

[Committee Print]

Reflecting the actions of the Subcommittee on Health on April
16, 2026

119TH CONGRESS
2^D SESSION

H. R. 6444

To direct the Secretary of Veterans Affairs to establish a Blast Overpressure
Task Force.

IN THE HOUSE OF REPRESENTATIVES

A BILL

To direct the Secretary of Veterans Affairs to establish a
Blast Overpressure Task Force.

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

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Blast Overpressure
5 Research and Mitigation Task Force Act”.

1 **SEC. 2. ESTABLISHMENT OF THE BLAST OVERPRESSURE**
2 **TASK FORCE OF THE DEPARTMENT OF VET-**
3 **ERANS AFFAIRS.**

4 (a) ESTABLISHMENT.—Not later than 180 days after
5 the date of the enactment of this Act, the Secretary of
6 Veterans Affairs shall appoint, through the Department
7 of Veterans Affairs-Department of Defense Joint Execu-
8 tive Committee under section 320 of title 38, United
9 States Code, the Blast Overpressure Task Force of the
10 Department of Veterans Affairs (in this section referred
11 to as the “Task Force”).

12 (b) MEMBERSHIP.—Each member of the Task Force
13 appointed under subsection (a) shall be a member of the
14 Health Executive Committee under subsection (b)(2) of
15 such section who, at the time of appointment, is involved
16 in research regarding the mitigation and treatment of
17 blast overpressure or blast exposure.

18 (c) DUTIES.—The duties of the Task Force are the
19 following:

20 (1) To improve how the Secretary of Veterans
21 Affairs, in consultation with the Secretary of De-
22 fense, provides health care and other benefits to vet-
23 erans or members of the Armed Forces diagnosed
24 with traumatic brain injury, post-traumatic stress
25 disorder, or other symptoms, from blast overpressure
26 or blast exposure.

1 (2) To align research agendas and acquisition
2 strategies of the Department regarding such health
3 care.

4 (3) To establish physiological and cognitive per-
5 formance baselines for such veterans and members.

6 (4) To prioritize translational research regard-
7 ing such veterans and members, including research
8 regarding—

9 (A) sleep therapy;

10 (B) blast-related gut health;

11 (C) mobile diagnostics;

12 (D) vestibular dysfunction and balance im-
13 pairment;

14 (E) autonomic nervous system
15 dysregulation;

16 (F) cumulative mild traumatic brain in-
17 jury;

18 (G) neuroinflammation and glial activation;

19 and

20 (H) any other issue determined appro-
21 priate by the Secretary.

22 (5) To monitor sensory decline (including with
23 regards to vision, hearing, and vestibular function)
24 and stress-related impairments among such veterans
25 and members.

1 (6) To support continuity of such care by inte-
2 grating mobile and longitudinal diagnostic tools.

3 (d) REPORTS.—The Task Force shall issue annual
4 reports to the Committees on Veterans' Affairs and on
5 Armed Services of the Senate and House of Representa-
6 tives. Each such report shall include the following ele-
7 ments:

8 (1) Details of research initiatives, coordination
9 outcomes, and clinical advancements of the Task
10 Force.

11 (2) Recommendations of the Task Force re-
12 garding—

13 (A) how claims processors of the Depart-
14 ment of Veterans Affairs should evaluate evi-
15 dence that links such conditions to active mili-
16 tary, naval, air, or space service; and

17 (B) best practices regarding the evaluation
18 of neurological injuries in examinations for ben-
19 efits under chapters 11 or 15 of title 38, United
20 States Code.

21 (e) SUNSET.—The Task Force shall terminate on
22 September 30, 2029.