

Title XIX of the Act is classified generally to subchapter XIX (§1396 et seq.) of chapter 7 of Title 42, The Public Health and Welfare. For complete classification of this Act to the Code, see section 1305 of Title 42 and Tables.

AMENDMENTS

2010—Subsec. (b)(3)(C). Pub. L. 111-137, §1(a)(1), struck out “or in part” after “in whole”.

Subsec. (c)(4). Pub. L. 111-137, §1(b), added par. (4).

Subsec. (f)(2)(E). Pub. L. 111-137, §1(a)(2), struck out subpar. (E) which read as follows: “A law of a State or political subdivision described in section 1729(a)(2)(B) of this title.”

2008—Subsec. (a)(1). Pub. L. 110-387, §402(a)(1), substituted “shall reimburse” for “may reimburse”.

Subsec. (f)(1)(C). Pub. L. 110-387, §402(a)(2), added subpar. (C) and struck out former subpar. (C) which read as follows: “until such time as the veteran can be transferred safely to a Department facility or other Federal facility”.

EFFECTIVE DATE OF 2010 AMENDMENT

Pub. L. 111-137, §1(c), Feb. 1, 2010, 123 Stat. 3495, provided that:

“(1) IN GENERAL.—The amendments made by subsections (a) and (b) [amending this section] shall take effect on the date of the enactment of this Act [Feb. 1, 2010], and shall apply with respect to emergency treatment furnished on or after the date of the enactment of this Act.

“(2) REIMBURSEMENT FOR TREATMENT PROVIDED BEFORE EFFECTIVE DATE.—The Secretary may provide reimbursement under section 1725 of title 38, United States Code, as amended by subsections (a) and (b), for emergency treatment furnished to a veteran before the date of the enactment of this Act [Feb. 1, 2010], if the Secretary determines that, under the circumstances applicable with respect to the veteran, it is appropriate to do so.”

EFFECTIVE DATE

Pub. L. 106-117, title I, §111(c), Nov. 30, 1999, 113 Stat. 1556, provided that: “The amendments made by this section [enacting this section and amending section 1729A of this title] shall take effect 180 days after the date of the enactment of this Act [Nov. 30, 1999].”

IMPLEMENTATION REPORTS

Pub. L. 106-117, title I, §111(d), Nov. 30, 1999, 113 Stat. 1556, provided that: “The Secretary [of Veterans Affairs] shall include with the budget justification materials submitted to Congress in support of the Department of Veterans Affairs budget for fiscal year 2002 and for fiscal year 2003 a report on the implementation of section 1725 of title 38, United States Code, as added by subsection (a). Each such report shall include information on the experience of the Department under that section and the costs incurred, and expected to be incurred, under that section.”

§ 1725A. Access to walk-in care

(a) PROCEDURES TO ENSURE ACCESS TO WALK-IN CARE.—The Secretary shall develop procedures to ensure that eligible veterans are able to access walk-in care from qualifying non-Department entities or providers.

(b) ELIGIBLE VETERANS.—For purposes of this section, an eligible veteran is any individual who—

(1) is enrolled in the health care system established under section 1705(a) of this title; and

(2) has received care under this chapter within the 24-month period preceding the furnishing of walk-in care under this section.

(c) QUALIFYING NON-DEPARTMENT ENTITIES OR PROVIDERS.—For purposes of this section, a qualifying non-Department entity or provider is a non-Department entity or provider that has entered into a contract¹ agreement, or other arrangement with the Secretary to furnish services under this section.

(d) FEDERALLY-QUALIFIED HEALTH CENTERS.—Whenever practicable, the Secretary may use a Federally-qualified health center (as defined in section 1905(l)(2)(B) of the Social Security Act (42 U.S.C. 1396d(l)(2)(B))) to carry out this section.

(e) CONTINUITY OF CARE.—The Secretary shall ensure continuity of care for those eligible veterans who receive walk-in care services under this section, including through the establishment of a mechanism to receive medical records from walk-in care providers and provide pertinent patient medical records to providers of walk-in care.

(f) COPAYMENTS.—(1)(A) The Secretary may require an eligible veteran to pay the United States a copayment for each episode of hospital care or medical services provided under this section if the eligible veteran would be required to pay a copayment under this title.

(B) An eligible veteran not required to pay a copayment under this title may access walk-in care without a copayment for the first two visits in a calendar year. For any additional visits, a copayment at an amount determined by the Secretary may be required.

(C) An eligible veteran required to pay a copayment under this title may be required to pay a regular copayment for the first two walk-in care visits in a calendar year. For any additional visits, a higher copayment at an amount determined by the Secretary may be required.

(2) After the first two episodes of care furnished to an eligible veteran under this section, the Secretary may adjust the copayment required of the veteran under this subsection based upon the priority group of enrollment of the eligible veteran, the number of episodes of care furnished to the eligible veteran during a year, and other factors the Secretary considers appropriate under this section.

(3) The amount or amounts of the copayments required under this subsection shall be prescribed by the Secretary by rule.

(4) Sections 8153(c) and 1703A(j) of this title shall not apply to this subsection.

(g) REGULATIONS.—Not later than 1 year after the date of the enactment of the Caring for Our Veterans Act of 2018, the Secretary shall promulgate regulations to carry out this section.

(h) WALK-IN CARE DEFINED.—In this section, the term “walk-in care” means non-emergent care provided by a qualifying non-Department entity or provider that furnishes episodic care and not longitudinal management of conditions and is otherwise defined through regulations the Secretary shall promulgate.

(Added Pub. L. 115-182, title I, §105(a), June 6, 2018, 132 Stat. 1412; amended Pub. L. 115-251, title II, §211(a)(7), Sept. 29, 2018, 132 Stat. 3175.)

¹ So in original. Probably should be followed by a comma.

DELAYED EFFECTIVE DATE

For delayed effective date of section, see *Effective Date* note below.

REFERENCES IN TEXT

The date of the enactment of the Caring for Our Veterans Act of 2018, referred to in subsec. (g), is the date of enactment of Pub. L. 115-182, which was approved June 6, 2018.

AMENDMENTS

2018—Subsec. (c). Pub. L. 115-251, §211(a)(7)(A), substituted “agreement, or other arrangement” for “or other agreement”.

Subsec. (f)(4). Pub. L. 115-251, §211(a)(7)(B), substituted “Sections 8153(c) and 1703A(j)” for “Section 8153(c)”.

EFFECTIVE DATE

Pub. L. 115-182, title I, §105(b), June 6, 2018, 132 Stat. 1413, provided that: “Section 1725A of title 38, United States Code, as added by subsection (a) shall take effect on the date upon which final regulations implementing such section take effect.”

§ 1726. Reimbursement for loss of personal effects by natural disaster

The Secretary shall, under regulations which the Secretary shall prescribe, reimburse veterans in Department hospitals and domiciliaries for any loss of personal effects sustained by fire, earthquake, or other natural disaster while such effects were stored in designated locations in Department hospitals or domiciliaries.

(Pub. L. 85-857, Sept. 2, 1958, 72 Stat. 1144, §627; Pub. L. 93-82, title I, §105, Aug. 2, 1973, 87 Stat. 183; Pub. L. 94-581, title II, §210(a)(12), Oct. 21, 1976, 90 Stat. 2863; renumbered §1726 and amended Pub. L. 102-83, §§4(a)(3), (4), (b)(1), (2)(E), 5(a), Aug. 6, 1991, 105 Stat. 404-406.)

PRIOR PROVISIONS

Prior section 1726, Pub. L. 85-857, Sept. 2, 1958, 72 Stat. 1197, provided for control by agencies of United States, prior to repeal by Pub. L. 89-358, §3(a)(3), Mar. 3, 1966, 80 Stat. 20. See section 3689 of this title.

AMENDMENTS

1991—Pub. L. 102-83, §5(a), renumbered section 626 of this title as this section.

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

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

1976—Pub. L. 94-581 substituted “the Administrator shall prescribe” for “he shall prescribe”.

1973—Pub. L. 93-82 substituted “natural disaster” for “fire” in section catchline and extended reimbursement provisions to earthquake and other natural disasters also.

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 Jan. 1, 1971, see section 501 of Pub. L. 93-82, set out as a note under section 1701 of this title.

§ 1727. Persons eligible under prior law

Persons who have a status which would, under the laws in effect on December 31, 1957, entitle

them to the medical services, hospital and domiciliary care, and other benefits, provided for in this chapter, but who do not meet the service requirements contained in this chapter, shall be entitled to such benefits notwithstanding failure to meet such service requirements.

(Pub. L. 85-857, Sept. 2, 1958, 72 Stat. 1144, §627; Pub. L. 94-581, title II, §202(m), Oct. 21, 1976, 90 Stat. 2856; renumbered §1727 Pub. L. 102-83, §5(a), Aug. 6, 1991, 105 Stat. 406.)

AMENDMENTS

1991—Pub. L. 102-83 renumbered section 627 of this title as this section.

1976—Pub. L. 94-581 substituted “1957” for “1958”.

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.

§ 1728. Reimbursement of certain medical expenses

(a) The Secretary shall, under such regulations as the Secretary prescribes, reimburse veterans eligible for hospital care or medical services under this chapter for the customary and usual charges of emergency treatment (including travel and incidental expenses under the terms and conditions set forth in section 111 of this title) for which such veterans have made payment, from sources other than the Department, where such emergency treatment was rendered to such veterans in need thereof for any of the following:

(1) An adjudicated service-connected disability.

(2) A non-service-connected disability associated with and held to be aggravating a service-connected disability.

(3) Any disability of a veteran if the veteran has a total disability permanent in nature from a service-connected disability.

(4) Any illness, injury, or dental condition of a veteran who—

(A) is a participant in a vocational rehabilitation program (as defined in section 3101(9) of this title); and

(B) is medically determined to have been in need of care or treatment to make possible the veteran’s entrance into a course of training, or prevent interruption of a course of training, or hasten the return to a course of training which was interrupted because of such illness, injury, or dental condition.

(b) In any case where reimbursement would be in order under subsection (a) of this section, the Secretary may, in lieu of reimbursing such veteran, make payment of the reasonable value of emergency treatment directly—

(1) to the hospital or other health facility furnishing the emergency treatment; or

(2) to the person or organization making such expenditure on behalf of such veteran.

(c) In this section, the term “emergency treatment” has the meaning given such term in section 1725(f)(1) of this title.

(Added Pub. L. 93-82, title I, §106(a), Aug. 2, 1973, 87 Stat. 183, §628; amended Pub. L. 94-581, title II, §§202(n), 210(a)(13), Oct. 21, 1976, 90 Stat. 2856,