now exceeds \$5 billion annually. This legislation in no way, shape, or form

On the other hand, the VA spending in the AbilityOne Program fluctuates between \$100 million and \$200 million in a typical year. This legislation would preserve only a portion of that, the portion that exists before Vets First was created.

At the end of the day, this issue is about preserving jobs for the blind and disabled individuals, and these jobs are extremely scarce. I want to see these jobs multiply and become higher paying with more opportunities for advancement. The first step to do that is to make sure jobs continue to exist.

There have already been a significant number of furloughs at AbilityOne nonprofits. It is vital that we act before those furloughs turn into full-time layoffs.

Last week, 497 veterans who are employed by the AbilityOne nonprofits or supporters of the program sent a letter urging passage of this bill. The committee has received many other letters from business owners praising or opposing the bill, depending on which program they are associated with. I do not for a minute want to fall into that false choice between opportunities for veterans and opportunities for blind and disabled individuals. They can coexist. They have coexisted in the past, and I want to make sure that they coexist in the future.

Madam Speaker, to that end, I thank all the cosponsors of this broadly bipartisan legislation, and I reserve the balance of my time.

Mr. TAKANO. Madam Speaker, I have no further speakers. I am prepared to close, and I reserve the balance of my time.

Mr. BOST. Madam Speaker, I yield 2 minutes to the gentlewoman from North Carolina (Ms. Foxx).

Ms. FOXX of North Carolina. Madam Speaker, I rise today in support of H.R. 4920, the Department of Veterans Affairs Contracting Preference Consistency Act.

This bipartisan bill provides a necessary fix to ensure that nonprofit organizations that provide jobs for the blind and those with significant disabilities and companies that are owned by veterans receive their due and are no longer in conflict.

The AbilityOne Program was enacted by Congress to give nonprofit organizations that employ the blind or those significant disabilities prefwith erential treatment in competing for certain Federal procurement contracts. Unfortunately, due to an unnecessary conflict between AbilityOne and a similar program, the Veterans First program, which sets aside some Department of Veterans Affairs contracts service-disabled, veteran-owned small businesses, a legislative fix became necessary.

H.R. 4920 provides that fix by grandfathering in VA contracts that predate the creation of the Vets First

program to restore eligibility for nonprofit organizations that employ blind individuals or those with significant disabilities. This bipartisan legislation is proof that the choices between helping veterans and those with disabilities is not mutually exclusive.

I thank Chairman TAKANO, Ranking Member Roe, and all the members on the committee for their work on the bill, and I urge my colleagues to support its passage.

Mr. TAKANO. Madam Speaker, I reserve the balance of my time.

Mr. BOST. Madam Speaker, I am prepared to close.

Madam Speaker, as has been testified today from both sides of the aisle, both of these programs are vitally important. We believe this legislation would move forward in making sure that both veterans and the blind and disabled who are working in our VA system will be taken care of.

I appreciate everyone who is a sponsor of this bill, and I encourage all Members involved to vote "yes."

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

Mr. TAKANO. Madam Speaker, I urge all of my colleagues to join me in passing H.R. 4920, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. TAKANO) that the House suspend the rules and pass the bill, H.R. 4920.

The question was taken; and (twothirds being in the affirmative) the rules were suspended and the bill was passed.

A motion to reconsider was laid on the table.

### $\sqcap$ 1500

## IDENTIFYING BARRIERS AND BEST PRACTICES STUDY ACT

Mr. TAKANO. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 4183) to direct the Comptroller General of the United States to conduct a study on disability and pension benefits provided to members of the National Guard and members of reserve components of the Armed Forces by the Department of Veterans Affairs. and for other purposes, as amended.

The Clerk read the title of the bill. The text of the bill is as follows:

### H.R. 4183

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

## SECTION 1. SHORT TITLE.

This Act may be cited as the "Identifying Barriers and Best Practices Study Act".

SEC. 2. COMPTROLLER GENERAL STUDY ON DIS-ARILITY AND PENSION RENEFITS PROVIDED TO MEMBERS OF THE NA-TIONAL GUARD AND MEMBERS OF RESERVE COMPONENTS OF THE ARMED FORCES BY THE DEPART-MENT OF VETERANS AFFAIRS.

(a) IN GENERAL.—Not later than 36 months after the date of the enactment of this Act, the Comptroller General of the United States shall complete a study on disability and pension ben-

efits provided to members of the National Guard and members of reserve components of the Armed Forces by the Department of Veterans Affairs. In conducting such study, the Comptroller General shall review, for the period beginning on January 1, 2008, and ending on December 31, 2018, each of the following:

(1) The number of members of the National Guard and the number of members of reserve components of the Armed Forces who received disability compensation or pension provided by the Department of Veterans Affairs.

(2) A comparison of each of the following between veterans who served only in the National Guard or reserve components and veterans who served in the regular components of the Armed Forces:

(A) The percentage of each group of such veterans with service-connected disabilities.

(B) The number of veterans in each group with each disability rating.

(C) The number of veterans in each group with a service-connected disability, including the number of each of the following types of such veterans in each group:

(i) Pilots.

(ii) Veterans who served in the special forces. (iii) Veterans who participated in the Personnel Reliability Program

(iv) Veterans who underwent diving or flight physicals as a regular component of their service in the Armed Forces and who have a muscular-skeletal or mental health condition.

(D) The number of total claims for disability compensation and pension submitted, approved. and disapproved for each group of veterans.

(3) An identification of common barriers for members of the National Guard and members of reserve components in obtaining disability benefits under the laws administered by the Secretary of Veterans Affairs, including barriers relating to documentation of injuries incurred while serving, such as line of duty letters.

(b) REPORTS.—

(1) PRELIMINARY REPORT.—Not later than 18 months after the date of the enactment of this Act, the Comptroller General shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a preliminary report on the findings of the study required by subsection (a).

(2) FINAL REPORT.—Upon completion of the study, the Comptroller General shall submit to such Committees a final report on such study.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from California (Mr. TAKANO) and the gentleman from Illinois (Mr. Bost) each will control 20 minutes.

The Chair recognizes the gentleman from California.

### GENERAL LEAVE

Mr. TAKANO. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and to insert extraneous material on H.R. 4183, as amended.

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

There was no objection.

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

Madam Speaker, I rise in support of H.R. 4183, as amended, the Identifying Barriers and Best Practices Study Act, introduced by Representative KHANNA of California.

I support this legislation that requests a multiyear study on VA disability and pension benefits for members of the Reserve components and National Guard. Any veteran injured during their time in service should have access to care for lingering disabilities and compensation for loss of earning power.

Since September 11, members of the Reserve component and National Guard have increasingly answered the call to service to meet our Nation's national security needs. Yet, despite greater demands and commitments, Reserve and National Guard veterans and their families do not always have easy access to benefits.

We have heard from our VSO partners that Guard and Reservists, like those who served in special missions, often have difficulty documenting injuries. Their medical records tend to be scattered and are often incomplete. This lack of in-service documentation of injury disproportionately affects Guard and Reservists.

The additional burden of obtaining a line-of-duty determination, which provides clear documentation of injury, rests on their shoulders. This can prevent receipt of compensation from VA down the road.

The study requested by this bill will compare Reserve and National Guard veterans and special operators, such as pilots and divers, to Active-Duty veterans and provide Congress with a report on the barriers they face when receiving their benefits through VA. The findings in the report will best inform Congress on next steps toward providing Reserve and National Guard veterans the compensation and benefits that they have earned.

I urge all Members to support H.R. 4183, as amended, and take the first steps to removing barriers to benefits for Guard, Reserve, and special operators.

Madam Speaker, I reserve the balance of my time.

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

Madam Speaker, I rise today in support of H.R. 4183, the Identifying Barriers and Best Practices Study Act.

H.R. 4183, as amended, would require the Government Accountability Office to complete a study that compares the utilization of disability and pension benefits between veterans of the National Guard, Reserve, and Active-Duty components.

Some National Guard and Reserve veterans believe that it is more challenging for them to successfully apply for VA benefits compared to veterans of regular components. According to a Statement for the RECORD provided by The American Legion during the Disability Assistance and Memorial Affairs Subcommittee hearing on H.R. 4183: "Guard and Reserve veterans have historically been at a disadvantage when seeking VA compensation and disability benefits due to poor reporting and documentation of injuries which occur during a period of Reserve or Active Duty for training."

We must ensure that all of our veterans who have been injured as a result of their service receive the benefits they have earned. This legislation would shed additional insight into the barriers our National Guard and Reserve veterans could face when seeking VA benefits. This may, in turn, inform how VA could improve its claims process for National Guard and Reserve veterans.

I encourage all Members to support H.R. 4183, as amended.

Madam Speaker, I reserve the balance of my time.

Mr. TAKANO. Madam Speaker, I have no further speakers. I am prepared to close.

I reserve the balance of my time.

Mr. BOST. Madam Speaker, I yield myself the balance of my time.

Madam Speaker, as mentioned here, this is a problem we have been dealing with concerning our Reserve and National Guard. We want to make sure that they are provided with these benefits. I want to encourage all of our Members to support this legislation.

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

Mr. TAKANO. Madam Speaker, I yield myself the balance of my time.

I just want to take this moment to just reflect on how much our reservists and National Guard have contributed to our national defense in these past 18 years.

Some of us may recall the role of the Guard and Reserve during the Vietnam war era, where that was often a refuge for servicemembers who were not expecting to be called into Active Duty or called into service.

But gone are those days. The National Guard and Reserve are called up frequently, often on multiple deployments, and they have served our country with vigor, with tremendous patriotism.

So I have to say that I am very pleased that we are moving forward with this study. I think it is a travesty if our reservists and guardsmen cannot document their service-connected injuries and not be able to collect the benefits that they deserve down the road.

I urge all of my colleagues to join me in passing H.R. 4183, as amended, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. TAKANO) that the House suspend the rules and pass the bill, H.R. 4183, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. TAKANO. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this motion will be postponed.

# IMPROVING CONFIDENCE IN VETERANS' CARE ACT

Mr. TAKANO. Madam Speaker, I move to suspend the rules and pass the

bill (H.R. 3530) to amend title 38, United States Code, to direct the Secretary of Veterans Affairs to enforce the licensure requirement for medical providers of the Department of Veterans Affairs, as amended.

The Clerk read the title of the bill. The text of the bill is as follows:

#### H.R. 3530

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

#### SECTION 1. SHORT TITLE.

This Act may be cited as the "Improving Confidence in Veterans" Care Act".

SEC. 2. COMPLIANCE WITH REQUIREMENTS FOR EXAMINING QUALIFICATIONS AND CLINICAL ABILITIES OF DEPARTMENT OF VETERANS AFFAIRS HEALTH CARE PROFESSIONALS.

(a) In General.—Subchapter I of chapter 74 of title 38, United States Code, is amended by adding at the end the following new section:

### "\$7414. Compliance with requirements for examining qualifications and clinical abilities of health care professionals

"(a) COMPLIANCE WITH CREDENTIALING RE-QUIREMENTS.—The Secretary shall ensure that each medical center of the Department, in a consistent manner—

"(1) compiles, verifies, and reviews documentation for each health care professional of the Department at such medical center regarding, at a minimum—

"(A) the professional licensure, certification, or registration of the health care professional;

"(B) whether the health care professional holds a Drug Enforcement Administration registration; and

"(C) the education, training, experience, malpractice history, and clinical competence of the health care professional; and

"(2) continuously monitors any changes to the matters under paragraph (1), including with respect to suspensions, restrictions, limitations, probations, denials, revocations, and other changes, relating to the failure of a health care professional to meet generally accepted standards of clinical practice in a manner that presents reasonable concern for the safety of patients.

"(b) REGISTRATION REGARDING CONTROLLED SUBSTANCES.—(1) Except as provided by paragraph (2), the Secretary shall ensure that each covered health care professional holds an active Drug Enforcement Administration registration.

"(2) The Secretary shall—

"(A) determine the circumstances in which a medical center of the Department must obtain a waiver under section 303 of the Controlled Substances Act (21 U.S.C. 823) with respect to covered health care professionals; and

"(B) establish a process for medical centers to request such waivers.

"(3) In carrying out paragraph (1), the Secretary shall ensure that each medical center of the Department monitors the Drug Enforcement Administration registrations of covered health care professionals at such medical center in a manner that ensures the medical center is made aware of any change in status in the registration by not later than seven days after such change in status.

"(4) If a covered health care professional does not hold an active Drug Enforcement Administration registration, the Secretary shall carry out any of the following actions, as the Secretary determines appropriate:

"(A) Obtain a waiver pursuant to paragraph (2).

"(B) Transfer the health care professional to a position that does not require prescribing, dispensing, administering, or conducting research with controlled substances.

"(C) Take adverse actions under subchapter V of this chapter, with respect to an employee of