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HOUSE OF REPRESENTATIVES
REPORT
119–259

RURAL VETERANS' IMPROVED ACCESS TO BENEFITS ACT OF 2025

SEPTEMBER 9, 2025.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

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

R E P O R T

[To accompany H.R. 3951]

[Including cost estimate of the Congressional Budget Office]

The Committee on Veterans' Affairs, to whom was referred the bill (H.R. 3951) to amend the Veterans' Benefits Improvements Act of 1996 and the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020 to improve the temporary licensure requirements for contract health care professionals who perform medical disability examinations for the Department of Veterans Affairs, and for other purposes, having considered the same, reports favorably thereon without amendment and recommends that the bill do pass.

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59–006

PURPOSE AND SUMMARY

H.R. 3951, the "Rural Veterans' Improved Access to Benefits Act of 2025," was introduced by Representative Juan Ciscomani of Arizona on June 12th, 2025. The bill would improve the temporary licensure requirements for contracted healthcare professionals who perform medical disability examinations for the Department of Veterans Affairs (VA). This would allow any person who would otherwise be eligible for appointment in the VA Veterans Health Administration (VHA) to perform medical disability examinations for the VA in states where they are not otherwise licensed. Covered medical professionals would also need to hold a valid medical license, must not be barred from practicing medicine in any State, and must be authorized by the VA to perform medical disability exams. This bill would also extend the expiration date of this authority until January 5, 2031.

BACKGROUND AND NEED FOR LEGISLATION

Section 1: Short Title

This Act may be cited as the "Rural Veterans' Improved Access to Benefits Act of 2025."

Section 2: Improvements To Temporary Licensure Requirements for Contract Health Care Professionals Who Perform Medical Disability Examinations For The Department Of Veterans Affairs

When a veteran files a disability benefits claim, VA will schedule them for compensation and pension exams if there is insufficient information to determine whether that veteran is entitled to their claimed benefits for a disability resulting from their military service. With the passage of the Veterans' Benefits Improvement Act of 1996 (P.L. 104–275), Congress granted temporary authority for certain contracted medical professionals to perform compensation and pension exams outside of the state that granted that professional their medical license. Since 2016, physicians working under the supervision of VA have been allowed to work across state lines.[1]

Prior to 2016, disability examinations were primarily performed by VHA-employed disability examiners.[2] By 2017, VA had achieved a 1:1 ratio between contracted and VHA-employed disability examiners, and that ratio rose to an almost 3:1 ratio by 2021.[3] Today, roughly 95% of these exams nationwide are performed by contracted examiners from four vendors.

In 2020, Congress passed the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020 (P.L. 115–315) which amended section 504 of the Veterans' Benefits Improvements Act of 1996 (P.L. 104–275; 38 U.S.C. 5101 note) to expand the authority to perform medical disability examinations, pursuant to a contract to perform such exams outside the state of their medical licensure, to contracted physicians, physician assistants, nurse practitioners, audiologists, and psychologists to perform

[1] Statement for the Record of the American Legion, (June 24, 2025), HHRG-119-VR09-20250624-SD014.pdf (house.gov).
[2] Statement for the Record of the American Legion, (June 24, 2025), HHRG-119-VR09-20250624-SD014.pdf (house.gov).
[3] Statement for the Record of the American Legion, (June 24, 2025), HHRG-119-VR09-20250624-SD014.pdf (house.gov).

medical disability examinations. Certain medical professionals within this covered group were required to have a current, unrestricted license to practice health care, could not be barred from practicing such health care profession, and were required to possess the authority to perform medical disability examinations pursuant to a contract with the VA.

While VA, veteran advocates, contracted vendors, and veterans agree that this authority has helped rural and tribal veterans receive medical disability examinations closer to where they live, this temporary authority is set to expire on January 6, 2026. This section would extend the expiration date of this temporary authority from January 5, 2026, until January 5, 2031. Further, this section would expand the group of medical professionals covered by this section to any health care professional eligible for appointment in VHA to perform medical disability examinations. By expanding this authority, the Committee understands this section to expand access to contracted disability examiners for veterans for whom access to currently authorized, qualified healthcare professionals is limited.

In a June 24, 2025, legislative hearing of the Subcommittee on Disability Assistance and Memorial Affairs, Mrs. Candance Wheeler, Senior Director, Government and Legislative Affairs, Tragedy Assistance Program for Survivors (TAPS), testified on the importance of this legislation for veterans facing access to timely disability evaluations:

> "This important legislation addresses the challenges many veterans face in accessing timely evaluations necessary for their benefits, especially veterans who live in rural areas. It allows qualified health care professionals with a valid, unrestricted license—regardless of their state—to conduct VA medical disability exams, as long as they're not barred from practicing anywhere in the U.S. TAPS believes this bill will help reduce wait times and improve benefit access for veterans—especially those in rural or underserved communities—by increasing the availability of qualified medical examiners. It reflects a commitment to ensuring all veterans receive the care and evaluations they've earned, without being limited by outdated licensing barriers."[4]

The Committee believes that VA oversight over contracted disability examinations has been inadequate at times. A July 2022 VA Office of Inspector General (OIG) report noted that VA has failed to keep all licensed vendors accountable for meeting VA's accuracy goals.[5] This section would address that by mandating a report to Congress on the use of this authority, errors identified in executing this authority, and plans for correcting these errors. The Committee believes this is essential to ensure proper oversight by Congress.

The Committee believes that this section is critical to ensure that veterans maintain their access to contracted disability examiners that are located close to the communities in which they reside. The

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[4] Candace Wheeler, Testimony of Tragedy Assistance Program for Survivors (June 24, 2025), HHRG-119-VR09-Wstate-WheelerC-20250624.pdf (House.gov).

[5] Department of Veterans Affairs, Office of Inspector General, *Contract Medical Exam Program Limitations Put Veterans at Risk for Inaccurate Claims Decisions* (Report No. 21-01237-127) (June 8, 2022), VAOIG-21-01237-127.pdf.

Committee believes this section expanding the license portability authority to medical professionals eligible for employment by the VA further would improve veterans' access to contracted disability examiners.

HEARINGS

On June 24, 2025, the Committee on Veterans Affairs Subcommittee on Disability Assistance and Memorial Affairs held a legislative hearing on H.R. 3951 and other bills that were pending before the subcommittee.

The following witnesses testified:

The Honorable Mike Bost, U.S. House of Representatives; The Honorable Elise Stefanik, U.S. House of Representatives; The Honorable Julia Brownley, U.S. House of Representatives; The Honorable Chuck Edwards, U.S. House of Representatives; The Honorable Tom Barrett, U.S. House of Representatives; The Honorable Tim Kennedy, U.S. House of Representatives; The Honorable Jahana Hayes, U.S. House of Representatives; Mrs. Julie Guleff, Caregiver and Surviving Spouse of Stephen Guleff, Vietnam Veteran; Mr. Michael J. Wishnie, William O. Douglas Clinical Professor of Law and Director, Veterans Legal Services Clinic, Yale Law School; Ms. Candace Wheeler, Senior Director, Government and Legislative Affairs, Tragedy Assistance Program for Survivors; Mr. Evan Deichert, Acting Deputy Vice Chairman, Board of Veterans' Appeals, U.S. Department of Veterans Affairs; Mr. Kevin Friel, Executive Director, Pension & Fiduciary Service, Veterans Benefits Administration, U.S. Department of Veterans Affairs; Mr. James W. Smith II, Deputy Executive Director, Policy and Procedures, Compensation Service, Veterans Benefits Administration, U.S. Department of Veterans Affairs; Dr. Colleen Richardson, Executive Director, Caregiver Support Program, Veterans Health Administration, U.S. Department of Veterans Affairs; and Colonel (Ret.) Tiffany M. Wagner, USAF, Clerk of the Court, U.S. Court of Appeals for Veterans Claims.

The following individuals and organizations submitted statements for the record:

The Honorable Debbie Wasserman-Schultz of Florida; Gold Star Spouses of America; Veterans of Foreign Wars; Vietnam Veterans of America; National Organization of Veterans' Advocates; Disabled American Veterans; Quality of Life Foundation; Jewish Federations of North America; Paralyzed Veterans of America; Administrative Conference of the United States; Afikim Foundation; American Legion; Shiron Collective; American Federation of Government Employees; Republican Jewish Coalition; Adam Zimmerman, University of Southern California Robert Kinglsey Professor of Law, in their personal capacity; Jonah Platt in their personal capacity; Shabbos Kestenbaum in their personal capacity; John Ondrasik in their personal capacity; Lizzy Savetsky in their personal capacity; Aviva Klompas in their personal capacity; Lee Trink in their personal capacity; Bethany Mandel in their personal capacity; Iddo Goldberg in their personal capacity; Liora Rezin their personal capacity; Jason Greenblatt in their personal capacity;

Sarah Stern in their personal capacity; and Nicole Neily in their personal capacity.

SUBCOMMITTEE CONSIDERATION

On Thursday, July 3, 2025, the Subcommittee on Disability Assistance and Memorial Affairs was discharged from further consideration of this legislation.

COMMITTEE CONSIDERATION

On May 6, 2025, the full Committee met in open markup session with a quorum being present, and ordered H.R. 3951 be reported favorably to the House of Representatives by voice vote. During consideration of the bill, the following amendments were considered:

An amendment #1 to H.R. 3951 was offered by Representative Ramirez to add a new section that would affirm that any collective bargaining agreement between the Department of Veterans Affairs and any labor organization that is an exclusive representative of Federal Employees that was previously in effect on March 26, 2025, would have the full force and effect through the agreement's stated terms. This amendment was not agreed to by a recorded vote of 11 yeas, 12 nays.

An amendment #2 to H.R. 3951 was offered by Representative Ramirez to add a new section that would direct VA to reinstate the Office of Equity Assurance of the Veterans Benefits Administration; reinstate the employment of each employee of this office who was terminated after January 20, 2025; ensure that a position is not eliminated pursuant to a reduction in force; and provide to the Committees on Veterans Affairs a briefing on the status of implementing the GAO report GAO–23–106097. It would also require bi-annual briefings to the Committees from the VA Under Secretary for Benefits on data, research, and analysis developed by the office. This amendment was not agreed to by a recorded vote of 11 yeas, 12 nays.

A motion by Representative Jack Bergman to report H.R. 3951 favorably to the House of Representatives was agreed to by voice vote.

COMMITTEE VOTES

In compliance with clause 3(b) of rule XIII of the Rules of the House of Representatives, two recorded votes were taken on amendments or in connection with ordering H.R. 3951 reported to the House.

COMMITTEE OVERSIGHT FINDINGS

In compliance with clause 3(c)(1) of rule XIII and clause (2)(b)(1) of rule X of the Rules of the House of Representatives, the Committee's oversight findings and recommendations are reflected in the descriptive portions of this report.

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

In accordance with clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the Committee's performance goals and

objectives of H.R. 3951 are to ensure certain licensed healthcare professionals performing medical disability exams pursuant to a contract administered by the Secretary of Veterans Affairs can perform such exams outside the state of their medical licensure, and extending that authority to all licensed healthcare professionals otherwise employable by VHA to perform such exams.

EARMARKS AND TAX AND TARIFF BENEFITS

H.R. 3951 does not contain any Congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9 of rule XXI of the Rules of the House of Representatives.

COMMITTEE COST ESTIMATE

The Committee adopts as its own the Congressional Budget Office cost estimate on this measure.

BUDGET AUTHORITY AND CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

H.R. 3951, Rural Veterans' Improved Access to Benefits Act of 2025
As ordered reported by the House Committee on Veterans' Affairs on July 23, 2025

By Fiscal Year, Millions of Dollars	2025	2025-2030	2025-2035
Direct Spending (Outlays)	0	*	*
Revenues	0	0	0
Increase or Decrease (-) in the Deficit	0	*	*
Spending Subject to Appropriation (Outlays)	0	0	0

Increases *net direct spending* in any of the four consecutive 10-year periods beginning in 2036?	No	Statutory pay-as-you-go procedures apply?	Yes
		Mandate Effects	
Increases *on-budget deficits* in any of the four consecutive 10-year periods beginning in 2036?	No	Contains intergovernmental mandate?	No
		Contains private-sector mandate?	No

* = between zero and $500,000.

Under current law, the Department of Veterans Affairs (VA) can contract with physicians assistants, nurse practitioners, audiologists, and psychologists to provide disability examinations of veterans in any location in the United States, regardless of whether the providers are licensed to practice in that jurisdiction. That authority expires on January 5, 2026. H.R. 3951 would extend the authority until January 5, 2031, and would expand the types of professionals with whom VA can contract for medical exams to any licensed health care professional. The bill also would require VA to report to the Congress on the department's use of the expanded authority.

Expanding the types of eligible health care providers who may provide disability examinations in a jurisdiction could change which providers perform exams but would not affect the number of veterans eligible to receive VA benefits. As a result, CBO estimates

that enacting the provision would not affect direct spending for disability compensation benefits.

The report required by the bill would include details on the number and type of examinations provided by contracted health care providers during the one-year period following enactment. Under current law, VA may use mandatory appropriations to pay for administrative expenses associated with contract medical exams, including reports. Based on the cost of similar reports, CBO estimates that providing the report would increase direct spending by less than $500,000.

The CBO staff contact for this estimate is Logan Smith. The estimate was reviewed by Christina Hawley Anthony, Deputy Director of Budget Analysis.

PHILLIP L. SWAGEL,
Director, Congressional Budget Office.

FEDERAL MANDATES STATEMENT

Section 423 of the Congressional Budget and Impoundment Control Act (as amended by Section 101(a)(2) of the Unfunded Mandate Reform Act, P.L. 104–4 is inapplicable to H.R. 3951.

ADVISORY COMMITTEE STATEMENT

No advisory committees within the meaning of section 5(b) of the Federal Advisory Committee Act would be created by H.R. 3951.

APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that H.R. 3951 does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section102(b)(3) of the Congressional Accountability Act.

STATEMENT ON DUPLICATION OF FEDERAL PROGRAMS

Pursuant to clause 3(c)(5) of rule XIII of the Rules of the House of Representatives, the Committee finds that no provision of H.R. 3951 would establish or reauthorize 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 P.L. 111–139, or a program related to a program identified in the most recent Catalog of Federal Domestic Assistance.

SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

Section 1. Short title

This section would establish the short title of the bill as the "Rural Veterans' Improved Access to Benefits Act of 2025."

Section 2 Improvements to temporary licensure requirements for contract health care professionals who perform medical disability examinations for the Department of Veterans Affairs

This section would further amend section 504 of the Veterans' Benefits Improvements Act of 1996 (P.L. 104–275; 38 U.S.C. § 5101 note), as amended by section 2002(1)(a) of the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improve-

ment Act of 2020 (P.L. 115–315; 38 U.S.C. § 5101 note) to expand the authority to perform medical disability examinations, pursuant to a contract to perform such exams outside the state of their medical licensure, to contracted physicians, physician assistants, nurse practitioners, audiologists, psychologists, and any other licensed healthcare professional otherwise employable by the VHA to perform medical disability examinations.

It would also amend section 2002(4)(a) of the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020 (P.L. 116 315; 38 U.S.C. § 5101 note) by striking "On the date that is five years after the date of the enactment of this Act" and inserting "On January 5, 2031."

Additionally, this section would amend 2002(2) by striking "physicians assistants, nurse practitioners, audiologists, and psychologists" and inserting "health care professionals."

Finally, this section would direct the VA to submit a report to the Committees on Veterans' Affairs of the House of Representatives and the Senate regarding the use of this authority, no later than 15 months after the date of enactment of this Act. This report would include the number of examinations conducted pursuant to a contract under such authority; the cost, timeliness, and legal adequacy of such examinations, disaggregated by health care professional and contract; the number of such examinations conducted in each State; the number of each kind of health care professional that conducted such examinations; the number of examinations erroneously conducted by a health care professional without such a contract or unauthorized to enter into such a contract; and a plan to correct errors in the use of such authority.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

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):

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

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, and existing law in which no change is proposed is shown in roman):

VETERANS' BENEFITS IMPROVEMENTS ACT OF 1996

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TITLE V—DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATIVE MATTERS

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SEC. 504. PILOT PROGRAM FOR USE OF CONTRACT HEALTH CARE PROFESSIONALS FOR DISABILITY EXAMINATIONS.

(a) AUTHORITY.—The Secretary of Veterans Affairs, acting through the Under Secretary for Benefits, may conduct a pilot program under this section under which examinations with respect to medical disability of applicants for benefits under laws administered by the Secretary that are carried out through the Under Secretary for Benefits may be made by persons other than employees of the Department of Veterans Affairs. Any such examination shall be performed pursuant to contracts entered into by the Under Secretary for Benefits with those persons.

(b) LIMITATION.—The Secretary may carry out the pilot program under this section as follows:

(1) In fiscal years before fiscal year 2015, through not more than 10 regional offices of the Department of Veterans Affairs.

(2) In fiscal year 2015, through not more than 12 regional offices of the Department.

(3) In fiscal year 2016, through not more than 15 regional offices of the Department.

(4) In fiscal year 2017 and each fiscal year thereafter, through such regional offices of the Department as the Secretary considers appropriate.

(c) LICENSURE OF CONTRACT HEALTH CARE PROFESSIONALS.—

(1) IN GENERAL.—Notwithstanding any law regarding the licensure of health care professionals, only a health care professional described in paragraph (2) may conduct an examination pursuant to a contract entered into under subsection (a) at any location in any State, the District of Columbia, or a Commonwealth, territory, or possession of the United States, so long as the examination is within the scope of the authorized duties under such contract.

[(2) HEALTH CARE PROFESSIONAL DESCRIBED.—A health care professional described in this paragraph is a physician, physician assistant, nurse practitioner, audiologist, or psychologist, who—

[(A) has a current unrestricted license to practice the health care profession of the physician, physician assistant, nurse practitioner, audiologist, or psychologist, as the case may be;

[(B) is not barred from practicing such health care profession in any State, the District of Columbia, or a Commonwealth, territory, or possession of the United States; and

[(C) is performing authorized duties for the Department of Veterans Affairs pursuant to a contract entered into under subsection (a).]

(2) HEALTH CARE PROFESSIONAL DESCRIBED.—A health care professional described in this paragraph is a person who is eligible for appointment to a position in the Veterans Health Administration covered by section 7402(b) of title 38, United States Code, who—

(A) has a current and unrestricted license to practice the health care profession of the health care professional;

(B) is not barred from practicing such health care profession in any State; and

(C) is performing authorized duties for the Department pursuant to a contract entered into under subsection (a).

(d) SOURCE OF FUNDS.—Expenses of carrying out the pilot program under this section, including payments for pilot program examination travel and incidental expenses under the terms and conditions set forth by 38 U.S.C. 111, shall be reimbursed to the accounts available for the general operating expenses of the Veterans Benefits Administration and information technology systems from amounts available to the Secretary of Veterans Affairs for payment of compensation and pensions.

(e) REPORT TO CONGRESS.—Not later than three years after the date of the enactment of this Act, the Secretary shall submit to the Congress a report on the effect of the use of the authority provided by subsection (a) on the cost, timeliness, and thoroughness of medical disability examinations.

(f) CERTAIN INFORMATION PROVIDED TO HEALTH CARE PROFESSIONAL.—The Secretary shall provide to a health care professional who performs an examination under subsection (a), or a contractor performing a contract under such subsection, the contact information of any agent or attorney recognized by the Secretary under chapter 59 of title 38, United States Code, with regards to a claim for benefits that gives rise to such examination.

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JOHNNY ISAKSON AND DAVID P. ROE, M.D. VETERANS HEALTH CARE AND BENEFITS IMPROVEMENT ACT OF 2020

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TITLE II—BENEFITS

Subtitle A—Benefits Generally

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SEC. 2002. MATTERS RELATING TO DEPARTMENT OF VETERANS AFFAIRS MEDICAL DISABILITY EXAMINATIONS.

(a) TEMPORARY CLARIFICATION OF LICENSURE REQUIREMENTS FOR CONTRACTOR MEDICAL PROFESSIONALS TO PERFORM MEDICAL DISABILITY EXAMINATIONS FOR THE DEPARTMENT OF VETERANS AFFAIRS UNDER PILOT PROGRAM FOR USE OF CONTRACT PHYSICIANS FOR DISABILITY EXAMINATIONS.—

(1) IN GENERAL.—Subsection (c) of section 504 of the Veterans' Benefits Improvements Act of 1996 (Public Law 104–275; 38 U.S.C. 5101 note) is amended to read as follows:

"(c) LICENSURE OF CONTRACT HEALTH CARE PROFESSIONALS.—

"(1) IN GENERAL.—Notwithstanding any law regarding the licensure of health care professionals, a health care professional described in paragraph (2) may conduct an examination pursuant to a contract entered into under subsection (a) at any location in any State, the District of Columbia, or a Commonwealth, territory, or possession of the United States, so long as

the examination is within the scope of the authorized duties under such contract.

"(2) HEALTH CARE PROFESSIONAL DESCRIBED.—A health care professional described in this paragraph is a physician, physician assistant, nurse practitioner, audiologist, or psychologist, who—

"(A) has a current unrestricted license to practice the health care profession of the physician, physician assistant, nurse practitioner, audiologist, or psychologist, as the case may be;

"(B) is not barred from practicing such health care profession in any State, the District of Columbia, or a Commonwealth, territory, or possession of the United States; and

"(C) is performing authorized duties for the Department of Veterans Affairs pursuant to a contract entered into under subsection (a).".

(2) PURPOSE.—The purpose of the amendment made by paragraph (1) is to expand the license portability for [physicians assistants, nurse practitioners, audiologists, and psychologists] *health care professionals* to supplement the capacity of employees of the Department to provide medical examinations described in subsection (b).

(3) RULE OF CONSTRUCTION.—The amendment made by paragraph (1) shall not be construed to affect the license portability for physicians in effect under section 504(c) of such Act as in effect on the day before the date of the enactment of this Act.

(4) SUNSET.—[On the date that is five years after the date of the enactment of this Act] *On January 5, 2031*, subsection (c) of such section shall read as it read on the day before the date of the enactment of this Act.

(b) TEMPORARY HALT ON ELIMINATION OF MEDICAL EXAMINER POSITIONS IN DEPARTMENT OF VETERANS AFFAIRS.—The Secretary of Veterans Affairs shall temporarily suspend the efforts of the Secretary in effect on the day before the date of the enactment of this Act to eliminate medical examiner positions in the Department of Veterans Affairs until the number of individuals awaiting a medical examination with respect to medical disability of the individuals for benefits under laws administered by the Secretary that are carried out through the Under Secretary for Benefits is equal to or less than the number of such individuals who were awaiting such a medical examination with respect to such purposes on March 1, 2020.

(c) REPORT ON PROVISION OF MEDICAL EXAMINATIONS.—

(1) IN GENERAL.—Not later than 180 days after the date of the enactment of this Act, the Secretary shall submit to the appropriate committees of Congress a report on the provision of medical examinations described in subsection (b) by the Department.

(2) CONTENTS.—The report submitted under paragraph (1) shall cover the following:

(A) How the Secretary will increase the capacity, efficiency, and timeliness of physician assistants, nurse practitioners, audiologists, and psychologists of the Veterans

Health Administration with respect to completing medical examinations described in subsection (b).

(B) The total number of full-time equivalent employees among all physician assistants, nurse practitioners, audiologists, and psychologists needed for the increases described in subparagraph (A).

(C) An assessment regarding the importance of retaining a critical knowledge base within the Department for performing medical examinations for veterans filing claims for compensation under chapters 11 and 13 of title 38, United States Code, including with respect to military sexual trauma, post-traumatic stress disorder, traumatic brain injury, and toxic exposure.

(3) COLLABORATION.—The Secretary shall collaborate with the veterans community and stakeholders in the preparation of the report required by paragraph (1).

(4) APPROPRIATE COMMITTEES OF CONGRESS DEFINED.—In this subsection, the term "appropriate committees of Congress" means—

(A) the Committee on Veterans' Affairs and the Committee on Appropriations of the Senate; and

(B) the Committee on Veterans' Affairs and the Committee on Appropriations of the House of Representatives.

(d) COMPTROLLER GENERAL OF THE UNITED STATES REVIEW.—

(1) REVIEW REQUIRED.—Not later than 360 days after the date of the enactment of this Act, the Comptroller General of the United States shall commence a review of the implementation of the pilot program authorized under subsection (a) of section 504 of the Veterans' Benefits Improvements Act of 1996 (Public Law 104–275; 38 U.S.C. 5101 note).

(2) ELEMENTS.—The review conducted under paragraph (1) shall include the following:

(A) An assessment of the use of subsection (c) of section 504 of such Act, as amended by subsection (a)(1) of this section.

(B) Efforts to retain and recruit medical examiners as employees of the Department.

(C) Use of telehealth for medical examinations described in subsection (b) that are administered by the Department.

(e) BRIEFING ON RECOMMENDATIONS OF COMPTROLLER GENERAL OF THE UNITED STATES.—Not later than 60 days after the date of the enactment of this Act, the Secretary shall provide to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a briefing on how the Secretary will implement the recommendations of the Comptroller General of the United States regarding—

(1) the monitoring of the training of providers of examinations pursuant to contracts under section 504 of the Veterans' Benefits Improvements Act of 1996 (Public Law 104–275; 38 U.S.C. 5101 note); and

(2) ensuring such providers receive such training.

(f) HOLDING UNDERPERFORMING CONTRACT MEDICAL EXAMINERS ACCOUNTABLE.—The Secretary shall take such actions as may be necessary to hold accountable the providers of medical examinations pursuant to contracts under section 504 of the Veterans' Ben-

efits Improvements Act of 1996 (Public Law 104–275; 38 U.S.C. 5101 note) who are underperforming in the meeting of the needs of veterans through the performance of medical examinations pursuant to such contracts.

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