

114TH CONGRESS
2D SESSION

S. 3035

To require the Secretary of Veterans Affairs to carry out a pilot program to increase the use of medical scribes to maximize the efficiency of physicians at medical facilities of the Department of Veterans Affairs.

IN THE SENATE OF THE UNITED STATES

JUNE 8, 2016

Mr. HELLER (for himself and Mr. TESTER) introduced the following bill;
which was read twice and referred to the Committee on Veterans' Affairs

A BILL

To require the Secretary of Veterans Affairs to carry out a pilot program to increase the use of medical scribes to maximize the efficiency of physicians at medical facilities of the Department of Veterans Affairs.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Maximizing Efficiency
5 and Improving Access to Providers at the Department of
6 Veterans Affairs Act of 2016”.

1 **SEC. 2. PILOT PROGRAM ON INCREASING THE USE OF MED-**
2 **ICAL SCRIBES TO MAXIMIZE THE EFFICIENCY**
3 **OF PHYSICIANS AT MEDICAL FACILITIES OF**
4 **THE DEPARTMENT OF VETERANS AFFAIRS.**

5 (a) IN GENERAL.—Commencing not later than 120
6 days after the date of the enactment of the Act, the Sec-
7 retary of Veterans Affairs shall carry out a pilot program
8 to increase the use of medical scribes to maximize the effi-
9 ciency of physicians at medical facilities of the Depart-
10 ment of Veterans Affairs.

11 (b) DURATION.—The Secretary shall carry out the
12 pilot program during the eighteen-month period beginning
13 on the date of the commencement of the pilot program.

14 (c) LOCATIONS.—The Secretary shall carry out the
15 pilot program at not fewer than five medical facilities of
16 the Department—

17 (1) at which the Secretary has determined there
18 is a high volume of patients; or

19 (2) that are located in rural areas and at which
20 the Secretary has determined there is a shortage of
21 physicians and each physician has a high caseload.

22 (d) CONTRACTS.—

23 (1) IN GENERAL.—In carrying out the pilot
24 program, the Secretary shall enter into a contract
25 with one or more appropriate nongovernmental enti-
26 ties described in paragraph (2).

1 (2) APPROPRIATE NONGOVERNMENTAL ENTI-
2 TIES DESCRIBED.—An appropriate nongovernmental
3 entity described in this paragraph is an entity that
4 trains and employs professional medical scribes who
5 specialize in the collection of medical data and data
6 entry into electronic health records.

7 (e) COLLECTION OF DATA.—

8 (1) IN GENERAL.—The Secretary shall collect
9 data on the pilot program to determine the effective-
10 ness of the pilot program in increasing the efficiency
11 of physicians at medical facilities of the Department.

12 (2) ELEMENTS.—The data collected under
13 paragraph (1) shall include the following with re-
14 spect to each medical facility participating in the
15 pilot program:

16 (A) The average wait time for a veteran to
17 receive care from a physician at such medical
18 facility before implementation of the pilot pro-
19 gram.

20 (B) The average wait time for a veteran to
21 receive care from such a physician after imple-
22 mentation of the pilot program.

23 (C) The average number of patients that
24 such a physician is able to see on a daily basis
25 before implementation of the pilot program.

1 (D) The average number of patients that
2 such a physician is able to see on a daily basis
3 after implementation of the pilot program.

4 (E) The average amount of time such a
5 physician spends on documentation on a daily
6 basis before implementation of the pilot pro-
7 gram.

8 (F) The average amount of time such a
9 physician spends on documentation on a daily
10 basis after implementation of the pilot program.

11 (G) The satisfaction and retention scores
12 of each such physician before implementation of
13 the pilot program.

14 (H) The satisfaction and retention scores
15 of each such physician after implementation of
16 the pilot program.

17 (I) The patient satisfaction scores for each
18 such physician before implementation of the
19 pilot program.

20 (J) The patient satisfaction scores for each
21 such physician after implementation of the pilot
22 program.

23 (K) The patient satisfaction scores for
24 their health care experience before implementa-
25 tion of the pilot program.

1 (L) The patient satisfaction scores for
2 their health care experience after implementa-
3 tion of the pilot program.

4 (f) REPORT.—

5 (1) IN GENERAL.—Not later than 180 days
6 after the commencement of the pilot program, and
7 not less frequently than once every 180 days there-
8 after for the duration of the pilot program, the Sec-
9 retary shall submit to Congress a report on the pilot
10 program.

11 (2) ELEMENTS.—Each report required by para-
12 graph (1) shall include the following:

13 (A) The number of medical facilities of the
14 Department that are participating in the pilot
15 program.

16 (B) With respect to each such medical fa-
17 cility, an assessment of the effects that partici-
18 pation in the pilot program has had on the fol-
19 lowing—

20 (i) Maximizing the efficiency of physi-
21 cians at such medical facility.

22 (ii) Reducing average wait times for
23 appointments.

24 (iii) Improving access of patients to
25 electronic medical records.

1 (iv) Mitigating physician shortages by
2 increasing the productivity of physicians.

3 (C) All data collected under subsection (e).

4 (D) Such recommendations as the Sec-
5 retary may have with respect to the extension
6 or expansion of the pilot program.

7 (g) MEDICAL SCRIBE DEFINED.—In this section, the
8 term “medical scribe” means a member of the medical
9 team hired and trained specifically and exclusively to per-
10 form documentation in an electronic health record to
11 maximize the productivity of a physician.

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