

(o) DEFINITIONS.—In this section:

(1) The terms “caregiver” and “family caregiver” have the meanings given those terms in section 1720G of this title.

(2) The term “family caregiver program” means the program of comprehensive assistance for family caregivers under section 1720G of this title.

(3) The term “Veterans Crisis Line” means the toll-free hotline for veterans established under section 1720F of this title.

(Added Pub. L. 118–210, title I, § 122, Jan. 2, 2025, 138 Stat. 2724.)

§ 1720L. Home- and community-based services: programs

(a) IN GENERAL.—In furnishing noninstitutional alternatives to nursing home care pursuant to the authority of section 1720C of this title (or any other authority under this chapter or other provision of law administered by the Secretary of Veterans Affairs), the Secretary shall carry out each of the programs specified in this section in accordance with such relevant authorities except as otherwise provided in this section.

(b) VETERAN-DIRECTED CARE PROGRAM.—(1) The Secretary of Veterans Affairs, in collaboration with the Secretary of Health and Human Services, shall carry out a program to be known as the “Veteran-Directed Care program”. Under such program, the Secretary of Veterans Affairs may enter into agreements with the providers described in paragraph (2) to provide to eligible veterans funds, to the extent practicable, to obtain such in-home care services and related items that support clinical need and improve quality of life, as may be determined appropriate by the Secretary of Veterans Affairs and selected by the veteran, including through the veteran hiring individuals to provide such services and items or directly purchasing such services and items.

(2) The providers described in this paragraph are the following:

(A) An Aging and Disability Resource Center, an area agency on aging, or a State agency.

(B) A center for independent living.

(C) An Indian tribe or tribal organization receiving assistance under title VI of the Older Americans Act of 1965 (42 U.S.C. 3057 et seq.).

(D) Any other entity that the Secretary, in consultation with the Secretary of Health and Human Services, determines appropriate.

(3) In carrying out the Veteran-Directed Care program, the Secretary of Veterans Affairs shall—

(A) administer such program through each medical center of the Department of Veterans Affairs;

(B) seek to ensure the availability of such program in American Samoa, Guam, the Commonwealth of the Northern Mariana Islands, the Commonwealth of Puerto Rico, the Virgin Islands of the United States, and any other territory or possession of the United States, to the extent practicable; and

(C) seek to ensure the availability of such program for eligible veterans who are Native

American veterans receiving care and services furnished by the Indian Health Service, a tribal health program, an Urban Indian organization, or (in the case of a Native Hawaiian veteran) a Native Hawaiian health care system, to the extent practicable.

(4) If a veteran participating in the Veteran-Directed Care program is hospitalized, the veteran may continue to use funds under the program during a period of hospitalization in the same manner that the veteran would be authorized to use such funds under the program if the veteran were not hospitalized.

(c) HOMEMAKER AND HOME HEALTH AIDE PROGRAM.—(1) The Secretary shall carry out a program to be known as the “Homemaker and Home Health Aide program” under which the Secretary may enter into agreements with home health agencies to provide to eligible veterans such home health aide services as may be determined appropriate by the Secretary.

(2) In carrying out the Homemaker and Home Health Aide program, the Secretary shall—

(A) administer such program in the locations specified in subparagraph (A) of subsection (b)(3);

(B) seek to ensure the availability of such program in the locations specified in subparagraph (B) of subsection (b)(3); and

(C) seek to ensure the availability of such program for the veteran populations specified in subparagraph (C) of subsection (b)(3).

(d) HOME-BASED PRIMARY CARE PROGRAM.—The Secretary shall carry out a program to be known as the “Home-Based Primary Care program” under which the Secretary may furnish to eligible veterans in-home health care, the provision of which is overseen by a provider of the Department.

(e) PURCHASED SKILLED HOME CARE PROGRAM.—The Secretary shall carry out a program to be known as the “Purchased Skilled Home Care program” under which the Secretary may furnish to eligible veterans such in-home care services as may be determined appropriate and selected by the Secretary for the veteran.

(f) CAREGIVER SUPPORT.—(1) With respect to a resident eligible caregiver of a veteran participating in a program under this section, the Secretary shall—

(A) if the veteran meets the requirements of a covered veteran under section 1720G(b) of this title, provide to such caregiver the option of enrolling in the program of general caregiver support services under such section;

(B) provide to such caregiver covered respite care of not less than 30 days annually; and

(C) conduct on an annual basis (and, to the extent practicable, in connection with in-person services provided under the program in which the veteran is participating), a wellness contact of such caregiver.

(2) Covered respite care provided to a resident eligible caregiver of a veteran under paragraph (1) may exceed 30 days annually if such extension is requested by the resident eligible caregiver or veteran and determined medically appropriate by the Secretary.

(g) RULE OF CONSTRUCTION.—Nothing in this section shall be construed to limit the authority

of the Secretary to carry out programs providing home- and community-based services under any other provision of law.

(h) DEFINITIONS.—In this section:

(1) The terms “Aging and Disability Resource Center”, “area agency on aging”, and “State agency” have the meanings given those terms in section 102 of the Older Americans Act of 1965 (42 U.S.C. 3002).

(2) The terms “caregiver” and “family caregiver”, with respect to a veteran, have the meanings given those terms, respectively, under subsection (e)¹ of section 1720G of this title with respect to an eligible veteran under subsection (a) of such section or a covered veteran under subsection (b) of such section, as the case may be.

(3) The term “center for independent living” has the meaning given that term in section 702 of the Rehabilitation Act of 1973 (29 U.S.C. 796a).

(4) The term “covered respite care” has the meaning given such term in section 1720G(d) of this title.

(5) The term “eligible veteran” means any veteran—

(A) for whom the Secretary determines participation in a specific program under this section is medically necessary to promote, preserve, or restore the health of the veteran; and

(B) who absent such participation would be at increased risk for hospitalization, placement in a nursing home, or emergency room care.

(6) The term “home health aide” means an individual employed by a home health agency to provide in-home care services.

(7) The term “in-home care service” means any service, including a personal care service, provided to enable the recipient of such service to live at home.

(8) The terms “Indian tribe” and “tribal organization” have the meanings given those terms in section 4 of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 5304).

(9) The terms “Native American” and “Native American veteran” have the meanings given those terms in section 3765 of this title.

(10) The terms “Native Hawaiian” and “Native Hawaiian health care system” have the meanings given those terms in section 12 of the Native Hawaiian Health Care Improvement Act (42 U.S.C. 11711).

(11) The terms “tribal health programs” and “Urban Indian organizations” have the meanings given those terms in section 4 of the Indian Health Care Improvement Act (25 U.S.C. 1603).

(12) The term “resident eligible caregiver” means an individual who—

(A) is a caregiver, or a family caregiver, of a veteran and resides with that veteran; and

(B) has not entered into a contract, agreement, or other arrangement for such individual to act as a caregiver for that veteran unless such individual is a family member of

the veteran or is furnishing caregiver services through a medical foster home.

(Added Pub. L. 118-210, title I, §123(a), Jan. 2, 2025, 138 Stat. 2726.)

Statutory Notes and Related Subsidiaries

DEADLINE FOR IMPROVED ADMINISTRATION

Pub. L. 118-210, title I, §123(b), Jan. 2, 2025, 138 Stat. 2729, provided that: “The Secretary of Veterans Affairs shall ensure that the Veteran-Directed Care program and the Homemaker and Home Health Aide program are administered through each medical center of the Department of Veterans Affairs in accordance with section 1720L of title 38, United States Code (as added by subsection (a)), by not later than two years after the date of the enactment of this Act [Jan. 2, 2025].”

[For definitions of “Veteran-Directed Care program” and “Homemaker and Home Health Aide program” as used in section 123(b) of Pub. L. 118-210, set out above, see section 133 of Pub. L. 118-210, set out below.]

ADMINISTRATION OF VETERAN-DIRECTED CARE PROGRAM

Pub. L. 118-210, title I, §123(c), Jan. 2, 2025, 138 Stat. 2729, provided that:

“(1) PROCEDURES.—

“(A) The Secretary [probably means the Secretary of Veterans Affairs] shall establish procedures to—

“(i) identify the staffing needs for the Veteran-Directed Care program of the Department of Veterans Affairs under such section [section 1720L of this title] (as added by subsection (a)); and

“(ii) define the roles and responsibilities for personnel of the Department responsible for the administration of such program, including such personnel employed at the national, Veterans Integrated Service Network, or medical facility level.

“(B) The responsibilities described in clause (ii) of subparagraph (A) shall include responsibilities for engagement with—

“(i) veterans participating in such program;

“(ii) veterans interested in participating in such program; and

“(iii) providers described in section 1720L(b)(2) [of this title] (as added by subsection (a)).

“(2) STAFFING MODEL; REPORT.—Not later than two years after enactment of this Act [Jan. 2, 2025], the Secretary of Veterans Affairs shall—

“(A) establish a staffing model for the administration of such program at each medical facility of the Department of Veterans Affairs; and

“(B) submit to the Committees on Veterans' Affairs of the House of Representatives and the Senate a report containing the following:

“(i) A description of—

“(I) the staffing model described in subparagraph (A); and

“(II) the rationale for such staffing model.

“(ii) An identification of the ratio of staff required to administer such program to the number of veterans served by such program, disaggregated by each medical facility of the Department of Veterans Affairs.

“(iii) A description of budgetary resources or other support, if any, required to accommodate an increase in staffing at medical facilities of the Department of Veterans Affairs pursuant to the requirements of the staffing model described in subparagraph (A).

“(iv) Such other matters as the Secretary of Veterans Affairs determines appropriate.”

[For definition of “Veteran-Directed Care program” as used in section 123(c) of Pub. L. 118-210, set out above, see section 133 of Pub. L. 118-210, set out below.]

IMPROVEMENTS RELATING TO HOMEMAKER AND HOME HEALTH AIDE PROGRAM

Pub. L. 118-210, title I, §126, Jan. 2, 2025, 138 Stat. 2733, provided that:

¹ So in original. Probably should be “subsection (d)”.

“(a) PILOT PROGRAM FOR COMMUNITIES WITH SHORTAGE OF HOME HEALTH AIDES.—

“(1) PROGRAM.—Beginning not later than 18 months after the date of the enactment of this Act [Jan. 2, 2025], the Secretary [probably means the Secretary of Veterans Affairs] shall carry out a three-year pilot program under which the Secretary shall provide homemaker and home health aide services to veterans who reside in communities with a shortage of home health aides.

“(2) LOCATIONS.—The Secretary shall select not fewer than five geographic locations in which the Secretary determines there is a shortage of home health aides at which to carry out the pilot program under paragraph (1).

“(3) NURSING ASSISTANTS.—

“(A) IN GENERAL.—In carrying out the pilot program under paragraph (1), the Secretary may hire nursing assistants as new employees of the Department of Veterans Affairs, or reassign nursing assistants who are existing employees of the Department, to provide to veterans in-home care services (including basic tasks authorized by the State certification of the nursing assistant) under the pilot program, in lieu of or in addition to the provision of such services through non-Department home health aides.

“(B) RELATIONSHIP TO HOME-BASED PRIMARY CARE PROGRAM.—Nursing assistants hired or reassigned under subparagraph (A) may provide services to a veteran under the pilot program under paragraph (1) while serving as part of a health care team for the veteran under the Home-Based Primary Care program.

“(4) REPORT TO CONGRESS.—Not later than one year before the date of the termination of the pilot program under paragraph (1), the Secretary shall submit to the Committees on Veterans' Affairs of the House of Representatives and the Senate a report that includes—

“(A) a statement of the results of such pilot program; and

“(B) an assessment of the feasibility and advisability of—

“(i) extending such pilot program; or

“(ii) making such pilot program a permanent program of the Department of Veterans Affairs.

“(b) REPORT ON USE OF FUNDS.—Not later than one year after the date of the enactment of this Act, the Secretary of Veterans Affairs shall submit to the Committees on Veterans' Affairs of the House of Representatives and the Senate a report containing, with respect to the period beginning in fiscal year 2012 and ending in fiscal year 2024, the following:

“(1) An identification of the amount of funds that were included in a budget of the Department of Veterans Affairs during such period for the provision of in-home care to veterans under the Homemaker and Home Health Aide program but were not expended for such provision, disaggregated by [the] medical center of the Department for which such unexpended funds were budgeted (if such disaggregation is possible).

“(2) To the extent practicable, an identification of the number of veterans for whom, during such period, the hours during which a home health aide was authorized to provide services to the veteran under the Homemaker and Home Health Aide program were reduced for a reason other than a change in the health care needs of the veteran, and a detailed description of the reasons why any such reductions may have occurred.

“(c) UPDATED GUIDANCE ON PROGRAM.—Not later than one year after the date of the enactment of this Act, the Secretary shall issue updated guidance for the Homemaker and Home Health Aide program. Such updated guidance shall include the following:

“(1) A process for the transition of veterans from the Homemaker and Home Health Aide program to other covered programs.

“(2) A requirement for the directors of the medical facilities of the Department to complete such process

whenever a veteran with care needs has been denied services from home health agencies under the Homemaker and Home Health Aide program as a result of the clinical needs or behavioral issues of the veteran.”

[For definitions of “home health aide”, “Homemaker and Home Health Aide program”, and “Home-Based Primary Care program” as used in section 126 of Pub. L. 118-210, set out above, see section 133 of Pub. L. 118-210, set out below.]

REVIEWS AND OTHER IMPROVEMENTS RELATING TO HOME- AND COMMUNITY-BASED SERVICES

Pub. L. 118-210, title I, §130, Jan. 2, 2025, 138 Stat. 2738, provided that:

“(a) OFFICE OF GERIATRIC AND EXTENDED CARE.—

“(1) REVIEW OF PROGRAMS.—The Under Secretary for Health of the Department of Veterans Affairs shall conduct a review of each program administered through the Office of Geriatric and Extended Care of the Department and the Caregiver Support Program Office of the Department, or any successor offices, to—

“(A) eliminate service gaps at the medical center level; and

“(B) ensure—

“(i) the clinical needs of veterans are met;

“(ii) consistency in program management;

“(iii) the availability of, and the access by veterans to, home- and community-based services, including for veterans living in rural areas; and

“(iv) proper coordination between covered programs.

“(2) ASSESSMENT OF STAFFING NEEDS.—The Secretary of Veterans Affairs shall conduct an assessment of the staffing needs of the Office of Geriatric and Extended Care of the Department and the Caregiver Support Program Office of the Department, or any successor offices.

“(3) GOALS FOR GEOGRAPHIC ALIGNMENT OF CARE.—

“(A) ESTABLISHMENT OF GOALS.—The Director of the Office of Geriatric and Extended Care, or successor office, shall establish quantitative goals to enable aging or disabled veterans who are not located near medical centers of the Department to access extended care services (including by improving access to home- and community-based services for such veterans).

“(B) IMPLEMENTATION TIMELINE.—Each goal established under subparagraph (A) shall include a timeline for the implementation of the goal at each medical center of the Department.

“(4) GOALS FOR IN-HOME SPECIALTY CARE.—The Director of the Office of Geriatric and Extended Care, or successor office, shall establish quantitative goals to address the specialty care needs of veterans through in-home care, including by ensuring the education of home health aides and caregivers of veterans in the following areas:

“(A) Dementia care.

“(B) Care for spinal cord injuries and diseases.

“(C) Ventilator care.

“(D) Other specialty [sic] care areas as determined by the Secretary.

“(5) INPUT ON GOALS.—To the extent practicable, the head of the Caregiver Support Program Office, or successor office, shall provide to the Director of the Office of Geriatric and Extended Care, or successor office, input with respect to the establishment of the goals under paragraphs (3) and (4).

“(6) REPORT TO CONGRESS.—Not later than one year after the date of the enactment of this Act [Jan. 2, 2025], the Secretary shall submit to the Committees on Veterans' Affairs of the House of Representatives and the Senate a report containing the findings of the review under paragraph (1), the results of the assessment under paragraph (2), and the goals established under paragraphs (3) and (4).

“(b) REVIEW OF INCENTIVES AND EFFORTS RELATING TO HOME- AND COMMUNITY-BASED SERVICES.—

“(1) REVIEW.—The Secretary of Veterans Affairs shall conduct a review of the following:

“(A) The financial and organizational incentives or disincentives for the directors of medical centers of the Department to establish or expand covered programs at such medical centers.

“(B) Any incentives or disincentives for such directors to provide to veterans home- and community-based services in lieu of institutional care.

“(C) The efforts taken by the Secretary to enhance spending of the Department for extended care by balancing spending between institutional care and home- and community-based services consistent with the demand for such services.

“(D) The plan of the Under Secretary for Health of the Department to accelerate efforts to enhance spending as specified in subparagraph (C), to match the progress of similar efforts taken by the Administrator of the Centers for Medicare & Medicaid Services with respect to spending of the Centers for Medicare & Medicaid Services for extended care.

“(2) REPORT TO CONGRESS.—Not later than one year after the date of the enactment of this Act, the Secretary shall submit to the Committees on Veterans' Affairs of the House of Representatives and the Senate a report on the findings of the review under paragraph (1).

“(c) REVIEW OF RESPITE CARE SERVICES.—Not later than two years after the date of the enactment of this Act, the Secretary of Veterans Affairs shall conduct a review of the use, availability, cost, and effectiveness, of the respite care services furnished by the Secretary under chapter 17 of title 38, United States Code, including—

“(1) the frequency at which the Department of Veterans Affairs is unable to meet demand for such services;

“(2) a detailed description of—

“(A) the reasons the Department of Veterans Affairs is unable to meet the demand for such services; and

“(B) any actions, or planned actions, of the Secretary of Veterans Affairs to ensure such demand is met.

“(d) COLLABORATION TO IMPROVE HOME- AND COMMUNITY-BASED SERVICES.—

“(1) RECOMMENDATIONS.—

“(A) DEVELOPMENT.—The Secretary of Veterans Affairs shall develop recommendations as follows:

“(i) With respect to home- and community-based services for veterans, the Secretary of Veterans Affairs shall develop recommendations regarding new services (in addition to those furnished as of the date of enactment of this Act) in collaboration with the Secretary of Health and Human Services.

“(ii) With respect to the national shortage of home health aides, the Secretary of Veterans Affairs shall develop recommendations regarding methods to address such shortage in collaboration with the Secretary of Health and Human Services and the Secretary of Labor.

“(B) SUBMISSION TO CONGRESS.—The Secretary of Veterans Affairs shall submit to the Committees on Veterans' Affairs of the House of Representatives and the Senate a report containing the recommendations developed under subparagraph (A) and an identification of any changes in existing law or new statutory authority necessary to implement the recommendations, as determined by the Secretary.

“(C) CONSULTATION WITH SECRETARY OF LABOR.—In carrying out this paragraph, the Secretary of Veterans Affairs shall consult with the Secretary of Labor.

“(2) FEEDBACK AND RECOMMENDATIONS ON CAREGIVER SUPPORT.—

“(A) FEEDBACK AND RECOMMENDATIONS.—The Secretary of Veterans Affairs shall solicit from the entities described in subparagraph (B) feedback and

recommendations regarding opportunities for the Secretary to enhance home- and community-based services for veterans and the caregivers of veterans, including through the potential provision by the entity of care and respite services to veterans and caregivers who may not be eligible for any program under section 1720G of title 38, United States Code, or section 1720L of such title (as added by section 123), but have a need for assistance.

“(B) COVERED ENTITIES.—The entities described in this subparagraph are veterans service organizations and nonprofit organizations with a focus on caregiver support or long term care (as determined by the Secretary).

“(3) COLLABORATION FOR CERTAIN VETERANS.—The Secretary of Veterans Affairs shall collaborate with the Director of the Indian Health Service and representatives from tribal health programs and Urban Indian organizations to ensure the availability of home- and community-based services for—

“(A) Native American veterans, including Native American veterans receiving health care and medical services under multiple health care systems; and

“(B) Native Hawaiian veterans, including Native Hawaiian veterans receiving health care and medical services under the Native Hawaiian health care system.”

[For definitions of “home- and community-based services”, “covered programs”, “home health aides”, “caregivers”, “veterans service organizations”, “tribal health programs”, “Urban Indian organizations”, and “Native American veterans” as used in section 130 of Pub. L. 118-210, set out above, see section 133 of Pub. L. 118-210, set out below.]

DEVELOPMENT OF CENTRALIZED WEBSITE FOR PROGRAM INFORMATION

Pub. L. 118-210, title I, § 132, Jan. 2, 2025, 138 Stat. 2742, provided that:

“(a) CENTRALIZED WEBSITE.—The Secretary [probably means the Secretary of Veterans Affairs] shall develop and maintain a centralized and publically accessible internet website of the Department [probably means the Department of Veterans Affairs] as a clearinghouse for information and resources relating to covered programs.

“(b) CONTENTS.—The website under subsection (a) shall contain the following:

“(1) A description of each covered program.

“(2) An informational assessment tool that—

“(A) explains the administrative eligibility, if applicable, of a veteran, or a caregiver of a veteran, for any covered program; and

“(B) provides information, as a result of such explanation, on any covered program for which the veteran or caregiver (as the case may be) may be eligible.

“(3) A list of required procedures for the directors of the medical facilities of the Department to follow in determining the eligibility and suitability of veterans for participation in a covered program, including procedures applicable to instances in which the resource constraints of a facility (or of a community in which a facility is located) may result in the inability to address the health needs of a veteran under a covered program in a timely manner.

“(c) UPDATES.—The Secretary shall ensure the website under subsection (a) is updated on a periodic basis.”

[For definitions of “covered program” and “caregiver” as used in section 132 of Pub. L. 118-210, set out above, see section 133 of Pub. L. 118-210, set out below.]

DEFINITIONS

Pub. L. 118-210, title I, § 133, Jan. 2, 2025, 138 Stat. 2742, provided that:

“In this subtitle [subtitle B (§§120-133) of title I of Pub. L. 118-210, enacting sections 1720K and 1720L of

this title, amending sections 1720C and 1720G of this title, and enacting provisions set out as notes under this section and section 1710B, 1720C, 1720G, 1720K, and 1741 of this title]:

“(1) The terms ‘caregiver’ and ‘family caregiver’ have the meanings given those terms under section 1720L(h) of title 38, United States Code (as added by section 123).

“(2) The term ‘covered program’—

“(A) means any program of the Department of Veterans Affairs for home- and community-based services; and

“(B) includes the programs specified in section 1720L of title 38, United States Code (as added by section 123).

“(3) The term ‘home- and community-based services’—

“(A) means the services referred to in section 1701(6)(E) of title 38, United States Code; and

“(B) includes services furnished under a program specified in section 1720L of such title (as added by section 123).

“(4) The terms ‘Home-Based Primary Care program’, ‘Homemaker and Home Health Aide program’, and ‘Veteran-Directed Care program’ mean the programs of the Department of Veterans Affairs specified in subsection (d), (c), and (b) of such section 1720L, respectively.

“(5) The terms ‘home health aide’, ‘Native American’, ‘Native American veteran’, ‘tribal health programs’, and ‘Urban Indian organizations’ have the meanings given those terms in subsection (h) of such section 1720L.

“(6) The term ‘veterans service organization’ means any organization recognized by the Secretary under section 5902 of such title.”

SUBCHAPTER III—MISCELLANEOUS PROVISIONS RELATING TO HOSPITAL AND NURSING HOME CARE AND MEDICAL TREATMENT OF VETERANS

Editorial Notes

AMENDMENTS

1976—Pub. L. 94-581, title II, §202(i), Oct. 21, 1976, 90 Stat. 2856, inserted “AND NURSING HOME” in subchapter heading.

§ 1721. Power to make rules and regulations

Rules and regulations prescribed under section 501(a) of this title shall include rules and regulations to promote good conduct on the part of persons who are receiving hospital, nursing home, and domiciliary care and medical services in Department facilities. The Secretary may prescribe in rules and regulations under such section limitations in connection with the furnishing of such care and services during a period of national emergency (other than a period of war or an emergency described in section 811A of this title).

(Pub. L. 85-857, Sept. 2, 1958, 72 Stat. 1143, §621; Pub. L. 94-581, title II, §§202(j), 210(a)(8), Oct. 21, 1976, 90 Stat. 2856, 2863; Pub. L. 100-322, title I, §133, May 20, 1988, 102 Stat. 507; Pub. L. 102-40, title IV, §402(d)(1), May 7, 1991, 105 Stat. 239; renumbered §1721 and amended Pub. L. 102-83, §§2(c)(1), 4(a)(3), (4), (b)(1), (2)(E), 5(a), Aug. 6, 1991, 105 Stat. 402, 404-406.)

Editorial Notes

PRIOR PROVISIONS

Prior section 1721 was renumbered section 3521 of this title.

AMENDMENTS

1991—Pub. L. 102-83, §5(a), renumbered section 621 of this title as this section.

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”.

Pub. L. 102-83, §2(c)(1), substituted “501(a)” for “210(c)(1)”.

Pub. L. 102-40 substituted “8111A” for “5011A”.

1988—Pub. L. 100-322 amended section generally. Prior to amendment, section read as follows: “The Administrator shall prescribe—

“(1) such rules and procedure governing the furnishing of hospital, nursing home, and domiciliary care as the Administrator may deem proper and necessary;

“(2) limitations in connection with the furnishing of hospital, nursing home, and domiciliary care; and

“(3) such rules and regulations as the Administrator deems necessary in order to promote good conduct on the part of persons who are receiving hospital, nursing home, or domiciliary care in Veterans’ Administration facilities.”

1976—Cl. (1). Pub. L. 94-581, §§202(j), 210(a)(8), substituted “hospital, nursing home, and domiciliary care as the Administrator may deem” for “hospital and domiciliary care as he may deem”.

Cl. (2). Pub. L. 94-581, §202(j), substituted “hospital, nursing home, and domiciliary care” for “hospital and domiciliary care”.

Cl. (3). Pub. L. 94-581, §§202(j), 210(a)(8), substituted “as the Administrator deems” for “as he deems” and “hospital, nursing home, or domiciliary care” for “hospital or domiciliary care”.

Statutory Notes and Related Subsidiaries

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.

§ 1722. Determination of inability to defray necessary expenses; income thresholds

(a) For the purposes of section 1710(a)(2)(G) of this title, a veteran shall be considered to be unable to defray the expenses of necessary care if—

(1) the veteran is eligible to receive medical assistance under a State plan approved under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.);

(2) the veteran is in receipt of pension under section 1521 of this title; or

(3) the veteran’s attributable income is not greater than the amount set forth in subsection (b).

(b)(1) For purposes of subsection (a)(3), the income threshold for the calendar year beginning on January 1, 1990, is—

(A) \$17,240 in the case of a veteran with no dependents; and

(B) \$20,688 in the case of a veteran with one dependent, plus \$1,150 for each additional dependent.

(2) For a calendar year beginning after December 31, 1990, the amounts in effect for purposes of this subsection shall be the amounts in effect for the preceding calendar year as adjusted under subsection (c) of this section.

(c) Effective on January 1 of each year, the amounts in effect under subsection (b) of this section shall be increased by the percentage by which the maximum rates of pension were in-