Page

MILITARY CONSTRUCTION, VETERANS AFFAIRS, AND RELATED AGENCIES APPROPRIATIONS BILL, 2019

May 11, 2018.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. Dent, from the Committee on Appropriations, submitted the following

REPORT

together with

MINORITY VIEWS

[To accompany H.R. 5786]

The Committee on Appropriations submits the following report in explanation of the accompanying bill making appropriations for military construction, the Department of Veterans Affairs, and related agencies for the fiscal year ending September 30, 2019, and for other purposes.

CONTENTS

Purpose of the Bill	2
Summary of Committee Recommendation	2
Purpose of the Bill	1
Department of Defense:	4
	c
Military Construction	6
NATO Security Investment Program	16
Family Housing Construction and Operation and Maintenance	17
Department of Defense Family Housing Improvement Fund	18
Department of Defense Military Unaccompanied Housing Improvement	
Fund	19
Department of Defense Base Closure Account	19
Administrative Provisions	19
Department of Veterans Affairs:	
Veterans Benefits Administration	22
Veterans Health Administration	28
National Cemetery Administration	54
Departmental Administration	54
Administrative Provisions	67
Related Agencies:	

American Battle Monuments Commission	71
U.S. Court of Appeals for Veterans Claims	71
Cemeterial Expenses, Army	71
Armed Forces Retirement Home	72
Administrative Provisions	72
Department of Defense:	. –
Overseas Contingency Operations	73
Administrative Provisions	73
General Provisions	73
House of Representatives Report Requirements	
Statement of General Performance Goals and Objectives	74
Rescissions	75
Transfer of Funds	75
Disclosure of Earmarks and Congressionally Directed Spending Items	76
Changes in Application of Existing Law	77
Appropriations Not Authorized by Law	80
Program Duplication	82
Directed Rule Making	82
Full Committee Votes	83
Ramseyer Rule	
Comparison With the Budget Resolution	85
Five-Year Projection of Outlays	85
Assistance to State and Local Governments	85
Comparative Statement of New Budget Authority	86
State Project List	99
Overseas Contingency Operations Project List	111
Minority Views	

PURPOSE OF THE BILL

The purpose of the bill is to support our military and their families and provide the benefits and medical care that our veterans have earned because of their service to our Nation. This is accomplished through the programs funded in the bill, which provide the facilities and infrastructure needed to house, treat, train, and equip our military personnel to defend this Nation, both in the United States and abroad; provide the housing and military community infrastructure that supports a good quality of life for them and their families; and allow the military to maintain an efficient and effective base structure. The bill also funds a wide variety of assistance programs for veterans—disability and pension benefits, health care in many different settings, educational assistance, and home loan and insurance programs. Finally, the bill funds four related agencies that provide support to our Nation's heroes: the American Battle Monuments Commission, Cemeterial Expenses, Army (including Arlington National Cemetery), the United States Court of Appeals for Veterans Claims, and the Armed Forces Retirement Home.

SUMMARY OF COMMITTEE RECOMMENDATION

The Committee recommends \$206,040,134,000 in budget authority for the fiscal year 2019 programs and activities funded in the bill. The fiscal year 2019 recommendation is an increase of \$9,350,699,000 above the fiscal year 2018 enacted level and \$130,617,000 below the President's request. Of the increase over the fiscal year 2018 enacted level, \$5,171,624,000 is in mandatory programs. Included in the total budget authority \$109,120,059,000 mandatory budget authority in \$96,920,075,000 in discretionary budget authority.

The Committee recommendation highlights the continued commitment to our servicemembers and their families and to our vet-

erans. In discretionary budget authority, the bill is 4.5 percent over the fiscal year 2018 enacted level. The bill includes an increase in military construction, which is 3.8 percent above the fiscal year 2018 level, and an increase in the Department of Veterans Affairs budget, which is 4.8 percent over the fiscal year 2018 level. While the Committee recommendation continues essential support for servicemembers and veterans, it does not provide funds for projects or activities that lacked sufficient justification or were less mission-critical. Where it was prudent, the Committee recommendation rescinds prior year funding that is no longer needed for the purpose for which it was originally appropriated while leaving sufficient resources to close out contracts. Finally, the recommendation rescinds unobligated balances in certain military construction accounts.

The programs funded in the bill for the Department of Defense address the priorities of the Department's Agencies and the Services for numerous facility challenges that they face. The funds provided support readiness improvements with new construction, family housing, continued cleanup of military bases closed during previous Base Realignment and Closure rounds, support Combatant Commanders requirements where appropriate, and ensure that our military personnel and their families' quality of life is preserved.

The total recommended funding level for military construction and family housing, including base and Overseas Contingency Operations funding, including the European Reassurance Initiative, is \$11,253,420,000, which is \$412,420,000 above the fiscal year 2018 enacted level and \$130,617,000 below the budget request. The recommendation includes funding for Family Housing, funding for necessary construction on our bases, including barracks, health facilities and schools, and support for critical overseas investments. The recommendation also includes \$837,000,000 for the Services' unfunded priorities. In addition, the recommendation also includes \$921,420,000 for European Deterrence Initiative to help ensure the

protection of our allies.

The total funding level for fiscal year 2019 for the Department Veterans Affairs is \$194,469,059,000, an increase \$9,045,324,000 over the fiscal year 2018 enacted level. Of the total, \$109,120,059,000 is provided for mandatory benefit programs and \$85,349,000,000 is allocated to discretionary programs such as medical care, claims processing, and construction. In this bill, discretionary funding for the Department of Veterans Affairs is recommended at 4.8 percent over the fiscal year 2018 enacted level. For fiscal year 2019, \$70,699,313,000 for medical care has been appropriated in advance. The recommendation \$2,922,000,000, an increase of \$53,091,000 over the President's budget request for the administrative costs of Veterans Benefits Administration, including funding for scanning claims and staff overtime. The bill also provides \$174,748,000 for the Board of Veterans Appeals, a \$13,700,000 increase over fiscal year 2018, to target the growing caseload of appeals of initial benefits decisions. In addition, the Committee recommendation includes \$75,550,600,000 in advance appropriations for fiscal year 2020 for the four health care accounts of the Department and \$121,296,429,000 in advance appropriations for mandatory benefits programs for fiscal year 2020.

MANAGEMENT AND OVERSIGHT INITIATIVES

The Committee believes the effective stewardship of taxpayer dollars is of the highest priority. In the interest of eliminating waste, fraud, and abuse in Federal programs, the Committee has and will continue to use public hearings, briefings, information requests, and reviews by the Government Accountability Office and the Inspectors General to promote strong financial and program management, oversight and leadership at the Department of Defense, the Department of Veterans Affairs, and other agencies under the jurisdiction of this bill.

The fiscal year 2019 appropriations Act and the accompanying report address management challenges of the Federal agencies it funds, including directives to strengthen financial and program management, eliminate redundancy, and improve implementation and oversight of initiatives that support the mission of this bill. The Committee will use every means at its disposal to reduce mis-

management that results in waste, fraud, and abuse.

Department of Defense (DOD).—In addition to the notification and reporting requirements for military construction programs contained in Title 10, United States Code, the Committee's recommendations include several provisions requiring the Department of Defense to report on various aspects of military construction programs, or to provide notification to the Committee when certain actions are taken. The Committee also retains prior approval authority for any reprogramming of funds exceeding a specific threshold.

Department of Veterans Affairs (VA).—With the \$194,469,059,000 provided for VA in this bill and the increase in the number of veterans seeking VA medical services, the Committee believes it is important to strengthen its tools to monitor spending as well as the operating procedures of the VA workforce. The following initiatives

demonstrate the Committee's oversight focus:

VA electronic health record.—After at least a decade of Congressional encouragement to DOD and VA to develop a single electronic health record (EHR), VA has completed a contract to acquire the same EHR that DOD is adopting. The bill includes \$1,207,000,000 for the EHR contract in 2019, but also includes requirements for strict quarterly reporting of timelines, performance milestones, costs, implementation, and change management. The bill also requires the Government Accountability Office to conduct an ongoing review so that Congress can be informed of any problems at a point where they can be promptly and economically addressed.

Disability claims and appeals.—Thanks to the significant investments Congress has provided over the past seven years, VA has been able to hire the staff, acquire the technology, and change work processes necessary to reduce the disability claims backlog to an "effective" zero. But as the number of claims continues to increase and the number of appeals skyrockets once claims are decided, VA again runs the risk of falling into serious claims and appeals backlogs. The Committee recognizes this threat and provides \$53,091,000 above the Veterans Benefits Administration request to support staff overtime and digital claims scanning. The Committee hopes that with this additional investment and the recently passed legislation to reform the appeals process, Congress will have taken

the necessary management action to prevent veterans from enduring excessive waits to claim the disability benefits they deserve.

Information technology (IT).—The Committee continues to include bill language prohibiting obligation or expenditure of funds for information technology systems development until VA submits to the Committees a certification of the amounts. The bill limits the amount of funds that can be transferred into the IT account to 10 percent of the total of either the source or destination account. The bill contains language which permits the reprogramming of funds among development projects upon prior notification to, and ap-

proval by, the Committees.

Financial management system.—The Committee provides \$83,621,000 for the replacement of VA's antiquated financial management system. However, the Committee has concerns that VA may have problems managing the conversion without the planned management by the Department of Agriculture, which developed the system but has subsequently withdrawn its participation. Consequently, the Committee requires quarterly reporting by VA comparing actual performance in implementing the system to the metrics and timelines established in the initial operating plan required by the fiscal year 2018 appropriations bill. The Committee also requires its investigative staff to monitor periodically the system's development and report to the Committee.

Stricter control of construction funding.—In response to the egregious management of the Denver hospital construction project, permanent law blocks funding for major construction projects over \$100,000,000 in cost until VA certifies that it has contracted with a non-VA governmental entity to design and manage the project. The Committee receives quarterly briefings on the progress and cost of each facility managed by an outside entity. Several additional bill language provisions are included to enhance the Committee's capacity to conduct oversight on VA's facility construction efforts including: (1) no funding greater than \$7,000,000 may be reprogrammed between construction projects unless approved by the Committees on Appropriations of both Houses of Congress; (2) any change to the scope of a construction project is prohibited without the approval of the Committees; and (3) VA must report any bid savings of \$5,000,000 or more on projects as soon as they are identified.

High performance and sustainable building requirements.—The Committee recognizes that innovative technologies, including advanced wood products and recycled aerospace grade carbon fiber composite, have expanded the availability of materials with lower embodied energy for facilities that require exceptional durability and blast resistance. In addition, design techniques such as advanced framing contribute to lower material costs, increased energy efficiency, and reduced waste in facilities. Therefore, the Committee directs the Secretary of Defense to continue to utilize innovative renewable building materials, systems, and design techniques that support the requirements of UFC 1 200 02 and UFGS 06 17 19. Furthermore, the Committee directs the Secretary of Defense to work with universities, public agencies, and experienced non-profit organizations to develop a plan to expand the application of these innovative technologies in future military construction projects and report to the Committee no later than 90 days after

enactment of this Act on how the Department will implement the plan.

TITLE I

DEPARTMENT OF DEFENSE

MILITARY CONSTRUCTION OVERVIEW

Fiscal year 2018 enacted level (including rescissions)	10,462,617,000
Fiscal year 2018 enacted level	241,000,000
Fiscal year 2018 budget request	(130,617,000)

Military construction accounts provide funds for new construction, construction improvements, planning and design, and host nation support. Projects funded by these accounts include facilities for operations, training, maintenance, research and development, supply, medical care, and force protection, as well as unaccompanied housing, utilities infrastructure, and land acquisition.

Reprogramming guidelines.—The following reprogramming guidelines apply for all military construction and family housing projects. A project or account (including the sub-elements of an account) which has been specifically reduced by the Congress in acting on the budget request is considered to be a Congressional interest item and as such, prior approval is required. Accordingly, no reprogramming to an item specifically reduced below the threshold by the Congress is permitted, except that the Department of Defense may seek reprogramming for appropriated increments.

The reprogramming criteria that apply to military construction projects (25 percent of the funded amount or \$2,000,000, whichever is less) continue to apply to new housing construction projects and to improvements over \$2,000,000. To provide the services the flexibility to proceed with construction contracts without disruption or delay, the costs associated with environmental hazard remediation such as asbestos removal, radon abatement, lead-based paint removal or abatement, and any other legislated environmental hazard remediation may be excluded, if such remediation requirements could not be reasonably anticipated at the time of the budget submission. This exclusion applies to projects authorized in this budget year, as well as projects authorized in prior years for which construction has not been completed. Planning and design costs associated with military construction and family housing projects may also be excluded from these guidelines. In instances where prior approval for a reprogramming request for a project or account has been received from the Committees on Appropriations of both Houses of Congress, the adjusted amount approved becomes the new base for any future increase or decrease via below-threshold reprogramming (provided that the project or account is not a Congressional interest item as defined above).

In addition to these guidelines, the services are directed to adhere to the guidance for military construction reprogramming actions and notifications, including the pertinent statutory authorities contained in Department of Defense Financial Management Regulation 7000.14—R and relevant updates and policy memoranda. The Committee further encourages the Office of the Director of Na-

tional Intelligence to use a format similar to that used by the Office of the Secretary of Defense to submit reprogramming requests.

RestorationSustainment, andModernization(FSRM).—The Department of Defense is directed to continue describing on form 1390 the backlog of FSRM requirements at installations with future construction projects. For troop housing requests, form 1391 should describe any FSRM conducted in the past two years. Likewise, future requirements for unaccompanied housing at the corresponding installation should be included. Additionally, the forms should include English equivalent measurements for projects presented in metric measurement. Rules for funding repairs of facilities under the Operation and Maintenance accounts are described below:

(1) components of the facility may be repaired by replacement. Such replacement can be up to current standards or

(2) interior arrangements and restorations may be included

as repair;

(3) additions, new facilities, and functional conversions must be performed as military construction projects. Such projects may be done concurrently with repair projects as long as the final conjunctively funded project is a complete and usable fa-

(4) the appropriate service secretary shall notify the appropriate committees 21 days prior to carrying out any repair project with an estimated cost in excess of \$7,500,000. The Committee strongly encourages the services and defense agencies to indicate the plant replacement value of the facility to be repaired on each such notification.

Quarterly summary of notifications.—The Committee directs the services and the Office of the Secretary of Defense (on behalf of itself and defense agencies) to continue to submit a quarterly report listing all notifications that have been submitted to the Com-

mittees during the preceding three-month period.

Work in Progress or Planned (WIP) curve.—The Committee directs the services and the Office of the Secretary of Defense (on behalf of itself and defense agencies) to submit a WIP curve for each project requested in a budget submission over \$100,000,000 with the 1391 justification to the congressional defense committees.

Transfer of funds to and from the Foreign Currency Fluctuations, Construction, Defense Account.—The Committee directs the Department of Defense to submit a quarterly report to the Committees on Appropriations of both Houses of Congress on the transfer of funds from military construction and family housing accounts to the Foreign Currency Fluctuations, Construction, Defense account. The report shall specify the amount transferred to the Foreign Currency account from each military construction and/or family housing account, and all other accounts for which an appropriation is provided in this Act, during the preceding fiscal quarter, and the amounts transferred from the Foreign Currency account to the above accounts during the same period. This report shall be submitted no later than 30 days after the close of each fiscal quarter. In addition, the Department of Defense shall notify the Committees on Appropriations of both Houses of Congress within 7 days of transferring any amount in excess of \$10,000,000 to or from the

Foreign Currency account.

Bid savings.—The Committee has ascertained from cost variation notices required by 10 U.S.C. 2853 that the Department of Defense continues to have bid savings, although declining, on previously appropriated military construction projects. The Committee's recommendation therefore includes rescissions to the Air Force, NATO Security Investment Program and HAP accounts. The Committee directs the Secretary of Defense to continue to submit 1002 reports on military construction bid savings at the end of each fiscal quarter to the Subcommittee on Military Construction, Veterans Affairs, and Related Agencies of both Houses of Congress.

Incremental funding of projects.—In general, the Committee supports full funding for military construction projects if they are executable. However, it continues to be the practice of the Committee to provide incremental funding for certain large projects to enable the services to more efficiently allocate military construction dollars among projects that can be executed in the year of appropriation. Therefore, the Committee recommendation includes 12 projects that have been incrementally funded; however the full authorization of the projects will be provided in the fiscal year 2019

National Defense Authorization Act.

Federally Recognized Tribes.—The Committee notes our nation's commitment to honoring treaty and trust obligations to Federally Recognized Tribes. While military operations and facility protection are important, upholding our commitments to Indian Country must be an equal priority. It has been observed that the Department of Defense has struggled to proactively engage with affected Tribes at the start of the planning process to ensure meaningful consultation can occur. Moreover, the Department does not identify sufficient funds to cover mitigation and/or alternatives should they be agreed upon. To understand the scale of this problem, the Committee directs the Secretary of Defense to provide the Committee with a list of military construction projects where mitigation and/or changes to projects within the past five years where consultation with a Federally Recognized Tribe was required, the outcome of each consultation, a list of all project modifications and/or mitigation requests made by the Tribe (or Tribes) in question for each project, the cost of each measure, and which modifications and or mitigations were

Impacts of weather and security for Military Installations.—The Department of Defense must pay close attention to potential adverse impacts of the weather as a driver of instability. From sea level rise to increased drought and flooding across the country and the world, proper defense planning must include considerations related to weather impacts. The Committee urges the Secretary of Defense to plan infrastructure and other projects using the best available data and to mitigate risks to our armed forces serving domestically and abroad.

Joint Military Bases.—The Committee is concerned that Joint Bases lack a full complement of training facilities such as aquatic facilities for complete education. This often results in burdening local communities to attempt to accommodate training at insufficient facilities. The Department is encouraged to prioritize con-

struction of training facilities that will diminish impacts on surrounding communities and increase readiness.

Defense Access Roads.—The Committee is concerned about the lack of future planning for Defense Access Roads (DAR) and transportation infrastructure needs as continued flooding of vital access roads occurs more frequently. The Committee directs the Secretary of Defense to work with the Secretary of Transportation to prioritize DAR roads and projects specifically examining bases in communities that have experienced flooding by both non-storm surge flooding and flooding due to storm surge and report to the Committee no later than 30 days after enactment of this Act on its findings. Further, the Committee is concerned about the increasingly harmful impact of flooding on facilities at DOD's coastal military installations and on the roads and infrastructure to access these installations. In January 2018, the Office of the Assistant Secretary of Defense for Energy, Installations and Environment, initiated a preliminary Screening Level Vulnerability Assessment Survey of DOD installations worldwide. With this report and other similar reports by GAO, the Committee directs the Secretary of Defense to incorporate efforts from the reports to mitigate the effects of flooding on roads and infrastructure on domestic installations that are vital to military operations.

Enhancing force protection and security on military installations.—The Committee, in collaboration with the House Armed Services Committee, includes section 130 that provides \$50,000,000 to each of the military construction accounts for Army, Navy and Marine Corps and the Air Force to alleviate deficiencies in access control points, air traffic control towers, fire stations, and AT/FP deficiencies across the enterprise. There has been much concern on both sides of the aisle that these types of military construction projects continually fall short of securing funding in a fiscal year due to higher priorities within the Services. Each Service Secretary is directed to provide a spend plan for these additional funds no later than 30 days after enactment of this Act to the congressional defense committees.

MILITARY CONSTRUCTION, ARMY

Fiscal year 2018 enacted level	\$923,994,000
Fiscal year 2019 budget request	1,011,768,000
Committee recommendation in the bill	1,001,768,000
Comparison with:	
Fiscal year 2018 enacted level	77,774,000
Fiscal year 2019 budget request	(10,000,000)

The recommendation includes additional funding for the Army in section 125 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of the Secretary of Defense and submitted to Congress in priority order.

Aircraft maintenance hangars.—The Committee is concerned that

Aircraft maintenance hangars.—The Committee is concerned that many of our aircraft maintenance hangar facilities are unsafe, antiquated, and do not provide adequate space for storage and maintenance of our aircraft. For example, the current Combat Aviation Brigade, at Hunter Army Airfield, utilizes hangars that are outdated and require millions of dollars in funding for maintenance yearly. Therefore, the Secretary of the Army is directed to conduct a cost analysis on a review of Aircraft Hangars throughout the

Army enterprise and a plan to update these facilities. This analysis shall be submitted to the congressional defense committees no later

than 60 days after enactment of this Act.

Rapid deployment requirements.—The Committee is concerned that the Army is not adequately prioritizing logistics infrastructure on bases with rapid deployment requirements. Therefore, the Secretary of the Army is directed to report to the congressional defense committees no later than 60 days after enactment of this Act on the backlog of infrastructure and the plan to eliminate the back-

log by fiscal year.

Army Futures Command.—The Committee is aware that the Army is in the process of standing up a new Army Futures Command which is the most significant Army reorganization effort since 1973. This will be the fourth Army Command, and its mission is to drive the Army into the future to achieve clear overmatch in future conflicts. The Army has identified 15 locations where Army Futures Command could be located. The Committee is concerned that the Army is failing to consider existing locations that could be suitable for this new Command. The Committee directs the Secretary of the Army to provide a report on how the 15 locations were selected and identify current Army locations where Futures Command could be established no later than 30 days after enactment of this Act.

Access Control Points.—Since September 11, 2001, the Department has made significant safety improvements at base entry points across many installations, but more needs to be done. The Committee is concerned that many of the Army's access control points do not provide adequate controls for traffic flow on and off the installation. For example, the current access control points at Picatinny Arsenal need modernization to maintain its security and to enhance commercial and personnel traffic movement. The Committee is aware that the Office of the Secretary of Defense is conducting a risk assessment of certain access control points and developing a plan to update these facilities, including a cost estimate for each facility. The Committee looks forward to reviewing the report and the plan in coming weeks.

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

Fiscal year 2018 enacted level	\$1,553,275,000
Fiscal year 2019 budget request	2,543,189,000
Committee recommendation in the bill	2,100,298,000
Comparison with:	
Fiscal year 2018 enacted level	547,023,000
Fiscal year 2019 budget request	(442,891,000)

The recommendation includes additional funding for the Navy and Marine Corps in section 125 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of Secretary of Defense and submitted to Congress in priority order.

Public Law 115–141 provided funding for the TBS Fire Station at Quantico, Virginia therefore, the recommendation does not include funding for the project in fiscal year 2019 recommendation.

F–35 beddown.—The Committee is concerned that there is little coordination among the Navy and Marine Corps for the construction of aircraft and support facilities associated with the beddown

of F-35s. The Committee believes that it would not be prudent to have 5th generation air assets like the F-35 housed in inappropriate hangars that fail to protect the aircraft from the elements. Therefore, the Committee directs the Navy and Marine Corps to provide a detailed timeline by fiscal year and cost of F-35 facilities to the congressional defense committees no later than 60 days after enactment of this Act.

Shipyard Infrastructure.—The Committee recognizes the strategic and critical role our public shipyards play in the national security of our nation. However, our shipyards are in direct need of maintenance and upgrade. The Fiscal Year 2018 National Defense Authorization Act included language directing the Department of Defense to create a Shipyard Infrastructure Optimization Plan. This plan, included recommendations and future year projects that would help to restore our public shipyards in order to help support our fleet around the world. The Committee directs that the Secretary of Defense expedite or accelerate the funding of projects listed in the Future Years Defense Plan and Shipyard Infrastructure Optimization Plan necessary for national security requirements.

MILITARY CONSTRUCTION, AIR FORCE

Fiscal year 2018 enacted level	\$1,543,558,000
Fiscal year 2019 budget request	1,725,707,000
Committee recommendation in the bill	1,454,723,000
Comparison with:	
Fiscal year 2018 enacted level	(88,835,000)
Fiscal year 2019 budget request	(270,984,000)

The recommendation includes additional funding for the Air Force in section 125 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of the Secretary of Defense and submitted to Congress in priority order.

The recommendation includes a rescission of \$31,158,000 from unobligated balances in section 126 under Administrative Provisions.

Public Law 115–141 provided additional funding for increment I of the Presidential Aircraft Recap Complex. Therefore, the recommendation does not fully fund the Presidential Aircraft Recap Complex, Increment II as requested.

Air traffic control towers.—The Committee is concerned that the Department of the Air Force's Air Traffic Control Towers have been neglected over the years and funding for military construction has been deferred to the out years of budget submissions. Many of the air towers are deteriorating and antiquated, creating significant life, safety, and health concerns. In some cases, towers have developed extensive mold issues and contain health risks related to the use of asbestos and lead-based paint. Additionally, obstructed views in some cases prevent 100 percent positive visual control of aircraft landing and taxiing on the airfield. The Committee urges the Department of the Air Force to prioritize funding for these towers in a much timelier manner. The Committee believes that these towers are valuable national security assets that the Department of the Air Force should maintain in a manner that will ensure their vital role in protecting U.S. national security interests.

MIT/Lincoln Labs.—As previously stated, at times, the Committee incrementally funds projects. The Committee has incrementally funded the Air Force MIT/Lincoln Lab project commensurate with the outlay rate of funds reflected in budget documents. While the Committee does not provide full funding for this project, it strongly supports its completion and fully expects the Air Force to continue to prioritize funding for this project in executable increments.

MILITARY CONSTRUCTION, DEFENSE-WIDE

(INCLUDING TRANSFER OF FUNDS)

Fiscal year 2018 enacted level	\$2,811,513,000
Fiscal year 2019 budget request	2,693,324,000
Committee recommendation in the bill	2,465,738,000
Comparison with:	, , ,
Fiscal year 2018 enacted level	(345,775,000)
Fiscal year 2019 budget request	(227,586,000)

Transfer of funds.—The accompanying bill provides transfer authority to the Secretary of Defense to allow the transfer of funds to such appropriations of the Department of Defense available for military construction or family housing as the Secretary may designate.

The recommendation includes a reduction of \$10,000,000 from

contingency construction account.

The recommendation does not include \$10,000,000 for the Ambulatory Care Center Addition/Alteration at RAF Croughton due to the construction pause on other projects at the installation by the

Secretary of Defense and the EUCOM Commander.

Inadequate roads infrastructure.—The Committee is concerned that inadequate local, state, and federal roads and insufficient parking accommodations and structures are unable to accommodate the volume of cars and are causing delays for civilians and service members working at critical national security mission locations, such as the National Security Agency and United States Cyber Command. The Department of Defense is therefore directed to submit to the Committee a report detailing the locations in which traffic congestion and insufficient parking facilities potentially impact the performance of national security missions, and their detailed plans to mitigate these detrimental impacts no later than 60 days after enactment of this Act.

Information Technology Infrastructure for Military Construction Projects.—The Committee recognizes that information technology is an essential component in constructing modern facilities for military missions as well as planning for future requirements. Technology advancements can lead to increased productivity as well as efficiencies on energy and space, which impact military construction and modernization projects. It is essential that military planning keep up with advancements in technology in order to take advantage of these efficiencies and benefits. The mission-sets behind numerous military construction projects include requirements for access to multiple classified networks. The Committee is aware of technology that can streamline historically compartmented classified networks through cross domain solutions. Not only does this drastically impact future productivity for the workforce but it could also yield substantial savings and efficiencies on space, energy, and

HVAC requirements. In an effort to ensure these technology advancements are incorporated at the early stages of planning for military construction, the Secretary of Defense shall report to the Committee no later than 60 days after enactment of this Act on how each department is staying apprised of technology advancements, working with industry partners on ways to gain efficiencies and savings on military construction projects, and how they plan to utilize cross domain solutions early in the planning stages for

construction projects.

National Maritime Intelligence Center.—The National Maritime Intelligence Center (NMIC) is located on the Suitland Federal Center in Suitland, Maryland. The NMIC is an Intelligence Facility designed and built with NFIP funds completed in 1993. The Office of Naval Intelligence (ONI) is the host command of the NMIC. The NMIC facility is required to provide safe and adequate parking for all tenet commands, which include 3,700 employees. Since 2008, parking at the NMIC has been inadequate due to significant facility expansion for 700 new FTEs and the discovery of structural and safety deficiencies of the NMIC garage. NAVFAC engineers have assessed that useful life of the garage will expire in 2021–2023. Therefore, the Secretary of Defense is directed to provide a way forward to correct these deficiencies no later than 60 days after enactment of this Act.

Rhine Ordnance Barracks Medical Center Replacement.—In Public Law 115–141 the Committee directed the Director of the Defense Health Agency to report to the congressional defense committees: (1) specific changes in German energy law that affected the energy study; (2) what U.S. sources of energy the new German energy laws incorporate; (3) what U.S. sources are no longer able to be used in Germany; (4) what effect the changes in law have on other military construction projects, construction costs and current utilities contracts in the region; and (5) what effect this delay may have on other aspects of the Rhine Ordnance Barracks Medical Center Replacement Project. In addition to this requirement, the Committee directs the Director of the Defense Health Agency to provide to the congressional defense committees no later than 60 days after enactment of this Act: (1) an updated 1391 to include a WIP curve; (2) the total amount of funding for the utility plant that is within the military construction program; and (3) a list of other of appropriations, if any, that are being used for utility costs.

of appropriations, if any, that are being used for utility costs.

Installation resourcing.—The Committee is concerned that some DOD installations' access control points and roads do not provide adequate means on and off the installation. For example, the current access control points and roads at Fort Meade, Maryland need significant improvements to mitigate traffic congestion and accommodate the installation's growing population. Unfortunately, current installation management criteria only recognize Fort Meade as an Army installation, and limit its resourcing to an inappropriate, Army-only level. This Army-only funding level has continued despite an expanding joint-DOD and Federal tenant population that includes the National Security Agency, U.S. Cyber Command, DOD Consolidated Adjudications Facility, Defense Information Systems Agency, National Background Investigations Bureau, Environmental Research Laboratories, Architect of the Capitol, and the Defense Security Service. In fact, only 22 percent of the Fort Meade

installation's supported population is constituted by Army-affiliated personnel. With a growing population currently in excess of 55,000 personnel, Fort Meade, Maryland is now the Army's second largest installation. However, despite this large population, Fort Meade is only resourced at a level consistent with an installation supporting 12,000 Army personnel. Therefore, the Secretary of Defense is directed to submit a plan to the congressional defense committees no later than 180 days after enactment of this Act on the plan to resource installations hampered by inappropriate, service-only funding, at an installation support-level consistent with the missions performed.

DOD Installation Energy Policy.—DOD must ramp up its efforts to enhance energy security on its installations through a range of actions, including investing in renewable energy and smart technology that can shield mission-critical operations from disruptions to the power grid. According to a January 2017 report commissioned by the Pew Charitable Trusts (Power Begins at Home: Assured Energy for U.S. Military Bases), DOD could enhance energy security on installations and save hundreds of millions of dollars annually by investing in microgrids and renewable energy systems, and by increasing energy efficiency on military bases. The report found that microgrid power systems are more reliable than the stand-alone diesel generators typically used for backup power and could save \$8,000,000 to \$20,000,000 over a 20 year period. The report also found that DOD could save as much as \$1,000,000,000 a year simply by increasing the use of commercially available energy efficiency measures in its facilities. The Committee notes that military installations in Hawaii are among those at the forefront of DOD's efforts to increase energy efficiency and security, including projects to develop net-zero energy military housing and installation facilities, upgrade and retrofit systems to improve energy and water efficiency, and demonstrate microgrid technology. The Committee supports DOD's investments in energy efficiency, renewable energy systems, and energy security, including projects through the Energy Resilience and Conservation Investment Program [ERCIP]. The Committee encourages the Department to prioritize funding for energy-related projects, including renewable energy projects, to mitigate risk to mission-critical assets and promote energy security and efficiency at military installations.

GUARD AND RESERVE ITEM OF INTEREST

Fiscal Year 2018 National Guard Reporting Requirement.—Since fiscal year 2012 the Committee has noted the need to bolster National Guard resources and explore public-private partnerships with state and local governments. Due to the late passage of the fiscal year 2018 bill, the reporting requirement regarding this issue remains outstanding. Therefore, the Committee reiterates its interest in this report and looks forward to its submission.

MILITARY CONSTRUCTION, ARMY NATIONAL GUARD

Fiscal year 2018 enacted level	\$220,652,000 180,122,000
Committee recommendation in the bill	180,122,000
Fiscal year 2018 enacted level	
Fiscal year 2019 budget request	

The recommendation includes additional funding for the Army National Guard in section 125 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of the Secretary of Defense and submitted to Congress in priority order.

Army National Guard Readiness Centers Investment.—The Committee remains concerned by the failure of the Army to prioritize investment in Army National Guard Readiness Centers. These facilities are critical infrastructure in the protection of the homeland and in the responding to domestic emergencies. Their deteriorating conditions are detrimental to the readiness of the Army Guard and present significant safety concerns. The Committee encourages the Army to accelerate investments in Readiness Centers within the fiscal year 2020 future years defense program to include the \$1,200,000,000 for the Army National Guard transformation Plan.

MILITARY CONSTRUCTION, AIR NATIONAL GUARD

Fiscal year 2018 enacted level	\$171,491,000
Fiscal year 2019 budget request	129,126,000
Committee recommendation in the bill	129,126,000
Comparison with:	
Fiscal year 2018 enacted level	(42,365,000)
Fiscal vear 2019 budget request	

The recommendation includes additional funding for the Air National Guard in section 125 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of the Secretary of Defense and submitted to Congress in priority order.

MILITARY CONSTRUCTION, ARMY RESERVE

Fiscal year 2018 enacted level	\$83,712,000 64,919,000 64,919,000
Comparison with: Fiscal year 2018 enacted levelFiscal year 2019 budget request	(18,793,000)

The recommendation includes additional funding for the Army Reserve in section 125 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of the Secretary of Defense and submitted to Congress in priority order.

MILITARY CONSTRUCTION, NAVY RESERVE

Fiscal year 2018 enacted level	\$95,271,000
Fiscal year 2019 budget request	43,065,000
Committee recommendation in the bill	43,065,000
Comparison with:	
Fiscal year 2018 enacted level	(52,206,000)
Fiscal year 2019 budget request	

MILITARY CONSTRUCTION, AIR FORCE RESERVE

Fiscal year 2018 enacted level	\$73,535,000
Fiscal year 2019 budget request	50,163,000
Committee recommendation in the bill	50,163,000
Comparison with:	
Fiscal year 2018 enacted level	(23,372,000)
Fiscal year 2019 budget request	

The Committee recommendation includes additional funding for the Air Force Reserve in section 125 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of the Secretary of Defense and submitted to

Congress in priority order.

Air Force Reserve Hangars.—The Committee is concerned that many of the Air Force Reserve Hangars that have been damaged during the record breaking 2017 hurricane season are unsafe, antiquated, and do not provide adequate protection of Air Force Reserve air assets. For example, hangers located at Homestead Air Reserve Base have become wholly inadequate due to constrained military construction budgets and devastating storm damage and are putting equipment and air assets at risk. The Committee is concerned that this could be a problem throughout the Air Force Reserve enterprise with the recent reductions to the Department of Defense's Construction accounts. Therefore, the Secretary of the Air Force is directed to conduct a risk assessment on Air Force Reserve Hangars damaged by natural events throughout the Air Force Reserve enterprise and develop a plan to update these facilities in the fiscal years 2020–2024 future years defense plan. This assessment shall be submitted to the congressional defense committees no later than 30 days after this report is filed.

NORTH ATLANTIC TREATY ORGANIZATION SECURITY INVESTMENT PROGRAM

Fiscal year 2018 enacted level Fiscal year 2019 budget request Committee recommendation in the bill	\$177,932,000 171,064,000 171,064,000
Comparison with:	
Fiscal year 2018 enacted level	(6,868,000)
Fiscal year 2019 budget request	

The recommendation includes a rescission of \$25,000,000 from unobligated balances under Administrative Provisions.

The North Atlantic Treaty Organization Security Investment Program (NSIP) consists of annual contributions by NATO member countries. The program finances the costs of construction needed to support the roles of the major NATO commands. The investments cover facilities such as airfields, fuel pipelines and storage, harbors, communications and information systems, radar and navigational aids, and military headquarters, both within NATO nations and for "out of area" operations such as Afghanistan.

The U.S. occasionally has been forced to temporarily delay the authorization of projects due to shortfalls in U.S. obligation authority. The Committee directs the Secretary of Defense to notify the Committee within 14 days of the U.S. taking action to temporarily delay the authorization of projects, or to temporarily withhold funds from previously authorized projects, due to shortfalls in U.S.

obligation authority.

FAMILY HOUSING OVERVIEW

Fiscal year 2018 enacted level	\$1,409,437,000
Fiscal year 2019 budget request	1,582,632,000
Committee recommendation in the bill	1,582,632,000
Comparison with:	
Fiscal year 2018 enacted level	173,195,000
Fiscal year 2019 budget request	

Family housing construction accounts provide funds for new construction, construction improvements, the Federal government costs for family housing privatization projects, and planning and design. The operation and maintenance accounts provide funds to pay for maintenance and repair, furnishings, management, services, utilities, leasing, interest, mortgage insurance, and miscellaneous expenses.

Foreign currency savings and sub-account transfers.—The Committee directs that savings in family housing operation and maintenance accounts from foreign currency re-estimates be used to maintain and repair existing family housing units. The Comptroller is directed to report to the Committees on Appropriations of both Houses of Congress on how these savings are allocated 90 days after enactment of this Act. In addition, the Committee directs the services and Defense agencies to notify the Committees on Appropriations of both Houses of Congress within 30 days of a transfer of funds between sub-accounts within the family housing construction and family housing operation and maintenance accounts, if such transfer is in excess of 10 percent of the funds appropriated to the sub-account to which the funds are being transferred. Notifications to the Committees shall indicate the sub-accounts and amounts that are being used to source the transfer.

Leasing reporting requirements.—The Secretary of Defense is directed to report to the Committees on Appropriations of both Houses of Congress quarterly on the details of all new or renewed domestic leases entered into during the previous quarter that exceed the cost threshold set by 10 U.S.C. 2828(b)(2), including certification that less expensive housing was not available for lease. For foreign leases, the Department is directed to: (1) perform an economic analysis on all new leases or lease/contract agreements where more than 25 units are involved; (2) report the details of new or renewed lease agreements that exceed the cost threshold set by 10 U.S.C. 2828(e)(1) 21 days prior to entering into such an agreement; and (3) base leasing decisions on the economic analysis.

Family Housing Construction, Army

Fiscal year 2018 enacted level	\$182,662,000
Fiscal year 2019 budget request	330,660,000
Committee recommendation in the bill	330,660,000
Comparison with:	
Fiscal year 2018 enacted level	147,998,000
Fiscal year 2019 budget request	·

FAMILY HOUSING OPERATION AND MAINTENANCE, ARMY

Fiscal year 2018 enacted level	\$348,907,000 376,509,000 376,509,000
Fiscal year 2018 enacted level Fiscal year 2019 budget request	27,602,000
Family Housing Construction, Navy and Mar.	INE CORPS
Fiscal year 2018 enacted level	\$83,682,000 104,581,000 104,581,000 20,899,000
Fiscal year 2019 budget request	20,899,000
Family Housing Operation and Maintenance, Marine Corps	NAVY AND
Fiscal year 2018 enacted level	\$328,282,000
Fiscal year 2019 budget request	314,536,000
Committee recommendation in the bill	314,536,000
Fiscal year 2018 enacted level	(13,746,000)
FAMILY HOUSING CONSTRUCTION, AIR FOR	CE
Fiscal year 2018 enacted level	\$85,062,000
Fiscal year 2019 budget request	78,446,000
Committee recommendation in the bill	78,446,000
Comparison with: Fiscal year 2018 enacted level	(6,616,000)
Fiscal year 2019 budget request	
Family Housing Operation and Maintenance,	Air Force
Fiscal year 2018 enacted level	\$318,324,000
Fiscal year 2019 budget request	317,274,000
Committee recommendation in the bill	317,274,000
Fiscal year 2018 enacted level	(1,050,000)
Fiscal year 2019 budget request	
Family Housing Operation and Maintenance, De	EFENSE-WIDE
Fiscal year 2018 enacted level	\$59,169,000
Fiscal year 2019 budget request	58,373,000
Comparison with:	58,373,000
Fiscal year 2018 enacted level Fiscal year 2019 budget request	(796,000)
DEPARTMENT OF DEFENSE FAMILY HOUSING IMPROV	EMENT FUND
Fiscal year 2018 enacted level	\$2,726,000
Fiscal year 2019 budget request	1,653,000
Committee recommendation in the bill	1,653,000
Comparison with: Fiscal year 2018 enacted level	(1,073,000)
Fiscal year 2019 budget request	

DEPARTMENT OF DEFENSE MILITARY UNACCOMPANIED HOUSING IMPROVEMENT FUND

Fiscal year 2018 enacted level	\$623,000 600,000 600,000
Comparison with:	600,000
Fiscal year 2018 enacted level	(23,000)
Fiscal year 2019 budget request	

DEPARTMENT OF DEFENSE BASE CLOSURE ACCOUNT

Fiscal year 2018 enacted level Fiscal year 2019 budget request Committee recommendation in the bill	\$310,000,000 267,538,000 322,390,000
Comparison with: Fiscal year 2018 enacted level Fiscal year 2019 budget request	12,390,000 54,852,000

The recommendation provides additional funding for the Navy to accelerate environmental remediation at installations closed under previous Base Closure and Realignment rounds. Furthermore, the Navy shall provide to the Committee a spend plan for these additional funds not later than 60 days after enactment of this Act.

riving that you will be committee a spent plan for the status tional funds not later than 60 days after enactment of this Act.

*Perfluorooctane Sulfonate (PFOS) and Perfluorooctanoic Acid (PFOA).—The Committee has provided additional funds for the continued review of contaminations across the Department of Defense from PFOS and PFOA. This issue not limited to one Service nor is to be funded solely out of a single account. DOD has inspected 524 DOD-wide installations and is directed to keep the Committee apprised of what contaminated locations are to be funded with the BRAC account only, as that is solely the jurisdiction of this bill.

Administrative Provisions

The bill retains 29 provisions that were in effect in fiscal year 2018 and includes two new administrative provision in fiscal year 2019. The administrative provisions included in the bill are as follows:

The bill includes section 101 prohibiting the use of funds for payments under a cost-plus-a-fixed-fee contract for construction where cost estimates exceed \$25,000. An exception for Alaska is provided.

The bill includes section 102 permitting the use of construction funds for the hire of passenger motor vehicles.

The bill includes section 103 permitting funds to be expended on the construction of defense access roads under certain circumstances.

The bill includes section 104 prohibiting construction of new bases in the United States without a specific appropriation.

The bill includes section 105 limiting the use of funds for the purchase of land or land easements that exceed 100 percent of value except under certain conditions.

The bill includes section 106 prohibiting the use of funds to acquire land, prepare sites, or install utilities for family housing except housing for which funds have been appropriated.

The bill includes section 107 limiting the use of minor construction funds to relocate any activity from one installation to another without prior notification.

The bill includes section 108 prohibiting the procurement of steel unless American producers, fabricators, and manufacturers have been allowed to compete.

The bill includes section 109 prohibiting the use of funds to pay real property taxes in foreign nations.

The bill includes section 110 prohibiting the use of funds to initiate a new installation overseas without prior notification.

The bill includes section 111 establishing a preference for United States architectural and engineering services where the services are in Japan, NATO member countries, or countries bordering the Arabian Sea.

The bill includes section 112 establishing a preference for United States contractors for military construction in the United States territories and possessions in the Pacific and on Kwajalein Atoll, or countries within the Central Command area of responsibility, except bids by Marshallese contractors for military construction on Kwajalein Atoll.

The bill includes section 113 requiring the Secretary of Defense to give prior notice to Congress of military exercises where construction costs exceed \$100,000.

The bill includes section 114 allowing funds appropriated in prior years to be used for new projects authorized during the current session of Congress.

The bill includes section 115 allowing the use of expired or lapsed funds to pay the cost of supervision for any project being completed with lapsed funds.

The bill includes section 116 providing that funds for military construction projects are available until the end of the fourth fiscal year following the fiscal year in which funds are appropriated, subject to certain conditions.

$(INCLUDING\ TRANSFER\ OF\ FUNDS)$

The bill includes section 117 allowing for the transfer of funds from Family Housing Construction accounts to the Department of Defense Family Housing Improvement Fund and funds from Military Construction accounts to the Department of Defense Military Unaccompanied Housing Improvement Fund.

$({\bf INCLUDING\ TRANSFER\ OF\ FUNDS})$

The bill includes section 118 providing transfer authority to the Homeowners Assistance Program.

The bill includes section 119 requiring that funds in this title be the sole source of all operation and maintenance for flag and general officer quarter houses, and limits the repair on these quarters to \$15,000 per year without notification.

The bill includes section 120 making funds in the Ford Island Improvement Fund available until expended.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 121 allowing the transfer of expired funds to the "Foreign Currency Fluctuations, Construction, Defense" account.

The bill includes section 122 prohibiting the use of funds to relocate a unit of the Army that would impact more than 200 personnel.

The bill includes section 123 allowing the transfer of funds among projects and activities in accordance with the reprogramming guidelines.

The bill includes section 124 prohibiting the use of funds for

projects at Arlington National Cemetery.

The bill includes section 125 providing additional funds for various military construction accounts and requires a spend plan for each.

(RESCISSIONS OF FUNDS)

The bill includes section 126 rescinding funds from prior appropriations Acts.

The bill includes section 127 defining the congressional defense committees.

The bill includes section 128 prohibiting the use of funds to close or realign Naval Station Guantanamo Bay. The provision is intended to prevent the closure or realignment of the installation out of the possession of the United States, and maintain the Naval Station's long-standing regional security and migrant operations missions.

The bill includes section 129 prohibiting the relocation of any element of REDHORSE until certain conditions are met.

The bill includes section 130 directing all amounts appropriated to Military Construction (all accounts) be immediately available and allotted for the full scope of the authorized project.

The bill includes section 131 providing additional funds for various military construction accounts for enhancing force protection and safety at military installations.

TITLE II

DEPARTMENT OF VETERANS AFFAIRS

Fiscal year 2018 enacted level ¹ Fiscal year 2019 budget request ¹ Committee recommendation in the bill ¹	\$185,423,735,000 194,469,059,000 194,469,059,000
Comparison with:	
Fiscal year 2018 enacted	\$9,045,324,000
Fiscal year 2019 budget request	
Fiscal year 2020 advance budget request	196,847,029,000
Fiscal year 2020 Committee recommendation in the bill	196,847,029,000
¹ All funding cited excludes amounts in the Medical Care Collections Fund.	

The Department of Veterans Affairs (VA) serves approximately 43,500,000 people—20,000,000 veterans and 23,500,000 family members and dependents who may be eligible for certain VA benefits. To serve adequately the nation's veterans, VA employs more than 385,000 people, making it one of the largest federal agencies in terms of employment.

VETERANS BENEFITS ADMINISTRATION (VBA)

COMPENSATION AND PENSIONS

(INCLUDING TRANSFER OF FUNDS)

This appropriation will provide funds for service-connected compensation payments to an estimated 5,283,000 veterans, survivors, and dependents in 2019. In addition, pension payments will be funded for 469,000 veterans and their survivors. The average cost per compensation case for veterans in 2019 is estimated at \$17,553

and pension payments are projected at \$13,345.

The appropriation includes authority to transfer funding not to

The appropriation includes authority to transfer funding not to exceed \$18,047,000 in 2020 to General Operating Expenses, Veterans Benefits Administration and Information Technology Systems. These funds are for the administrative expenses of implementing cost-saving provisions required by the Omnibus Budget Reconciliation Act of 1990, Public Law 101–508, the Veterans' Benefits Act of 1992, Public Law 102–568, and the Veterans' Benefits Improvements Act of 1994, Public Law 103–446. These cost-saving provisions include verifying pension income against Internal Revenue Service (IRS) and Social Security Administration (SSA) data; establishing a match with the SSA to obtain verification of Social Security numbers; and applying the VA pension cap for Medicaid-eligible single veterans and surviving spouses alone in Medicaid-covered nursing homes. The bill also continues to include language permitting this appropriation to reimburse such sums as may be earned to the Medical Care Collections Fund to help defray the operating expenses of individual medical facilities for nursing home care provided to pensioners.

Financial hardship and bankruptcy.—The Committee continues to support VA programs that combat the root causes of veteran and dependent financial hardship, which is a known contributory factor to negative outcomes such as mental health issues, substance use disorder, and suicide. For example, disability-related benefits not only honor the service and sacrifice of the veterans who receive them, but also help to replace lost wages and provide a critical source of economic well-being. The Committee is concerned by an inequity in current bankruptcy law that results in the inclusion of VA and DOD disability benefits in the calculation of a debtor's disposable income, while at the same time excluding Social Security disability benefits for non-veterans. The Department, therefore, is directed to submit to the Committee a report, no later than 90 days after enactment of this Act, outlining the legislative authority needed to end this inequity.

READJUSTMENT BENEFITS

Fiscal year 2019 enacted level	\$11,832,175,000
Fiscal year 2020 advance budget request	14,065,282,000
Fiscal year 2020 Committee recommendation in the bill	14,065,282,000
Comparison with:	
Fiscal year 2019 enacted level	2,233,107,000
Fiscal year 2020 budget request	

This appropriation finances the education and training of veterans and servicemembers through the Post-9/11 GI Bill and the All-Volunteer Force Educational Assistance Program. Supplemental education benefits are also provided to certain veteran members of the Selected Reserve and are funded through transfers from DOD. In addition, certain disabled veterans are provided with vocational rehabilitation, specially adapted housing grants, and grants for automobiles with approved adaptive equipment. This account also finances educational assistance allowances for eligible dependents of veterans who died from service-connected causes or have a total and permanent service-connected disability, as well as dependents of servicemembers who were captured or are missing in action. Almost 80 percent of the funds in the account support the Post-9/11 GI Bill.

VetSuccess on Campus (VSOC).—The Committee recognizes the tremendous value of counseling in assisting the transition of veterans from military service to academic life. Therefore, the Committee encourages VBA to expand the availability of services through the VSOC program to additional sites, with particular attention to geographic regions without current access to VSOC programs.

VETERANS INSURANCE AND INDEMNITIES

Fiscal year 2019 enacted level	\$109,090,000
Fiscal year 2020 advance budget request	111,340,000
Fiscal year 2020 Committee recommendation in the bill	111,340,000
Comparison with:	
Fiscal year 2019 enacted level	2,250,000
Fiscal year 2020 budget request	

The Veterans Insurance and Indemnities appropriation is made up of the former appropriations for military and naval insurance, applicable to World War I veterans; national service life insurance (NSLI), applicable to certain World War II veterans; servicemen's indemnities, applicable to Korean conflict veterans; and veterans mortgage life insurance, applicable to individuals who have received a grant for specially adapted housing.

The amount provided will enable the Department to transfer

The amount provided will enable the Department to transfer funding to the service-disabled veterans insurance fund and transfer additional amounts for payments for policies under the veterans mortgage life insurance program. These policies are identified under the Veterans Insurance and Indemnity appropriation since they provide insurance to service-disabled veterans unable to qualify under basic NSLI.

VETERANS HOUSING BENEFIT PROGRAM FUND PROGRAM ACCOUNT

	Program account	Limitation on direct loans for specially adapted housing loans	Administrative expenses
Fiscal year 2018 enacted level		(\$500,000)	\$178,626,000
Fiscal year 2019 budget request est.		(500,000)	200,612,000
Committee recommendation est. in the bill		(500,000)	200,612,000
Fiscal year 2018 enacted level			21,986,000
Fiscal year 2019 budget request			

The purpose of the home loan guaranty program is to facilitate the extension of mortgage credit on favorable terms by private lenders to eligible veterans. This appropriation provides for all costs, with the exception of the Native American veterans housing loan program, of the Department's direct and guaranteed loans programs. The Federal Credit Reform Act of 1990 requires budgetary resources to be available prior to incurring a direct loan obligation or a loan guaranty commitment. In addition, the bill requires all administrative expenses of a direct or guaranteed loan program to be funded through a program account. Loan guaranties are made to servicemembers, veterans, reservists, and single surviving spouses for the purchase of homes, condominiums, and manufactured homes and for refinancing loans. The Department guarantees part of the total loan, permitting the purchaser to obtain a mortgage with a competitive interest rate, even without a down payment if the lender agrees. The Department requires that a down payment be made for a manufactured home. With a Department guaranty, the lender is protected against loss, up to the amount of the guaranty, if the borrower fails to repay the loan.

Access problems.—The Committee remains concerned with the ability of veterans to benefit from the VA Home Loan Program given the shortage of appraisers approved by VA and program requirements that may deter prospective sellers from accepting applicants with VA loans. The Committee therefore directs the Secretary to provide a report to the Committee, no later than 180 days of enactment of this Act, which reviews the program's requirements and determines if viable options exist for improving VA home loan utilization rates. The report should include, if possible, a comparison of utilization rates between VA home loans and non-VA home loans. Additionally, the report should assess the impact of aligning VA's appraiser qualifications with those of the Appraisal Foundation, which is authorized by Congress as a source of appraisal standards and qualifications. This assessment should include the estimated change, if any, in the number of available appraisers and loan utilization rates that would result from such an alignment.

VOCATIONAL REHABILITATION LOANS PROGRAM ACCOUNT

	Program account	Limitation on direct loans	Administrative expenses
Fiscal year 2018 enacted level	\$30,000	(\$2,356,000)	\$395,000
Fiscal year 2019 budget request	39,000	(2,037,000)	396,000
Committee recommendation in the bill	39,000	(2,037,000)	396,000
Fiscal year 2018 enacted level	9,000	(319,000)	1,000
Fiscal year 2019 budget request			

This appropriation covers the subsidy cost of direct loans for vocational rehabilitation of eligible veterans and includes administrative expenses necessary to carry out the direct loan program. Loans of up to \$1,235 (based on indexed chapter 31 subsistence allowance rate) are available to service-connected disabled veterans enrolled in vocational rehabilitation programs when the veteran is temporarily in need of additional assistance. Repayment is made in monthly installments, without interest, through deductions from future payments of compensation, pension, subsistence allowance, educational assistance allowance, or retirement pay. Most loans are repaid in full in less than one year. The Federal Credit Reform Act of 1990 requires budgetary resources to be available prior to incurring a direct loan obligation.

It is estimated that the Department will make 2,039 loans in fis-

cal year 2019, with an average amount of \$999.

NATIVE AMERICAN VETERAN HOUSING LOAN PROGRAM

Administrative expenses:	
Fiscal year 2018 enacted level	\$1,163,000
Fiscal year 2019 budget request	1,149,000
Committee recommendation in the bill	1,149,000
Comparison with:	
Fiscal year 2018 enacted level	(14,000)
Fiscal year 2019 budget request	

The Native American Veteran Housing Loan Program, as authorized by title 38 United States Code, chapter 37, subchapter V, provides the Secretary with authority to make direct housing loans to Native American veterans for the purpose of purchasing, constructing, or improving dwellings on trust lands, including Hawaiian Home Lands. Native Hawaiians, Alaska Natives, and Native Americans enroll in the military at higher rates than non-Natives. These loans are available to purchase, construct, or improve homes to be occupied as veterans' residences.

GENERAL OPERATING EXPENSES, VETERANS BENEFITS ADMINISTRATION

Fiscal year 2018 enacted level	\$2,910,000,000
Fiscal year 2019 budget request	2,869,909,000
Committee recommendation in the bill	2,922,000,000
Comparison with:	
Fiscal year 2018 enacted level	12,000,000
Fiscal year 2019 budget request	53,091,000

The General Operating Expenses, Veterans Benefits Administration account provides funding for VBA to administer entitlement programs such as service-connected disability compensation, education benefits, and vocational rehabilitation services.

The bill makes available through September 30, 2020, up to five

percent of these funds.

The Committee provides \$2,922,000,000 for the General Operating Expenses, VBA account, which is \$53,091,000 above the Administration request. The Committee intends that VA use these additional funds for the Veterans Claims Intake Program (VCIP) to scan paper claims and convert them into digital format. In addition, the Committee intends that VA use a portion of the additional funding to hire additional staff and finance overtime payments if

that becomes necessary to manage disability claims and appeals

backlogs.

Equitable relief.—The Committee understands that VA is continuing work on implementing new systems and protocols to eliminate instances of administrative error. As the Committee noted previously, if VA, during implementation of these system-wide reforms, erroneously ended equitable relief to eligible veterans initially deemed eligible, it would be placing an unfair burden on veterans and their families. The Secretary is, therefore, directed to continue to grant or extend equitable relief to eligible veterans initially deemed eligible in instances of administrative error. No later than April 1, 2019, the Secretary shall submit to the Committee a report containing a statement as to the disposition of each case recommended to the Secretary for equitable relief under 38 U.S.C 503

during the preceding calendar year.

Military sexual trauma (MST) claims.—The Committee is pleased with the increased focus on MST and encourages VA to continue to build on the strides that have been made and to include intensive training and specialized claims employees for MST-related claims. As the Committee has noted previously, like posttraumatic stress disorder (PTSD), MST can lead to other mental health disorders, such as anxiety and depression. Therefore, the Committee applauds VA's use of a relaxed evidentiary standard, such as that available to PTSD claimants, and urges the extension of this standard to those suffering from other mental health disorders as a result of MST. The Committee also urges VA to continue veteran outreach initiatives and publicize benefits veterans may be entitled to as a result of MST. Additionally, since MST is not gender-specific, the Committee encourages VA to provide equal treatment and assistance to all veterans affected by MST.

Outreach to remote locations.—The Committee urges VBA to renew efforts to increase presence and outreach to veterans living in remote and underserved areas, such as the Commonwealth of the Northern Mariana Islands, by sending VBA staff to these areas on a regular basis. Veterans living in these areas, particularly elderly and disabled veterans who may have difficulty accessing VBA services via the internet or phone, should have an opportunity to

speak, in-person, with VBA staff.

Claims prioritization.—The Committee is very concerned about ensuring the prioritization of the most vulnerable veterans in regard to initial claims processing and claims appeals. The Committee, therefore, urges VA to prioritize claims processing and appeals for veterans that are elderly, or in poor health, so that they may receive their benefits while those benefits are still able to assist them. Further, the Committee directs VA to provide a report within 30 days of the enactment of this Act. The report should detail VA's prioritization process, if any, in regard to initial claims and appeals by age, health status, and income. The report should also include information on any triggers that are used in such a process, or any triggers that VA assesses may be useful to achieve the objective of prioritizing these subgroups of veterans.

Veterans who participated in nuclear clean-up activities in Palomares, Spain and on Enewetak Atoll.—The Committee is concerned about the adjudication of service-connected disability claims for veterans who participated in nuclear clean-up activities in

Palomares, Spain and on Enewetak Atoll in the Marshall Islands. The Committee understands that some of these veterans' claims are not subject to the presumption of radiation exposure under 38 CFR 3.309(d), but rather are adjudicated on a case-by-case basis under the more burdensome requirements of 38 CFR 3.311. To understand the justification for this variation in claims adjudication, the Committee directs VA to submit a report no later than 90 days of the enactment of this Act. The report should assess the requirements in 38 CFR 3.309(d) and determine, based on scientific and medical data, whether the regulation should be modified to apply

to the group of veterans currently subject to 38 CFR 3.311.

Cholangiocarcinoma.—The Committee understands that some Vietnam veterans have been diagnosed with cholangiocarcinoma, a rare cancer, and that VA is currently conducting research to determine whether this disease occurs at a higher rate in such veterans than in the general population. The Committee also notes that less than one-third of claims for service connected disabilities related to this disease have been granted by VA. To better understand this affliction and the adjudication of these claims, the Committee directs VA to submit a report no later than 90 days of enactment of this Act. The report should include a status update of current research efforts and an assessment of how service-connected disability claim adjudication rates for this disease compare with other cancers.

Tactical Communication and Protective Systems (TCAPS).—The Committee understands that VA's Remote Order Entry System (ROES) is designed to allow VA and DOD audiologists to order hearing aids and related items for veterans and military personnel. However, it is not currently possible for clinicians to order devices that help prevent hearing loss, such as the U.S. Army's TCAPS, through ROES due to a lack of a contract vehicle. Based on information provided by VA, the lack of such a contract vehicle is due solely to an assessment by VA's Audiology and Speech Pathology Service (ASPS) of insufficient need. While the Committee understands that there may be minimal need among veterans, the same may not be true for military personnel given the environments to which they are routinely exposed. Further, preventing hearing loss for military personnel today, may reduce the number of veterans with hearing loss tomorrow. This, in turn, may reduce VA's future costs. Therefore, the Committee urges VA to work with DOD to determine if they have a need for a contract vehicle in ROES to allow the ordering of hearing loss prevention devices and to report to the Committee, within 90 days of the enactment of this Act, their decision and whether they plan to add these devices to ROES

Transition assistance.—The Committee is aware of VA's effort to expand veterans education connection centers at medical centers and outpatient clinics, such as the one established at the Louis Stokes Veterans Medical Center in Cleveland, Ohio. The Committee continues to encourage VA to explore opportunities for education connection centers at VA medical centers with a high need. Furthermore, the Committee directs VA to provide the Committee with a report detailing: 1) the current education connection centers project, 2) explanation of how the center currently benefits veterans it serves, and 3) its potential plans to expand the number of education connection centers. In addition, this report should include an action plan with a detailed timeline for possible further expansion to one education connection center in at least 10 of the 21 Veterans Integration Service Networks (VISNs) within the next 3 years, projected timelines for implementation of this expansion effort, an analysis of projected added benefits to veterans under the expansion, as well as potential funding costs and needs. This report shall be submitted to the Committee no later than 90 days after enactment of this Act.

Veterans service data.—The Committee continues to note employers' enduring interest in minimizing the barriers to veteran employment. Often, businesses seeking to hire veterans and take advantage of the Work Opportunity Tax Credit are faced with difficulty in verifying veterans' disabilities and service data. While the Committee recognizes the multiple means for veterans to obtain access to their DD 214 and medical records, the Committee also recognizes the benefits of making these documents available to prospective employers electronically in controlled settings. Unfortunately, data sharing agreements between VA, DOD, and States, which have addressed this concern, have not been maintained. The Committee therefore directs the Secretary to work with the Secretary of Defense and State governors to identify and implement opportunities to improve use of the Work Opportunity Tax Credit and support the employment of veterans.

VETERANS HEALTH ADMINISTRATION (VHA)

The Department operates the largest Federal medical care delivery system in the country, with 145 hospitals, 112 residential rehabilitation treatment programs, 133 nursing homes, 300 Vet Centers, 80 mobile Vet Centers, and 743 outpatient clinics. About 7,000,000 patients will be treated in 2019.

The Veterans Health Administration budget is comprised of five accounts: Medical Services, Medical Community Care, Medical Support and Compliance, Medical Facilities, and Medical and Prosthetic Research. For the first four accounts, the Administration has requested total resources for fiscal year 2020 of \$75,550,600,000 in direct appropriations to fund the four advance appropriations of the VHA. In addition, VA will receive an estimated \$3,443,000,000 in Medical Care Collections Fund in fiscal year 2019. The Committee also provides \$732,262,000 for medical and prosthetic research.

CHOICE PROGRAM AND NON-VA CARE

The Committee recognizes the need for and supports the provision of non-VA care for veterans who lack access to VA services because of distance from VA facilities or the lack of capacity to provide care in a timely way at certain facilities. Indeed, VA has operated some non-VA care programs for years. The Choice program was created in 2014 to address continuing patient access issues. While the program has resulted in significant increases in the number of patients treated, the Committee has been concerned about budgetary and management challenges that have developed with the Choice program. The Committee is pleased that the authorizing committees are in the midst of negotiating legislation to create one consolidated non-VA medical care program that includes both Choice and the multiple other non-VA care programs VA oper-

ates. Further, the authorizers plan to convert the program's budget to regular discretionary funding subject to annual appropriations once the new program has been implemented and regulations finalized. This change will bring greater stability and oversight of the program, although it presents a significant new funding requirement for the Committee. Additional mandatory funding is now expected to be required after May, 2018 and throughout the period of implementation of the new program. The Committee is ready to meet its responsibility of funding the new discretionary program, which may not be implemented until the end of fiscal year 2019.

The Committee will continue to use the budget structure first proposed by the Administration—to provide two separate accounts for Medical Services and Medical Community Care for non-VA care. That structure provides the most transparency for the Committee to monitor and control spending in these two areas. The Committee does not accept the more recent Administration proposal to combine both these funding streams into one account. Anticipating that there may be circumstances where the Department needs to transfer funding from one of these accounts to the other, the Committee continues to provide authority in section 228 to transfer funding from any VA account, except the administrative account for VBA, to the Medical Services account as well as section 202 allowing the transfer of funding between the four medical care accounts.

MEDICAL SERVICES

Fiscal year 2018 enacted level Fiscal year 2019 enacted level Fiscal year 2020 advance budget request Committee 2020 recommendation in the bill	49,161,165,000 48,747,988,000
Comparison with: Fiscal year 2019 enacted level Fiscal year 2020 budget request	$(413,\!177,\!000)$

This appropriation provides for medical services of eligible veterans and beneficiaries in Department medical centers, outpatient clinic facilities, contract hospitals, State homes, and outpatient programs on a fee basis. VA also supports hospital and outpatient care through the private sector for certain dependents and survivors of veterans under the DOD civilian health and medical programs.

The bill provides the request of \$48,747,988,000 for advance fiscal year 2020 funding. The Committee has included bill language to make available through September 30, 2021, \$1,400,000,000 of the Medical Services advance appropriation for fiscal year 2020. The Committee is skeptical that this advance appropriation will be adequate to support full needs in fiscal year 2020. A year-to-year reduction in funding is highly unusual in this account.

Changes in funding requirements due to modeling.—The Committee expects VA to continue to include in the sufficiency letter required by section 117(d) of title 38, United States Code, that is due to the Congress on July 31 of each year, a description of any changes exceeding \$250,000,000 in funding requirements for the Medical Services account resulting from the spring recalculation of the Envollee Healthcare Projection Model

the Enrollee Healthcare Projection Model.

Caregivers program.—The caregivers program provides an unprecedented level of benefits to families with veterans seriously injured in the line of duty in post-9/11 service. These benefits include stipends paid directly to the family caregiver, enrollment for the

family member in the VA Civilian Health and Medical Program (CHAMPVA), an expanded respite benefit, and mental health treatment. The Committee provides the request of \$496,032,000 for caregivers, but is concerned that the funding levels estimated for the program have decreased significantly in the past two years. The Committee requests a report, no later than 60 days after enactment of this Act, explaining the reasons for the decrease in program funding estimates. It also continues the requirement from the fiscal year 2018 conference report on quarterly reporting on obligations for the caregivers program.

Allocation of health funding.—The Committee continues to be concerned that the process VA uses to allocate the health services appropriation through the VISNs and from them to the medical centers may shortchange the ultimate users because of excessive funding retained at headquarters or at the VISNs. The Committee continues to request a report each year, no later than 30 days after VA allocates the medical services appropriation to the VISNs, that identifies: (1) the amount of general purpose funding that is allocated to each VISN; (2) the amount of funding that is retained by central headquarters for specific purposes, with amounts identified for each purpose; and (3) the amount of funding that is retained by each VISN before allocating it to the medical centers, identifying separately the amounts retained for purposes such as network operations, network initiatives, and emergencies.

Mental health issues

The Committee provides \$8,608,500,000 for mental health programs, which is \$6,000,000 above the budget request. Of the amounts provided for mental health programs in fiscal year 2019, \$196,128,000 shall be used for suicide prevention outreach. The Department is directed to provide a report to the Committee, not later than 30 days after enactment of this Act, identifying a detailed ex-

penditure plan for all suicide outreach programs.

Skill-based interventions.—The Committee remains very concerned about the suicide rate for veterans and applauds VA for developing novel and innovative approaches for suicide prevention, such as the Department's Recovery Engagement and Coordination for Health—Veterans Enhanced Treatment (REACH VET) program. The Committee encourages VA to continue its efforts in this area and to prioritize the deployment of such technologies. The Committee also requests a report, within 90 days of enactment of this Act, which details the innovative application of technology to reduce the risk of suicide among veterans.

Posttraumatic growth programs.—To improve the mental health of veterans, the Committee directs VA to conduct a study regarding the potential effectiveness and benefits of nonprofit posttraumatic growth programs. The study should compare the effectiveness of these programs to traditional models of mental health care, assess the possible integration of such nonprofit programs into traditional mental health care programs, and estimate the budgetary impact of such integration. The Committee directs VA to complete the study within 90 days of the enactment of this Act and report back to the Committee within 30 days of the study's completion. The report should provide the study results, define post-traumatic growth

programs, and assess the feasibility, requirements, and cost of con-

ducting a pilot program to further assess their value.

Improving the Veterans Crisis Line (VCL).—The Committee continues to monitor the VCL to ensure veterans are receiving appropriate clinical care. To support this critical care, the Committee instructs the Secretary to ensure that Federal funding for the VCL is utilized to make any necessary improvements to VCL's operations in order to best meet the needs of veterans seeking assistance. This includes, but is not limited to, ensuring appropriate staffing for call centers and back-up centers, providing necessary training for VCL staff, and ensuring that staff are able to appropriately and effectively respond to the needs of veterans needing assistance through the VCL. In addition, the Committee requests that the Secretary provide the Committee a report, no later than 90 days after enactment of this Act, which contains an update detailing findings on the outcomes and efficacy of the VCL from the Veterans Crisis Line Study Act of 2017.

The Committee has repeated bill language included in the fiscal year 2018 Act requiring the VCL to: (1) provide to individuals who contact the hotline immediate assistance from a trained professional; and (2) to adhere to all requirements of the American Asso-

ciation of Suicidology.

Community clinic mental health services.—While the Committee is awaiting a briefing to learn more about how VA establishes mental health care in individual community-based outpatient clinics, the Committee remains concerned that in-person mental health is not available to veterans who require this care. The VA is encouraged to ensure critical in-person mental health services are available at facilities that currently are not served, even on a temporary basis.

PTSD service dogs.—The Committee recognizes the positive role that service, guide, and hearing dogs have played in mitigating veterans' disabilities and providing therapy, assistance, and rehabilitation. As such, the Committee urges VA to prioritize support of veterinary health care and other benefits for service dogs for wounded warriors. The Committee also notes that VA is currently engaged in a study to assess the potential therapeutic effectiveness of service dogs in the treatment of PTSD and that the study will be completed in June 2019. The Committee requests a copy of the results of this study as soon as it is completed.

Telehealth for mental health.—The Committee recognizes the strides made by the Department to reach rural communities with telehealth solutions. The Committee encourages further development and implementation of telemedicine to treat veterans with mental health issues in rural communities. Telemedicine should be used to its maximum capabilities by VA. The Committee requests VA to submit a report, no later than 90 days after enactment of this Act, providing an update on the VA plans to further expand

the use of telemedicine for mental health care.

Inpatient substance abuse care.—While veterans are able to access inpatient substance abuse care through VA, the Committee remains concerned that veterans still wait weeks to actually receive the inpatient support they need. In fact, the Committee understands from VA that the median time between screening and admission for Substance Use Disorder (SUD) Residential Rehabilita-

tion Treatment Programs (RRTP) increased from 15 days to 21 days between fiscal years 2017 and 2018. This is very concerning and the Committee urges VA to focus on reducing this burdensome wait time for substance abuse treatment. In addition, the Committee requests a report, no later than 90 days after enactment of this Act, which shows the trends in program wait times over the last five years and any proposed solutions to reduce such wait times.

Public-private partnerships.—The Committee continues to recommend that VA actively seek out public-private partnerships, in particular with research universities, teaching hospitals, and other partners, to expand upon its existing efforts related to suicide prevention, PTSD, traumatic brain injury (TBI), and substance use disorders. Additionally, the Committee directs VA to provide a report, within 90 days of enactment of this Act, regarding the feasibility of expanding public-private partnerships related to suicide prevention, PTSD, TBI, and substance use disorders.

Law enforcement liaison.—The Committee appreciates VHA's past efforts in working to educate the law enforcement community regarding the unique issues facing veterans, especially those returning from combat operations. Such education is invaluable in cases where veterans are determined to be an immediate threat to themselves or others. In such instances, it is imperative that the veteran's needs be addressed in an expeditious, humane, and respectful manner. The Committee, therefore, encourages VA to implement a program that would designate a VA liaison to work with local law enforcement to address such circumstances.

Non-citizen veteran outreach.—The Committee is concerned about the level of awareness regarding mental health services by at-risk, non-citizen veterans. It urges VA, therefore, to conduct more aggressive outreach targeting this group of veterans to offer mental health and other early intervention services, drug and alcohol services, and mental health counseling.

Cultural competency training.—The Committee recognizes the role that the National Center for Posttraumatic Stress Disorder (NCPTSD) plays in promoting better prevention, diagnoses, and treatment of PTSD. Consistent with findings from the Center, the Committee recognizes that minority groups of veterans, including African Americans and Latinos, are more likely than their white counterparts to develop PTSD. As such, the Committee directs VHA, in coordination with NCPTSD, to provide a report within 180 days of enactment of this Act detailing whether cultural competency training is provided to health care professionals serving veterans of color, and at what stage(s) in their career, and analyzing whether minority veterans receive quality and culturally appropriate care. This report shall also include recommendations on how to address the unique mental health needs of minority veterans, as well as the disparities in the care they receive.

Homeless assistance

The Committee provides \$1,773,534,000 for VA homeless assistance programs, in addition to an estimated \$5,633,442,000 for homeless veterans treatment costs. These programs include the Homeless Providers Grant and Per Diem, the Domiciliary Care for Homeless Veterans, the Supportive Services for Low Income Vet-

erans and Families, and the Department of Housing and Urban Development Department of Veterans Affairs Supported Housing (HUD-VASH) programs. Within this total, the bill includes \$340,000,000 for the Supportive Services to Veteran Families program, which is the same as the fiscal year 2018 funding level and

\$20,000,000 above the request.

Allocation of funding for homeless programs.—The Committee has been concerned about the Department's tentative decision last fall to convert almost \$1,000,000,000 of funding for homeless programs from Special Purpose funding to General Purpose funding. This proposal would have potentially risked funding for important programs such as the Supportive Services to Veteran Families program. While the Committee is pleased that the Department decided not to move forward with the proposal for fiscal year 2018, it expects VA to consult with the Committee before any attempt is made to change the manner in which funding allocations are made to the field for fiscal year 2019.

Grant and per diem (GPD) rate.—The Committee is concerned that the cost incurred by nonprofit organizations, who are providing clinical services as part of their GPD program, are not covered by the current GPD rate. VA is required to report back to the Committee, within 30 days of the enactment of this Act, on whether the current GPD rate is effectively covering the costs of clinical services and, if not, options for adjusting the GPD rate to ensure these nonprofit organizations have the necessary resources to cover the cost of providing the lifesaving clinical care our homeless veterans deserve.

Construction assistance for nonprofit organizations.—The Committee strongly supports innovative approaches and public-private partnerships that can help reduce homelessness among our veterans. As such, the Committee urges VA to assess the possibility of assisting nonprofit organizations with capital costs related to the construction of new housing units for homeless veterans on non-VA property, particularly those utilizing HUD–VASH vouchers. When considering assistance to such organizations, VA should limit its consideration to those that have secured over 50 percent of the needed financing so as to reduce the federal burden for establishing new housing.

HUD-VASH program.—The Committee continues to support the HUD-VASH program and reminds the Department to continue to provide the annual report on distribution of HUD-VASH vouchers

as requested in House Report 115–188.

Legal assistance for the Supportive Services for Veteran Families Program.—The Committee notes that university law schools may be willing to work with veterans on a pro-bono basis to provide legal assistance. This can result in additional benefits, such as training law students in veteran disability law and legal skills critical to providing advocacy within the VA system, as well as inspiring the next generation of lawyers to serve veterans. The Committee encourages the Supportive Services for Veteran Families (SSVF) program to work with grantees to expand their legal service offerings, particularly in rural areas where access to private legal assistance can be limited. The Committee further encourages VA to establish one or more pilot projects to partner SSVF grantees with

university law schools in rural areas to enhance legal assistance to veterans.

Female homeless veterans.—The Committee remains committed to helping homeless veterans and commends VA for its efforts in reducing homelessness among the veteran population. However, the Committee is concerned about VA's efforts to reduce homelessness among female veterans, and particularly those veterans with minor children. These veterans may be faced with additional challenges when trying to obtain homeless services from VA. The Committee urges the Department to address the challenges facing homeless female veterans.

Homeless veterans near the U.S.-Mexico border.—The Committee notes that there may be homeless veterans living near the U.S.-Mexico border who, historically, may not have been counted in point-in-time homeless surveys. The Committee encourages VA to work with HUD to develop strategies and recommendations for addressing U.S. veteran homelessness near the U.S.-Mexico border and to take into account these undercounted veterans when awarding HUD-VASH vouchers. VA shall report on these strategies and recommendations within 90 days of enactment of this Act.

Related needs of homeless veterans.—With significant help from the Committee, VA has made great strides in reducing veteran homelessness. The Committee believes that more could be done to address veterans' homelessness and remains interested in the feasibility, advisability, and cost of VA conducting a pilot program that would award grants to eligible organizations to provide furniture, household items, and other assistance to formerly homeless veterans who have transitioned to permanent housing. The Committee looks forward to the report requested in House Report 115–118 on this concept and expects the deadline for the report to be met.

Staffing issues

Medical staff retention.—The Committee expects VA to continue to report every six months on the number of medical staff who have left the VA system, including a summary of the principal reasons explaining their departure, and a detailed plan of how VA will address and mitigate the principal reasons providers leave. The data should be aggregated at the VISN level and should also include the percentage of staff in primary care versus specialty care and mental health care, and the percentage of medical staff at each facility who complete an exit survey upon their departure. Exit surveys should be conducted anonymously, including through the use of a location that allows for privacy, is not directly visible by another employee, and does not require the departing employee to input any personally identifiable data. In addition, the Committee directs VA to submit a separate report, within 90 days after enactment of this Act, on efforts to recruit and hire medical officers and nurses at each VA medical facility, as well as any impediments to such efforts. The report should include the resources provided for these efforts and recommendations for relevant legislation.

Advanced practice registered nurses.—The Committee is concerned that some VA facilities have failed to implement VA's final rule granting full practice authority to advanced practice registered nurses. While the Committee understands that implementation

must be voted on and approved by each facility's organized medical staff, the Committee urges the Secretary to work with the remaining facilities to ensure quick implementation of this directive.

Psychology internships.—The Committee understands that VHA each year uses the services of the Association of Psychological Postdoctoral and Internship Centers (APPIC), a nonprofit organization, to help select and match clinical psychologists for available VA internships. The Committee is concerned, however, that APPIC has repeatedly decided to not include psychologists from programs accredited only by the Psychological Clinical Science Accreditation System (PCSAS) in the match, even though VHA regulations recognize PCSAS-accredited programs. The Committee is also concerned with the lack of progress by VHA to require APPIC to address this issue and therefore urges VHA to request that APPIC modify its policy within 90 days of enactment of this Act.

Access for rural veterans

Office of Rural Health.—The Committee provides \$270,000,000 to improve access and quality of care for the more than 3,000,000 enrolled veterans residing in rural and highly rural areas. The VA Office of Rural Health (ORH) improves access and quality of care for enrolled veterans residing in geographically rural areas. Developing evidence-based policies and innovative practices to bring health care to rural areas is key to serving veterans in geographically remote areas, including remote facilities in Hawaii, many of whom would otherwise need to fly to reach their nearest VA facility. In addition to providing health care services, ORH's important work includes identifying barriers to health care delivery in rural areas and implementing new ways to deliver health care and services to veterans in these locations.

Operating plan.—The Committee directs ORH to submit to the Committee not later than 30 days after enactment of this Act an operating plan for fiscal year 2019 funding, as well as the fiscal

year 2020 funding provided in advance by this Act.

Rural Health Resource Centers.—Given the important role ORH's Rural Health Resource Centers play in expanding access to care, the Committee encourages VA to continue considering expanding these centers. ORH has played a major role in VA's overall strategy to combat opioid abuse by funding pilot programs through the Rural Health Initiative focused on pain coaching and modalities which increase veterans' access to alternatives to opioid-centered pain management. The Committee recommends that as ORH considers expansion, combatting the opioid epidemic and non-opioid pain management in rural areas remain key components of its focus.

Lack of rural health providers.—The Committee notes persistent issues for VA health facilities in rural areas in recruiting and retaining health providers in the face of national provider shortages and a highly competitive environment. The Committee encourages VA to continue to consider expanded use of doctors of osteopathic medicine and physician assistants, through both physical facilities and expanded access to telehealth services, to address the rural health provider gap.

Telehealth in rural areas.—The Committee is encouraged with recent efforts by VA with regard to investment in telehealth pro-

grams. Additionally, the Committee acknowledges the recent report submitted by VA outlining their collaboration efforts with several other Federal agencies on this issue. However, the report fails to provide an adequate explanation of the specific plan/strategy which VA will pursue to provide telehealth access to the 33 percent of veterans that reside in rural areas nationwide. The Committee remains concerned that not enough is being done to expand access to those veterans in rural areas with limited broadband internet access. The Committee directs the Secretary, and the VHA Office of Rural Health, to elaborate with specificity on measures to expand capabilities of telehealth to these regions, and continue collaboration with the Department of Agriculture, which has dedicated programs specifically for rural broadband access, as well as continued participation with the President's Rural prosperity Task Force. The Committee directs the department to submit a report to the Committee, no later than 90 days after enactment of this Act.

Women's issues

As the number of female veterans increases, VA needs to prioritize the expansion of health care services to accommodate women. This means more gender-specific services and the availability of appropriate infrastructure facilities to safeguard the privacy needs and proper gender-specific care and treatment of female veterans. The bill provides \$511,352,000 for VA to continue redesigning its women's health care delivery system and facilities to ensure women receive equitable, timely, and high-quality health care.

Women's access to medical services.—While the Committee is currently awaiting a report from VA on its plan to implement standards of care for female veterans, the Committee remains concerned that female veterans face remarkably different experiences than their male counterparts when transitioning in and out of combat roles, in between services, or back to civilian life and that VA is not adequately addressing the health needs of female veterans. These include obstetrics and gynecological care, treatment for gender-specific conditions and diseases, and female veteran suicide. The VA must ensure an improved quality of life for female veterans with gender-specific health care to meet their needs. Therefore, the Committee urges VA to continue its efforts to expand access to care in these areas and ensure the gender-specific health needs of female veterans are met.

Female medical staff.—The Committee supports the hiring of more female health care professionals in order to provide female veterans greater opportunities to choose the gender of their health care provider. To enhance the Committee's understanding of VHA's staff demographic, the Committee requests a report, no later than 90 days after enactment of this Act, on the number of female health care professionals hired by VHA each year over the past five years. The report should include information pertaining to job type and employment location.

Breast cancer screening guidelines.—The Committee commends the Department of Veterans Affairs decision to offer breast cancer screening and mammography to eligible female veterans beginning at age 40. However, the Department should be prepared to offer screening to eligible younger female veterans should a physician determine or risk factors warrant screening before age 40. The

Committee supports this effort to ensure that the care female veterans receive is consistent with the private sector, and the Committee will continue to monitor the Department's implementation of this policy. The Department should closely follow ongoing debate as the scientific community reaches a consensus on breast cancer screening and mammography coverage to provide veterans the best care possible. Bill language is included to ensure VA maintains this policy through fiscal year 2024.

Pharmacy issues

Vaccines.—To improve the health of veterans and to reduce health care costs due to avoidable hospitalizations and complications, the Committee directs VHA to incorporate, when available, peer-reviewed and published randomized and other high-quality, well-controlled clinical trials and economic data, particularly from the VA population, into its influenza vaccine procurement decisions and educational efforts to enable better informed decision making to positively impact the health of senior veterans.

Prescription drug abuse

Opioid abuse.—As the reports of increasing numbers of opioid overdoses roil the nation, the Committee is pleased that VA has taken an aggressive posture in reducing the volume of opioid prescriptions it dispenses and is turning to alternative approaches to pain relief, including the use of complementary medicine tools. The VA Opioid Safety Initiative, begun in 2013, has resulted in a 25 percent reduction in the number of veterans prescribed opioids for pain relief and the rate of overdose among veterans prescribed a prescription opioid has been cut in half. The Committee encourages VA to continue the challenging effort to reduce opioid use among veterans, half of whom suffer from chronic pain. The bill provides \$386,530,000 for opioid treatment and prevention efforts, of which \$52,025,000 is provided for activities authorized by the Comprehensive Addiction and Recovery Act of 2016 (CARA).

Opioid Therapy Risk Report.—The Committee urges VA to ensure that all VA providers who prescribe opioids use VA's Opioid Therapy Risk Report tool consistently, including prior to initiating opioid therapy, to ensure safe prescribing and to help prevent diversion, abuse, and double-prescribing. The Committee also urges VA to further improve the timeliness of data available in the tool to allow a provider to have real-time access to data. It is critical that VA clinicians have access to a patient's opioid therapy history from outside providers to ensure safe pain management care, as many veterans also seek care from providers in the community who may prescribe them medication.

State prescription drug monitoring programs.—The Committee notes that, with the problem of opioid use disorders escalating among veterans, it is very important that VA continue its efforts to partner with States to ensure that they have the capacity to exchange prescription drug information with VA. The Committee understands that two States currently have not installed the technology to exchange data from their State prescription drug monitoring boards with VA. VA is urged to assist these States to speed their exchange.

Opioid addiction treatment.—The Committee appreciates VA's submittal of a report to the Committee on VA's ongoing review of prescription practices and addiction treatment protocols for opioids. The Committee requests an update of this report, not later than 90 days after enactment of this Act, that describes VA's commitment to the goal of enabling veterans to become free of all opioids and having access to non-opioid alternative medications and recovery supports. In conjunction with its overall efforts to address opioid abuse, the Committee also encourages VA to explore the use of advanced data analytics to detect and deter abuse and to treat addiction.

Naloxone.—United States public health agencies have appropriately highlighted the risk of overdose from doses of opioids greater than 90 morphine milligram equivalents (MME) per day. However, the vast majority of patients, including the vast majority who die from overdose, are below 90 MME, making broad education about opioid-related risks essential for all patients prescribed opioids, regardless of dose or formulation. Hundreds of millions of patients receive prescriptions each year of immediate release (IR) lower MME opioids, such as hydrocodone and oxycodone. These opioids are commonly associated with abuse, are a common pathway to addiction, and present a risk of overdose. Some States have limited the prescribing of these IR opioids. An alternative approach may be to assess the benefit of providing Opioid Overdose Education and Naloxone Distribution (OEND), regarding how to prevent, recognize, and respond to an opioid overdose, including responding with naloxone, to patients prescribed opioids. Prescribers including dentists and other primary care providers have an opportunity to become more attuned to the risks of all opioids through the consideration of broad Opioid Overdose Education and co-prescribing naloxone to those with an opioid prescription. The Committee requests that VHA develop a strategy to test this hypothesis and consider executing a pilot program to assess the benefit for vet-

Complementary and integrative health (CIH).—The Committee supports VA's work in developing a plan to expand the scope of research, education, delivery, and integration of CIH into the health care services provided to veterans and urges its robust implementation. The Committee supports the progress being made to reduce misuse and abuse of opioids and to improve pain care and encourages VHA to accord priority for CIH to VISNs or VA medical centers with a history of opioid prescription rates, or current opioid prescription rates, inconsistent with the standards of appropriate

and safe care.

Opioid treatment alternatives.—The Committee notes that the United States is grappling with an opioid epidemic. Some areas, such as Appalachia, are disproportionately hard-hit by this crisis. The Committee, therefore, encourages VA to ensure pain treatment alternatives to opioids, such as chiropractic care, are available to veterans where they are most needed. Further, the Committee encourages VA to integrate such treatments into VA's medical centers or clinics to be provided by VA staff, or on a contract basis where needed.

Pain University.—The Committee recognizes the excellent and inspiring work from the Tomah VA facility in Tomah, Wisconsin,

which has successfully implemented a program called Pain University. The program seeks to incorporate alternative medicine, such as acupuncture and meditation, to reduce veterans' reliance on prescription pain medications, which have a higher likelihood of addiction leading to substance abuse. The Pain University program was recognized as a gold status program by VHA in 2016 for its work. The Committee encourages VHA to continue to expand implementation of the Pain University program to other VA clinics so more veterans have access to non-addictive pain management therapies.

Substance abuse disorder data.—The Committee supports the VA's ongoing work to reduce substance use disorder among veterans. The Committee directs VA to provide a report no later than 120 days after the enactment of this Act providing the number and proportion of veterans with substance use disorder, broken down by age, including a breakdown by State. The report should also include available demographic data.

Other health issues

Hepatitis C Virus (HCV) outreach and testing.—The Committee is pleased with VA's significant progress in reaching and treating veterans who have lived with HCV for years and that it continues to dedicate resources towards the goal of screening and treating veterans who are disproportionately impacted by the disease. Now that the easiest to identify and treat HCV caseload has been largely addressed, it is important for VA to use other tools to reach the remaining caseload. Participating in community events, with onsite HCV testing, that are organized by veterans services organizations is an excellent way to reach veterans, both those who may be enrolled for VA services, but are not actively using them, or veterans who don't know their eligibility status. Therefore, VA is encouraged to explore innovative partnerships with stakeholder organizations to effectively engage and test additional veterans with rapid HCV screening outside of traditional sites of care. The Department is also encouraged to make available, at community events involving on-site screening, department staff who have the capacity to check a veteran's status on-site so that eligibility for VA reimbursement for testing is known instantly.

Lung cancer screening.—The Committee continues to note with concern that veterans at risk for lung cancer are not afforded the same access to lung cancer screening programs that are offered to Medicare beneficiaries. The Committee looks forward to receiving the report from VA, as requested in House Report 115–188, presenting the steps the VHA is taking to make lung cancer screening broadly available to veterans at high risk for lung cancer.

Colorectal cancer screening.—The Committee reminds VA of the direction in the Statement of Managers accompanying Public Law 115–141 that directed the Department to offer all seven colorectal cancer screening strategies recommended by the United States Preventive Services Task Force or to notify the Committee if it is not using all seven approaches.

Prostate cancer.—Prostate cancer is the most frequently detected cancer among veterans, with an estimated 10,000 new cases diagnosed annually. Unfortunately, early detection is not yet an exact science. Although prostate biopsies are the standard of care, they often miss detecting cancer. This fear of missed cancer often leads

to multiple, invasive biopsies, many of which may be unnecessary. Recent biotechnology advancements within the emerging field of prostate cancer biomarkers have hastened the detection of prostate cancer and curbed the financial costs associated with unnecessary repeat diagnostic procedures. The Committee encourages VA to accelerate the adoption of such technologies within VHA, particularly for biomarker tests on the federal supply schedule, to help rule out false-negative biopsy concerns and alleviate financial and mental

anguish for veterans.

Rare cancers.—The Committee is pleased to learn of the December 2017 signing of a collaboration agreement between the VA, the John P. Murtha Cancer Center at Walter Reed National Military Medical Center, and the National Cancer Institute (NCI) focused on improving cancer care for common cancers affecting military personnel and veterans. However, the Committee remains concerned about the need for a better understanding of, and treatment options for, rare cancers that may disproportionately impact veterans. Military personnel are uniquely exposed to carcinogens including asbestos, industrial solvents, nuclear radiation, depleted uranium, lead, fuels, PCBs, and components of Chemical Agent Resistance Coating. Each of these hazards may increase the risk of certain cancers for both military personnel and veterans. Therefore, the Committee directs VA to assess options for modifying the December 2017 agreement to include collaboration on rare cancers. Further, the Committee seeks clarification regarding VA's authorities to provide funding to commercial firms for the development of treatments for rare cancers. The Committee directs VA to provide a report on these topics within 90 days of the enactment of this Act.

Sepsis.—Sepsis is a leading cause of mortality for veterans with spinal cord injuries. The Committee believes that VA, through its Center for Clinical Management Research and its Spinal Cord Injuries and Disorders Centers, can help improve the diagnosis and management of sepsis. The Committee, therefore, directs the Department to provide a report, within 90 days of the enactment of this Act, on its costs related to sepsis management and how it has incorporated the latest improvements in sepsis screening and diagnostics, including biomarker testing, across its health care facilities.

Safety of blood products.—The Committee is concerned about the safety of blood products being transfused to veterans at VA medical facilities given the aging and medically fragile populations being treated. Therefore, the Committee urges VA to request that all blood product providers use FDA-approved pathogen reduction technology, where it is available, before providing blood products for transfusion at VHA medical facilities, including VA medical centers, outpatient clinics, community-based outpatient clinics, and community living center programs.

Diabetes treatment.—The Committee is concerned about the inci-

Diabetes treatment.—The Committee is concerned about the incidence of diabetes impacting veterans and seeks approaches to reduce both the prevalence of this disease and any wait times associated with treatment. Therefore, the Committee requests that VA provide a report, no later than 90 days after the enactment of this Act, on the feasibility and potential cost of building a fully-equipped diabetes center that would be open 24 hours per day, 7

days a week, and 365 days a year. In describing in the report suitable locations for such a facility, VA should consider areas with the highest prevalence of diabetes, a large concentration of veterans, and a system of established VA medical centers and clinics. Any willingness of medical providers to defray the expense of such a facility by paying the capital costs of construction, if permitted in law, should also be taken into account in considering potential locations.

Pressure ulcer prevention.—The Committee is concerned about facility-acquired pressure ulcers (PU) and the associated costs for the treatment of hospitalized patients with PUs in VHA facilities. The Committee, therefore, commends VA for its current studies on the VA Smart Modular Adaptive Electrotherapy Delivery System (SmartMAEDS), the use of smartphone technology for PU screening, and the prevention of community-acquired PU in individuals living with a spinal cord injury. Given the importance of this research, the Committee encourages VA to prioritize clinical care and research focused on wound care, particularly in locations with higher incidence rates of PUs, such as sites that serve patient populations with limited mobility and spinal-cord injury. Furthermore, the Committee encourages VA to explore the feasibility of including military treatment facilities in this care and research to increase the cost-effectiveness of the health care provided by the Military Health System and VA, as authorized under Joint DOD/VA Sharing Incentive Funds, 38 USC 8111. To assess VA's progress in this area, the Committee requests a report, no later than one year after the enactment of this Act, regarding the status and preliminary results of these studies, as well as any other innovative technologies VA has assessed, particularly those involving biometric sensor

Antimicrobial stewardship.—The Committee continues to be pleased with VA's efforts to reduce antibiotic use so as to avoid development of resistance to important drugs, without increasing 30-day readmission and mortality rates. Per VHA Directive 1031, the VA has focused on the implementation and effectiveness of the VA Antimicrobial Stewardship Program. This program establishes stewardship programs in all VA facilities and fosters the judicious use of antimicrobials through education, direct provider-to-provider stewardship, and surveillance. It also supports and expands ongoing efforts to prevent the emergence of multidrug-resistant organisms. The Committee encourages VA to continue improvements in the effectiveness and implementation of its Antimicrobial Steward-

ship Program.

Wheelchairs.—The Committee is extremely concerned by the March 2018 report from VA's Office of Inspector General regarding the repair times and policies for powered wheelchairs and scooters. The report noted that, due to VA staff failures, some veterans waited an average of 69 days to have their powered wheelchair or scooter repaired and were provided manual wheelchairs or scooters in the interim jeopardizing their quality of life. Therefore, the Committee requests a report, no later than 60 days after enactment of this Act, explaining VA's policy in regard to the types of wheelchairs or scooters issued as replacements when powered wheelchairs or scooters are turned in for repair. It should also provide the estimated cost of maintaining sufficient powered wheelchairs

and scooters on hand to enable veterans to receive one as a replacement, instead of a manual wheelchair or scooter, while awaiting repair of their powered wheelchair or scooter. The report should also include a description of VA's authority to provide wheelchairs that restore an ability that relates exclusively to participation in a recreational activity.

Non-invasive cardiac artery disease diagnosis.—The Committee understands that significant health advantages and cost savings may be possible through non-invasive diagnosis of cardiac artery disease. Therefore, the Committee commends VA on having conducted such diagnoses through cardiac CT angiography (CTA) on approximately 2,300 veterans in the past year. The Committee is also interested in newly-developed CTA-related technologies that may provide even greater benefits to veterans. The Committee directs VA to conduct a study on such technologies assessing their capabilities, the anticipated annual net cost impact (the estimated annual cost of the testing and the estimated cost savings and offsets that would result from avoidance of invasive CTA and other non-invasive cardiac testing), and any issues that might impact their incorporation into clinical practice guidelines, such as privacy and information technology issues, if such technologies are proprietary. The Committee requests that VA submit the results of this study within 180 days after enactment of this Act.

Mobile magnetic resonance imaging (MRI).—The Committee is concerned about MRI wait times for veterans. Delays in MRI use have the potential to keep veterans in pain or cause injuries to heal incorrectly without proper diagnosis. Therefore, the Committee requests a report from VA, no later than 90 days after the enactment of this Act, on any MRI backlog that may exist. The report should include data on average wait times by location, an assessment as to whether a mobile MRI service would help reduce any existing backlog, and an estimate of the cost for implementing such a serv-

ice.

Wellness.—Public Law 115–141 included funding for a veteran services organizations (VSOs) wellness pilot program to upgrade, through construction and repair, veteran service organization facilities to expand access to wellness programs and expanded complementary and integrative health promotion. The Committee strongly supports this program and directs VA to report the progress of this pilot no later than 15 days after enactment of this Act and then provide quarterly status updates.

Tobacco.—In a 2018 Centers for Disease Control and Prevention study, 56.8 percent of servicemembers and veterans between the ages of 18–25 reported being current smokers. Interventions for active duty and veteran servicemembers are important to reduce tobacco use and could lead to improved health outcomes. The Committee encourages VA to implement evidence-based tobacco inter-

ventions to support servicemembers now and in the future.

Nutrition.—The Committee recognizes the value of proper nutrition and food's impact on health. Patients with three or more chronic conditions represent 35 percent of veterans receiving VA care and account for 65 percent of VHA costs. Additionally, 79 percent of veterans receiving VA care are overweight and 43 percent are obese. The Committee urges VHA to be proactive in promoting wellness and disease prevention by providing evidence-based nutri-

tional services and requests to be briefed on current practices, as well as on a plan to expand nutritional education and means to increase access to nutritional foods for veterans.

Long-term care.—The Committee is aware of the aging veteran population and supports long-term care that focuses on facilitating veteran independence, enhancing quality of life, and supporting the family members of veterans. The Committee supports home- and community-based care, residential settings, nursing homes, geriatric services, and advanced care planning for veterans and their families. Multiple chronic conditions, life-limiting illness, or disability associated with disease, aging, or injury can be factors of consideration. The Committee acknowledges that the veteran population faces unique health risks and that each veteran requires an

individualized approach to care.

Veterans' end-of-life care.—Public Law 115-141 directed VA to undertake a study on the feasibility of implementing hospice care protocols tailored to the unique needs of combat veterans, including Vietnam-era veterans, and to develop a report outlining the techniques, best practices, and support mechanisms to serve these veterans. The Vietnam Veterans End of Life Care report submitted to the Committee is woefully inadequate, failed to meet any of the reporting requirements, and is frankly of no use to the Committee. Furthermore, the report stated that there are over 4,000 community hospice care providers who all maintain their own resources and training materials which leads the Committee to believe there is no clear standard being provided by VA for veterans hospice care and veterans facing unique end-of-life challenges are failing to receive proper care. Due to the lack of information provided in the report, VA is again directed to provide a detailed report outlining the techniques, best practices, and support mechanisms for end-oflife care. The Committee strongly reiterates that such an approach could be beneficial to Iraq, Afghanistan, and Syria combat veterans in the future. This report shall be submitted to the Committee within 30 days after the enactment of this Act.

Patients rights.—The statement of managers for Public Law 115–141 contained a VA patients rights reporting requirement. However, due to the late passage of the fiscal year 2018 bill, the reporting requirement remains outstanding. The Committee strongly supports veterans making decisions regarding their medical care and having the right to accept or refuse treatment, and the right to formulate advance directives. The Committee remains interested in

this report and looks forward to its submission.

Teague-Cranston medical schools.—The Committee recognizes that the 1972 Teague-Cranston Act, also known as the Medical School Assistance and Health Manpower Training Act, established five medical schools to be built on VA campuses in conjunction with these universities: Wright State University, the University of South Carolina, Texas A&M University, Marshall University, and East Tennessee State University. These schools were built on VA campuses for the express purpose of training physicians for service in underserved areas and benefitting veterans. The Committee also understands that VA maintains a robust academic affiliation with these schools. Given congressional intent regarding the establishment of these schools, and the critical role they play in caring for veterans, the Committee directs VA to notify Congress in advance

of any plan to move resources or assets from these schools, if such

a move would have a negative impact on them.

Hispanic-Serving Institution (HSI) affiliations with VA health care facilities.—The Committee continues to be concerned by the lack of Hispanic-Serving Institutions (HSIs) medical school participation and collaboration with local VA hospitals in areas where HSI medical schools are located. The Committee urges the Secretary to develop a plan to expand local VA medical facilities' participation with HSI medical schools. The Committee looks forward

to the report mandated by Public Law 115–141.

Historically Black Colleges and Universities medical research programs.—Over the past five years the Committee has urged VA to increase its efforts to improve its academic affiliation activities with minority medical schools and institutions for the purposes of enhancing training initiatives, improving patient care, and providing educational opportunities. At one point the Committee directed VA to have a symposium in order to achieve these goals. The Committee once again directs VHA and the Office of Academic Affiliations to take concrete steps to improve this ongoing commitment to, and partnership with, minority health professions schools and report back to the Committee, no later than 30 days after the enactment of this Act, regarding the actions it will take to address this issue. Thereafter, the Committee directs a quarterly report on this issue be submitted to the Committee explaining how each action has been fulfilled.

Minority veteran care.—The Committee acknowledges VA's efforts to streamline data collection practices via a working group and other initiatives. The Committee also notes that the veteran population is becoming increasingly diverse. Accordingly, the Committee directs VA to provide a report within 180 days of enactment of this Act, which details how it can restructure its data collection practices to more accurately and consistently capture data on the race and ethnicity of veterans across its various systems. This report shall take into consideration that the Department is in the midst of the acquisition of a new electronic health record program, which will combine the Department's current data collecting programs, and make recommendations on how implementation of this

new program can help improve data collection on veterans.

Freely Associated States (FAS) veterans' access.—The Committee is concerned about impediments to VA health care access for FAS veterans. Veterans in the FAS must travel hundreds to thousands of miles to the nearest VA medical center in Guam or Hawaii, in some circumstances at their own expense, to get health care. For those who are able to travel to seek care, the collective costs are magnified by lost wages resulting from missed days at work and childcare costs, as well as time away from families. Given the significant time, resources, and high costs for travel for some veterans, including airfare, transportation, and lodging, many FAS veterans are never able to access the VA health services they have earned through their military service. As the VA works to transform its Community Care programs, the Committee directs VA, no later than 90 days after enactment of this Act, to provide the Committee a report that assesses options for improving access to VA health care for FAS veterans. The report should include the number of veterans residing in the FAS who have utilized services in

VA Pacific Islands Health Care System (VAPIHCS) facilities over the last three fiscal years, the extent of travel benefits offered to veterans and eligibility requirements for the benefits, an average estimated personal cost for an FAS veteran to access VA care, the estimated costs for providing telehealth services in FAS through a pilot program, and recommendations for how VA can reduce burdensome restrictions under the Foreign Medical Program using existing authorities. Furthermore, the Committee encourages VA to work with Federal and non-Federal partners, including the Departments of Defense, Interior, and Health and Human Services, as well as non-VA health care facilities and educational institutions, to leverage shared resources and improve access for delivery of care through collaboration.

Volunteer physicians.—The Committee continues to be encouraged by the success of the Physician Ambassadors Helping Veterans Pilot Program to date and encourages VA to expand this program to additional facilities throughout the country, prioritizing VHA sites that serve the largest veteran populations as well as

those which experience the longest wait times.

National Veterans Sport Program.—The bill includes \$17,825,000 for the National Veterans Sports Program, which is \$1,000,000 above the request and \$860,000 above the fiscal year 2018 funding. Within the total, \$6,825,000 is provided for the support of national veterans' sports and special events programs; \$2,000,000 is designated for veterans' monthly assistance allowances; and \$9,000,000 is provided for the Adaptive Sports Grants Program. The Adaptive Sports Grants Program currently awards a limited number of grants for equine therapy, mostly related to physical disabilities. The Committee provides \$1,000,000 above the request to encourage VA to increase its use of these grants for the purpose of equine therapy targeted to mental health issues.

Prosthetics regulation.—The statement of managers for Public

Prosthetics regulation.—The statement of managers for Public Law 115–141 indicated the conferees' concern that VA's proposed prosthetics services regulation may limit veteran choice in obtaining prosthetic, orthotic and other rehabilitative services. The Committee strongly encourages the Department to revise the final rule to be more closely aligned with the principle of patient choice as reflected in the Veterans Access, Choice and Accountability Act.

MEDICAL COMMUNITY CARE

Fiscal year 2018 enacted level	\$9,828,294,000
Fiscal year 2019 enacted level	8,384,704,000
Fiscal year 2019 additional request	500,000,000
Committee 2019 additional recommendation	500,000,000
Fiscal year 2020 advance appropriation request	14,419,786,000
Committee 2020 advance appropriation recommendation	14,419,786,000
Comparison with:	
Fiscal year 2019 enacted level	6,035,082,000
Fiscal year 2020 advance budget request	

The Medical Community Care account was created in the Surface Transportation and Veterans Health Care Choice Improvement Act of 2015. It is intended to consolidate all community care programs under a single appropriation. For fiscal year 2020, the bill provides \$14,419,786,000, of which \$2,000,000,000 is available until September 30, 2021.

The Committee provides \$500,000,000 as requested in the April 13 Administration budget amendment for this activity.

Peer support services.—The Committee understands that private nonprofit peer-to-peer organizations have provided important services for veterans in areas such as crisis interventions, services to improve community integration such as rehabilitation, mental health assessments, referral services, and treatment plan development. The Committee encourages VA to review the types of services provided by peer-to-peer organizations and determine whether the Department is permitted to contract for their services under current law. The Committee requests a report, no later than 60 days after enactment of this Act, describing whether VA is permitted to reimburse peer-to-peer organizations and whether these providers could be a useful component in the Department's comprehensive strategy for health care services for veterans.

Problems with network administrators.—The Committee recognizes the massive undertaking to develop and implement the Veterans Choice Program and the difficulties that patients and providers have experienced in dealing with the third party administrators of the program. As such, the Committee is interested in ensuring that, going forward, the Veterans Choice Program is providing maximum benefit to veterans, attracting top quality providers, and meeting program goals. To this end, the Committee requests VHA to submit a report, within 90 days of enactment of this Act, on the effectiveness of the program's third party administrators with regard to patients and providers and the challenges this program has created for them.

CHOICE FUND

Fiscal year 2018 enacted Fiscal year 2019 enacted	
Fiscal year 2019 additional request	\$1,900,000,000
Committee recommendation in the bill	
Comparison with:	
Fiscal year 2018 enacted level	
Fiscal vear 2019 additional request	(1,900,000,000)

The Choice Fund was created in P.L. 113-146, the legislation establishing the Choice program and providing mandatory funding for it. Since its inception, the authorizers have provided nearly \$20,000,000,000 in emergency mandatory funding to support the Choice program. The account has never received discretionary funding. It was anticipated that the funding would last until the authorizing committees created a program to consolidate the Choice program with other non-VA care programs. However, the new program has not yet been passed into law. The Administration proposes a budget amendment of \$1,900,000,000 in discretionary funding as a patch until a consolidated non-VA care program is in place. The Committee is reluctant to provide discretionary funding for a mandatory program, but is ready to meet its responsibility to provide funding after the new discretionary program is implemented.

MEDICAL SUPPORT AND COMPLIANCE

Fiscal year 2018 enacted level Fiscal year 2019 enacted level Fiscal year 2020 advance budget request Committee 2020 recommendation in the bill	\$6,754,480,000 7,239,156,000 7,106,150,000 7,106,150,000
Comparison with: Fiscal year 2019 enacted level	(133.006.000)
Fiscal year 2020 advance budget request	

The Medical Support and Compliance appropriation funds the expenses of management and administration of the Department's health care system, including financial management, public health and environmental hazard, quality and performance management, medical inspection, human research oversight, training programs and continuing education, security, volunteer operations, and human resources.

The bill provides \$7,106,150,000 in advance fiscal year 2020 funding. The Committee has included bill language to make available through September 30, 2021, \$100,000,000 of the Medical Support and Compliance appropriation for fiscal year 2020.

MEDICAL FACILITIES

Fiscal year 2018 enacted level	\$6,141,880,000
Fiscal year 2019 enacted level	5,914,288,000
Fiscal year 2020 advance budget request	5,276,676,000
Committee 2020 recommendation in the bill	5,276,676,000
Comparison with:	
Fiscal year 2019 enacted level	(637,612,000)
Fiscal year 2020 advance budget request	

The Medical Facilities appropriation provides funds for the operation and maintenance of the Department's health care system's capital infrastructure. Included under this heading are provisions for costs associated with utilities, engineering, capital planning, leases, laundry, grounds keeping, garbage, housekeeping, facility repair, and property disposition and acquisition.

The bill provides \$5,276,676,000 in advance fiscal year 2020 funding. The Committee has included bill language to make available through September 30, 2021, \$250,000,000 of the advance

Medical Facilities appropriation for fiscal year 2020.

In addition to funding provided in this account, \$800,000,000 is provided in sec. 238 for non-recurring maintenance as part of a \$2,000,000,000 infrastructure initiative. A similar initiative provided \$1,000,000,000 for this account for non-recurring maintenance in fiscal year 2018.

Spending plan.—The Committee expects VA to provide, no later than 30 days after enactment of this Act, an expenditure plan detailing the planned use of the funds provided. The Committee understands that some of the projects planned for fiscal year 2019 may not be ready within that timeframe, requiring an adjustment to the spending plan. The Committee requests a quarterly update of the plan if the funding for any single project changes by more than \$3,000,000 during that time period.

Facility expansion.—The Committee continues to support an ex-

pansion of the number of clinics available to veterans. To help accomplish this, the Committee encourages VA to identify Community Based Outpatient Clinic (CBOC) facilities, with a priority in rural areas, for facility expansion opportunities in order to accommodate additional patients and provide enhanced services, thereby reducing the need for veterans to travel long distances for care. The VA is encouraged to look at existing CBOCs which are operating at full capacity, have a proven record of delivering services, and have community support to expand the facility. Additionally, VA is directed to complete a study, within 120 days after enactment of this Act, on the potential benefits of placing VA clinics on military installations located in areas with high veteran populations and where nearby VA infrastructure is overburdened. The study should emphasize locations with readily available, unused medical facilities on military installations. The report should identify potential cost savings and determine if increased quality and improved timeliness of care can be provided to veterans in these communities through on-post VA medical care. The results of the study are to be provided to the Committee once available.

Bakersfield outpatient clinic.—The Committee remains concerned that VA has not yet established a new outpatient clinic in Bakersfield, California as authorized in Public Law 111–82. Based on information provided by VA, the Committee expects the lease for this facility to be awarded in the summer of 2018 and that clinic activation will occur in the fall of 2020. Furthermore, the Committee directs the Secretary to continue to provide regular updates to Con-

gress as directed in House Report 114-497.

Center of Excellence for Research on Returning War Veterans.— The Committee understands that VA is planning to move the Posttraumatic-stress Residential Rehabilitation Program (PRRP) that is currently co-located with the Center of Excellence (COE) for Research on Returning War Veterans on the campus of the VA Medical Center in Waco, Texas. The Committee is concerned that this may have an adverse impact on the COE's PTSD research, which is critical in helping develop treatments for veterans suffering from PTSD. Therefore, the Committee directs VA to provide a report, within 30 days of the enactment of this Act, which details the mission of the COE, the mission of the PRRP, and the relationship between these two programs. The report should include an assessment of the research benefits of having inpatient programs colocated with mental health centers of excellence in general, an assessment specific to benefits resulting from the current co-location of the COE with the PRRP on the Waco campus, and any costs associated with VA's planned move of the PRRP. Further, the Committee reminds VA that the conference report accompanying Public Law 109-114, House Report 109-305, expressly designated the establishment of three VA "centers of excellence to focus on mental health/PTSD needs," with one of these being at the VA Medical Center in Waco, Texas. The Committee expects VA to adhere to congressional intent, as expressed in the report, regarding the location of this center of excellence.

Medical imaging equipment.—The Committee remains committed to helping VA in its efforts to ensure a timely process for VA medical centers to receive medical imaging equipment to effectively and efficiently deliver care to veterans. The Committee urges VA to strive to maintain a 120-day turnaround for these equipment orders during their three, annual consolidated purchase periods for high tech medical equipment. The Committee requests that VA consider more education for contracting officers and individual VA

medical centers regarding high-tech medical equipment purchasing processes and seek ways to eliminate redundant paperwork requirements for such orders. The Committee encourages VA to make public information regarding current requirements and regulations and any changes or revisions to procurement processes in the area of high tech medical equipment. In addition, the Committee urges VA to coordinate between capital equipment purchases, facilities funding for site readiness, and clinical staff training to ensure that facilities are prepared to install and operate equipment as quickly

as possible after purchase.

Operating room patient safety and fire prevention.—Given the importance of patient safety, the Committee requests that VA provide a report, within 90 days of enactment of this Act, that provides information regarding incidents of operating room fires at VA medical facilities over the last ten years. The report should include the Department's policies and procedures for tracking and evaluating patient burn and fire risk exposures in live operating room environments and data that shows the total number of tort claims, the amount per claim, and the total amount of these claims, paid by the Department of the Treasury's Judgement Fund or any other taxpayer-funded sources as a result of VA operating room fires and related safety issues. The report should also include information on the Department's public reporting of patient outcome measures based on Agency for Healthcare Research and Quality (AHRQ) Patient Safety Indicators (PSI).

MEDICAL AND PROSTHETIC RESEARCH

Fiscal year 2019 enacted level	\$722,262,000
Fiscal year 2019 budget request	727,369,000
Committee recommendation in the bill	732,262,000
Comparison with:	
Fiscal year 2018 enacted level	10,000,000
Fiscal year 2019 budget request	4,893,000

This appropriation provides for medical, rehabilitative, and health services research. The bill makes \$705,262,000 of this funding available through September 30, 2020. The Committee recognizes the importance of the research conducted by VA for veterans' quality of life and health and provides \$4,893,000 above the request and \$10,000,000 above last year for these activities. Of the funding provided, \$27,000,000 supports VA's collaboration with the Department of Energy (DOE) via a long-term inter-agency agreement to leverage DOE's next generation artificial intelligence, big data, and high-performance computing technologies, as well as multi-modal diagnostics and data integration, in order to develop specific precision medicine applications. This funding is made available through September 30, 2023.

Medical research is an important aspect of the Department's programs, providing complete medical and hospital services for veterans. The prosthetic research program is also essential in the development and testing of prosthetic, orthopedic, and sensory aids for the purpose of improving the care and rehabilitation of eligible disabled veterans, including amputees, paraplegics, and the blind. The health services research program provides unique opportunities to improve the effectiveness and efficiency of the health care delivery system. Budgetary resources from a number of areas, in-

cluding appropriations from the medical care accounts, reimbursements from DOD, grants from the National Institutes of Health, private proprietary sources, and voluntary organizations, provide support for the Department's researchers. Estimated 2019 research resources beyond the research account are \$1,188,000,000.

PTSD research.—The National Center for PTSD sets the VA agenda for research and education on PTSD, with seven research divisions located at VA facilities. The Center also conducts education and training, and coordinates the VA National PTSD Brain Bank. The bill provides up to \$40,000,000 for the Center in fiscal

year 2019, compared to the budget request of \$19,680,000.

Modeling and simulation treatment of PTSD.—As a mechanism to explore treatments for PTSD, the Committee is aware that the use of modeling and simulation technology has enabled the development of innovative and immersive therapies, which can extend trauma management therapy protocol. The Committee encourages VA to continue its research into therapeutic virtual environments using real-time modeling and simulation training to treat PTSD.

Identifying at-risk veterans through social media algorithms.-The committee encourages VA to investigate the use of technology, specifically social media database algorithms, to detect and identify, via indirect contact such as on social media, veterans who are at risk of harming themselves or others. Once an individual is identified, the Department would use indirect means of communication to interact with the troubled individual to provide help and support in the hope of preventing tragedy.

Dystonia.—The Committee is concerned that there may be a connection between traumatic brain injury (TBI) and the onset of dystonia and that this may disproportionately impact veterans. The Committee, therefore, urges the VA to pursue collaboration with

stakeholders to advance critical research on dystonia.

Cannabis research.—The Committee recognizes that continued focus on the discovery of treatment alternatives for veterans diagnosed with various conditions such as chronic pain and PTSD are essential to reducing the number of veteran suicides. For this reason, the Committee urges VA to utilize funds, in an amount deemed appropriate by the Secretary, to prioritize investments in research on the efficacy and safety of cannabis usage among the veteran population for medicinal purposes. The Committee also requests a report, within 180 days after the enactment of this Act, by the Secretary containing a detailed plan on how the Department expects to pursue this research. The Committee also urges VA to ensure any research conducted or supported by VA on cannabis therapy is preserved in a manner that will facilitate further re-

Comprehensive cancer centers.—The Committee seeks to ensure that veterans have access to the highest quality cancer care available. The Committee, therefore, applauds the ongoing collaborative efforts between VA medical centers and NCI-designated comprehensive cancer centers. The Committee supports these efforts, especially as they relate to providing veterans access to groundbreaking new treatments through clinical trials led by academic cancer centers, as well as the linking of VA oncology care with national research databases involving patients at multiple academic cancer centers. The Committee is also pleased that VA is

engaged with the NCI and VA Interagency Group to Accelerate Trials Enrollment (NAVIGATE) partnership, which will improve access to certain clinical trials at a number of VA facilities. The Committee understands that initiating new clinical trials is a resource-intensive process requiring experienced coordination staff with specialized expertise in data management and regulatory compliance. To improve its own capacity to coordinate a full range of cancer clinical trials with non-VA organizations, the Committee encourages VA to provide resources for coordination staff and continue to develop partnerships with non-VA organizations that have initiated pilot clinical trials programs. The Committee also requests a report, within 90 days of enactment of this Act, which provides an overview of VA's credentialing process for non-VA clinical trial coordinators and recommendations, if any, to improve this process.

Respiratory disease.—The Committee notes the high burden of respiratory illnesses, such as lung cancer, on the veteran population. The Committee urges VA to provide support for respiratory research proposals commensurate with the burden of respiratory

disease in this population.

Exposure to herbicide-related toxins.—Veterans have frequently expressed long-held concerns that toxic exposure during their military service is related to adverse health conditions. The Committee is committed to understanding the residual impacts of Agent Orange/Dioxin and other herbicide-related toxic exposures among veterans who served in Vietnam, Thailand, and all other geographic areas where these toxic substances were dispersed. The Committee urges VA to reference data from existing medical records of veterans to determine the percentage of veterans from the above referenced subgroup that have more frequent or unexplained diseases compared to the civilian population. This body of data could be helpful in clarifying the extent and specifics of the medical issues suffered by veterans from exposure to herbicides.

Female prosthetics research.—The Committee strongly supports robust funding for medical and prosthetic research. Recognizing that approximately six percent of wounded veterans returning from Iraq and Afghanistan are amputees, and the number of veterans accessing VA health care for prosthetics and sensory aids continues to increase, this funding greatly enhances veterans' quality of life. However, there is an acute need for research specializing in female prosthetics, as most prostheses are designed to fit male veterans. Since three percent of military amputees are female, the Committee urges that a proportionate amount of prosthetics research should be focused on prosthetics meant for female veterans. The Committee repeats its direction that VA, in collaboration with the Prosthetic Women's Workgroup, issue a comprehensive report on female veteran amputees and their access to prosthetics. Furthermore, the Committee directs VA to submit this report on an annual basis that coincides with the annual VA budget submission as its own chapter in the relevant budget documents.

Hydraulic prosthetic technology.—The Committee is aware of recent developments in hydraulic prosthetic technology. Hydraulic designs fill the gap between standard myoelectric grippers and premium, bionic-like hand prostheses, offering cost-effective solutions with advanced motion control and flexibility. The Committee also

understands that VA is limited to providing prosthetic devices that have been approved by the Food and Drug Administration (FDA). Therefore, the Committee encourages the Department to monitor the development of this technology and, if approved by the FDA, to implement pilot programs that assess its benefits for veterans.

Specialized and modular prosthetics research.—As referenced in the Statement of Managers accompanying Public Law 115–141, the field of specialized and modular prosthetics is evolving at a faster pace than VA has been able to match. The Statement of Managers directed VA to provide a report on this issue; however, due to the late passage of the fiscal year 2018 Omnibus the report remains outstanding. The Committee reiterates its interest in this report and urges the Department to complete the report as soon as possible.

Neuromuscular junction (NMJ) regeneration research.—The Committee applauds VHA for its support of cutting edge research into the molecular mechanisms that govern NMJ. This knowledge is essential to making improvements in the re-innervation of denervated muscles. Progress in this area is critical to reducing the incidence of long-term disability among military personnel as a result of combat-related extremity injuries and other non-combat related incidents. It is also crucial to mitigating the disproportionate incidence of neurodegenerative disorders among the veteran population. Consequently, the Committee strongly encourages VHA to dedicate additional research resources to efforts to better understand the underlying mechanisms of NMJ regeneration.

Gulf War illness studies.—The Committee recommends the Department continue to conduct epidemiological studies regarding the prevalence of Gulf War illness, morbidity, and mortality in Persian Gulf War veterans, and the development of effective treatments, preventions, and cures. The Committee also urges VA to make public all of its available research data on Gulf War illness, particularly disease-specific mortality data related specifically to Gulf War

veterans.

Gulf War illness.—The Committee encourages VA to continue inclusion of research on functional gastrointestinal (GI) disorders in

its research related to Gulf War Illness.

Post-deployment integrated care.—Each new generation of veteran faces unique service-related conditions. Historically, it has been a challenge, when large-scale deployments occur, to identify signature wounds and develop and implement appropriate care models for returning combat veterans in a timely way. Given the evolving responsibilities for current and future military service personnel, the Committee directs VA, through the War Related Illness and Injury Study Center (WRIISC) and the Offices of Patient Care Services and Post-Deployment Health Services, to provide to Congress, no later than 120 days after enactment of this Act, an assessment of the process by which VA develops and improves its approaches to post-deployment integrated care for returning combat veterans. The report shall build on lessons learned from previous veteran cohorts and care models, including the Post-Deployment Integrated Care Initiative (PDICI). The report shall include recommendations to ensure VA has the capabilities and agility to identify and meet the needs of the next generation of combat veterans.

The Million Veteran Program (MVP) Computational Health Analytics for Medical Precision to Improve Outcomes Now (CHAM-PION) project.—The Committee supports the MVP-CHAMPION project, and encourages VA to continue leveraging the high performance computer facilities available through its partnership with the Department of Energy to focus on the secure analysis of large digital health and genomic data. The Committee also encourages VA to provide principal investigators at VA sites across the country for participation in the project. Further, the Committee recognizes that VA may benefit from the help of academic institutions across the country regarding sample collecting, contributions to relevant research, precision medicine, and health informatics. The Committee, therefore, encourages VA to consider a small number of pilot programs with academic health institutions that have biorepositories, existing clinical partnerships with VA, data security programs, and clinical care strengths in at least one of the following three identified areas of priority: suicide prevention, prostate cancer, and cardiovascular disease. Priority may be given to institutions that also have existing partnerships with the Department of Energy.

Canine research.—The Committee understands there may be times that research involving canines leads to advances that benefit the health of our veterans. However, the Committee remains concerned about the extent of such experimentation and continues the language in the Consolidated Appropriations Act, 2018 limiting canine research to those studies in which the scientific objectives of the study can only be met by research with canines, the study has been directly approved by the Secretary, and the study is consistent with the revised VA canine research policy document released on December 18, 2017. Additionally, the Committee is aware that on March 13, 2018, the VA publicly announced that VHA's Office of Research and Development would be conducting a "rapid, indepth internal review of existing canine research projects." The Committee directs VA to provide the results of this review to the Committee as soon as it is completed.

Public access to scientific data.—The Committee commends VA on issuing its Policy and Implementation Plan for Public Access to Scientific Publications and Digital Data from Research Funded by the Department of Veterans Affairs on July 23, 2015. The Committee urges VA to continue its efforts towards full implementation of the plan, and requests a status report be submitted in conjunction with the fiscal year 2020 VA budget.

MEDICAL CARE COLLECTIONS FUND

The Department of Veterans Affairs Medical Care Collections Fund (MCCF) was established by the Balanced Budget Act of 1997 (Public Law 105–33). The Department deposits first-party and pharmacy co-payments, third-party insurance payments and enhanced-use collections, long-term care co-payments, Compensated Work Therapy Program collections, Compensation and Pension Living Expenses Program collections, and Parking Program fees into the MCCF. The Department uses these funds for medical care and services to veterans. The estimate of fees that will be collected in fiscal year 2019 is \$3,590,000,000.

NATIONAL CEMETERY ADMINISTRATION

Fiscal year 2018 enacted level	\$306,193,000 315,836,000 315,836,000
Comparison with:	,,
Fiscal year 2018 enacted level	9,643,000
Fiscal year 2019 budget request	

The National Cemetery Administration (NCA) was established in accordance with Public Law 93-43, the National Cemeteries Act of 1973. It has a fourfold mission: to provide for the interment of, in any national cemetery with available grave space, the remains of eligible deceased servicemembers and discharged veterans, together with their spouses and certain dependents, and to permanently maintain their graves; to provide headstones for, and to mark graves of eligible persons in national, State and tribal, and private cemeteries; to administer the grant program for aid to States and tribal governments in establishing, expanding, or improving State and tribal government veterans' cemeteries; and to administer the Presidential Memorial Certificate Program. This appropriation will provide for the operation and maintenance of 135 operational national cemeteries and 33 other cemeterial installations.

The bill includes language making ten percent of the total avail-

able until September 30, 2020.

Unclaimed remains of veterans.—Throughout the country, there are reports of unclaimed remains of veterans being stored due to the absence of someone to claim these remains and begin the process for proper interment. The Committee was pleased to learn that NCA has recently taken steps to establish a process to address unclaimed remains of veterans at various locations. As VA establishes a process for unclaimed remains the Committee urges VA, in consultation with the National Park Service, to also consider including in this process ways to deal with remains of veterans that are left at National Memorials.

Rural cemetery access.—In House Report 112-94 and House Report 115-188 the Committee expressed concern that NCA is not adequately serving the nation's veterans in rural areas. In five years, VA has only reduced this number to eight percent while receiving generous funding increases in a tight budget environment. As a result, the Committee continues to be concerned that there are geographic pockets in the country that are not being served, and VA has failed to meet its goal of having access for all veterans to a burial option within 75 miles of a veteran's home. The Committee has previously requested a report on this issue and in fiscal year 2018 requested that GAO examine this issue as well. The Committee remains interested and looks forward to this report.

DEPARTMENTAL ADMINISTRATION

GENERAL ADMINISTRATION

(INCLUDING TRANSFER OF FUNDS)

Fiscal year 2018 enacted level	\$335,891,000 367,629,000 346,091,000
Comparison with:	
Fiscal year 2018 enacted level	10,200,000
Fiscal year 2019 budget request	(21,538,000)

The General Administration account provides funds for the Office of the Secretary, seven Assistant Secretaries, and three independent staff offices. The Committee has included bill language to make available through September 30, 2020, up to five percent of these funds and to permit the transfer of funds in this account to the General Operating Expenses, Veterans Benefits Administration account.

Five year development plan.—The Committee is very pleased that the Department has provided a Five Year Development Plan (FYDP) in its fiscal year 2019 budget. The Committee has asked for such a document for years, but has faced resistance in the past. The FYPD has proved very useful in analysis of Military Construction budgets and the Committee looks forward to annual review of the FYDP in VA budget submissions.

Quarterly financial information reports.—The bill includes an administrative provision which extends the requirement for submission of the quarterly financial information required in the fiscal

year 2018 bill and conference report.

Additional budgetary information.—The Committee continues its request that items described in the fiscal year 2015, 2016 and 2017 House reports continue to be included in the budget justifications submitted each year. Further, the Committee directs VA to include in its budget justification materials a table for each account that shows a five-year funding history, for requested and enacted levels.

Staff relocations within VA.—The bill continues the administrative provision requiring written notification 15 days prior to organizational changes which result in the transfer of 25 or more full-time equivalent staff from one organizational unit of the Department to another.

Performance bonuses.—The Committee feels it is important to know how VA is allocating its resources with regard to performance bonuses. Therefore, the Committee directs VA to submit a report, within 90 days of enactment of this Act, which provides the aggregate total of VA performance bonuses covering the five most recent fiscal years for which the data is available. The data should be divided between bonuses for Senior Executive Service (SES) staff and non-SES staff. The report should also include the percentage of SES and non-SES employees who received a bonus and the average dollar amount of the bonuses by grade covering the same time period. The report, however, should not include any personally identifiable information.

Financial Management System (FMS) replacement.—The agreement includes \$10,800,000 in this account as well as \$72,821,000 in the Information Technology Systems account for development of a new financial management system. The current legacy financial management system is 30 years old, and its imminent failure presents significant risks to VA. Unfortunately, the VA agreement to use the Department of Agriculture's (USDA) Federal Shared Services financial management system to develop its FMS has collapsed, and VA is trying to use the contracts established by USDA to reconstruct the financial management system it had anticipated acquiring through USDA. The Committee continues to be concerned with VA moving forward alone, given the disastrous outcomes of its two previous attempts to create a modern financial management system. In the fiscal year 2018 conference report, VA

was directed to provide a report to the Committee, within 60 days of enactment of that Act, which described the components to be included in its planned financial management system, such as acquisition, the cost of the contracts and staffing that VA has acquired from USDA, the annual and total costs of the project, and its timeline and performance benchmarks. In addition, VA was directed to provide the Committee, on a quarterly basis, a report that compares actual progress on the financial management system to the performance benchmarks and timeline provided in the first report. The Committee continues to expect the Department to continue this quarterly report throughout fiscal year 2019. The Committee has also assigned its own investigative staff to review the system VA plans to develop and to provide the Committee periodic reports on the project.

Management reforms.—In House Report 115–188 the Committee was concerned that the Department had not yet implemented hundreds of recommendations that would address ongoing management challenges and directed VA to provide recommendations for legislation regarding the roles, responsibilities, and accountability of elements and individuals of the Department of Veterans Affairs. The Committee looks forward to the submission of this report.

Poverty trends in the veteran population.—The Committee requests that VA update its 2015 analysis of poverty trends in the veteran population by the National Center for Veterans Analysis and Statistics (NCVAS) and submit it to the Committee no later than 180 days after the enactment of this Act. The Committee urges VA to include in this analysis the relationship between veterans' labor force activity and poverty status and a demographic break-out, if available, by race and gender. Additionally, the Committee requests that VA continue such analyses on a biannual basis.

Implementing the VA Accountability and Whistleblower Protection Act.—To ensure that the authorities granted in the Department of Veterans Affairs Accountability and Whistleblower Protection Act of 2017 are being applied consistently and as intended, the Committee directs VA to provide a report no later than 120 days after the enactment of this Act. The report should include data on the application of such authorities to employees organized by wage grade, an assessment of whether such authorities are being disproportionately applied to lower wage grades, and data regarding the frequency of appeals when such authorities are applied. The report should also include any available demographic data on overall VA workforce terminations since fiscal year 2016.

Small, minority- and women-owned businesses.—The Committee recognizes the need for VA to continue to meet its goals for contracting with minority, disadvantaged, and women-owned businesses. The Committee is concerned that in fiscal year 2016 and 2017, the Department missed its prime contracting goals for women-owned businesses and businesses in HUBZones. In fiscal year 2016, the Department missed all of its subcontracting goals for women-owned businesses, small disadvantaged businesses, service disabled veteran-owned businesses and businesses in HUBZones. Therefore, the Committee encourages the Department to prioritize awarding contracts to contractors that consistently execute approved small business subcontracting plans. The Com-

mittee further urges the Department to prioritize minority-owned and disadvantaged contractors and subcontractors. The Committee requests a report, within 180 days of enactment of this Act and annually thereafter, detailing the number of contractors which submitted a small business subcontracting plan during the fiscal year. This report shall include an analysis detailing which contractors successfully implemented subcontracting plans and recommendations on how the Department could better achieve its prime and subcontracting goals for small businesses.

Data on women and minority veterans.—The Committee recognizes the lack of data specific to women and minority veterans made available to Congress by VA. The Committee continues to recommend, when applicable, that VA display information separately for female and minority veterans in its annual report(s) to

Congress.

Veterans Day parade.—The Committee understands that the Administration may conduct a large military parade to honor American veterans on November 11, 2018, Veterans Day, to commemorate the one-hundredth anniversary of the ending of World War One. The authorizing committees plan to authorize the DOD Secretary to conduct the parade and to expend funds for particular purposes relevant to the parade. If VA is asked to contribute resources to the parade, the Committee expects the Department to follow DOD's example and limit expenditures to specific purposes that are directly associated with benefits to and recognition of veterans. The Committee directs VA to notify the Committee if and when it first expends funds related to the parade and to provide a quarterly report thereafter identifying any resources provided for the parade, including programmatic funding and personnel.

BOARD OF VETERANS APPEALS

Fiscal year 2018 enacted level	\$161,048,000
Fiscal year 2019 budget request	174,748,000
Committee recommendation in the bill	
Comparison with:	, ,
Fiscal year 2018 enacted level	13,700,000
Fiscal year 2019 budget request	

The bill makes ten percent of this funding available through September 30, 2020.

The bill also provides the \$9,505,000 requested in the Information Technology Systems budget to support the Appeals Modernization initiative. The initiative will convert the Board's 1980's-era case control and locator system to a new, automated integrated community developed suite that is used to process initial disability claims.

The Board of Veterans Appeals (BVA) is the component of VA responsible for making final decisions on behalf of the Secretary for the thousands of claims for veterans' benefits that are presented to BVA for appellate review. The majority of the BVA's workload derives from the benefit claims initiated at VBA regional offices. The appellate process has multiple steps, most of which occur at the local regional office level. If a veteran is not satisfied with a regional office determination, he or she may appeal to BVA for a final agency decision. BVA adjudicates appeals covering all areas of veterans' benefits, but most of the workload concerns appeals for vet-

erans' disability compensation or pension benefits. As the disability compensations claims backlog at VBA dwindles, the appeals workload at the Board increases correspondingly. Pending appeals are projected to increase by 31 percent from 153,513 at the end of 2017

to 201,816 by the end of 2019.

Appeals reform.—The Committee is relieved that the historic Veterans Appeals Improvement and Modernization Act of 2017, signed into law in August, 2017 will provide both VBA and BVA with the tools they need to reduce the troubling backlog of appeals. Although implementation of the new law will not be complete until March, 2019, the Committee is encouraged that both agencies are taking steps now to implement some of the Act's new authorities to reduce the appeals backlog. VBA has launched the Rapid Appeals Modernization Program (RAMP), which provides veterans with pending disability claims the option to participate in the new "three lane" appeals process authorized by RAMP during the implementation period. BVA is also testing a process to outsource a large majority of the case review process to reduce the administrative work currently done by decision-writing attorneys, which pulls them from their primary role of writing draft decisions. With the appeals received by VBA and BVA increasing dramatically each year as the backlog of initial disability claims is reduced, these efforts are vital to containing the volume of pending appeals and serving veterans who have waited years, in some cases, for adjudication of their claims. The Committee urges BVA to commit the necessary resources to reduce this backlog of appeals.

Appeals modernization.—The Committee concurs with the recommendations in GAO report 18–352 regarding modernizing and improving VA's appeals process. The VA should articulate a more complete and balanced set of goals and measures for monitoring and assessing performance on a range of dimensions of success; include key planned activities; articulate interim goals and needed resources for, and inter-dependencies among, activities; and identify and mitigate key risks associated with implementing the new processes. The Committee directs the Secretary to fully implement the GAO's recommendations to ensure successful implementation of

the new appeals process.

Service-connected disability appeals.—The Committee continues to remain concerned about the excessive wait times that veterans must endure to receive appeals decisions, particularly appeals of service-connected disability claims. To assist the Committee in its oversight responsibilities, VA is directed to provide an analysis of appeals wait times related to service-connected disability claims since fiscal year 2014. The analysis should determine the average time, by fiscal year, for these appeals to be resolved and highlight

VA's efforts to accelerate this appeals resolution process.

Tele-appeals.—The Committee seeks to reduce the logistical burden for veterans during the claims appeals process. Current law, as stipulated in 38 USC 7107, requires that appeals made using video teleconferencing equipment be conducted at VA facilities. The Committee is interested in understanding the feasibility and cost of allowing veterans to conduct such appeals from locations of their own choosing, such as their homes. Therefore, the Committee requests a report, no later than 90 days after the enactment of this Act, that assesses the statutory, technological, and security issues

that would need to be addressed to implement such a program. The report should include an assessment of currently available technologies and the cost associated with such technologies in the context of implementing such a program. The report should also include recommendations on legislative changes that would be needed to implement such a program.

INFORMATION TECHNOLOGY SYSTEMS

(INCLUDING TRANSFER OF FUNDS)

Fiscal year 2018 enacted level	\$4,055,500,000
Fiscal year 2019 budget request	4,184,571,000
Committee recommendation in the bill	4,105,500,000
Comparison with:	
Fiscal year 2018 enacted level	50,000,000
Fiscal year 2019 budget request	(79,071,000)

The Information Technology Systems account supports IT services such as systems development and performance, operations and maintenance, information protection, and customer support. The program permits the effective and efficient delivery of veterans'

health care services and benefits programs.

Within the account total, the Committee allocates in bill language \$1,235,320,000 for pay and associated costs, which is \$7,900,000 below the budget request; \$2,521,650,000 for operations and maintenance, which is \$39,130,000 below the request; and \$348,530,000 for development, which is \$32,041,000 below the request. The bill makes available five percent of pay and associated costs and of operations and maintenance funds until September 30, 2020. All development funds are available until September 30,

The bill provides \$32,013,000 for the Veterans Benefits Management System (in addition to the \$36,212,000 which is provided for VBMS in the General Operating Expenses, Veterans Benefits Administration account); \$72,821,000 for the replacement of the Financial Management System, in addition to the \$10,800,000 provided in General Administration; \$22,081,000 for replacement of the NCA burial operations support system; and \$9,505,000 for the

Board of Veterans Appeals modernization effort.

The Committee continues to include bill language prohibiting obligation or expenditure of funds for information technology systems development until VA submits to the Committees a certification of the amounts. In addition, the Committee continues bill language permitting the transfer of funding among the three subaccounts upon approval of the Committees. The bill contains language which allows for the reprogramming of funds among development projects upon prior notification to, and approval by, the Committees. The bill continues to include language indicating that funds for development are available only for the projects and in the amounts specified in the report accompanying the Act.

The chart below reflects the Administration's budget request for

development projects and includes the Committee's recommendation for each. This chart will serve as the Department's approved list of development projects, and all requested changes are subject to the reprogramming guidelines as outlined in the accompanying

Act.

INFORMATION TECHNOLOGY DEVELOPMENT PROJECTS

(in thousands of dollars)

Project	Fiscal year 2019 Budget request	Committee Recommendation
Clinical Applications	\$32,479	\$27,479
Health Management Platforms	70,391	60,391
Benefits Systems	129,615	112,574
Memorial Áffairs	18,800	18,800
Other IT Systems	78,571	78,571
Cybersecurity	17,000	17,000
Information/Infrastructure Management	33,715	33,715
Total, Development	380,571	348,530

The Committee expects the Office of Information Technology to continue to provide an IT expenditure report to the Committees on Appropriations on a monthly basis. This report shall include a comparison to the project costs included in the development funding chart above and provide an explanation for any differences in excess of \$1,000,000.

Appointment scheduling system.—The Committee remains concerned about patient scheduling challenges and seeks to understand the Department's plan for a solution that will improve veteran access to care, shorten veteran wait times, allow the VA to track and manage patient progress throughout the care continuum, and improve resource utilization across the VA health care system. The Committee understands that a scheduling system will be a component of the new Electronic Health Record (EHR) program and that VA plans to deploy this new system to its first facilities within 18 months of the EHR program's contract award and to all its facilities within 10 years of contract award. The Committee also understands that VA is conducting pilot programs involving commercial off-the-shelf solutions (COTS) scheduling systems to assess if they provide substantial value over its current interim systems. In order to determine whether full deployment of one of these pilot programs is warranted as an interim solution, pending full operational capability of the new EHR system, the Committee directs VA to provide the results of its evaluation of the pilot programs as soon as those evaluations are complete. Further, the Committee requests a report, within 90 days of enactment of this Act, that evaluates the cost and benefits of its interim scheduling systems, the commercial solutions considered in its pilot programs, including the pilot program referenced in House Report 115-188, and the EHR scheduling system, based on current contract requirements. The report's evaluation of the systems, or contract requirements, should include an assessment of mobile interface capabilities and the abil-

ity to schedule appointments outside the VA system.

Cybersecurity implementation.—The Committee is concerned about the pace at which implementation of cybersecurity best practices are occurring at the Department, especially as VA and DOD continue to integrate VA electronic health information. The Committee directs the Department to identify for the Committee steps it has taken to protect data and patient records across physical, virtual, and mobile networks and the devices and systems attached to these networks. If such review warrants, the Department should consider a layered defensive strategy that includes perimeter secu-

rity, segmentation within the data center to increase lateral security, and data and application protections. The Committee also urges VA to ensure that patient records being transferred from DOD to VA have the same level of security and data-level protec-

tions as provided by DOD.

Information technology solutions.—The Committee is encouraged by VA's efforts to modernize its electronic health record, but remains concerned about the use of critical resources on the development of internal Information Technology (IT) applications. To improve patient health outcomes and ensure the best possible care for veterans, the Committee urges VA to complete its review of its inventory of IT solutions and standardize best practices and proven technologies across the continuum of care for veterans. The Committee directs the Secretary to provide a report, no later than 90 days after enactment of this Act, outlining the Department's plan to evaluate and incorporate these IT applications to improve and promote veteran-centered care.

VETERANS ELECTRONIC HEALTH RECORD

Fiscal year 2018 enacted level	\$782,000,000
Fiscal year 2019 budget request	1,207,000,000
Committee recommendation in the bill	1,207,000,000
Comparison with:	, , ,
Fiscal year 2018 enacted level	425,000,000
Fiscal year 2019 budget request	·

The Veterans Electronic Health Record is a unified account designed to manage the effort to develop an electronic health record that will access seamlessly the records of veterans in the VA system and those of DOD and of community providers. The VA system is the same as the one chosen by DOD and is planned to be rolled out with the same timeline and geographic areas as DOD in order to realize cost efficiency savings.

Within the total funding, the bill provides \$675,000,000 for the electronic health record contract, \$120,000,000 for program management, and \$412,000,000 for infrastructure support. Funding is made available for three years because of the uncertainty of the

timing of obligations in this substantial new effort.

The Department has committed in future years to provide about 30 percent of the total cost of this ten-year project. The Committee expects that this pledge will be maintained throughout Department

leadership changes.

The bill does not include the transfer language requested by the Administration. This account is intended to be the single source of funding within VA for the electronic health record effort. No authority is provided for funds from other VA accounts to be transferred to this account or for funds from this account to be transferred to other accounts. Consistent with the effort to centralize financial management of the development of the electronic health record, the Committee continues to direct the Department to place top management of the project at the headquarters level above either the VHA or the Office of Information Technology, in the Office of the Deputy Secretary.

The bill language for this account continues to require the Secretary to submit a report quarterly to the Committees detailing obligations, expenditures, and deployment strategy by facility. In addition, the Committee repeats the fiscal year 2018 directive for

GAO to perform quarterly performance reviews of the VA electronic health record deployment so that the Committees are kept abreast of important issues such as cost and operational capability. It is expected that this quarterly reporting will avail the Committees and VA with timely information to properly oversee this effort and address important issues.

The Committee remains concerned that the effort to deploy a different type of electronic record than the VistA system that VA physicians are accustomed to could run into major resistance. Other major electronic health record system start-ups have failed in the face of internal resistance. The Committee urges VA to focus sufficient resources and attention to this change management challenge, which could be more difficult than the technical issues of im-

plementing the new record.

Delays in contract finalization.—The Committee was encouraged that VA finally decided to use the same EHR system as DOD, since it is vital that the two systems be interoperable. Last July, the Secretary announced that Cerner Corporation, which had participated in the DOD EHR contract, had received the sole source contract to develop the VA EHR. The Committee had a hearing last November in closed session to learn the details of the contract, its cost, design features, and anticipated project rollout across the VA network. Subsequently, the Committee provided the initial \$782,000,000 funding for the project, with the expectation that the Cerner contract would be signed soon after that funding became available. However, the contract may not be signed until the new Secretary is confirmed. The Committee is concerned that further delays could jeopardize VA's plans to roll out the EHR in the same regions and under the same timeframe as DOD is using for its new EHR system, as well as increase the program's cost. With a decade of futile effort and billions of dollars spent to develop the VA EHR, the agency needs to complete its contract as soon as possible. The Committee will continue to monitor VA expenditures for the new EHR, and if it is clear that delays in project management are slowing obligations, funding levels may be revisited during conference.

Medical records portability.—The Committee supports veterans having real-time, seamless, and portable access to all of their medical records. As such, the Committee urges VA to develop, as part of its new EHR system, the means by which veterans can have se-

cure, portable access to their own medical records.

OFFICE OF INSPECTOR GENERAL

Fiscal year 2018 enacted level	\$164,000,000
Fiscal year 2019 budget request	172,054,000
Committee recommendation in the bill	172,054,000
Comparison with:	
Fiscal year 2018 enacted level	8,054,000
Fiscal year 2019 budget request	

The Office of Inspector General (OIG) was established by the Inspector General Act of 1978 and is responsible for the audit, investigation, and inspection of all VA programs and operations. The overall operational objective is to focus available resources on areas which would help improve services to veterans and their beneficiaries, assist managers of Department programs to operate economically in accomplishing program goals, and to prevent and deter recurring and potential fraud, waste, and inefficiencies.

The bill makes up to ten percent of this funding available until September 30, 2020.

CONSTRUCTION, MAJOR PROJECTS

Fiscal year 2018 enacted level	\$512,430,000 1.127,486,000
Committee recommendation in the bill	
Comparison with:	
Fiscal year 2018 enacted level	615,056,000
Fiscal year 2019 budget request	()

The Construction, Major Projects appropriation provides for constructing, altering, extending, and improving any of the facilities under the jurisdiction or for the use of VA, including planning, architectural and engineering services, assessments, and site acquisition where the estimated cost of a project is \$10,000,000 or more.

The Committee recommendation makes all but \$480,000,000 of

these funds available for a five-year period.

In addition, Sec. 238 provides a total of \$850,000,000 in additional funding for this account as part of the infrastructure initiative—\$750,000,000 for seismic corrections and \$100,000,000 for

cemetery Major Construction.

In past years, this appropriations bill repeated language that is in permanent law requiring that all major construction projects costing more than \$100,000,000 be managed by a non-VA government entity such as the Army Corps of Engineers. Because this policy is now well-established, the Committee no longer feels a need to duplicate the language. However, the Committee intends to continue its oversight of the quality of the outside entity management and will continue to receive quarterly briefings on each of the large construction projects.

The chart below reflects the Administration's budget request for Major Construction projects and includes the Committee's recommendation for each.

CONSTRUCTION. MAJOR PROJECTS

(in thousands of dollars)

Location and description	Request	Recommended
Veterans Health Admin. (VHA):		
St. Louis, MO, medical facility improvements and cemetery expansion	34,400	34,400
Canandaigua, NY, construction and renovation	190,000	190,000
Dallas, TX, spinal cord injury facility	135,686	135,686
North Chicago, IL, renovate building #4	6,000	6,000
Oklahoma, OK new surgical intensive care unit	10,800	10,800
Advance Planning and Design Fund: various locations	95,000	95,000
Asbestos: various locations	15,000	15,000
Major Construction Staff: various locations	27,500	27,500
Hazardous Waste: various locations	26,200	26,200
Judgment Fund: various locations	25,000	25,000
Non-Dept. Fed. Entity Project Management Support	38,700	38,700
Seismic Corrections: various location	400,000	400,000
Total, VHA	1,004,286	1,004,286
Ohio Western Reserve: gravesite expansion	29,000	29,000
Great Lakes, MI: gravesite expansion	35,200	35,200
Cape Canaveral, FL: gravesite expansion	38,000	38,000
Advance Planning and Design Fund	10,000	10,000
NCA Land Acquisition	5,000	5,000
Total, NCA	117,200	117,200

CONSTRUCTION, MAJOR PROJECTS

(in thousands of dollars)

Location and description	Request	Recommended
General Admin.: Staff Offices Advance Planning Fund	6,000	6,000
Total, Construction Major Projects	\$1,127,486	\$1,127,486

To enhance the Committee's capacity to conduct oversight on VA's facility construction efforts, several administrative provisions are continued in the bill: (1) No funding amount greater than \$7,000,000 may be reprogrammed between construction projects unless approved by the Committees on Appropriations of both House of Congress; (2) any change to the scope of a construction project is not permitted without the approval of the Committees; and (3) VA must report any bid savings of \$5,000,000 or more on projects as soon as they are identified.

Budget justification documents.—The Committee reminds the Department of the requirement in Sec. 258 of Division A of P.L. 114–223 regarding specific materials to be included in Major Construction budget justification documents for fiscal year 2017 and each

fiscal year thereafter.

Joint VA and U.S. Army Corps of Engineers projects.—While the Committee has strongly endorsed the management of large VA construction projects by the U.S. Army Corps of Engineers ("the Corps"), as required by section 502 of Public Law 114–58, it recognizes that the transition to this new process has created some unavoidable delays in construction schedules. To better understand the timetable and construction issues associated with each VA project managed by the Corps, the Committee requests, within 60 days of enactment of this Act, the initiation of quarterly reports on each VA project managed by the Corps.

Market assessment.—The Committee supports VA's efforts to obtain analysis that provides a more holistic view of VA facilities and thereby allows the Department to make more informed, data driven decisions about its facilities and buildings. The Committee recognizes that annual analysis and benchmarking across the Department's facilities will provide an invaluable tool for long-term system-wide planning, needs identification, and cost management for the Department. The Committee, therefore, encourages the Department to utilize an independent, third-party to provide facilities analysis, benchmarking and recommendations for all VHA hospitals, nursing homes, domiciliary facilities, and other necessary facilities.

Training for VA personnel engaged in facility management.—The Committee continues to be concerned by the lack of training and certification provided to engineering, construction and facility management staff with regard to building operations and maintenance. The Committee looks forward to receiving the report from VA on this topic as requested in House Report 115–188.

Parking facilities.—In H. Rpt. 115–188, the Committee noted that numerous parking facility projects throughout the Strategic Capital Investment Planning (SCIP) list are often skipped for more traditional VA construction projects, which has caused a backlog in parking facilities. In response, the Committee directed VA to pro-

vide information regarding how parking facility projects are rated, a timeline for completion of these projects, their cost, and any notable actions taken by VA medical centers to address parking issues. However due to the late passage of the fiscal year 2018 bill, this reporting requirement remains incomplete. The Committee reiterates its interest in this issue and looks forward to the final report.

Public-private partnerships.—The Committee applauds VA for engaging in partnerships with academic institutions to facilitate closer scientific collaboration, while increasing the research space available to VA. Such partnerships are important in expanding the Department's research investment to leverage non-federal initiatives, which provide the opportunity for strong co-location of VA and university biomedical scientists for translational investigation. Such co-location and collaboration may enable precision medicine outcomes for wounded warriors and other high-at-risk veteran populations. Therefore, the Committee encourages VA to expedite consideration of proposals for the Department to co-locate its research facilities with academic institutions that are engaged in the conduct of multi-disciplinary investigations related to veterans and wounded warriors, including those related to medicine, engineering, and veterinary science.

CONSTRUCTION, MINOR PROJECTS

Fiscal year 2018 enacted level	\$342,570,000 706,889,000 649,514,000
Fiscal year 2018 enacted level	306,944,000
Fiscal vear 2019 budget request	(57.375.000)

The Construction, Minor Projects appropriation provides for constructing, altering, extending, and improving any of the facilities under the jurisdiction of, or for the use of, the Department, including planning, assessment of needs, architectural and engineering services, and site acquisition, where the estimated cost of a project is less than \$10,000,000.

In addition to this funding, \$350,000,000 is provided in Sec. 238 for VHA Minor Construction projects as part of a \$2,000,000,000 infrastructure initiative. A similar initiative provided \$425,000,000 in additional funds for this account in fiscal year 2018.

As with the Major Construction account, the Committee recommendation makes these funds available for a five-year period.

Ambulatory surgical centers (ASC).—The Committee is concerned about VA's ambulatory surgical capacity and believes a focus on ambulatory surgical services, as provided by ASCs, has the potential to provide substantial cost savings and improve health outcomes for veterans. However, the Committee understands that VHA does not consider ASCs to be one of its foundational services and, therefore, does not place any special priority on construction of ASCs during the SCIP process. To better understand the role of ASCs, the Committee directs VHA to provide a report, no later than 60 days after enactment of this Act, which assesses whether assigning a specific prioritization to ASCs during the SCIP process would provide substantial cost savings and improve health outcomes for veterans by increasing VHA's ambulatory surgical capacity. The report should also include a timeline for completion of

pending ambulatory surgical center projects, their costs, and any notable actions taken by VA medical centers to address ambulatory

surgical needs.

Construction of housing for rural homeless veterans.—The Department has made great efforts to find suitable housing for homeless veterans and their families. However, more non-traditional efforts should be made to eliminate this problem. For example, some cities and towns have started pilot programs using Micro or "Tiny Homes" to help deal with homelessness. However, due to the lack of legislative authority the VA is unable to utilize tiny homes for homeless veterans. The Committee is interested in what statutory changes would be needed for VA to be able purchase and construct, single unit, Micro or "Tiny Homes" for homeless veterans. This approach could provide a pathway to stable housing for veterans. The Committee directs VA to identify the necessary statutory changes in a report no later than 60 days after enactment of this Act.

Impact of changes to Historic Preservation Tax Credit to historic VA facilities.—The Committee encourages VA to work with Enhanced-Use Lease (EUL) project sponsors, the Internal Revenue Service, local VA, and any other relevant officials to address the adverse impacts that changes to the Historic Preservation Tax Credit made by Public Law 115-97, are having on EUL projects to renovate and rehabilitate historic VA facilities. The Committee is aware that some of the recent tax law changes have made it harder to complete longstanding projects because they reduced the value of tax credits needed to bring the projects to fruition, resulting in a funding gap. For example, VA selected a Preferred Developer to carry out a EUL to renovate historic VA buildings in July 2016 but still has not yet formally signed the lease. Without action by VA, this critical project to provide permanent supportive housing for veterans and their families that are homeless, or at risk of homelessness, is now at risk due to additional and unanticipated costs directly related to how the historic preservation tax credit can be used for the project. Therefore, the Committee urges VA to work with interested parties to find a solution, including developing options to directly provide capital funding, technical, and other assistance to prevent the loss of benefits to veterans should these projects stall as a direct result of changes beyond the sponsor's control that were unforeseen when these projects were put out to bid.

GRANTS FOR CONSTRUCTION OF STATE EXTENDED CARE FACILITIES

Fiscal year 2018 enacted level	\$110,000,000
Fiscal year 2019 budget request	150,000,000
Committee recommendation in the bill	150,000,000
Comparison with:	
Fiscal year 2018 enacted level	40,000,000
Fiscal year 2019 budget request	

In addition to funding provided in this account, as part of a \$2,000,000,000 VA infrastructure initiative, the fiscal year 2018 appropriations bill provided \$575,000,000 for State homes. This funding, in conjunction with the regular fiscal year 2018 appropriation, was sufficient to clear the longstanding backlog of approved State applications.

This appropriation provides grants to assist States to construct State home facilities, for furnishing domiciliary or nursing home care to veterans, and to expand, remodel, or alter existing buildings for furnishing domiciliary, nursing home, or hospital care to veterans in State homes. A grant may not exceed 65 percent of the total cost of the project. The bill makes this funding available until expended.

GRANTS FOR CONSTRUCTION OF VETERANS CEMETERIES

Fiscal year 2018 enacted level	\$45,000,000 45,000,000 45,000,000
Comparison with:	45,000,000
Fiscal year 2018 enacted level	
Fiscal year 2019 budget request	

This program provides grants to assist States and tribal governments with the establishment, expansion, and improvement of veterans' cemeteries which are operated and permanently maintained by the States and tribal governments. Grants under this program fund up to 100 percent of construction costs and the initial equipment expenses when the cemetery is established. The States and tribal governments remain responsible for providing the land and for paying all costs related to the operation and maintenance of the State cemeteries, including the costs for subsequent equipment purchases. The bill makes this funding available until expended.

ADMINISTRATIVE PROVISIONS

The bill includes 38 administrative provisions, all of which were included in the fiscal year 2018 bill in some form.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 201 allowing for the transfer of funds among three mandatory appropriations. The Administration proposal to modify this provision is not adopted.

$(INCLUDING\ TRANSFER\ OF\ FUNDS)$

The bill includes section 202 allowing the Department to transfer funding among the four medical appropriations accounts in fiscal year 2018. The Administration proposal to modify this provision is not adopted.

The bill includes section 203 allowing for salaries and expenses funds to be used for hire of passenger vehicles, lease of facilities or land, and purchase of uniforms.

The bill includes section 204 providing that only funding in "Construction, Major Projects" and "Construction, Minor Projects" can be used for the purchase of any site for any new hospital or home or to construct any new hospital or home.

The bill includes section 205 requiring the Department to be reimbursed for medical services it provides to any person not defined as a beneficiary to ensure the Department is receiving payment for all medical services provided.

The bill includes section 206 allowing for the use of funds appropriated in fiscal year 2018 for "Compensation and Pensions", "Readjustment Benefits", and "Veterans Insurance and Indemnities" for payment of accrued obligations recorded in the last quarter of fiscal year 2018.

The bill includes section 207 allowing for the use of fiscal year 2019 funds to pay prior year obligations resulting from implementation of sections 3328(a), 3334, and 3712(a) of title 31, United States Code.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 208 allowing the Department to use surplus earnings from the national service life insurance, U.S. Government life insurance, and veterans special life insurance program to administer these programs.

The bill includes section 209 allowing the Department to obligate enhanced-use lease proceeds for administrative expenses that were incurred in a prior fiscal year during the year funds are received.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 210 limiting the amount of reimbursement the Office of Resolution Management, the Office of Employment Discrimination Complaint Adjudication, the Office of Accountability and Whistleblower Protection, and the Office of Diversity and Inclusion can charge other offices and accounts of the Department for services provided.

The bill includes section 211 requiring the Department to collect current and accurate third-party reimbursement information for the purposes of third-party insurance collections. If persons receiving care or medical services do not disclose this information, the Department is allowed to bill them reasonable charges for services provided.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 212 allowing the Department to use enhanced-use lease funds for construction and alteration of medical facilities.

The bill includes section 213 allowing the Department to use the Medical Services appropriation for expenses related to the broader mission of medical care to veterans.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 214 allowing the Department to transfer Medical Care Collections to the "Medical Services" and "Medical Community Care" accounts to be used for veterans medical care and makes those funds available until expended.

The bill includes section 215 allowing veterans who reside in Alaska to obtain medical services from medical facilities supported by the Indian Health Service or tribal organizations, and provides for reimbursement for those services from VA.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 216 allowing the Department to transfer the proceeds received from the transfer of real property deposited into the VA Capital Asset Fund to the major and minor construction appropriations accounts and makes those funds available until expended.

The bill includes section 217 requiring the Secretary to submit quarterly reports to the Committees on Appropriations of both Houses of Congress on the financial status of the Veterans Health Administration. The Administration proposed to delete this provision.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 218 prohibiting the Department from increasing total resources of the Information Technology appropriation by more than ten percent by transferring funding from the other VA accounts and requires the Department to receive approval from the Committees on Appropriations before such transfer. The Administration proposal to modify this provision is not adopted.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 219 permitting the transfer of \$307,609,000 of fiscal year 2020 funding appropriated for medical accounts to the Joint Department of Defense-Department of Veterans Affairs Medical Facility Demonstration Fund for the operation of facilities designated as combined Federal medical facilities.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 220 permitting the transfer of funds deposited in the Medical Care Collections Fund to the Joint Medical Facility Demonstration Fund for facilities designated as combined federal medical facilities.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 221 directing that a minimum of \$15,000,000 shall be transferred from the four medical care appropriations to the Department of Defense/Department of Veterans Affairs Health Care Sharing Incentive Fund, to be available until expended.

The bill includes section 222 prohibiting funds from being used to replace the current system by which VISNs select and contract for diabetes monitoring supplies and equipment. The administrational deviations are also as a second section of the section of the second section of the section

tion proposal to delete this provision is not adopted.

The bill includes section 223 requiring the Secretary to notify the Committees on Appropriations of both Houses of Congress of all bid savings when identified in Major Construction projects that total at least \$5,000,000 or 5 percent of the programmed amount of the project. The Administration proposal to delete this provision is not adopted.

The bill includes section 224 prohibiting the original scope of work for a Major Construction project from being increased above the scope specified for that project in the original justification data provided to Congress unless approved by the Committees. The Administration proposal to delete this provision is not adopted.

The bill includes section 225 requiring a quarterly report from each VBA regional office on pending disability claims, both initial and supplemental; error rates; the number of claims processing personnel; corrective actions taken; training programs; and review team audit results. In addition, the bill requires quarterly reporting on pending appeals at VBA, as well as BVA. The Administration proposal to delete this provision is not adopted.

The bill includes section 226 requiring advance written notification to the Committees on Appropriations of both Houses of Congress 15 days prior to organizational changes which result in the transfer of 25 or more full-time equivalent staff from one organizational unit to another. The Administration proposal to delete this provision is not adopted.

The bill includes section 227 requiring the Secretary to provide, on a quarterly basis to the Committees on Appropriations of both Houses of Congress, notification of any single national outreach and awareness marketing campaign in which obligations exceed \$2,000,000. The Administration proposal to delete this provision is not adopted.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 228 permitting the transfer to "Medical Services" from any discretionary program except "General Operating Expenses, Veterans Benefits Administration" upon approval of both Appropriations Committees. This provision is intended to give VA flexibility as it administers the changes to its traditional health care program and the Choice Act. The budget request to modify this provision is not adopted.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 229 permitting the transfer of funds between the "Board of Veterans Appeals" and "General Operating Expenses, Veterans Benefits Administration" upon approval of both Appropriations Committees. The budget request to modify this provision is not adopted.

The bill includes section 230 prohibiting the reprogramming of funds exceeding \$7,000,000 among the major construction projects unless both Appropriations Committees approve the request. The Administration proposal to delete this provision is not adopted.

The bill includes section 231 requiring the Secretary to ensure that the toll-free suicide hotline provides immediate assistance from a trained professional and adheres to all requirements of the American Association of Suicidology. The administration request to delete this provision is not adopted.

The bill includes section 232 restricting funds from being used to close certain medical facilities in the absence of a national realignment strategy. The budget request to delete this provision is not adopted.

The bill includes section 233 requiring VA to use the mammography screening guidelines announced by the Secretary on May 10, 2017 through January 1, 2024. The administration request to delete this provision is not adopted.

The bill includes section 234 allowing the use of Medical Services funding for assisted reproductive technology treatment and adoption reimbursement for veterans and their spouses if the veteran has a service-connected disability that results in being unable to procreate without such fertility treatment. The bill retains the language for this provision included in the 2018 bill rather than returning to the 2017 language, as the Administration proposed.

The bill includes section 235 prohibiting any funds being used in a manner that is inconsistent with statutory limitations on outsourcing.

The bill includes section 236 which prohibits funds from being used to transfer funding from the Filipino Veterans Equity Com-

pensation Fund to any other VA account.

The bill includes section 237 prohibiting the use of canines in VA research unless: the scientific objectives of the study can only be met by using canines; the study has been directly approved by the Secretary; and the study is consistent with the revised VA canine

research policy document released in December, 2017.

The bill includes section 238 providing \$2,000,000,000 for infrastructure improvements, allocated between \$750,000,000 for seismic corrections, \$800,000,000 for non-recurring maintenance, \$100,000,000 in Major Construction for National Cemetery Administration projects, and \$350,000,000 in Minor Construction for Veterans Health Administration projects.

TITLE III

RELATED AGENCIES

AMERICAN BATTLE MONUMENTS COMMISSION

SALARIES AND EXPENSES

The recommendation includes \$75,100,000 for Salaries and Expenses of the American Battle Monument's Commission (ABMC), as requested.

FOREIGN CURRENCY FLUCTUATIONS ACCOUNT

The recommendation includes such sums as necessary for the Foreign Currency Fluctuations Account.

United States Court of Appeals for Veterans Claims

SALARIES AND EXPENSES

The recommendation includes \$33,600,000 for Salaries and Expenses for the United States Court of Appeals for Veterans Claims. The fiscal year 2018 omnibus included bill language requiring a feasibility study prior to the purchase of a new courthouse. The study has not been completed, therefore the recommendation does not include the funds requested for a new courthouse.

DEPARTMENT OF DEFENSE—CIVIL CEMETERIAL EXPENSES, ARMY

SALARIES AND EXPENSES

The recommendation includes \$70,800,000 for Salaries and Expenses for Arlington National Cemetery (ANC), as requested. The Committee appreciates ANC's emphasis on acquisition improvements, including training, certification and workforce, to improve procurement and accountability.

CONSTRUCTION

The recommendation includes \$73,855,000 for planning and design and construction of Southern Expansion to remain available

Southern Expansion.—The recommendation includes \$73,855,000 for planning and design and construction of Southern Expansion to remain available until expended. The Committee notes that Public law 115–141 included \$167,000,000 above the budget request for the Southern Expansion and road realignments to extend the life of the cemetery. For fiscal year 2019 the bill again includes additional funds for Southern Expansion which brings the total funds available for this project to \$240,855,000, well short of the projected \$300,000,000 plus that will be needed to complete this project. The Committee notes that the Office of Management and Budget will need to dedicate resources in future budget submissions to ensure that the life of our Nation's most prestigious cemetery is extended into the 2050 timeframe.

ARMED FORCES RETIREMENT HOME

TRUST FUND

The recommendation includes \$64,300,000 for the Armed Forces Retirement Home (AFRH), which is the same as requested, although \$22,000,000 of the total is provided from the general fund of the Treasury, and not the Trust Fund. The Committee notes that there are major challenges for the near- and long-term sustainability of the Trust Fund, which was created to provide all resources required for operations and expenses of the two AFRH locations. The Trust Fund is replenished from a variety of sources, including fines and forfeitures and Active Duty Withholding. However, the largest source of funds, which is derived from fines and forfeitures, is diminishing.

AFRH and the Department of Defense (DOD) were directed by Congress to develop an approach that will replenish the Trust Fund in a sustainable, reliable manner. The Committee again asserts that the use of the General Fund is not a long-term solution, and AFRH is directed to work with DOD to continue to develop alternatives during fiscal year 2019, to be included in the fiscal year 2020 budget request. In addition, AFRH is directed to report to the Committee quarterly, on the Trust Fund balance, receipts and expenditures, and the progress of its efforts to lease property at the Washington, D.C. facility. Further, AFRH is directed to submit a report to the Committee on business practice reforms, revised funding models, and long-term plan to stabilize the Armed Forces Retirement Home Trust Fund.

Administrative Provision

The bill includes one provision that was in effect in fiscal year 2018. The administrative provision included in the bill as follows: The bill includes section 301 permitting funds from concessions at Army National Military Cemeteries to be used to support activities at the Cemeteries.

TITLE IV

OVERSEAS CONTINGENCY OPERATIONS

DEPARTMENT OF DEFENSE

Fiscal year 2018 enacted level	000,000
Fiscal year 2019 budget request	420,000
Committee recommendation in the bill	420,000
Comparison with:	
	420,000
Fiscal year 2019 budget request	

The Committee recommendation includes Overseas Contingency Operations, for military construction projects and planning and design related to the European Deterrence Initiative (EDI).

MILITARY CONSTRUCTION, ARMY

The recommendation includes \$261,250,000 for Army military construction and planning and design for European Deterrence Initiative projects.

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

The recommendation includes \$227,320,000 for Navy and Marine Corps military construction and planning and design for European Deterrence Initiative projects.

MILITARY CONSTRUCTION, AIR FORCE

The recommendation includes \$345,800,000 for Air Force military construction and planning and design for European Deterrence Initiative projects.

MILITARY CONSTRUCTION, DEFENSE-WIDE

The recommendation includes \$87,050,000 for Defense-Wide Overseas Contingency Operations and planning and design for Special Operations Command and European Deterrence Initiative projects.

Administrative Provisions

The bill includes one provision that was in effect in fiscal year 2018 and includes one new administrative provision. The administrative provisions included in the bill are as follows:

The bill includes section 401 that designates that funding shall be available only if the President so designates all amounts and transmits such designations to Congress.

The bill includes section 402 prohibiting obligation or expenditure of planning and design funds for any project associated with European Deterrence Initiative in this title until a list of projects is submitted to the congressional defense committees.

TITLE V

GENERAL PROVISIONS

The bill includes a total of 13 provisions: 12 provisions that are effective in fiscal year 2018 and a new provision as follows:

The bill includes section 501 prohibiting the obligation of funds beyond the current fiscal year unless expressly so provided.

The bill includes section 502 prohibiting the use of funds for programs, projects or activities not in compliance with Federal law relating to risk assessment, the protection of private property rights, or unfunded mandates.

The bill includes section 503 encouraging all departments and agencies funded in this Act to expand the use of "E-Commerce" technologies and procedures.

The bill includes section 504 specifying the Congressional com-

mittees that are to receive all reports and notifications.

The bill includes section 505 prohibiting the transfer of funds to any instrumentality of the United States Government without authority from an appropriations Act.

The bill includes section 506 prohibiting any funds in this Act to be used for a project or program named for an individual serving as a Member, Delegate, or Resident Commissioner of the United States House of Representatives.

The bill includes section 507 requiring all reports submitted to the Congress to be posted on official websites of the submitting

The bill includes section 508 prohibiting the use of funds to establish or maintain a computer network unless such network blocks the viewing, downloading, and exchanging of pornography, except for law enforcement investigation, prosecution or adjudication activities.

The bill includes section 509 prohibiting the use of funds for payment of first-class travel by an employee of the executive branch.

The bill includes section 510 prohibiting the use of funds in this Act for any contract where the contractor has not complied with E–Verify requirements.

The bill includes section 511 prohibiting the use of funds in this Act by the Department of Defense or the Department of Veterans Affairs for the purchase or lease of a new vehicle except in accordance with Presidential Memorandum—Federal Fleet Performance, dated May 24, 2011.

The bill includes section 512 prohibiting the use of funds in this Act for the renovation, expansion, or construction of any facility in the continental United States for the purpose of housing any individual who has been detained at the United States Naval Station, Guantanamo Bay, Cuba.

The bill includes section 513 establishing a "Spending Reduction Account" in the bill.

House of Representatives Report Requirements

The following items are included in accordance with various requirements of the Rules of the House of Representatives.

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

Pursuant to clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the following is a statement of general performance goals and objectives for which this measure authorizes funding:

The Committee on Appropriations considers program performance, including a program's success in developing and attaining outcome-related goals and objectives, in developing funding recommendations.

RESCISSIONS

Pursuant to clause 3(f)(2) of rule XIII of the Rules of the House of Representatives, the following table lists the rescissions in the accompanying bill:

DEPARTMENT/ACTIVITY

AMOUNTS RECOMMENDED FOR RESCISSION

Department of Defense, Military Construction, Air Force (Sec.	\$31.158.000
126) Department of Defense, NATO Security Investment Program	\$31,158,000
(Sec. 126)	25,000,000
Department of Defense, Home Owners Assistance Program (Sec. 126)	15,000,000

Transfer of Funds

Pursuant to clause 3(f)(2) of rule XIII of the Rules of the House of Representatives, the following statements are submitted describing the transfer of funds provided in the accompanying bill.

Language is included that allows transfer of funds from "Military Construction, Defense-Wide" to other military construction ac-

counts and family housing.

Language is included to allow for the transfer of funds from Family Housing, Construction accounts to the Department of Defense Family Housing Improvement Fund and funds from Military Construction accounts to the Department of Defense Military Unaccompanied Housing Improvement Fund.

Language is included to provide transfer authority from the

BRAC account to the Homeowners Assistance Program.

Language is included to allow the transfer of expired funds to the "Foreign Currency Fluctuations, Construction, Defense" account.

Language is included to transfer not to exceed \$18,047,000 in fiscal year 2020 from Compensation and Pensions to General Operating Expenses, Veterans Benefits Administration and Information Technology Systems. These funds are for the administrative costs of implementing cost-savings proposals required by the Omnibus Budget Reconciliation Act of 1990 and the Veterans' Benefits Act of 1992. Language is also included transferring funds to the medical care collections fund to augment funding of medical facilities for nursing home care provided to pensioners.

Language is included to permit the transfer of funds from General Administration to General Operating Expenses, Veterans Benefits Administration.

Language is included to permit the transfer of funds between Information Technology Systems development projects and among the three sub-accounts identified in bill language subject to the approval of the Committee.

Language is included to provide authority for the Department of Veterans Affairs for any funds appropriated in 2019 for Compensation and Pensions, Readjustment Benefits, and Veterans Insurance and Indemnities to be transferred among those three accounts.

Language is included to transfer funds among the Medical Services, Medical Community Care, Medical Support and Compliance, and Medical Facilities accounts.

Language is included to permit the funds from three life insurance funds to be transferred to General Operating Expenses, Veterans Benefits Administration and Information Technology Systems for the costs of administering such programs.

Language is included to permit funding up to \$73,694,000 to be transferred to General Administration and Information Technology Systems from any funds appropriated in fiscal year 2019 to reimburse four headquarters offices for services provided.

Language is included to transfer certain funds derived from enhanced-use leasing activities to the Construction, Major Projects and Construction, Minor Projects accounts.

Language is included to transfer funds from the Medical Care Collections Fund to the Medical Services and Medical Community Care accounts.

Language is included to allow the transfer of funds from the Capital Asset Fund to the Construction, Major Projects and Construction, Minor Projects accounts.

Language is included to allow the transfer of funds from various accounts to the Information Technology Systems account in an aggregate amount not to exceed ten percent of the account appropriation, subject to approval by the Committee.

Language is included to allow the transfer of funds in fiscal year 2020 provided for the Department of Veterans Affairs to the Joint Department of Defense-Department of Veterans Affairs Medical Facility Demonstration Fund.

Language is included permitting funds deposited to the Medical Care Collections Fund for health care provided at a combined Federal medical facility to be transferred to the Joint Department of Defense-Department of Veterans Affairs Medical Facility Demonstration Fund.

Language is included under the Department of Veterans Affairs that would transfer no less than \$15,000,000 for the DOD/VA Health Care Sharing Incentive Fund as authorized by section 8111(d) of title 38, United States Code.

Language is included that permits the transfer from all discretionary accounts except General Operating Expenses, Veterans Benefits Administration, to Medical Services, subject to approval by the Committee.

Language is included that permits transfer of funds between General Operating Expenses, Veterans Benefits Administration and the Board of Veterans Appeals, subject to approval by the Committee.

DISCLOSURE OF EARMARKS AND CONGRESSIONALLY DIRECTED SPENDING ITEMS

Neither the bill nor the report contains any Congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9 of rule XXI.

CHANGES IN APPLICATION OF EXISTING LAW

Pursuant to clause 3(f)(1)(A) of rule XIII of the Rules of the House of Representatives, the following statements are submitted describing the effect of provisions in the accompanying bill that directly or indirectly change the application of existing law.

Language is included in various parts of the bill to continue ongoing activities that require annual authorization or additional leg-

islation, which to date have not been enacted.

Language is included in various parts of the bill to place limitations on the use of funds in the bill or change existing limitations and which might, under some circumstances, be construed as changing the application of existing law.

Language is included in various parts of the bill to allow the Secretary of Defense to exceed certain limitations upon notification to

the Committee.

Language is included in various parts of the bill to allow funding

to be used for official reception and representation expenses.

Language is included in various parts of the bill to enable various appropriations to remain available for more than one year for some programs for which the basic authority legislation does not presently authorize such extended availability.

Language is included in various parts of the bill to permit the

transfer of funds to other accounts.

Language is included under Title I to prohibit payments for costplus-a-fixed-fee contracts under certain circumstances.

Language is included in various parts of the bill to allow funds

to be used for the hire of passenger motor vehicles.

Language is included under Title I to allow advances to the Federal Highway Administration, Department of Transportation under certain circumstances.

Language is included under Title I to prohibit the use of funds to begin construction of new bases without specific appropriations.

Language is included under Title I to prohibit the use of funds for purchase of land or land easements under certain circumstances.

Language is included under Title I to prohibit the use of funds for land acquisition, site preparation, and utility installation for family housing unless funds have been made available in annual appropriations Acts.

Language is included under Title I to prohibit the use of minor construction funds to transfer an activity between installations

without prior notification.

Language is included under Title I to prohibit the use of funds for the procurement of steel for any activity if American steel producers have been denied the opportunity to compete for such steel procurements.

Language is included under Title I to prohibit the use of funds

to pay real property taxes in any foreign nation.

Language is included under Title I to prohibit the use of funds to initiate a new installation overseas without prior notification.

Language is included under Title I to limit the use of funds for architect and engineer contracts under certain circumstances.

Language is included under Title I to limit the use of funds for awarding contracts to foreign contractors under certain circumstances.

Language is included under Title I to require the Department of Defense to notify the appropriate committees of Congress of any proposed military exercises under certain circumstances.

Language is included under Title I to allow prior year construc-

tion funding to be available for currently authorized projects.

Language is included under Title I to allow payment for the cost associated with supervision, inspection, overhead, engineering and design on family housing or military construction projects that are being completed with expired or lapsed funds.

Language is included under Title I to allow funds to be expended on military construction projects for four fiscal years after enact-

ment under certain circumstances.

Language is included under Title I to allow construction funds to be transferred to Housing Improvement Funds.

Language is included under Title I to allow for the transfer of

BRAC funds to the Homeowners Assistance Program.

Language is included under Title I to limit funds for the operation and maintenance of family housing to those provided in this appropriation and to limit amounts expended on repairs of general and flag officer quarters under certain circumstances.

Language is included under Title I to allow funds in the Ford Island Improvement Account to be available until expended for cer-

tain purposes.

Language is included under Title I to allow for the transfer of expired funding to the Foreign Currency Fluctuation Account under certain circumstances.

Language is included under Title I limiting movement of an

Army unit with a testing mission.

Language is included under Title I to allow for transfer of funds among projects and activities in accordance with reprogramming guidelines.

Language is included under Title I to prohibit funds to be used for projects at Arlington Cemetery.

Language is included under Title I providing additional funds for Military Construction, Army.

Language is included under Title I providing additional funds for Military Construction, Navy and Marine Corps.

Language is included under Title I providing additional funds for Military Construction, Air Force.

Language is included under Title I providing additional funds for Military Construction, Army National Guard.

Language is included under Title I providing additional funds for Military Construction, Air National Guard.

Language is included under Title I providing additional funds for Military Construction, Army Reserve.

Language is included under Title I providing additional funds for Military Construction, Air Force Reserve.

Language is included under Title I that rescinds funds from prior year appropriations Acts.

Language is included under Title I defining the congressional defense committees.

Language is included under Title I to prohibit closure or realignment of Naval Station, Guantanamo Bay, Cuba.

Language is included under Title I limiting the movement of any element of the Rapid Engineer Deployable Heavy Operational Repair Squadron Engineer outside the United States.

Language is included under Title I to require funds appropriated shall be immediately available and allotted to contract for the full scope of authorized projects.

Language is included under Title I providing additional funds for

enhancing force protection and safety at Military Installations.

Language is included under Title II to require that the Secretary of Veterans Affairs establish a priority for treatment of veterans who are service-connected disabled, lower income, or have special needs.

Language is included under Title II to require that the Secretary of Veterans Affairs give priority funding of basic medical benefits to priority groups 1 through 6.

Language is included under Title II to allow the Secretary of Veterans Affairs to dispense prescription drugs from VHA facilities to

enrolled veterans with privately written prescriptions.

Language is included under Title II providing for the reimbursement to the Department of Defense for the costs of overseas employee mail.

Language is included under Title II to require approval of a transfer between development projects in the Information Technology Systems account.

Language is included under Title II establishing time limitations and reporting requirements concerning the obligation of Major Construction funds, limiting the use of funds, and allowing the use of

funds for program costs.

Language is included under Title II to allow Minor Construction funds to be used to repair non-medical facilities damaged by nat-

ural disaster or catastrophe.

Language is included under Title II permitting transfers between mandatory and discretionary accounts, limiting and providing for the use of certain funds, funding administrative expenses associated with life insurance programs from excess program revenues, allowing reimbursement from enhanced-use leases and for certain services, requiring notification of construction bid savings, limiting reprogramming amount of major construction projects, restricting changes in the scope of major construction projects, requiring disclosure of insurance and income information, allowing a recovery audit collection program, allowing veterans in the State of Alaska to use Indian Health Service facilities under certain conditions, allowing medical services funds for recreational and funeral expenses, and requiring notification of organizational changes that transfer 25 or more employees from one VA organizational unit to another.

Language is included under Title II requiring the Secretary to maintain certain requirements in operating the toll-free suicide

Language is included under Title II prohibiting funds from being used to close hospitals, domiciliaries, or clinics, or conduct environmental assessment or diminish services in the Veterans Integrated Service Network 23 as part of a realignment of VA services until

the Secretary provides a report that includes a national realignment strategy, a cost benefit analysis, and an inventory of buildings with historic designation.

Language is included under title II to allow covered veterans and their spouses, under certain conditions, to receive assisted repro-

ductive technology services and adoption reimbursement.

Language is included under Title III United States Court of Appeals for Veterans Claims, Salaries and Expenses, to permit the use of funds for a pro bono program.

Language is included under Title III Cemeterial Expenses, Army, Salaries and Expenses, to permit the use of funds for parking

maintenance and repairs.

Language is included under Title III Armed Forces Retirement Home to permit payment from the general fund of the Treasury to the Trust Fund.

Language is included under Title III to allow for the use of concession fees.

Language is included under Title IV providing Overseas Contin-

gency Operations funding with an emergency designation.

Language is included under Title V to limit the use of funds for Federal entities when they are not in compliance with Federal law relating to risk assessment, the protection of private property rights, or unfunded mandates.

Language is included under Title V to prohibit the use of funds for a project or program named for a serving Member of the United

States Congress.

Language is included under Title V prohibiting funds from being used to maintain or establish a computer network unless such network blocks the viewing, downloading, and exchanging of pornography.

Language is included under Title V prohibiting funds from being used to pay for first class travel in violation of federal regulations. Language is included under Title V prohibiting funds from being

Language is included under Title V prohibiting funds from being used to execute a contract for goods or services where a contractor has not complied with Executive Order 12989.

Language is included under Title V prohibiting funds from being used by the Department of Defense or the Department of Veterans Affairs for the purchase or lease of a new vehicle except in accordance with Presidential Memorandum—Federal Fleet Performance, dated May 24, 2011.

COMPLIANCE WITH RULE XIII, CL. 3(e) (RAMSEYER RULE)

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman): None.

APPROPRIATIONS NOT AUTHORIZED BY LAW

Pursuant to clause 3(f)(1)(B) of rule XIII of the Rules of the House of Representatives, the following table lists the appropriations in the accompanying bill which are not authorized by law for the period concerned:

[dollars in thousands]								
Agency/program	Last year of authorization	Authorization level	Appropriations in last year of authorization	Appropriations in this bill				
Military Construction, Army	2018	982,794	923,994	1,001,768				
Military Construction, Navy and Marine Corps	2018	1,720,405	1,553,275	2,100,298				
Military Construction, Air Force	2018	1,678,174	1,543,558	1,454,723				
Military Construction, Defense-Wide	2018	2,941,513	2,811,513	2,465,738				
Military Construction, Army National Guard	2018	294,152	220,652	180,122				
Military Construction, Air National Guard	2018	195,491	171,491	129,126				
Military Construction, Army Reserve	2018	129,712	83,712	64,919				
Military Construction, Navy Reserve	2018	85,271	95,271	43,065				
Military Construction, Air Force Reserve	2018	121,135	73,535	50,163				
North Atlantic Treaty Organization Security Investment								
Program	2018	154,000	177,932	171,064				
Family Housing Construction, Army	2018	182,662	182,662	330,660				
Family Housing Operation and Maintenance, Army	2018	346,625	348,907	376,509				
Family Housing Construction, Navy and Marine Corps	2018	83,682	83,682	104,581				
Family Housing Operation and Maintenance, Navy and								
Marine Corps	2018	328,282	328,282	314,536				
Family Housing Construction, Air Force	2018	85,062	85,062	78,446				
Family Housing Operation and Maintenance, Air Force	2018	318,324	318,324	317,274				
Family Housing Operation and Maintenance,								
Defense-Wide	2018	59,169	59,169	58,373				
Department of Defense Family Housing Improvement		,		•				
Fund	2018	2,726	2,726	1,653				
Department of Defense Military Unaccompanied Housing		•						
Improvement Fund	2018	623	623	600				
Base Realignment and Closure Account	2018	236.644	310,000	322,390				
Dept. of Veterans Affairs, Major Construction				1,127,486				
Dept. of Veteran Affairs, Major Leases				45,435				
Cemeterial Expenses, Army	2018	70,800	247,800	144,655				
Armed Forces Retirement Home	2018	64,300	64,300	64,300				

PROGRAM DUPLICATION

No provision of this bill establishes or reauthorizes a program of the Federal Government known to be duplicative of another Federal program, a program that was included in any report from the Government Accountability Office to Congress pursuant to section 21 of Public Law 111–139, or a program related to a program identified in the most recent Catalog of Federal Domestic Assistance.

DIRECTED RULE MAKING

The bill does not direct any rule making.

FULL COMMITTEE VOTES

Pursuant to the provisions of clause 3(b) of rule XIII of the House of Representatives, the results of each roll call vote on an amendment or on the motion to report, together with the names of those voting for and those voting against, are printed below:

ROLL CALL NO. 1

Date: May 8, 2018

Measure: Military Construction/Veterans Affairs Appropriations Bill, FY 2019

Motion by: Mr. Aderholt

Description of Motion: To report the bill to the House, as amended.

Results: Adopted 47 yeas to 0 nays.

Members Voting Yea

Members Voting Nay

Mr. Aderholt

Mr. Aguilar Mr. Amodei Mr. Bishop

Mr. Calvert

Mr. Carter

Mr. Cartwright

Ms. Clark

Mr. Cole

Mr. Cuellar

Mr. Culberson

Ms. DeLauro

Mr. Dent

Mr. Diaz-Balart Mr. Fleischmann

Mr. Fortenberry

Mr. Frelinghuysen

Ms. Granger

Mr. Graves

Dr. Harris Ms. Herrera Beutler

Mr. Joyce

Ms. Kaptur Mr. Kilmer

Ms. Lee

Mrs. Lowey
Mrs. McCollum
Mrs. Meng
Mr. Moolenaar
Mr. Newhouse

Mr. Palazzo

Ms. Pingree

Mr. Pocan

Mr. Quigley

Mrs. Roby

Mr. Rooney Ms. Roybal-Allard

Mr. Ruppersberger

- Mr. Ryan Mr. Serrano Mr. Simpson Mr. Taylor Mr. Valadao Ms. Wasserman Schultz Mr. Womack Mr. Yoder Mr. Young

COMPLIANCE WITH RULE XIII, CL. 3(e) (RAMSEYER RULE)

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italics, existing law in which no change is proposed is shown in roman): None.

COMPARISON WITH THE BUDGET RESOLUTION

Pursuant to clause 3(c)(2) of rule XIII of the Rules of the House of Representatives and section 308(a)(1)(A) of the Congressional Budget Act of 1974, the following table compares the levels of new budget authority provided in the bill with the appropriate allocation under section 302(b) of the Budget Act:

[In millions of dollars]

	302(b) Allocation		This	bill
	Budget authority	Outlays	Budget authority	Outlays
Mandatory	106,125	105,903	106,125	1 105,903
Discretionary	96,920	89,311	96,920	89,311
General Purpose	95,999	89,311	95,999	89,311
Overseas Contingency (OCO)	921	0	921	0

¹ Includes outlays from prior-year budget authority.

FIVE-YEAR PROJECTION OF OUTLAYS

Pursuant to clause 3(c)(2) of rule XIII of the Rules of the House of Representatives and section 308(a)(1)(B) of the Congressional Budget Act of 1974, the following table contains five-year projections prepared by the Congressional Budget Office of outlays associated with the budget authority provided in the accompanying bill:

[In millions of dollars]

Projection of outlays associated with the recommendation	Non-OCO	000
2019	1 113,849	0
2020	5,427	0
2021	5,248	0
2022	3,229	0
2023 and future years	3,549	0

¹ Excludes outlays from prior-year budget authority.

Assistance to State and Local Governments

Pursuant to clause 3(c)(2) of rule XIII of the Rules of the House of Representatives and section 308(a)(1)(C) of the Congressional Budget Act of 1974, the amount of financial assistance to State and local governments is as follows:

[In millions of dollars]

	This bi	II
	Budget authority	Outlays
Financial assistance to State and local governments for 2019	267	¹ 50

¹ Excludes outlays from prior-year budget authority.

Comparative Statement of New Budget Authority and State List

The following is a complete listing, by title, State and country, of the Committee's recommendations for military construction and family housing projects, including Overseas Contingency Operations projects:

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	FY 2018 Enacted	FY 2019 Request	8i11	Bill vs. Enacted	Bill vs. Request
TITLE I - DEPARTMENT OF DEFENSE					
Military Construction, Army	923,994	1,011,768	1,001,768	+77,774	-10,000
Military Construction, Navy and Marine Corps Hurricane Supplemental (P.L. 115-123) (Emergency).	1,553,275 201,636	2,543,189	2,100,298	+547,023 -201,636	-442,891
Total	1,754,911	2,543,189	2,100,298	+345,387	-442,891
Military Construction, Air Force	1,543,558	1,725,707	1,454,723	-88,835	-270,984
Military Construction, Defense-Wide	2,811,513 200,000	2,693,324	2,465,738	-345,775 -200,000	-227,586
Total	3,011,513	2,693,324	2,465,738	-545,775	-227,586
Total, Active components	7,233,976	7,973,988	7,022,527	-211,449	-951,461
Military Construction, Army National Guard Hurricane Supplemental (P.L. 115-123) (Emergency).	220,652 519,345	180,122	180,122	-40,530 -519,345	
Subtotal	739,997	180,122	180,122	-559,875	
Military Construction, Air National Guard	171,491 83,712 95,271 73,535	129,126 64,919 43,065 50,163	129,126 64,919 43,065 50,163	-42,365 -18,793 -52,206 -23,372	
Total, Reserve components	1,164,006	467,395	467,395	-696,611	

	FY 2018 Enacted	FY 2019 Request	Bill	Bill vs. Enacted	Bill vs. Request
North Atlantic Treaty Organization Security Investment					
Program Department of Defense Base Closure Account	177,932 310,000	171,064 267,538	171,064 322,390	-6,868 +12,390	+54,852
Total, Military Construction	8,885,914	8,879,985	7,983,376	-902,538	-896,609
Family Housing Construction, Army	182,662	330,660	330,660	+147,998	
Family Housing Operation and Maintenance, Army	348,907	376,509	376,509	+27,602	
Family Housing Construction, Navy and Marine Corps	83,682	104,581	104,581	+20,899	
Family Housing Operation and Maintenance, Navy and	328.282	314,536	314.536	-13.746	
Marine Corps Family Housing Construction, Air Force	85,062	78,446	78,446	-13,746	
Family Housing Operation and Maintenance, Air Force	318,324	317,274	317,274	-1,050	
Family Housing Operation and Maintenance, Defense-Wide	59,169	58,373	58.373	-796	** ** **
DoD Military Unaccompanied Housing Improvement Fund	623	600	600	-23	
Department of Defense Family Housing Improvement Fund.	2,726	1,653	1,653	-1,073	
,				******	
Total, Family Housing	1,409,437	1,582,632	1,582,632	+173,195	
ADMINISTRATIVE PROVISIONS					
Military Construction, Air Force (Sec. 126)					
(rescission)		the state con	-31,158	-31,158	-31,158
Military Construction, Army (Sec. 125)	93,800		44,100	-49,700	+44,100
125)	202,130	***	317,800	+115,670	+317,800
Military Construction, Air National Guard (Sec. 125)	52,000			-52,000	

	FY 2018 Enacted	FY 2019 Request	Bill	Bill vs. Enacted	Bill vs. Request
Military Construction, Army National Guard (Sec. 125).	113.500		11.000	-102.500	+11,000
Military Construction, Air National Guard (Sec. 125)			62.000	+62,000	+62,000
Military Construction, Army Reserve (Sec. 125)	76,000		23,000	-53,000	+23,000
NATO Security Investment Program (Sec. 126)					
(rescission)	-25,000		-25,000		-25,000
42 USC 3374 (Sec. 126)			-15,000	-15,000	-15,000
Military Construction, Air Force (Sec. 125)	138,100	~ ~ ~	144,450	+6,350	+144,450
Military Construction, Air Force Reserve (Sec. 125)	64,100		84,800	+20,700	+84,800
NATO Security Investment Program (Sec. 126)			• • •		
Family Housing Construction, Army (Sec. 126)	-18,000			+18,000	
Defense Access Roads Program (Sec. 131)	20,000		~ ~ ~	-20,000	
Military Construction - Enhancing Force Protection and					
Safety on Military Installations (Sec. 131)			150,000	+150,000	+150,000
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Total, Administrative Provisions	716,630		765,992	+49.362	+765,992
Appropriations	(759,630)		(837,150)	(+77,520)	(+837,150)
Rescissions	(-43,000)	***	(-71,158)	(-28,158)	(-71,158)
	=======================================		**********	====================================	
Total, title I, Department of Defense	11,011,981	10,462,617	10,332,000	-679,981	-130,617
Appropriations	(10,134,000)	(10,462,617)	(10,403,158)	(+269, 158)	(-59,459)
Rescissions	(-43,000)		(-71,158)	(-28,158)	(-71,158)
Emergency appropriations	(920,981)		· · ·	(-920,981)	
Total, title I less emergency					
appropriations	10,091,000	10,462,617	10,332,000	+241,000	-130,617

38

	FY 2018 Enacted	FY 2019 Request	Bill	Bill vs. Enacted	Bill vs. Request
	• • • • • • • • • • • • • • • • • • • •				
TITLE II - DEPARTMENT OF VETERANS AFFAIRS					
Veterans Benefits Administration					
Compensation and pensions: Advance from prior year		(95,768,462) 1,410,332	(95,768,462) 1,410,332	(+5,649,013) +1,410,332	
Subtotal, current year	90,119,449	97,178,794	97,178,794	+7,059,345	0
Advance appropriation, FY 2020	95,768,462	107,119,807	107,119,807	+11,351,345	
Readjustment benefits: Advance from prior year	(13,708,648)	(11,832,175)	(11,832,175)	(-1,876,473)	•
Subtotal	13,708,648	11,832,175	11,832,175	-1,876,473	~
Advance appropriation, FY 2020	11,832,175	14,065,282	14,065,282	+2,233,107	***
Veterans insurance and indemnities: Advance from prior year	(107,899) 12,439	(109,090)	(109,090)	(+1,191) -12,439	
Subtotal	120,338	109,090	109,090	-11,248	***
Advance appropriation, FY 2020	109,090	111,340	111,340	+2,250	

91

	FY 2018 Enacted	FY 2019 Request	Bill	Bill vs. Enacted	Bill vs. Request

Veterans housing benefit program fund:					
(Limitation on direct loans)	(500)	(500)	(500)		
Administrative expenses	178,626	200,612	200,612	+21,986	
Vocational rehabilitation loans program account	30	39	39	+9	***
(Limitation on direct loans)	(2,356)	(2,037)	(2,037)	(-319)	
Administrative expenses	395	396	396	+1	
Native American veteran housing loan program account	1,163	1,149	1,149	-14	
General operating expenses, VBA	2,910,000	2,868,909	2,922,000	+12,000	+53,091
		man have brind water than their man make their thin their thin the thin their man water days also have their man man man have man			
Total, Veterans Benefits Administration			125,830,957	+15,018,577	+53,091
Appropriations		(4,481,437)	• • • •	(+1,431,875)	(+53,091)
Advance appropriations, FY 2020	(107,709,727)	(121,296,429)	(121,296,429)	(+13,586,702)	
Advances from prior year appropriations	(103,935,996)	(107,709,727)	(107,709,727)	(+3,773,731)	•••
				make the state of	and the first time and the first time and the first time and the first time and time
Veterans Health Administration					
Medical services:					
Advance from prior year	(44,886,554)	(49,161,165)	(49,161,165)	(+4,274,611)	
Current year request /1	1,962,984			-1,962,984	***
Hurricane Supplemental (P.L. 115-123) (Emergency).	11,075			-11,075	
Subtotal	46,860,613	49,161,165	49,161,165	+2,300,552	

	FY 2018 Enacted	FY 2019 Request	Bill	Bill vs. Enacted	Bill vs. Request
Advance appropriation, FY 2020	49,161,165	48,747,988	48,747,988	-413,177	• • •
1/ \$2.1 billion in emergency funding for Medical Services purposes was appropriated in H.J. Res. 124 in addition to these funds					
Medical community care:					
Advance from prior year	(9,409,118)	(8,384,704)	(8,384,704)	(-1,024,414)	***
Current year request	419,176	500,000	500.000	-419,176 +500,000	· · · · · · · · ·
471372010 badget Amenament			300,000		N.
Subtotal	9,828,294	8,884,704	8,884,704	-943,590	
Advance appropriation, FY 2020	8,384,704	14,419,786	14,419,786	+6,035,082	÷ = •
Choice Fund		1,900,000		* * *	-1,900,000
Medical support and compliance:					
Advance from prior year	(6,654,480)	(7,239,156)	(7,239,156)	(+584,676)	
Current year request	100,000			-100,000	** ** **
Hurricane Supplemental (P.L. 115-123) (Emergency).	3,209			-3,209	***
Subtotal	6,757,689	7,239,156	7,239,156	+481,467	
Advance appropriation, FY 2020	7,239,156	7,106,150	7,106,150	-133,006	
Medical facilities:					
Advance from prior year	(5,434,880)	(5,914,288)	(5,914,288)	(+479,408)	***

	FY 2018 Enacted	FY 2019 Request	Bill	Bill vs. Enacted	Bill vs. Request
Current year request	707,000 75,108			-707,000 -75,108	
nutricane suppremental (F.L. 115-125) (Emergency).	75,100				
Subtotal	6,216,988	5,914,288	5,914,288	-302,700	~ ~ ~
Advance appropriation, FY 2020	5,914,288	5,276,676	5,276,676	-637,612	
Medical and prosthetic research	722,262	727,369	732,262	+10,000	+4,893
Medical care cost recovery collections: Offsetting collections	-2,507,000 2,507,000	-3,443,000 3,443,000	-3,590,000 3,590,000	-1,083,000 +1,083,000	-147,000 +147,000
Subtotal	***	***	***		
DoD-VA Joint Medical Funds (transfers out) DoD-VA Joint Medical Funds (by transfer) DoD-VA Health Care Sharing Incentive Fund (Transfer	(-297,137) (297,137)	(-306,378) (306,378)	(-306,378) (306,378)	(-9,241) (+9,241)	•••
out)	(-15,000)	(-15,000)	(-15,000)		
transfer)	(15,000)	(15,000)	(15,000)		
Total, Veterans Health Administration	74,700,127 (3,911,422) (312,137) (70,699,313)	78,677,969 (3,127,369) (321,378) (75,550,600)	76,782,862 (1,232,262) (321,378) (75,550,600)	+2,082,735 (-2,679,160) (+9,241) (+4,851,287)	-1,895,107 (-1,895,107)
Advances from prior year appropriations	(66,385,032)	(70,699,313)	(70,699,313)	(+4,314,281)	

	FY 2018 Enacted	FY 2019 Request	Bill	Bill vs. Enacted	Bill vs. Request	
National Cemetery Administration						
National Cemetery Administration	306,193	315,836	315,836	+9,643		
Departmental Administration						
General administration	335,891	367,629	346,091	+10,200	-21,538	
Board of Veterans Appeals	161,048	174,748	174,748	+13,700		
Information technology systems	4,055,500	4,184,571	4,105,500	+50,000	-79,071	
Veterans Electronic Health Record	782,000	1,207,000	1,207,000	+425,000		
Office of Inspector General	164,000	172,054	172,054	+8,054		94
Construction, major projects	512,430	1,127,486	1,127,486	+615,056		
Construction, minor projects	342,570	706,889	649,514	+306,944	-57,375	
Hurricane Supplemental (P.L. 115-123) (Emergency).	4,088			-4,088		
Subtotal	346,658	706,889	649,514	+302,856	-57,375	
Grants for construction of State extended care	•					
facilities	110.000	150.000	150,000	+40.000		
Grants for the construction of veterans cemeteries	45.000	45.000	45,000			
Total, Departmental Administration	6,512,527	8,135,377	7,977,393	+1,464,866	-157,984	
Administrative Provisions						
Mandatory disability exams language (Sec. 256)	25,000			-25,000		
Medical services (Sec. 237) (rescission)	-751,000			+751,000		
VA deferred maintenance (Sec. 238)	2,000,000		2,000,000		+2,000,000	

9

	FY 2018 Enacted	FY 2019 Request	Bill	Bill vs. Enacted	Bill vs. Request	
Construction, major projects:						
Sec. 243(a) rescission	-10,000			+10,000	* * **	
Sec. 243(b) reappropriation	10,000			-10,000		
Sec. 243(c) rescission	-410,000			+410,000		
Sec. 243(d) reappropriation	410,000		***	-410,000	* * *	
Total. Administrative Provisions	1,274,000		2,000,000	+726,000	+2,000,000	
				=======================================		
Total, title II	193,605,227	212,907,048	212,907,048	+19,301,821		95
Appropriations	(15,853,707)	(16,060,019)	(16,060,019)	(+206,312)		•
Reappropriations	(420,000)		+	(-420,000)		
Emergency appropriations	(93,480)		+	(-93,480)		
Rescissions	(-1,171,000)			(+1,171,000)		
(By transfer)	(312,137)	(321,378)	(322,609)	(+10,472)	(+1,231)	
Advance Appropriations, FY 2020:						
Mandatory	(107,709,727)	(121, 296, 429)	(121, 296, 429)	(+13,586,702)	* * *	
Discretionary	(70,699,313)	(75,550,600)	(75,550,600)	(+4,851,287)	~ * *	
Advances from prior year appropriations:						
Mandatory	(103,935,996)	(107,709,727)	(107,709,727)	(+3,773,731)		
Discretionary	(66,385,032)	(70,699,313)	(70,699,313)	(+4,314,281)	***	
(Limitation on direct loans)	(2,856)	(2,537)	(2,537)	(-319)		

	FY 2018 Enacted	FY 2019 Request	Bill	Bill vs. Enacted	Bill vs. Request	
Discretionary		(90,200,287) (-4,851,287)		(+4,317,226) (-537,006)		
Net discretionary		(85,349,000)	(85,349,000)	(+3,873,700)		
Mandatory Advances from prior year less FY 2020 advances				(+14,984,595) (-9,812,971)	***	
Net mandatory	(103,948,435)	(109,120,059)	(109,120,059)	(+5,171,624)		
Total mandatory and discretionary			194,469,059			96
TITLE III - RELATED AGENCIES						
American Battle Monuments Commission						
Salaries and expenses	79,000	75,100	75,100	-3,900		
Total, American Battle Monuments Commission	79,000	75,100	75,100	-3,900	***	
U.S. Court of Appeals for Veterans Claims						
Salaries and expenses	33,600	107,455	33,600	~ ~ ~	-73,855	

3

	FY 2018 Enacted	FY 2019 Request	Bill	Bill vs. Enacted	Bill vs. Request
Department of Defense - Civil					
Cemeterial Expenses, Army					
Salaries and expenses	80,800 167,000	70,800	70,800 73,855	-10,000 -93,145	+73,855
Total, Cemeterial Expenses, Army	247,800	70,800	144,655	-103,145	+73,855
Armed Forces Retirement Home - Trust Fund					
Operation and maintenance	41,300 1,000 22,000	41,300 1,000 22,000	41,300 1,000 22,000		
Total, Armed Forces Retirement Home	64,300	64,300	64,300		
Total, title III	424,700	317,655	317,655	-107,045	
TITLE IV - OVERSEAS CONTINGENCY OPERATIONS					
Overseas Contingency Operations					
Army Navy Air Force	130,400 13,390 275,522			-130,400 -13,390 -275,522	

	FY 2018 Enacted	FY 2019 Request	Bill	Bill vs. Enacted	Bill vs. Request
Defense-Wide	22,400	* " ~	***	-22,400	
Subtotal	441,712			-441,712	
European Deterrence / Reassurance Initiative					
Army	15,700	261,250	261,250	+245,550	
Navy	19,858	227,320	227,320	+207,462	
Air Force	270,830	345,800	345,800	+74,970	
Defense-Wide	1,900	87,050	87,050	+85,150	~ * *
Subtotal		921,420	921,420	+613,132	
Total, title IV	750,000	921,420	921,420	+171,420	
Grand total	205,791,908	224,608,740	224,478,123	+18,686,215	-130,617
Appropriations	(26,412,407)	(26,840,291)	(26,780,832)	(+368, 425)	(-59,459)
Reappropriations	(420,000)			(-420,000)	
Rescissions	(-1,214,000)		(-71,158)	(+1,142,842)	(-71,158)
Advance appropriations, FY 2020	(178,409,040)	(196,847,029)	(196,847,029)	(+18,437,989)	***
Overseas contingency operations	(750,000)	(921,420)	(921,420)	(+171,420)	
Advances from prior year appropriations	(170,321,028)	(178,409,040)	(178,409,040)	(+8,088,012)	
(By transfer)	(312,137)	(321,378)	(321,378)	(+9,241)	
(Transfer out)	(-312,137)	(~321,378)	(-321,378)	(-9,241)	
(Limitation on direct loans)	(2,856)	(2,537)	(2,537)	(-319)	

9

	BUDGET REQUEST	HOUSE
A) 404M4		
ALABAMA ARMY		
ANNISTON ARMY DEPOT WEAPON MAINTENANCE SHOP	5,200	5,200
ALASKA		
AIR FORCE		
F-35 AIRCRAFT MAINTENANCE UNIT ADMIN FACILITY F-35 CONVENTIONAL MUNITIONS MAINTENANCE FACILITY F-35A CONVENTIONAL MUNITIONS MAINTENANCE FACILITY	6,800 15,500 19,000 22,500	6,800 15,500 19,000 22,500
F-35A SCHOOL AGE FACILITY DEFENSE-WIDE CLEAR AFS	22,500	22,300
LONG RANGE DISCRIM RADAR SYS COMPLEX PHASE 2 FORT GREELY	174,000	130,000
MISSILE FIELD #1 EXPANSION	8,000	
OPERATIONS FACILITY REPLACEMENTARMY NATIONAL GUARD	14,000	14,000
JOINT BASE ELMENDORF-RICHARDSON UNITED STATES PROPERTY & FISCAL OFFICE	27,000	27,000
ARIZONA		
AIR FORCE		
LUKE AFB F-35A AIRCRAFT MAINTENANCE UNIT FACILITY	23 000	23,000
F-35A SQUAD OPS #6	23,000 17,000	17,000
ARKANSAS		
DEFENSE-WIDE		
LITTLE ROCK AFB HYDRANT FUEL SYSTEM ALTERATIONS	14,000	14,000
CALIFORNIA		
ARMY		
FORT IRWIN MULTIPURPOSE RANGE COMPLEX	29,000	29,000
CAMP PENDLETON		
AAV-ACV MAINTENANCE & WAREHOUSE FACILITY	49,410	49,410
ELECTRICAL UPGRADES	4,020	4,020
FULL MOTION TRAINER FACILITY	10,670	10,670
POTABLE WATER DISTRIBUTION IMPROVEMENTSCORONADO	47,230	47,230
CMV-228 AIRFIELD IMPROVEMENTS	77,780	77,780
F-35 MAINTENANCE HANGARMIRAMAR	112,690	112,690
AIRFIELD SECURITY IMPROVEMENTS	11,500	11,500
F-35 VERTICAL LANDING PADS AND TAXIWAYPOINT MUGU	20,480	20,480
DIRECTED ENERGY SYSTEMS INTERGRATION LABSAN DIEGO	22,150	22,150
HARBOR DRIVE SWITCHING STATION	48,440 108,100	48,440 48,747
SAN NICOLAS ISLAND MISSILE ASSEMBLY BUILD & HIGH EXPLOSIVE MAGAZINE	31,010	31,010
SEAL BEACH CAUSEWAY, BOAT CHANNEL & TURNING BASIN DEFENSE-WIDE	117,830	117,830
CAMP PENDLETON	3,547	3,547
SOF EOD FACILITY - WESTSOF HUMAN PERFORMANCE TRAINING CENTER-WEST	9,049	9,049

100

	BUDGET REQUEST	HOUSE

CORONADO SOF ATC APPLIED INSTRUCTION FACILITY	14.819 18.329 12.768 25.172 18.800 8,000	14,819 18,329 12,768 25,172 18,800 8,000
NAVY RESERVE SEAL BEACH		
RESERVE TRAINING CENTER	21,740	21,740
COLORADO		
ARMY FORT CARSON VEHICLE MAINTENANCE SHOP DEFENSE-WIDE FORT CARSON		77,000
SOF HUMAN PERFORMANCE TRAINING CENTERSOF MOUNTAINEERING FACILITY	15,297 9,000	15,297 9,000
DISTRICT OF COLUMBIA		
NAVY NAVAL OBSERVATORY MASTER TIME CLOCKS & OPERATIONS FACILITY	115,600	60,000
FLORIDA		
NAVY MAYPORT LCS OPERATIONAL TRAINING FACILITY ADDITION LCS SUPPORT FACILITY	29,110 82,350	29,110 82,350
F-35A INTEGRATED TRNG CENTER ACADEMICS BLDG F-35A STUDENT DORMITORY II	34,863 28,000	34,863 28,000
MACDILL AFB KC135 BEDDOWN ADD FLIGHT SIMULATOR TRAINING		3,100
GEORGIA		
ARMY		
FORT GORDON CYBER INSTRUCTIONAL FAC AND NETWORK CTRNAVY RESERVE	99,000	99,000
FORT GORDON CYBER INSTRUCTIONAL FAC AND NETWORK CTR	99,000	99,000
FORT GORDON CYBER INSTRUCTIONAL FAC AND NETWORK CTR NAVY RESERVE BENNING RESERVE TRAINING CENTER		
FORT GORDON CYBER INSTRUCTIONAL FAC AND NETWORK CTR NAVY RESERVE BENNING RESERVE TRAINING CENTER		
FORT GORDON CYBER INSTRUCTIONAL FAC AND NETWORK CTR NAVY RESERVE BENNING RESERVE TRAINING CENTER HAWAII ARMY FORT SHAFTER COMMAND AND CONTROL FACILITY, INCR 4	13,630	13,630
FORT GORDON CYBER INSTRUCTIONAL FAC AND NETWORK CTR NAVY RESERVE BENNING RESERVE TRAINING CENTER HAWAII ARMY FORT SHAFTER COMMAND AND CONTROL FACILITY, INCR 4 NAVY JOINT BASE PEARL HARBOR-HICKAM	13,630	13,630 95,000
FORT GORDON CYBER INSTRUCTIONAL FAC AND NETWORK CTR NAVY RESERVE BENNING RESERVE TRAINING CENTER HAWAII ARMY FORT SHAFTER COMMAND AND CONTROL FACILITY, INCR 4 NAVY JOINT BASE PEARL HARBOR-HICKAM DRYDOCK WATERFRONT FACILITY. KANECHE BAY	13,630 105,000 45,000	13,630 95,000 45,000

	BUDGET REQUEST	HOUSE
THE THOTO		
ILLINOIS ARMY NATIONAL GUARD MARSEILLES		
AUTOMATED RECORD FIRE RANGEAIR NATIONAL GUARD	5,000	5,000
GREATER PEORIA REGIONAL AIRPORT CONSTRUCT NEW FIRE CRASH/RESCUE STATION	9,000	9,000
INDIANA		
CRANE ARMY AMMUNITION PLANT RAILCAR HOLDING AREA	16,000	16,000
ADD/ALTER AIRCRAFT MAINTENANCE HANGAR	12,100	12,100
KENTUCKY		
FORT CAMPBELL VEHICLE MAINTENANCE SHOP FORT KNOX	32,000	32,000
DIGITAL AIR/GROUND INTEGRATION RANGE DEFENSE-WIDE	26,000	26,000
FORT CAMPBELL FT CAMPBELL MIDDLE SCHOOL SOF AIR/GROUND INTEG. URBAN LIVE FIRE RANGE SOF LOGISTICS SUPPORT OPERATIONS FACILITY SOF MULTI-USE HELICOPTER TRAINING FACILITY	62,634 9,091 5,435 5,138	62,634 9,091 5,435 5,138
LOUISIANA		
AIR NATIONAL GUARD NEW ORLEANS NORTHCOM - CONSTRUCT ALERT APRON	15,000	15,000
MAINE	,	
NAVY		
KITTERY DRY DOCK #1 SUPERFLOOD BASIN EXTEND PORTAL CRANE RAIL DEFENSE-WIDE KITTERY	109,960 39,725	51,639 39,725
CONSOLIDATED WAREHOUSE REPLACEMENT	11,600	11,600
MARYLAND AIR FORCE		
JOINT BASE ANDREWS PAR RELOCATE HAZ CARGO PAD AND EOD RANGE PRESIDENTIAL AIRCRAFT RECAP COMPLEX, INC. 2 DEFENSE-WIDE	37,000 154,000	37,000 123,116
FORT MEADE MISSION SUPPORT OPERATIONS WAREHOUSE FACILITY NSAW RECAPITALIZE BUILDING #2 INC 4 NSAW RECAPITALIZE BUILDING #3 INC 1	30,000 218,000 99,000	30,000 218,000 99,000
MASSACHUSETTS		
AIR FORCE HANSCOM AFB MIT-LINCOLN LABORATORY (WEST LAB CSL/MIF)	225,000	40,000
MINNESOTA		
AIR FORCE RESERVE MINNEAPOLIS-ST PAUL IAP SMALL ARMS RANGE	9,000	9,000

102

	BUDGET REQUEST	HOUSE
MISSISSIPPI AIR FORCE RESERVE		
KEESLER AFB AEROMEDICAL STAGING SQUADRON FACILITY	4,550	4,550
MISSOURI DEFENSE-WIDE		
ST LOUIS NEXT NGA WEST (N2W) COMPLEX PHASE 1 INC. 2 NEXT NGA WEST (N2W) COMPLEX PHASE 2 INC. 1	213,600 110,000	173,400 110,000
MONTANA		
ARMY NATIONAL GUARD MALTA NATIONAL GUARD READINESS CENTER	15,000	15,000
	15,000	10,000
NEBRASKA AIR FORCE OFFUTT AFB		
PARKING LOT, USSTRATCOM	9,500	9,500
NEVADA AIR FORCE		
CREECH AFB		
MO-9 CPIP GCS OPERATIONS FACILITY	28,000 31,000	28,000 31,000
CRH SIMULATORARMY NATIONAL GUARD NORTH LAS VEGAS	5,900	5,900
NATIONAL GUARD READINESS CENTER	32,000	32,000
NEW HAMPSHIRE ARMY NATIONAL GUARD		
PEMBROKE NATIONAL GUARD READINESS CENTER	12,000	12,000
NEW JERSEY		
ARMY PICATINNY ARSENAL		
MUNITIONS DISASSEMBLY COMPLEX DEFENSE-WIDE	41,000	41,000
JOINT BASE MCGUIRE-DIX-LAKEHURST HOT CARGO HYDRANT SYSTEM REPLACEMENT	10,200	10,200
NEW MEXICO		
ARMY WHITE SANDS INFORMATION SYSTEMS FACILITY	40,000	40,000
AIR FORCE HOLLOMAN AFB	40,000	40,000
MQ-9 FTU OPS FACILITY	85,000	85,000
NEW YORK		
U.S. MILITARY ACADEMY		
ENGINEERING CENTER	95,000 65,000	95,000 65,000
FRANCIS S. GABRESKI AIRPORT SECURITY FORCES/COMM.TRAINING FACILITY	20,000	20,000
AIR FORCE RESERVE NIAGARA FALLS IAP	14 000	14 000
PHYSICAL FITNESS CENTER	14,000	14,000

103

	BUDGET REQUEST	HOUSE
NORTH CAROLINA		
ARMY		
FORT BRAGG DINING FACILITY	10,000	10,000
NAVY CHERRY POINT MARINE CORPS AIR STATION		
AIRCRAFT MAINTENANCE HANGAR	133,970 106,860	60,000
FLIGHTLINE UTILITY MODERNIZATION DEFENSE-WIDE	106,860	55,000
FORT BRAGG	10 100	10 100
SOF REPLACE TRAINING MAZE AND TOWERSOF SERE RESISTANCE TRAINING LAB. COMPLEX NEW RIVER	12,109 20,257	12,109 20,257
NEW RIVER AMB CARE CENTER/DENTAL CLINIC REPLACEMENT		32.580
	,	,
NORTH DAKOTA AIR FORCE		
MINOT AFB CONSOLIDATED HELO/TRF OPS/AMU AND ALERT FACILITY	66,000	66,000
ARMY NATIONAL GUARD	000,00	00,000
FARGO NATIONAL GUARD READINESS CENTER	32,000	32.000
	52,555	
OHIO AIR FORCE		
WRIGHT-PATTERSON AFB	448 400	64 000
ADAL INTELLIGENCE PRODUCTION COMPLEX (NASIC), ARMY NATIONAL GUARD	116,100	61,000
CAMP RAVENNA AUTOMATED MULTIPURPOSE MACHINE GUN RANGE	7.400	7,400
	7,400	7,400
OKLAHOMA AIR FORCE		
ALTUS AFB	40.000	12.000
KC-46A FTU/FTC SIMULATOR FACILITY PHASE 3 TINKER AFB	12,000	12,000
KC-46A DEPOT FUEL MAINTENANCE HANGAR KC-46A DEPOT MAINTENANCE HANGAR	85,000 81,000	85,000 81,000
DEFENSE-WIDE	01,000	0,,000
MCALESTER BULK DIESEL SYSTEM REPLACEMENT	7,000	7,000
PENNSYLVANIA NAVY		
PHILADELPHIA SUBMARINE PROPULSOR MANUFACTURING SUPPORT FACILITY	71 050	71,050
AIR NATIONAL GUARD	, . ,	,
FORT INDIANTOWN GAP REPLACE OPERATIONS TRAINING/DINING HALL	8,000	8,000
NAVY RESERVE PITTSBURGH		
RESERVE TRAINING CENTER - PITTSBURGH, PA		
SOUTH CAROLINA		
ARMY		
FORT JACKSON TRAINEE BARRACKS COMPLEX 3, PHASE 2	52,000	52,000
NAVY BEAUFORT		
RECYCLING/HAZARDOUS WASTE FACILITY	9,517	9,517
PARRIS ISLAND RANGE IMPROVEMENTS & MODERNIZATION, PHASE 2	35,190	35,190
AIR FORCE SHAW AFB		
CPIP MQ-9 MCE GROUP	53,000	53,000

104

	~~~~	BUDGET REQUEST	HOUSE
SOUTH DAKOTA			
ARMY NATIONAL GUARD RAPID CITY			
NATIONAL GUARD READINESS CENTER		15,000	15,000
TEXAS			
FORT BLISS			
SUPPLY SUPPORT ACTIVITYAIR FORCE	• • • • • • • • • • • • • • • • • • • •	24,000	24,000
JOINT BASE SAN ANTONIO			
BMT RECRUIT DORMITORY 6 DEFENSE-WIDE		25,000	25,000
JOINT BASE SAN ANTONIO ENERGY AEROSPACE OPERATIONS FAC	ILITY	10,200	10,200
RED RIVER ARMY DEPOT			
GENERAL PURPOSE WAREHOUSE AIR FORCE RESERVE		71,500	71,500
FORT WORTH MUNITIONS TRAINING/ADMIN FACILI	TY	3,100	3,100
UTAH			
NAVY			
HILL AFB D5 MISSILE MOTOR RECEIPT/STORAG	E FACILITY	105,520	55,000
VIRGINIA			
NAVY PORTSMOUTH			
SHIPS MAINTENANCE FACILITY QUANTICO	,	26,120	26,120
TBS FIRE STATION DEFENSE-WIDE	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	21,980	
DAM NECK SOF MAGAZINES FORT A.P. HILL	******	8,959	8,959
TRAINING CAMPUS		11,734	11,734
HUMAN PERFORMANCE TRAINING CENT HUMPHREYS ENGINEER CENTER	ER	6,127	6,127
MAINTENANCE AND SUPPLY FACILITY JOINT BASE LANGLEY-EUSTIS		20,257	20,257
FUEL FACILITIES REPLACEMENT		6,900	6,900
GROUND VEHICLE FUELING FACILITY PENTAGON	REPLACEMENT	5,800	5,800
EXTERIOR INFRASTRUC. & SECURITY		23,650	23,650
NORTH VILLAGE VACP & FENCING AIR NATIONAL GUARD	.,.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	12,200	12,200
JOINT BASE LANGLEY-EUSTIS CONSTRUCT CYBER OPS FACILITY		10,000	10,000
WASHINGTON			
NAVY RANGOR			
BANGOR PIER AND MAINTENANCE FACILITY WHIDBEY ISLAND		88,960	88,960
FLEET SUPPORT FACILITY		19,450	19,450
NEXT GENERATION JAMMER FACILITY DEFENSE-WIDE		7,930	7,930
JOINT BASE LEWIS-MCCHORD		00.000	26 202
REFUELING FACILITY		26,200	26,200

105

	BUDGET REQUEST	HOUSE
WISCONSIN ARMY RESERVE		
FORT MCCOY TRANSIENT TRAINING BARRACKS	23,000	23,000
BAHAMAS NAVY		
ANDROS ISLAND AUTEC AUSTERE QUARTERS	31,050	31,050
BAHRAIN ISLAND NAVY		
SW ASIA FLEET MAINTENANCE FACILITY & TOC	26,340	26,340
BELGIUM DEFENSE-WIDE		
CHIEVRES AB EUROPE WEST DISTRICT SUPERINTENDENT'S OFFICE	14,305	14,305
CONUS CLASSIFIED DEFENSE-WIDE		
CLASSIFIED LOCATION BATTALION COMPLEX, PHASE 2	49,222	49,222
GERMANY		
EAST CAMP GRAFENWOEHR MISSION TRAINING COMPLEX	31,000	31,000
PANZER KASERNE MARFOREUR HQ MODERNIZATION AND EXPANSION DEFENSE-WIDE	43,950	43,950
BAUMHOLDER SOF JOINT PARACHUTE RIGGING FACILITY	11,504	11,504
KAISERLAUTERN AB KAISERSLAUTERN MIDDLE SCHOOL	99,955	99,955
RHINE ORDNANCE BARRACKS  MEDICAL CENTER REPLACEMENT INC. 8	319,589	319,589
WIESBADEN CLAY KASERNE ELEMENTARY SCHOOL	56,048	56,048
GUAM		
NAVY JOINT REGION MARIANAS ACE GYM & DINING. EARTH COVERED MAGAZINES. MACHINE GUN RANGE. ORDNANCE OPS. UNACCOMPANIED ENLISTED HOUSING. AIR FORCE JOINT REGION MARIANAS HAYMAN MUNITIONS STORAGE IGLOOS MSA 2.	27,910 52,270 141,287 22,020 36,170	27,910 52,270 70,000 22,020 36,170
GUANTANAMO BAY, CUBA		
NAVY GUANTANAMO BAY SOLID WASTE MANAGEMENT FACILITY DEFENSE-WIDE	85,000	85,000
GUANTANAMO BAY WORKING DOG TREATMENT FACILITY REPLACEMENT	9,080	9,080

106

	BUDGET REQUEST	HOUSE
HONDURAS		
ARMY		
SOTO CANO AB BARRACKS	21,000	21,000
JAPAN		
NAVY		
KADENA AB TACTICAL OPERATIONS CENTER DEFENSE-WIDE	9,049	9,049
CAMP MCTUREOUS BECHTEL ELEMENTARY SCHOOL	94,851	94,851
IWAKUNI FUEL PIER	33,200	33,200
KADENA AB TRUCK UNLOAD FACILITIES	21,400	21,400
YOKOSUKA KINNICK HIGH SCHOOL	170,386	40,000
KOREA		
ARMY CAMP TANGO COMMAND AND CONTROL FACILITY	17,500	17,500
KUWAIT		
ARMY		
CAMP ARIFJAN VEHICLE MAINTENANCE SHOP	44,000	44,000
MARIANA ISLANDS AIR FORCE		
TINIAN APR - CARGO PAD WITH TAXIWAY EXTENSIONAPR - MAINTENANCE SUPPORT FACILITY	46,000 4,700	46,000 4,700
QATAR		
AIR FORCE AL UDEID		
FLIGHTLINE SUPPORT FACILITIES	30,400 40,000	30,400 40,000
UNITED KINGDOM		
AIR FORCE		
ROYAL AIR FORCE LAKENHEATH F-35A 6 BAY HANGAR	39,036	39,036
F-35A ADAL CONVENTIONAL MUNITIONS MX	9,204	9,204
F-35A ADAL PARTS STORE	13,926	13,926
F-35A AGE FACILITY	12,449	12,449
F-35A DORMF-35A FUEL SYSTEM MAINTENANCE DOCK 2 BAY	29,541 16,880	29,541 16,880
F-35A PARKING APRONDEFENSE-WIDE	27,431	27,431
CROUGHTON RAF AMBULATORY CARE CENTER ADDITION/ALTERATION	10,000	
WORLDWIDE CLASSIFIED		
AIR FORCE CLASSIFIED LOCATION		
TACMOR - UTILITIES AND INFRASTRUCTURE SUPPORT	18,000	18,000
NATO SECURITY INVESTMENT PROGRAM	171,064	171.064

107

	BUDGET REQUEST	HOUSE
WORLDWIDE UNSPECIFIED		
ARMY HOST NATION SUPPORT. HINOR CONSTRUCTION. PLANNING AND DESIGN. PLANNING AND DESIGN.	34,000 72,000 71,068 5,000	34,000 72,000 71,068 5,000
NAVY PLANNING AND DESIGN	185,542 28,579	185,542 28,579
AIR FORCE PLANNING AND DESIGN	206,577 38,500	206,577 38,500
DEFENSE-WIDE CONTINGENCY CONSTRUCTION ENERGY CONSERVATION INVESTMENT PROGRAM PLANNING AND DESIGN	10,000 150,000	165,000
DEFENSE WIDE.  DEFENSE HEALTH AGENCY.  DEFENSE INFORMATION SYSTEMS AGENCY.  DEFENSE LOGISTICS AGENCY.  MISSILE DEFENSE AGENCY.  SPECIAL DPERATIONS COMMAND.  WASHINGTON HEADQUARTERS SERVICE.	24,300 55,699 496 42,705 14,184 55,925 2,036	24,300 55,699 496 42,705 14,184 55,925 2,036
SUBTOTAL, PLANNING AND DESIGN	195,345	195.345
UNSPECIFIED MINOR CONSTRUCTION DEFENSE MIDE. DEFENSE HEALTH AGENCY. DEFENSE LOGISTICS AGENCY. MISSILE DEFENSE AGENCY. SPECIAL OPERATIONS COMMAND. THE JOINT STAFF	3,000 5,000 17,366 10,000 13,642 12,479	3,000 5,000 17,366 10,000 13,642 12,479
SUBTOTAL, UNSPECIFIED MINOR CONSTRUCTION	61,487	61,487
ARMY NATIONAL GUARD PLANNING AND DESIGN. MINOR CONSTRUCTION.	16,622 18,100	16,622 18,100
AIR NATIONAL GUARD PLANNING AND DESIGN	18,500 23,626	18,500 23,626
ARMY RESERVE PLANNING AND DESIGN	5,855 2,064	5,855 2,064
NAVY RESERVE PLANNING AND DESIGN	4,695 3,000	4,695 3,000
AIR FORCE RESERVE PLANNING AND DESIGN. MINOR CONSTRUCTION.	4,055 3,358	4,055 3,358
FAMILY HOUSING, ARMY		
WISCONSIN FORT MCCOY		

108

	BUDGET REQUEST	HOUSE
PUERTO RICO FORT BUCHANAN FAMILY HOUSING NEW CONSTRUCITON (26 UNITS)	26,000	26,000
KOREA CAMP WALKER - DAEGU FAMILY HOUSING REPLACEMENT CONSTRUCTION (90 UNITS)	68,000	68,000
CAMP HUMPHRIES FAMILY HOUSING NEW CONSTRUCTION	85,000	85,000
ITALY VICENZA FAMILY HOUSING NEW CONSTRUCTION (111 UNITS)	95,134	95,134
GERMANY		
BAUMHOLDER CONSTRUCTION IMPROVEMENTS (72 UNITS)	32,000	32,000
PLANNING AND DESIGN	18,326	
SUBTOTAL, CONSTRUCTION	330,660	330,660
OPERATION AND MAINTENANCE UTILITIES ACCOUNT SERVICES ACCOUNT MANAGEMENT ACCOUNT MISCELLANEOUS ACCOUNT FURNISHINGS ACCOUNT LEASING MAINTENANCE OF REAL PROPERTY PRIVATIZATION SUPPORT COSTS.	57,872 10,502 36,302 408 15,842 161,252 75,530 18,801	57,872 10,502 36,302 408 15,842 161,252 75,530 18,801
SUBTOTAL, OPERATION AND MAINTENANCE	376,509	376,509
FAMILY HOUSING, NAVY AND MARINE CORPS  GUAM  NSA ANDERSON		
REPLACEMENT HOUSING PHASE III	83,441	83,441
JAPAN IWAKUNI CONSTRUCTION IMPROVEMENTS (44 UNITS)	16,638	16,638
PLANNING AND DESIGN	4,502	4,502
SUBTOTAL, CONSTRUCTION	104,581	104,581
OPERATION AND MAINTENANCE UTILITIES ACCOUNT SERVICES ACCOUNT MANAGEMENT ACCOUNT. MISCELLANEOUS ACCOUNT FURNISHINGS ACCOUNT LEASING MAINTENANCE OF REAL PROPERTY PRIVATIZATION SUPPORT COSTS.	60,252 16,261 50,870 148 16,395 62,515 86,328 21,767	
SUBTOTAL, OPERATION AND MAINTENANCE	314,536	314,536

109

	BUDGET REQUEST	HOUSE
FAMILY HOUSING, AIR FORCE		
JAPAN		
KADENA CONSTRUCTION IMPROVEMENTS (130 UNITS)	72,129	72,129
UNITED KINGDOM RAF LAKENHEATH		
CONSTRUCTION IMPROVEMENTS	3,118	3,118
PLANNING AND DESIGN	3,199	3,199
SUBTOTAL, CONSTRUCTION		78,446
OPERATION AND MAINTENANCE	40 500	10.500
UTILITIES ACCOUNT	48,566 54,423	48,566 54,423
SERVICES ACCOUNT	13,669	13,669
FURNISHINGS ACCOUNT	30,645	30,645
MISCELLANEOUS ACCOUNT	2,171	2,171
LEASING	15,832	15,832
MAINTENANCE PRIVATIZATION SUPPORT COSTS	129,763 22,205	129,763 22,205
SUBTOTAL, OPERATION AND MAINTENANCE	317,274	317,274
FAMILY HOUSING, DEFENSE-WIDE		
OPERATION AND MAINTENANCE NATIONAL SECURITY AGENCY		
UTILITIES	106	106
FURNISHING	416 13,046	416 13,046
LEASING. MAINTENANCE OF REAL PROPERTY DEFENSE INTELLIGENCE AGENCY	121	13,046
UTILITIES	4,100	4,100
FURNISHINGS	643	643
LEASING DEFENSE LOGISTICS AGENCY	38,232	38,232
UTILITIES	9	9
FURNISHINGS	1	1
SERVICES	2 155	2 155
MAINTENANCE OF REAL PROPERTY	1,542	1,542
SUBTOTAL, OPERATION AND MAINTENANCE	58,373	58,373
DOD MILITARY UNACCOMPANIED HOUSING IMPROVEMENT FUND	600	600
DOD FAMILY HOUSING IMPROVEMENT FUND	1,653	1,653
BASE REALIGNMENT AND CLOSURE BASE REALIGNMENT AND CLOSURE ACCOUNT	267,538	322,390
ADMINISTRATIVE PROVISIONS		
MILITARY CONSTRUCTION, ARMY		44,100
MILITARY CONSTRUCTION, NAVY AND MARINE CORPS	* * *	317,800
MILITARY CONSTRUCTION, AIR FORCE		144,450
MILITARY CONSTRUCTION, ARMY NATIONAL GUARD		11,000
MILITARY CONSTRUCTION, AIR NATIONAL GUARD	775	62,000 23,000
MILITARY CONSTRUCTION, AIR FORCE RESERVE		84,800
MILITARY CONSTRUCTION - ENHANCING FORCE PROTECTION AND		27,000
SAFETY ON MILITARY INSTALLATIONS (SEC. 131)	7.7.7	150,000

#### 110

	BUDGET REQUEST	HOUSE
RESCISSIONS FROM PRIOR YEAR UNOBLIGATED BALANCES		
AIR FORCE		-31,158
42 USC 3374 (SEC. 135)		-15,000
NATO SECURITY INVESTMENT PROGRAM		-25,000

111

## OVERSEAS CONTINGENCY OPERATIONS (AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
BULGARIA		
ARMY		
NEVO SELO FOS EDI: AMMUNITION HOLDING AREA	5,200	5,200
GERMANY		
AIR FORCE		
RAMSTEIN AB EDI: KMC DABS-FEV/RH STORAGE WAREHOUSES	119,000	119,000
GREECE		
NAVY		
SOUDA BAY EDI: JOINT MOBILITY PROCESSING CENTER EDI: MARATHI LOGISTICS SUPPORT CENTER	41,650 6,200	41,650 6,200
GUANTANAMO BAY, CUBA		
ARMY GUANTANAMO BAY		
OCO: HIGH VALUE DETENTION FACILITY	69,000	69,000
ITALY		
NAVY		
SIGONELLA EDI: P-8A TAXIWAY	66,050	66,050
NORWAY		
AIR FORCE		
RYGGE EDI: CONSTRUCT TAXIWAY	13,800	13,800
POLAND		
ARMY		
POWIDZ AB EDI: AMMUNITION STORAGE FACILITY	52,000	52,000
EDI: BULK FUEL STORAGE	21,000	21,000
EDI: RAIL EXTENSION & RAILHEAD	14,000	14,000
ZAGAN EDI: RAIL EXTENSION AND RAILHEAD	6,400	6,400
EDI: STAGING AREA	51,000	***
EDI: STAGING AREA	• • •	34,000
DRAWSKO POMORSKI EDI: STAGING AREA		17,000
QATAR DEFENSE-WIDE		
AL UDEID OCO: TRANS-REGIONAL LOGISTICS COMPLEX	60,000	60,000
ROMANIA		
ARMY		
MIHAIL KOGALNICEANU EDI: EXPLOSIVES & AMMO LOAD/UNLOAD APRON	21,651	21,651
SLOVAKIA		
AIR FORCE		
MALACKY EDI: REGIONAL MUNITIONS STORAGE AREA	59,000	59,000
SPAIN		
NAVY		
ROTA EDI: PORT OPERATIONS FACILITIES	21,590	21,590
CDI, FORT DEERWITONG ENGINETITIES	21,000	21,000

112

## OVERSEAS CONTINGENCY OPERATIONS (AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
UNITED KINGDOM		
LOSSIEMOUTH EDI: P-8 BASE IMPROVEMENTS	79,130	79,130
AIR FORCE RAF FAIRFORD		
EDI: CONSTRUCT DABS-FEV STORAGE EDI: MUNITIONS HOLDING AREA	87,000 19,000	87,000 19,000
ESTONIA DEFENSE-WIDE		
UNSPECIFIED LOCATIONS EDI: SOF OPERATIONS FACILITY EDI: SOF TRAINING FACILITY	6,100 9,600	6,100 9,600
WORLDWIDE UNSPECIFIED		
EDI: PLANNING AND DESIGN	20,999	20,999
NAVY EDI: PLANNING AND DESIGN	12,700	12,700
AIR FORCE EDI: PLANNING & DESIGN FUNDS	48,000	48,000
DEFENSE-WIDE EDI: PLANNING AND DESIGNEDI: PLANNING AND DESIGN	7,100 4,250	7,100 4,250

#### MINORITY VIEWS

The fiscal year (FY) 2019 Military Construction, Veterans Affairs, and Related Agencies Appropriations bill funds critical military construction, family housing and quality of life improvements and enhancements for our brave men and women in uniform and their families. This bill provides \$96.9 billion in total discretionary funding. This level is \$4.2 billion above the FY 2018 enacted funding level, but \$131 million below the FY 2019 budget request.

#### MILITARY CONSTRUCTION

The bill funds military construction at \$10.3 billion, which is \$131 million below the FY 2019 request. The bill fully funded the Services' Construction budget request in all but a few cases. For certain projects, documents submitted with the budget showed that not all the funding would be executed promptly. For those projects, the subcommittee provided incremental funding, which is a long-standing subcommittee practice. The bill fully funded Family Housing accounts and provides \$322 million for the Base Realignment and Closure (BRAC).

The bill also prioritizes safety projects by including \$150 million to address shortfalls in access control points, air traffic control towers, fire stations, and Anti-Terrorism/Force Protection deficiencies across the Department of Defense (DOD) enterprise. These additional funds will improve safety at DOD facilities, providing safer working environments for service members.

#### VETERANS AFFAIRS

The bill provides \$85.3 billion in discretionary funding for the Department of Veterans Affairs (VA), which is \$3.9 billion above the FY 2018 enacted level and equal to the President's request. The recommendation also includes the budget request of \$75.6 billion in discretionary funds for the FY 2020 advance appropriations for VA medical services. The bill includes \$318 million, equal to the FY 2019 President's request, for battle monuments and cemeteries for our heroes who have made the ultimate sacrifice.

We are delighted the bill rejects the Administration's proposal to combine the Medical Services and Community Care accounts into one enormous account. We believe that maintaining the current structure of two accounts offers the most transparency for the Committee to both monitor and control spending in these two areas.

This bill also honors the budget deal and includes \$2 billion for infrastructure improvements to support seismic corrections and address non-recurring maintenance issues. Democrats continue to believe that the administration must make rebuilding the VA system a priority. This funding is vital to helping the VA address its infrastructure issues and provide adequate in-house care for our nation's veterans.

One of our biggest concerns has been to enhance the VA's capabilities for suicide prevention. The bill rightfully provides the full FY 2019 budget request of \$8.6 billion for mental health programs, of which \$196 million is for Suicide Prevention. Furthermore, the bill repeats language first included in the FY 2017 bill requiring the Veterans Crisis Line (VCL) to provide immediate assistance from a trained professional and to adhere to all requirements of the

American Association of Suicidology. The funding and the bill language are vital pieces in helping VA combat veterans suicide.

Finally, we are extremely pleased that the bill continues to provide access to in-vitro fertilization treatments, which is consistent with the VA's goal to support veterans and improve their quality of life. We believe that veterans who are unable to conceive children deserve the care and support they need to start a family.

This bill does a lot of things we all support. However, it could have been improved if the Committee had adopted two amend-

ments offered by Ranking Member Wasserman Schultz.

The first amendment would have struck funding for a \$69 million High-Value Detention Facility at Guantanamo Bay Naval Station and instead provide those funds to the Enhancing Security and Safety provision. We believe this project is a colossal waste of resources, especially when balanced against the needs of our military service members. Placing the needs and wellbeing of 40 detainees at Guantanamo Bay above the needs of the service members who

serve our country does not reflect our nation's priorities.

The second amendment would have prohibited military construction dollars from being used to build the Administration's ill-conceived border wall. Using Department of Defense (DOD) funding for construction would dramatically change how our government has approached border security. If DOD is tasked to build a border wall, it will shift the responsibility of securing the border from the Department of Homeland Security, which has long had jurisdiction, to DOD and would put DOD in a position to lead where it has chiefly held a supporting role. Furthermore, using DOD funding for the construction of border infrastructure would be unprecedented and is extremely alarming knowing that currently 31 percent of DOD infrastructure is rated as poor or failing.

Unfortunately, the majority spoke against both of these amend-

ments, and they both failed.

#### THE BROKEN REPUBLICAN PROCESS

The Bipartisan Budget Agreement enacted early this year provided relief from unworkable discretionary spending caps. agreement was supposed to provide the country with stability following a year of shutdowns, last-minute veto threats, and general uncertainty in government. That stability lasted long enough for Congress to pass a bipartisan Omnibus appropriations bill for FY 2018 and then Republican chaos reigned again. The President threatened to veto the bill, unhappy with Congress' large investments in programs to help low- and middle-income Americans and

rejection of his campaign-promised border wall.

Even after the President backed off his threat and signed the bill, the Administration and Republican leadership in Congress who voted for the Bipartisan Budget Act and the Omnibus bill have continued to attempt to undo those bipartisan agreements. Now, the majority is seeking to pass a rescissions bill to undo funding and mollify an angry President. We have been told by OMB Director Mick Mulvaney that this is the first of many rescission packages meant to bring spending in line with the President's priorities, ignoring Congressional action that dismissed the President's FY 2017 and FY 2018 draconian budget requests.

In addition to the unacceptable rescissions proposals, the majority's lack of transparency with regards to how it will allocate the FY 2019 discretionary budget also endangers future bipartisan compromise. The majority has abandoned longstanding committee practice to provide the Members and the public with a budget blue-print for domestic spending, known as 302(b) allocations. Members are being asked to vote on bills without having the full picture on what impact each bill will have on other bills. We are very concerned about what that means for programs in other bills that have yet to be considered. Democrats can only be left to assume that the majority is siphoning money from bills at the end of the process like the State and Foreign Operations bill and the Labor, Health and Human Services, and Education appropriations bill.

In conclusion, we commend the Chairman for the funding levels within the bill and his receptiveness to Democratic Members' concerns. The bill reported out of the Committee represents a good, reasonable approach, preserves our long commitment to our veterans and our military facilities, and continues a bipartisan tradition of providing funding levels that Members on both sides agree are appropriate while avoiding controversial legislative riders that complicate passage. However, we are extremely disappointed in the 302(b) allocation process because hiding these numbers only makes our Committee's work more difficult. Inviting partisanship back into the appropriations process by shortchanging critical domestic and international priorities will endanger the good work in this

and other bills.

NITA M. LOWEY. DEBBIE WASSERMAN SCHULTZ.