

119TH CONGRESS
2D SESSION

S. 3647

To require the Secretary of Veterans Affairs to establish a program to address bowel and bladder care needs for veterans with spinal cord injuries and disorders, and for other purposes.

IN THE SENATE OF THE UNITED STATES

JANUARY 15, 2026

Mr. MORAN introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

A BILL

To require the Secretary of Veterans Affairs to establish a program to address bowel and bladder care needs for veterans with spinal cord injuries and disorders, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Disabled Veterans Dig-
5 nity Act of 2026”.

6 **SEC. 2. FINDINGS; SENSE OF CONGRESS.**

7 (a) FINDINGS.—Congress finds the following:

1 (1) Bowel care and bladder care are supportive
2 and necessary medical services for veterans with spi-
3 nal cord injuries and disorders when they are unable
4 to manage their bowel and bladder functions inde-
5 pendently.

6 (2) Inadequate care will lead to complications
7 and problems such as autonomic dysreflexia that can
8 be potentially life-threatening and result in illness
9 and hospitalization.

10 (3) Bowel care and bladder care are essential to
11 support veterans with spinal cord injuries and dis-
12 orders in non-institutional settings, improve quality
13 of life, optimize health, and prevent complications
14 from neurogenic bowel and bladder.

15 (4) Family caregivers and individually employed
16 caregivers provide life-sustaining care for the bowel
17 and bladder care needs of veterans that allow them
18 to live in their communities.

19 (b) SENSE OF CONGRESS.—It is the sense of Con-
20 gress that—

21 (1) family caregivers and individually employed
22 caregivers should not be subjected to self-employ-
23 ment taxes and treated as vendors or contractors for
24 the veterans to whom they provide care;

1 (2) veterans should not be forced to finish their
 2 bowel and bladder care needs in a set period of time
 3 that does not consider their individual needs; and

4 (3) veterans should not be subjected to ongoing
 5 clinical determinations regarding their bowel and
 6 bladder care needs absent a decision by their med-
 7 ical care provider that such care is no longer needed.

8 **SEC. 3. BOWEL AND BLADDER CARE PROGRAM OF DEPART-**
 9 **MENT OF VETERANS AFFAIRS.**

10 (a) IN GENERAL.—The Secretary of Veterans Affairs
 11 shall establish a program to address the bowel and bladder
 12 care needs of covered veterans (in this section referred to
 13 as the “program”).

14 (b) PROVISION OF CARE.—

15 (1) CLINICAL NEED.—The Secretary shall pro-
 16 vide bowel and bladder care under the program to
 17 covered veterans based on clinical need, which may
 18 include covered veterans receiving aid and attend-
 19 ance benefits from the Department of Veterans Af-
 20 fairs.

21 (2) CAREGIVER OR AGENCY.—A covered veteran
 22 may receive bowel and bladder care under the pro-
 23 gram through a qualified family member, an individ-
 24 ually employed caregiver, or a contracted home
 25 health agency.

1 (3) INDIVIDUALIZED ASSESSMENT.—The Sec-
2 retary shall conduct an individualized assessment
3 with respect to a covered veteran to determine the
4 number of hours of bowel and bladder care needed
5 by such veteran under the program.

6 (4) DENIAL OF CARE.—Before denying bowel
7 and bladder care for any covered veteran under the
8 program, the Secretary shall first obtain review of
9 and concurrence with respect to such denial from a
10 designated Spinal Cord Injuries and Disorders Cen-
11 ter of the Department.

12 (c) COORDINATION OF CARE AND BENEFITS.—The
13 Secretary shall ensure the program is coordinated with
14 other programs and benefits of the Department for which
15 the covered veteran is eligible to ensure that covered vet-
16 erans and caregivers receive appropriate support without
17 duplicating benefits or services.

18 (d) SUPPORTIVE MEDICAL TRAINING AND QUALI-
19 FICATIONS.—

20 (1) IN GENERAL.—The Secretary shall provide
21 to each family member or individually employed
22 caregiver providing care to a covered veteran under
23 the program necessary supportive medical training
24 to participate in and receive payment by the Sec-
25 retary for the provision of such care.

1 (2) QUALIFICATIONS.—The Secretary shall es-
2 tablish such requirements, conditions, and qualifica-
3 tions for providers of care under the program as
4 necessary to provide clinically appropriate bowel and
5 bladder care to covered veterans and to ensure the
6 financial and administrative integrity of the pro-
7 gram.

8 (e) PAYMENT.—

9 (1) IN GENERAL.—The Secretary shall provide
10 a monthly stipend to family members and individ-
11 ually employed caregivers and payment to contracted
12 home health agencies for care provided to covered
13 veterans under the program.

14 (2) LIMITATION.—

15 (A) FAMILY MEMBERS AND INDIVIDUALLY
16 EMPLOYED CAREGIVERS.—The stipend for a
17 family member or individually employed care-
18 giver for care provided to a covered veteran
19 under the program—

20 (i) shall be determined by the Sec-
21 retary;

22 (ii) shall be based on the amount and
23 degree of assistance provided; and

24 (iii) may not exceed the fifth step of
25 the applicable grade of the General Sched-

1 ule hourly rate paid to nursing assistants
2 who provide such care at the medical facil-
3 ity of the Department that is nearest to
4 the residence of such veteran.

5 (B) HOME HEALTH AGENCIES.—Payment
6 to a home health agency for care provided to a
7 covered veteran under the program may not ex-
8 ceed the payment rates of the Department
9 under section 17.4035 of title 38, Code of Fed-
10 eral Regulations (relating to payment rates and
11 methodologies), or successor regulations.

12 (f) SUBMISSION OF DOCUMENTATION.—Family
13 members and individually employed caregivers providing
14 care to covered veterans under the program shall provide
15 such documentation and information in such format and
16 under such terms as the Secretary may require as a condi-
17 tion of receiving payment under the program.

18 (g) CONTINUED PARTICIPATION IN PROGRAM.—If a
19 covered veteran has been medically determined to require
20 care under the program for a continuous period of three
21 years or more, the veteran is deemed to require such care
22 for life or until such time as the medical provider for such
23 veteran determines the service is no longer needed.

24 (h) NOT VENDORS OR CONTRACTORS.—Family mem-
25 bers and individually employed caregivers providing care

1 to covered veterans under the program shall not be consid-
2 ered vendors or contractors for purposes of the program.

3 (i) LIMITATION.—Care may not be provided under
4 the program to a veteran who can perform the bowel and
5 bladder functions of the veteran without assistance.

6 (j) COVERED VETERAN DEFINED.—In this section,
7 the term “covered veteran” means a veteran who—

8 (1) is enrolled in the system of annual patient
9 enrollment of the Department of Veterans Affairs
10 established and operated under section 1705(a) of
11 title 38, United States Code;

12 (2) has a spinal cord injury or disorder; and

13 (3) is dependent upon others for bowel and
14 bladder care while residing in non-institutional set-
15 tings.

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