H.R. 3219

Veterans' Insurance and Health Care Improvements Act of 2009

Title: To amend title 38, United States Code, to make certain improvements in the laws administered by the Secretary of Veterans Affairs, relating to insurance and health care, and for other purposes.

Mr. Filner of California introduced H.R. 3219 on July 15, 2009.

H.R. 3219 would:

- 1. Allow the Servicemembers' Group Life Insurance (SGLI) coverage to continue for two years after separation if the service member is totally disabled. Permanently sunset the current provision that would reduce the period of coverage from two years to 18 months for totally disabled service members released on or after October 1, 2001 and apply to those service members released on or after June 15, 2005.
- 2. Allow veterans insured under the Veterans' Group Life Insurance program (VGLI), no more than once in each five-year period, to increase such coverage amount if: (1) the veteran is under 60 years of age; (2) the increase is not more than \$25,000; and (3) the total amount of such insurance does not exceed \$400,000 (the limit authorized for a veteran under the Servicemembers' Group Life Insurance program).
- 3. Amend the provision that allows a service member with SGLI or a veteran with VGLI who is terminally ill to get half of their SGLI or VGLI coverage while they are alive (38 U.S.C. 1980) and use in any way they see fit, such as for paying medical bills or to improve the quality of their life, by eliminating the discount rate that VA applies to this payment.
- 4. Assign a priority status for Medal of Honor recipients equal to that of former prisoners of war or Purple Heart recipients with respect to the provision of veterans' hospital care and medical services provided through the VA.
- 5. Establish the position of Director of Physician Assistant Services within the Veterans Health Administration (VHA) of the VA, who reports to the Under Secretary for Health on all matters relating to the education and training, employment, appropriate utilization, and optimal participation of physician assistants within VHA programs and initiatives.
- 6. Prohibit the collection by the Department of Veterans Affairs (VA) of copayments or other fees for medical services or hospital or nursing home care for veterans who are catastrophically disabled from non-service connected causes and who have income above the means tested levels.
- 7. Establish a "Committee on Care of Veterans with Traumatic Brain Injury" within the VHA. Committee members would consist of VA employees with expertise in traumatic brain injury (TBI) who would be appointed by the Under Secretary for Health. The Committee would evaluate the care, identify system-wide problems, identify specific facilities in need of improvement, and identify model programs for the successful treatment and rehabilitation of veterans with TBI, as well as provide recommendations to the Under Secretary for Health on improving programs of care for TBI.

- 8. Provide permanent authorization for the VA to offer hospital care, medical services, and nursing home care to Vietnam-era herbicide exposed veterans and Gulf War era veterans who have insufficient medical evidence to establish a service-connected disability by placing them in Priority Group 6. In addition, clarifies that the enhanced treatment authority is to be targeted to veterans of Persian Gulf War I who served on active duty between August 2, 1990 and November 11, 1998, since the VA already has the enhanced treatment authority for veterans who served after November 11, 1998, and have insufficient medical evidence to conclude that such condition is attributable to their service.
- 9. Clarify that the veterans eligible for participation in a VA pilot program, authorized under Section 403 of Public Law 110-387, allowing for enhanced VA authority to contract for health care services are defined by driving distance, in minutes, from the nearest VA medical center providing specified services.
- 10. Establish a Qualified World War II Veterans Equity Compensation Fund, subject to available appropriations over a 5-year period, to make payments to eligible individuals who received belated recognition as veterans pursuant to section 1401 of the GI Bill Improvement Act of 1977 (38 U.S.C. 106 note).

Effective Date: Date of enactment.

Legislative History:

July 15, 2009: Ordered reported by the Committee on Veterans' Affairs.

July 23, 2009: Reported, H. Rept. 111-223.

July 27, 2009: Passed the House under suspension by voice vote

Includes the language of H.R. 2774; H.R. 2379; H.R. 2968, as amended; H.R. 1197; H.R. 1302; H.R. 1546; H.R. 1335, as amended; H.R. 2270; and, H.R. 2926, as amended.