

Suspend the Rules and Pass the Bill, H.R. 3224, with An Amendment

(The amendment strikes all after the enacting clause and inserts a new text)

116TH CONGRESS
1ST SESSION

H. R. 3224

To amend title 38, United States Code, to provide for increased access to Department of Veterans Affairs medical care for women veterans.

IN THE HOUSE OF REPRESENTATIVES

OCTOBER 29, 2019

Ms. BROWNLEY of California introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To amend title 38, United States Code, to provide for increased access to Department of Veterans Affairs medical care for women veterans.

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; TABLE OF CONTENTS.**

4 (a) SHORT TITLE.—This Act may be cited as the
5 “Deborah Sampson Act”.

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

Sec. 1. Short title; table of contents.

TITLE I—VETERANS HEALTH ADMINISTRATION

- Sec. 101. Office of Women’s Health in the Department of Veterans Affairs.
- Sec. 102. Expansion of capabilities of women veterans call center to include text messaging.
- Sec. 103. Requirement for Department of Veterans Affairs internet website to provide information on services available to women veterans.
- Sec. 104. Report on Women Veterans Retrofit Initiative.
- Sec. 105. Establishment of environment of care standards and inspections at Department of Veterans Affairs medical centers.
- Sec. 106. Additional funding for primary care and emergency care clinicians in Women Veterans Health Care Mini-Residency Program.
- Sec. 107. Establishment of women veteran training module for non-Department of Veterans Affairs health care providers.

TITLE II—MEDICAL CARE

- Sec. 201. Improved access to Department of Veterans Affairs medical care for women veterans.
- Sec. 202. Counseling and treatment for sexual trauma.
- Sec. 203. Counseling in retreat settings for women veterans and other individuals.
- Sec. 204. Improvement of health care services provided to newborn children by Department of Veterans Affairs.

TITLE III—REPORTS AND OTHER MATTERS

Subtitle A—Reports

- Sec. 301. Assessment of effects of intimate partner violence on women veterans by Advisory Committee on Women Veterans.
- Sec. 302. Study on staffing of Women Veteran Program Manager program at medical centers of the Department of Veterans Affairs and training of staff.
- Sec. 303. Report on availability of prosthetic items for women veterans from the Department of Veterans Affairs.
- Sec. 304. Study of barriers for women veterans to health care from the Department of Veterans Affairs.
- Sec. 305. Report regarding veterans who receive benefits under laws administered by the Secretary of Veterans Affairs.
- Sec. 306. Study on Women Veteran Coordinator program.

Subtitle B—Other Matters

- Sec. 321. Anti-harassment and anti-sexual assault policy of the Department of Veterans Affairs.
- Sec. 322. Support for organizations that have a focus on providing assistance to women veterans and their families.
- Sec. 323. Gap analysis of Department of Veterans Affairs programs that provide assistance to women veterans who are homeless.
- Sec. 324. Department of Veterans Affairs public-private partnership on legal services for women veterans.
- Sec. 325. Program to assist veterans who experience intimate partner violence or sexual assault.

Sec. 326. Study and task force on veterans experiencing intimate partner violence or sexual assault.

1 **TITLE I—VETERANS HEALTH**
2 **ADMINISTRATION**

3 **SEC. 101. OFFICE OF WOMEN’S HEALTH IN THE DEPART-**
4 **MENT OF VETERANS AFFAIRS.**

5 (a) DIRECTOR OF WOMEN’S HEALTH.—Subsection
6 (a) of section 7306 of title 38, United States Code, is
7 amended—

8 (1) by redesignating paragraph (10) as para-
9 graph (11); and

10 (2) by inserting after paragraph (9) the fol-
11 lowing new paragraph:

12 “(10) The Director of Women’s Health.”.

13 (b) ORGANIZATION OF OFFICE.—

14 (1) IN GENERAL.—Subchapter I of chapter 73
15 of title 38, United States Code, is amended by add-
16 ing at the end of the following new sections:

17 **“§ 7310. Office of Women’s Health**

18 “(a) ESTABLISHMENT.—(1) The Under Secretary for
19 Health shall establish and operate in the Veterans Health
20 Administration the Office of Women’s Health (hereinafter
21 in this section referred to as the ‘Office’). The Office shall
22 be located at the Central Office of the Department of Vet-
23 erans Affairs.

1 “(2) The head of the Office is the Director of Wom-
2 en’s Health (hereinafter in this section referred to as the
3 ‘Director’). The Director shall report to the Under Sec-
4 retary for Health.

5 “(3) The Under Secretary for Health shall provide
6 the Office with such staff and other support as may be
7 necessary for the Office to carry out effectively its func-
8 tions under this section.

9 “(4) The Under Secretary for Health may reorganize
10 existing offices within the Veterans Health Administration
11 as of the date of the enactment of this section in order
12 to avoid duplication with the functions of the Office.

13 “(b) PURPOSE.—The functions of the Office include
14 the following:

15 “(1) To provide a central office for monitoring
16 and encouraging the activities of the Veterans
17 Health Administration with respect to the provision,
18 evaluation, and improvement of women veterans’
19 health care services in the Department.

20 “(2) To develop and implement standards of
21 care for the provision of health care for women vet-
22 erans in the Department.

23 “(3) To monitor and identify deficiencies in
24 standards of care for the provision of health care for
25 women veterans in the Department, to provide tech-

1 nical assistance to medical facilities of the Depart-
2 ment to address and remedy deficiencies, and to per-
3 form oversight of implementation of standards of
4 care for women veterans' health care in the Depart-
5 ment.

6 “(4) To monitor and identify deficiencies in
7 standards of care for the provision of health care for
8 women veterans provided through the community
9 pursuant to this title, and to provide recommenda-
10 tions to the appropriate office to address and rem-
11 edy any deficiencies.

12 “(5) To oversee distribution of resources and
13 information related to women veterans' health pro-
14 gramming under this title.

15 “(6) To promote the expansion and improve-
16 ment of clinical, research, and educational activities
17 of the Veterans Health Administration with respect
18 the health care of women veterans.

19 “(7) To provide, as part of the annual budg-
20 eting process, recommendations with respect to the
21 amount of funds to be requested for furnishing hos-
22 pital care and medical services to women veterans
23 pursuant to chapter 17 of this title, including, at a
24 minimum, recommendations that ensure that such
25 amount of funds either reflect or exceed the propor-

1 tion of veterans enrolled in the patient enrollment
2 system under section 1705 of this title who are
3 women.

4 “(8) To provide recommendations to the Under
5 Secretary for Health with respect to modifying the
6 Veterans Equitable Resource Allocation system to
7 ensure that resource allocations under such system
8 reflect the health care needs of women veterans.

9 “(9) To carry out such other duties as the
10 Under Secretary for Health may require.

11 “(c) RECOMMENDATIONS.—If the Under Secretary
12 for Health determines not to implement any recommenda-
13 tion made by the Director with respect to the allocation
14 of resources to address the health care needs of women
15 veterans, the Secretary shall notify the appropriate con-
16 gressional committees of such determination by not later
17 than 30 days after the date on which the Under Secretary
18 for Health receives the recommendation. Each such notifi-
19 cation shall include the following:

20 “(1) The reasoning of the Under Secretary for
21 Health in making such determination.

22 “(2) An alternative, if one is selected, to such
23 recommendation that the Under Secretary for
24 Health will carry out to fulfill the health care needs
25 of women veterans.

1 “(d) STANDARDS OF CARE.—In this section, the
2 standards of care for the provision of health care for
3 women veterans in the Department shall include, at a min-
4 imum, the following:

5 “(1) Requirement for—

6 “(A) at least one designated women’s
7 health primary care provider at each medical
8 center whose duties include, to the extent prac-
9 ticable, providing training to other health care
10 providers of the Department with respect to the
11 needs of women veterans; and

12 “(B) at least one designated women’s
13 health primary care provider at each commu-
14 nity-based outpatient clinic of the Department
15 who may serve female patients as a percentage
16 of the total duties of the provider.

17 “(2) Other requirements as determined by the
18 Under Secretary for Health.

19 “(e) OUTREACH.—The Director shall ensure that—

20 “(1) not less frequently than biannually, each
21 medical facility of the Department holds a public
22 forum for women veterans that occurs outside of
23 regular business hours; and

24 “(2) not less frequently than quarterly, each
25 medical facility of the Department convenes a focus

1 group of women veterans that includes a discussion
2 of harassment occurring at such facility.

3 “(f) DEFINITIONS.—In this section:

4 “(1) The term ‘appropriate congressional com-
5 mittees’ has the meaning given that term in section
6 7310A of this title.

7 “(2) The term ‘facility of the Department’ has
8 the meaning given the term in section 1701(3).

9 “(3) The term ‘Veterans Equitable Resource
10 Allocation system’ means the resource allocation sys-
11 tem established pursuant to section 429 of the De-
12 partments of Veterans Affairs and Housing and
13 Urban Development, and Independent Agencies Ap-
14 propriations Act, 1997 (Public Law 104–204; 110
15 Stat. 2929).

16 **“§ 7310A. Annual reports on women’s Health**

17 “(a) ANNUAL REPORTS.—Not later than December
18 1 of each year, the Director of Women’s Health shall sub-
19 mit to the appropriate congressional committees a report
20 containing the matters under subsections (b) through (g).

21 “(b) OFFICE OF WOMEN’S HEALTH.—Each report
22 under subsection (a) shall include a description of—

23 “(1) actions taken by the Office of Women’s
24 Health in the preceding fiscal year to improve the

1 Department's provision of health care to women vet-
2 erans;

3 “(2) any identified deficiencies related to the
4 Department's provision of health care to women vet-
5 erans and the standards of care established in sec-
6 tion 7310 of this title, and the Department's plan to
7 address such deficiencies;

8 “(3) the funding and personnel provided to the
9 Office and whether additional funding or personnel
10 are needed to meet the requirements of such section;
11 and

12 “(4) other information that would be of interest
13 to the appropriate congressional committees with re-
14 spect to oversight of the Department's provision of
15 health care to women veterans.

16 “(c) ACCESS TO GENDER-SPECIFIC SERVICES.—Each
17 report under subsection (a) shall include an analysis of
18 the access of women veterans to gender-specific services
19 under contracts, agreements, or other arrangements with
20 non-Department medical providers entered into by the
21 Secretary for the provision of hospital care or medical
22 services to veterans. Such analysis shall include data and
23 performance measures for the availability of gender spe-
24 cific services, including—

1 “(1) the average wait time between the vet-
2 eran’s preferred appointment date and the date on
3 which the appointment is completed;

4 “(2) the average driving time required for vet-
5 erans to attend appointments; and

6 “(3) reasons why appointments could not be
7 scheduled with non-Department medical providers.

8 “(d) LOCATIONS WHERE WOMEN VETERANS ARE
9 USING HEALTH CARE.—Each report under subsection (a)
10 shall include an analysis of the use by women veterans
11 of health care from the Department, including the fol-
12 lowing information:

13 “(1) The number of women veterans who reside
14 in each State.

15 “(2) The number of women veterans in each
16 State who are enrolled in the system of patient en-
17 rollment of the Department established and operated
18 under section 1705(a) this title.

19 “(3) Of the women veterans who are so en-
20 rolled, the number who have received health care
21 under the laws administered by the Secretary at
22 least one time during the one-year period preceding
23 the submittal of the report.

1 “(4) The number of women veterans who have
2 been seen at each medical facility of the Department
3 during such year.

4 “(5) The number of appointments that women
5 veterans have had at each such facility during such
6 year.

7 “(6) If known, an identification of the medical
8 facility of the Department in each Veterans Inte-
9 grated Service Network with the largest rate of in-
10 crease in patient population of women veterans as
11 measured by the increase in unique women veteran
12 patient use.

13 “(7) If known, an identification of the medical
14 facility of the Department in each Veterans Inte-
15 grated Service Network with the largest rate of de-
16 crease in patient population of women veterans as
17 measured by the decrease in unique women veterans
18 patient use.

19 “(e) MODELS OF CARE.—Each report under sub-
20 section (a) shall include an analysis of the use by the De-
21 partment of general primary care clinics, separate but
22 shared spaces, and women’s health centers as models of
23 providing health care to women veterans. Such analysis
24 shall include the following:

1 “(1) The number of facilities of the Department
2 that fall into each such model, disaggregated by Vet-
3 erans Integrated Service Network and State.

4 “(2) A description of the criteria used by the
5 Department to determine which such model is most
6 appropriate for each facility of the Department.

7 “(3) An assessment of how the Department de-
8 cides to make investments to modify facilities to a
9 different model.

10 “(4) A description of what, if any, plans the
11 Department has to modify facilities from general
12 primary care clinics to another model.

13 “(5) An assessment of whether any facilities
14 could be modified to a separate but shared space for
15 a women’s health center within planned investments
16 under the strategic capital investment planning proc-
17 ess of the Department.

18 “(6) An assessment of whether any facilities
19 could be modified to a separate or shared space, or
20 women’s health center with minor modifications to
21 existing plans under the strategic capital investment
22 planning process of the Department.

23 “(7) An assessment of whether the Department
24 has a goal for how many facilities should fall into
25 each such model.

1 “(f) STAFFING.—Each report under subsection (a)
2 shall include an analysis of the staffing of the Department
3 relating to the treatment of women, including the fol-
4 lowing, disaggregated by Veterans Integrated Service Net-
5 work and State (except with respect to paragraph (4)):

6 “(1) The number of women’s health centers.

7 “(2) The number of patient aligned care teams
8 of the Department relating to women’s health.

9 “(3) The number of full- and part-time gyne-
10 cologists of the Department.

11 “(4) The number of designated women’s health
12 care providers of the Department, disaggregated by
13 facility of the Department.

14 “(5) The number of health care providers of the
15 Department who have completed a mini-residency
16 for women’s health care through Women Veterans
17 Health Care Mini-Residency Program of the Depart-
18 ment during the one-year period preceding the sub-
19 mittal of the report, and the number that plan to
20 participate in such a mini-residency during the one-
21 year period following such date.

22 “(6) The number of designated women’s health
23 care providers of the Department who have suffi-
24 cient female patients to retain their competencies
25 and proficiencies.

1 “(g) ACCESSIBILITY AND TREATMENT OPTIONS.—

2 Each report under subsection (a) shall include an analysis
3 of the accessibility and treatment options for women vet-
4 erans, including the following:

5 “(1) An assessment of wheelchair accessibility
6 of women’s health centers of the Department, in-
7 cluding, with respect to each such facility, an assess-
8 ment of such accessibility for each kind of treatment
9 provided at the center, including with respect to ra-
10 diology and mammography, that addresses all rel-
11 evant factors, including door sizes, hoists, and equip-
12 ment.

13 “(2) The options for women veterans to access
14 female mental health providers and primary care
15 providers.

16 “(3) The options for women veterans at medical
17 facilities of the Department with respect to clothing
18 sizes, including for gowns, drawstring pants, and pa-
19 jamas.

20 “(h) DEFINITIONS.—In this section:

21 “(1) The term ‘appropriate congressional com-
22 mittees’ means—

23 “(A) the Committees on Veterans’ Affairs
24 of the House of Representatives and the Sen-
25 ate; and

1 **SEC. 103. REQUIREMENT FOR DEPARTMENT OF VETERANS**
2 **AFFAIRS INTERNET WEBSITE TO PROVIDE IN-**
3 **FORMATION ON SERVICES AVAILABLE TO**
4 **WOMEN VETERANS.**

5 (a) IN GENERAL.—The Secretary of Veterans Affairs
6 shall survey the internet websites and information re-
7 sources of the Department of Veterans Affairs in effect
8 on the day before the date of the enactment of this Act
9 and publish an internet website that serves as a central-
10 ized source for the provision to women veterans of infor-
11 mation about the benefits and services available to them
12 under laws administered by the Secretary.

13 (b) ELEMENTS.—The internet website published
14 under subsection (a) shall provide to women veterans in-
15 formation regarding all of the services available in the dis-
16 trict in which the veteran is seeking such services, includ-
17 ing, with respect to each medical center and community-
18 based outpatient clinic in the applicable Veterans Inte-
19 grated Service Network—

20 (1) the name and contact information of each
21 women veterans program manager;

22 (2) a list of appropriate staff for other benefits
23 available from the Veterans Benefits Administration,
24 the National Cemetery Administration, and such
25 other entities as the Secretary considers appropriate;
26 and

1 other outfitting measures to support the provision of care
2 to women veterans at such facilities.

3 (b) ELEMENTS.—The report under subsection (a)
4 shall include the following:

5 (1) An assessment of how the Secretary
6 prioritizes retrofitting existing medical facilities to
7 support provision of care to women veterans in com-
8 parison to other requirements.

9 (2) A five-year plan for retrofitting medical fa-
10 cilities of the Department to support the provision of
11 care to women veterans.

12 **SEC. 105. ESTABLISHMENT OF ENVIRONMENT OF CARE**
13 **STANDARDS AND INSPECTIONS AT DEPART-**
14 **MENT OF VETERANS AFFAIRS MEDICAL CEN-**
15 **TERS.**

16 (a) IN GENERAL.—The Secretary of Veterans Affairs
17 shall establish a policy under which the environment of
18 care standards and inspections at medical centers of the
19 Department of Veterans Affairs include—

20 (1) an alignment of the requirements for such
21 standards and inspections with the women’s health
22 handbook of the Veterans Health Administration;

23 (2) a requirement for the frequency of such in-
24 spections;

1 (3) delineation of the roles and responsibilities
2 of staff at the medical center who are responsible for
3 compliance;

4 (4) the requirement that each medical center
5 submit to the Secretary and make publicly available
6 a report on the compliance of the medical center
7 with the standards; and

8 (5) a remediation plan.

9 (b) REPORT.—Not later than 180 days after the date
10 of the enactment of this Act, the Secretary shall submit
11 to the Committees on Veterans' Affairs of the Senate and
12 House of Representatives certification in writing that the
13 policy required by subsection (a) has been finalized and
14 disseminated to Department all medical centers.

15 **SEC. 106. ADDITIONAL FUNDING FOR PRIMARY CARE AND**
16 **EMERGENCY CARE CLINICIANS IN WOMEN**
17 **VETERANS HEALTH CARE MINI-RESIDENCY**
18 **PROGRAM.**

19 (a) IN GENERAL.—There is authorized to be appro-
20 priated to the Secretary of Veterans Affairs \$1,000,000
21 for each fiscal year for the Women Veterans Health Care
22 Mini-Residency Program of the Department of Veterans
23 Affairs to provide opportunities for participation in such
24 program for primary care and emergency care clinicians.

1 (b) TREATMENT OF AMOUNTS.—The amounts au-
2 thorized to be appropriated under subsection (a) shall be
3 in addition to amounts otherwise made available to the
4 Secretary for the purposes set forth in such subsection.

5 **SEC. 107. ESTABLISHMENT OF WOMEN VETERAN TRAINING**
6 **MODULE FOR NON-DEPARTMENT OF VET-**
7 **ERANS AFFAIRS HEALTH CARE PROVIDERS.**

8 (a) IN GENERAL.—Not later than one year after the
9 date of the enactment of this Act, the Secretary of Vet-
10 erans Affairs shall establish and make available to commu-
11 nity providers a training module that is specific to women
12 veterans.

13 (b) COMMUNITY PROVIDER DEFINED.—In this sec-
14 tion, the term “community provider” means a non-Depart-
15 ment of Veterans Affairs health care provider who pro-
16 vides health care to veterans under the laws administered
17 by the Secretary of Veterans Affairs.

18 **TITLE II—MEDICAL CARE**

19 **SEC. 201. IMPROVED ACCESS TO DEPARTMENT OF VET-**
20 **ERANS AFFAIRS MEDICAL CARE FOR WOMEN**
21 **VETERANS.**

22 (a) IN GENERAL.—Subchapter II of chapter 17 of
23 title 38, United States Code, is amended by adding at the
24 end the following new section:

1 **“§ 1720J. Medical services for women veterans**

2 “(a) ACCESS TO CARE.—The Secretary shall ensure
3 that women’s health primary care services are available
4 during regular business hours at every medical center and
5 community based outpatient clinic of the Department.

6 “(b) STUDY ON EXTENDED HOURS OF CARE.—The
7 Secretary shall conduct a study to assess—

8 “(1) the use of extended hours as a means of
9 reducing barriers to care;

10 “(2) the need for extended hours based on
11 interviews with women veterans and employees; and

12 “(3) the best practices and resources required
13 to implement use of extended hours.

14 “(c) ANNUAL REPORT TO CONGRESS.—Not later
15 than September 30 of each year, the Secretary shall sub-
16 mit to the Committee on Veterans’ Affairs of the Senate
17 and the Committee on Veterans’ Affairs of the House of
18 Representatives a report on compliance with subsection
19 (a).”.

20 (b) CLERICAL AMENDMENT.—The table of sections
21 at the beginning of such chapter is amended by inserting
22 after the item relating to section 1720I the following new
23 item:

“1720J. Medical services for women veterans.”.

1 **SEC. 202. COUNSELING AND TREATMENT FOR SEXUAL**
2 **TRAUMA.**

3 Section 1720D of title 38, United States Code, is
4 amended—

5 (1) in subsection (a)—

6 (A) in paragraph (1), by striking “active
7 duty, active duty for training, or inactive duty
8 training” and inserting “duty, regardless of
9 duty status or line of duty determination (as
10 that term is used in section 12323 of title 10”;
11 and

12 (B) in paragraph (2)(A), by striking “ac-
13 tive duty, active duty for training, or inactive
14 duty training” and inserting “duty, regardless
15 of duty status or line of duty determination (as
16 that term is used in section 12323 of title 10”;

17 (2) by striking “veteran” each place it appears
18 and inserting “former member of the Armed
19 Forces”;

20 (3) by striking “veterans” each place it appears
21 and inserting “former members of the Armed
22 Forces”; and

23 (4) by adding at the end the following new sub-
24 section:

25 “(g) In this section, the term ‘former member of the
26 Armed Forces’ includes the following:

1 “(1) A veteran described in section 101(2) of
2 this title.

3 “(2) An individual not described in paragraph
4 (1) who was discharged or released from the Armed
5 Forces under a condition that is not honorable but
6 not—

7 “(A) a dishonorable discharge; or

8 “(B) a discharge by court-martial.”.

9 **SEC. 203. COUNSELING IN RETREAT SETTINGS FOR WOMEN**
10 **VETERANS AND OTHER INDIVIDUALS.**

11 (a) IN GENERAL.—Chapter 17 of title 38, United
12 States Code, is amended by inserting after section 1712C
13 the following new section:

14 **“§ 1712D. Counseling in retreat settings for women**
15 **veterans and other individuals**

16 “(a) PROGRAM.—(1) Commencing not later than
17 January 1, 2021, the Secretary shall carry out, through
18 the Readjustment Counseling Service of the Veterans
19 Health Administration, a program to provide reintegration
20 and readjustment services described in subsection (b) in
21 group retreat settings to covered individuals, including co-
22 horts of women veterans who are eligible for readjustment
23 counseling services under section 1712A of this title.

1 “(2) The participation of a covered individual in the
2 program under paragraph (1) shall be at the election of
3 the individual.

4 “(b) COVERED SERVICES.—The services provided to
5 a covered individual under the program under subsection
6 (a)(1) shall include the following:

7 “(1) Information on reintegration into the fam-
8 ily, employment, and community of the individual.

9 “(2) Financial counseling.

10 “(3) Occupational counseling.

11 “(4) Information and counseling on stress re-
12 duction.

13 “(5) Information and counseling on conflict res-
14 olution.

15 “(6) Such other information and counseling as
16 the Secretary considers appropriate to assist the in-
17 dividual in reintegration into the family, employ-
18 ment, and community of the veteran.

19 “(c) BIENNIAL REPORTS.—Not later than December
20 31, 2022, and each even-numbered year thereafter, the
21 Secretary shall submit to the Committees on Veterans’ Af-
22 fairs of the House of Representatives and the Senate a
23 report on the program under subsection (a)(1).

24 “(d) COVERED INDIVIDUAL DEFINED.—In this sec-
25 tion, the term ‘covered individual’ means—

1 “(1) Any veteran who is enrolled in the system
2 of annual patient enrollment under section 1705 of
3 this title.

4 “(2) Any survivor or dependent of a veteran
5 who is eligible for medical care under section 1781
6 of this title.”.

7 (b) CLERICAL AMENDMENT.—The table of sections
8 at the beginning of such chapter is amended by inserting
9 after the item relating to section 1712C the following new
10 item:

 “1712D. Counseling in retreat settings for women veterans and other individ-
 uals.”.

11 **SEC. 204. IMPROVEMENT OF HEALTH CARE SERVICES PRO-**
12 **VIDED TO NEWBORN CHILDREN BY DEPART-**
13 **MENT OF VETERANS AFFAIRS.**

14 (a) EXPANSION.—Section 1786 of title 38, United
15 States Code, is amended—

16 (1) in subsection (a), in the matter preceding
17 paragraph (1), by striking “seven days” and insert-
18 ing “14 days”; and

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

21 “(f) ANNUAL REPORT.—Not later than 60 days after
22 the end of each fiscal year, the Secretary shall submit to
23 the Committee on Veterans’ Affairs of the Senate and the
24 Committee on Veterans’ Affairs of the House of Rep-

1 representatives a report on the health care services provided
2 under subsection (a) during such fiscal year, including the
3 number of newborn children who received such services
4 during such fiscal year.”.

5 (b) AUTHORITY TO FURNISH MEDICALLY NEC-
6 ESSARY TRANSPORTATION FOR NEWBORN CHILDREN OF
7 CERTAIN WOMEN VETERANS.—Such section is further
8 amended—

9 (1) in subsection (a)—

10 (A) in the matter before paragraph (1)—

11 (i) by inserting “and transportation
12 necessary to receive such services” after
13 “described in subsection (b)”;

14 (ii) by inserting “, except as provided
15 in subsection (e),” after “14 days”;

16 (B) in paragraph (1), by striking “or”;

17 (C) in paragraph (2), by striking the pe-
18 riod at the end and inserting “; or”;

19 (D) by adding at the end the following new
20 paragraph:

21 “(3) another location, including a health care
22 facility, if the veteran delivers the child before arriv-
23 ing at a facility described in paragraph (1) or (2).”;

24 (2) in subsection (b), by inserting before the pe-
25 riod at the end the following: “, including necessary

1 health care services provided by a facility other than
2 the facility where the newborn child was delivered
3 (including a specialty pediatric hospital) that accepts
4 transfer of the newborn child and responsibility for
5 treatment of the newborn child”; and

6 (3) by inserting before subsection (f), as added
7 by subsection (a), the following new subsections:

8 “(c) TRANSPORTATION.—(1) Transportation fur-
9 nished under subsection (a) to, from, or between care set-
10 tings to meet the needs of a newborn child includes costs
11 for either or both the newborn child and parents.

12 “(2) Transportation furnished under subsection (a)
13 is transportation by ambulance, including air ambulance,
14 or other appropriate medically staffed modes of transpor-
15 tation—

16 “(A) to another health care facility (including a
17 specialty pediatric hospital) that accepts transfer of
18 the newborn child or otherwise provides post-delivery
19 care services when the treating facility is not capable
20 of furnishing the care or services required; or

21 “(B) to a health care facility in a medical emer-
22 gency of such nature that a prudent layperson rea-
23 sonably expects that delay in seeking immediate
24 medical attention would be hazardous to life or
25 health.

1 “(3) Amounts paid by the Department for transpor-
2 tation under this section shall be derived from the Medical
3 Services appropriations account of the Department.

4 “(d) REIMBURSEMENT OR PAYMENT FOR HEALTH
5 CARE SERVICES OR TRANSPORTATION.—(1) Pursuant to
6 regulations the Secretary shall prescribe to establish rates
7 of reimbursement and any limitations thereto under this
8 section, the Secretary shall directly reimburse a covered
9 entity for health care services or transportation services
10 provided under this section, unless the cost of the services
11 or transportation is covered by an established agreement
12 or contract. If such an agreement or contract exists, its
13 negotiated payment terms shall apply.

14 “(2)(A) Reimbursement or payment by the Secretary
15 under this section on behalf of an individual to a covered
16 entity shall, unless rejected and refunded by the covered
17 entity within 30 days of receipt, extinguish any liability
18 on the part of the individual for the health care services
19 or transportation covered by such payment.

20 “(B) Neither the absence of a contract or agreement
21 between the Secretary and a covered entity nor any provi-
22 sion of a contract, agreement, or assignment to the con-
23 trary shall operate to modify, limit, or negate the require-
24 ments of subparagraph (A).

1 “(3) In this subsection, the term ‘covered entity’
2 means any individual, transportation carrier, organization,
3 or other entity that furnished or paid for health care serv-
4 ices or transportation under this section.

5 “(e) EXCEPTION.—Pursuant to such regulations as
6 the Secretary shall prescribe to carry out this section, the
7 Secretary may furnish more than 14 days of health care
8 services described in subsection (b), and transportation
9 necessary to receive such services, to a newborn child
10 based on medical necessity if the child is in need of addi-
11 tional care, including a case in which the newborn child
12 has been discharged or released from a hospital and re-
13 quires readmittance to ensure the health and welfare of
14 the newborn child.”.

15 (c) TREATMENT OF CERTAIN EXPENSES ALREADY
16 INCURRED.—Pursuant to such regulations as the Sec-
17 retary of Veterans Affairs shall prescribe, the Secretary
18 may provide reimbursement under section 1786 of title 38,
19 United States Code, as amended by subsection (a), health
20 care services or transportation services furnished to a new-
21 born child during the period beginning on May 5, 2010,
22 and ending on the date of the enactment of this Act, if
23 the Secretary determines that, under the circumstances
24 applicable with respect to the newborn, such reimburse-
25 ment appropriate.

1 **TITLE III—REPORTS AND OTHER**
2 **MATTERS**

3 **Subtitle A—Reports**

4 **SEC. 301. ASSESSMENT OF EFFECTS OF INTIMATE PART-**
5 **NER VIOLENCE ON WOMEN VETERANS BY AD-**
6 **VISORY COMMITTEE ON WOMEN VETERANS.**

7 Section 542(c)(1) of title 38, United States Code, is
8 amended—

9 (1) in subparagraph (B), by striking “and” at
10 the end;

11 (2) by redesignating subparagraph (C) as sub-
12 paragraph (D); and

13 (3) by inserting after subparagraph (B) the fol-
14 lowing new subparagraph (C):

15 “(C) an assessment of the effects of inti-
16 mate partner violence on women veterans; and”.

17 **SEC. 302. STUDY ON STAFFING OF WOMEN VETERAN PRO-**
18 **GRAM MANAGER PROGRAM AT MEDICAL**
19 **CENTERS OF THE DEPARTMENT OF VET-**
20 **ERANS AFFAIRS AND TRAINING OF STAFF.**

21 (a) STUDY.—The Secretary of Veterans Affairs shall
22 conduct a study on the use of the Women Veteran Pro-
23 gram Manager program of the Department of Veterans
24 Affairs to determine—

1 (1) if the program is appropriately staffed at
2 each medical center of the Department;

3 (2) whether each medical center of the Depart-
4 ment is staffed with a Women Veteran Program
5 Manager; and

6 (3) whether it would be feasible and advisable
7 to have a Women Veteran Program Ombudsman at
8 each medical center of the Department.

9 (b) REPORT.—Not later than 270 days after the date
10 of the enactment of this Act, the Secretary shall submit
11 to the Committee on Veterans' Affairs of the Senate and
12 the Committee on Veterans' Affairs of the House of Rep-
13 resentatives a report on the study conducted under sub-
14 section (a).

15 (c) TRAINING.—The Secretary shall ensure that all
16 Women Veteran Program Managers and Women Veteran
17 Program Ombudsmen receive the proper training to carry
18 out their duties.

19 **SEC. 303. REPORT ON AVAILABILITY OF PROSTHETIC**
20 **ITEMS FOR WOMEN VETERANS FROM THE**
21 **DEPARTMENT OF VETERANS AFFAIRS.**

22 Not later than one year after the date of the enact-
23 ment of this Act, the Secretary of Veterans Affairs shall
24 submit to the Committee on Veterans' Affairs of the Sen-
25 ate and the Committee on Veterans' Affairs of the House

1 of Representatives a report on the availability from the
2 Department of Veterans Affairs of prosthetic items made
3 for women veterans, including an assessment of the avail-
4 ability of such prosthetic items at each medical facility of
5 the Department. The report shall—

6 (1) address efforts on research, development,
7 and employment of additive manufacture technology
8 (commonly referred to as “3D printing”) to provide
9 prosthetic items for women veterans; and

10 (2) include a survey with a representative sam-
11 ple of 50,000 veterans (of which women shall be
12 overrepresented) in amputee care program on satis-
13 faction with prosthetics furnished or procured by the
14 Department that replace appendages or their func-
15 tion.

16 **SEC. 304. STUDY OF BARRIERS FOR WOMEN VETERANS TO**
17 **HEALTH CARE FROM THE DEPARTMENT OF**
18 **VETERANS AFFAIRS.**

19 (a) **STUDY REQUIRED.**—The Secretary of Veterans
20 Affairs shall conduct a comprehensive study of the bar-
21 riers to the provision of comprehensive health care by the
22 Department of Veterans Affairs encountered by women
23 who are veterans. In conducting the study, the Secretary
24 shall—

1 (1) survey women veterans who seek or receive
2 hospital care or medical services provided by the De-
3 partment of Veterans Affairs as well as women vet-
4 erans who do not seek or receive such care or serv-
5 ices;

6 (2) administer the survey to a representative
7 sample of women veterans from each Veterans Inte-
8 grated Service Network; and

9 (3) ensure that the sample of women veterans
10 surveyed is of sufficient size for the study results to
11 be statistically significant and is a larger sample
12 than that of the study referred to in subsection
13 (b)(1).

14 (b) USE OF PREVIOUS STUDIES.—In conducting the
15 study required by subsection (a), the Secretary shall build
16 on the work of the studies of the Department of Veterans
17 Affairs titled—

18 (1) “National Survey of Women Veterans in
19 Fiscal Year 2007–2008”; and

20 (2) “Study of Barriers for Women Veterans to
21 VA Health Care 2015”.

22 (c) ELEMENTS OF STUDY.—In conducting the study
23 required by subsection (a), the Secretary shall conduct re-
24 search on the effects of the following on the women vet-
25 erans surveyed in the study:

1 (1) The barriers associated with seeking mental
2 health care services, including with respect to pro-
3 vider availability, telehealth access, and family,
4 work, and school obligations.

5 (2) The effect of driving distance or availability
6 of other forms of transportation to the nearest med-
7 ical facility on access to care.

8 (3) The effect of access to care in the commu-
9 nity.

10 (4) The availability of child care.

11 (5) The acceptability of integrated primary
12 care, women's health clinics, or both.

13 (6) The comprehension of eligibility require-
14 ments for, and the scope of services available under,
15 hospital care and medical services.

16 (7) The perception of personal safety and com-
17 fort in inpatient, outpatient, and behavioral health
18 facilities.

19 (8) The gender sensitivity of health care pro-
20 viders and staff to issues that particularly affect
21 women.

22 (9) The effectiveness of outreach for health care
23 services available to women veterans.

1 (10) The location and operating hours of health
2 care facilities that provide services to women vet-
3 erans.

4 (11) The perception of women veterans regard-
5 ing the motto of the Department of Veterans Af-
6 fairs.

7 (12) Such other significant barriers as the Sec-
8 retary considers appropriate.

9 (d) DISCHARGE BY CONTRACT.—The Secretary shall
10 enter into a contract with a qualified independent entity
11 or organization to carry out the study and research re-
12 quired under this section.

13 (e) MANDATORY REVIEW OF DATA BY CERTAIN DE-
14 PARTMENT DIVISIONS.—

15 (1) IN GENERAL.—The Secretary shall ensure
16 that the head of each division of the Department of
17 Veterans Affairs specified in paragraph (2) reviews
18 the results of the study conducted under this sec-
19 tion. The head of each such division shall submit
20 findings with respect to the study to the Under Sec-
21 retary for responsibilities relating to health care
22 services for women veterans.

23 (2) SPECIFIED DIVISIONS.—The divisions of the
24 Department of Veterans Affairs specified in this
25 paragraph are the following:

1 (A) The Under Secretary for Health.

2 (B) The Office of Women's Health.

3 (C) The Center for Women Veterans estab-
4 lished under section 318 of title 38, United
5 States Code.

6 (D) The Advisory Committee on Women
7 Veterans established under section 542 of such
8 title.

9 (f) REPORT.—Not later than 30 months after the
10 date of the enactment of this Act, the Secretary shall sub-
11 mit to Congress a report on the study required under this
12 section. The report shall include recommendations for
13 such administrative and legislative action as the Secretary
14 considers appropriate. The report shall also include the
15 findings of the head of each division of the Department
16 specified under subsection (e)(2) and of the Under Sec-
17 retary for Health.

18 **SEC. 305. REPORT REGARDING VETERANS WHO RECEIVE**
19 **BENEFITS UNDER LAWS ADMINISTERED BY**
20 **THE SECRETARY OF VETERANS AFFAIRS.**

21 (a) REPORT.—Not later than 180 days after the date
22 of the enactment of this Act, the Secretary of Veterans
23 Affairs shall publish a report regarding veterans who re-
24 ceive benefits under laws administered by the Secretary,

1 including the Transition Assistance Program under sec-
2 tions 1142 and 1144 of title 10, United States Code.

3 (b) DATA.—The data regarding veterans published in
4 the report under subsection (a)—

5 (1) shall be disaggregated by—

6 (A) sex;

7 (B) minority group member status; and

8 (C) minority group member status listed
9 by sex.

10 (2) may not include any personally identifiable
11 information.

12 (c) MATTERS INCLUDED.—The report under sub-
13 section (a) shall include—

14 (1) identification of any disparities in the use of
15 benefits under laws administered by the Secretary;
16 and

17 (2) an analysis of the cause of such disparities
18 and recommendations to address such disparities.

19 (d) MINORITY GROUP MEMBER DEFINED.—In this
20 section, the term “minority group member” has the mean-
21 ing given that term in section 544 of title 38, United
22 States Code.

1 **SEC. 306. STUDY ON WOMEN VETERAN COORDINATOR PRO-**
2 **GRAM.**

3 Not later than 180 days after the date of the enact-
4 ment of this Act, the Secretary of Veterans Affairs shall
5 submit to the Committees on Veterans' Affairs of the
6 House of Representatives and the Senate a report con-
7 taining a study on the Women Veteran Coordinator pro-
8 gram of the Veterans Benefits Administration of the De-
9 partment of Veterans Affairs. Such study shall identify
10 the following:

11 (1) If the program is appropriately staffed at
12 each regional benefits office of the Department.

13 (2) Whether each regional benefits office of the
14 Department is staffed with a Women Veteran Coor-
15 dinator.

16 (3) The position description of the Women Vet-
17 eran Coordinator.

18 (4) Whether an individual serving in the
19 Women Veteran Coordinator position concurrently
20 serves in any other position, and if so, the allocation
21 of time the individual spends in each such position.

22 (5) A description of the metrics the Secretary
23 uses to determine the success and performance of
24 the Women Veteran Coordinator.

1 **Subtitle B—Other Matters**

2 **SEC. 321. ANTI-HARASSMENT AND ANTI-SEXUAL ASSAULT**

3 **POLICY OF THE DEPARTMENT OF VETERANS**

4 **AFFAIRS.**

5 (a) IN GENERAL.—Subchapter II of chapter 5 of title
6 38, United States Code, is amended by adding at the end
7 the following new section:

8 **“§ 533. Anti-harassment and anti-sexual assault pol-**
9 **icy**

10 “(a) ESTABLISHMENT.—The Secretary of Veterans
11 Affairs shall establish a comprehensive policy to end har-
12 assment and sexual assault, including sexual harassment
13 and gender-based harassment, throughout the Depart-
14 ment of Veterans Affairs. This policy shall include the fol-
15 lowing:

16 “(1) A process for employees and contractors of
17 the Department to respond to reported incidents of
18 harassment and sexual assault committed by any
19 non-Department individual within a facility of the
20 Department, including with respect to accountability
21 or disciplinary measures.

22 “(2) A process for employees and contractors of
23 the Department to respond to reported incidents of
24 harassment and sexual assault of any non-Depart-
25 ment individual within a facility of the Department.

1 “(3) A process for any non-Department indi-
2 vidual to report harassment and sexual assault de-
3 scribed in paragraph (1), including an option for
4 confidential reporting, and for the Secretary to re-
5 spond to and address such reports.

6 “(4) Clear mechanisms for non-Department in-
7 dividuals to readily identify to whom and how to re-
8 port incidents of harassment and sexual assault
9 committed by another non-Department individual.

10 “(5) Clear mechanisms for employees and con-
11 tractors of the Department to readily identify to
12 whom and how to report incidents of harassment
13 and sexual assault and how to refer non-Department
14 individuals with respect to reporting an incident of
15 harassment or sexual assault.

16 “(6) A process for, and mandatory reporting re-
17 quirement applicable to, any employee or contractor
18 of the Department who witnesses harassment or sex-
19 ual assault described in paragraph (1) or (2) within
20 a facility of the Department, regardless of whether
21 the individual affected by such harassment or sexual
22 assault wants to report such harassment or sexual
23 assault.

24 “(7) The actions possible, including disciplinary
25 actions, for employees or contractors of the Depart-

1 ment who fail to report incidents of harassment and
2 sexual assault described in paragraph (1) or (2) that
3 the employees or contractors witness.

4 “(8) On an annual or more frequent basis,
5 mandatory training for employees and contractors of
6 the Department regarding how to report and ad-
7 dress harassment and sexual assault described in
8 paragraphs (1) and (2), including bystander inter-
9 vention training.

10 “(9) On an annual or more frequent basis, the
11 distribution of the policy under this subsection and
12 anti-harassment and anti-sexual assault educational
13 materials by mail or email to each individual receiv-
14 ing a benefit under a law administered by the Sec-
15 retary.

16 “(10) The prominent display of anti-harass-
17 ment and anti-sexual assault messages in each facil-
18 ity of the Department, including how non-Depart-
19 ment individuals may report harassment and sexual
20 assault described in paragraphs (1) and (2) at such
21 facility and the points of contact under subsection
22 (b).

23 “(11) The posting on internet websites of the
24 Department, including the main internet website re-
25 garding benefits of the Department and the main

1 internet website regarding health care of the Depart-
2 ment, of anti-harassment and anti-sexual assault
3 banners specifically addressing harassment and sex-
4 ual assault described in paragraphs (1) and (2).

5 “(b) POINTS OF CONTACT.—The Secretary shall des-
6 ignate, as a point of contact to receive reports of harass-
7 ment and sexual assault described in paragraphs (1) and
8 (2) of subsection (a)—

9 “(1) at least one individual, in addition to law
10 enforcement, at each facility of the Department (in-
11 cluding Vet Centers under section 1712A of this
12 title), with regard to that facility;

13 “(2) at least one individual employed in each
14 Veterans Integrated Service Network, with regards
15 to facilities in that Veterans Integrated Service Net-
16 work;

17 “(3) at least one individual employed in each
18 regional benefits office;

19 “(4) at least one individual employed at each lo-
20 cation of the National Cemetery Administration; and

21 “(5) at least one individual employed at the
22 Central Office of the Department to track reports of
23 such harassment and sexual assault across the De-
24 partment, disaggregated by facility.

1 “(c) ACCOUNTABILITY.—The Secretary shall estab-
2 lish a policy to ensure that each facility of the Department
3 and each director of a Veterans Integrated Service Net-
4 work is responsible for addressing harassment and sexual
5 assault at the facility and the Network. Such policy shall
6 include—

7 “(1) a remediation plan for facilities that expe-
8 rience five or more incidents of sexual harassment,
9 sexual assault, or combination thereof, during any
10 single fiscal year; and

11 “(2) taking appropriate actions under chapter 7
12 or subchapter V of chapter 74 of this title.

13 “(d) DATA.—The Secretary shall ensure that the in-
14 take process for veterans at medical facilities of the De-
15 partment includes a survey to collect the following infor-
16 mation:

17 “(1) Whether the veteran feels safe at the facil-
18 ity and whether any events occurred at the facility
19 that affect such feeling.

20 “(2) Whether the veteran wants to be contacted
21 later by the Department with respect to such safety
22 issues.

23 “(e) WORKING GROUP.—(1) The Secretary shall es-
24 tablish a working group to assist the Secretary in imple-
25 menting policies to carry out this section.

1 “(2) The working group established under paragraph
2 (1) shall consist of representatives from—

3 “(A) veterans service organizations;

4 “(B) State, local, and Tribal veterans agencies;

5 and

6 “(C) other persons the Secretary determines
7 appropriate.

8 “(3) The working group established under paragraph
9 (1) shall develop, and the Secretary shall carry out—

10 “(A) an action plan for addressing changes at
11 the local level to reduce instances of harassment and
12 sexual assault;

13 “(B) standardized media for veterans service
14 organizations and other persons to use in print and
15 on the internet with respect to reducing harassment
16 and sexual assault; and

17 “(C) bystander intervention training for vet-
18 erans.

19 “(f) REPORTS.—The Secretary shall submit to the
20 Committees on Veterans’ Affairs of the Senate and the
21 House of Representatives an annual report on harassment
22 and sexual assault described in paragraphs (1) and (2)
23 of subsection (a) in facilities of the Department. Each
24 such report shall include the following:

1 “(1) Results of harassment and sexual assault
2 programming, including the End Harassment pro-
3 gram.

4 “(2) Results of studies from the Women’s
5 Health Practice-Based Research Network of the De-
6 partment relating to harassment and sexual assault.

7 “(3) Data collected on incidents of sexual har-
8 assment and sexual assault.

9 “(4) A description of any actions taken by the
10 Secretary during the year preceding the date of the
11 report to stop harassment and sexual assault at fa-
12 cilities of the Department.

13 “(5) An assessment of the implementation of
14 the training required in subsection (a)(7).

15 “(6) A list of resources the Secretary deter-
16 mines necessary to prevent harassment and sexual
17 assault at facilities of the Department.

18 “(g) DEFINITIONS.—In this section:

19 “(1) The term ‘non-Department individual’
20 means any individual present at a facility of the De-
21 partment who is not an employee or contractor of
22 the Department.

23 “(2) The term ‘sexual harassment’ has the
24 meaning given that term in section 1720D of this
25 title.”.

1 (b) CLERICAL AMENDMENT.—The table of sections
2 at the beginning of such chapter is amended by adding
3 after the item relating to section 532 the following new
4 item:

“533. Anti-harassment and anti-sexual assault policy.”.

5 (c) DEFINITION OF SEXUAL HARASSMENT.—Section
6 1720D(f) of such title is amended by striking “repeated,”.

7 (d) DEADLINE.—The Secretary shall commence car-
8 rying out section 533 of such title, as added by subsection
9 (a), not later than 180 days after the date of enactment
10 of this Act.

11 **SEC. 322. SUPPORT FOR ORGANIZATIONS THAT HAVE A**
12 **FOCUS ON PROVIDING ASSISTANCE TO**
13 **WOMEN VETERANS AND THEIR FAMILIES.**

14 Section 2044(e) of title 38, United States Code, is
15 amended by adding at the end the following new para-
16 graph:

17 “(4) There is authorized to be appropriated
18 \$20,000,000 for fiscal year 2020 to provide, under
19 subsection (a), financial assistance to organizations
20 that have a focus on providing assistance to women
21 veterans and their families.”.

1 **SEC. 323. GAP ANALYSIS OF DEPARTMENT OF VETERANS**
2 **AFFAIRS PROGRAMS THAT PROVIDE ASSIST-**
3 **ANCE TO WOMEN VETERANS WHO ARE HOME-**
4 **LESS.**

5 (a) IN GENERAL.—The Secretary of Veterans Affairs
6 shall complete an analysis of programs of the Department
7 of Veterans Affairs that provide assistance to women vet-
8 erans who are homeless or precariously housed to identify
9 the areas in which such programs are failing to meet the
10 needs of such women.

11 (b) REPORT.—Not later than 270 days after the date
12 of the enactment of this Act, the Secretary shall submit
13 to the Committee on Veterans' Affairs of the Senate and
14 the Committee on Veterans' Affairs of the House of Rep-
15 resentatives a report on the analysis completed under sub-
16 section (a).

17 **SEC. 324. DEPARTMENT OF VETERANS AFFAIRS PUBLIC-**
18 **PRIVATE PARTNERSHIP ON LEGAL SERVICES**
19 **FOR WOMEN VETERANS.**

20 (a) PARTNERSHIP REQUIRED.—The Secretary of
21 Veterans Affairs shall establish a partnership with at least
22 one nongovernmental organization to provide legal services
23 to women veterans.

24 (b) FOCUS.—The focus of the partnership established
25 under subsection (a) shall be on the 10 highest unmet
26 needs of women veterans as set forth in the most recently

1 completed Community Homelessness Assessment, Local
2 Education and Networking Groups for Veterans
3 (CHALENG for Veterans) survey.

4 **SEC. 325. PROGRAM TO ASSIST VETERANS WHO EXPERI-**
5 **ENCE INTIMATE PARTNER VIOLENCE OR SEX-**
6 **UAL ASSAULT.**

7 (a) PROGRAM REQUIRED.—The Secretary of Vet-
8 erans Affairs shall carry out a program to assist former
9 members of the armed forces who have experienced or are
10 experiencing intimate partner violence or sexual assault in
11 accessing benefits from the Department of Veterans Af-
12 fairs, including coordinating access to medical treatment
13 centers, housing assistance, and other benefits from the
14 Department.

15 (b) COLLABORATION.—The Secretary shall carry out
16 the program under subsection (a) in collaboration with—

17 (1) intimate partner violence shelters and pro-
18 grams;

19 (2) rape crisis centers;

20 (3) State intimate partner violence and sexual
21 assault coalitions; and

22 (4) such other health care or other service pro-
23 viders that serve intimate partner violence or sexual
24 assault victims as determined by the Secretary, par-

1 particularly those providing emergency services or hous-
2 ing assistance.

3 (c) AUTHORIZED ACTIVITIES.—In carrying out the
4 program under subsection (a), the Secretary may conduct
5 the following activities:

6 (1) Training for community-based intimate
7 partner violence or sexual assault service providers
8 on—

9 (A) identifying former members of the
10 Armed Forces who have been victims of inti-
11 mate partner violence or sexual assault;

12 (B) coordinating with local service pro-
13 viders of the Department; and

14 (C) connecting former members of the
15 Armed Forces with appropriate housing, mental
16 health, medical, and other financial assistance
17 or benefits from the Department.

18 (2) Assistance to service providers to ensure ac-
19 cess of veterans to intimate partner violence and
20 sexual assault emergency services, particularly in un-
21 derserved areas, including services for Native Amer-
22 ican veterans (as defined in section 3765 of title 38,
23 United States Code).

1 (3) Such other outreach and assistance as the
2 Secretary determines necessary for the provision of
3 assistance under subsection (a).

4 (d) INTIMATE PARTNER VIOLENCE AND SEXUAL AS-
5 SAULT OUTREACH COORDINATORS.—

6 (1) IN GENERAL.—In order to effectively assist
7 veterans who have experienced intimate partner vio-
8 lence or sexual assault, the Secretary may establish
9 local coordinators to provide outreach under the pro-
10 gram required by subsection (a).

11 (2) LOCAL COORDINATOR KNOWLEDGE.—The
12 Secretary shall ensure that each coordinator estab-
13 lished under paragraph (1) is knowledgeable about—

14 (A) the dynamics of intimate partner vio-
15 lence and sexual assault, including safety con-
16 cerns, legal protections, and the need for the
17 provision of confidential services;

18 (B) the eligibility of veterans for services
19 and benefits from the Department that are rel-
20 evant to recovery from intimate partner violence
21 and sexual assault, particularly emergency
22 housing assistance, mental health care, other
23 health care, and disability benefits; and

24 (C) local community resources addressing
25 intimate partner violence and sexual assault.

1 (3) LOCAL COORDINATOR ASSISTANCE.—Each
2 coordinator established under paragraph (1) shall
3 assist intimate partner violence shelters and rape
4 crisis centers in providing services to veterans.

5 **SEC. 326. STUDY AND TASK FORCE ON VETERANS EXPERI-**
6 **ENCING INTIMATE PARTNER VIOLENCE OR**
7 **SEXUAL ASSAULT.**

8 (a) NATIONAL BASELINE STUDY.—

9 (1) IN GENERAL.—Not later than one year
10 after the date of the enactment of this Act, the Sec-
11 retary of Veterans Affairs, in consultation with the
12 Attorney General, shall conduct a national baseline
13 study to examine the scope of the problem of inti-
14 mate partner violence and sexual assault among vet-
15 erans and spouses and intimate partners of veterans.

16 (2) MATTERS INCLUDED.—The study under
17 paragraph (1) shall—

18 (A) include a literature review of all rel-
19 evant research on intimate partner violence and
20 sexual assault among veterans and spouses and
21 intimate partners of veterans;

22 (B) examine the prevalence of the experi-
23 ence of intimate partner violence among—

24 (i) women veterans;

1 (ii) veterans who are minority group
2 members (as defined in section 544 of title
3 38, United States Code, and including
4 other minority populations as the Sec-
5 retary determines appropriate);

6 (iii) urban and rural veterans;

7 (iv) veterans who are enrolled in a
8 program under section 1720G of title 38,
9 United States Code;

10 (v) veterans who are in intimate rela-
11 tionships with other veterans; and

12 (vi) veterans who are described in
13 more than one clause of this subparagraph;

14 (C) examine the prevalence of the per-
15 petration of intimate partner violence by vet-
16 erans; and

17 (D) include recommendations to address
18 the findings of the study.

19 (3) REPORT.—Not later than 30 days after the
20 date on which the Secretary completes the study
21 under paragraph (1), the Secretary shall submit to
22 the Committees on Veterans' Affairs of the House of
23 Representatives and the Senate a report on such
24 study.

1 (b) TASK FORCE.—Not later than 90 days after the
2 date on which the Secretary completes the study under
3 subsection (a), the Secretary, in consultation with the At-
4 torney General and the Secretary of Health and Human
5 Services, shall establish a national task force (in this sec-
6 tion referred to as the “Task Force”) to develop a com-
7 prehensive national program, including by integrating fa-
8 cilities, services, and benefits of the Department of Vet-
9 erans Affairs into existing networks of community-based
10 intimate partner violence and sexual assault services, to
11 address intimate partner violence and sexual assault
12 among veterans.

13 (c) CONSULTATION WITH STAKEHOLDERS.—In car-
14 rying out this section, the Task Force shall consult with—

15 (1) representatives from veteran service organi-
16 zations and military service organizations;

17 (2) representatives from not fewer than three
18 national organizations or State coalitions with dem-
19 onstrated expertise in intimate partner violence pre-
20 vention, response, or advocacy; and

21 (3) representatives from not fewer than three
22 national organizations or State coalitions, particu-
23 larly those representing underserved and ethnic mi-
24 nority communities, with demonstrated expertise in
25 sexual assault prevention, response, or advocacy.

1 (d) DUTIES.—The duties of the Task Force shall in-
2 clude the following:

3 (1) To review existing services and policies of
4 the Department and develop a comprehensive na-
5 tional program to address intimate partner violence
6 and sexual assault prevention, response, and treat-
7 ment.

8 (2) To review the feasibility and advisability of
9 establishing an expedited process to secure emer-
10 gency, temporary benefits, including housing or
11 other benefits, for veterans who are experiencing in-
12 timate partner violence or sexual assault.

13 (3) To review and make recommendations re-
14 garding the feasibility and advisability of estab-
15 lishing dedicated, temporary housing assistance for
16 veterans experiencing intimate partner violence or
17 sexual assault.

18 (4) To identify any requirements regarding inti-
19 mate partner violence assistance or sexual assault
20 response and services that are not being met by the
21 Department and make recommendations on how the
22 Department can meet such requirements.

23 (5) To review and make recommendations re-
24 garding the feasibility and advisability of providing
25 direct services or contracting for community-based

1 services for veterans in response to a sexual assault,
2 including through the use of sexual assault nurse ex-
3 aminers, particularly in underserved or remote
4 areas, including services for Native American vet-
5 erans.

6 (6) To review the availability of counseling serv-
7 ices provided by the Department and through peer
8 network support, and to provide recommendations
9 for the enhancement of such services, to address—

10 (A) the perpetration of intimate partner vi-
11 olence and sexual assault; and

12 (B) the recovery of veterans, particularly
13 women veterans, from intimate partner violence
14 and sexual assault.

15 (7) To review and make recommendations to
16 expand services available for veterans at risk of per-
17 petrating intimate partner violence.

18 (e) REPORT.—Not later than one year after the date
19 of the enactment of this Act, and not less frequently than
20 annually thereafter by October 1 of each year, the Task
21 Force shall submit to the Secretary of Veterans Affairs
22 and Congress a report on the activities of the Task Force,
23 including any recommendations for legislative or adminis-
24 trative action.

25 (f) DEFINITIONS.—In this section:

1 (1) The term “Native American veteran” has
2 the meaning given that term in section 3765 of title
3 38, United States Code.

4 (2) The term “State” has the meaning given
5 that term in section 101 of title 38, United States
6 Code.