

of defense against waste, fraud, and abuse in Federal programs. In fiscal year 2014 alone, IGs made recommendations to improve the economy and efficiency of Federal programs that could save \$46.5 billion. As my colleague, Mr. MEADOWS, stated, this is a return of about \$18 for every \$1 invested in IG budgets.

The bill would make a number of improvements to the Inspector General Act. It will guarantee IG access to agency information. Unfettered access to agency information is a cornerstone of the IG's ability to conduct their missions effectively. The bill would also grant IGs the authority to issue subpoenas to compel testimony after careful review and with the concurrence of the Department of Justice. IGs would also be granted expedited authority to match Federal records across agencies under this bill, which would facilitate audits and help identify fraud and waste in Federal programs.

Mr. Speaker, I urge Members to support the Inspector General Empowerment Act, and I reserve the balance of my time.

Mr. MEADOWS. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I wanted to thank Chairman CHAFFETZ for his vision and Ranking Member CUMMINGS for working in a bipartisan way to not only empower our IGs, but give them the tools necessary to do what they do best; that is, to work on behalf of the American taxpayer.

Mr. Speaker, I also want to let Congresswoman LAWRENCE know that I have no further speakers at this point and am prepared to close.

I reserve the balance of my time.

Mrs. LAWRENCE. Mr. Speaker, I, again, give my support to this bill. I want to note that this is bipartisan. So often we have many disagreements on either side of the aisle about policy. It is a good day in Congress when we work together in a bipartisan way to empower our Federal agencies while saving money and creating efficiencies.

Mr. Speaker, I yield back the balance of my time.

Mr. MEADOWS. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I would like to thank the gentleman from Michigan (Mrs. LAWRENCE), my good friend. She well notes that not only is this a bipartisan bill, but it is one that is widely supported. I would also like to thank our respective staffs for the hard work that they have put in on crafting this particular piece of legislation. I think it becomes a powerful tool.

Mr. Speaker, I yield back the balance of my time.

Mr. CUMMINGS. Mr. Speaker, I strongly support the Inspector General Empowerment Act.

Inspectors General play a crucial role in making the federal government more effective and efficient. The bill we are considering today will help the IGs do their jobs even better. I appreciate the time and effort that Oversight Committee Chairman JASON CHAFFETZ and his

staff put into making this bill a truly bipartisan product. I also want to thank Representative MARK MEADOWS for his work on this bill.

This bill would make crystal clear that Inspectors General have the right to access any information available to the agency the IG oversees. An agency could not deny an IG access to information unless Congress expressly limits the rights of an IG to access the information in a statute.

The bill includes special provisions for grand jury information held by the Department of Justice. Under the bill, the IG for DOJ would have unfettered access to grand jury information, but the Attorney General could limit access to grand jury information for other agency IGs under certain exceptions. This language was painstakingly worked out with feedback from DOJ and the Inspectors General.

The Inspector General Empowerment Act would also give Inspectors General the ability to subpoena witnesses. This would be a significant new authority.

I believe most IGs would act responsibly and use this authority only when absolutely necessary. There is a potential for abuse, however, so the bill includes several safeguards. The bill would require an IG, before issuing a subpoena, to go through two reviews.

The first review would be conducted by the Council of Inspectors General for Integrity and Efficiency. A panel of three Inspectors General would approve or deny any request by an IG to issue a subpoena for witness testimony. The second review would be conducted by the Attorney General, who would have the opportunity to object if the subpoena would interfere with an ongoing investigation. I believe the bill strikes a careful balance in granting IGs the authority to interview witnesses outside of the government while also providing these important checks against potential abuse.

The Inspector General Empowerment Act would also make needed reforms to the process used for investigating allegations of wrongdoing by Inspectors General. The current process can be agonizingly slow. The bill also contains several other reforms aimed at helping IGs perform independent audits and investigations.

This is a good bill, and I urge my colleagues to support it.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from North Carolina (Mr. MEADOWS) that the House suspend the rules and pass the bill, H.R. 2395, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

FEMALE VETERAN SUICIDE PREVENTION ACT

Mr. MILLER of Florida. Mr. Speaker, I ask unanimous consent to take from the Speaker's table the bill (S. 2487) to direct the Secretary of Veterans Affairs to identify mental health care and suicide prevention programs and metrics that are effective in treating women veterans as part of the evaluation of such programs by the Sec-

retary, and for other purposes, and ask for its immediate consideration in the House.

The Clerk read the title of the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Florida?

There was no objection.

The text of the bill is as follows:

S. 2487

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Female Veteran Suicide Prevention Act".

SEC. 2. SPECIFIC CONSIDERATION OF WOMEN VETERANS IN EVALUATION OF DEPARTMENT OF VETERANS AFFAIRS MENTAL HEALTH CARE AND SUICIDE PREVENTION PROGRAMS.

Section 1709B(a)(2) of title 38, United States Code, is amended—

(1) in subparagraph (A), by inserting before the semicolon the following: ", including metrics applicable specifically to women";

(2) in subparagraph (D), by striking "and" at the end;

(3) in subparagraph (E), by striking the period at the end and inserting "; and"; and

(4) by adding at the end the following new subparagraph:

"(F) identify the mental health care and suicide prevention programs conducted by the Secretary that are most effective for women veterans and such programs with the highest satisfaction rates among women veterans."

The bill was ordered to be read a third time, was read the third time, and passed, and a motion to reconsider was laid on the table.

□ 1700

FISCAL YEAR 2016 DEPARTMENT OF VETERANS AFFAIRS SEISMIC SAFETY AND CONSTRUCTION AUTHORIZATION ACT

Mr. MILLER of Florida. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4590) to authorize the Secretary of Veterans Affairs to carry out certain major medical facility projects for which appropriations are being made for fiscal year 2016, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4590

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Fiscal Year 2016 Department of Veterans Affairs Seismic Safety and Construction Authorization Act".

SEC. 2. AUTHORIZATION OF CERTAIN MAJOR MEDICAL FACILITY PROJECTS OF THE DEPARTMENT OF VETERANS AFFAIRS.

(a) AUTHORIZATION.—The Secretary of Veterans Affairs may carry out the following major medical facility projects, with each project to be carried out in an amount not to exceed the amount specified for that project:

(1) Seismic corrections to buildings, including retrofitting and replacement of high-risk buildings, in San Francisco, California, in an amount not to exceed \$175,880,000.

(2) Seismic corrections to facilities, including facilities to support homeless veterans,

at the medical center in West Los Angeles, California, in an amount not to exceed \$100,250,000.

(3) Seismic corrections to the mental health and community living center in Long Beach, California, in an amount not to exceed \$282,100,000.

(4) Construction of an outpatient clinic, administrative space, cemetery, and columbarium in Alameda, California, in an amount not to exceed \$83,782,000.

(5) Realignment of medical facilities in Livermore, California, in an amount not to exceed \$188,650,000.

(6) Construction of a replacement community living center in Perry Point, Maryland, in an amount not to exceed \$92,700,000.

(7) Seismic corrections and other renovations to several buildings and construction of a specialty care building in American Lake, Washington, in an amount not to exceed \$13,830,000.

(b) AUTHORIZATION OF APPROPRIATIONS FOR CONSTRUCTION.—There is authorized to be appropriated to the Secretary of Veterans Affairs for fiscal year 2016 or the year in which funds are appropriated for the Construction, Major Projects, account, \$937,192,000 for the projects authorized in subsection (a).

(c) LIMITATION.—The projects authorized in subsection (a) may only be carried out using—

(1) funds appropriated for fiscal year 2016 pursuant to the authorization of appropriations in subsection (b);

(2) funds available for Construction, Major Projects, for a fiscal year before fiscal year 2016 that remain available for obligation;

(3) funds available for Construction, Major Projects, for a fiscal year after fiscal year 2016 that remain available for obligation;

(4) funds appropriated for Construction, Major Projects, for fiscal year 2016 for a category of activity not specific to a project;

(5) funds appropriated for Construction, Major Projects, for a fiscal year before fiscal year 2016 for a category of activity not specific to a project; and

(6) funds appropriated for Construction, Major Projects, for a fiscal year after fiscal year 2016 for a category of activity not specific to a project.

SEC. 3. SUBMISSION OF INFORMATION.

Not later than 90 days after the date of the enactment of this Act, for each project authorized in section 2(a), the Secretary of Veterans Affairs shall submit to the Committees on Veterans' Affairs of the House of Representatives and the Senate the following information:

(1) A line item accounting of expenditures relating to construction management carried out by the Department of Veterans Affairs for such project.

(2) The future amounts that are budgeted to be obligated for construction management carried out by the Department for such project.

(3) A justification for the expenditures described in paragraph (1) and the future amounts described in paragraph (2).

(4) Any agreement entered into by the Secretary regarding the Army Corps of Engineers providing services relating to such project, including reimbursement agreements and the costs to the Department of Veterans Affairs for such services.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Florida (Mr. MILLER) and the gentlewoman from Florida (Ms. BROWN) each will control 20 minutes.

The Chair recognizes the gentleman from Florida.

GENERAL LEAVE

Mr. MILLER of Florida. Mr. Speaker, I ask unanimous consent that all Mem-

bers may have 5 legislative days in which to revise and extend their remarks and add any extraneous material on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Florida?

There was no objection.

Mr. MILLER of Florida. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of H.R. 4590, as amended, the Fiscal Year 2016 Department of Veterans Affairs Seismic Safety and Construction Authorization Act.

This bill, which I have sponsored, would authorize seven major medical facility projects in San Francisco, California; West Los Angeles, California; Long Beach, California; Alameda, California; Livermore, California; Perry Point, Maryland; and American Lake, Washington.

These projects will correct seismic safety issues in high-risk VA medical facilities, provide housing and support services for homeless veterans, increase the availability of outpatient care, and replace outdated buildings with modern ones that are better suited to providing the high-quality care that our veterans deserve. Each of these projects was requested in the President's budget submission for fiscal year 2016, and funds have already been appropriated for them.

Many in this Chamber are well aware of the debacle that characterized VA's management of the Denver replacement hospital facility construction project. Cost overruns and extensive delays had become the status quo for mostly all VA major construction projects. In the case of Denver, the price tag more than doubled from the initial estimate. As a result of that, for all projects costing over \$100 million going forward, we now call them "super construction" projects. A non-VA entity will assume project management responsibilities.

Of the seven projects to be authorized in this bill, six of them meet the super construction criteria. The Army Corps of Engineers will be managing those six projects. In light of that, I have reduced the total authorization for these projects slightly, since VA should no longer require funds that have been built into the projects for VA construction management.

With little transparency into what is actually required for VA to manage these projects supposedly in support of the Army Corps of Engineers, I hesitate to authorize any additional management funding without a full accounting of what is essential to completely execute these projects. This bill would require that VA would provide a full accounting of management expenditures for these projects, going forward.

Mr. Speaker, before we conclude debate on the VA construction bill, I feel obliged to discuss the absence of one particular project—the new replacement medical facility in Louisville, Kentucky.

First, the proposed construction project in Louisville has been criticized by local stakeholders who have expressed concerns regarding the parcel of land that VA has proposed constructing this new facility on. Those concerns were validated by the committee following an on-site investigation last year, and, as a result, VA has initiated an environmental impact study that is ongoing today. The EIS will take a year or more to complete and could very well result in a determination that VA pursue a different approach to ensuring that Louisville area veterans are provided the high-quality care they earned and deserve.

Given that, I believe it would be untimely and inappropriate for Congress to authorize this project before the EIS is complete. That conclusion is shared by VA construction officials, who stated themselves, in a briefing with committee staff earlier this year, that it would be premature to authorize the Louisville project at this time since the EIS is in progress and the way ahead for the project is uncertain.

Finally, VA has a disastrous history of building VA hospitals on time and on budget. The Denver construction project is \$1 billion—\$1 billion—over budget.

After opening the new Orlando hospital years late and hundreds of millions over budget, VA quietly settled with the Orlando hospital contractor for an additional \$213 million over the budget. And the New Orleans hospital is \$100 million over budget right now. In light of this track record, the strictest of scrutiny needs to be applied to major hospital projects going forward, and that must begin with Louisville.

Mr. Speaker, I urge all of my colleagues to join me in supporting this legislation.

I reserve the balance of my time, and I ask unanimous consent that the gentleman from Tennessee (Mr. ROE) control the balance of my time.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Florida?

There was no objection.

Ms. BROWN of Florida. Mr. Speaker, I yield myself such time as I may consume.

I rise today in support of H.R. 4590, the Fiscal Year 2016 Department of Veterans Affairs Seismic Safety and Construction Authorization Act.

The major duty of this committee is to make sure that our veterans have access to the best care they can receive, and authorizing construction or ensuring that existing facilities are structurally sound is very important.

All the facilities included in this bill—San Francisco, Los Angeles, Long Beach, Alameda, Livermore in California; Perry Point, Maryland; and American Lake, Washington—are all in need of major renovations to make them safe.

I am glad we are passing this bill today, and I look forward to breaking ground on these projects sooner rather

than later. I urge all Members to support this important legislation.

I reserve the balance of my time.

Mr. ROE of Tennessee. Mr. Speaker, I reserve the balance of my time.

Ms. BROWN of Florida. Mr. Speaker, I yield 4 minutes to the gentleman from California (Mr. MCNERNEY).

Mr. MCNERNEY. Mr. Speaker, I rise to speak in support of H.R. 4590, a bill to authorize funding for numerous Department of Veterans Affairs construction projects throughout the Nation.

Funding for many of these projects was already appropriated in fiscal year 2016 but needs authorization, and this is what the bill does.

I want to thank Chairman MILLER and Ranking Member BROWN for their work and commitment to our Nation's veterans and for bringing this bill to the floor.

The VA is currently challenged by a growing backlog in construction projects and old infrastructure. The VA manages over 6,000 buildings and nearly 34,000 acres of land. Additionally, more than 4,000 critical infrastructure gaps remain, which are estimated to cost between \$56 billion and \$68 billion to close. A growing backlog in construction projects and infrastructure is leading veterans to have to wait too long to receive the care they need and deserve.

This list of construction projects is also one of the reasons I have introduced H.R. 4129, the Jumpstart VA Construction Act. This bill provides for public-private partnerships at the VA to expedite construction opportunities at the VA. H.R. 4129 will help maximize partnerships between Federal and non-Federal entities and ensure that we avoid the systemic problems that have plagued the VA in the past, projects like Denver and Orlando.

Meanwhile, H.R. 4590 also includes funding for the Livermore realignment project, as was mentioned by the chairman and ranking member. This is a project that is very important to the veterans of the Central Valley of California, including my district.

This funding would provide for the construction of a 158,000-square-foot community-based outpatient clinic in French Camp, California. While vets have been waiting for years, I fought for this project for at least 8 years. The French Camp community-based outpatient clinic will serve 87,000 veterans across a wide geographic area that includes San Joaquin, Stanislaus, Calaveras, Tuolumne, and Alameda Counties, among others. California's Central Valley veterans confront many obstacles accessing the care they need from the VA.

I want to tell you a little story. In Stockton, California, it is about a 3-hour commute to the nearest VA center, which is in Palo Alto. The commute takes long because it is a distance and because there is tremendous traffic. I took the ride along with one of our veterans a couple of years ago, and it took all day to go in for a half-hour appointment.

Now, not every elderly gentleman can sit in a car for 3 hours one way and then 3 hours back. This is a real hardship. Not only can they not sit in a car for that long, but they may not even have that kind of transportation. So this is very important. I am sure that all of these projects have that kind of a story.

We need more facilities. We need this authorization. Congress approved the Central Valley community-based outpatient clinic and community center in 2004 as part of the VA's Capital Asset Realignment for Enhanced Services initiatives. In 2010, Congress appropriated \$55 million for land acquisition and to fund construction and planning. The project is ready to begin construction, and our Central Valley veterans are eager to see progress on a project that was promised to them in 2004.

The French Camp outpatient clinic would offer an array of services: primary care, mental health care, radiology, audiology, physical and occupational therapy, dental, and other specialty services throughout the telehealth system.

Veterans have sacrificed so much to protect our freedom and democracy. They deserve access to state-of-the-art healthcare facilities closer to home. I urge my colleagues to join me in supporting H.R. 4590.

Mr. ROE of Tennessee. Mr. Speaker, I continue to reserve the balance of my time.

Ms. BROWN of Florida. Mr. Speaker, I urge my colleagues to support H.R. 4590.

I yield back the balance of my time.

Mr. ROE of Tennessee. Mr. Speaker, I thank Chairman MILLER, Ms. BROWN, and Mr. MCNERNEY for their work on this bill.

I encourage all Members to support this legislation.

I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Florida (Mr. MILLER) that the House suspend the rules and pass the bill, H.R. 4590, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

ABIE ABRAHAM VA CLINIC

Mr. ROE of Tennessee. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 5317) to designate the Department of Veterans Affairs health care center in Center Township, Butler County, Pennsylvania, as the "Abie Abraham VA Clinic", as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 5317

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. FINDINGS.

Congress finds the following:

(1) Abie Abraham of Lyndora, Pennsylvania, was stationed during World War II with the 18th Infantry in New York; three years with the 14th Infantry in Panama; 15th Infantry, unassigned in China, while the U.S.S. Panay was sunk; 30th Infantry, Presidio, San Francisco; and the 31st Infantry, Manila, Philippines, for nine years.

(2) During World War II, Abraham fought, was captured, endured the Bataan Death March and as a prisoner of war for three and a half years, was beaten, stabbed, shot, survived malaria and starvation to be rescued by the 6th Rangers.

(3) Abraham stayed behind at the request of General Douglas MacArthur for two and a half more years disinterring the bodies of his fallen comrades from the Bataan Death March and the prison camps, helping to identify their bodies and see that they were properly laid to rest.

(4) After his promotion in 1945, Abraham came back to the United States where he served as a recruiter and then also served two years in Germany until his retirement with 30 years of service as a Master Sergeant.

(5) Abraham received numerous medals for his service, including the Purple Heart, and had several documentaries on the Discovery Channel and History Channel.

(6) Abraham wrote the books "Ghost of Bataan Speaks" in 1971 and "Oh, God, Where Are You" in 1977 to help the public better understand what our brave men endured at the hands of the Imperial Japanese Army as prisoners of war.

(7) Abraham was a life member of the Veterans of Foreign Wars, the American Legion, the Purple Heart Combat/Infantry Organization, the American Ex-POWs, the Disabled American Veterans, and the American Defenders of Bataan.

(8) Abraham was a volunteer at Veterans Affairs Butler Healthcare for 23 years from 1988 to 2011 and had 36,851 service hours caring for our veterans.

SEC. 2. ABIE ABRAHAM VA CLINIC.

(a) DESIGNATION.—The Department of Veterans Affairs health care center in Center Township, Butler County, Pennsylvania, shall after the date of the enactment of this Act be known and designated as the "Abie Abraham VA Clinic".

(b) REFERENCES.—Any reference in any law, regulation, map, document, paper, or other record of the United States to the health care center referred to in subsection (a) shall be deemed to be a reference to the "Abie Abraham VA Clinic".

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Tennessee (Mr. ROE) and the gentleman from Florida (Ms. BROWN) each will control 20 minutes.

The Chair recognizes the gentleman from Tennessee.

GENERAL LEAVE

Mr. ROE of Tennessee. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Tennessee?

There was no objection.

Mr. ROE of Tennessee. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of H.R. 5317, a bill to name the Department of Veterans Affairs VA healthcare center in Center Township,