in need of treatment for a service-connected disability or is unable to defray the expense of transportation;

"(B) such mental health services, consultation, professional counseling, and training (including (i) necessary expenses for
transportation if unable to defray such expenses; or (ii) necessary expenses of transportation and subsistence in the case of a veteran who is receiving care for a service-connected disability, or in the case of a dependent or survivor of a veteran receiving care under the last sentence of section 613(b) of this title, under the terms and conditions set forth in section 111 of this title) of the members of the immediate family (including legal guardians) of a veteran or such a dependent or survivor of a veteran, or, in the case of a veteran or such dependent or survivor of a veteran who has no immediate family members (or legal guardian), the person in whose household such veteran, or such a dependent or survivor certifies his intention to live, as may be necessary or appropriate to the effective treatment and rehabilitation of a veteran or such a dependent or survivor of a veteran; and

“(C) (i) medical services rendered in the course of the hospitalization of a dependent or survivor of a veteran receiving care under the last sentence of section 613(b) of this title, and

(ii) transportation and incidental expenses for such dependent or survivor of a veteran who is in need of treatment for any injury, disease, or disability and is unable to defray the expense of transportation.”,

(c) Section 601(6) of such title is amended by inserting immediately after “treatment,” the following: “such home health services as the Administrator determines to be necessary or appropriate for the effective and economical treatment of a disability of a veteran or a dependent or survivor of a veteran receiving care under the last sentence of section 613(b) of this title”.

SEC. 102. Section 610 of title 38, United States Code, is amended by—

(1) inserting in subsection (a) “or nursing home care” immediately after “hospital care” where it first appears;

(2) striking out clause (1) (B) of subsection (a) and inserting in lieu thereof the following:

“(B) any veteran for a non-service-connected disability if he is unable to defray the expenses of necessary hospital care;”;

(3) amending subsection (c) to read as follows:

“(c) While any veteran is receiving hospital care or nursing home 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 finds such services to be reasonably necessary to protect the health of such veteran.”; and

(4) adding at the end thereof the following new subsection:

“(d) In no case may nursing home care be furnished in a hospital not under the direct and exclusive jurisdiction of the Administrator except as provided in section 620 of this title.”.

SEC. 103. (a) Subsection (f) of section 612 of title 38, United States Code, is amended to read as follows:

“(f) The Administrator may also furnish medical services for any disability on an outpatient or ambulatory basis—
“(1) to any veteran eligible for hospital care under section 610 of this title (A) where such services are reasonably necessary in preparation for, or to obviate the need of, hospital admission, or (B) where such a veteran has been granted hospital care and such medical services are reasonably necessary to complete treatment incident to such hospital care; and

“(2) to any veteran who has a service-connected disability rated at 80 per centum or more.”

(b) Strike out sections 613 and 614 in their entirety and insert in lieu thereof:

“§ 613. Medical care for survivors and dependents of certain veterans

“(a) The Administrator is authorized to provide medical care, in accordance with the provisions of subsection (b) of this section, for—

“(1) the wife or child of a veteran who has a total disability, permanent in nature, resulting from a service-connected disability, and

“(2) the widow or child of a veteran who died as a result of a service-connected disability

who are not otherwise eligible for medical care under chapter 55 of title 10 (CHAMPUS).

“(b) In order to accomplish the purposes of subsection (a) of this section, the Administrator shall provide for medical care in the same or similar manner and subject to the same or similar limitations as medical care is furnished to certain dependents and survivors of active duty and retired members of the Armed Forces under chapter 55 of title 10 (CHAMPUS), by—

“(1) entering into an agreement with the Secretary of Defense under which the Secretary shall include coverage for such medical care under the contract, or contracts, he enters into to carry out such chapter 55, and under which the Administrator shall fully reimburse the Secretary for all costs and expenditures made for the purposes of affording the medical care authorized pursuant to this section; or

“(2) contracting in accordance with such regulations as he shall prescribe for such insurance, medical service, or health plans as he deems appropriate.

In cases in which Veterans Administration medical facilities are particularly equipped to provide the most effective care and treatment, the Administrator is also authorized to carry out such purposes through the use of such facilities not being utilized for the care of eligible veterans.

“§ 614. Fitting and training in use of prosthetic appliances; seeing-eye dogs

“(a) Any veteran who is entitled to a prosthetic appliance shall be furnished such fitting and training, including institutional training, in the use of such appliance as may be necessary, whether in a Veterans Administration facility or other training institution, or by outpatient treatment, including such service under contract, and including
necessary travel expenses to and from his home to such hospital or training institution.

"(b) The Administrator may provide seeing-eye or guide dogs trained for the aid of the blind to veterans who are entitled to disability compensation, and he may pay all necessary travel expenses to and from their homes and incurred in becoming adjusted to such seeing-eye or guide dogs. The Administrator may also provide such veterans with mechanical or electronic equipment for aiding them in overcoming the handicap of blindness."

(c) The table of sections at the beginning of chapter 17 of such title is amended by striking out

"613. Fitting and training in use of prosthetic appliances.
"614. Seeing-eye dogs."

and inserting

"613. Medical care for survivors and dependents of certain veterans.
"614. Fitting and training in use of prosthetic appliances; seeing-eye dogs."

Sec. 104. (a) The first sentence of subsection (a) of section 620 of title 38, United States Code, is amended by redesignating clauses (1) and (2) as clauses (i) and (ii), respectively; and by amending that portion preceding such clauses to read as follows:

"(a) Subject to subsection (b) of this section, the Administrator may transfer—

"(1) any veteran who has been furnished care by the Administrator in a hospital under the direct and exclusive jurisdiction of the Administrator, and

"(2) any person (A) who has been furnished care in any hospital of any of the Armed Forces, (B) who the appropriate Secretary concerned has determined has received maximum hospital benefits but requires a protracted period of nursing home care, and (C) who upon discharge therefrom will become a veteran to any public or private institution not under the jurisdiction of the Administrator which furnishes nursing home care, for care at the expense of the United States, only if the Administrator determines that—"

(b) The second sentence of section 620(a) of such title is amended by striking out the designations (A) and (B) and inserting in lieu thereof (I) and (II).

(c) Section 620(b) of such title is amended (1) by adding "or admitted" after "transferred" and (2) by adding at the end thereof the following: "The standards prescribed and any report of inspection of institutions furnishing care to veterans under this section made by or for the Administrator shall, to the extent possible, be made available to all Federal, State, and local agencies charged with the responsibility of licensing or otherwise regulating or inspecting such institutions."

(d) Section 620 of such title is further amended by adding at the end thereof the following new subsection (d):

"(d) Subject to subsection (b) of this section, the Administrator may authorize for any veteran requiring nursing home care for a service-connected disability direct admission for such care at the expense
SEC. 105. (a) Section 626 of title 38, United States Code, is amended by striking out "fire" and inserting in lieu thereof "fire, earthquake, or other natural disaster".

(b) The catchline at the beginning of section 626 of such title is amended to read as follows:

"§ 626. Reimbursement for loss of personal effects by natural disaster".

SEC. 106. (a) Subchapter III of chapter 17 of title 38, United States Code, is amended by adding at the end thereof the following new section:

"§ 628. Reimbursement of certain medical expenses

(a) The Administrator may, under such regulations as he shall prescribe, reimburse veterans entitled to hospital care or medical services under this chapter for the reasonable value of such care or services (including necessary travel), for which such veterans have made payment, from sources other than the Veterans' Administration, where—

(1) such care or services were rendered in a medical emergency of such nature that they would have been hazardous to life or health;

(2) such care or services were rendered to a veteran in need thereof (A) for an adjudicated service-connected disability, (B) for a non-service-connected disability associated with and held to be aggravating a service-connected disability, (C) for any disability of a veteran who has a total disability permanent in nature from a service-connected disability, or (D) for any illness, injury, or dental condition in the case of a veteran who is found to be (i) in need of vocational rehabilitation under chapter 31 of this title and for whom an objective had been selected or (ii) pursuing a course of vocational rehabilitation training and is medically determined to have been in need of care or treatment to make possible his entrance into a course of training, or prevent interruption of a course of training, or hasten the return to a course of training which was interrupted because of such illness, injury, or dental condition; and

(3) Veterans' Administration or other Federal facilities were not feasibly available, and an attempt to use them beforehand would not have been reasonable, sound, wise, or practical.

(b) In any case where reimbursement would be in order under subsection (a) of this section, the Administrator may, in lieu of reimbursing such veteran, make payment of the reasonable value of care or services directly—

(1) to the hospital or other health facility furnishing the care or services; or
"(2) to the person or organization making such expenditure on behalf of such veteran."

(b) The table of sections at the beginning of such chapter is amended by deleting

"626. Reimbursement for loss of personal effects by fire."
"627. Persons eligible under prior law."

and inserting in lieu thereof

"626. Reimbursement for loss of personal effects by natural disaster."
"627. Persons eligible under prior law.
"628. Reimbursement of certain medical expenses."

Sec. 107. (a) Chapter 17 of title 38, United States Code, is amended by striking out sections 631 and 632 in their entirety and inserting in lieu thereof the following:

"§ 631. Assistance to the Republic of the Philippines

"The President is authorized to assist the Republic of the Philippines in providing medical care and treatment for Commonwealth Army veterans and new Philippine Scouts in need of such care and treatment for service-connected, disabilities and non-service-connected disabilities under certain conditions.

"§ 632. Contracts and grants to provide hospital care, medical services and nursing home care

"(a) The President, with the concurrence of the Republic of the Philippines, may authorize the Administrator to enter into a contract with the Veterans Memorial Hospital, with the approval of the appropriate department of the Government of the Republic of the Philippines, covering the period beginning on July 1, 1973, and ending on June 30, 1978, under which the United States—

"(1) will pay for hospital care in the Republic of the Philippines, or for medical services which shall be provided either in the Veterans Memorial Hospital, or by contract, or otherwise by the Administrator in accordance with the conditions and limitations applicable generally to beneficiaries under section 612 of this title, for Commonwealth Army veterans and new Philippine Scouts determined by the Administrator to be in need of such hospital care or medical services for service-connected disabilities;

"(2) will pay for hospital care at the Veterans Memorial Hospital for Commonwealth Army veterans, and for new Philippine Scouts if they enlisted before July 4, 1946, determined by the Administrator to need such care for non-service-connected disabilities if they are unable to defray the expenses of necessary hospital care;

"(3) may provide for the payment of travel expenses pursuant to section 111 of this title for Commonwealth Army veterans and new Philippine Scouts in connection with hospital care or medical services furnished them;

"(4) may provide for payments for nursing home care, on the same terms and conditions as set forth in section 620(a) of this title, for any Commonwealth Army veteran or new Philippine Scout determined to need such care at a per diem rate not to exceed 50 per centum of the hospital per diem rate established pursuant to clause (6) of this subsection;"
“(5) may provide that payments for hospital care and for medical services provided to Commonwealth Army veterans and new Philippine Scouts or to United States veterans may consist in whole or in part of available medicines, medical supplies, and equipment furnished by the Administrator to the Veterans Memorial Hospital at valuations therefor as determined by the Administrator, who may furnish through the revolving supply fund, pursuant to section 5011 of this title, such medicines, medical supplies, and equipment as necessary for this purpose and to use therefore, as applicable, appropriations available for such payments;

“(6) will provide for payments for such hospital care at a per diem rate to be jointly determined for each fiscal year by the two Governments to be fair and reasonable; and

“(7) may stop payments under any such contract upon reasonable notice as stipulated by the contract if the Republic of the Philippines and the Veterans Memorial Hospital fail to maintain such hospital in a well-equipped and effective operating condition, as determined by the Administrator.

“(b) The total of the payments authorized by subsection (a) of this section shall not exceed $2,000,000 for any one fiscal year ending before July 1, 1978, which shall include an amount not to exceed $250,000 for any one such fiscal year for the purposes of clause (4) of such subsection.

“(c) The contract authorized by subsection (a) of this section may provide for the use by the Republic of the Philippines of beds, equipment, and other facilities of the Veterans Memorial Hospital at Manila, not required for hospital care of Commonwealth Army veterans or new Philippine Scouts for service-connected disabilities, for hospital care of other persons in the discretion of the Republic of the Philippines except that (1) priority of admission and retention in such hospital shall be accorded Commonwealth Army veterans and new Philippine Scouts needing hospital care for service-connected disabilities, and (2) such use shall not preclude the use of available facilities in such hospital on a contract basis for hospital care or medical services for persons eligible therefor from the Veterans' Administration.

“(d) To further assure the effective care and treatment of patients in the Veterans Memorial Hospital, there is authorized to be appropriated for each fiscal year during the five years beginning July 1, 1973, and ending June 30, 1978—

“(1) the sum of $50,000 to be used by the Administrator for making grants to the Veterans Memorial Hospital for the purpose of education and training of health service personnel who are assigned to such hospital; and

“(2) the sum of $50,000 to be used by the Administrator for making grants to the Veterans Memorial Hospital for the purpose of assisting the Republic of the Philippines in the replacement and upgrading of equipment and in rehabilitating the physical plant and facilities of such hospital.
Such grants shall be made on such terms and conditions as prescribed by the Administrator, including approval by him of all education and training programs conducted by the hospital under such grants. Any appropriation made for carrying out the purposes of clause (2) of this subsection shall remain available until expended.

(b) The table of sections at the beginning of such chapter 17 is amended by striking out

"631. Grants to the Republic of the Philippines.
"632. Modification of agreement with the Republic of the Philippines effectuating the Act of July 1, 1948."

and inserting in lieu thereof

"631. Assistance to the Republic of the Philippines.
"632. Contracts and grants to provide hospital care, medical services and nursing home care."

(c) Nothing in subsection (a) of this section shall be deemed to affect in any manner any right, cause, obligation, contract (specifically including that contract executed April 25, 1967, between the Government of the Republic of the Philippines and the Government of the United States resulting from Public Law 89–612, which shall remain in force and effect until modified or superseded by an agreement executed under authority of this Act), authorization of appropriation, grant, function, power, or duty vested by law or otherwise under the provisions of section 632 of title 38, United States Code, in effect on the day before the date of enactment of this section.

Sec. 108. (a) Section 624 of title 38, United States Code, is amended by adding at the end thereof the following new subsection:

"(d) The Administrator may furnish nursing home care, on the same terms and conditions set forth in section 620(a) of this title and at the same rate as specified in section 632(a) (4) of this title, to any veteran who has been furnished hospital care in the Philippines pursuant to this section, but who requires a protracted period of nursing home care."

(b) The catchline at the beginning of section 624 of such title is amended by adding at the end thereof the following new subchapter:

"§ 624. Hospital care, medical services and nursing home care abroad."

Sec. 109. (a) Chapter 17 of title 38, United States Code, is further amended by adding at the end thereof the following new subchapter:

"Subchapter VI—Sickle Cell Anemia

§ 651. Screening, counseling, and medical treatment

The Administrator is authorized to carry out a comprehensive program of providing sickle cell anemia screening, counseling, treatment, and information under the provisions of this chapter.

§ 652. Research

The Administrator is authorized to carry out research and research training in the diagnosis, treatment, and control of sickle cell anemia.
based upon the screening examinations and treatment provided under this subchapter.

"§ 653. Voluntary participation; confidentiality

"(a) The participation by any person in any program or portion thereof under this subchapter shall be wholly voluntary and shall not be a prerequisite to eligibility for or receipt of any other service or assistance from, or to participation in, any other program under this title.

"(b) The Administrator shall promulgate rules and regulations to insure that all information and patient records prepared or obtained under this subchapter shall be held confidential except for (1) such information as the patient (or his guardian) requests in writing to be released or (2) statistical data compiled without reference to patient names or other identifying characteristics.

"§ 654. Reports

"The Administrator shall include in the annual report to the Congress required by section 214 of this title a comprehensive report on the administration of this subchapter, including such recommendations for additional legislation as the Administrator deems necessary."

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

"SUBCHAPTER VI—SICKLE CELL ANEMIA

"651. Screening, counseling, and medical treatment.
"652. Research.
"653. Voluntary participation; confidentiality.
"654. Reports."

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

Sec. 201. Section 4101 of title 38, United States Code, is amended by amending subsection (b) to read as follows:

"(b) In order to carry out more effectively the primary function of the Department of Medicine and Surgery to provide a complete medical and hospital service for the medical care and treatment of veterans and in order to assist in providing an adequate supply of health manpower to the Nation, the Administrator shall, to the extent feasible without interfering with the medical care and treatment of veterans, develop and carry out a program of education and training of such health manpower (including the developing and evaluating of new health careers, interdisciplinary approaches and career advancement opportunities), and shall carry out a major program for the recruitment, training, and employment of veterans with medical military occupation specialties as physicians’ assistants, dentists’ assistants, and other medical technicians (including advising all such qualified veterans and servicemen about to be discharged or released from active duty of such employment opportunities), acting in cooperation with such schools of medicine, osteopathy, dentistry, nursing, pharmacy, optometry, podiatry, public health, or allied health professions; other institutions of higher learning; medical centers; academic health centers; hospitals; and such other public or nonprofit agencies, institutions, or organizations as the Administrator deems appropriate.

"(c) (1) Within ninety days after enactment of this subsection, the Administrator, in consultation with the Chief Medical Director, is
directed to conclude negotiations for an agreement with the National Academy of Sciences under which such Academy (utilizing its full resources and expertise) will conduct an extensive review and appraisal of personnel and other resource requirements in Veterans' Administration hospitals, clinics, and other medical facilities to determine a basis for the optimum numbers and categories of such personnel and other resources needed to insure the provision to eligible veterans of high quality care in all hospital, medical, domiciliary, and nursing home facilities. Such agreement shall provide that (A) at the earliest feasible date interim reports and the final report will be submitted by the National Academy of Sciences to the Administrator, the President of the Senate, and the Speaker of the House of Representatives, and (B) the final report will be submitted no later than twenty-four months after the date of the agreement except that the Administrator, in consultation with the Chief Medical Director and after consultation with the House and Senate Committees on Veterans' Affairs, may permit an extension up to twelve additional months.

"(2) Within ninety days after the submission of the final report described in subsection (a) of this section, the Administrator shall submit to the Senate and House Committees on Veterans' Affairs a detailed report of his views on the National Academy of Sciences' findings and recommendations submitted in such report, including (A) the steps and timetable therefor (to be carried out in not less than three years) he proposes to take to implement such findings and recommendations and (B) any disagreements, and the reasons therefor, with respect to such findings and recommendations.

"(3) The Administrator shall cooperate fully with the National Academy of Sciences, and make available to the Academy all such staff, information, records, and other assistance, and shall set aside for such purposes such sums, as are necessary to insure the success of the study."

Sec. 202. Section 4103(a) of title 38, United States Code, is amended—

(1) by amending paragraph (4) to read as follows:

"(4) Not to exceed eight Assistant Chief Medical Directors, who shall be appointed by the Administrator upon the recommendations of the Chief Medical Director. Not more than two Assistant Chief Medical Directors may be individuals qualified in the administration of health services who are not doctors of medicine, dental surgery, or dental medicine. One Assistant Chief Medical Director shall be a qualified doctor of dental surgery or dental medicine who shall be directly responsible to the Chief Medical Director for the operation of the Dental Service."; and

(2) by amending paragraph (7) to read as follows:

"(7) A Director of Pharmacy Service, a Director of Dietetic Service, and a Director of Optometry, appointed by the Administrator."

Sec. 203. Section 4107 of title 38, United States Code, is amended by—

(1) amending subsections (a) and (b) to read as follows:

"(a) The per annum full-pay scale or ranges for positions provided in section 4103 of this title, other than Chief Medical Director and Deputy Chief Medical Director, shall be as follows:

"Section 4103 Schedule

"Associate Deputy Chief Medical Director, at the annual rate provided in section 5316 of title 5 for positions in level V of the Executive Schedule."
"Assistant Chief Medical Director, $41,734.
Medical Director, $36,103 minimum to $40,915 maximum.
Director of Nursing Service, $36,103 minimum to $40,915 maximum.
Director of Chaplain Service, $31,203 minimum to $39,523 maximum.
Director of Pharmacy Service, $31,203 minimum to $39,523 maximum.
Director of Dietetic Service, $31,203 minimum to $39,523 maximum.
Director of Optometry, $31,203 minimum to $39,523 maximum.
(b) (1) The grades and per annum full-pay ranges for positions provided for in paragraph (1) of section 4104 of this title shall be as follows:

"Physician and Dentist Schedule

Director grade, $31,203 minimum to $39,523 maximum.
Executive grade, $28,996 minimum to $37,699 maximum.
Chief grade, $26,898 minimum to $34,971 maximum.
Senior grade, $23,088 minimum to $30,018 maximum.
Intermediate grade, $19,700 minimum to $25,613 maximum.
Full grade, $16,682 minimum to $21,686 maximum.
Associate grade, $13,996 minimum to $18,190 maximum.

"Nurse Schedule

Assistant Director grade, $23,088 minimum to $30,018 maximum.
Chief grade, $19,700 minimum to $25,613 maximum.
Senior grade, $16,682 minimum to $21,686 maximum.
Intermediate grade, $13,996 minimum to $18,190 maximum.
Full grade, $11,614 minimum to $15,097 maximum.
Associate grade, $10,012 minimum to $13,018 maximum.
Junior grade, $8,572 minimum to $11,146 maximum.

(2) No person may hold the director grade in the Physician and Dentist Schedule unless he is serving as a director of a hospital, domiciliary, center, or outpatient clinic (independent). No person may hold the executive grade unless he holds the position of chief of staff at a hospital, center, or outpatient clinic (independent), or comparable position."; and

(2) adding at the end thereof the following new subsections:

"(d) The limitations in section 5308 of title 5 shall apply to pay limitation under this section.

(e) (1) In addition to the basic compensation provided for nurses in subsection (b) (1) of this section, a nurse shall receive additional compensation as provided by paragraphs (2) through (8) of this subsection.

(2) A nurse performing service on a tour of duty, any part of which is within the period commencing at 6 postmeridian and ending at 6 antemeridian, shall receive additional compensation for each hour of service on such tour at a rate equal to 10 per centum of the employee's basic hourly rate, if at least four hours of such tour fall between 6 postmeridian and 6 antemeridian. When less than four hours of such tour fall between 6 postmeridian and 6 antemeridian, the nurse shall be paid the differential for each hour of work performed between those hours.

(3) A nurse performing service on a tour of duty, any part of which is within the period commencing at midnight Saturday and ending at midnight Sunday, shall receive additional compensation for
each hour of service on such tour at a rate equal to 25 per centum of such nurse's basic hourly rate.

"(4) A nurse performing service on a holiday designated by Federal statute or Executive order shall receive such nurse's regular rate of basic pay, plus additional pay at a rate equal to such regular rate of basic pay, for that holiday work, including overtime work. Any service required to be performed by a nurse on such a designated holiday shall be deemed to be a minimum of two hours in duration.

"(5) A nurse performing officially ordered or approved hours of service in excess of forty hours in an administrative workweek, or in excess of eight hours in a day, shall receive overtime pay for each hour of such additional service; the overtime rates shall be one and one-half times such nurse's basic hourly rate, not to exceed one and one-half times the basic hourly rate for the minimum rate of Intermediate grade of the Nurse Schedule. For the purposes of this paragraph, overtime must be of at least fifteen minutes duration in a day to be creditable for overtime pay. Compensatory time off in lieu of pay for service performed under the provisions of this paragraph shall not be permitted. Any excess service performed under this paragraph on a day when service was not scheduled for such nurse, or for which such nurse is required to return to her place of employment, shall be deemed to be a minimum of two hours in duration.

"(6) For the purpose of computing the additional compensation provided by paragraph (2), (3), (4), or (5) of this subsection, a nurse's basic hourly rate shall be derived by dividing such nurse's annual rate of basic compensation by two thousand and eighty.

"(7) When a nurse is entitled to two or more forms of additional pay under paragraph (2), (3), (4), or (5) for the same period of duty, the amounts of such additional pay shall be computed separately on the basis of such nurse's basic hourly rate of pay, except that no overtime pay as provided in paragraph (5) shall be payable for overtime service performed on a holiday designated by Federal statute or Executive order in addition to pay received under paragraph (4) for such service.

"(8) A nurse who is officially scheduled to be on call outside such nurse's regular hours shall be compensated for each hour of such on-call duty, except for such time as such nurse may be called back to work, at a rate equal to 10 per centum of the hourly rate for excess service as provided in paragraph (5) of this subsection.

"(9) Any additional compensation paid pursuant to this subsection shall not be considered as basic compensation for the purposes of subchapter VI and section 5504 of subchapter IX of chapter 55, chapter 81, 83, or 87 of title 5, or other benefits based on basic compensation."

Sec. 204. (a) Section 4108 of title 38, United States Code, is amended to read as follows:

"§ 4108. Personnel administration

"(a) Notwithstanding any law, Executive order, or regulation, the Administrator shall prescribe by regulation the hours and conditions of employment and leaves of absence of physicians, dentists, and nurses appointed to the Department of Medicine and Surgery, except that the hours of employment in carrying out responsibilities under this title of any physician, dentist (other than an intern or resident appointed pursuant to section 4114 of this title), or nurse appointed on a full-time basis who accepts responsibilities for carrying out professional services for remuneration other than those assigned under this title, shall consist of not less than eighty hours in a biweekly pay period (as that term is used in section 5504 of title 5), and no such person may—
"(1) assume responsibility for the medical care of any patient other than a patient admitted for treatment at a Veterans' Administration facility, except in those cases where the individual, upon request and with the approval of the Chief Medical Director, assumes such responsibilities to assist communities or medical practice groups to meet medical needs which would not otherwise be available for a period not to exceed one hundred and eighty calendar days, which may be extended by the Chief Medical Director for additional periods not to exceed one hundred and eighty calendar days each;

"(2) teach or provide consultative services at any affiliated institution if such teaching or consultation will, because of its nature or duration, conflict with his responsibilities under this title;

"(3) accept payment under any insurance or assistance program established under subchapter XVIII, or XIX of chapter 7 of title 42, or under chapter 55 of title 10 for professional services rendered by him while carrying out his responsibilities under this title;

"(4) accept from any source, with respect to any travel performed by him in the course of carrying out his responsibilities under this title, any payment or per diem for such travel, other than as provided for in section 4111 of title 5;

"(5) request or permit any individual or organization to pay, on his behalf, for insurance insuring him against malpractice claims arising in the course of carrying out his responsibilities under this title or for his dues or similar fees for membership in medical or dental societies or related professional associations, except where such payments constitute a part of his remuneration for the performance of professional responsibilities permitted under this section, other than those carried out under this title; and

"(6) perform, in the course of carrying out his responsibilities under this title, professional services for the purpose of generating money for any fund or account which is maintained by an affiliated institution for the benefit of such institution, or for his personal benefit, or both, and in the case of any such fund or account established before the effective date of this subsection—

"(A) the affiliated institution shall submit semiannually an accounting to the Administrator and to the Comptroller General of the United States with respect to such fund or account, and thereafter shall maintain such fund or account subject to full public disclosure and audit by the Administrator and the Comptroller General for a period of three years or for such longer period as the Administrator shall prescribe, and

"(B) no physician, dentist, or nurse may receive, after the effective date of this subsection, any cash from amounts deposited in such fund or account derived from services performed prior to the effective date of this subsection.

"(b) As used in this section, the term 'affiliated institution' means any medical school or other institution of higher learning with which the Administrator has a contract or agreement pursuant to section 4112(b) of this title for the training or education of health manpower.

"(c) As used in this section, the term 'remuneration' means the receipt of any amount of monetary benefit from any non-Veterans' Administration source in payment for carrying out any professional responsibilities."
The table of sections at the beginning of chapter 73 of such title is amended by striking out
"4108. Administration."
and inserting in lieu thereof
"4108. Personnel administration."

Section 205. (a) Section 4109 of title 38, United States Code, is amended by striking out "the Civil Service Retirement Act" and inserting in lieu thereof "chapter 83 of title 5".

(b) Subsection (b) of section 4112 of such title 38, is amended by striking out "service personnel" in the first sentence immediately after "health" and by inserting in lieu thereof "manpower".

Section 206. Section 4114 of title 38, United States Code, is amended as follows:

(1) by striking out the words "ninety days" in the last sentence of paragraph (3)(A) of subsection (a) and inserting in lieu thereof "one year";

(2) by inserting "(1)" immediately after "(b)" at the beginning of subsection (b) of such section and by adding at the end of such subsection the following new paragraphs:

"Intern."

"(2) For the purposes of this title, the term "intern" shall include an internship or the equivalency thereof, as determined in accordance with regulations which the Administrator shall prescribe.

"(3) In order to carry out more efficiently the provisions of paragraph (1) of this subsection, the Administrator may contract with one or more hospitals, medical schools, or medical installations having hospital facilities and participating with the Veterans' Administration in the training of interns or residents to provide for the central administration of stipend payments, provision of fringe benefits, and maintenance of records for such interns and residents by the designation of one such institution to serve as a central administrative agency for this purpose. The Administrator may pay to such designated agency, without regard to any other law or regulation, the expenditure of Government moneys either in advance or in arrears, an amount to cover the cost for the period such intern or resident serves in a Veterans' Administration hospital of (A) stipends fixed by the Administrator pursuant to paragraph (1) of this subsection, (B) hospitalization, medical care, and life insurance, and any other employee benefits as are agreed upon by the participating institutions for the period that such intern or resident serves in a Veterans' Administration hospital, (C) tax on employers pursuant to chapter 21 of the Internal Revenue Code of 1954, where applicable, and in addition, (D) an amount to cover a pro rata share of the cost of expense of such central administrative agency. Any amounts paid by the Administrator to such central administrative agency to cover the cost of hospitalization, medical care, or life insurance or other employee benefits shall be in lieu of any benefits of like nature to which such intern or resident may be entitled under the provisions of title 5, and the acceptance of stipends and employee benefits from the designated central administrative agency shall constitute a waiver by the recipient of any claim he might have to any payment of stipends or employee benefits to which he may be entitled under this title or title 5. Notwithstanding the foregoing, any period of service of any such intern or resident in a Veterans' Administration hospital shall be deemed creditable service for the purposes of section 8332 of title 5. The agreement may further provide that the designated central administrative agency shall make all appropriate deductions from the stipend of each intern and resident for local, State, and Federal taxes, maintain all records
pertinent thereto and make proper deposits thereof, and shall maintain all records pertinent to the leave accrued by such intern and resident for the period during which he serves in a participating hospital, including a Veterans' Administration hospital. Such leave may be pooled, and the intern or resident may be afforded leave by the hospital in which he is serving at the time the leave is to be used to the extent of his total accumulated leave, whether or not earned at the hospital in which he is serving at the time the leave is to be afforded.; and

(3) by adding at the end thereof the following new subsection:

"(3) by adding at the end thereof the following new subsection:

"(e) The program of training prescribed by the Administrator in order to qualify a person for the position of full-time physician's assistant or dentist's assistant shall be considered a full-time institutional program for purposes of chapter 34 of this title. The Administrator may consider training for such a position to be on a less than full-time basis for purposes of such chapter when the combined classroom (and other formal instruction) portion of the program and the on-the-job training portion of the program total less than 30 hours per week.".

SEC. 207. Section 4116 of title 38, United States Code, is amended—

(1) by amending subsection (a) to read as follows:

"(a) The remedy—

"(1) against the United States provided by sections 1346(b) and 2672 of title 28, or

"(2) through proceedings for compensation or other benefits from the United States as provided by any other law, where the availability of such benefits precludes a remedy under section 1346(b) or 2672 of title 28, for damages for personal injury, including death, allegedly arising from malpractice or negligence of a physician, dentist, nurse, physicians' assistant, dentists' assistant, pharmacist, or paramedical (for example, medical and dental technicians, nursing assistants, and therapists) or other supporting personnel in furnishing medical care or treatment while in the exercise of his duties in or for the Department of Medicine and Surgery shall hereafter be exclusive of any other civil action or proceeding by reason of the same subject matter against such physician, dentist, nurse, physicians' assistant, dentists' assistant, pharmacist, or paramedical or other supporting personnel (or his estate) whose act or omission gave rise to such claim.";

(2) by striking out the last sentence in subsection (c) and inserting in lieu thereof the following: "After removal the United States shall have available all defenses to which it would have been entitled if the action had originally been commenced against the United States. Should a United States district court determine on a hearing on a motion to remand held before a trial on the merits that the employee whose act or omission gave rise to the suit was not acting within the scope of his office or employment, the case shall be remanded to the State court."; and

(3) by adding at the end thereof the following new subsection:

"(e) The Administrator may, to the extent he deems appropriate, hold harmless or provide liability insurance for any person to whom the immunity provisions of this section apply (as described in subsection (a) of this section), for damage for personal injury or death, or for property damage, negligently caused by such person while furnishing medical care or treatment (including the conduct of clinical studies or investigations) in the exercise of his duties in or for the Department of Medicine and Surgery, if such person is assigned to a foreign country, detailed to State or political division thereof, or is
acting under any other circumstances which would preclude the remedies of an injured third person against the United States, provided by sections 1346(b) and 2672 of title 28, for such damage or injury."

Sec. 208. Section 4117 of title 38, United States Code, is amended to read as follows:

"The Administrator may enter into contracts with medical schools, clinics, and any other group or individual capable of furnishing such services to provide scarce medical specialist services at Veterans' Administration facilities (including, but not limited to, services of physicians, dentists, nurses, physicians' assistants, dentists' assistants, technicians, and other medical support personnel)."

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

Sec. 301. (a) Subsection (a) of section 5001 of title 38, United States Code, is amended by—

(1) striking out the period at the end of paragraph (2) and inserting in lieu thereof a comma and the following: "and the Administrator shall staff and maintain, in such a manner as to insure the immediate acceptance and timely and complete care of patients, sufficient beds and other treatment capacities to accommodate, and provide such care to, eligible veterans applying for admission and found to be in need of hospital care or medical services. The Administrator shall maintain the bed and treatment capacities of all Veterans' Administration medical facilities so as to insure the accessibility and availability of such beds and treatment capacities to eligible veterans in all States and to minimize delays in admissions and in the provision of such care and of services pursuant to section 612 of this title. The Chief Medical Director shall periodically analyze agencywide admission policies and the records of those eligible veterans who apply for hospital care and medical services but are rejected or not immediately admitted or provided such care or services, and the Administrator shall annually advise the House and Senate Committees on Veterans' Affairs of the results of such analysis and the number of any additional beds and treatment capacities and the appropriate staffing and funds therefor found necessary to meet the needs of such veterans for such necessary care and services."; and

(2) striking out in the first sentence of paragraph (3) "is authorized to" and inserting in lieu thereof "shall", and by striking out "four thousand beds" and inserting in lieu thereof "eight thousand beds in the fiscal year ending June 30, 1974, and in each fiscal year thereafter";

(b) Subsection (b) of section 5001 of such title is amended to read as follows:

"(b) Hospitals, domiciliaries, and other medical facilities provided by the Administrator (including nursing home facilities for which the Administrator contracts under section 620 of this title) shall be of fire, earthquake, and other natural disaster resistant construction in accordance with standards which the Administrator shall prescribe on a State or regional basis after surveying appropriate State and local laws, ordinances, and building codes and climatic and seismic conditions pertinent to each such facility. When an existing plant is purchased, it shall be remodeled to comply with the requirements stated in the first
sentence of this subsection. In order to carry out this subsection, the Administrator shall appoint an Advisory Committee on Structural Safety of Veterans' Administration Facilities, on which shall serve at least one architect and one structural engineer expert in fire, earthquake, and other natural disaster resistance who shall not be employees of the Federal Government, to advise him on all matters of structural safety in the construction and remodeling of Veterans' Administration facilities in accordance with the requirement of this subsection, and which shall approve regulations prescribed thereunder. The Associate Deputy Administrator, the Chief Medical Director, or his designee, and the Veterans' Administration official charged with the responsibility for construction shall be ex officio members of such committee.

(c) Section 5001 of such title is further amended by adding the following new subsection:

"(g) The Administrator may make contributions to local authorities toward, or for, the construction of traffic controls, road improvements, or other devices adjacent to Veterans' Administration medical facilities when deemed necessary for safe ingress or egress."

SEC. 302. Chapter 81 of title 38, United States Code, is amended—

(1) by adding at the end of subchapter I the following new section:

"§ 5007. Partial relinquishment of legislative jurisdiction

The Administrator, on behalf of the United States, may relinquish to the State in which any lands or interests therein under his supervision or control are situated, such measure of legislative jurisdiction over such lands or interests as is necessary to establish concurrent jurisdiction between the Federal Government and the State concerned. Such partial relinquishment of legislative jurisdiction shall be initiated by filing a notice thereof with the Governor of the State concerned, or in such other manner as may be prescribed by the laws of such State, and shall take effect upon acceptance by such State."

(2) by inserting immediately after the first sentence in subsection (a) of section 5012 thereof the following: "Any lease made pursuant to this subsection to any public or nonprofit organization may be made without regard to the provisions of section 8709 of the Revised Statutes (41 U.S.C. 5). Notwithstanding section 821 of the Act entitled "An Act making appropriations for the legislative branch of the Government for the fiscal year ending June 30, 1933, and for other purposes," approved June 30, 1932 (40 U.S.C. 303b), or any other provision of law, a lease made pursuant to this subsection to any public or nonprofit organization may provide for the maintenance, protection, or restoration, by the lessee, of the property leased, as a part or all of the consideration for the lease. Prior to the execution of any such lease, the Administrator shall give appropriate public notice of his intention to do so in the newspaper of the community in which the lands or buildings to be leased are located."; and

(3) by inserting in the table of sections at the beginning of such chapter

"5007. Partial relinquishment of legislative jurisdiction."

immediately after

"5006. Property formerly owned by the National Home for Disabled Volunteer Soldiers."

SEC. 303. Section 5053 (a) of title 38, United States Code, is amended by striking out "or medical schools" at the beginning of the material contained in parentheses, and by inserting immediately after the close parenthesis the words "or medical schools or clinics".
TITLE IV—MISCELLANEOUS AMENDMENTS TO TITLE 38, UNITED STATES CODE

SEC. 401. Section 230(b) of title 38, United States Code, is amended by striking out “July 3, 1974” and inserting in lieu thereof “June 30, 1978”.

SEC. 402. (a) Section 234 of title 38, United States Code, is amended by inserting immediately after the words “telephones for” the following: “nonmedical directors of centers, hospitals, independent clinics, domiciliaries, and”.

(b) The table of sections at the beginning of chapter 3 of such title is amended by striking out

“234. Telephone service for medical officers.”

and inserting in lieu thereof

“234. Telephone service for medical officers and facility directors.”.

(c) The catchline at the beginning of section 234 of such title is amended by inserting immediately after the word “officers” the words “and facility directors”.

SEC. 403. (a) Section 641 of title 38, United States Code, is amended by

(1) striking out in clause (1) “$3.50” and inserting in lieu thereof “$4.50”;

(2) striking out in clause (2) “$5” and inserting in lieu thereof “$6”;

(3) striking out in clause (3) “$7.50” and inserting in lieu thereof “$10”;

(4) inserting immediately after the words “veteran of any war” the following: “or of service after January 31, 1955”.

(b) Section 644(b) of such title is amended by striking out “50 per centum” and inserting in lieu thereof “65 per centum”.

(c) Section 5033(a) of title 38, United States Code, is amended by striking out “nine” and inserting in lieu thereof “fourteen”.

(d) Paragraph (1) of section 5034 of title 38, United States Code, is amended by striking out “one and one-half beds” and inserting in lieu thereof “two and one-half beds”.

(e) Subsections (a)(1), (b)(2), and (d) of section 5035 of such title are amended by striking out “50 per centum” wherever it appears therein and inserting in lieu thereof “65 per centum”.

(f) Section 5036 of such title is amended by striking out “50 per centum” and inserting in lieu thereof “65 per centum”.

TITLE V—EFFECTIVE DATES

SEC. 501. The provisions of this Act shall become effective the first day of the first calendar month following the date of enactment, except that sections 105 and 106 shall be effective on January 1, 1971; section 107 shall be effective July 1, 1973; and section 203 shall become effective beginning the first pay period following thirty days after the date of enactment of this Act.