

119TH CONGRESS
1ST SESSION

S. 3303

To require the Secretary of Veterans Affairs to carry out a pilot program to establish or enhance a community integration platform for services for veterans, to require the collection from veterans of information related to social determinants of health, and for other purposes.

IN THE SENATE OF THE UNITED STATES

DECEMBER 2, 2025

Mr. SULLIVAN (for himself and Ms. HASSAN) introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

A BILL

To require the Secretary of Veterans Affairs to carry out a pilot program to establish or enhance a community integration platform for services for veterans, to require the collection from veterans of information related to social determinants of health, 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,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Leveraging Integrated
5 Networks in Communities for Veterans Act” or the
6 “LINC VA Act”.

1 **SEC. 2. PILOT PROGRAM ON ESTABLISHMENT OR EN-**
2 **HANCEMENT OF COMMUNITY INTEGRATION**
3 **PLATFORM FOR VETERANS.**

4 (a) IN GENERAL.—Beginning not later than one year
5 after the date of the enactment of this Act, the Secretary
6 of Veterans Affairs, acting through the Center for Innova-
7 tion for Care and Payment of the Department of Veterans
8 Affairs, shall carry out a pilot program under which the
9 Secretary shall establish a new, or enhance an existing,
10 interoperable community integration platform to coordi-
11 nate local support services for veterans through other gov-
12 ernmental and nongovernmental organizations (in this sec-
13 tion referred to as the “pilot program”).

14 (b) COMMUNITY INTEGRATION PLATFORM.—The
15 community integration platform established or enhanced
16 pursuant to the pilot program shall be accessible to vet-
17 erans, employees of the Department of Veterans Affairs,
18 and others participating in the pilot program as deter-
19 mined appropriate by the Secretary and shall—

20 (1) enable the coordination of services such
21 as—

22 (A) nutritional assistance;

23 (B) housing;

24 (C) health care, including preventive health
25 intervention, chronic disease management, and
26 behavioral health care;

1 (D) transportation;

2 (E) job training;

3 (F) child development or care;

4 (G) caregiving and respite care;

5 (H) disability assistance;

6 (I) suicide prevention;

7 (J) sexual assault services;

8 (K) legal aid;

9 (L) transition programs of the Department
10 of Defense; and

11 (M) other services, as determined by the
12 Secretary;

13 (2) prioritize connectivity with appropriate ex-
14 isting technology networks developed by public or
15 private organizations that comply with, as applica-
16 ble, standards adopted by the Secretary of Health
17 and Human Services under section 3004 of the Pub-
18 lic Health Service Act (42 U.S.C. 300jj-14), for the
19 purposes described in paragraph (1);

20 (3) ensure that—

21 (A) reasonable measures are taken to pro-
22 mote connectivity and interoperable exchange
23 among covered entities; and

1 (B) appropriate privacy and security pro-
2 tectations are in place, in accordance with appli-
3 cable Federal and State privacy laws;

4 (4) connect covered entities for purposes of
5 communication, service coordination and consumer
6 assistance, referral and capacity management, out-
7 come tracking and reporting, and related services;

8 (5) provide technical assistance and support
9 covered entities in connecting and participating in
10 the community integration platform;

11 (6) collect information from veterans served
12 under the pilot program regarding social deter-
13 minants of health using a standardized risk assess-
14 ment or screening tool, which shall include standard-
15 ized definitions for identifying social determinants of
16 health needs identified in the ICD–10 diagnostic
17 codes Z55 through Z63 and Z75 (as in effect on the
18 date of the enactment of this Act) that incorporate
19 measures for quantifying the relative severity of any
20 such social determinant of health need identified in
21 a veteran;

22 (7) incorporate screenings used to collect infor-
23 mation under paragraph (6) into routine care pro-
24 vided to veterans under the laws administered by the
25 Secretary; and

1 (8) be accessible via a web-based platform for
2 all veterans and via a non-web-based alternative
3 platform or process for veterans who are unable to
4 easily and reliably access the web-based platform.

5 (c) LOCATIONS.—

6 (1) IN GENERAL.—The Secretary of Veterans
7 Affairs shall carry out the pilot program at not
8 fewer than five medical facilities of the Department
9 of Veterans Affairs.

10 (2) VARIETY OF FACILITIES.—In selecting fa-
11 cilities under paragraph (1), the Secretary shall en-
12 sure the selection of a variety of different types of
13 facilities, including—

14 (A) frontier facilities;

15 (B) under-resourced facilities; and

16 (C) facilities at which there are existing ef-
17 forts to coordinate with community resources.

18 (d) COORDINATION AND INTEGRATION OF PRO-
19 GRAMS.—

20 (1) COORDINATION WITH EXISTING NET-
21 WORKS.—In carrying out the pilot program, the Sec-
22 retary of Veterans Affairs shall coordinate with ex-
23 isting community networks.

24 (2) COORDINATION AND INTEGRATION WITH
25 STATE MEDICAID PROGRAMS.—The Secretary of

1 Health and Human Services, in consultation with
2 the Secretary of Veterans Affairs, shall issue guid-
3 ance to States that includes options for State Med-
4 icaid programs to coordinate and integrate medical
5 assistance provided under a State plan or waiver
6 under title XIX of the Social Security Act (42
7 U.S.C. 1396 et seq.) with services for veterans pro-
8 vided under the pilot program, as well as a template
9 for States to use to request or modify Medicaid
10 waiver authority under section 1115 of the Social
11 Security Act (42 U.S.C. 1315) for such purpose.

12 (e) TRACKING OF REFERRALS.—

13 (1) IN GENERAL.—The Secretary of Veterans
14 Affairs shall track—

15 (A) the accuracy of referrals of veterans to
16 community networks under the pilot program;

17 (B) the response time of providers to
18 which such veterans are referred; and

19 (C) the outcome of the initial meeting by
20 a veteran and the provider to which the veteran
21 is referred.

22 (2) FORM.—The Secretary may track the infor-
23 mation required under paragraph (1) in any medium
24 determined appropriate by the Secretary.

1 (f) REPORT.—Not later than three years after
2 amounts are first appropriated to carry out the pilot pro-
3 gram, the Secretary of Veterans Affairs shall submit to
4 Congress a report indicating the social service needs of
5 veterans reflected by the use of services under the commu-
6 nity integration platform established or enhanced under
7 the pilot program, including an assessment of—

8 (1) the need for services that is being met
9 through such platform; and

10 (2) the need for services that is not being met
11 through such platform.

12 (g) COMPTROLLER GENERAL EVALUATION, REPORT,
13 AND RECOMMENDATIONS.—

14 (1) EVALUATION.—The Comptroller General of
15 the United States shall conduct an evaluation that
16 measures the overall impact of the community inte-
17 gration platform established or enhanced under the
18 pilot program with respect to—

19 (A) changes in individual and population
20 health outcomes among veterans;

21 (B) changes in access to health care or so-
22 cial services among veterans; and

23 (C) such other factors as the Comptroller
24 General considers appropriate.

25 (2) REPORT AND RECOMMENDATIONS.—

1 (A) IN GENERAL.—Not later than four
2 years after the date of the enactment of this
3 Act, the Comptroller General shall—

4 (i) submit to Congress a report on the
5 evaluation conducted under paragraph (1);

6 (ii) make such report publicly avail-
7 able; and

8 (iii) based on such evaluation, make
9 recommendations to the Secretary of Vet-
10 erans Affairs on how to improve and sus-
11 tain the community integration platform
12 established or enhanced under the pilot
13 program.

14 (B) ELEMENTS OF REPORT.—The report
15 under subparagraph (A)(i) shall include data
16 on—

17 (i) what resources under the pilot pro-
18 gram are being utilized the most;

19 (ii) what requests for services under
20 the pilot program cannot be met; and

21 (iii) the impact of the provision of
22 services under the pilot program on health
23 outcomes of veterans.

24 (h) DEFINITIONS.—In this section:

1 (1) COMMUNITY INTEGRATION PLATFORM.—
2 The term “community integration platform” means
3 an interoperable platform used to enable the coordi-
4 nation, alignment, and connection of covered entities
5 at the local level for purposes of communication,
6 service coordination, and referral management of
7 services, with respect to services specified in sub-
8 section (b)(1).

9 (2) COVERED ENTITY.—The term “covered en-
10 tity” means any—

- 11 (A) community-based organization that—
12 (i) accepts referrals from health care
13 organizations; and
14 (ii) provides services specified in sub-
15 section (b)(1).
16 (B) public or private health care provider
17 organization;
18 (C) public or private funded payor of
19 health care services, including home- or commu-
20 nity-based services;
21 (D) State, local, territorial, or Tribal
22 health and social services agency;
23 (E) State public housing authority or
24 housing finance agency;

1 (F) public health information exchange or
2 public health information network, as defined
3 by the Secretary of Veterans Affairs; or

4 (G) other similar entity, as determined by
5 the Secretary.

6 (3) STATE.—The term “State” means a State,
7 territory of the United States, or the District of Co-
8 lumbia.

9 **SEC. 3. COLLECTION OF INFORMATION FROM VETERANS**
10 **RELATED TO SOCIAL DETERMINANTS OF**
11 **HEALTH.**

12 (a) IN GENERAL.—The Secretary of Veterans Affairs
13 shall collect from veterans enrolled in the system of annual
14 patient enrollment of the Department of Veterans Affairs
15 established and operated under section 1705(a) of title 38,
16 United States Code, as part of routine screenings of such
17 veterans under the laws administered by the Secretary, in-
18 formation related to social determinants that may factor
19 into the health of such veterans.

20 (b) SOCIAL DETERMINANTS OF HEALTH.—

21 (1) IN GENERAL.—The information collected
22 under subsection (a) shall include standardized defi-
23 nitions for identifying social determinants of health
24 needs identified in the ICD–10 diagnostic codes Z55

1 through Z63 and Z75 (as in effect on the date of
2 enactment of this Act).

3 (2) INCORPORATION OF MEASURES.—Defini-
4 tions included under paragraph (1) with respect to
5 identifying social determinants of health needs shall
6 incorporate measures for quantifying the relative se-
7 verity of any such social determinant of health need
8 identified in an individual.

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