

medical center may select the type of care that is most appropriate or feasible for such medical center.

(3) In the case that child care assistance under this section is provided as a stipend under paragraph (1)(A), such stipend shall cover the full cost of such child care.

(Added Pub. L. 116-315, title V, § 5107(a)(1), Jan. 5, 2021, 134 Stat. 5030.)

Editorial Notes

REFERENCES IN TEXT

The date of the enactment of the Deborah Sampson Act of 2020, referred to in subsec. (d), is the date of enactment of title V of Pub. L. 116-315, which was approved Jan. 5, 2021.

Section 630 of the Treasury and General Government Appropriations Act, 2002, referred to in subsec. (e)(1)(A), is section 630 of Pub. L. 107-67, Nov. 12, 2001, 115 Stat. 552, which was classified to section 490b-1 of former Title 40, Public Buildings, Property, and Works, and was repealed and restated as section 590(g) of Title 40, Public Buildings, Property, and Works, by Pub. L. 107-217, §§ 1, 6(b), Aug. 21, 2002, 116 Stat. 1118, 1327.

SUBCHAPTER II—HOSPITAL, NURSING HOME, OR DOMICILIARY CARE AND MEDICAL TREATMENT

Editorial Notes

AMENDMENTS

1976—Pub. L. 94-581, title II, § 202(c), Oct. 21, 1976, 90 Stat. 2855, inserted “, NURSING HOME,” in subchapter heading.

§ 1710. Eligibility for hospital, nursing home, and domiciliary care

(a)(1) The Secretary (subject to paragraph (4)) shall furnish hospital care and medical services which the Secretary determines to be needed—

(A) to any veteran for a service-connected disability; and

(B) to any veteran who has a service-connected disability rated at 50 percent or more.

(2) The Secretary (subject to paragraph (4)) shall furnish hospital care and medical services, and may furnish nursing home care, which the Secretary determines to be needed to any veteran—

(A) who has a compensable service-connected disability rated less than 50 percent or, with respect to nursing home care during any period during which the provisions of section 1710A(a) of this title are in effect, a compensable service-connected disability rated less than 70 percent;

(B) whose discharge or release from active military, naval, air, or space service was for a disability that was incurred or aggravated in the line of duty;

(C) who is in receipt of, or who, but for a suspension pursuant to section 1151 of this title (or both a suspension and the receipt of retired pay), would be entitled to disability compensation, but only to the extent that such veteran's continuing eligibility for such care is provided for in the judgment or settlement provided for in such section;

(D) who is a former prisoner of war, who was awarded the medal of honor under section 7271,

8291, or 9271 of title 10 or section 491¹ of title 14, or who was awarded the Purple Heart;

(E) who is a veteran of—

(i) the Mexican border period;

(ii) World War I; or

(iii) World War II;

(F) who is a toxic-exposed veteran, in accordance with subsection (e); or

(G) who is unable to defray the expenses of necessary care as determined under section 1722(a) of this title.

(3) In the case of a veteran who is not described in paragraphs (1) and (2), the Secretary may, to the extent resources and facilities are available and subject to the provisions of subsections (f) and (g), furnish hospital care, medical services, and nursing home care which the Secretary determines to be needed.

(4) The requirement in paragraphs (1) and (2) that the Secretary furnish hospital care and medical services, the requirement in section 1710A(a) of this title that the Secretary provide nursing home care, the requirement in section 1710B of this title that the Secretary provide a program of extended care services, and the requirement in section 1745 of this title to provide nursing home care and prescription medicines to veterans with service-connected disabilities in State homes shall be effective in any fiscal year only to the extent and in the amount provided in advance in appropriations Acts for such purposes.

(5) During any period during which the provisions of section 1710A(a) of this title are not in effect, the Secretary may furnish nursing home care which the Secretary determines is needed to any veteran described in paragraph (1), with the priority for such care on the same basis as if provided under that paragraph.

(b)(1) The Secretary may furnish to a veteran described in paragraph (2) of this subsection such domiciliary care as the Secretary determines is needed for the purpose of the furnishing of medical services to the veteran.

(2) This subsection applies in the case of the following veterans:

(A) Any veteran whose annual income (as determined under section 1503 of this title) does not exceed the maximum annual rate of pension that would be applicable to the veteran if the veteran were eligible for pension under section 1521(d) of this title.

(B) Any veteran who the Secretary determines has no adequate means of support.

(c) While any veteran is receiving hospital care or nursing home care in any Department facility, the Secretary may, within the limits of Department 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 such veteran is hospitalized, if the veteran is willing, and the Secretary finds such services to be reasonably necessary to protect the health of such veteran. The Secretary may furnish dental services and treatment, and related dental appliances, under this subsection for a non-service-connected dental condition or disability of a

¹ See References in Text note below.

veteran only (1) to the extent that the Secretary determines that the dental facilities of the Department to be used to furnish such services, treatment, or appliances are not needed to furnish services, treatment, or appliances for dental conditions or disabilities described in section 1712(a) of this title, or (2) if (A) such non-service-connected dental condition or disability is associated with or aggravating a disability for which such veteran is receiving hospital care, or (B) a compelling medical reason or a dental emergency requires furnishing dental services, treatment, or appliances (excluding the furnishing of such services, treatment, or appliances of a routine nature) to such veteran during the period of hospitalization under this section.

(d) In no case may nursing home care be furnished in a hospital not under the direct jurisdiction of the Secretary except as provided in section 1720 of this title.

(e)(1)(A) A Vietnam-era herbicide-exposed veteran is eligible (subject to paragraph (2)) for hospital care, medical services, and nursing home care under subsection (a)(2)(F) for any disability, notwithstanding that there is insufficient medical evidence to conclude that such disability may be associated with such exposure.

(B) A radiation-exposed veteran is eligible for hospital care, medical services, and nursing home care under subsection (a)(2)(F) for any disease suffered by the veteran that is—

(i) a disease listed in section 1112(c)(2) of this title; or

(ii) any other disease for which the Secretary, based on the advice of the Advisory Committee on Environmental Hazards, determines that there is credible evidence of a positive association between occurrence of the disease in humans and exposure to ionizing radiation.

(C) Subject to paragraph (2) of this subsection, a veteran who served on active duty between August 2, 1990, and November 11, 1998, in the Southwest Asia theater of operations during the Persian Gulf War is eligible for hospital care, medical services, and nursing home care under subsection (a)(2)(F) for any disability, notwithstanding that there is insufficient medical evidence to conclude that such disability may be associated with such service.

(D) Subject to paragraphs (2) and (3), a veteran who served on active duty in a theater of combat operations (as determined by the Secretary in consultation with the Secretary of Defense) during a period of war after the Persian Gulf War (including any veteran who, in connection with service during such period, received the Armed Forces Expeditionary Medal, Service Specific Expeditionary Medal, Combat Era Specific Expeditionary Medal, Campaign Specific Expeditionary Medal, or any other combat theater award established by a Federal statute or an Executive order), or in combat against a hostile force during a period of hostilities after November 11, 1998, is eligible for hospital care, medical services, and nursing home care under subsection (a)(2)(F) for any illness, notwithstanding that there is insufficient medical evidence to conclude that such condition is attributable to such service.

(E) Subject to paragraph (2), a veteran who participated in a test conducted by the Depart-

ment of Defense Desert Test Center as part of a program for chemical and biological warfare testing from 1962 through 1973 (including the program designated as "Project Shipboard Hazard and Defense (SHAD)" and related land-based tests) is eligible for hospital care, medical services, and nursing home care under subsection (a)(2)(F) for any illness, notwithstanding that there is insufficient medical evidence to conclude that such illness is attributable to such testing.

(F) Subject to paragraph (2), a veteran who served on active duty in the Armed Forces at Camp Lejeune, North Carolina, for not fewer than 30 days during the period beginning on August 1, 1953, and ending on December 31, 1987, is eligible for hospital care and medical services under subsection (a)(2)(F) for any of the following illnesses or conditions, notwithstanding that there is insufficient medical evidence to conclude that such illnesses or conditions are attributable to such service:

- (i) Esophageal cancer.
- (ii) Lung cancer.
- (iii) Breast cancer.
- (iv) Bladder cancer.
- (v) Kidney cancer.
- (vi) Leukemia.
- (vii) Multiple myeloma.
- (viii) Myelodysplastic syndromes.
- (ix) Renal toxicity.
- (x) Hepatic steatosis.
- (xi) Female infertility.
- (xii) Miscarriage.
- (xiii) Scleroderma.
- (xiv) Neurobehavioral effects.
- (xv) Non-Hodgkin's lymphoma.

(G) Beginning not later than the applicable date specified in paragraph (6), and subject to paragraph (2), a veteran who participated in a toxic exposure risk activity while serving on active duty, active duty for training, or inactive duty training is eligible for hospital care (including mental health services and counseling), medical services, and nursing home care under subsection (a)(2)(F) for any illness.

(H) Beginning not later than the applicable date specified in paragraph (6), and subject to paragraph (2), a covered veteran (as defined in section 1119(c) of this title) is eligible for hospital care (including mental health services and counseling), medical services, and nursing home care under subsection (a)(2)(F) for any illness.

(I)(i) Beginning not later than the applicable date specified in paragraph (6), and subject to paragraph (2), a veteran who deployed in support of a contingency operation specified in clause (ii) is eligible for hospital care (including mental health services and counseling), medical services, and nursing home care under subsection (a)(2)(F) for any illness.

(ii) A contingency operation specified in this clause is any of the following:

- (I) Operation Enduring Freedom.
- (II) Operation Freedom's Sentinel.
- (III) Operation Iraqi Freedom.
- (IV) Operation New Dawn.
- (V) Operation Inherent Resolve.
- (VI) Resolute Support Mission.

(2)(A) In the case of a veteran described in paragraph (1)(A), hospital care, medical services,

and nursing home care may not be provided under subsection (a)(2)(F) with respect to—

(i) a disability that is found, in accordance with guidelines issued by the Under Secretary for Health, to have resulted from a cause other than an exposure described in paragraph (4)(A)(ii); or

(ii) a disease for which the National Academy of Sciences, in a report issued in accordance with section 3 of the Agent Orange Act of 1991, has determined that there is limited or suggestive evidence of the lack of a positive association between occurrence of the disease in humans and exposure to a herbicide agent.

(B) In the case of a veteran described in subparagraph (C), (D), (E), (F), (G), (H), or (I) of paragraph (1), hospital care, medical services, and nursing home care may not be provided under subsection (a)(2)(F) with respect to a disability that is found, in accordance with guidelines issued by the Under Secretary for Health, to have resulted from a cause other than the service, testing, or activity described in such subparagraph.

(3) In the case of care for a veteran described in paragraph (1)(D), hospital care, medical services, and nursing home care may be provided under or by virtue of subsection (a)(2)(F) only during the following periods:

(A) Except as provided by subparagraph (B), with respect to a veteran described in paragraph (1)(D) who is discharged or released from the active military, naval, air, or space service after September 11, 2001, the 10-year period beginning on the date of such discharge or release.

(B) With respect to a veteran described in paragraph (1)(D) who was discharged or released from the active military, naval, air, or space service after September 11, 2001, and before October 1, 2013, but did not enroll to receive such hospital care, medical services, or nursing home care under such paragraph pursuant to subparagraph (A) before October 1, 2022, the one-year period beginning on October 1, 2022.

(4) For purposes of this subsection—

(A) The term “Vietnam-era herbicide-exposed veteran” means a veteran who—

(i) performed covered service, as defined in section 1116(d) of this title; or

(ii) the Secretary finds may have been exposed during active military, naval, air, or space service to dioxin during the Vietnam era, regardless of the geographic area of such service, or was exposed during such service to a toxic substance found in a herbicide or defoliant used for military purposes during such era, regardless of the geographic area of such service.

(B) The term “radiation-exposed veteran” has the meaning given that term in section 1112(c)(3) of this title.

(C) The term “toxic exposure risk activity” means any activity—

(i) that requires a corresponding entry in an exposure tracking record system (as defined in section 1119(c) of this title) for the veteran who carried out the activity; or

(ii) that the Secretary determines qualifies for purposes of this subsection when taking

into account what is reasonably prudent to protect the health of veterans.

(5) When the Secretary first provides care for veterans using the authority provided in paragraph (1)(D), the Secretary shall establish a system for collection and analysis of information on the general health status and health care utilization patterns of veterans receiving care under that paragraph. Not later than 18 months after first providing care under such authority, the Secretary shall submit to Congress a report on the experience under that authority. The Secretary shall include in the report any recommendations of the Secretary for extension of that authority.

(6)(A) The Secretary shall determine the dates in subparagraphs (G), (H), and (I) of paragraph (1) as follows:

(i) October 1, 2024, with respect to a veteran described in such subparagraph (G) or (H) who was discharged or released from the active military, naval, air, or space service during the period beginning on August 2, 1990, and ending on September 11, 2001.

(ii) October 1, 2026, with respect to a veteran described in such subparagraph (G) or (H) who was discharged or released from the active military, naval, air, or space service during the period beginning on September 12, 2001, and ending on December 31, 2006.

(iii) October 1, 2028, with respect to a veteran described in such subparagraph (G) or (H) who was discharged or released from the active military, naval, air, or space service during the period beginning on January 1, 2007, and ending on December 31, 2012.

(iv) October 1, 2030, with respect to a veteran described in such subparagraph (G) or (H) who was discharged or released from the active military, naval, air, or space service during the period beginning on January 1, 2013, and ending on December 31, 2018.

(v) October 1, 2032, with respect to a veteran described in such subparagraph (I).

(B)(i) The Secretary may modify a date specified in subparagraph (A) to an earlier date, as the Secretary determines appropriate based on the number of veterans receiving hospital care, medical services, and nursing home care under subparagraphs (G), (H), and (I) of paragraph (1) and the resources available to the Secretary.

(ii) If the Secretary determines to modify a date under clause (i), the Secretary shall—

(I) notify the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives of the proposed modification; and

(II) publish such modified date in the Federal Register.

(f)(1) The Secretary may not furnish hospital care or nursing home care (except if such care constitutes hospice care) under this section to a veteran who is eligible for such care under subsection (a)(3) of this section unless the veteran agrees to pay to the United States the applicable amount determined under paragraph (2) or (4) of this subsection.

(2) A veteran who is furnished hospital care or nursing home care under this section and who is required under paragraph (1) of this subsection

to agree to pay an amount to the United States in order to be furnished such care shall be liable to the United States for an amount equal to—

(A) the lesser of—

(i) the cost of furnishing such care, as determined by the Secretary; or

(ii) the amount determined under paragraph (3) of this subsection; and

(B) before September 30, 2025, an amount equal to \$10 for every day the veteran receives hospital care and \$5 for every day the veteran receives nursing home care.

(3)(A) In the case of hospital care furnished during any 365-day period, the amount referred to in paragraph (2)(A)(ii) of this subsection is—

(i) the amount of the inpatient Medicare deductible, plus

(ii) one-half of such amount for each 90 days of care (or fraction thereof) after the first 90 days of such care during such 365-day period.

(B) In the case of nursing home care furnished during any 365-day period, the amount referred to in paragraph (2)(A)(ii) of this subsection is the amount of the inpatient Medicare deductible for each 90 days of such care (or fraction thereof) during such 365-day period.

(C)(i) Except as provided in clause (ii) of this subparagraph, in the case of a veteran who is admitted for nursing home care under this section after being furnished, during the preceding 365-day period, hospital care for which the veteran has paid the amount of the inpatient Medicare deductible under this subsection and who has not been furnished 90 days of hospital care in connection with such payment, the veteran shall not incur any liability under paragraph (2) of this subsection with respect to such nursing home care until—

(I) the veteran has been furnished, beginning with the first day of such hospital care furnished in connection with such payment, a total of 90 days of hospital care and nursing home care; or

(II) the end of the 365-day period applicable to the hospital care for which payment was made,

whichever occurs first.

(ii) In the case of a veteran who is admitted for nursing home care under this section after being furnished, during any 365-day period, hospital care for which the veteran has paid an amount under subparagraph (A)(ii) of this paragraph and who has not been furnished 90 days of hospital care in connection with such payment, the amount of the liability of the veteran under paragraph (2) of this subsection with respect to the number of days of such nursing home care which, when added to the number of days of such hospital care, is 90 or less, is the difference between the inpatient Medicare deductible and the amount paid under such subparagraph until—

(I) the veteran has been furnished, beginning with the first day of such hospital care furnished in connection with such payment, a total of 90 days of hospital care and nursing home care; or

(II) the end of the 365-day period applicable to the hospital care for which payment was made,

whichever occurs first.

(D) In the case of a veteran who is admitted for hospital care under this section after having been furnished, during the preceding 365-day period, nursing home care for which the veteran has paid the amount of the inpatient Medicare deductible under this subsection and who has not been furnished 90 days of nursing home care in connection with such payment, the veteran shall not incur any liability under paragraph (2) of this subsection with respect to such hospital care until—

(i) the veteran has been furnished, beginning with the first day of such nursing home care furnished in connection with such payment, a total of 90 days of nursing home care and hospital care; or

(ii) the end of the 365-day period applicable to the nursing home care for which payment was made,

whichever occurs first.

(E) A veteran may not be required to make a payment under this subsection for hospital care or nursing home care furnished under this section during any 90-day period in which the veteran is furnished medical services under paragraph (3) of subsection (a) to the extent that such payment would cause the total amount paid by the veteran under this subsection for hospital care and nursing home care furnished during that period and under subsection (g) for medical services furnished during that period to exceed the amount of the inpatient Medicare deductible in effect on the first day of such period.

(F) A veteran may not be required to make a payment under this subsection or subsection (g) for any days of care in excess of 360 days of care during any 365-calendar-day period.

(4) In the case of a veteran covered by this subsection who is also described by section 1705(a)(7) of this title, the amount for which the veteran shall be liable to the United States for hospital care under this subsection shall be an amount equal to 20 percent of the total amount for which the veteran would otherwise be liable for such care under subparagraphs (2)(B) and (3)(A) but for this paragraph.

(5) For the purposes of this subsection, the term "inpatient Medicare deductible" means the amount of the inpatient hospital deductible in effect under section 1813(b) of the Social Security Act (42 U.S.C. 1395e(b)) on the first day of the 365-day period applicable under paragraph (3) of this subsection.

(g)(1) The Secretary may not furnish medical services (except if such care constitutes hospice care) under subsection (a) of this section (including home health services under section 1717 of this title) to a veteran who is eligible for hospital care under this chapter by reason of subsection (a)(3) of this section unless the veteran agrees to pay to the United States in the case of each outpatient visit the applicable amount or amounts established by the Secretary by regulation.

(2) A veteran who is furnished medical services under subsection (a) of this section and who is required under paragraph (1) of this subsection to agree to pay an amount to the United States in order to be furnished such services shall be liable to the United States, in the case of each

visit in which such services are furnished to the veteran, for an amount which the Secretary shall establish by regulation.

(3) This subsection does not apply with respect to the following:

(A) Home health services under section 1717 of this title to the extent that such services are for improvements and structural alterations.

(B) Education on the use of opioid antagonists to reverse the effects of overdoses of specific medications or substances.

(h) Nothing in this section requires the Secretary to furnish care to a veteran to whom another agency of Federal, State, or local government has a duty under law to provide care in an institution of such government.

(Pub. L. 85-857, Sept. 2, 1958, 72 Stat. 1141, § 610; Pub. L. 87-583, § 1, Aug. 14, 1962, 76 Stat. 381; Pub. L. 89-358, § 8, Mar. 3, 1966, 80 Stat. 27; Pub. L. 89-785, title III, § 304, Nov. 7, 1966, 80 Stat. 1377; Pub. L. 91-500, § 4, Oct. 22, 1970, 84 Stat. 1096; Pub. L. 93-82, title I, § 102, Aug. 2, 1973, 87 Stat. 180; Pub. L. 94-581, title II, §§ 202(d), 210(a)(1), Oct. 21, 1976, 90 Stat. 2855, 2862; Pub. L. 96-22, title I, § 102(a), June 13, 1979, 93 Stat. 47; Pub. L. 97-37, § 5(a), Aug. 14, 1981, 95 Stat. 936; Pub. L. 97-72, title I, § 102(a), Nov. 3, 1981, 95 Stat. 1047; Pub. L. 98-160, title VII, § 701, Nov. 21, 1983, 97 Stat. 1008; Pub. L. 99-166, title I, § 103, Dec. 3, 1985, 99 Stat. 944; Pub. L. 99-272, title XIX, § 1901(a), (d)(3), Apr. 7, 1986, 100 Stat. 372, 379; Pub. L. 99-576, title II, § 237(a), (b)(1), Oct. 28, 1986, 100 Stat. 3267; Pub. L. 100-322, title I, § 102(a), May 20, 1988, 102 Stat. 492; Pub. L. 100-687, div. B, title XII, § 1202, Nov. 18, 1988, 102 Stat. 4125; Pub. L. 101-508, title VIII, § 8013(a), Nov. 5, 1990, 104 Stat. 1388-346; Pub. L. 102-4, § 5, Feb. 6, 1991, 105 Stat. 15; Pub. L. 102-54, § 14(b)(10), June 13, 1991, 105 Stat. 283; renumbered § 1710 and amended Pub. L. 102-83, §§ 4(a)(3), (4), (b)(1), (2)(E), 5(a), (c)(1), Aug. 6, 1991, 105 Stat. 404-406; Pub. L. 102-405, title III, § 302(c)(1), Oct. 9, 1992, 106 Stat. 1984; Pub. L. 103-210, §§ 1(a), 2(a), Dec. 20, 1993, 107 Stat. 2496, 2497; Pub. L. 103-446, title XII, § 1201(d)(2), Nov. 2, 1994, 108 Stat. 4684; Pub. L. 103-452, title I, § 103(a)(1), Nov. 2, 1994, 108 Stat. 4786; Pub. L. 104-110, title I, § 101(a)(1), Feb. 13, 1996, 110 Stat. 768; Pub. L. 104-262, title I, §§ 101(a), (b), (d)(2)-(4), 102(a), Oct. 9, 1996, 110 Stat. 3178, 3179, 3181; Pub. L. 104-275, title V, § 505(c), Oct. 9, 1996, 110 Stat. 3342; Pub. L. 105-33, title VIII, §§ 8021(a)(1), 8023(b)(1), (2), Aug. 5, 1997, 111 Stat. 664, 667; Pub. L. 105-114, title II, § 209(a), title IV, § 402(a), Nov. 21, 1997, 111 Stat. 2290, 2294; Pub. L. 105-368, title I, § 102(a), title X, § 1005(b)(3), Nov. 11, 1998, 112 Stat. 3321, 3365; Pub. L. 106-117, title I, §§ 101(f), 112(1), title II, § 201(b), Nov. 30, 1999, 113 Stat. 1550, 1556, 1561; Pub. L. 106-419, title II, § 224(b), Nov. 1, 2000, 114 Stat. 1846; Pub. L. 107-135, title II, §§ 202(b), 209(a), 211, Jan. 23, 2002, 115 Stat. 2457, 2464, 2465; Pub. L. 107-330, title III, § 308(g)(6), Dec. 6, 2002, 116 Stat. 2829; Pub. L. 108-170, title I, § 102, Dec. 6, 2003, 117 Stat. 2044; Pub. L. 109-444, § 2(a), Dec. 21, 2006, 120 Stat. 3304; Pub. L. 109-461, title II, § 211(a)(3)(B), title X, §§ 1003, 1006(b), Dec. 22, 2006, 120 Stat. 3419, 3465, 3468; Pub. L. 110-161, div. I, title II, § 231, Dec. 26, 2007, 121 Stat. 2273; Pub. L. 110-181, div. A, title XVII, § 1707, Jan. 28, 2008, 122 Stat. 493; Pub. L. 110-329, div. E, title II, § 224, Sept. 30,

2008, 122 Stat. 3713; Pub. L. 110-387, title IV, § 409, title VIII, §§ 803, 804(a), Oct. 10, 2008, 122 Stat. 4130, 4141; Pub. L. 111-163, title V, §§ 513, 517, May 5, 2010, 124 Stat. 1164, 1167; Pub. L. 112-154, title I, §§ 102(a), 112, Aug. 6, 2012, 126 Stat. 1167, 1176; Pub. L. 113-37, § 2(c), Sept. 30, 2013, 127 Stat. 524; Pub. L. 113-175, title I, § 107, Sept. 26, 2014, 128 Stat. 1903; Pub. L. 113-235, div. I, title II, § 243, Dec. 16, 2014, 128 Stat. 2568; Pub. L. 114-2, § 7, Feb. 12, 2015, 129 Stat. 36; Pub. L. 114-58, title I, § 101, title VI, § 601(4), Sept. 30, 2015, 129 Stat. 532, 538; Pub. L. 114-198, title IX, § 915(b), July 22, 2016, 130 Stat. 765; Pub. L. 114-223, div. A, title II, § 243(b), Sept. 29, 2016, 130 Stat. 884; Pub. L. 114-228, title I, § 101, Sept. 29, 2016, 130 Stat. 936; Pub. L. 114-315, title VI, § 603(b), title VIII, § 802(3), Dec. 16, 2016, 130 Stat. 1570, 1591; Pub. L. 115-62, title I, § 101, Sept. 29, 2017, 131 Stat. 1160; Pub. L. 115-232, div. A, title VIII, § 809(n)(1)(B), Aug. 13, 2018, 132 Stat. 1843; Pub. L. 115-251, title I, § 101, Sept. 29, 2018, 132 Stat. 3168; Pub. L. 116-23, § 2(f), June 25, 2019, 133 Stat. 969; Pub. L. 116-159, div. E, title I, § 5101, Oct. 1, 2020, 134 Stat. 748; Pub. L. 116-283, div. A, title IX, § 926(a)(21), Jan. 1, 2021, 134 Stat. 3830; Pub. L. 117-168, title I, §§ 102(a), (c), 103(a), 111(a), (b), title IV, § 403(c), Aug. 10, 2022, 136 Stat. 1761, 1762, 1765, 1766, 1781; Pub. L. 117-180, div. E, title I, § 101, Sept. 30, 2022, 136 Stat. 2136; Pub. L. 117-328, div. U, title I, § 101(a), Dec. 29, 2022, 136 Stat. 5407; Pub. L. 118-83, div. B, title III, § 301, Sept. 26, 2024, 138 Stat. 1539.)

Editorial Notes

REFERENCES IN TEXT

Section 491 of title 14, referred to in subsec. (a)(2)(D), was redesignated section 2732 of title 14 by Pub. L. 115-282, title I, § 116(b), Dec. 4, 2018, 132 Stat. 4226, and references to section 491 of title 14 deemed to refer to such redesignated section, see section 123(b)(1) of Pub. L. 115-282, set out as a References to Redesignated Sections of Title 14 note preceding section 101 of Title 14, Coast Guard.

Section 3 of the Agent Orange Act of 1991, referred to in subsec. (e)(2)(A)(ii), is section 3 of Pub. L. 102-4, which is set out as a note under section 1116 of this title.

CODIFICATION

The text of subsec. (f) of section 1712 of this title, which was transferred to this section, redesignated subsec. (g), and amended by Pub. L. 104-262, § 101(b)(2), was based on Pub. L. 86-639, § 1, July 12, 1960, 74 Stat. 472; Pub. L. 91-102, Oct. 30, 1969, 83 Stat. 168; Pub. L. 93-82, title I, § 103(a), Aug. 2, 1973, 87 Stat. 180; Pub. L. 94-581, title I, § 103(a)(3)-(7), title II, § 202(f)(2), Oct. 21, 1976, 90 Stat. 2844, 2856; Pub. L. 96-22, title I, § 102(b), June 13, 1979, 93 Stat. 47; Pub. L. 97-37, § 5(b), Aug. 14, 1981, 95 Stat. 937; Pub. L. 97-72, title I, § 103(b)(2), Nov. 3, 1981, 95 Stat. 1049; Pub. L. 97-295, § 4(17)(C), Oct. 12, 1982, 96 Stat. 1306; Pub. L. 99-166, title I, § 104, Dec. 3, 1985, 99 Stat. 944; Pub. L. 99-272, title XIX, § 1901(b)(2), Apr. 7, 1986, 100 Stat. 375; Pub. L. 99-576, title II, §§ 202(1), 237(b)(2), Oct. 28, 1986, 100 Stat. 3254, 3267; Pub. L. 100-322, title I, § 101(e)(1), May 20, 1988, 102 Stat. 491; Pub. L. 101-508, title VIII, § 8013(b), Nov. 5, 1990, 104 Stat. 1388-346; Pub. L. 102-83, §§ 4(a)(3), (4), (b)(1), (2)(E), 5(c)(1), Aug. 6, 1991, 105 Stat. 404-406.

PRIOR PROVISIONS

A prior section 1710 was renumbered section 3510 of this title.

AMENDMENTS

2024—Subsec. (f)(2)(B). Pub. L. 118-83 substituted “September 30, 2025” for “September 30, 2024”.

2022—Subsec. (a)(2)(E). Pub. L. 117-328 designated existing provisions as introductory provisions, substituted “of—” for “of the Mexican border period or of World War I;”, and added cls. (i) to (iii).

Subsec. (a)(2)(F). Pub. L. 117-168, §102(a), substituted “who is a toxic-exposed veteran, in accordance with subsection (e)” for “who was exposed to a toxic substance, radiation, or other conditions, as provided in subsection (e)”.

Subsec. (e)(1)(D). Pub. L. 117-168, §111(b), inserted “(including any veteran who, in connection with service during such period, received the Armed Forces Expeditionary Medal, Service Specific Expeditionary Medal, Campaign Specific Medal, or any other combat theater award established by a Federal statute or an Executive order)” after “Persian Gulf War”.

Subsec. (e)(1)(G) to (I). Pub. L. 117-168, §103(a)(1)(A), added subpars. (G) to (I).

Subsec. (e)(2)(B). Pub. L. 117-168, §103(a)(1)(B), substituted “(F), (G), (H), or (I)” for “or (F)” and “service, testing, or activity” for “service or testing”.

Subsec. (e)(3)(A). Pub. L. 117-168, §111(a)(1), substituted “September 11, 2001” for “January 27, 2003” and “10-year period” for “five-year period”.

Subsec. (e)(3)(B). Pub. L. 117-168, §111(a)(2), amended subpar. (B) generally. Prior to amendment, subpar. (B) read as follows: “With respect to a veteran described in paragraph (1)(D) who is discharged or released from the active military, naval, air, or space service after January 1, 2009, and before January 1, 2011, but did not enroll to receive such hospital care, medical services, or nursing home care pursuant to such paragraph during the five-year period described in subparagraph (A), the one-year period beginning on the date of the enactment of the Clay Hunt Suicide Prevention for American Veterans Act.”

Subsec. (e)(3)(C). Pub. L. 117-168, §111(a)(3), struck out subpar. (C) which read as follows: “With respect to a veteran described in paragraph (1)(D) who is discharged or released from the active military, naval, air, or space service on or before January 27, 2003, and did not enroll in the patient enrollment system under section 1705 of this title on or before such date, the three-year period beginning on January 27, 2008.”

Subsec. (e)(4)(A). Pub. L. 117-168, §403(c), added subpar. (A) and struck out former subpar. (A) which read as follows: “The term ‘Vietnam-era herbicide-exposed veteran’ means a veteran (i) who served on active duty in the Republic of Vietnam (including offshore of such Republic as described in section 1116A(d) of this title) during the period beginning on January 9, 1962, and ending on May 7, 1975, and (ii) who the Secretary finds may have been exposed during such service to dioxin or was exposed during such service to a toxic substance found in a herbicide or defoliant used for military purposes during such period.”

Subsec. (e)(4)(C). Pub. L. 117-168, §102(c), added subpar. (C).

Subsec. (e)(6). Pub. L. 117-168, §103(a)(2), added par. (6).

Subsec. (f)(2)(B). Pub. L. 117-180 substituted “September 30, 2024” for “September 30, 2022”.

2021—Subsec. (a)(2)(B). Pub. L. 116-283 substituted “air, or space service” for “or air service”.

Subsec. (e)(3). Pub. L. 116-283 substituted “air, or space service” for “or air service” in subpars. (A) to (C).

2020—Subsec. (f)(2)(B). Pub. L. 116-159 substituted “September 30, 2022” for “September 30, 2020”.

2019—Subsec. (e)(4). Pub. L. 116-23 inserted “(including offshore of such Republic as described in section 1116A(d) of this title)” after “served on active duty in the Republic of Vietnam”.

2018—Subsec. (a)(2)(D). Pub. L. 115-232 substituted “section 7271, 8291, or 9271 of title 10” for “section 3741, 6241, or 8741 of title 10”.

Subsec. (f)(2)(B). Pub. L. 115-251 substituted “September 30, 2020” for “September 30, 2019”.

2017—Subsec. (f)(2)(B). Pub. L. 115-62 substituted “September 30, 2019” for “September 30, 2017”.

2016—Subsec. (a)(2)(D). Pub. L. 114-315, §603(b), inserted “, who was awarded the medal of honor under section 3741, 6241, or 8741 of title 10 or section 491 of title 14,” after “war”.

Subsec. (e)(1)(F). Pub. L. 114-315, §802(3), inserted comma after “1953” in introductory provisions.

Subsec. (f)(2)(B). Pub. L. 114-228 substituted “September 30, 2017” for “September 30, 2016”.

Subsec. (g)(3). Pub. L. 114-198 and Pub. L. 114-223 amended par. (3) identically, substituting “with respect to the following:” for “with respect to home health services”, inserting subpar. (A) designation and “Home health services” before “under section 1717 of this title”, and adding subpar. (B).

2015—Subsec. (e)(1)(D). Pub. L. 114-58, §601(4)(A), struck out “(as defined in section 1712A(a)(2)(B) of this title)” after “hostilities”.

Subsec. (e)(1)(F)(viii). Pub. L. 114-58, §601(4)(B), substituted “Myelodysplastic” for “Myelodysplastic”.

Subsec. (e)(3). Pub. L. 114-2 amended par. (3) generally. Prior to amendment, par. (3) read as follows: “Hospital care, medical services, and nursing home care may not be provided under or by virtue of subsection (a)(2)(F) in the case of care for a veteran described in paragraph (1)(D) who—

“(A) is discharged or released from the active military, naval, or air service after the date that is five years before the date of the enactment of the National Defense Authorization Act for Fiscal Year 2008, after a period of five years beginning on the date of such discharge or release; or

“(B) is so discharged or released more than five years before the date of the enactment of that Act and who did not enroll in the patient enrollment system under section 1705 of this title before such date, after a period of three years beginning on the date of the enactment of that Act.”

Subsec. (f)(2)(B). Pub. L. 114-58, §101, substituted “September 30, 2016” for “September 30, 2015”.

2014—Subsec. (e)(1)(F). Pub. L. 113-235, §243, substituted “August 1, 1953” for “January 1, 1957,” in introductory provisions.

Subsec. (f)(2)(B). Pub. L. 113-175 substituted “September 30, 2015” for “September 30, 2014”.

2013—Subsec. (f)(2)(B). Pub. L. 113-37 substituted “September 30, 2014” for “September 30, 2013”.

2012—Subsec. (e)(1)(F). Pub. L. 112-154, §102(a)(1), added subpar. (F).

Subsec. (e)(2)(B). Pub. L. 112-154, §102(a)(2), substituted “(E), or (F)” for “or (E)”.

Subsec. (f)(2)(B). Pub. L. 112-154, §112, substituted “September 30, 2013” for “September 30, 2012”.

2010—Subsec. (e)(1)(C). Pub. L. 111-163, §513(2), substituted “paragraph (2)” for “paragraphs (2) and (3)” and inserted “between August 2, 1990, and November 11, 1998,” after “on active duty”.

Subsec. (e)(3). Pub. L. 111-163, §513(1), substituted “subsection (a)(2)(F)” for “subsection (a)(2)(F)—” in introductory provisions, struck out subpar. (C) designation before “in the case”, redesignated cls. (i) and (ii) of former subpar. (C) as subpars. (A) and (B), respectively, realigned margins, and struck out former subpars. (A) and (B), which read as follows:

“(A) in the case of care for a veteran described in paragraph (1)(A), after December 31, 2002;

“(B) in the case of care for a veteran described in paragraph (1)(C), after December 31, 2002; and”.

Subsec. (f)(2)(B). Pub. L. 111-163, §517, amended subpar. (B) generally. Prior to amendment, subpar. (B) read as follows: “before September 30, 2010, an amount equal to \$10 for every day the veteran receives hospital care and \$5 for every day the veteran receives nursing home care.”

2008—Subsec. (e)(1)(E). Pub. L. 110-387, §803(b), substituted “paragraph (2)” for “paragraphs (2) and (3)”.

Subsec. (e)(3)(B). Pub. L. 110-387, §803(a)(1), inserted “and” after the semicolon at end.

Subsec. (e)(3)(C). Pub. L. 110-387, §803(a)(2), substituted a period at end for “; and”.

Pub. L. 110-181 amended subpar. (C) generally. Prior to amendment subpar. (C) read as follows: “in the case

of care for a veteran described in paragraph (1)(D), after a period of 2 years beginning on the date of the veteran's discharge or release from active military, naval, or air service; and".

Subsec. (e)(3)(D). Pub. L. 110-387, §803(a)(3), struck out subpar. (D) which read as follows: "in the case of care for a veteran described in paragraph (1)(E), after December 31, 2007".

Subsec. (f)(1). Pub. L. 110-387, §409(1), inserted "(except if such care constitutes hospice care)" after "nursing home care".

Subsec. (f)(2)(B). Pub. L. 110-387, §804(a), which directed substitution of "September 30, 2010" for "September 30, 2008", was executed by making the substitution for "September 30, 2009" to reflect the probable intent of Congress and the amendment by Pub. L. 110-329. See below.

Pub. L. 110-329 substituted "September 30, 2009," for "September 30, 2008,".

Subsec. (g)(1). Pub. L. 110-387, §409(2), inserted "(except if such care constitutes hospice care)" after "medical services".

2007—Subsec. (f)(2)(B). Pub. L. 110-161 substituted "September 30, 2008," for "September 30, 2007,".

2006—Subsec. (a)(4). Pub. L. 109-461, §211(a)(3)(B), struck out "and" before "the requirement in section 1710B of this title" and inserted ", and the requirement in section 1745 of this title to provide nursing home care and prescription medicines to veterans with service-connected disabilities in State homes" after "a program of extended care services".

Subsec. (e)(3)(D). Pub. L. 109-461, §1006(b), provided that as of the enactment of Pub. L. 109-461, the amendments made by Pub. L. 109-444 were deemed for all purposes not to have taken effect and that Pub. L. 109-444 ceased to be in effect. See Amendment notes below and section 1006(b) of Pub. L. 109-461, set out as a Coordination of Provisions With Pub. L. 109-444 note under section 101 of this title.

Pub. L. 109-461, §1003, substituted "December 31, 2007" for "December 31, 2005".

Pub. L. 109-444, which substituted "December 31, 2007" for "December 31, 2005", was terminated by Pub. L. 109-461, §1006(b). See Amendment notes above.

2003—Subsec. (e)(1)(E). Pub. L. 108-170, §102(1), added subpar. (E).

Subsec. (e)(2)(B). Pub. L. 108-170, §102(2), substituted "subparagraph (C), (D), or (E) of paragraph (1)" for "paragraph (1)(C) or (1)(D)" and "service or testing described in such subparagraph" for "service described in that paragraph".

Subsec. (e)(3)(D). Pub. L. 108-170, §102(3), added subpar. (D).

2002—Subsec. (e)(1)(D). Pub. L. 107-330 substituted "November 11, 1998" for "the date of the enactment of this subparagraph".

Subsec. (e)(3)(B). Pub. L. 107-135, §211, substituted "December 31, 2002" for "December 31, 2001".

Subsec. (f)(1). Pub. L. 107-135, §202(b)(1), inserted "or (4)" after "paragraph (2)".

Subsec. (f)(2)(B). Pub. L. 107-135, §209(a), substituted "September 30, 2007" for "September 30, 2002".

Subsec. (f)(4), (5). Pub. L. 107-135, §202(b)(2), (3), added par. (4) and redesignated former par. (4) as (5).

2000—Subsec. (a)(4). Pub. L. 106-419 inserted "the requirement in section 1710A(a) of this title that the Secretary provide nursing home care," after "medical services," and struck out comma after "extended care services".

1999—Subsec. (a)(1). Pub. L. 106-117, §101(f)(1), struck out ", and may furnish nursing home care," after "medical services" in introductory provisions.

Subsec. (a)(2)(A). Pub. L. 106-117, §101(f)(2), inserted "or, with respect to nursing home care during any period during which the provisions of section 1710A(a) of this title are in effect, a compensable service-connected disability rated less than 70 percent" after "50 percent".

Subsec. (a)(2)(D). Pub. L. 106-117, §112(1), inserted "or who was awarded the Purple Heart" after "former prisoner of war".

Subsec. (a)(4). Pub. L. 106-117, §101(f)(3), inserted ", and the requirement in section 1710B of this title that the Secretary provide a program of extended care services," after "medical services".

Subsec. (a)(5). Pub. L. 106-117, §101(f)(4), added par. (5).

Subsec. (g)(1). Pub. L. 106-117, §201(b)(1), substituted "in the case of each outpatient visit the applicable amount or amounts established by the Secretary by regulation" for "the amount determined under paragraph (2) of this subsection".

Subsec. (g)(2). Pub. L. 106-117, §201(b)(2), substituted "which the Secretary shall establish by regulation." for "equal to 20 percent of the estimated average cost (during the calendar year in which the services are furnished) of an outpatient visit in a Department facility. Such estimated average cost shall be determined by the Secretary."

1998—Subsec. (e)(1)(D). Pub. L. 105-368, §102(a)(1), added subpar. (D).

Subsec. (e)(2)(A)(ii). Pub. L. 105-368, §1005(b)(3), substituted "section 3" for "section 2".

Subsec. (e)(2)(B). Pub. L. 105-368, §102(a)(2), inserted "or (1)(D)" after "paragraph (1)(C)".

Subsec. (e)(3)(A). Pub. L. 105-368, §102(a)(3)(A), struck out "and" at end.

Subsec. (e)(3)(B). Pub. L. 105-368, §102(a)(3)(B), substituted "December 31, 2001; and" for "December 31, 1998."

Subsec. (e)(3)(C). Pub. L. 105-368, §102(a)(3)(C), added subpar. (C).

Subsec. (e)(5). Pub. L. 105-368, §102(a)(4), added par. (5).

1997—Subsec. (a)(2)(B). Pub. L. 105-114, §402(a), struck out "compensable" before "disability".

Subsec. (a)(2)(F). Pub. L. 105-114, §209(a)(1), substituted "other conditions" for "environmental hazard".

Subsec. (e)(1)(C). Pub. L. 105-114, §209(a)(2), substituted "served" for "the Secretary finds may have been exposed while serving" and "associated with such service" for "associated with such exposure" and struck out "to a toxic substance or environmental hazard" after "Persian Gulf War".

Subsec. (e)(2)(B). Pub. L. 105-114, §209(a)(3), substituted "the service" for "an exposure".

Subsec. (f)(2)(B). Pub. L. 105-33, §8021(a)(1), inserted "before September 30, 2002," after "(B)".

Subsec. (f)(4), (5). Pub. L. 105-33, §8023(b)(1), redesignated par. (5) as (4) and struck out former par. (4) which read as follows: "Amounts collected or received on behalf of the United States under this subsection shall be deposited in the Treasury as miscellaneous receipts."

Subsec. (g)(4). Pub. L. 105-33, §8023(b)(2), struck out par. (4) which read as follows: "Amounts collected or received by the Department under this subsection shall be deposited in the Treasury as miscellaneous receipts."

1996—Subsec. (a). Pub. L. 104-262, §101(a), amended subsec. (a) generally, revising and restating provisions in former pars. (1) to (3) relating to eligibility for care as pars. (1) to (4).

Subsec. (c)(1). Pub. L. 104-262, §101(d)(2), substituted "section 1712(a)" for "section 1712(b)".

Subsec. (e)(1)(A), (B). Pub. L. 104-262, §102(a)(1), added subpars. (A) and (B) and struck out former subpars. (A) and (B) which read as follows:

"(A) Subject to paragraphs (2) and (3) of this subsection, a veteran—

"(i) who served on active duty in the Republic of Vietnam during the Vietnam era, and

"(ii) who the Secretary finds may have been exposed during such service to a toxic substance found in a herbicide or defoliant used in connection with military purposes during such era,

is eligible for hospital care and nursing home care under subsection (a)(1)(G) of this section for any disability, notwithstanding that there is insufficient medical evidence to conclude that such disability may be associated with such exposure.

“(B) Subject to paragraphs (2) and (3) of this subsection, a veteran who the Secretary finds was exposed while serving on active duty to ionizing radiation from the detonation of a nuclear device in connection with such veteran’s participation in the test of such a device or with the American occupation of Hiroshima and Nagasaki, Japan, during the period beginning on September 11, 1945, and ending on July 1, 1946, is eligible for hospital care and nursing home care under subsection (a)(1)(G) of this section for any disability, notwithstanding that there is insufficient medical evidence to conclude that such disability may be associated with such exposure.”

Subsec. (e)(1)(C). Pub. L. 104-262, §101(d)(3), substituted “hospital care, medical services, and nursing home care under subsection (a)(2)(F)” for “hospital care and nursing home care under subsection (a)(1)(G) of this section”.

Subsec. (e)(2). Pub. L. 104-262, §102(a)(2), added par. (2) and struck out former par. (2) which read as follows: “Hospital and nursing home care may not be provided under subsection (a)(1)(G) of this section with respect to a disability that is found, in accordance with guidelines issued by the Under Secretary for Health, to have resulted from a cause other than an exposure described in subparagraph (A), (B), or (C) of paragraph (1) of this subsection.”

Subsec. (e)(3). Pub. L. 104-262, §102(a)(2), added par. (3) and struck out former par. (3) which read as follows: “Hospital and nursing home care and medical services may not be provided under or by virtue of subsection (a)(1)(G) of this section after December 31, 1996.”

Pub. L. 104-110 substituted “after December 31, 1996” for “after June 30, 1995, or, in the case of care for a veteran described in paragraph (1)(C), after December 31, 1995”.

Subsec. (e)(4). Pub. L. 104-262, §102(a)(2), added par. (4).

Subsec. (e)(4)(A). Pub. L. 104-275 substituted “during the period beginning on January 9, 1962, and ending on May 7, 1975,” for “during the Vietnam era,” in cl. (i) and “such period” for “such era” in cl. (ii).

Subsec. (f)(1). Pub. L. 104-262, §101(d)(4)(A), substituted “subsection (a)(3)” for “subsection (a)(2)”.

Subsec. (f)(3)(E). Pub. L. 104-262, §101(d)(4)(B), substituted “paragraph (3) of subsection (a)” for “section 1712(a) of this title” and “subsection (g)” for “section 1712(f) of this title”.

Subsec. (f)(3)(F). Pub. L. 104-262, §101(d)(4)(C), substituted “subsection (g)” for “section 1712(f) of this title”.

Subsec. (g). Pub. L. 104-262, §101(b)(2), redesignated subsec. (f) of section 1712 of this title as subsec. (g) of this section and substituted “subsection (a)(3) of this section” for “section 1710(a)(2) of this title” in par. (1). See Codification note above.

Pub. L. 104-262, §101(b)(1), redesignated subsec. (g) as (h).

Subsec. (h). Pub. L. 104-262, §101(b)(1), redesignated subsec. (g) as (h).

1994—Subsec. (e)(3). Pub. L. 103-452 substituted “June 30, 1995” for “June 30, 1994” and “December 31, 1995” for “December 31, 1994”.

Subsec. (f)(3)(E). Pub. L. 103-446 substituted “section 1712(a)” for “section 1712(f)” and “section 1712(f)” for “section 1712(f)(4)”.

1993—Subsec. (a)(1)(G). Pub. L. 103-210, §1(a)(1), substituted “substance, radiation, or environmental hazard” for “substance or radiation”.

Subsec. (e)(1)(C). Pub. L. 103-210, §1(a)(2)(A), added subpar. (C).

Subsec. (e)(2). Pub. L. 103-210, §1(a)(2)(B), substituted “subparagraph (A), (B), or (C)” for “subparagraph (A) or (B)”.

Subsec. (e)(3). Pub. L. 103-210, §2(a), substituted “June 30, 1994” for “December 31, 1993”.

Pub. L. 103-210, §1(a)(2)(C), inserted before period at end “, or, in the case of care for a veteran described in paragraph (1)(C), after December 31, 1994”.

1992—Subsec. (e)(2). Pub. L. 102-405 substituted “Under Secretary for Health” for “Chief Medical Director”.

1991—Pub. L. 102-83, §5(a), renumbered section 610 of this title as this section.

Subsec. (a)(1). Pub. L. 102-83, §5(c)(1), substituted “1151” for “351” in subpar. (C) and “1722(a)” for “622(a)” in subpar. (I).

Pub. L. 102-83, §4(b)(1), (2)(E), substituted “Secretary” for “Administrator” in two places in introductory provisions.

Subsec. (a)(1)(H). Pub. L. 102-54 substituted “the Mexican border period” for “the Spanish-American War, the Mexican border period”.

Subsec. (a)(3). Pub. L. 102-83, §5(c)(1), substituted “1703” for “603” and “1720” for “620”.

Pub. L. 102-83, §4(b)(1), (2)(E), substituted “Secretary” for “Administrator”.

Pub. L. 102-83, §4(a)(3), (4), substituted “Department” for “Veterans’ Administration”.

Subsec. (b). Pub. L. 102-83, §4(b)(1), (2)(E), substituted “Secretary” for “Administrator” wherever appearing.

Subsec. (b)(2)(A). Pub. L. 102-83, §5(c)(1), substituted “1503” for “503” and “1521(d)” for “521(d)”.

Subsec. (c). Pub. L. 102-83, §5(c)(1), substituted “1712(b)” for “612(b)”.

Pub. L. 102-83, §4(b)(1), (2)(E), substituted “Secretary” for “Administrator” wherever appearing.

Pub. L. 102-83, §4(a)(3), (4), substituted “Department” for “Veterans’ Administration” wherever appearing.

Subsec. (d). Pub. L. 102-83, §5(c)(1), substituted “1720” for “620”.

Pub. L. 102-83, §4(b)(1), (2)(E), substituted “Secretary” for “Administrator”.

Subsec. (e)(1). Pub. L. 102-83, §4(b)(1), (2)(E), substituted “Secretary” for “Administrator” in subpars. (A)(i) and (B).

Subsec. (e)(3). Pub. L. 102-4 substituted “1993” for “1990”.

Subsec. (f)(3)(E), (F). Pub. L. 102-83, §5(c)(1), substituted “1712(f)” for “612(f)” and “1712(f)(4)” for “612(f)(4)” in subpar. (E) and “1712(f)” for “612(f)” in subpar. (F).

Subsec. (g). Pub. L. 102-83, §4(b)(1), (2)(E), substituted “Secretary” for “Administrator”.

1990—Subsec. (a)(1)(I). Pub. L. 101-508, §8013(a)(1)(A), substituted “section 622(a)” for “section 622(a)(1)”.

Subsec. (a)(2). Pub. L. 101-508, §8013(a)(1)(B), added par. (2) and struck out former par. (2) which read as follows:

“(A) To the extent that resources and facilities are available, the Administrator may furnish hospital care and nursing home care which the Administrator determines is needed to a veteran for a non-service-connected disability if the veteran has an income level described in section 622(a)(2) of this title.

“(B) In the case of a veteran who is not described in paragraph (1) of this subsection or in subparagraph (A) of this paragraph, the Administrator may furnish hospital care and nursing home care which the Administrator determines is needed to the veteran for a non-service-connected disability—

“(i) to the extent that resources and facilities are otherwise available; and

“(ii) subject to the provisions of subsection (f) of this section.”

Subsec. (f)(1), (2). Pub. L. 101-508, §8013(a)(2)(A), added pars. (1) and (2) and struck out former pars. (1) and (2) which read as follows:

“(1) The Administrator may not furnish hospital care or nursing home care under this section to a veteran who is eligible for such care by reason of subsection (a)(2)(B) of this section unless the veteran agrees to pay to the United States the applicable amount determined under paragraph (2) of this subsection.

“(2) A veteran who is furnished hospital care or nursing home care under this section and who is required under paragraph (1) of this subsection to agree to pay an amount to the United States in order to be furnished such care shall be liable to the United States for an amount equal to the lesser of—

“(A) the cost of furnishing such care, as determined by the Administrator; and

“(B) the amount determined under paragraph (3) of this subsection.”

Subsec. (f)(3)(A), (B). Pub. L. 101-508, §8013(a)(2)(B), substituted “paragraph (2)(A)(ii)” for “paragraph (2)(B)”.

1988—Subsec. (b). Pub. L. 100-233 amended subsec. (b) generally. Prior to amendment, subsec. (b) read as follows: “The Administrator, within the limits of Veterans’ Administration facilities, may furnish domiciliary care to—

“(1) a veteran who was discharged or released from the active military, naval, or air service for a disability incurred or aggravated in line of duty, or a person who is in receipt of disability compensation, when such person is suffering from a permanent disability or tuberculosis or neuropsychiatric ailment and is incapacitated from earning a living and has no adequate means of support; and

“(2) a veteran who is in need of domiciliary care if such veteran is unable to defray the expenses of necessary domiciliary care.”

Subsec. (e)(3). Pub. L. 100-687 substituted “December 31, 1990” for “September 30, 1989”.

1986—Subsec. (a). Pub. L. 99-576, §237(a), inserted “who is in receipt of, or” after “veteran” in par. (1)(C).

Pub. L. 99-272, §19011(a)(1), amended subsec. (a) generally. Prior to amendment, subsec. (a) read as follows: “The Administrator, within the limits of Veterans’ Administration facilities, may furnish hospital care or nursing home care which the Administrator determines is needed to—

“(1)(A) any veteran for a service-connected disability; or

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

“(2) a veteran whose discharge or release from the active military, naval, or air service was for a disability incurred or aggravated in line of duty;

“(3) a person (A) who is in receipt of, or but for the receipt of retirement pay would be entitled to, disability compensation, or (B) who, but for a suspension pursuant to section 351 of this title (or both such a suspension and the receipt of retired pay), would be entitled to disability compensation, but only to the extent that such person’s continuing eligibility for such care is provided for in the judgment or settlement described in such section;

“(4) a veteran who is a former prisoner of war;

“(5) a veteran who meets the conditions of subsection (e) of this section; and

“(6) any veteran for a non-service-connected disability if such veteran is sixty-five years of age or older.”

Subsec. (e)(1)(A), (B). Pub. L. 99-272, §19011(d)(3)(A), substituted “is eligible for hospital care and nursing home care under subsection (a)(1)(G)” for “may be furnished hospital care or nursing home care under subsection (a)(5)”.

Subsec. (e)(2), (3). Pub. L. 99-272, §19011(d)(3)(B), substituted “subsection (a)(1)(G)” for “subsection (a)(5)”.

Subsec. (f). Pub. L. 99-272, §19011(a)(2), added subsec. (f).

Subsec. (f)(3)(F). Pub. L. 99-576, §237(b)(1), added subpar. (F).

Subsec. (g). Pub. L. 99-272, §19011(a)(2), added subsec. (g).

1985—Subsec. (e)(3). Pub. L. 99-166 substituted “after September 30, 1989” for “after the end of the one-year period beginning on the date the Administrator submits to the appropriate committees of Congress the first report required by section 307(b)(2) of the Veterans Health Programs Extension and Improvement Act of 1979 (Public Law 96-151; 93 Stat. 1098)”.

1983—Subsec. (a)(3). Pub. L. 98-160 inserted “(A)” after “a person” and, after “disability compensation”, inserted “or (B) who, but for a suspension pursuant to section 351 of this title (or both such a suspension and the receipt of retired pay), would be entitled to disability compensation, but only to the extent that such

person’s continuing eligibility for such care is provided for in the judgment or settlement described in such section”.

1981—Subsec. (a). Pub. L. 97-72, §102(a)(1), added cl. (5) and redesignated former cl. (5) as (6).

Pub. L. 97-37 added cl. (4) and redesignated former cl. (4) as (5).

Subsec. (e). Pub. L. 97-72, §102(a)(2), added subsec. (e).

1979—Subsec. (c). Pub. L. 96-22 inserted provisions relating to the furnishing of dental services and treatment and related dental appliances for non-service-connected dental conditions or disabilities of veterans.

1976—Pub. L. 94-581, §202(d)(1), inserted “, nursing home,” in section catchline.

Subsec. (a). Pub. L. 94-581, §§202(d)(2), 210(a)(1)(A), (B), substituted “the Administrator determines” for “he determines” in provisions preceding par. (1) and substituted “such veteran” for “he” and “necessary hospital or nursing home care” for “necessary hospital care” in subpar. (B) of par. (1).

Subsec. (b)(1). Pub. L. 94-581, §210(a)(1)(C), substituted “such person” for “he”.

Subsec. (b)(2). Pub. L. 94-581, §§202(d)(3), 210(a)(1)(B), substituted “a veteran who is in need of domiciliary care if such veteran” for “a veteran of any war or of service after January 31, 1955, who is in need of domiciliary care, if he”.

Subsec. (c). Pub. L. 94-581, §210(a)(1)(B), substituted “for which such veteran is hospitalized” for “for which he is hospitalized”.

Subsec. (d). Pub. L. 94-581, §202(d)(4), substituted “direct jurisdiction” for “direct and exclusive jurisdiction”.

1973—Subsec. (a). Pub. L. 93-82, §102(1), (2), extended authority of the Administrator to furnish nursing home care, and in par. (1)(B), substituted “any veteran for a” for “a veteran of any war or of service after January 31, 1955, for”.

Subsec. (c). Pub. L. 93-82, §102(3), expanded provision regarding medical services to include nursing home care and struck out requirement that the Administrator make a determination in each instance that the non-service-connected disability would be in the veteran’s interest, would not prolong his hospitalization, and, would not interfere with the furnishing of hospital facilities to other veterans.

Subsec. (d). Pub. L. 93-82, §102(4), added subsec. (d).

1970—Subsec. (a). Pub. L. 91-500 added cl. (4).

1966—Pub. L. 89-358 inserted “or of service after January 31, 1955,” after “veteran of any war” in subsecs. (a)(1)(B) and (b)(2).

Subsec. (c). Pub. L. 89-785 added subsec. (c).

1962—Subsec. (a)(1). Pub. L. 87-583 provided for hospital care to any veteran for a service-connected disability instead of to a veteran of any war for a service-connected disability incurred or aggravated during a period of war in subpar. (A) and incorporated existing provisions in subpar. (B).

Statutory Notes and Related Subsidiaries

EFFECTIVE DATE OF 2022 AMENDMENT

Pub. L. 117-328, div. U, title I, §101(b), Dec. 29, 2022, 136 Stat. 5408, provided that: “The amendment made by subsection (a) [amending this section] shall take effect on March 31, 2023.”

Pub. L. 117-168, title I, §111(e), Aug. 10, 2022, 136 Stat. 1766, provided that: “This section [amending this section] and the amendments made by this section shall take effect on October 1, 2022.”

Amendment by section 403(c) of Pub. L. 117-168 effective Aug. 10, 2022, with additional provisions for different applicability dates applying to various categories of veterans and claimants for compensation, see section 403(e) of Pub. L. 117-168, set out as a note under section 1116 of this title.

EFFECTIVE DATE OF 2019 AMENDMENT

Amendment by Pub. L. 116-23 effective Jan. 1, 2020, see section 2(g) of Pub. L. 116-23, set out as an Effective Date note under section 1116A of this title.

EFFECTIVE DATE OF 2018 AMENDMENT

Amendment by Pub. L. 115-232 effective Feb. 1, 2019, with provision for the coordination of amendments and special rule for certain redesignations, see section 800 of Pub. L. 115-232, set out as a note preceding section 3001 of Title 10, Armed Forces.

EFFECTIVE DATE OF 2013 AMENDMENT

Amendment by Pub. L. 113-37 effective Oct. 1, 2013, see section 4(a) of Pub. L. 113-37, set out as a note under section 322 of this title.

EFFECTIVE DATE OF 2012 AMENDMENT

Pub. L. 112-154, title I, §102(d), Aug. 6, 2012, 126 Stat. 1169, provided that:

“(1) IN GENERAL.—The provisions of this section [enacting section 1787 of this title and amending this section] and the amendments made by this section shall take effect on the date of the enactment of this Act [Aug. 6, 2012].

“(2) APPLICABILITY.—Subparagraph (F) of section 1710(e)(1) of such title [probably means title 38, United States Code], as added by subsection (a), and section 1787 of title 38, United States Code, as added by subsection (b)(1), shall apply with respect to hospital care and medical services provided on or after the date of the enactment of this Act.”

EFFECTIVE DATE OF 2006 AMENDMENT

Pub. L. 109-461, title II, §211(a)(5), Dec. 22, 2006, 120 Stat. 3419, provided that: “The amendments made by this subsection [enacting section 1745 of this title and amending this section and sections 1741 and 1745 of this title] shall take effect 90 days after the date of the enactment of this Act [Dec. 22, 2006].”

EFFECTIVE DATE OF 2002 AMENDMENT

Amendment by section 202(b) of Pub. L. 107-135 effective Oct. 1, 2002, see section 202(c) of Pub. L. 107-135, set out as a note under section 1705 of this title.

EFFECTIVE DATE OF 1999 AMENDMENT

Amendment by section 101(f) of Pub. L. 106-117 effective Nov. 30, 1999, with provisions of subsec. (f) of this section not applicable to any day of nursing home care on or after the effective date of regulations under section 101(h)(2) of Pub. L. 106-117, see section 101(h) of Pub. L. 106-117, set out as an Effective Date note under section 1710B of this title.

Pub. L. 106-117, title II, §201(c), as added by Pub. L. 106-419, title II, §224(c), Nov. 1, 2000, 114 Stat. 1846, provided that: “The amendments made by subsection (b) [amending this section] shall apply with respect to medical services furnished under section 1710(a) of title 38, United States Code, on or after the effective date of the regulations prescribed by the Secretary of Veterans Affairs to establish the amounts required to be established under paragraphs (1) and (2) of section 1710(g) of that title, as amended by subsection (b).”

EFFECTIVE DATE OF 1997 AMENDMENT

Pub. L. 105-33, title VIII, §8023(g), Aug. 5, 1997, 111 Stat. 668, provided that:

“(1) Except as provided in paragraph (2), this section [enacting section 1729A of this title, amending this section and sections 712, 1722A, and 1729 of this title, and enacting provisions set out as notes under sections 1729 and 1729A of this title] and the amendments made by this section shall take effect on October 1, 1997.

“(2) The amendments made by subsection (d) [amending section 1729 of this title] shall take effect on the date of the enactment of this Act [Aug. 5, 1997].”

EFFECTIVE DATE OF 1996 AMENDMENT

Amendment by Pub. L. 104-275 effective Jan. 1, 1997, with no benefit to be paid or provided by reason of such amendment for any period before such date, see section 505(d) of Pub. L. 104-275, set out as a note under section 101 of this title.

EFFECTIVE DATE OF 1993 AMENDMENT

Pub. L. 103-210, §1(c)(1), Dec. 20, 1993, 107 Stat. 2497, provided that: “The amendments made by subsections (a) and (b) [amending this section and section 1712 of this title] shall take effect as of August 2, 1990.”

EFFECTIVE DATE OF 1990 AMENDMENTS

Pub. L. 102-145, §111, Oct. 28, 1991, 105 Stat. 970, provided that: “Notwithstanding any other provision of this joint resolution or any other law, the amendments made by sections 8012 and 8013 of the Omnibus Budget Reconciliation Act of 1990 (Public Law 101-508) [enacting section 622A [now 1722A] of this title and amending this section and sections 612 [now 1712] and 622 [now 1722] of this title] shall remain in effect through the period covered by this joint resolution [see section 106 of Pub. L. 102-145, 105 Stat. 970, as amended by Pub. L. 102-163, 105 Stat. 1048].”

Pub. L. 102-109, §111, Sept. 30, 1991, 105 Stat. 553, provided that: “Notwithstanding any other provision of this joint resolution or any other law, the amendments made by sections 8012 and 8013 of the Omnibus Budget Reconciliation Act of 1990 (Public Law 101-508) [enacting section 622A [now 1722A] of this title and amending this section and sections 612 [now 1712] and 622 [now 1722] of this title] shall remain in effect through the period covered by this joint resolution [see section 106 of Pub. L. 102-109, 105 Stat. 553].”

Pub. L. 101-508, title VIII, §8013(d), (e), Nov. 5, 1990, 104 Stat. 1388-347, as amended by Pub. L. 102-139, title V, §518(b), Oct. 28, 1991, 105 Stat. 779; Pub. L. 102-568, title VI, §606(b), Oct. 29, 1992, 106 Stat. 4343; Pub. L. 103-66, title XII, §12002(a), Aug. 10, 1993, 107 Stat. 414; Pub. L. 105-33, title VIII, §8021(a)(2), Aug. 5, 1997, 111 Stat. 665, provided that:

“(d) EFFECTIVE DATE.—The amendments made by this section [amending this section and sections 612 and 622 [now 1712 and 1722] of this title] shall apply with respect to hospital care and medical services received after October 31, 1990, or the date of the enactment of this Act [Nov. 5, 1990], whichever is later.

“[(e) Repealed. Pub. L. 105-33, title VIII, §8021(a)(2), Aug. 5, 1997, 111 Stat. 665.]”

EFFECTIVE DATE OF 1986 AMENDMENTS

Pub. L. 99-576, title II, §237(c), Oct. 28, 1986, 100 Stat. 3267, provided that: “The amendments made by this section [amending this section and section 612 [now 1712] of this title] shall take effect as of April 7, 1986.”

Pub. L. 99-272, title XIX, §19011(f), Apr. 7, 1986, 100 Stat. 380, provided that:

“(1) Except as provided in paragraph (2), the amendments made by this section [amending this section and sections 525, 601, 612, 612A, 620, 622, and 663 [now 1525, 1701, 1712, 1712A, 1720, 1722, and 1763] of this title and enacting provisions set out as notes under this section and section 1722 of this title] shall apply to hospital care, nursing home care, and medical services furnished on or after July 1, 1986.

“(2)(A) The provisions of sections 610 and 622 [now 1710 and 1722] of title 38, United States Code, as in effect on the day before the date of the enactment of this Act [Apr. 7, 1986], shall apply with respect to hospital and nursing home care furnished on or after July 1, 1986, to veterans furnished such care or services on June 30, 1986, but only to the extent that such care is furnished with respect to the same episode of care for which it was furnished on June 30, 1986, as determined by the Administrator pursuant to regulations which the Administrator shall prescribe.

“(B) During the months of July and August 1986, the Administrator may, in order to continue a course of treatment begun before July 1, 1986, furnish medical services to a veteran on an ambulatory or outpatient basis without regard to the amendments made by this section.

“(C) For the purposes of this paragraph, the term ‘episode of care’ means a period of consecutive days—

“(i) beginning with the first day on which a veteran is furnished hospital or nursing home care; and

“(ii) ending on the day of the veteran’s discharge from the hospital or nursing home facility, as the case may be.”

EFFECTIVE DATE OF 1981 AMENDMENT

Pub. L. 97-37, §5(d), Aug. 14, 1981, 95 Stat. 937, provided that: “The amendments made by this section [amending this section and section 612 [now 1712] of this title] shall take effect on October 1, 1981”.

EFFECTIVE DATE OF 1979 AMENDMENT

Amendment by Pub. L. 96-22 effective Oct. 1, 1979, see section 107 of Pub. L. 96-22, set out as a note under section 1701 of this title.

EFFECTIVE DATE OF 1976 AMENDMENT

Amendment by Pub. L. 94-581 effective Oct. 21, 1976, see section 211 of Pub. L. 94-581, set out as a note under section 111 of this title.

EFFECTIVE DATE OF 1973 AMENDMENT

Amendment by Pub. L. 93-82 effective Sept. 1, 1973, see section 501 of Pub. L. 93-82, set out as a note under section 1701 of this title.

SAVINGS PROVISION

Pub. L. 104-262, title I, §102(b), Oct. 9, 1996, 110 Stat. 3182, provided that: “The provisions of sections 1710(e) and 1712(a) of title 38, United States Code, as in effect on the day before the date of the enactment of this Act [Oct. 9, 1996], shall continue to apply on and after such date with respect to the furnishing of hospital care, nursing home care, and medical services for any veteran who was furnished such care or services before such date of enactment on the basis of presumed exposure to a substance or radiation under the authority of those provisions, but only for treatment for a disability for which such care or services were furnished before such date.”

SAVINGS PROVISION FOR PUB. L. 100-322

Pub. L. 100-322, title I, §102(c), May 20, 1988, 102 Stat. 493, provided that: “The amendment made by subsection (a) [amending this section] shall not limit or restrict the eligibility for domiciliary care of a veteran who was a patient or a resident in a State home facility or a Veterans’ Administration domiciliary facility during the period beginning on January 1, 1987, and ending on April 1, 1988.”

ASSESSMENTS OF IMPLEMENTATION AND OPERATION

Pub. L. 117-168, title I, §104, Aug. 10, 2022, 136 Stat. 1763, provided that:

“(a) INITIAL RESOURCE ASSESSMENT AND REPORT.—Not later than 180 days after the date of the enactment of this Act [Aug. 10, 2022], the Secretary of Veterans Affairs shall—

“(1) complete an assessment to determine—

“(A) the personnel and material resources necessary to implement section 103 [amending this section] (including the amendments made by such section); and

“(B) the total number of covered veterans, as such term is defined in section 1119(c) of title 38, United States Code (as added by section 302), who receive hospital care or medical services furnished by the Secretary under chapter 17 of such title, disaggregated by priority group specified in section 1705(a) of such title; and

“(2) submit to the Committee on Veterans’ Affairs of the Senate and the Committee on Veterans’ Affairs of the House of Representatives a report containing the findings of the assessment completed under paragraph (1), including a specific determination as to whether the Department has the personnel and material resources necessary to implement section 103.

“(b) INFORMATION SYSTEMS.—Not later than October 1, 2024, the Secretary shall establish information sys-

tems to assess the implementation of section 103, including the amendments made by such section, and use the results of assessments under such systems to inform the reports under subsection (c).

“(c) ANNUAL REPORTS.—

“(1) REPORTS.—Not later than October 1, 2025, and on an annual basis thereafter until October 1, 2033, the Secretary shall submit to the Committee on Veterans’ Affairs of the Senate and the Committee on Veterans’ Affairs of the House of Representatives a report on the following:

“(A) The effect of the implementation of, and the provision and management of care under, section 103 (including the amendments made by such section) on the demand by veterans described in subparagraphs (G), (H), and (I) of section 1710(e)(1) of title 38, United States Code (as added by such section 103) for health care services furnished by the Secretary.

“(B) Any differing patterns of demand for health care services by such veterans, disaggregated by factors such as the relative distance of the veteran from medical facilities of the Department and whether the veteran had previously received hospital care or medical services furnished by the Secretary under chapter 17 of such title.

“(C) The extent to which the Secretary has met such demand.

“(D) Any changes, during the year covered by the report, in the delivery patterns of health care furnished by the Secretary under chapter 17 of such title, and the fiscal impact of such changes.

“(2) MATTERS.—Each report under paragraph (1) shall include, with respect to the year covered by the report, detailed information on the following:

“(A) The total number of veterans enrolled in the patient enrollment system who, during such year, received hospital care or medical services furnished by the Secretary under chapter 17 of title 38, United States Code.

“(B) Of the veterans specified in subparagraph (A), the number of such veterans who, during the preceding three fiscal years, had not received such care or services.

“(C) With respect to the veterans specified in subparagraph (B), the cost of providing health care to such veterans during the year covered by the report, shown in total and disaggregated by—

“(i) the level of care; and

“(ii) whether the care was provided through the Veterans Community Care Program.

“(D) With respect to the number of veterans described in subparagraphs (G), (H), and (I) of section 1710(e)(1) of title 38, United States Code (as added by section 103), the following (shown in total and disaggregated by medical facility of the Department, as applicable):

“(i) The number of such veterans who, during the year covered by the report, enrolled in the patient enrollment system.

“(ii) The number of such veterans who applied for, but were denied, such enrollment.

“(iii) The number of such veterans who were denied hospital care or a medical service furnished by the Secretary that was considered to be medically necessary but not of an emergency nature.

“(E) The numbers and characteristics of, and the type and extent of health care furnished by the Secretary to, veterans enrolled in the patient enrollment system (shown in total and disaggregated by medical facility of the Department).

“(F) The numbers and characteristics of, and the type and extent of health care furnished by the Secretary to, veterans not enrolled in the patient enrollment system (disaggregated by each class of eligibility for care under section 1710 of title 38, United States Code, and further shown as a total per class and disaggregated by medical facility of the Department).

“(G) The specific fiscal impact (shown in total and disaggregated by geographic health care deliv-

ery areas) of changes in the delivery patterns of health care furnished by the Secretary under chapter 17 of such title as a result of the implementation of section 103 (including the amendments made by such section).

“(d) DEFINITIONS.—In this section:

“(1) PATIENT ENROLLMENT SYSTEM.—The term ‘patient enrollment system’ means the patient enrollment system of the Department of Veterans Affairs established and operated under section 1705(a) of title 38, United States Code.

“(2) VETERANS COMMUNITY CARE PROGRAM.—The term ‘Veterans Community Care Program’ means the program established under section 1703 of title 38, United States Code.”

CONTACT OF CERTAIN VETERANS TO ENCOURAGE RECEIPT OF COMPREHENSIVE MEDICAL EXAMINATIONS

Pub. L. 116-214, title II, §204, Dec. 5, 2020, 134 Stat. 1037, provided that:

“(a) NOTICE.—Not later than 90 days after the date of the enactment of this Act [Dec. 5, 2020], the Under Secretary of Health of the Department of Veterans Affairs shall seek to contact each covered veteran by mail, telephone, or email to encourage each covered veteran to receive medical examinations including the following:

“(1) A comprehensive physical examination.

“(2) A comprehensive mental health examination.

“(3) A comprehensive eye examination if the covered veteran has not received such an examination in the year immediately preceding the date of such examination.

“(4) A comprehensive audiological examination if the covered veteran has not received such an examination in the year immediately preceding the date of such examination.

“(b) EXAMINATIONS.—

“(1) VA HEALTH CARE FACILITIES.—If a covered veteran elects to receive more than one examination described in subsection (a) at a health care facility of the Department of Veterans Affairs, the Under Secretary of Health shall seek to furnish all such scheduled examinations on the same day.

“(2) COMMUNITY CARE.—Pursuant to subsection (d) or (e) of section 1703 of title 38, United States Code, a covered veteran may receive an examination described in subsection (a) from a health care provider described in subsection (c) of that section.

“(c) TRANSPORTATION.—

“(1) BENEFICIARY TRAVEL PROGRAM.—Pursuant to section 111 of title 38, United States Code, the Secretary of Veterans Affairs may pay for a rural covered veteran to travel to a health care facility to receive an examination described in subsection (a).

“(2) SHUTTLE SERVICE.—The Under Secretary of Health shall seek to enter into agreements with non-profit organizations to provide shuttle service to rural covered veterans for examinations described in subsection (a).

“(d) REPORT REQUIRED.—Not later than 18 months after the date of the enactment of this Act, the Secretary of Veterans Affairs shall submit to Congress a report regarding how many covered veterans scheduled examinations described in subsection (a) after receiving a letter, telephone call, or email under that subsection.

“(e) DEFINITIONS.—In this section:

“(1) The term ‘covered veteran’ means a veteran who—

“(A) is enrolled in the patient enrollment system of the Department of Veterans Affairs under section 1705 of title 38, United States Code; and

“(B) has not received health care furnished or paid for by the Secretary of Veterans Affairs during the two years immediately preceding the date in subsection (a)(1).

“(2) The term ‘rural covered veteran’ means a covered veteran—

“(A) who lives in an area served by the Office of Rural Health of the Department of Veterans Affairs; and

“(B) whom [sic] the Under Secretary of Health determines requires assistance to travel to a health care facility to receive an examination described in subsection (a).

“(3) The term ‘veteran’ has the meaning given that term in section 101 of title 38, United States Code.”

REPORT ON LOCATIONS WHERE WOMEN VETERANS ARE USING HEALTH CARE FROM DEPARTMENT OF VETERANS AFFAIRS

Pub. L. 116-214, title III, §302, Dec. 5, 2020, 134 Stat. 1039, provided that:

“(a) REPORT.—Not later than 90 days after the date of the enactment of this Act [Dec. 5, 2020], and annually thereafter, the Secretary of Veterans Affairs shall submit to the Committees on Veterans' Affairs of the House of Representatives and the Senate a report on the use by women veterans of health care from the Department of Veterans Affairs.

“(b) ELEMENTS.—Each report required by subsection (a) shall include the following information:

“(1) The number of women veterans who reside in each State.

“(2) The number of women veterans in each State who are enrolled in the patient enrollment system of the Department under section 1705(a) of title 38, United States Code.

“(3) Of the women veterans who are so enrolled, the number who have received health care under the laws administered by the Secretary at least one time during the one-year period preceding the submission of the report.

“(4) The number of women veterans who have been seen at each medical facility of the Department during such year, disaggregated by facility.

“(5) The number of appointments that women veterans have had at a medical facility of the Department during such year, disaggregated by—

“(A) facility; and

“(B) appointments for—

“(i) primary care;

“(ii) specialty care; and

“(iii) mental health care.

“(6) For each appointment type specified in paragraph (5)(B), the number of appointments completed in-person and the number of appointments completed through the use of telehealth.

“(7) If known, an identification of the medical facility of the Department in each Veterans Integrated Service Network with the largest rate of increase in patient population of women veterans as measured by the increase in unique women veteran patient use.

“(8) If known, an identification of the medical facility of the Department in each Veterans Integrated Service Network with the largest rate of decrease in patient population of women veterans as measured by the decrease in unique women veterans patient use.”

PILOT PROGRAM ON ASSISTANCE FOR CHILD CARE FOR CERTAIN VETERANS RECEIVING HEALTH CARE

Pub. L. 111-163, title II, §205, May 5, 2010, 124 Stat. 1144, as amended by Pub. L. 113-37, §2(i), Sept. 30, 2013, 127 Stat. 525; Pub. L. 113-175, title I, §103, Sept. 26, 2014, 128 Stat. 1903; Pub. L. 114-58, title I, §105, Sept. 30, 2015, 129 Stat. 532; Pub. L. 114-228, title I, §105, Sept. 29, 2016, 130 Stat. 937; Pub. L. 115-62, title I, §105, Sept. 29, 2017, 131 Stat. 1161; Pub. L. 115-251, title I, §106, Sept. 29, 2018, 132 Stat. 3168; Pub. L. 116-159, div. E, title I, §5104, Oct. 1, 2020, 134 Stat. 748; Pub. L. 116-315, title V, §5107(a)(2), Jan. 5, 2021, 134 Stat. 5031, provided that:

“(a) PILOT PROGRAM REQUIRED.—The Secretary of Veterans Affairs shall carry out a pilot program to assess the feasibility and advisability of providing, subject to subsection (b), assistance to qualified veterans described in subsection (c) to obtain child care so that such veterans can receive health care services described in subsection (c).

“(b) LIMITATION ON PERIOD OF PAYMENTS.—Assistance may only be provided to a qualified veteran under the

pilot program for receipt of child care during the period that the qualified veteran—

“(1) receives the types of health care services described in subsection (c) at a facility of the Department; and

“(2) requires travel to and return from such facility for the receipt of such health care services.

“(c) QUALIFIED VETERANS.—For purposes of this section, a qualified veteran is a veteran who is—

“(1) the primary caretaker of a child or children; and

“(2)(A) receiving from the Department—

“(i) regular mental health care services;

“(ii) intensive mental health care services; or

“(iii) such other intensive health care services that the Secretary determines that provision of assistance to the veteran to obtain child care would improve access to such health care services by the veteran; or

“(B) in need of regular or intensive mental health care services from the Department, and but for lack of child care services, would receive such health care services from the Department.

“(d) LOCATIONS.—The Secretary shall carry out the pilot program in no fewer than three Veterans Integrated Service Networks selected by the Secretary for purposes of the pilot program.

“(e) TERMINATION.—The authority to carry out a pilot program under this section shall terminate on the date of the enactment of the Deborah Sampson Act of 2020 [Jan. 5, 2021].

“(f) FORMS OF CHILD CARE ASSISTANCE.—

“(1) IN GENERAL.—Child care assistance under this section may include the following:

“(A) Stipends for the payment of child care offered by licensed child care centers (either directly or through a voucher program) which shall be, to the extent practicable, modeled after the Department of Veterans Affairs Child Care Subsidy Program established pursuant to section 630 of the Treasury and General Government Appropriations Act, 2002 (Public Law 107-67; 115 Stat. 552) [now 40 U.S.C. 590(g)].

“(B) Direct provision of child care at an on-site facility of the Department of Veterans Affairs.

“(C) Payments to private child care agencies.

“(D) Collaboration with facilities or programs of other Federal departments or agencies.

“(E) Such other forms of assistance as the Secretary considers appropriate.

“(2) AMOUNTS OF STIPENDS.—In the case that child care assistance under this section is provided as a stipend under paragraph (1)(A), such stipend shall cover the full cost of such child care.

“(g) REPORT.—Not later than 6 months after the completion of the pilot program, the Secretary shall submit to Congress a report on the pilot program. The report shall include the findings and conclusions of the Secretary as a result of the pilot program, and shall include such recommendations for the continuation or expansion of the pilot program as the Secretary considers appropriate.

“(h) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to the Secretary of Veterans Affairs to carry out the pilot program \$1,500,000 for each of fiscal years 2010, 2015, 2016, 2017, 2018, 2019, 2020, 2021, and 2022.”

[Pub. L. 116-315, §5107(a)(2), which directed amendment of section 205(e) of Pub. L. 111-163, set out above, by substituting “the date of the enactment of the Deborah Sampson Act of 2020” for “September 30, 2020”, was executed by making the substitution for “September 30, 2022” to reflect the probable intent of Congress and the amendment by Pub. L. 116-159, which had substituted “September 30, 2022” for “September 30, 2020”. For establishment of child care assistance program by Pub. L. 116-315, see section 1709C of this title.]

GRANTS FOR VETERANS SERVICE ORGANIZATIONS FOR TRANSPORTATION OF HIGHLY RURAL VETERANS

Pub. L. 111-163, title III, §307, May 5, 2010, 124 Stat. 1154, as amended by Pub. L. 113-175, title I, §104, Sept.

26, 2014, 128 Stat. 1903; Pub. L. 114-58, title I, §106, Sept. 30, 2015, 129 Stat. 532; Pub. L. 114-228, title I, §106, Sept. 29, 2016, 130 Stat. 937; Pub. L. 115-62, title I, §106, Sept. 29, 2017, 131 Stat. 1161; Pub. L. 115-251, title I, §107, Sept. 29, 2018, 132 Stat. 3168; Pub. L. 116-159, div. E, title I, §5105, Oct. 1, 2020, 134 Stat. 748, provided that:

“(a) GRANTS AUTHORIZED.—

“(1) IN GENERAL.—The Secretary of Veterans Affairs shall establish a grant program to provide innovative transportation options to veterans in highly rural areas.

“(2) ELIGIBLE RECIPIENTS.—The following may be awarded a grant under this section:

“(A) State veterans service agencies.

“(B) Veterans service organizations.

“(3) USE OF FUNDS.—A State veterans service agency or veterans service organization awarded a grant under this section may use the grant amount to—

“(A) assist veterans in highly rural areas to travel to Department of Veterans Affairs medical centers; and

“(B) otherwise assist in providing transportation in connection with the provision of medical care to veterans in highly rural areas.

“(4) MAXIMUM AMOUNT.—The amount of a grant under this section may not exceed \$50,000.

“(5) NO MATCHING REQUIREMENT.—The recipient of a grant under this section shall not be required to provide matching funds as a condition for receiving such grant.

“(b) REGULATIONS.—The Secretary shall prescribe regulations for—

“(1) evaluating grant applications under this section; and

“(2) otherwise administering the program established by this section.

“(c) DEFINITIONS.—In this section:

“(1) HIGHLY RURAL.—The term ‘highly rural’, in the case of an area, means that the area consists of a county or counties having a population of less than seven persons per square mile.

“(2) VETERANS SERVICE ORGANIZATION.—The term ‘veterans service organization’ means any organization recognized by the Secretary of Veterans Affairs for the representation of veterans under section 5902 of title 38, United States Code.

“(d) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated \$3,000,000 for each of fiscal years 2010 through 2022 to carry out this section.”

CONTINUATION OF AUTHORITY

Pub. L. 110-92, §161, as added by Pub. L. 110-149, §2, Dec. 21, 2007, 121 Stat. 1819, provided that: “Notwithstanding section 106 [121 Stat. 990], the authority to provide care and services under section 1710(e)(1)(E) of title 38, United States Code, shall continue in effect through September 30, 2008.”

PERSONAL EMERGENCY RESPONSE SYSTEM FOR VETERANS WITH SERVICE-CONNECTED DISABILITIES

Pub. L. 107-135, title II, §210, Jan. 23, 2002, 115 Stat. 2464, provided that:

“(a) EVALUATION AND STUDY.—The Secretary of Veterans Affairs shall carry out an evaluation and study of the feasibility and desirability of providing a personal emergency response system to veterans who have service-connected disabilities. The evaluation and study shall be commenced not later than 60 days after the date of the enactment of this Act [Jan. 23, 2002].

“(b) REPORT.—Not later than 180 days after the date of the enactment of this Act, the Secretary shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report on the evaluation and study under subsection (a). The Secretary shall include in the report the Secretary's findings resulting from the evaluation and study and the Secretary's conclusion as to whether the Department of Veterans Affairs should provide a personal emergency response system to veterans with service-connected disabilities.

“(c) **AUTHORITY TO PROVIDE SYSTEM.**—If the Secretary concludes in the report under subsection (b) that a personal emergency response system should be provided by the Department of Veterans Affairs to veterans with service-connected disabilities—

“(1) the Secretary may provide such a system, without charge, to any veteran with a service-connected disability who is enrolled under section 1705 of title 38, United States Code, and who submits an application for such a system under subsection (d); and

“(2) the Secretary may contract with one or more vendors to furnish such a system.

“(d) **APPLICATION.**—A personal emergency response system may be provided to a veteran under subsection (c)(1) only upon the submission by the veteran of an application for the system. Any such application shall be in such form and manner as the Secretary may require.

“(e) **DEFINITION.**—For purposes of this section, the term ‘personal emergency response system’ means a device—

“(1) that can be activated by an individual who is experiencing a medical emergency to notify appropriate emergency medical personnel that the individual is experiencing a medical emergency; and

“(2) that provides the individual’s location through a Global Positioning System indicator.”

CHIROPRACTIC TREATMENT

Pub. L. 107-135, title II, §204, Jan. 23, 2002, 115 Stat. 2459, as amended by Pub. L. 115-141, div. J, title II, §245(a), Mar. 23, 2018, 132 Stat. 822, provided that:

“(a) **REQUIREMENT FOR PROGRAM.**—Subject to the provisions of this section, the Secretary of Veterans Affairs shall carry out a program to provide chiropractic care and services to veterans through Department of Veterans Affairs medical centers and clinics.

“(b) **ELIGIBLE VETERANS.**—Veterans eligible to receive chiropractic care and services under the program are veterans who are enrolled in the system of patient enrollment under section 1705 of title 38, United States Code.

“(c) **LOCATION OF PROGRAM.**—(1) The program shall be carried out at sites designated by the Secretary for purposes of the program. The Secretary shall designate at least one site for such program in each geographic service area of the Veterans Health Administration. The sites so designated shall be medical centers and clinics located in urban areas and in rural areas.

“(2) The program shall be carried out at not fewer than two medical centers or clinics in each Veterans Integrated Service Network by not later than December 31, 2019, and at not fewer than 50 percent of all medical centers in each Veterans Integrated Service Network by not later than December 31, 2021.

“(d) **CARE AND SERVICES AVAILABLE.**—The chiropractic care and services available under the program shall include a variety of chiropractic care and services for neuro-musculoskeletal conditions, including subluxation complex.

“(e) **OTHER ADMINISTRATIVE MATTERS.**—(1) The Secretary shall carry out the program through personal service contracts and by appointment of licensed chiropractors in Department medical centers and clinics.

“(2) As part of the program, the Secretary shall provide training and materials relating to chiropractic care and services to Department health care providers assigned to primary care teams for the purpose of familiarizing such providers with the benefits of chiropractic care and services.

“(f) **REGULATIONS.**—The Secretary shall prescribe regulations to carry out this section.

“(g) **CHIROPRACTIC ADVISORY COMMITTEE.**—(1) The Secretary shall establish an advisory committee to provide direct assistance and advice to the Secretary in the development and implementation of the chiropractic health program.

“(2) The membership of the advisory committee shall include members of the chiropractic care profession and such other members as the Secretary considers appropriate.

“(3) Matters on which the advisory committee shall assist and advise the Secretary shall include the following:

“(A) Protocols governing referral to chiropractors.

“(B) Protocols governing direct access to chiropractic care.

“(C) Protocols governing scope of practice of chiropractic practitioners.

“(D) Definition of services to be provided.

“(E) Such other matters the Secretary determines to be appropriate.

“(4) The advisory committee shall cease to exist on December 31, 2004.”

Pub. L. 106-117, title III, §303, Nov. 30, 1999, 113 Stat. 1572, provided that:

“(a) **ESTABLISHMENT OF PROGRAM.**—Not later than 120 days after the date of the enactment of this Act [Nov. 30, 1999], the Under Secretary for Health of the Department of Veterans Affairs, after consultation with chiropractors, shall establish a policy for the Veterans Health Administration regarding the role of chiropractic treatment in the care of veterans under chapter 17 of title 38, United States Code.

“(b) **DEFINITIONS.**—For purposes of this section:

“(1) The term ‘chiropractic treatment’ means the manual manipulation of the spine performed by a chiropractor for the treatment of such musculo-skeletal conditions as the Secretary considers appropriate.

“(2) The term ‘chiropractor’ means an individual who—

“(A) is licensed to practice chiropractic in the State in which the individual performs chiropractic services; and

“(B) holds the degree of doctor of chiropractic from a chiropractic college accredited by the Council on Chiropractic Education.”

IMPLEMENTATION REPORT

Pub. L. 105-368, title I, §102(b), Nov. 11, 1998, 112 Stat. 3322, required the Secretary of Veterans Affairs, not later than Oct. 1, 1999, to submit to Congress a report on the Secretary’s plan for establishing and operating the system for collection and analysis of information required by subsec. (e)(5) of this section.

DEMONSTRATION PROJECTS FOR TREATMENT OF PERSIAN GULF ILLNESS

Pub. L. 105-114, title II, §209(b), Nov. 21, 1997, 111 Stat. 2290, provided that:

“(1) The Secretary of Veterans Affairs shall carry out a program of demonstration projects to test new approaches to treating, and improving the satisfaction with such treatment of, Persian Gulf veterans who suffer from undiagnosed and ill-defined disabilities. The program shall be established not later than July 1, 1998, and shall be carried out at up to 10 geographically dispersed medical centers of the Department of Veterans Affairs.

“(2) At least one of each of the following models shall be used at no less than two of the demonstration projects:

“(A) A specialized clinic which serves Persian Gulf veterans.

“(B) Multidisciplinary treatment aimed at managing symptoms.

“(C) Use of case managers.

“(3) A demonstration project under this subsection may be undertaken in conjunction with another funding entity, including agreements under section 8111 of title 38, United States Code.

“(4) The Secretary shall make available from appropriated funds (which have been retained for contingent funding) \$5,000,000 to carry out the demonstration projects.

“(5) The Secretary may not approve a medical center as a location for a demonstration project under this subsection unless a peer review panel has determined that the proposal submitted by that medical center is among those proposals that have met the highest com-

petitive standards of clinical merit and the Secretary has determined that the facility has the ability to—

“(A) attract the participation of clinicians of outstanding caliber and innovation to the project; and

“(B) effectively evaluate the activities of the project.

“(6) In determining which medical centers to select as locations for demonstration projects under this subsection, the Secretary shall give special priority to medical centers that have demonstrated a capability to compete successfully for extramural funding support for research into the effectiveness and cost-effectiveness of the care provided under the demonstration project.”

PATIENT PRIVACY FOR WOMEN PATIENTS

Pub. L. 104-262, title III, §322, Oct. 9, 1996, 110 Stat. 3196, provided that:

“(a) IDENTIFICATION OF DEFICIENCIES.—The Secretary of Veterans Affairs shall conduct a survey of each medical center under the jurisdiction of the Secretary to identify deficiencies relating to patient privacy afforded to women patients in the clinical areas at each such center which may interfere with appropriate treatment of such patients.

“(b) CORRECTION OF DEFICIENCIES.—The Secretary shall ensure that plans and, where appropriate, interim steps to correct the deficiencies identified in the survey conducted under subsection (a) are developed and are incorporated into the Department's construction planning processes and, in cases in which it is cost-effective to do so, are given a high priority.

“(c) REPORTS TO CONGRESS.—The Secretary shall compile an annual inventory, by medical center, of deficiencies identified under subsection (a) and of plans and, where appropriate, interim steps, to correct such deficiencies. The Secretary shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives, not later than October 1, 1997, and not later than October 1 each year thereafter through 1999 a report on such deficiencies. The Secretary shall include in such report the inventory compiled by the Secretary, the proposed corrective plans, and the status of such plans.”

HOSPICE CARE STUDY

Pub. L. 104-262, title III, §341, Oct. 9, 1996, 110 Stat. 3205, provided that:

“(a) STUDY REQUIRED.—The Secretary of Veterans Affairs shall conduct a research study to determine the desirability of the Secretary furnishing hospice care to terminally ill veterans and to evaluate the most cost-effective and efficient way to do so. The Secretary shall carry out the study using resources and personnel of the Department.

“(b) CONDUCT OF STUDY.—In carrying out the study required by subsection (a), the Secretary shall—

“(1) evaluate the programs, and the program models, through which the Secretary furnishes hospice care services within or through facilities of the Department of Veterans Affairs and the programs and program models through which non-Department facilities provide such services;

“(2) assess the satisfaction of patients, and family members of patients, in each of the program models covered by paragraph (1);

“(3) compare the costs (or range of costs) of providing care through each of the program models covered by paragraph (1); and

“(4) identify any barriers to providing, procuring, or coordinating hospice services through any of the program models covered by paragraph (1).

“(c) PROGRAM MODELS.—For purposes of subsection (b)(1), the Secretary shall evaluate a variety of types of models for delivery of hospice care, including the following:

“(1) Direct furnishing of full hospice care by the Secretary.

“(2) Direct furnishing of some hospice services by the Secretary.

“(3) Contracting by the Secretary for the furnishing of hospice care, with a commitment that the Secretary will provide any further required hospital care for the patient.

“(4) Contracting for all required care to be furnished outside the Department.

“(5) Referral of the patient for hospice care without a contract.

“(d) REPORT.—Not later than April 1, 1998, the Secretary shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report on the research study. The report shall set forth the Secretary's findings and recommendations. The Secretary shall include in the report information on the extent to which the Secretary advises veterans concerning their eligibility for hospice care and information on the number of veterans (as of the time of the report) who are in each model of hospice care described in subsection (c) and the average cost per patient of hospice care for each such model.”

RATIFICATION OF ACTIONS DURING PERIOD OF EXPIRED AUTHORITY

Pub. L. 106-419, title II, §224(d), Nov. 1, 2000, 114 Stat. 1846, provided that: “Any action taken by the Secretary of Veterans Affairs under section 1710(g) of title 38, United States Code, during the period beginning on November 30, 1999, and ending on the date of the enactment of this Act [Nov. 1, 2000] is hereby ratified.”

Pub. L. 104-110, title I, §103, Feb. 13, 1996, 110 Stat. 769, provided that: “Any action taken by the Secretary of Veterans Affairs before the date of the enactment of this Act [Feb. 13, 1996] under a provision of law amended by this title [amending this section, sections 1712, 1720A, 1720C, 3703, 3710, 3720, 3731, 3735, 7451, 7618, and 8169 of this title, sections 11448 and 11450 of Title 42, The Public Health and Welfare, and provisions set out as notes under sections 1712, 1718, and 7721 of this title] that was taken during the period beginning on the date on which the authority of the Secretary under that provision of law expired and ending on the date of the enactment of this Act shall be considered to have the same force and effect as if the amendment to that provision of law made by this title had been in effect at the time of that action.”

Pub. L. 103-452, title I, §105, Nov. 2, 1994, 108 Stat. 4787, provided that: “Any action of the Secretary of Veterans Affairs under section 1710(e) of title 38, United States Code, during the period beginning on July 1, 1994, and ending on the date of the enactment of this Act [Nov. 2, 1994] is hereby ratified.”

REIMBURSEMENT FOR HOSPITAL, NURSING HOME OR OUTPATIENT SERVICES EXPENSES

Pub. L. 103-210, §1(c)(2), Dec. 20, 1993, 107 Stat. 2497, directed Secretary of Veterans Affairs, on request, to reimburse any veteran who paid the United States an amount under 38 U.S.C. 1710(f) or 1712(f) for hospital care, nursing home care, or outpatient services furnished by the Secretary to the veteran before Dec. 20, 1993, on the basis of a finding that the veteran may have been exposed to a toxic substance or environmental hazard during the Persian Gulf War, with amount of reimbursement to be amount that was paid by the veteran for such care or services.

HEALTH CARE SERVICES FOR WOMEN

Pub. L. 102-585, title I, §106, Nov. 4, 1992, 106 Stat. 4947, provided that:

“(a) GENERAL AUTHORITY.—In furnishing hospital care and medical services under chapter 17 of title 38, United States Code, the Secretary of Veterans Affairs may provide to women the following health care services:

“(1) Papanicolaou tests (pap smears).

“(2) Breast examinations and mammography.

“(3) General reproductive health care, including the management of menopause, but not including under this section infertility services, abortions, or preg-

nancy care (including prenatal and delivery care), except for such care relating to a pregnancy that is complicated or in which the risks of complication are increased by a service-connected condition.

“(b) RESPONSIBILITIES OF DIRECTORS OF FACILITIES.—The Secretary shall ensure that directors of medical facilities of the Department identify and assess opportunities under the authority provided in title II of this Act [38 U.S.C. 8111 note] to (1) expand the availability of, and access to, health care services for women veterans under sections 1710 and 1712 of title 38, United States Code, and (2) provide counseling, care, and services authorized by this title [see Short Title of 1992 Amendment note set out under section 101 of this title].”

REPORT ON HEALTH CARE AND RESEARCH

Pub. L. 102-585, title I, §107, Nov. 4, 1992, 106 Stat. 4947, as amended by Pub. L. 104-262, title III, §324, Oct. 9, 1996, 110 Stat. 3197, provided that:

“(a) IN GENERAL.—Not later than January 1 of 1993 and each year thereafter through 1998, the Secretary of Veterans Affairs shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report on the provision of health care services and the conduct of research carried out by, or under the jurisdiction of, the Secretary relating to women veterans.

“(b) CONTENTS.—The report under subsection (a) shall include the following information with respect to the most recent fiscal year before the date of the report:

“(1) The number of women veterans who have received services described in section 106 of this Act [set out as a note above] in facilities under the jurisdiction of the Secretary (or the Secretary of Defense), shown by reference to the Department facility which provided (or, in the case of Department of Defense facilities, arranged) those services;

“(2) A description of (A) the services provided at each such facility (including information on the number of inpatient stays and the number of outpatient visits through which such services were provided), and (B) the extent to which each such facility relies on contractual arrangements under section 1703 or 8153 of title 38, United States Code, to furnish care to women veterans in facilities which are not under the jurisdiction of the Secretary where the provision of such care is not furnished in a medical emergency.

“(3) The steps taken by each such facility to expand the provision of services at such facility (or under arrangements with a Department of Defense facility) to women veterans.

“(4) A description (as of October 1 of the year preceding the year in which the report is submitted) of the status of any research relating to women veterans being carried out by or under the jurisdiction of the Secretary, including research under section 109 of this Act [former 38 U.S.C. 7303 note].

“(5) A description of the actions taken by the Secretary to foster and encourage the expansion of such research.”

COORDINATION OF WOMEN'S SERVICES

Pub. L. 102-585, title I, §108, Nov. 4, 1992, 106 Stat. 4948, provided that: “The Secretary of Veterans Affairs shall ensure that an official in each regional office of the Veterans Health Administration shall serve as a coordinator of women's services. The responsibilities of such official shall include the following:

“(1) Conducting periodic assessments of the needs for services of women veterans within such region.

“(2) Planning to meet such needs.

“(3) Assisting in carrying out the purposes of section 106(b) of this title [set out above].

“(4) Coordinating the training of women veterans coordinators who are assigned to Department facilities in the region under the jurisdiction of such regional coordinator.

“(5) Providing appropriate technical support and guidance to Department facilities in that region with respect to outreach activities to women veterans.”

POPULATION STUDY OF WOMEN VETERANS

Pub. L. 102-585, title I, §110, Nov. 4, 1992, 106 Stat. 4948, as amended by Pub. L. 103-452, title I, §102(c), Nov. 2, 1994, 108 Stat. 4786, directed Secretary of Veterans Affairs, in consultation with Advisory Committee on Women Veterans, to conduct a study to determine needs of veterans who are women for health-care services, based on an appropriate sample of veterans who are women, and to submit to Congress, not later than 9 months after Nov. 4, 1992, an interim report describing information and advice obtained from Advisory Committee and status of study, and to submit, not later than Dec. 31, 1995, a final report describing results of study.

DEMONSTRATION PROJECT TO EVALUATE INSTALLATION OF TELEPHONES FOR PATIENT USE AT DEPARTMENT OF VETERANS AFFAIRS HEALTH-CARE FACILITIES

Pub. L. 102-585, title V, §525, Nov. 4, 1992, 106 Stat. 4960, directed Secretary of Veterans Affairs to carry out a demonstration project to evaluate feasibility and desirability of providing telephone service in patient rooms in Department of Veterans Affairs health-care facilities which do not currently provide such service, use of telephones by patients of such health-care facilities, and relative feasibility and cost-effectiveness of a variety of options for providing such service, and submit to Congress a report on the demonstration project not later than Sept. 30, 1994.

REPORTS ON FURNISHING OF HEALTH CARE AND IMPLEMENTATION OF CHANGES IN ELIGIBILITY

Pub. L. 99-272, title XIX, §19011(e), Apr. 7, 1986, 100 Stat. 379, as amended by Pub. L. 100-527, §10(1), (2), Oct. 25, 1988, 102 Stat. 2640, 2641; Pub. L. 101-237, title II, §201(d), Dec. 18, 1989, 103 Stat. 2066; Pub. L. 102-40, title III, §302, May 7, 1991, 105 Stat. 208; Pub. L. 102-83, §5(c)(2), Aug. 6, 1991, 105 Stat. 406; Pub. L. 102-291, §4, May 20, 1992, 106 Stat. 179, directed Administrator of Veterans Affairs to submit to Congress a report for each fiscal year through fiscal year 1992 concerning implementation of the amendments made by section 19011 of Pub. L. 99-272, which amended this section and sections 1525, 1701, 1712, 1712A, 1720, 1722, and 1763 of this title and enacted provisions set out as notes under this section and section 1722 of this title, specified detailed information required to be submitted in each report, and provided that each report be submitted not later than the Feb. 1 following the end of the fiscal year for which it is submitted.

CHIROPRACTIC SERVICES PILOT PROGRAM

Pub. L. 99-166, title I, §109, Dec. 3, 1985, 99 Stat. 948, directed Administrator of Veterans' Affairs to conduct a pilot program to evaluate therapeutic benefits and cost-effectiveness of furnishing certain chiropractic services to veterans eligible for medical services under this chapter, provided that the pilot program be carried out during period beginning Jan. 1, 1986, and ending Dec. 31, 1988, and directed Administrator to submit to Committees on Veterans' Affairs of Senate and House of Representatives not later than Apr. 1, 1989, a report on implementation, operation, and results of the pilot program.

§ 1710A. Required nursing home care

(a) The Secretary (subject to section 1710(a)(4) of this title) shall provide nursing home care which the Secretary determines is needed (1) to any veteran in need of such care for a service-connected disability, and (2) to any veteran who is in need of such care and who has a service-connected disability rated at 70 percent or more.

(b)(1) The Secretary shall ensure that a veteran described in subsection (a) who continues to need nursing home care is not, after placement in a Department nursing home, trans-