

119TH CONGRESS
2D SESSION

H. R. 9524

To direct the Secretary of Veterans Affairs to seek to enter into a memorandum of understanding with the Secretary of Health and Human Services and to provide for coordination between the Secretaries in the administration of the Veterans Community Care Program and certain health plans under the Medicare program, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JUNE 29, 2026

Mr. MURPHY introduced the following bill; which was referred to the Committee on Veterans' Affairs, and in addition to the Committees on Ways and Means, and Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To direct the Secretary of Veterans Affairs to seek to enter into a memorandum of understanding with the Secretary of Health and Human Services and to provide for coordination between the Secretaries in the administration of the Veterans Community Care Program and certain health plans under the Medicare program, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Veterans Care and
3 Cost Coordination Act of 2026”.

4 **SEC. 2. MEMORANDUM OF UNDERSTANDING FOR RECIP-**
5 **ROCAL ACCESS TO CERTAIN HEALTH CARE**
6 **DATA BETWEEN THE SECRETARY OF VET-**
7 **ERANS AFFAIRS AND THE SECRETARY OF**
8 **HEALTH AND HUMAN SERVICES.**

9 (a) IN GENERAL.—Not later than one year after the
10 date of the enactment of this Act, the Secretary of Vet-
11 erans Affairs shall, for purposes of coordinating the costs,
12 care, and management of hospital care and medical serv-
13 ices furnished under the laws administered by the Sec-
14 retary of Veterans Affairs, seek to enter into a memo-
15 randum of understanding with the Secretary of Health
16 and Human Services with respect to reciprocal access be-
17 tween the Veterans Health Administration and the Cen-
18 ters for Medicare and Medicaid Services to data and infor-
19 mation on veterans who are concurrently enrolled in the
20 patient enrollment system under section 1705(a) of title
21 38, United States Code, and—

22 (1) the Medicare program; or

23 (2) a Medicare Advantage plan.

24 (b) AGREEMENT.—The memorandum of under-
25 standing required under subsection (a) shall include an
26 agreement through which—

1 (1) the Secretary of Veterans Affairs transmits
2 to the Secretary of Health and Human Services—

3 (A) information relating to veterans who
4 are—

5 (i) enrolled in such system for patient
6 enrollment; and

7 (ii) in receipt of hospital care or med-
8 ical services under laws administered by
9 the Secretary of Veterans Affairs; and

10 (B) such other information as the Sec-
11 retary of Veterans Affairs determines appro-
12 priate, including billing codes and diagnostic
13 codes for such hospital care or medical services;
14 and

15 (2) the Secretary of Health and Human Serv-
16 ices—

17 (A) uses information transmitted pursuant
18 to paragraph (1) to identify veterans who are
19 concurrently enrolled in such system for patient
20 enrollment and—

21 (i) the Medicare program; or

22 (ii) a Medicare Advantage plan; and

23 (B) transmits to the Secretary of Veterans
24 Affairs—

- 1 (i) a list of the veterans identified
2 pursuant to subparagraph (A); and
3 (ii) such other information as the Sec-
4 retary of Health and Human Services de-
5 termines appropriate.

6 (c) CARE COORDINATION UNDER VETERANS COMMU-
7 NITY CARE PROGRAM FOR CONCURRENTLY ENROLLED
8 VETERANS.—The Secretary shall use information trans-
9 mitted to the Secretary by the Secretary of Health and
10 Human Services under the agreement required under sub-
11 section (b) to inform utilization management under the
12 Community Care Next Generation Procurement Contract,
13 or other successor contract awarded under the Veterans
14 Community Care Program under section 1703 of title 38,
15 United States Code, to—

- 16 (1) avoid duplicative health care to such vet-
17 erans;
18 (2) avoid erroneous or duplicative payments for
19 health care furnished to such veterans; and
20 (3) inform veterans of beneficial or follow-up to
21 services furnished pursuant to the Medicare program
22 or a Medicare Advantage.

23 (d) CALCULATION OF BENCHMARK PAYMENTS.—
24 Section 1853(c)(1)(D)(iii) of the Social Security Act (42
25 U.S.C. 1395w–23(c)(1)(D)(iii)) is amended by adding at

1 the end the following new sentence: “In developing the es-
2 timate described in the preceding sentence, the Secretary
3 shall use the information transmitted to the Secretary by
4 the Secretary of Veterans Affairs pursuant to the memo-
5 randum of understanding required under the Veterans
6 Care and Cost Coordination Act of 2026.”.

7 (e) REPORT.—Not later than one year after the date
8 on which the Secretary of Veterans Affairs enters into the
9 memorandum of understanding required under subsection
10 (a), and on an biennial basis thereafter during the period
11 such memorandum is effective, the Secretary shall submit
12 to the Committees on Veterans’ Affairs of the House of
13 Representatives and the Senate a report that includes—

14 (1) a summary of the activities of the Secretary
15 carried out pursuant to such memorandum; and

16 (2) an assessment of the Secretary with respect
17 to the effectiveness of such memorandum in avoiding
18 duplicative, improper, or erroneous billings or pay-
19 ments for hospital care and medical services fur-
20 nished under the laws administered by the Sec-
21 retary.

22 (f) MEDICARE ADVANTAGE PLAN DEFINED.—In this
23 section, the term “Medicare Advantage plan” means a
24 Medicare Advantage plan under the program established

- 1 under part C of title XVIII of the Social Security Act (42
- 2 U.S.C. 1395w-21 et seq.).

