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SENATE

REPORT
117–16

LEGISLATIVE AND OVERSIGHT ACTIVITIES DURING THE 116TH CONGRESS BY THE SENATE COMMITTEE ON VETERANS' AFFAIRS

APRIL 19, 2021—Ordered to be printed

Mr. TESTER, from the Committee on Veterans' Affairs, submitted the following

R E P O R T

Pursuant to paragraph 8 of rule XXVI of the Standing Rules of the Senate, the Committee on Veterans' Affairs (hereinafter, "Committee") submits its report on legislative and oversight activities during the 116th Congress.

I. HEARINGS AND MEETINGS

A. First Session (2019)

During the First Session of the 116th Congress, the Committee held 12 hearings. At those events, the Committee heard testimony from 68 witnesses.

One hearing (May 22) focused exclusively on legislation pending before the Committee. Testimony offered at this hearing covered 17 bills.

The Committee held three business meetings, including two meetings to discharge nominations.

The Committee held five joint hearings with the House Committee on Veterans' Affairs in order to receive legislative presentations from veterans service organizations. These hearings were held on February 26, February 27, March 6, March 7, and March 12.

B. Second Session (2020)

During the Second Session of the 116th Congress, the Committee held 13 hearings. At the hearings, the Committee heard testimony from 67 witnesses.

The Committee held four business meetings, including one meeting to discharge nominations.

On January 29, 11 measures were ordered favorably reported out of the Committee; on March 12, one measure was ordered favorably

reported out of the Committee; on August 5, 12 measures were ordered favorably reported out of the Committee; on September 23, two measures were ordered reported favorably out of the Committee.

The Committee held five joint hearings with the House Committee on Veterans' Affairs in order to receive legislative presentations from veterans service organizations. These hearings were held on February 25, February 26, March 3, March 4, and March 11.

C. List of Hearings and Meetings Held in the 116th Congress

(1) Thursday, February 7, 2019

Business Meeting: Meeting to Consider the Rules of Procedure of the Veterans' Affairs Committee for the 116th Congress and a Resolution Authorizing the Expenditures of the Committee for the 116th Congress

(2) Tuesday, February 26, 2019

Joint Hearing with the House of Representatives to receive the Legislative Presentation of Disabled American Veterans

(3) Wednesday, February 27, 2019

Joint Hearing with the House of Representatives to receive the Legislative Presentation of The American Legion

(4) Wednesday, March 6, 2019

Joint Hearing with the House of Representatives to receive the Legislative Presentation of Veterans of Foreign Wars

(5) Thursday, March 7, 2019

Joint Hearing with the House of Representatives to receive the Legislative Presentation of Multiple Veterans Service Organizations (AMVETS, Paralyzed Veterans of America, Vietnam Veterans of America, Iraq and Afghanistan Veterans of America, Student Veterans of America, American Ex-Prisoners of War, and Wounded Warrior Project)

(6) Tuesday, March 12, 2019

Joint Hearing with the House of Representatives to receive the Legislative Presentation of Multiple Veterans Service Organizations (National Association of State Directors of Veterans Affairs, Fleet Reserve Association, Gold Star Wives of America, Blinded Veterans Association, Jewish War Veterans of the United States of America, Military Order of the Purple Heart, and Military Officers Association of America.

(7) Wednesday, March 13, 2019

Business Meeting: Meeting to Consider Pending Nomination

- John Lowry III, of the Illinois, to be Assistant Secretary of Labor for Veterans' Employment and Training, Department of Labor

(8) Tuesday, March 26, 2019

Hearing: Fiscal Year 2020 Budget for Veterans' Programs and Fiscal Year 2021 Advance Appropriations Request

(9) Wednesday, April 10, 2019

Hearing: VA MISSION Act: Implementing the Veterans Community Care Program

(10) Thursday, May 16, 2019

Nomination Hearing: Pending Nomination

• James M. Byrne, of Virginia, to be Deputy Secretary of Veterans Affairs

(11) Wednesday, May 22, 2019

Legislative Hearing: Pending Legislation

- S. 123, Ensuring Quality Care for Our Veterans Act
- S. 221, Department of Veterans Affairs Provider Accountability Act
- S. 318, VA Newborn Emergency Treatment Act
- S. 450, Veterans Improved Access and Care Act of 2019
- S. 514, Deborah Sampson Act
- S. 524, Department of Veterans Affairs Tribal Advisory Committee Act of 2019
- S. 711, Care and Readiness Enhancement for Reservists Act of 2019
- S. 746, Department of Veterans Affairs Website Accessibility Act of 2019
- S. 785, Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019
- S. 805, Veteran Debt Fairness Act of 2019
- S. 850, Highly Rural Veteran Transportation Program Extension Act
- S. 857, a bill to amend title 38, United States Code, to increase the amount of special pension for Medal of Honor recipients, and for other purposes.
- S. 980, Homeless Veterans Prevention Act of 2019
- S. 1101, Better Examiner Standards and Transparency for Veterans Act of 2019
- S. 1154, Department of Veterans Affairs Electronic Health Record Advisory Committee Act
- S. 1563, Janey Ensminger Act of 2019
- S. 2811, a bill to amend title 38, United States Code, to extend the authority of the Secretary of Veterans Affairs to continue to pay educational assistance or subsistence allowances to eligible persons when educational institutions are temporarily closed, and for other purposes

(12) Wednesday, June 5, 2019

Business Meeting: Meeting to Consider Pending Nominations

• James M. Byrne, of Virginia, to be Deputy Secretary of Veterans Affairs

(13) Wednesday, June 19, 2019

Hearing: Harnessing the Power of Community: Leveraging Veteran Networks to Tackle Suicide

(14) Wednesday, September 25, 2019

Hearing: Toxic Exposure: Examining the VA's Presumptive Disability Decision-Making Process

(15) Wednesday, November 6, 2019

Nomination Hearing: Pending Nominations

• Scott J. Laurer, of Virginia, to be a Judge of the U.S. Court of Appeals for Veterans Claims

• Grant C. Jaquith, of New York, to be a Judge of the U.S. Court of Appeals for Veterans Claims

(16) Wednesday, January 29, 2020

Business Meeting: Meeting to Consider Legislation and a Nomination Pending before the Committee

- S. 785, Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019 (Committee Print)
- S. 2336, Department of Veterans Affairs Information Technology Reform Act
- S. 2864, Sergeant Daniel Somers Veterans Network Support Act of 2019 (Committee Print)
- S. 524, Department of Veterans Affairs Tribal Advisory Committee Act of 2019
- S. 2594, Veterans' Preference Parity Act
- S. 850, Highly Rural Veteran Transportation Program Extension Act (Committee Print)
- S. 3110, Identifying Barriers and Best Practices Study Act of 2019
- S. 123, Ensuring Quality Care for Our Veterans Act
- S. 450, Veterans Improved Access and Care Act of 2019 (Committee Print)
- S. 3182, Helping Expand and Launch Transitional Health for Women Veterans Act
- Grant Jaquith, to be a Judge of the United States Court of Appeals for Veterans Claims

(17) Wednesday, February 5, 2020

Hearing: VA MISSION Act: Update on the Implementation of the Community Care Network

(18) Tuesday, February 25, 2020

Joint Hearing with the House of Representatives to receive the Legislative Presentation of Disabled American Veterans

(19) Wednesday, February 26, 2020

Joint Hearing with the House of Representatives to receive the Legislative Presentation of Multiple Veterans Service Organizations (Wounded Warrior Project, Blinded Veterans Association, National Association of State Directors of Veterans Affairs, Jewish War Veterans, Vietnam Veterans of America, Military Order of the Purple Heart, and AMVETS)

(20) Tuesday, March 3, 2020

Joint Hearing with the House of Representatives to receive the Legislative Presentation of Multiple Veterans Service Organizations (American Ex-Prisoners of War, Paralyzed Veterans of America, Student Veterans of America, Gold Star Wives of America, Military Officers Association of America, Fleet Reserve Association, and Iraq and Afghanistan Veterans of America)

(21) Wednesday, March 4, 2020

Joint Hearing with the House of Representatives to receive the Legislative Presentation of Veterans of Foreign Wars

(22) Wednesday, March 11, 2020

Joint Hearing with the House of Representatives to receive the Legislative Presentation of The American Legion

(23) Thursday, March 12, 2020

Business Meeting: Meeting to Consider Pending Nomination

- Scott J. Laurer, of Virginia, to be a Judge of the United States Court of Appeals for Veterans Claims

(24) Wednesday, June 3, 2020

Hearing: Review of the fiscal year Budget and fiscal year Advance Appropriations Request and Oversight of CARES Act Supplemental Appropriations for the Department of Veterans Affairs

(25) Tuesday, June 9, 2020

Hearing: Building a More Resilient VA Supply Chain

(26) Wednesday, July 1, 2020

Hearing: Recruiting, Retention, and Building a Resilient Veterans Health Care Workforce

(27) Wednesday, July 29, 2020

Hearing: VA Telehealth During and Beyond COVID–19: Challenges and Opportunities in Rural America

(28) Wednesday, August 5, 2020

Business Meeting: Meeting to Consider Legislation Pending before the Committee

- S. 3282, Protecting Business Opportunities for Veterans Act of 2020
- S. 2558, Nursing Home Care for Native American Veterans Act
- S. 3643, VA Mission Telehealth Clarification Act
- S. 2950, Veterans Burn Pits Exposure Recognition Act of 2019 (Committee Print)
- S. 4384, K2 Veterans Advocacy Act of 2020
- S. 4393, Toxic Exposure in the American Military Act of 2020 (Committee Print)
- S. 711, CARE for Reservists Act of 2019
- S. 332, Agent Orange Exposure Fairness Act of 2019 (Committee Print)
- S. 805, Veteran Debt Fairness Act of 2019 (Committee Print)
- S. 514, The Deborah Sampson Act (Committee Print)
- S. 629, Accountability in Department of Veterans Affairs Scheduling and Consult Management Act (Committee Print)
- S. 2216, TEAM Veteran Caregiver Act (Committee Print)
- S. 4511, Veteran Benefits Enhancement and Expansion Act of 2020
- S. 3235, Veterans Posttraumatic Growth Act

(29) Wednesday, September 9, 2020

Hearing: S.785: Leading the Way to Comprehensive Mental Health Care and Suicide Prevention for Veterans

(30) Wednesday, September 23, 2020

Business Meeting: Meeting to Consider Legislation Pending before the Committee

- S.4393, Toxic Exposure in the American Military Act of 2020 (Committee Print)
- S. 4511, Veteran Benefits Enhancement and Expansion Act of 2020 (Committee Print)

(31) Wednesday, October 21, 2020

Hearing: VA MISSION Act: Assessing Progress Implementing Title I

(32) Wednesday, December 9, 2020

Hearing: VA's Response to COVID–19 across the VA Enterprise

II. LEGISLATION

A. First Session (2019)

During the First Session, the Committee discharged by unanimous consent numerous pieces of legislation, as follows:

- S. 49, a bill to designate the outstation of the Department of Veterans Affairs in North Ogden, Utah, as the Major Brent Taylor Vet Center Outstation, was discharged by the Committee on February 5, 2019, by unanimous consent and passed the Senate the same day without amendment. It was signed into law as Public Law 116–10 on March 21, 2019.
- H.R. 2196, a bill to reduce the credit hour requirement for the Edith Nourse Rogers STEM Scholarship program of the Department of Veterans Affairs, was discharged by the Committee by unanimous consent on July 25, 2019 and passed the Senate by voice vote on the same day without amendment. It was signed into law as Public Law 116–36 on July 31, 2019.
- H.R. 2334, a bill to designate the Department of Veterans Affairs community-based outpatient clinic in Odessa, Texas, as the "Wilson and Young Medal of Honor VA Clinic," was discharged by the Committee on November 21, 2019, by unanimous consent and passed the Senate the same day without amendment. It was signed into law as Public Law 116–87 on December 13, 2019.
- S. 900, a bill to designate the community-based outpatient clinic of the Department of Veterans Affairs in Bozeman, Montana, as the "Travis W. Atkins Department of Veterans Affairs Clinic," was discharged by the Committee on November 21, 2019, by unanimous consent and passed the Senate the same day without amendment. It was signed into law as Public Law 116–262 on December 30, 2020.
- H.R. 1424, Fallen Warrior Battlefield Cross Memorial Act, passed the Senate by unanimous consent on December 19, 2019, by unanimous consent. It was signed into law as Public Law 116–106 on January 7, 2020.
- H.R. 2385, a bill to permit the Secretary of Veterans Affairs to establish a grant program to conduct cemetery research and produce educational materials for the Veterans Legacy Program, was discharged by the Committee on December 19, 2019, by unanimous consent and passed the Senate the same day by voice vote without amendment. It was signed into law as Public Law 116–107 on January 17, 2020.
- S. 2096, a bill to amend title 38, United States Code, to authorize States and tribal organizations that receive grants from the National Cemetery Administration for establishment, expansion, or improvement of a veterans' cemeteries to use amounts of such grants for State and tribal organization cemetery personnel to train at the training center of the National Cemetery Administration, and for other purposes, passed the Senate on December 19, 2019, with amendment by voice vote.
- S. 221, Department of Veterans Affairs Provider Accountability Act, was discharged by the Committee on December 19, 2019 and passed the Senate with an amendment on the same day, by unanimous consent. During the First Session, the Com-

mittee also advanced the following bills without having the bills referred to Committee:

- S. 863, a bill to amend title 38, United States Code, to clarify the grade and pay of podiatrists of the Department of Veterans Affairs, passed the Senate by unanimous consent on March 25, 2019, without amendment. It was signed into law as Public Law 116–12 on April 8, 2019.
- S. 1749, Protecting Affordable Mortgages for Veterans Act of 2019, passed the Senate by unanimous consent on June 5, 2019, without amendment. It was signed into law as Public Law 116–33 on July 25, 2019.
- H.R. 299, the Blue Water Navy Vietnam Veterans Act of 2019, passed the Senate by voice vote on June 12, 2019, without amendment. It was signed into law as Public Law 116–23 on June 25, 2019.
- H.R. 1200, Veterans' Compensation Cost-of-Living Adjustment Act of 2019, passed the Senate by unanimous consent on September 12, 2019, without amendment. It was signed into law as Public Law 116–58 on September 26, 2019.
- H.R. 4285, Department of Veterans Affairs Expiring Authorities Act of 2019, passed the Senate by unanimous consent on September 23, 2019, without amendment. It was signed into law as Public Law 116–61 on September 30, 2019.
- H.R. 2333, Support for Suicide Prevention Coordinators Act, passed the Senate without amendment on December 11, 2019, by a vote of 95–0. It was signed into law as Public Law 116–96 on December 20, 2019.
- S. 3147, Improving Safety and Security for Veterans Act of 2019, passed the Senate on December 19, 2019, by unanimous consent. It was signed into law as Public Law 116–212 on December 4, 2020.

During the First Session, the Committee also incorporated provisions within the Committee's jurisdiction into broader legislation.

B. Second Session (2020)

During the Second Session, the Committee met in open session on January 29, 2020, and ordered favorably reported ten pieces of legislation to the full Senate.

- S. 785, Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019, passed the Senate with amendment on August 5, 2020, by voice vote. It was signed into law as Public Law 116–171 on October 17, 2020.
- S. 2336, Department of Veterans Affairs Information Technology Reform Act, passed the Senate without amendment on July 30, 2020, by unanimous consent.
- S. 2864, Sergeant Daniel Somers Veterans Network Support Act of 2019, passed the Senate with amendment on June 30, 2020, by unanimous consent.
- S. 524, Department of Veterans Affairs Tribal Advisory Committee Act of 2019. This measure was ordered favorably reported by the Committee on January 29, 2020 without written report.
- S. 2594, Veterans' Preference Parity Act. This measure was ordered favorably reported by the Committee on January 29, 2020 without written report.

- S. 850, Highly Rural Veteran Transportation Program Extension Act, passed the Senate with amendment on July 30, 2020, by unanimous consent.
- S. 3110, Identifying Barriers and Best Practices Study Act of 2019. This measure was ordered favorably reported by the Committee on January 29, 2020 without written report.
- S. 123, Ensuring Quality Care for Our Veterans Act, passed the Senate without amendment on June 30, 2020, by unanimous consent.
- S. 450, Veterans Improved Access and Care Act of 2019. This measure, as amended, was ordered favorably reported by the Committee on January 29, 2020 without written report.
- S. 3182, Helping Expand and Launch Transitional Health for Women Veterans Act. This measure, as amended, was ordered favorably reported by the Committee on January 29, 2020 without written report.

During the Second Session, the Committee met in open session on August 5, 2020, and ordered favorably reported ten pieces of legislation to the full Senate.

- S. 3282, Protecting Business Opportunities for Veterans Act of 2020. This measure was ordered favorably reported, without amendment, by the Committee on August 5, 2020, without written report.
- S. 2558, Nursing Home Care for Native American Veterans Act. This measure was ordered favorably reported, without amendment, by the Committee on August 5, 2020, without written report. *This bill was included in H.R. 7105, The Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020, which was signed into law as Public Law 116–315 on January 5, 2021.*
- S. 3643, VA Mission Telehealth Clarification Act. This measure was ordered favorably reported, without amendment, by the Committee on August 5, 2020, without written report.
- S. 2950, Veterans Burn Pits Exposure Recognition Act of 2019. This measure was ordered favorably reported, as amended, by the Committee on August 5, 2020, without written report.
- S. 4384, K2 Veterans Advocacy Act of 2020. This measure was ordered favorably reported, without amendment, by the Committee on August 5, 2020, without written report.
- S. 711, CARE for Reservists Act of 2019. This measure was ordered favorably reported, without amendment, by the Committee on August 5, 2020, without written report. *This bill was included in H.R. 6395, the National Defense Authorization Act for Fiscal Year 2021, which was signed into law as Public Law 116–283 on January 1, 2021.*
- S. 332, Agent Orange Exposure Fairness Act of 2019. This measure was ordered favorably reported, as amended, by the Committee on August 5, 2020, without written report.
- S. 805, Veteran Debt Fairness Act of 2019. This measure was ordered favorably reported, as amended, by the Committee on August 5, 2020, without written report.
- S. 514, Deborah Sampson Act. This measure was ordered favorably reported, as amended, by the Committee on August 5, 2020, without written report. *This bill was included in H.R.*

7105, The Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020, which was signed into law as Public Law 116–315 on January 5, 2021.

• S. 629, Accountability in Department of Veterans Affairs Scheduling and Consult Management Act. This measure was ordered favorably reported, as amended, by the Committee on August 5, 2020, without written report.

• S. 2216, TEAM Veteran Caregiver Act. This measure was ordered favorably reported, as amended, by the Committee on August 5, 2020, without written report, and passed the Senate on November 17, 2020. It was signed into law as Public Law 116–278 on December 31, 2020.

• S. 3235, Veterans Posttraumatic Growth Act. This measure was ordered favorably reported, as amended, by the Committee on August 5, 2020, without written report.

During the Second Session, the Committee met in open session on September 23, 2020, and ordered favorably reported two pieces of legislation to the full Senate.

• S. 4393, Toxic Exposure in the American Military Act of 2020. This measure was ordered favorably reported, as amended, by the Committee on September 23, 2020, without written report.

• S. 4511, Veteran Benefits Enhancement and Expansion Act of 2020. This measure was ordered favorably reported, as amended, by the Committee on September 23, 2020, without written report.

During the Second Session, the Committee discharged numerous bills by unanimous consent, as follows:

• S. 3084, a bill to amend title 38, United States Code, to modify the limitation on pay for certain high-level employees and officers of the Department of Veterans Affairs, was discharged by the Committee on January 16, 2020, and passed the Senate by unanimous consent on the same day. It was signed into law as Public Law 116–146 on July 2, 2020.

• H.J. Res. 80, Approving the request of the Secretary of Veterans Affairs for a waiver under section 1703E(f) of title 38, United States Code, was discharged by the Committee on February 11, 2020, and passed the Senate by unanimous consent on the same day. It was signed into law as Public Law 116–120 on March 3, 2020.

• H.R. 4920, Department of Veterans Affairs Contracting Preference Consistency Act of 2020, was discharged by the Committee on March 12, 2020, and passed the Senate with an amendment by unanimous consent on the same day. It was signed into law as Public Law 116–155 on August 8, 2020.

• H.R. 4771, VA Tele-Hearing Modernization Act, was discharged by the Committee on March 26, 2020, and passed the Senate by unanimous consent on the same day. It was signed into law as Public Law 116–137 on April 10, 2020.

• S. 3637, a bill to amend the Servicemembers Civil Relief Act to extend lease protections for servicemembers under stop movement orders in response to a local, national, or global emergency, and for other purposes, was discharged by the Committee on June 10, 2020, and passed the Senate by unani-

mous consent on the same day. It was signed into law as Public Law 116–158 on August 14, 2020.

• S. 1646, a bill to designate the community-based outpatient clinic of the Department of Veterans Affairs in St. Augustine, Florida, as the "Leo C. Chase Jr. Department of Veterans Affairs Clinic", was discharged by the Committee on September 17, 2020 and passed the Senate with an amendment on the same day, by unanimous consent. It was signed into law as Public Law 116–168 on October 13, 2020.

• S. 4072, a bill to designate the clinic of the Department of Veterans Affairs in Bend, Oregon, as the "Robert D. Maxwell Department of Veterans Affairs Clinic" was discharged by the Committee on September 17, 2020, and passed the Senate by unanimous consent on the same day. It was signed into law as Public Law 116–169 on October 13, 2020.

• S. 1646, a bill to designate the community-based outpatient clinic of the Department of Veterans Affairs in St. Augustine, Florida, as the "Leo C. Chase Jr. Department of Veterans Affairs Clinic" was discharged by the Committee on September 17, 2020, and passed the Senate with an amendment by unanimous consent on the same day. It was signed into law as Public Law 116–168 on October 13, 2020.

• H.R. 6168, Veterans' Compensation Cost-of-Living Adjustment Act of 2020 was discharged by the Committee on September 24, 2020, and passed the Senate by unanimous consent on the same day. It was signed into law as Public Law 116–178 on October 20, 2020.

• H.R. 561, Protecting Business Opportunities for Veterans Act of 2019, was discharged by the Committee on September 30, 2020, and passed the Senate by unanimous consent on the same day. It was signed into law as Public Law 116–183 on October 30, 2020.

• H.R. 4183, Identifying Barriers and Best Practices Study Act, was discharged by the Committee on October 1, 2020, and passed the Senate by unanimous consent on the same day. It was signed into law as Public Law 116–187 on October 30, 2020.

• S. 4460, State Veterans Homes Domiciliary Care Flexibility Act, was discharged by the Committee on December 8, 2020 and passed the Senate without amendment on the same day, by unanimous consent. This bill was included in H.R. 7105, The Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020, which was signed into law as Public Law 116–315 on January 5, 2021.

• H.R. 7105, Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020, was discharged by the Committee on December 9, 2020 and passed the Senate with an amendment on the same day. The Senate amendment incorporated all or portions of the following 34 bills: H.R. 1271, H.R. 1947, H.R. 2109, H.R. 2398, H.R. 2787, H.R. 3608, H.R. 4312, H.R. 4477, H.R. 4532, H.R. 4908, H.R. 6018, H.R. 6140, H.R. 6589, H.R. 7009, H.R. 7287, H.R. 7584, H.R. 7811, H.R. 8076, H.R. 8415, H.R. 8426, H.R. 8483, H.R. 8813, S. 514, S. 1621, S. 2558, S. 2806, S. 2988, S. 3788, S. 3898, S. 4086, S. 4365, S. 4460, S. 4566, S. 4656, S. 4909. The

bill was signed into law as Public Law 116–315 on January 5, 2021.

- H.R. 4983, to designate the Department of Veterans Affairs community-based outpatient clinic in Gilbert, Arizona, as the "Staff Sergeant Alexander W. Conrad Veterans Affairs Health Care Clinic" was discharged by the Committee on December 10, 2020 and passed the Senate by unanimous consent on the same day. It was signed into law as Public Law 116–295 on January 5, 2021.
- H.R. 7347, to designate the medical center of the Department of Veterans Affairs in Ann Arbor, Michigan, as the "Lieutenant Colonel Charles S. Kettles Department of Veterans Affairs Medical Center", was discharged by the Committee on December 10, 2020 and passed the Senate by unanimous consent the same day. It was signed into law as Public Law 116–317 on January 5, 2021.
- H.R. 4356, Protecting Families of Fallen Servicemembers Act, was discharged by the Committee on December 15, 2020 and passed the Senate the same day, by unanimous consent. It was signed into law as Public Law 116–285 on January 5, 2021.

During the Second Session, the Committee advanced the following bills without having the bills referred to Committee:

- S. 3414, Major Medical Facility Authorization Act of 2020, was introduced and passed the Senate by unanimous consent on March 5, 2020. It was signed into law as Public Law 116–144 on June 16, 2020.
- S. 3503, a bill to authorize the Secretary of Veterans Affairs to treat certain programs of education converted to distance learning by reason of emergencies and health-related situations in the same manner as programs of education pursued at educational institutions, and for other purposes, was introduced and passed the Senate by unanimous consent on March 16, 2020. It was signed into law as Public Law 116–128 on March 21, 2020.
- H.R. 3504, Ryan Kules and Paul Benne Specially Adaptive Housing Improvement Act of 2019, passed the Senate with an amendment on March 26, 2020, by unanimous consent. It was signed into law as Public Law 116–154 on August 8, 2020.
- H.R. 6322, Student Veteran Coronavirus Response Act of 2020, passed the Senate without amendment on April 21, 2020, by unanimous consent. It was signed into law as Public Law 116–140 on April 28, 2020.
- S. 3587, Department of Veterans Affairs Website Accessibility Act of 2019, was introduced and passed the Senate by unanimous consent on March 26, 2020. It was signed into law as Public Law 116–213 on December 4, 2020.
- H.R. 12, Vet Center Eligibility Expansion Act, passed the Senate without amendment on September 24, 2020, by unanimous consent. It was signed into law as Public Law 116–176 on October 20, 2020.
- H.R. 2372, Veterans' Care Quality Transparency Act, passed the Senate without amendment on September 24, 2020, by unanimous consent. It was signed into law as Public Law 116–177 on October 20, 2020.

- H.R. 2359, Whole Veteran Act, passed the Senate without amendment on October 1, 2020, by voice vote. It was signed into law as Public Law 116–185 on October 30, 2020.
- H.R. 8247, Veterans COMPACT Act of 2020, passed the Senate without amendment on November 10, 2020, by unanimous consent. It was signed into law as Public Law 116–214 on December 5, 2020.

During the Second Session, the Committee also incorporated provisions within the Committee's jurisdiction into broader legislation.

C. Public Laws

Senate Vehicle

S. 49, a bill to designate the outstation of the Department of Veterans Affairs in North Ogden, Utah, as the Major Brent Taylor Vet Center Outstation, is Public Law 116–10.

S. 785, Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019, is Public Law 116–171.

S. 863, a bill to amend title 38, United States Code, to clarify the grade and pay of podiatrists of the Department of Veterans Affairs, is Public Law 116–12.

S. 900, a bill to designate the community-based outpatient clinic of the Department of Veterans Affairs in Bozeman, Montana, as the "Travis W. Atkins Department of Veterans Affairs Clinic", is Public Law 116–262.

S. 1646, a bill to designate the community-based outpatient clinic of the Department of Veterans Affairs in St. Augustine, Florida, as the "Leo C. Chase Jr. Department of Veterans Affairs Clinic", is Public Law 116–168.

S. 1749, Protecting Affordable Mortgages for Veterans Act of 2019, is Public Law 116–33.

S. 2216, TEAM Veteran Caregivers Act, is Public Law 116–278.

S. 3084, a bill to amend title 38, United States Code, to modify the limitation on pay for certain high-level employees and officers of the Department of Veterans Affairs, is Public Law 116–146.

S. 3147, Improving Safety and Security for Veterans Act of 2019, is Public Law 116–212.

S. 1A 3414, Major Medical Facility Authorization Act of 2020, is Public Law 116–144.

S. 3503, a bill to authorize the Secretary of Veterans Affairs to treat certain programs of education converted to distance learning by reason of emergencies and health-related situations in the same manner as programs of education pursued at educational institutions, and for other purposes, is Public Law 116–128.

S. 3587, Department of Veterans Affairs Website Accessibility Act of 2019, is Public Law 116–213.

S. 3637, a bill to amend the Servicemembers Civil Relief Act to extend lease protections for servicemembers under stop movement orders in response to a local, national, or global emergency, and for other purposes, is Public Law 116–158.

S. 4072, a bill to designate the clinic of the Department of Veterans Affairs in Bend, Oregon, as the "Robert D. Maxwell Department of Veterans Affairs Clinic", is Public Law 116–169.

House Vehicle

H.R. 299, Blue Water Navy Vietnam Veterans Act of 2019, is Public Law 116–23.

H.R. 561, Protecting Business Opportunities for Veterans Act of 2019, is Public Law 116–183.

H.R. 1200, Veterans' Compensation Cost-of-Living Adjustment Act of 2019, is Public Law 116–58.

H.R. 1424, Fallen Warrior Battlefield Cross Memorial Act, is Public Law 116–106.

H.R. 1A1812, Vet Center Eligibility Expansion Act, is Public Law 116–176.

H.R. 1925, to designate the Manhattan Campus of the New York Harbor Health Care System of the Department of Veterans Affairs as the "Margaret Cochran Corbin Campus of the New York Harbor Health Care System", is Public Law 116–331.

H.R. 2196, to amend title 38, United States Code, to reduce the credit hour requirement for the Edith Nourse Rogers STEM Scholarship program of the Department of Veterans Affairs, is Public Law 116–36.

H.R. 2333, Support for Suicide Prevention Coordinators Act, is Public Law 116–96.

H.R. 2334, to designate the Department of Veterans Affairs community-based outpatient clinic in Odessa, Texas, as the "Wilson and Young Medal of Honor VA Clinic", is Public Law 116–87.

H.R. 2359, Whole Veteran Act, is Public Law 116–185.

H.R. 2372, Veterans' Care Quality Transparency Act, is Public Law 116–177.

H.R. 2385, to permit the Secretary of Veterans Affairs to establish a grant program to conduct cemetery research and produce educational materials for the Veterans Legacy Program, is Public Law 116–107.

H.R. 13504, Ryan Kules and Paul Benne Specially Adaptive Housing Improvement Act of 2019, is Public Law 116–154.

H.R. 4183, Identifying Barriers and Best Practices Study Act, is Public Law 116–187.

H.R. 4285, Department of Veterans Affairs Expiring Authorities Act of 2019, is Public Law 116–61.

H.R. 4356, Protecting Families of Fallen Servicemembers Act, is Public Law 116–285.

H.R. 4771, VA Tele-Hearing Modernization Act, is Public Law 116–137.

H.R. 4920, Department of Veterans Affairs Contracting Preference Consistency Act of 2020, is Public Law 116–155.

H.R. 4983, to designate the Department of Veterans Affairs community-based outpatient clinic in Gilbert, Arizona, as the "Staff Sergeant Alexander W. Conrad Veterans Affairs Health Care Clinic", is Public Law 116–295.

H.R. 5023, to name the Department of Veterans Affairs community-based outpatient clinic in Youngstown, Ohio, as the "Carl Nunziato VA Clinic", is Public Law 116–297.

H.R. 6168, Veterans' Compensation Cost-of-Living Adjustment Act of 2020, is Public Law 116–178.

H.R. 6322, Student Veteran Coronavirus Response Act of 2020, is Public Law 116–140.

H.R. 7105, Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020, is Public Law 116–315.

H.R. 7347, to designate the medical center of the Department of Veterans Affairs in Ann Arbor, Michigan, as the "Lieutenant Colonel Charles S. Kettles Department of Veterans Affairs Medical Center", is Public Law 116–317.

H.R. 8247, Veterans COMPACT Act of 2020, is Public Law 116–214.

III. OVERSIGHT

In accordance with its mandate, the Committee engaged in oversight of VA health care facilities, VA regional offices, VA constructionsites, homeless program facilities, educational institutions, military facilities, employment program facilities, other entities within the Committee's jurisdiction, and entities that coordinate with VA in serving veterans. Summaries of various oversight activities follow.

A. First Session (2019)

From March 21, 2019, to March 22, 2019, Committee majority and minority staff visited the Newark, New Jersey VA Regional Office (RO). They toured the facility and met with RO leadership to learn more about current operations and challenges, including implementing the Appeals Modernization Act. Staff also visited the War Related Illness and Injury Study Center (WRIISC) at the VA Medical Center in East Orange, New Jersey. Staff met with WRIISC leadership, Airborne Hazard and Burn Pit Center of Excellence staff, learned more about ongoing research and treatment of related health conditions, and toured the airborne hazards lab.

From April 7, 2019, to April 10, 2019, Committee staff traveled to Kansas City, Missouri, as part of a bicameral delegation to conduct oversight at Cerner's headquarters. The purpose of the visit was to assess the progress of the VA's electronic health record modernization at the time of their fourth national-level workshop.

On June 6, 2019, Minority Committee staff visited Helena and Great Falls, Montana for the roll out of the Veterans Community Care Program.

From August 4, 2019, to August 9, 2019, a bicameral group of Committee staff traveled to Naples, Italy, as well as Ramstein and Wiesbaden, Germany to conduct congressional oversight of outside the contiguous United States Transition Assistance Programs (TAP) at Army, Air Force, and Navy installations. They toured Naples Fleet and Family Services, Ramstien Air Base, and the United States Army Europe Command, received TAP overviews from various services, and did walkthroughs in TAP training classrooms to meet with transitioning Soldiers, Airmen, and Sailors. They met with Army, Air Force, and Navy leadership regarding challenges specific to servicemembers transitioning out of the military from overseas locations. Majority and Minority Committee staff also conducted roundtable discussions with transitioning servicemembers to query current challenges associated with transition programs.

From August 5, 2019, to August 8, 2019, Committee majority staff conducted oversight travel to Athens, Georgia, as well as Savannah, Georgia. In Athens, staff attended meetings at the University of Georgia's Student Veterans Resource Center, School of Social Work, Small Business Development Center and the Veterans

Legal Clinic to learn about ongoing efforts to assist veterans in the local community. In Savannah, staff met with leadership from Fort Stewart—Hunter Army Airfield to review the base's programs for service members transitioning to civilian life.

From August 5, 2019, to August 9, 2019, Committee staff from both House and Senate committees conducted oversight travel to Washington State. Staff visited the VA medical centers (VAMC) in Seattle and Spokane chosen for the initial go-live of the new electronic health record (EHR) system. These were the Seattle VAMC, American Lake VAMC, and Mann-Grandstaff VAMCs. Additionally, staff attended the local workshop for the electronic health record modernization in Sea-Tac. The purpose was to assess the status of preparations for the go-live of the new EHR at the three sites, at the time scheduled for March 2020.

From August 5, 2019, to August 8, 2019, Committee majority staff conducted oversight travel to Augusta, Atlanta, and Dublin, Georgia. Staff visited the medical centers in each city, as well as the Veterans Program at Emory Health Care. At each location, Committee staff discussed mental health care programs and key features of each facility's programs for veterans.

From August 11, 2019, to August 13, 2019, Committee majority staff conducted oversight travel to Denver, Colorado, to the VA Denver Logistics Center and the Rocky Mountain VA medical center.

From August 12, 2019, to August 16, 2019, Committee staff traveled to Louisville, Kentucky to participate in the United States Army Transition Assistance Program (TAP) Symposium. The purpose of attendance was to assess new TAP curriculum implementation from the perspective of front line leaders, including opportunities for spouses and family engagement. Committee staff gathered information on the implementation plan for upcoming congressionally mandated changes servicemembers and families will experience during their transition out of the military and how best to connect servicemembers to post-separation goals.

From August 12, 2019 to August 16, 2019, Committee majority and minority staff from both House and Senate committees conducted oversight travel to Montana. Staff visited the Fort Harrison VA Medical Center, the Missoula Community Based Outpatient Clinic, as well as clinics in Libby, Kalispell, Cut Bank, Havre, and Great Falls. Staff toured the facilities and spoke with VA staff and leadership with a specific focus on rural health and telehealth.

From August 13, 2019, through August 15, 2019, Committee staff from both House and Senate committees conducted oversight travel to Chicago, Illinois, to the National Acquisition Center and the Captain James A. Lovell Federal Health Care Center.

From August 17, 2019, to August 18, 2019, Committee majority staff conducted oversight travel to Atlanta, Georgia, to the VA Medical Center and the VA regional office.

From August 21, 2019 to August 23, 2019, Committee majority staff traveled to Houston, Texas. They visited the Michael E. DeBakey VA Medical Center, toured the facility, and met with leadership and staff about mental health, women's health, and community care. Staff also visited an organization that coordinates and connects veterans with community resources. In addition, staff toured the Houston West Vet Center and the Houston Southwest

Vet Center and met with leadership about community outreach and suicide prevention efforts.

From September 9, 2019 to September 12, 2019, Committee minority staff conducted at oversight visit to several VA facilities in Montana. The visit included stops at the Great Falls CBOC and future CBOC location for a tour and briefing on CBOC operations, staffing, and infrastructure needs. A visit to the Fort Harrison VA Medical Center campus outside of Helena for an executive team briefing, infrastructure briefings, tours of the grounds, and a meeting with the Chief of Police. A visit was conducted to the federally funded Southwest Montana State Veteran Home constructionsite in Butte as well as meetings with staff and a tour of the Bozeman CBOC slated for replacement. The visit concluded at the Billings Health Care Center for an executive team meeting, review of IT infrastructure needs, and a facility tour. Throughout the oversight visit staff collected information on staffing, infrastructure, IT, budget, and policy implementation topics across a wide range of VA subject areas.

B. Second Session (2020)

From February 17, 2020 to February 20, 2020, Committee majority staff conducted oversight travel to Kansas. Staff visited Fort Riley and McConnell Air Force Base to observe the Transition Assistance Program as delivered by the Army and the Air Force. Staff also conducted oversight at the Wichita VA Regional Office, where they met with the director and other staff, and received updates on the Vocational Rehabilitation and Employment program and the office's community engagement efforts.

IV. NOMINATIONS

NOMINATIONS

Name and Position	Date of Nomination	Date of Hearing	Date Reported	Date Confirmed
116th Congress, First Session				
John Lowry III Assistant Secretary of Labor for Veterans' Employment and Training	January 16, 2019	—	March 13, 2019	November 21, 2019
James Byrne, of Virginia, to be Deputy Secretary of Veterans Affairs	April 29, 2019	May 16, 2019	June 5, 2019	September 11, 2019
Scott J. Laurer, of Virginia, to be a Judge of the United States Court of Appeals for Veterans Claims	September 19, 2019	November 6, 2019	March 12, 2020	July 23, 2020
Grant C. Jaquith, of New York, to be a Judge of the United States Court of Appeals for Veterans Claims	September 19, 2019	November 6, 2019	February 4, 2020	July 23, 2020

V. BUDGET FOR VETERANS PROGRAMS

A. First Session (2019)

Pursuant to the requirements of section 301(d) of the Congressional Budget Act of 1974, Chairman Isakson of the Committee submitted a letter to the Budget Committee reflecting the Committee's Views and Estimates on the Administration's proposed fiscal year 2020 budget for veterans' programs. The letter submitted is printed below in its entirety:

JOHNNY ISAKSON, GEORGIA,
CHAIRMAN
JERRY MORAN, KANSAS
JOHN BOOZMAN, ARKANSAS
BILL CASSIDY, LOUISIANA
MIKE ROUNDS, SOUTH DAKOTA
THOM TILLIS, NORTH CAROLINA
DAN SULLIVAN, ALASKA
MARSHA BLACKBURN, TENNESSEE
KEVIN CRAMER, NORTH DAKOTA

ADAM REECE, STAFF DIRECTOR

United States Senate

COMMITTEE ON VETERANS' AFFAIRS
WASHINGTON, DC 20510

JON TESTER, MONTANA,
RANKING MEMBER
PATTY MURRAY, WASHINGTON
BERNARD SANDERS, VERMONT
SHERROD BROWN, OHIO
RICHARD BLUMENTHAL, CONNECTICUT
MAZIE K. HIRONO, HAWAII
JOE MANCHIN III, WEST VIRGINIA
KYRSTEN SINEMA, ARIZONA

TONY McCLAIN, STAFF DIRECTOR

March 15, 2019

The Honorable Michael Enzi
Chairman
The Honorable Bernard Sanders
Ranking Member
Committee on the Budget
624 Dirksen Senate Office Building
United States Senate
Washington, DC 20510

Dear Chairman Enzi and Ranking Member Sanders:

Pursuant to Section 301(d) of the Congressional Budget Act of 1974, it is my pleasure as the Chairman of the Committee on Veterans' Affairs (Committee) to submit this letter to the Committee on the Budget on the fiscal year 2020 (FY20) budget and the fiscal year 2021 (FY21) advance appropriations budget request for Function 700 (Veterans' Benefits and Services) programs.

GENERAL COMMENTS

The principal focus of my letter will be on certain components of Function 700 spending – Department of Veterans Affairs (VA) programs. Because the Committee has not received the detailed FY20 and FY21 advance appropriations budget request and, therefore, is not fully able to analyze the request, I will limit my comments to general observations and highlight areas that I believe merit focus by the Committee on the Budget.

The 115th Congress was one of the most productive legislative periods in the history of our Committee. We were able to enact significant reforms in the areas of accountability and whistleblower protection, appeals modernization, veterans' educational assistance, caregivers benefits, and veterans' health care. We heard from VA and the Veterans Service Organizations (VSOs) that represent our veterans on what changes and improvements needed to be made at VA and we passed legislation to make those reforms.

Now it is time for VA to implement the laws we passed, and we must provide the oversight and funding they need for that implementation. The hard work of the Senate, Congress, and our partners at VA and within the VSOs will be wasted if the changes we made in law are not faithfully translated into meaningful improvements for our veterans and their families. Congress has given VA a monumental task in implementing these new laws and we must ensure

we conduct the necessary oversight and hold them accountable for their successes and shortcomings.

The Committee wants to ensure VA is planning and executing its modernization efforts as part of a cohesive, enterprise-wide strategy. Of the five major reforms signed into law, two have generally been delivered on time, two have faced at least partial delays, and one is yet to be seen. In both the on time deliveries and the delays, information technology (IT) systems have proven to be pivotal in helping to determine success or failure. If VA is going to be successful in delivering benefits and health care, it must articulate a vision of what its information systems and support processes should look like so we can all work toward achieving that vision.

DEPARTMENT OF VETERANS AFFAIRS

Community Care

One of the most significant veterans bill passed in the 115th Congress was the John S. McCain III, Daniel K. Akaka, and Samuel R. Johnson VA Maintaining Internal Systems and Strengthening Integrated Outside Networks Act of 2018 (VA MISSION Act). The VA MISSION Act will consolidate seven community care programs into one, the Veterans Community Care Program, beginning on June 6, 2019. The Committee is committed to the successful implementation of the VA MISSION Act so that veterans receive care that best fits their individual needs while making the VA health care system stronger. In order to achieve this, Congress must ensure VA has the necessary resources to provide quality, timely access to health care for veterans, whether in a VA facility or through the community care program.

The Administration requested $8.9 billion in FY20 for the implementation of the VA MISSION Act. The Committee has not yet received more detailed budget information regarding the request for VA MISSION Act implementation funding but encourages adequate resources for this critical community care program. Additionally, during the implementation of the VA MISSION Act, the information technology systems needed to support the consolidated community care program must be prioritized and adequately funded. As we have witnessed with other VA programs, IT systems are a critical component of the successful implementation and execution of new programs.

Caregivers

The VA MISSION Act expanded eligibility for VA's Program of Comprehensive Assistance for Family Caregivers, currently for post-9/11 veterans, to include all eras of veterans. Before moving forward with expansion, the law requires VA to strengthen the current program, including implementing a new IT system.

This program provides valuable care and support for seriously injured veterans and caregivers. It is imperative that VA has necessary resources to implement and maintain the required new IT system, as well as to address current concerns with the program and to prepare for expansion. I am committed to the oversight of this program to ensure VA is effectively utilizing its resources to serve our nation's veterans and their caregivers.

Appeals

In August 2017, the President signed into law the Veterans Appeals Improvement and Modernization Act of 2017, which overhauled VA's outdated disability claims appeal process. Since the legislation was enacted, VA spent 18 months preparing for implementation of the new process, including upgrading IT systems, piloting certain aspects of the new appeals process, and hiring additional staff. Secretary Wilkie certified to Congress last month that VA had met the requirements of the law and was prepared to implement the new process. VA began processing appeals utilizing the new process on February 19, 2019.

VA currently has more than 384,000 legacy appeals pending. As long as there are legacy appeals pending, VA is simultaneously processing appeals under two systems. It is critically important that VA has adequate resources to provide timely, quality decisions on disability claims appeals to our nation's veterans utilizing the new authorities provided to them by Congress. This includes continuing to support the number of required staff and ensuring IT systems receive necessary maintenance and upgrades, both at the Veterans Benefits Administration and the Board of Veterans Appeals. I look forward to working with VA, the Committee on the Budget, and our colleagues to ensure the success of appeals modernization.

Forever GI Bill

The Harry W. Colmery Veterans Educational Assistance Act of 2017, better known as the Forever GI Bill, included 32 education provisions to improve benefits for veterans, active duty military, and their families. VA successfully implemented 28 of those provisions on time, but struggled to implement two key provisions related to how VA pays monthly housing stipends to students. Committee oversight of this implementation helped identify several key problems.

First, VA did not have an internal capacity to rapidly identify new program requirements, acquire technology development capability, and manage the program execution across the business office, enterprise IT office, and department leadership. Key early decisions on how to implement the necessary software changes and what policies to adopt in implementing the law put VA on a high-risk path that resulted in needing to restart the process with a new approach.

Additionally, the overly complex and partially outdated IT systems used to pay educational benefits to schools and to students meant that any development of new software

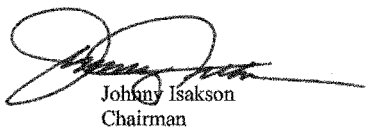
capabilities would require tremendous resources for writing new code and conducting testing. The multiple systems required to process benefits have been knitted together over more than 30 years of incremental changes in what types of benefits are provided to veterans and how those benefits are adjudicated and paid out. The overall system VA currently has was not purposely built for the tasks VA now has to complete.

It is critical that we fund VA for development and maintenance of IT systems capable of delivering benefits as required by law. But we must also make sure VA is building an overall strategy for how it can shed outdated IT systems and unhelpful business processes in order to maximize the latest technology to deliver benefits with more accuracy and fewer delays.

CONCLUDING COMMENTS

Thank you for your consideration of my views on the programs and services for our nation's veterans. VA has numerous challenges which VA leadership must address. I look forward to working with the Committee on the Budget and all of our colleagues to help improve and modernize the system of benefits and services for veterans, their families, and their survivors.

Sincerely,



Johnny Isakson
Chairman

B. Second Session (2020)

Pursuant to the requirements of section 301(d) of the Congressional Budget Act of 1974, Chairman Moran submitted a letter to the Budget Committee reflecting the Committee's Views and Estimates on the Administration's proposed fiscal year 2021 budget for veterans' programs. The letter submitted is printed below in its entirety:

JERRY MORAN, KANSAS
CHAIRMAN
JOHN BOOZMAN, ARKANSAS
BILL CASSIDY, LOUISIANA
MIKE ROUNDS, SOUTH DAKOTA
THOM TILLIS, NORTH CAROLINA
DAN SULLIVAN, ALASKA
MARSHA BLACKBURN, TENNESSEE
KEVIN CRAMER, NORTH DAKOTA
KELLY LOEFFLER, GEORGIA

CAROLINE CANFIELD, STAFF DIRECTOR

JON TESTER, MONTANA
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RICHARD BLUMENTHAL, CONNECTICUT
MAZIE K. HIRONO, HAWAII
JOE MANCHIN III, WEST VIRGINIA
KYRSTEN SINEMA, ARIZONA

TONY MCCLAIN, STAFF DIRECTOR

United States Senate

COMMITTEE ON VETERANS' AFFAIRS
WASHINGTON, DC 20510

May 6, 2020

The Honorable Michael Enzi
Chairman
The Honorable Bernard Sanders
Ranking Member
Committee on the Budget
624 Dirksen Senate Office Building
United States Senate
Washington, DC 20510

Dear Chairman Enzi and Ranking Member Sanders:

Pursuant to Section 301(d) of the Congressional Budget Act of 1974, it is my pleasure as the Chairman of the Committee on Veterans' Affairs to submit this letter to the Committee on the Budget on the fiscal year 2021 (FY21) budget and the fiscal year 2022 (FY22) advance appropriations budget request for Function 700 (Veterans' Benefits and Services) programs.

General Comments

While we are in the midst of responding to an unprecedented national emergency for COVID19, this Committee continues to evaluate funding requests from the Department of Veterans Affairs (VA) to make certain that we are investing tax-payer dollars wisely in programs and services that will improve the lives of our veterans where and when they need it. VA is working diligently to deliver economic benefits and continue vital health care operations as the economy, the health care sector, and our nation's supply chain are totally upended. We are legislating emergency authorities and waiving limitations that could slow the kinds of quick actions we need from the VA right now.

As we work to make sure VA has all the tools and resources it needs to respond to COVID19, I also want the Committee to learn from this experience what is vital for VA to meet its mission and what is outdated. VA has touted its recent ability to hire and onboard health care providers in days rather than months. That is a lesson we need to use so VA improves staffing long term. VA has also increased use of telehealth for care, provided flexibility for disability claims and debt management, and increased outreach for medical supply chain needs. As the urgency of the response diminishes, my goal is to evaluate what efforts had meaningful impacts and can provide us with a guide for how VA can improve its delivery of care and benefits going forward.

The items below reflect priorities for Committee oversight. We will be evaluating these programs and the VA's funding request for them in light of lessons learned during the COVID19 response, with an eye towards prioritizing those programs that deliver measurable results.

Community Care

The *VA Maintaining Internal Systems and Strengthening Integrated Outside Networks Act (MISSION Act)* restructured and transformed VA community care by broadening veteran eligibility and giving more veterans control over where and how they receive care. Last year was a significant year for VA community care as the VA began operating the Veterans Community Care Program (VCCP). The program is a key piece of the MISSION Act—which consolidated all VA community care programs into the VCCP and established an integrated Community Care Network (CCN) of providers.

The Administration is requesting $18,511,979,000 for Medical Community Care for FY21. The VA believes the requested funding would fully fund all community care, including implementation of MISSION Act's community care components. The Committee is concerned the requested funding is inadequate and will not cover the community care costs related to MISSION Act implementation. The VA's actuarial model uses assumptions based on community care data that largely predates MISSION's VCCP and urgent care benefit to calculate the Medical Community Care budget. Additionally, the Committee and VA have discussed the need for the VA to modify CCN contracts to incorporate VA access standards for community care. Incorporating access standards into the CCN contracts could be costly but the budget request does not clarify whether the funding request accounts for these necessary modifications. The Committee fears the budget does not fully account for the true scale of enrollee usage of community care, as more veterans may choose to utilize new benefits and programs established by the MISSION Act.

Veterans Mental Health and Suicide Prevention

Addressing veterans mental health and suicide prevention is my top legislative priority. VA is seeking new authorities in FY21 for how and where veterans can receive supportive mental health services. Additionally, we are looking at how VA, DoD, and academia can partner on mental health research and focus our national efforts where they will make the most difference. To stop veteran suicide, our country must use every resource available and seek out new therapies that can demonstrate a clinically significant result.

We must also work to expand access to mental health care for veterans by strategically reaching veterans in hard-to-reach, rural parts of our country and providing our veterans with alternative and innovative treatments. The Committee will work to integrate our efforts with the President's PREVENTS task force as it takes a whole of government approach to addressing veteran suicide. As new therapies are researched and developed, and state and local partners are empowered to deliver resources directly to veterans, our focus will be on measuring outcomes and investing in solutions that reduce the number of veterans who die from suicide.

VA Caregivers Program

VA is requesting $1,195,486,000 ($710,000,000 FY2020 Budget Estimate/ $432,448,000 FY2019 Actual) for the Program of Comprehensive Assistance for Family Caregivers (PCAFC) for FY2021. The FY2021 is a 60% increase over the FY2020 Budget Estimate. The PCAFC is

VA's most robust caregivers program, offering caregivers of eligible post-9/11 veterans enhanced supportive services and a monthly stipend. The requested increase in funding is designed to support the expansion of the PCAFC to veterans of all eras.

The MISSION Act required the VA to broaden PCAFC eligibility and expand the program's supportive services to include financial and legal services. Nearly 6 million caregivers provide support to injured veterans across the nation. Expanding the PCAFC is a priority for the Committee and we support the VA's efforts to implement the expansion. However, we are concerned the requested funding may not be enough to account for the influx of caregivers and veterans to the program. Additionally, we remain dismayed with the ongoing delays that continue to stall the expansion and the impact VA's proposed rule may have on program eligibility. The Committee will continue to conduct careful oversight of the expansion to ensure pre-9/11 veterans and caregivers have access to the care and supportive services they desperately need.

Women Veterans Health Care

The VA requested $7,417,747,000 for FY2021 ($6,721,268,000 FY2020 Budget Estimate/ $6,348,901,000 FY2019 Actual), an 8% increase over the FY2020 Budget Estimate. We applaud VA's continuing efforts to increase enrollment numbers for women veterans and its decision to elevate the Office of Women's Health as a direct report to the Office of the Deputy Under Secretary for Health. Women veterans is the fastest growing veteran demographic in the veteran community and is projected to account for 16% of the veteran population by 2040. Since 2014, the number of women veterans enrolled in the VHA has increased by 28% with over 500,000 active VHA users. However, the FY2021 budget request related to Women Veterans Health Care would only allocate $625 million for gender-specific care. It is imperative that the Department continue to improve gender-specific health care to address the needs of this fast-growing population. As such, the Department must have adequate resources to expand gender-specific services and hire additional staff to provide such services.

Construction and Leasing

A total of $1,908,000,000 is requested in new budget authority for 2021 for all construction programs. This consists of $1,373,000,000 ($1,235,200 FY20 enacted) for Construction, Major; $400,000,000 for Construction, Minor. VA has 21 major construction projects that are authorized and partially funded. Based upon the current cost estimates to remediate all gaps as projected, it would require total resources of approximately $62-$76 billion for capital infrastructure and activation costs. Alarmingly, VA additionally has approximately $7 billion of pending seismic projects nationally.

The Department of Veterans Affairs requests authorization of $274,920,000 for thirteen major medical facility leases. The Committee will also weigh options on how to move forward with VA major medical facility lease authorizations in light of continued complications resulting from Congressional budgeting rules and VA and General Services Administration (GSA) leasing protocols. Since the scoring change, we have authorized two large sets of leases on bills that funded the Choice program, Choice 1.0 (authorized in 2014), and Choice 2.0 (authorized in 2017). The

Committee has not authorized leases the last two years, and will not this year because of Pay-Go. Continued inaction cannot continue to happen; it is creating second and third-order effects that currently are not seen and will create a larger future bill when identified.

Electronic Health Record Modernization

VA is requesting $2.627 ($1,442,515 2020 enacted) billion for Veterans Electronic Health Record, an 82.1% increase from the 2020 enacted levels. Funding will provide for additional deployments, site assessments, and the accelerated deployment of the new scheduling system. The first "go-live" sight in Spokane, Washington, has recently delayed until July 2020. Although we agree with the Secretary's decision, we will continue to monitor the configuration and design decisions for the Cerner EHR, the dozens of systems interfaces that remain to be built, and authorities to connect to the network that is due from DoD.

Procurement

The Committee will also prioritize improvements to VA's procurement organization and processes by working with the Administration and introducing legislation, where necessary, to correct endemic weaknesses. Over half of the FY19 GAO reports looking at VA addressed acquisition and contracting issues. The Committee's ongoing goals in this regard are to increase meaningful competition, the use of Federal Acquisition Regulation-compliant contracts, and the utilization of veteran-owned businesses, as well as to eliminate unauthorized commitments, improper open market purchases, and unnecessary sole-source awards. We will consider legislation the cracks down on misrepresentation of a service-connected disability to obtain preference for SDVOSB contracts, the widespread misrepresentation of small business status and ownership, and control of the businesses. The Committee continues to be alarmed by the mishandling of several major acquisitions and is concerned about the medical supply chain.

National Cemetery Administration

VA is requesting $360,000,000 for the National Cemetery Administration (NCA) to operate and maintain 156 national cemeteries (including 11 cemeteries being transferred from the Department of the Army and 33 other cemeterial installations) and provide support to state and tribal veterans cemeteries. Although this amount is 9% more than the FY20 request, the major construction portion is down $78,000,000 from FY20 and state and tribal veterans cemeteries grants remains steady with a request for $45,000,000. Construction of new interment options and acquisition of suitable land continue to be challenges for NCA. VA must continue to work to provide the right balance of options for veterans seeking interment in rural, urban, state, and tribal cemeteries while maximizing every dollar of budget authority.

Vocational Rehabilitation and Employment

The Vocational Rehabilitation & Employment (VR&E) Program is structured to provide tailored and individualized counseling services to eligible disabled veterans who are experiencing barriers to employment. Over the years, this program has undergone many changes and faced challenges in consistency from counselor to counselor and has also experienced difficulty in

providing accurate outcome measures. As VR&E continues to update their information technology systems and internal policies, the Committee will continue to provide oversight and work with VA to ensure eligible service-connected disabled veterans are receiving the proper services to place them into meaningful employment or into a position of stable independent living.

VBA will reallocate 166 FTE to the VR&E Program, 135 of whom will be Vocational Rehabilitation Counselors (VRC). This reallocation will assist in supporting the anticipated growth in the VR&E program and maintaining the 1:125 counselor to veteran ratio, as required by Public Law 114-223. VR&E should focus on optimizing the workload for the VRCs so they can focus on providing direct services for veterans rather than administrative functions. The Committee will continue to monitor and carefully review the caseloads for VRCs to ensure the workforce increase is allocated in a manner to focus on assisting veterans with critical counseling and adjacent services.

Toxic Exposures

The VA is requesting increases of 10% and 9% for the Post Deployment Health Services (PDHS), which assess the impact of deployment/environmental exposures on veterans and develops related policy, research, education, and health care strategies. PDHS manages several surveillance programs, including review of health for veterans who served in Vietnam, the Gulf War, and Operation Enduring Freedom (OEF)/Operation Iraqi Freedom (OIF)/Operation New Dawn (OND)/Operation Inherent Resolve (OIR).

The VA needs adequate resources to work with the Department of Defense to map out a servicemember's military tenure and account for their health outcomes and potential health impacts to their offspring. Multiple trajectories of effort currently exist, including several registries for different cohorts of veterans and epidemiological research. As the VA and DoD continue to work toward full operational capability of the Individual Longitudinal Exposure Record (ILER) system, adequate resourcing of the current efforts underway will be essential toward achieving a system where every veteran can have faith that every aspect of their service-related health needs will be addressed.

Homeless Veterans Programs

VA has received increased funding for services to assist homeless veterans and prevent veteran homelessness each year since 2009, when VA announced an ambitious goal to end Veteran homelessness. Each year, thousands of local communities around the country conduct one-night "Point-in-Time" estimates of the number of persons experiencing homelessness—in emergency shelters, transitional housing programs and in unsheltered locations. According to the HUD Point in Time (PIT) count, 37,085 veterans experienced homelessness nationwide in January 2019, which alludes to challenges in implementing federal assistance programs and creates the question of how effective these programs are for veterans. This is why I requested that the Government Accountability Office (GAO) review federal assistance programs for homeless veterans. Potential opportunities exist to improve the way federal agencies collaborate and conduct

performance measurement to maximize federal dollars. I look forward to results of the GAO study to learn where additional investments in VA homeless programs will be most beneficial.

Transition and Economic Development

The Office of Transition and Economic Development (TED), established in 2018, requests $111.2 million in budget authority to provide a central point of integration for servicemembers and veterans so they can achieve their personal goals and sustain economic success. VA's request includes an increase to develop curriculum focused on targeted healthcare to reflect the multitude of cohorts of veterans that VA serves, and expand TED's ability to analyze and report outcome data obtained from the Post-Separation TAP (PSTAP) Longitudinal Study. By obtaining this data, VA will have the capability to better assess the performance and long term outcomes of the Department of Defense's(DoD) portion of the interagency Transition Assistance Program (TAP).

The VA's Solid Start Program, which began in December 2019, has delivered promising initial results in the areas of outreach to veterans, veteran benefit awareness, and mental health and suicide prevention. While the Department has not requested additional spending for Solid Start in FY21, I look forward to supporting this program to make certain it has the resources necessary to increase veteran awareness of the benefits they're entitled to and ensure that more veterans get the critical mental health services they require.

Sincerely,

Jerry Moran

Jerry Moran
Chairman

○