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**To:** Brett M. Kavanaugh ( CN=Brett M. Kavanaugh/OU=WHO/O=EOP@EOP [ WHO ] )  
**Subject:** : LRM KCT81 - - OMB Request for Views on HR2792 Disabled VeteransService Dog and Health Care Improvement Act  
[P BU654004 WHO.TXT 1](#)  
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CREATION DATE/TIME:11-OCT-2001 17:37:29.00  
SUBJECT:: LRM KCT81 - - OMB Request for Views on HR2792 Disabled Veterans Service Dog and Health Care Improvement Act  
TO:Brett M. Kavanaugh ( CN=Brett M. Kavanaugh/OU=WHO/O=EOP@EOP [ WHO ] )  
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From: Kathryn C. Thompson on 10/11/2001 05:35:46 PM  
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To: See the distribution list at the bottom of this message  
cc: See the distribution list at the bottom of this message  
Subject: LRM KCT81 - - OMB Request for Views on HR2792 Disabled Veterans Service Dog and Health Care Improvement Act

The following is LRM ID: KCT81 -- Request for Views on H.R. 2792, Disabled Veterans Service Dog and Health Care Improvement Act, as ordered reported.

The bill text of H.R. 2792 as ordered reported is attached below in pdf format and it consists of 27 pages. A summary of the bill text is also attached below and it consists of two pages.

Please comment on H.R. 2792 as ordered reported by Noon, Tomorrow, Friday, October 12th. If you do not respond by the deadline, I will assume that you have no objection to the bill.

LRM ID: KCT81  
EXECUTIVE OFFICE OF THE PRESIDENT  
OFFICE OF MANAGEMENT AND BUDGET  
Washington, D.C. 20503-0001

Thursday, October 11, 2001

#### LEGISLATIVE REFERRAL MEMORANDUM

TO: Legislative Liaison Officer - See Distribution  
below  
FROM: Ingrid M. Schroeder (for) Assistant Director for  
Legislative Reference  
OMB CONTACT: Kathryn C. Thompson

PHONE: (202)395-7596 FAX: (202)395-6148

SUBJECT: OMB Request for Views on HR2792 Disabled Veterans Service  
Dog and Health Care Improvement Act

DEADLINE: Noon Friday, October 12, 2001

In accordance with OMB Circular A-19, OMB requests the views of your agency on the above subject before advising on its relationship to the program of the President. Please advise us if this item will affect direct spending or receipts for purposes of the "Pay-As-You-Go" provisions of Title XIII of the Omnibus Budget Reconciliation Act of 1990.

COMMENTS: H.R. 2792 was ordered reported by the House Veterans' Affairs Committee on October 10th. H.R. 2792 may be voted on by the House as early as next week, so please provide your comments on the attached bill text ASAP.

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James J. Jukes

LRM ID: KCT81

SUBJECT: OMB Request for Views on HR2792 Disabled  
Veterans Service Dog and Health Care Improvement Act

RESPONSE TO

LEGISLATIVE REFERRAL

MEMORANDUM

If your response to this request for views is short (e.g., concur/no comment), we prefer that you respond by e-mail or by faxing us this response sheet. If the response is short and you prefer to call, please call the branch-wide line shown below (NOT the analyst's line) to leave a message with a legislative assistant.

You may also respond by:

(1) calling the analyst/attorney's direct line (you will be connected to voice mail if the analyst does not answer); or

(2) sending us a memo or letter

Please include the LRM number shown above, and the subject shown below.

TO: Kathryn C. Thompson Phone: 395-7596 Fax: 395-6148  
Office of Management and Budget  
Branch-Wide Line (to reach legislative assistant):

395-7362

FROM: \_\_\_\_\_ (Date)

\_\_\_\_\_ (Name)

\_\_\_\_\_ (Agency)

\_\_\_\_\_ (Telephone)

The following is the response of our agency to your request for views on the above-captioned subject:

\_\_\_\_\_ Concur

\_\_\_\_\_ No Objection

\_\_\_\_\_ No Comment

\_\_\_\_\_ See proposed edits on pages \_\_\_\_\_

\_\_\_\_\_ Other: \_\_\_\_\_



\_\_\_\_\_ FAX RETURN of \_\_\_\_\_ pages, attached to this response sheet

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**AMENDMENT IN THE NATURE OF A SUBSTITUTE TO**  
**H. R. 2792**  
**REPORTED BY THE SUBCOMMITTEE ON HEALTH**

Strike all after the enacting clause and insert the following:

1 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

2 (a) **SHORT TITLE.**—This Act may be cited as the  
3 “Disabled Veterans Service Dog and Health Care Im-  
4 provement Act of 2001”.

5 (b) **TABLE OF CONTENTS.**—The table of contents of  
6 this Act is as follows:

Sec. 1. Short title; table of contents.

**TITLE I—VETERANS HEALTH CARE IMPROVEMENT**

Sec. 101. Authorization for Secretary of Veterans Affairs to provide service dogs for disabled veterans.

Sec. 102. Maintenance of capacity for specialized treatment and rehabilitative needs of disabled veterans.

Sec. 103. Threshold for veterans health care eligibility means test to reflect locality cost-of-living variations.

Sec. 104. Assessment and report on special telephone services for veterans.

Sec. 105. Recodification of bereavement counseling authority and certain other health-related authorities.

Sec. 106. Extension of expiring collections authorities.

**TITLE II—CHIROPRACTIC SERVICES PROGRAM**

Sec. 201. Chiropractic Service established in the Veterans Health Administration.

Sec. 202. Availability of chiropractic care to veterans.

Sec. 203. Chiropractic providers.

Sec. 204. Scope of services; enrollment.

Sec. 205. Training and information.

Sec. 206. Advisory committee.

Sec. 207. Implementation report.

**TITLE III—NATIONAL COMMISSION ON VA NURSING**

Sec. 301. Establishment of Commission.

Sec. 302. Duties of Commission.

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Sec. 303. Reports.  
Sec. 304. Powers.  
Sec. 305. Personnel matters.  
Sec. 306. Termination of the Commission.

1       **TITLE I—VETERANS HEALTH**  
2               **CARE IMPROVEMENT**

3       **SEC. 101. AUTHORIZATION FOR SECRETARY OF VETERANS**  
4               **AFFAIRS TO PROVIDE SERVICE DOGS FOR**  
5               **DISABLED VETERANS.**

6       (a) AUTHORITY.—Section 1714 of title 38, United  
7 States Code, is amended—

8               (1) in subsection (b)—

9                       (A) by striking “seeing-eye or” the first  
10 place it appears;

11                      (B) by striking “who are entitled to dis-  
12 ability compensation” and inserting “who are  
13 enrolled under section 1705 of this title”;

14                      (C) by striking “, and may pay” and all  
15 that follows through “such seeing-eye or guide  
16 dogs”; and

17                      (D) by striking “handicap” and inserting  
18 “disability”; and

19       (2) by adding at the end the following new sub-  
20 sections:

21       “(e) The Secretary may, in accordance with the pri-  
22 ority specified in section 1710(a)(2) of this title, provide—

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1 “(1) service dogs trained for the aid of the  
2 hearing impaired to veterans who are hearing im-  
3 paired and are enrolled under section 1705 of this  
4 title; and

5 “(2) service dogs trained for the aid of persons  
6 with spinal cord injury or dysfunction or other  
7 chronic impairment that substantially limits mobility  
8 to veterans with such injury, dysfunction, or impair-  
9 ment who are enrolled under section 1705 of this  
10 title.

11 “(d) In the case of a veteran provided a dog under  
12 subsection (b) or (c), the Secretary may pay travel and  
13 incidental expenses for that veteran under the terms and  
14 conditions set forth in section 111 of this title to and from  
15 the veteran’s home for expenses incurred in becoming ad-  
16 justed to the dog.”.

17 (b) CLERICAL AMENDMENTS.—

18 (1) The heading for such section is amended to  
19 read as follows:

20 “§ 1714. **Fitting and training in use of prosthetic ap-  
21 pliances; guide dogs; service dogs**”.

22 (2) The item relating to such section in the  
23 table of sections at the beginning of chapter 17 of  
24 such title is amended to read as follows:

“1714. Fitting and training in use of prosthetic appliances; guide dogs; service  
dogs.”.

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1 **SEC. 102. MAINTENANCE OF CAPACITY FOR SPECIALIZED**  
2 **TREATMENT AND REHABILITATIVE NEEDS OF**  
3 **DISABLED VETERANS.**

4 (a) MAINTENANCE OF CAPACITY ON A SERVICE-NET-  
5 WORK BASIS.—Section 1706(b) of title 38, United States  
6 Code, is amended—

7 (2) in paragraph (1)—

8 (A) in the first sentence, by inserting  
9 “(and each geographic service area of the Vet-  
10 erans Health Administration)” after “ensure  
11 that the Department”; and

12 (B) in clause (B), by inserting “(and each  
13 geographic service area of the Veterans Health  
14 Administration)” after “overall capacity of the  
15 Department”; and

16 (2) by redesignating paragraphs (2) and (3) as  
17 paragraphs (3) and (4), respectively;

18 (3) by inserting after paragraph (1) the fol-  
19 lowing new paragraph (2):

20 “(2) For purposes of paragraph (1), the capacity of  
21 the Department (and each geographic service area of the  
22 Veterans Health Administration) to provide for the spe-  
23 cialized treatment and rehabilitative needs of disabled vet-  
24 erans (including veterans with spinal cord dysfunction,  
25 traumatic brain injury, blindness, prosthetics and sensory  
26 aids, and mental illness) within distinct programs or facili-



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1 ties shall be measured for seriously mentally ill veterans  
2 as follows (with all such data to be provided by geographic  
3 service area and totaled nationally):

4       “(A) For mental health intensive community-  
5 based care, the number of discrete intensive care  
6 teams constituted to provide such intensive services  
7 to seriously mentally ill veterans and the number of  
8 veterans provided such care.

9       “(B) For opioid substitution programs and for  
10 traumatic brain injury, the number of patients treat-  
11 ed annually and the amounts expended.

12       “(C) For dual-diagnosis patients, the number  
13 treated annually and the amounts expended.

14       “(D) For substance abuse programs—

15           “(i) the number of substance-use disorder  
16 beds (whether hospital, nursing home, or other  
17 designated beds) employed and the average bed  
18 occupancy of such beds;

19           “(ii) the percentage of unique patients ad-  
20 mitted directly to substance abuse outpatient  
21 care during the fiscal year who had two or more  
22 additional visits to specialized substance abuse  
23 outpatient care within 30 days of their first  
24 visit, with a comparison from 1996 until the  
25 date of the report;

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1           “(iii) the percentage of unique inpatients  
2           with substance abuse diagnoses treated during  
3           the fiscal year who had one or more specialized  
4           substance abuse clinic visits within three days  
5           of their index discharge, with a comparison  
6           from 1996 until the date of the report; and

7           “(iv) the percentage of unique outpatients  
8           seen in a facility or service network during the  
9           fiscal year who had one or more specialized sub-  
10          stance abuse clinic visits, with a comparison  
11          from 1996 until the date of the report.

12          “(E) For mental health programs, the number  
13          and type of staff that are available at each facility  
14          to provide specialized mental health treatment, in-  
15          cluding satellite clinics, outpatient programs, and  
16          community-based outpatient clinics, with a trend line  
17          comparison from 1996 to the date of the report.

18          “(F) The number of such clinics providing men-  
19          tal health care, the number and type of mental  
20          health staff at each such clinic, and the type of men-  
21          tal health programs at each such clinic.

22          “(G) For spinal cord injury specialized centers  
23          and for blind rehabilitation specialized centers, the  
24          number of beds and staff assigned on a full time  
25          basis to provide care in such centers.”.

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1           “(H) For prosthetics and sensory aids, the an-  
2           nual amount expended.

3           (b) **EXTENSION OF ANNUAL REPORT REQUIRE-**  
4 **MENT.**—Paragraph (3) of such section, as so redesignated,  
5 is amended—

6           (1) by striking “April 1, 1999, April 1, 2000,  
7           and April 1, 2001” and inserting “April 1 of each  
8           year through 2004”; and

9           (2) by adding at the end the following new sen-  
10          tence: “The accuracy of each such report shall be  
11          certified by, or otherwise commented upon by, the  
12          Inspector General of the Department.”.

13 **SEC. 103. THRESHOLD FOR VETERANS HEALTH CARE ELI-**  
14 **GIBILITY MEANS TEST TO REFLECT LOCAL-**  
15 **ITY COST-OF-LIVING VARIATIONS.**

16          (a) **REVISED THRESHOLD.**—Subsection (b) of section  
17 1722 of title 38, United States Code, is amended to read  
18 as follows:

19          “(b)(1) For purposes of subsection (a)(3), the income  
20 threshold applicable to a veteran is the amount determined  
21 under paragraph (2).

22          “(2) The amount determined under this paragraph  
23 for a veteran is the greater of the following:

24               “(A) For any calendar year after 2000—

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1           “(i) in the case of a veteran with no de-  
2           pendents, \$23,688, as adjusted under sub-  
3           section (c); or

4           “(ii) in the case of a veteran with one or  
5           more dependents, \$28,429, as so adjusted, plus  
6           \$1,586, as so adjusted, for each dependent in  
7           excess of one.

8           “(B) The amount in effect under the HUD Low  
9           Income Index that is applicable in the area in which  
10          the veteran resides.

11          “(3) For purposes of paragraph (2)(B), the term  
12          ‘HUD Low Income Index’ means the family income ceiling  
13          amounts determined by the Secretary of Housing and  
14          Urban Development under section 3(b)(2) of the United  
15          States Housing Act of 1937 (42 U.S.C. 1437a(b)(2)) for  
16          purposes of the determination of ‘low-income families’  
17          under that section.”.

18          (c) CONFORMING AMENDMENT.—(1) Subsection  
19          (a)(3) of such section is amended by striking “amount set  
20          forth in” and inserting “income threshold determined  
21          under”.

22          (2) Subsection (c) of such section is amended by  
23          striking “subsection (b)” and inserting “subsection  
24          (b)(2)(A)”.

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1 (d) LIMITATION ON RESOURCE REALLOCATIONS.—

2 Within the amount appropriated to the Department of  
3 Veterans Affairs for medical care for each of fiscal years  
4 2002 through 2006, the amount that would otherwise be  
5 allocated by the Secretary to any geographic service region  
6 of the Veterans Health Administration in accordance with  
7 the established resource allocation procedures of the De-  
8 partment may not be increased or decreased by more than  
9 5 percent by reason of the implementation of this section.

10 (e) EFFECTIVE DATE.—The amendments made by  
11 this section shall take effect on April 1, 2002.

12 **SEC. 104. ASSESSMENT AND REPORT ON SPECIAL TELE-**  
13 **PHONE SERVICES FOR VETERANS.**

14 (a) ASSESSMENT OF CURRENT SERVICES.—The Sec-  
15 retary of Veterans Affairs shall carry out an assessment  
16 of all special telephone services for veterans (such as  
17 helplines and hotlines) provided by the Department of Vet-  
18 erans Affairs. The assessment shall include the geo-  
19 graphical coverage, availability, utilization, effectiveness,  
20 management, coordination, staffing, and cost of those  
21 services. As part of such assessment, the Secretary shall  
22 conduct a survey of veterans to measure their satisfaction  
23 with current special telephone services and the demand for  
24 additional services.



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1 (b) REPORT.—Not later than one year after the date  
2 of the enactment of this Act, the Secretary shall submit  
3 to Congress a report on the assessment carried out under  
4 subsection (a). The Secretary shall include in the report  
5 recommendations regarding any needed improvement to  
6 such services and recommendations regarding contracting  
7 for the performance of such services.

8 **SEC. 105. RECODIFICATION OF BEREAVEMENT COUN-**  
9 **SELING AUTHORITY AND CERTAIN OTHER**  
10 **HEALTH-RELATED AUTHORITIES.**

11 (a) STATUTORY REORGANIZATION.—Subchapter I of  
12 chapter 17 of title 38, United States Code, is amended—

13 (1) in section 1701(6)—

14 (A) by striking subparagraph (B) and the  
15 sentence following that subparagraph;

16 (B) by striking “services—” in the matter  
17 preceding subparagraph (A) and inserting  
18 “services, the following.”; and

19 (C) by striking subparagraph (A) and in-  
20 serting the following:

21 “(A) Surgical services.

22 “(B) Dental services and appliances as de-  
23 scribed in sections 1710 and 1712 of this title.

24 “(C) Optometric and podiatric services.

25 “(D) Preventive health services.

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1           “(E) In the case of a person otherwise receiving  
2       care or services under this chapter—

3           “(i) wheelchairs, artificial limbs, trusses,  
4       and similar appliances;

5           “(ii) special clothing made necessary by  
6       the wearing of prosthetic appliances; and

7           “(iii) such other supplies or services as the  
8       Secretary determines to be reasonable and nec-  
9       essary.

10          “(F) Travel and incidental expenses pursuant  
11       to section 111 of this title.”; and

12          (2) in section 1707—

13               (A) by inserting “(a)” at the beginning of  
14       the text of the section; and

15               (B) by adding at the end the following:

16          “(b) The Secretary may furnish sensori-neural aids  
17       only in accordance with guidelines prescribed by the Sec-  
18       retary.”.

19       (b) CONSOLIDATION OF PROVISIONS RELATING TO  
20       PERSONS OTHER THAN VETERANS.—Such chapter is fur-  
21       ther amended by adding at the end the following new sub-  
22       chapter:

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1 "SUBCHAPTER VIII—HEALTH CARE OF  
2 PERSONS OTHER THAN VETERANS

3 **"§ 1782. Counseling, training, and mental health serv-**  
4 **ices for immediate family members**

5 "(a) COUNSELING FOR FAMILY MEMBERS OF VET-  
6 ERANS RECEIVING SERVICE-CONNECTED TREATMENT.—  
7 In the case of a veteran who is receiving treatment for  
8 a service-connected disability pursuant to paragraph (1)  
9 or (2) of section 1710(a) of this title, the Secretary shall  
10 provide to individuals described in subsection (c) such con-  
11 sultation, professional counseling, training, and mental  
12 health services as are necessary in connection with that  
13 treatment.

14 "(b) COUNSELING FOR FAMILY MEMBERS OF VET-  
15 ERANS RECEIVING NON-SERVICE-CONNECTED TREAT-  
16 MENT.—In the case of a veteran who is eligible to receive  
17 treatment for a non-service-connected disability under the  
18 conditions described in paragraph (1), (2), or (3) of sec-  
19 tion 1710(a) of this title, the Secretary may, in the discre-  
20 tion of the Secretary, provide to individuals described in  
21 subsection (c) such consultation, professional counseling,  
22 training, and mental health services as are necessary in  
23 connection with that treatment if—

24 "(1) those services were initiated during the  
25 veteran's hospitalization; and

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1           “(2) the continued provision of those services  
2           on an outpatient basis is essential to permit the dis-  
3           charge of the veteran from the hospital.

4           “(c) ELIGIBLE INDIVIDUALS.—Individuals who may  
5           be provided services under this subsection are—

6           “(1) the members of the immediate family or  
7           the legal guardian of a veteran; or

8           “(2) the individual in whose household such vet-  
9           eran certifies an intention to live.

10          “(d) TRAVEL AND TRANSPORTATION AUTHOR-  
11          IZED.—Services provided under subsections (a) and (b)  
12          may include, under the terms and conditions set forth in  
13          section 111 of this title, travel and incidental expenses of  
14          individuals described in subsection (c) in the case of—

15          “(1) a veteran who is receiving care for a serv-  
16          ice-connected disability; and

17          “(2) a dependent or survivor receiving care  
18          under the last sentence of section 1783(b) of this  
19          title.

20       **“§ 1783. Bereavement counseling**

21          “(a) DEATHS OF VETERANS.—In the case of an indi-  
22          vidual who was a recipient of services under section 1782  
23          of this title at the time of the death of the veteran, the  
24          Secretary may provide bereavement counseling to that in-  
25          dividual in the case of a death—

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1 “(1) that was unexpected; or

2 “(2) that occurred while the veteran was par-  
3 ticipating in a hospice program (or a similar pro-  
4 gram) conducted by the Secretary.

5 “(b) DEATHS IN ACTIVE SERVICE.—The Secretary  
6 may provide bereavement counseling to an individual who  
7 is a member of the immediate family of a member of the  
8 Armed Forces who dies in the active military, naval, or  
9 air service in the line of duty and under circumstances  
10 not due to the person’s own misconduct.

11 “(c) BEREAVEMENT COUNSELING DEFINED.—For  
12 purposes of this section, the term ‘bereavement counseling’  
13 means such counseling services, for a limited period, as  
14 the Secretary determines to be reasonable and necessary  
15 to assist an individual with the emotional and psycho-  
16 logical stress accompanying the death of another indi-  
17 vidual.

18 **“§ 1784. Humanitarian care**

19 “The Secretary may furnish hospital care or medical  
20 services as a humanitarian service in emergency cases, but  
21 the Secretary shall charge for such care and services at  
22 rates prescribed by the Secretary.”.

23 (c) TRANSFER OF CHAMPVA SECTION.—Section  
24 1713 of such title is—



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- 1 (1) transferred to subchapter VIII of chapter  
2 17 of such title, as added by subsection (b), and in-  
3 serted after the subchapter heading;
- 4 (2) redesignated as section 1781; and
- 5 (3) amended by adding at the end of subsection  
6 (b) the following new sentence: "A dependent or sur-  
7 vivor receiving care under the preceding sentence  
8 shall be eligible for the same medical services as a  
9 veteran, including services under sections 1782 and  
10 1783 of this title."
- 11 (d) REPEAL OF RECODIFIED AUTHORITY.—Section  
12 1711 of such title is amended by striking subsection (b).
- 13 (e) CROSS REFERENCE AMENDMENTS.—Such title is  
14 further amended as follows:
- 15 (1) Section 103(d)(5)(B) is amended by strik-  
16 ing "1713" and inserting "1781".
- 17 (2) Sections 1701(5) is amended by striking  
18 "1713(b)" in subparagraphs (B) and (C)(i) and in-  
19 serting "1781(b)".
- 20 (3) Section 1712A(b) is amended—
- 21 (A) in the last sentence of paragraph (1),  
22 by striking "section 1711(b)" and inserting  
23 "section 1784"; and

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1 (A) in paragraph (2), by striking “section  
2 1701(6)(B)” and inserting “sections 1782 and  
3 1783”.

4 (4) Section 1729(f) is amended by striking  
5 “section 1711(b)” and inserting “section 1784”.

6 (5) Section 1729A(b) is amended—

7 (A) by redesignating paragraph (7) as  
8 paragraph (8); and

9 (B) by inserting after paragraph (6) the  
10 following new paragraph (7):

11 “(7) Section 1784 of this title.”.

12 (6) Section 8111(g) is amended—

13 (A) in paragraph (4), by inserting “serv-  
14 ices under sections 1782 and 1783 of this title”  
15 after “of this title,”; and

16 (B) in paragraph (5), by striking “section  
17 1711(b) or 1713” and inserting “section 1782,  
18 1783, or 1784”.

19 (7) Section 8111A(a)(2) is amended by insert-  
20 ing “, and the term ‘medical services’ includes serv-  
21 ices under sections 1782 and 1783 of this title” be-  
22 fore the period at the end.

23 (8) Section 8152(3) is amended by inserting  
24 “services under sections 1782 and 1783 of this title”  
25 after “of this title),”.

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1 (9) Sections 8502(b), 8520(a), and 8521 are  
2 amended by striking “the last sentence of section  
3 1713(b)” and inserting “the penultimate sentence of  
4 section 1781(b)”.

5 (f) CLERICAL AMENDMENTS.—

6 (1) The table of sections at the beginning of  
7 such chapter is amended—

8 (A) by striking the item relating to section  
9 1707 and inserting the following:

“1707. Limitations.”;

10 (B) by striking the item relating to section  
11 1713; and

12 (C) by adding at the end the following:

“SUBCHAPTER VIII—HEALTH CARE OF PERSONS OTHER THAN VETERANS

“1781. Medical care for survivors and dependents of certain veterans.

“1782. Counseling, training, and mental health services for immediate family  
members.

“1783. Bereavement counseling.

“1784. Humanitarian care.”.

13 (2) The heading for section 1707 is amended to  
14 read as follows:

15 “§ 1707. Limitations”.

16 SEC. 106. EXTENSION OF EXPIRING COLLECTIONS AU-  
17 THORITIES.

18 Sections 1710(f)(2)(B) and 1729(a)(2)(E) of title 38,  
19 United States Code, are each amended by striking “Sep-  
20 tember 30, 2002” and inserting “September 30, 2007”.

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1           **TITLE II—CHIROPRACTIC**  
2                           **SERVICES**

3   **SEC. 201. CHIROPRACTIC SERVICE ESTABLISHED IN THE**  
4                           **VETERANS HEALTH ADMINISTRATION.**

5           (a) NEW SERVICE IN VETERANS HEALTH ADMINIS-  
6   TRATION.—Section 7305 of title 38, United States Code,  
7   is amended—

8               (1) by redesignating paragraph (7) as para-  
9               graph (8); and

10              (2) by inserting after paragraph (6) the fol-  
11              lowing new paragraph (7):

12              “(7) A Chiropractic Service.”.

13           (b) DIRECTOR.—Section 7306(a) of such title—

14               (1) by redesignating paragraph (7) as para-  
15               graph (8); and

16               (2) by inserting after paragraph (6) the fol-  
17               lowing new paragraph (7):

18               “(7) A Director of Chiropractic Service, who  
19               shall be a qualified doctor of chiropractic and who  
20               shall be responsible to the Secretary for the oper-  
21               ation of the Chiropractic Service.”.

22   **SEC. 202. AVAILABILITY OF CHIROPRACTIC CARE TO VET-**  
23                           **ERANS.**

24           (a) ESTABLISHMENT.—The Secretary of Veterans  
25   Affairs shall establish a program to provide chiropractic

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1 care to veterans through all Department of Veterans Af-  
2 fairs medical centers.

3 (b) IMPLEMENTATION.—The program under this sec-  
4 tion shall be implemented at Department of Veterans Af-  
5 fairs medical centers as follows:

6 (1) At not less than 30 medical centers by the  
7 end of fiscal year 2002.

8 (2) At not less than 60 medical centers by the  
9 end of fiscal year 2003,

10 (3) At not less than 90 medical centers by the  
11 end of fiscal year 2004.

12 (4) At not less than 120 medical centers by the  
13 end of fiscal year 2005.

14 (5) At all of the Department of Veterans Af-  
15 fairs medical centers by the end of fiscal year 2006.

16 (c) INITIAL PARTICIPATING MEDICAL CENTERS.—  
17 The initial 30 medical centers at which the program is  
18 to be carried out shall be designated by the Secretary not  
19 later than 60 days after the date of the enactment of this  
20 Act. In designating those medical centers, the Secretary  
21 shall select medical centers to reflect geographic diversity,  
22 facilities of various size and capabilities, and the scope of  
23 practice in the Department health care system.



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1 **SEC. 203. CHIROPRACTIC PROVIDERS.**

2 The program under section 202 shall be carried out  
3 through personal service contracts and with appointments  
4 of licensed chiropractors for delivery of chiropractic serv-  
5 ices at Department of Veterans Affairs medical centers.

6 **SEC. 204. SCOPE OF SERVICES; ENROLLMENT.**

7 (a) SCOPE OF SERVICES.—The chiropractic services  
8 provided under section 202 shall include, at a minimum,  
9 care for neuro-musculoskeletal conditions.

10 (b) ENROLLMENT.—A veteran enrolled under section  
11 1705 of title 38, United States Code, may, as part of such  
12 enrollment, choose a chiropractor as the veteran's primary  
13 care provider. A veteran with a primary care provider  
14 other than a chiropractor may be referred to chiropractic  
15 services for neuro-musculoskeletal conditions by a medical  
16 provider.

17 **SEC. 205. TRAINING AND INFORMATION.**

18 (a) PRIMARY CARE TEAMS.—The Secretary shall  
19 provide training and materials relating to chiropractic  
20 services to members of Department health care providers  
21 assigned to primary care teams for the purposes of famil-  
22 iarizing those providers with the benefits of appropriate  
23 use of chiropractic services.

24 (b) FUTURE PROGRAM SITES.—During the period  
25 covered by section 202(b), the Secretary shall provide ma-  
26 terials relating to chiropractic services to medical centers

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1 and other health care facilities of the Department not yet  
2 participating in the program in order to ensure that health  
3 care providers at those facilities are aware of chiropractic  
4 care as a future referral source.

5 (c) **APPROVAL OF MATERIALS.**—The Secretary may  
6 approve materials to be furnished under subsections (a)  
7 and (b) only after consulting with, and receiving the views  
8 of, the advisory committee established under section 206.

9 **SEC. 206. ADVISORY COMMITTEE.**

10 (a) **ESTABLISHMENT.**—The Secretary shall establish  
11 an advisory committee to review implementation of the  
12 program under this title.

13 (b) **MEMBERS.**—In appointing the members of the  
14 advisory committee, the Secretary shall include on the ad-  
15 visory committee—

16 (1) members of the chiropractic profession;

17 (2) persons who are experts in human resources  
18 appointments in the Federal service;

19 (3) persons with expertise in academic matters;

20 (4) persons with knowledge of credentialing and  
21 the granting of professional privileging to health  
22 care practitioners; and

23 (5) other persons as determined necessary by  
24 the Secretary and the functional needs of the advi-

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1 sory committee in establishing the chiropractic  
2 health program.

3 (c) FUNCTIONS.—The advisory committee shall pro-  
4 vide advice to the Secretary on—

5 (1) the granting of professional privileges for  
6 chiropractors at Department medical centers;

7 (2) the scope of practice of chiropractors at De-  
8 partment medical centers;

9 (3) training materials; and

10 (4) such other matters as are determined ap-  
11 propriate by the Secretary.

12 **SEC. 207. IMPLEMENTATION REPORT.**

13 Not later than 18 months after the date of the enact-  
14 ment of this Act, the Secretary shall submit to the Com-  
15 mittees on Veterans Affairs of the Senate and House of  
16 Representatives a report on the implementation of this  
17 title.

18 **TITLE III—NATIONAL**  
19 **COMMISSION ON VA NURSING**

20 **SEC. 301. ESTABLISHMENT OF COMMISSION.**

21 (a) ESTABLISHMENT.—There is hereby established in  
22 the Department of Veterans Affairs a commission to be  
23 known as the “National Commission on VA Nursing”  
24 (hereinafter in this title referred to as the “Commission”).

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1 (b) COMPOSITION.—(1) The Commission shall be  
2 composed of 12 members.

3 (2) Eleven members shall be appointed by the Sec-  
4 retary of Veterans Affairs, as follows:

5 (A) Three shall be recognized representatives of  
6 employees, including nurses, of the Department of  
7 Veterans Affairs.

8 (B) Three shall be representatives of profes-  
9 sional associations of nurses of the Department or  
10 similar organizations affiliated with the Depart-  
11 ment's health care practitioners.

12 (C) Two shall be representatives of trade asso-  
13 ciations representing the nursing profession.

14 (D) Two shall be nurses from nursing schools  
15 affiliated with the Department of Veterans Affairs.

16 (E) One shall be a representative of veterans.

17 (3) The Nurse Executive of the Department of Vet-  
18 erans Affairs shall be an ex officio member of the Commis-  
19 sion.

20 (d) CHAIRMAN OF COMMISSION.—The Secretary of  
21 Veterans Affairs shall designate one of the members of  
22 the Commission to serve as chairman of the Commission.

23 (e) PERIOD OF APPOINTMENT; VACANCIES.—Mem-  
24 bers shall be appointed for the life of the Commission. Any

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1 vacancy in the Commission shall be filled in the same man-  
2 ner as the original appointment.

3 (f) INITIAL ORGANIZATION REQUIREMENTS.—All ap-  
4 pointments to the Commission shall be made not later  
5 than 60 days after the date of the enactment of this Act.  
6 The Commission shall convene its first meeting not later  
7 than 60 days after the date as of which all members of  
8 the Commission have been appointed.

9 **SEC. 302. DUTIES OF COMMISSION.**

10 (a) ASSESSMENT.—The Commission shall—

11 (1) consider legislative and organizational policy  
12 changes to enhance the recruitment and retention of  
13 nurses by the Department of Veterans Affairs; and

14 (2) assess the future of the nursing profession  
15 within the Department.

16 (b) RECOMMENDATION.—The Commission shall rec-  
17 ommend legislative and organizational policy changes to  
18 enhance the recruitment and retention of nurses in the  
19 Department.

20 **SEC. 303. REPORTS.**

21 (a) COMMISSION REPORT.—The Commission shall,  
22 not later than two years after the date of its first meeting,  
23 submit to Congress and the Secretary of Veterans Affairs  
24 a report on the Commission's findings and conclusions.



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1 (b) SECRETARY OF VETERANS AFFAIRS REPORT.—

2 Not later than 60 after the date of the Commission's re-  
3 port under subsection (a), the Secretary shall submit to  
4 Congress a report—

5 (1) providing the Secretary's views on the Com-  
6 mission's findings and conclusions; and

7 (2) explaining what actions, if any, the Sec-  
8 retary intends to take to implement the rec-  
9 ommendations of the Commission and the Sec-  
10 retary's reasons for doing so.

11 **SEC. 304. POWERS.**

12 (a) HEARINGS.—The Commission or, at its direction,  
13 any panel or member of the Commission, may, for the pur-  
14 pose of carrying out the provisions of this title, hold hear-  
15 ings and take testimony to the extent that the Commission  
16 or any member considers advisable.

17 (b) INFORMATION.—The Commission may secure di-  
18 rectly from any Federal department or agency information  
19 that the Commission considers necessary to enable the  
20 Commission to carry out its responsibilities under this  
21 title.

22 **SEC. 305. PERSONNEL MATTERS.**

23 (a) PAY OF MEMBERS.—Members of the Commission  
24 shall serve without pay by reason of their work on the  
25 Commission.

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1 (b) TRAVEL EXPENSES.—The members of the Com-  
2 mission shall be allowed travel expenses, including per  
3 diem in lieu of subsistence, at rates authorized for employ-  
4 ees of agencies under subchapter I of chapter 57 of title  
5 5, United States Code, while away from their homes or  
6 regular places of business in the performance of services  
7 for the Commission.

8 (c) STAFF.—(1) The Secretary may, without regard  
9 to the provisions of title 5, United States Code, governing  
10 appointments in the competitive service, appoint a staff  
11 director and such additional personnel as may be nec-  
12 essary to enable the Commission to perform its duties.

13 (2) The Secretary may fix the pay of the staff direc-  
14 tor and other personnel appointed under paragraph (1)  
15 without regard to the provisions of chapter 51 and sub-  
16 chapter III of chapter 53 of title 5, United States Code,  
17 relating to classification of positions and General Schedule  
18 pay rates, except that the rate of pay fixed under this  
19 paragraph for the staff director may not exceed the rate  
20 payable for level V of the Executive Schedule under section  
21 5316 of such title and the rate of pay for other personnel  
22 may not exceed the maximum rate payable for grade GS-  
23 15 of the General Schedule.

24 (d) DETAIL OF GOVERNMENT EMPLOYEES.—Upon  
25 request of the Secretary, the head of any Federal depart-

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1 ment or agency may detail, on a nonreimbursable basis,  
2 any personnel of that department or agency to the Com-  
3 mission to assist it in carrying out its duties.

4 **SEC. 306. TERMINATION OF THE COMMISSION.**

5 The Commission shall terminate 90 days after the  
6 date of the submission of its report under section 303(a).

**SUMMARY**  
**H.R. 2792, AS AMENDED**  
**DISABLED VETERANS SERVICE DOG AND HEALTH CARE**  
**IMPROVEMENT ACT OF 2001**

The bill would:

**TITLE 1 - VETERANS HEALTH CARE IMPROVEMENT**

1. Authorize service dogs to a veteran suffering from spinal cord injuries or dysfunction, other diseases causing physical immobility, hearing loss or other types of disabilities susceptible to improvement or enhanced functioning in activities of daily living through employment of a service dog. Require a veteran to be enrolled in VA care as a prerequisite to eligibility for service dog. Service dogs provided in accordance with existing priorities for all VA health care services.
2. Strengthen mandate for VA to maintain capacity in specialized medical programs for veterans by requiring each VISN to maintain a proportional share of national capacity in certain specialized health care programs for veterans (those with serious mental illness, including substance use disorders, and those who need opioid substitution programs; and dual diagnosis patients; spinal cord, brain injured and blinded veterans; those who need prosthetics and sensory aids). Extend capacity reporting requirement for 3 years.
3. Modify VA's system of determining nonservice-connected veterans' "ability to pay" for VA health care services by introducing (generally as an upper income bound compared to current income limits in Title 38) the "Low Income Housing Index" employed by the Department of Housing and Urban Development to determine family income thresholds for HUD housing assistance eligibility. Maintain VA's current income threshold. This modification adjusts for all Standard Metropolitan Statistical Areas (SMSA), is updated periodically by HUD to reflect economic changes within the SMSAs. Phased in with no VISN experiencing greater than 5 percent change in funding allocation than would otherwise occur.
4. Require Secretary to assess all special telephone services made available to veterans, such as "help lines" and "hotlines." Assessment includes geographical coverage, availability, utilization, effectiveness, management, coordination, staffing, cost, and a survey of veterans to measure effectiveness of these telephone services and future needs. Report to Congress within 1 year of enactment.

5. Recodify basic health care authorities and authority for non-veteran care (CHAMPVA, humanitarian, etc.).
6. Extend expiring authorities for VA to collect co-payments from veterans and insurance proceeds from veterans' health insurance policies for deposit into Medical Care Collections Fund.

## **TITLE II - CHIROPRACTIC SERVICES**

7. Establish chiropractic services program, beginning with 30 medical centers and implemented in a 5-year period. Authorize chiropractors appointment or contracts; create an advisory committee on chiropractic health care, established by the Secretary. Authorize chiropractors to function as VA primary care providers. Authorize director of chiropractic service appointed with the same authority as other service directors in VHA.

## **TITLE III - NATIONAL COMMISSION ON VA NURSING**

8. Establish a National Commission on VA nursing, consisting of 12 members appointed by the Secretary. Review includes legislative and organizational policy changes to enhance recruitment and retention of nurses and assess future of the nursing profession in the VA. Report to Congress within 2 years of establishment.