AN ACT

To amend title 38, United States Code, to provide a deadline of 180 days for the filing of claims for payment for emergency treatment furnished to veterans, and for other purposes.

Be it enacted by the Senate and House of Representa-
tives of the United States of America in Congress assembled,
SECTION 1. SHORT TITLE.

This Act may be cited as the “Veterans’ Emergency Care Claims Parity Act”.

SEC. 2. CLAIMS FOR PAYMENT FROM DEPARTMENT OF VETERANS AFFAIRS FOR EMERGENCY TREATMENT FURNISHED TO VETERANS.

(a) Treatment for Non-Service-Connected Disabilities.—

(1) In general.—Section 1725 of title 38, United States Code, is amended—

(A) by redesignating subsection (f) as subsection (h); and

(B) by inserting after subsection (e) the following new subsections (f) and (g):

“(f) Submittal of Claims for Direct Payment.—An individual or entity seeking payment under subsection (a)(2) for treatment provided to a veteran in lieu of reimbursement to the veteran shall submit a claim for such payment not later than 180 days after the latest date on which such treatment was provided.

“(g) Hold Harmless.—No veteran described in subsection (b) may be held liable for payment for emergency treatment described in such subsection if—

“(1) a claim for direct payment was submitted by an individual or entity under subsection (f); and
“(2) such claim was submitted after the deadline established by such subsection due to—

“(A) an administrative error made by the individual or entity, such as submission of the claim to the wrong Federal agency, under the wrong reimbursement authority (such as section 1728 of this title), or submission of the claim after the deadline; or

“(B) an administrative error made by the Department, such as misplacement of a paper claim or deletion of an electronic claim.”.

(b) TREATMENT FOR AND IN CONNECTION WITH SERVICE-CONNECTED DISABILITIES.—Section 1728 of such title is amended—

(1) by redesignating subsection (c) as subsection (d); and

(2) by inserting after subsection (b) the following new subsection (c):

“(c) No veteran described in subsection (a) may be held liable for payment for emergency treatment described in such subsection if—

“(1) a claim for direct payment was submitted by an individual or entity under subsection (b)(2); and
“(2) such claim was submitted after a deadline established by the Secretary for purposes of this section due to—

“(A) an administrative error made by the individual or entity, such as submission of the claim to the wrong Federal agency or submission of the claim after the deadline; or

“(B) an administrative error made by the Department, such as misplacement of a paper claim or deletion of an electronic claim.”.

(c) CONFORMING AMENDMENTS.—Such title is amended—

(1) in section 1705A(d), by striking “section 1725(f)” and inserting “section 1725(h)”;

(2) in section 1725(b)(3)(B), by striking “subsection (f)(2)(B) or (f)(2)(C)” and inserting “subsection (h)(2)(B) or (h)(2)(C)”;

(3) in section 1728(d), as redesignated by subsection (b)(4), by striking “section 1725(f)(1)” and inserting “section 1725(h)(1)”;

(4) in section 1781(a)(4), by striking “section 1725(f)” and inserting “section 1725(h)”; and

(5) in section 1787(b)(3), by striking “section 1725(f)” and inserting “section 1725(h)”. 
SEC. 3. PUBLICATION OF CLARIFYING INFORMATION FOR NON-DEPARTMENT OF VETERANS AFFAIRS PROVIDERS.

(a) IN GENERAL.—The Secretary of Veterans Affairs shall publish on one or more publicly available internet websites of the Department of Veterans Affairs, including the main internet website regarding emergency care authorization for non-Department providers, the following information:

(1) A summary table or similar resource that provides a list of all authorities of the Department to authorize emergency care from non-Department providers and, for each such authority, the corresponding deadline for submission of claims.

(2) An illustrated summary of steps, such as a process map, with a checklist for the submission of clean claims that non-Department providers can follow to assure compliance with the claims-filing process of the Department.

(3) Contact information for the appropriate office or service line of the Department to address process questions from non-Department providers.

(b) PERIODIC REVIEW.—Not less frequently than once every 180 days, the Secretary shall review the information published under subsection (a) to ensure that such information is current.
(c) CLEAN CLAIMS DEFINED.—In this section, the term “clean claims” means clean electronic claims and clean paper claims (as those terms are defined in section 1703D(i) of title 38, United States Code).

Passed the Senate April 7, 2022.

Attest:

Secretary.
117TH CONGRESS
2D SESSION
S. 1875
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