

Mr. KLINE. Mr. Speaker, I yield myself such time as I may consume just to say thank you to my colleague from Texas and to commend him and the Great State of Texas for recognizing the great sport of hockey, and I appreciate the invitation. I hope that I have the opportunity to accept that invitation and join my colleague, the gentleman from Minnesota (Mr. SABO), for that visit. I hope that this occurs in February. I would be grateful for that consideration at least.

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

The SPEAKER pro tempore (Mr. TERRY). The question is on the motion offered by the gentleman from Minnesota (Mr. KLINE) that the House suspend the rules and agree to the resolution, H. Res. 217.

The question was taken; and (two-thirds having voted in favor thereof) the rules were suspended and the resolution was agreed to.

A motion to reconsider was laid on the table.

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ENHANCING COOPERATION AND SHARING OF RESOURCES BETWEEN DEPARTMENT OF VETERANS AFFAIRS AND DEPARTMENT OF DEFENSE

Mr. BOOZMAN. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1911) to amend title 38, United States Code, to enhance cooperation and the sharing of resources between the Department of Veterans Affairs and the Department of Defense.

The Clerk read as follows:

H.R. 1911

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

SECTION 1. DEPARTMENT OF DEFENSE-DEPARTMENT OF VETERANS AFFAIRS JOINT EXECUTIVE COMMITTEE.

(a) ESTABLISHMENT OF JOINT COMMITTEE.—(1) Chapter 3 of title 38, United States Code, is amended by adding at the end the following new section:

“§ 320. Department of Veterans Affairs-Department of Defense Joint Executive Committee

“(a) JOINT EXECUTIVE COMMITTEE.—(1) There is established an interagency committee to be known as the Department of Veterans Affairs-Department of Defense Joint Executive Committee (hereinafter in this section referred to as the ‘Committee’).

“(2) The Committee is composed of—

“(A) the Deputy Secretary of Veterans Affairs and such other officers and employees of the Department of Veterans Affairs as the Secretary of Veterans Affairs may designate; and

“(B) the Under Secretary of Defense for Personnel and Readiness and such other officers and employees of the Department of Defense as the Secretary of Defense may designate.

“(b) ADMINISTRATIVE MATTERS.—(1) The Deputy Secretary of Veterans Affairs and the Under Secretary of Defense shall determine the size and structure of the Committee, as well as the administrative and procedural guidelines for the operation of the Committee.

“(2) The two Departments shall supply appropriate staff and resources to provide ad-

ministrative support and services. Support for such purposes shall be provided at a level sufficient for the efficient operation of the Committee, including a subordinate Health Executive Committee, a subordinate Benefits Executive Committee, and such other committees or working groups as considered necessary by the Deputy Secretary and Under Secretary.

“(c) RECOMMENDATIONS.—(1) The Committee shall recommend to the Secretaries strategic direction for the joint coordination and sharing efforts between and within the two Departments under section 8111 of this title and shall oversee implementation of those efforts.

“(2) The Committee shall submit to the two Secretaries and to Congress an annual report containing such recommendations as the Committee considers appropriate.

“(d) FUNCTIONS.—In order to enable the Committee to make recommendations in its annual report under subsection (c)(2), the Committee shall do the following:

“(1) Review existing policies, procedures, and practices relating to the coordination and sharing of resources between the two Departments.

“(2) Identify changes in policies, procedures, and practices that, in the judgment of the Committee, would promote mutually beneficial coordination, use, or exchange of use of services and resources of the two Departments, with the goal of improving the quality, efficiency and effectiveness of the delivery of benefits and services to veterans, service members, military retirees and their families through an enhanced Department of Veterans Affairs and Department of Defense partnership.

“(3) Identify and assess further opportunities for the coordination and collaboration between the Departments that, in the judgment of the Committee, would not adversely affect the range of services, the quality of care, or the established priorities for benefits provided by either Department.

“(4) Review the plans of both Departments for the acquisition of additional resources, especially new facilities and major equipment and technology, in order to assess the potential effect of such plans on further opportunities for the coordination and sharing of resources.

“(5) Review the implementation of activities designed to promote the coordination and sharing of resources between the Departments.”

(2) The table of sections at the beginning of such chapter is amended by adding at the end the following new item:

“320. Department of Veterans Affairs-Department of Defense Joint Executive Committee.”

(b) CONFORMING AMENDMENTS.—(1) Subsection (c) of section 8111 of such title is repealed.

(2) Such section is further amended—

(A) in subsection (b)(2), by striking “subsection (c)” and inserting “section 320 of this title”;

(B) in subsection (d)(1), by striking “Committee established in subsection (c)” and inserting “Department of Veterans Affairs-Department of Defense Joint Executive Committee”;

(C) in subsection (e)(1), by striking “Committee under subsection (c)(2)” and inserting “Department of Veterans Affairs-Department of Defense Joint Executive Committee with respect to health care resources”;

(D) in subsection (f)(2), by striking subparagraphs (B) and (C) and inserting the following:

“(B) The assessment of further opportunities identified by the Department of Veterans Affairs-Department of Defense Joint

Executive Committee under subsection (d)(3) of section 320 of this title for the sharing of health-care resources between the two Departments.

“(C) Any recommendation made by that committee under subsection (c)(2) of that section during that fiscal year.”

(c) TECHNICAL AMENDMENTS.—Subsection (f) of such section is further amended by inserting “(Public Law 107-314)” in paragraphs (3), (4)(A), (4)(B), and (5) after “for Fiscal Year 2003”.

(d) EFFECTIVE DATE.—(1) If this Act is enacted before October 1, 2003—

(A) section 320 of title 38, United States Code, as added by subsection (a), shall take effect on October 1, 2003; and

(B) the amendments made by subsections (b) and (c) shall take effect on October 1, 2003, immediately after the amendment made by section 721(a)(1) of the Bob Stump National Defense Authorization Act for Fiscal Year 2003 (Public Law 107-314; 116 Stat. 2589).

(2) If this Act is enacted on or after October 1, 2003, the amendments made by this section shall take effect on the date of the enactment of this Act.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Arkansas (Mr. BOOZMAN), and the gentleman from Illinois (Mr. EVANS) each will control 20 minutes.

The Chair recognizes the gentleman from Arkansas (Mr. BOOZMAN).

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

(Mr. BOOZMAN asked and was given permission to revise and extend his remarks.)

Mr. BOOZMAN. Mr. Speaker, for many years, the Departments of Veterans Affairs and Defense have been obligated by law to share health care resources. Congress enacted the original sharing law, Public Law 19-174, in 1982. Through a series of hearings and business meetings, our committee found that the law was being unevenly implemented and that much more could be done.

Congress recently reemphasized its commitment to this policy when it passed sections 721 to 726 of the Bob Stump National Defense Authorization Act for fiscal year 2003. Although our committee found evidence that sharing is working very well in some locations, the two Departments have never made a strong commitment to sharing and planning future health care activities. There are many reasons that the two Departments have not shared as much as they could, but we have found in general that there was a lack of committed leadership to implementing the goals of sharing.

The original sharing legislation established a VA-DOD committee to review policies and practices related to sharing of health resources. This committee was charged with identifying new or potential opportunities and making recommendations to VA, DOD and Congress. Our oversight activities revealed the joint committee had not achieved its full potential, and we made a number of changes to the committee's charge last year.

The significance of H.R. 1911 is that it would expand the purposes for which the original joint committee was

formed. It is not just health care where coordination and sharing is needed. There is a substantial amount of information that DOD maintains that is essential for the administration of various benefits, programs such as the Montgomery GI bill and disability compensation. Clearly, the government can be more responsive to future veterans and claims for benefits they earned if the two Departments can exchange information accurately and quickly.

H.R. 1911 would also increase flexibility for the joint committee to make recommendations in mutual interest areas. The committee would also be permitted to assess policy changes in both Departments in order to advance services and opportunities for the future. As a result, a more efficient system of delivery of health care and benefits to VA and DOD beneficiaries should evolve.

This is a goal I know both VA and DOD share, to provide continuity of care, prompt access to earned benefits, and better service to our current and former service members.

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

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

Mr. Speaker, I stand today in support of H.R. 1911, which would elevate an advisory committee created in last year's defense authorization. H.R. 1911 would elevate the charter of the joint executive committee established between the Department of Defense and the VA to review activities Departmentwide, rather than simply limiting its charter to health care.

We are pleased that the Department has asked for this authority. I appreciate the leadership of the gentleman from New Jersey (Mr. SMITH) on the bill we are going to consider today, and I thank the chairman of the Subcommittee on Health, the gentleman from Connecticut (Mr. SIMMONS), and their ranking member, the gentleman from Texas (Mr. RODRIGUEZ).

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

Mr. BOOZMAN. Mr. Speaker, I yield 3 minutes to the gentleman from Illinois (Mr. KIRK).

Mr. KIRK. Mr. Speaker, I want to thank the committee for bringing this needed legislation to the floor. I also thank the Deputy Secretary of Veterans Affairs, Dr. Leo McKay, and David Chu of the Department of Defense for their leadership on this.

We have several key projects that put together DOD and VA health care: at Kirtland, in Las Vegas, and in my own congressional district of North Chicago. These projects help us realize fundamental facts: 15 million Americans have served our country in uniform, with 25 million of them still alive today and in need of VA care. But in many parts of this country, combining DOD and VA projects can help improve the care both of veterans and active duty personnel alike.

In my district, the North Chicago VA Medical Center and the Great Lakes Naval Hospital are combining. During the last administration, there were two attempts to close the North Chicago VA Hospital, but on June 19, 2001, VA released a capital asset realignment enhanced services study. That study pointed the way towards combining these two institutions, offering better health care for the veterans of northern Illinois.

I want to applaud the committee for bringing this legislation forward which codifies the existing agreements between DOD and VA and also enhances their ability to work in other places. Later on in this week, we will have the opportunity to increase the authorized level of spending that the DOD spends on its cooperative programs with the VA. I hope the House not only adopts this legislation overwhelmingly but that amendment as well. Our veterans and our active duty would both benefit from that.

Mr. BOOZMAN. Mr. Speaker, I yield myself the balance of my time, and I urge my colleagues to support H.R. 1911.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I rise in support of H.R. 1911, a bill to amend Title 38 of the United States Code, to enhance cooperation and the sharing of resources between the Department of Veterans Affairs and the Department of Defense. I support this bill because I support the men and women of our military whether they are currently enlisted or veterans.

H.R. 1911 establishes an interagency committee to be called the Department of Veterans Affairs-Department of Defense Joint Executive Committee. The Joint Executive Committee will operate with the goal of "improving the quality, efficiency and effectiveness of the delivery of benefits and services to veterans, service members, military retirees and their families through an enhanced Department of Veterans Affairs and Department of Defense partnership."

Both the Department of Veterans Affairs and the Department of Defense provide valuable services to help our service men and women. The Department of Veterans Affairs administers the laws that provide benefits and other services to veterans and their families. The Department of Veterans Affairs is responsible for insuring our veterans receive the medical care, benefits, social support, and memorials they so rightfully deserve after their valiant service to our America. The Department of Defense coordinate the activities of our activities of our armed services branches and ensures the professional and safe operations of our currently enlisted soldiers.

America's heroes are America's soldiers. The remarkable talent, bravery, and sacrifice of our military personnel was illustrated in the recent War in Iraq. We celebrated the safe return of our military personnel and we will revere them as veterans.

I support H.R. 1911 because the cooperative efforts of the Departments of Veterans Affairs and Defense to improve the quality of life for our soldiers and veterans. For example, Veterans Affairs and the Department of Defense are presently collaborating in the Defense Department's Prisoner of War/Missing

Personnel Office to account for our missing-in-action from all of America's wars, and to provide case-specific information to their next-of-kin.

H.R. 1911, and the collaboration between the Department of Veterans Affairs and the Department of Defense, will establish better health services, benefits, and other programs for our soldiers and veterans. I support this bill because I support our soldiers and our veterans. They are our heroes.

Mr. BOOZMAN. Mr. Speaker, I have no further requests for time, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Arkansas (Mr. BOOZMAN) that the House suspend the rules and pass the bill, H.R. 1911.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds of those present have voted in the affirmative.

Mr. BOOZMAN. Mr. 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 and the Chair's prior announcement, further proceedings on this motion will be postponed.

GENERAL LEAVE

Mr. BOOZMAN. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on H.R. 1911.

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

There was no objection.

VETERANS' COMPENSATION COST-OF-LIVING ADJUSTMENT ACT OF 2003

Mr. BOOZMAN. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1683) to increase, effective as of December 1, 2003, the rates of disability compensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation for survivors of certain service-connected disabled veterans, and for other purposes.

The Clerk read as follows:

H.R. 1683

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 "Veterans' Compensation Cost-of-Living Adjustment Act of 2003".

SEC. 2. INCREASE IN RATES OF DISABILITY COMPENSATION AND DEPENDENCY AND INDEMNITY COMPENSATION.

(a) RATE ADJUSTMENT.—The Secretary of Veterans Affairs shall, effective on December 1, 2003, increase the dollar amounts in effect for the payment of disability compensation and dependency and indemnity compensation by the Secretary, as specified in subsection (b).

(b) AMOUNTS TO BE INCREASED.—The dollar amounts to be increased pursuant to subsection (a) are the following: