

[Subcommittee Print]

(Reflecting the actions of the Subcommittee on Health of the
Committee on Veterans' Affairs on April 16, 2026)

119TH CONGRESS
2^D SESSION

H. R. 6993

To direct the Secretary of Veterans Affairs to carry out programs to award grants to eligible entities to conduct research with respect to treatments for traumatic brain injury prospective randomized control trials for neurorehabilitation treatments, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

A BILL

To direct the Secretary of Veterans Affairs to carry out programs to award grants to eligible entities to conduct research with respect to treatments for traumatic brain injury prospective randomized control trials for neurorehabilitation treatments, and for other purposes.

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

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Veterans TBI Break-
3 through Exploration of Adaptive Care Opportunities Na-
4 tionwide Act of 2026” or the “BEACON Act of 2026”.

5 **SEC. 2. DEPARTMENT OF VETERANS AFFAIRS GRANT PRO-**
6 **GRAM FOR SUPPLEMENTAL**
7 **NEUROREHABILITATION APPROACHES TO**
8 **CHRONIC MILD TBI TREATMENT.**

9 (a) GRANT PROGRAM.—

10 (1) IN GENERAL.—The Secretary of Veterans
11 Affairs shall carry out a three-year program (to be
12 known as the “TBI Innovation Grant Program”)
13 under which the Secretary shall award grants to eli-
14 gible entities described in subsection (b) for the de-
15 velopment, implementation, and evaluation of ap-
16 proaches and methodologies for prospective random-
17 ized control trials for neurorehabilitation treatments
18 for the treatment of chronic mild traumatic brain in-
19 jury (in this Act referred to as “mTBI”) in vet-
20 erans.

21 (2) RELATIONSHIP TO OTHER DEPARTMENT AC-
22 TIVITIES.—The grant program required under para-
23 graph (1) shall be carried out in a manner that—

24 (A) supplements, and does not supplant,
25 other clinical care and research of the Depart-
26 ment of Veterans Affairs relating to mTBI; and

1 (B) facilitates, as practicable, coordination
2 with Veterans Health Administration facilities
3 for referral, continuity of care, and dissemina-
4 tion of findings.

5 (b) ELIGIBLE ENTITIES DESCRIBED.—An eligible
6 entity described in this subsection is any of the following:

7 (1) A nonprofit organization with demonstrated
8 capability to conduct clinical trials and to deliver or
9 research effective neurorehabilitation treatments for
10 mTBI, including through patient care delivery.

11 (2) An academic institution that conducts sig-
12 nificant research on mTBI and has demonstrated
13 capability to conduct clinical trials relating to
14 neurorehabilitation treatments.

15 (3) A non-Department health care provider with
16 expertise in neurorehabilitative therapies and dem-
17 onstrated capability to conduct clinical trials and to
18 evaluate mTBI treatments through patient care de-
19 livery.

20 (4) A partnership or consortium of two or more
21 entities described in paragraphs (1) through (3).

22 (c) USE OF FUNDS.—An eligible entity in receipt of
23 a grant under this section shall use such grant to support
24 activities that include—

1 (1) designing and testing novel or integrative
2 treatments for mTBI that prioritize patient-centered
3 care, including non-pharmacological therapies;

4 (2) conducting clinical studies and assessments
5 to measure the effectiveness of funded approaches
6 to—

7 (A) improve mental health outcomes
8 among veterans;

9 (B) reduce suicidality, and common risk
10 factors for completing suicide, including depres-
11 sion and substance use disorders among vet-
12 erans; and

13 (C) mitigate long-term effects of mTBI
14 and, to the extent outcomes are collected under
15 the applicable clinical protocol, measure dura-
16 bility of outcomes at approximately six months
17 following completion of treatment;

18 (3) providing training for clinicians and out-
19 reach to veterans and their families to improve
20 awareness and accessibility of innovative mTBI
21 treatments, including information on available De-
22 partment resources and pathways to access such re-
23 sources; and

24 (4) establishing partnerships with community
25 organizations, academic institutions, and health care

1 facilities, including, as practicable, coordination with
2 Veterans Health Administration facilities to facili-
3 tate referral of eligible veterans, continuity of care,
4 and dissemination of aggregate findings.

5 (d) LIMITATION ON GRANT AMOUNT.—The Secretary
6 may not award an eligible entity a grant under this section
7 in an amount that exceeds \$5,000,000 for any fiscal year.

8 (e) PROGRAM ADMINISTRATION.—

9 (1) APPLICATIONS.—An eligible entity desiring
10 a grant under this section shall submit to the Sec-
11 retary an application in such form, at such time,
12 and containing such information and assurances as
13 the Secretary determines appropriate, including a
14 detailed description of—

15 (A) activities proposed to be conducted
16 using the grant;

17 (B) expected outcomes of such activities;

18 (C) plans for evaluating the effectiveness
19 of such activities;

20 (D) how the eligible entity will coordinate,
21 as practicable, with Veterans Health Adminis-
22 tration facilities for referral and continuity of
23 care for veterans who participate in activities
24 carried out using grant funds, and for dissemi-
25 nation of aggregate findings;

1 (E) the budget of the entity for the use of
2 the grant, including a narrative justification
3 and an identification of the estimated amount
4 of grant funds to be used for administrative or
5 overhead costs; and

6 (F) assurances of compliance with applica-
7 ble Federal laws and regulations relating to
8 human subjects protections and patient safety.

9 (2) PRIORITY.—In awarding grants under this
10 section, the Secretary shall give priority to eligible
11 entities that have demonstrated the capacity to co-
12 ordinate with the Department to facilitate referral
13 and continuity of care for veterans who participate
14 in activities carried out using grant funds.

15 (3) PERIODIC REPORTS.—As a condition of re-
16 ceiving a grant under this section, an eligible entity
17 shall, not less frequently than annually during the
18 grant period and not later than 180 days after the
19 end of the grant period, submit to the Secretary a
20 report that includes, with respect to the period cov-
21 ered by the report—

22 (A) a description of how the eligible entity
23 used such grant;

24 (B) a summary of the progress of activities
25 funded with amounts from such grant;

1 (C) measured outcomes relating to such
2 activities;

3 (D) a detailed accounting of expenditures
4 of grant funds, including administrative or
5 overhead costs;

6 (E) to the extent collected under the appli-
7 cable clinical protocol or in the ordinary course
8 of care, a description of any adverse events and
9 serious adverse events, including self-harm or
10 suicide-related events; and

11 (F) a description of actions taken pursuant
12 to the coordination plan described in paragraph
13 (1)(D).

14 (4) OVERSIGHT; ANNUAL EVALUATIONS.—The
15 Secretary shall—

16 (A) ensure rigorous oversight of the grant
17 program under this section, including by moni-
18 toring financial compliance and timely receipt
19 of the reports required under paragraph (2);
20 and

21 (B) on an annual basis until the termi-
22 nation date specified in subsection (i)(1), evalu-
23 ate the efficacy of activities carried out using
24 grant funds based on the reports submitted

1 under paragraph (2) and other appropriate in-
2 formation.

3 (5) RULE OF CONSTRUCTION.—Nothing in this
4 section shall be construed to authorize the Secretary
5 to require prior approval of, or changes to, any clin-
6 ical protocol, study design, outcome measures, or fol-
7 low-up schedule of an eligible entity that receives a
8 grant under this section, except as necessary to en-
9 sure compliance with applicable Federal laws and
10 regulations relating to human subjects protections
11 and patient safety.

12 (6) ENFORCEMENT AUTHORITY.—The Sec-
13 retary may suspend, modify, or terminate a grant
14 awarded under this section, if the Secretary deter-
15 mines that the recipient of such grant has failed to
16 comply with reporting requirements under para-
17 graph (2) or other applicable terms and conditions
18 of the grant.

19 (f) AVAILABLE AMOUNTS; AUTHORIZATION OF AP-
20 PROPRIATIONS.—

21 (1) AVAILABLE AMOUNTS.—The Secretary may
22 carry out the program under this section using
23 amounts available to the Secretary for general men-
24 tal health care programs, if the use of such amounts
25 supplements, and does not supplant, amounts other-

1 wise available for Department mental health and
2 traumatic brain injury programs.

3 (2) AUTHORIZATION OF APPROPRIATIONS.—

4 There is authorized to be appropriated to the Sec-
5 retary \$10,000,000 for each of fiscal years 2026
6 through 2028 to carry out this section.

7 (g) DURATION; ANNUAL REVIEW.—

8 (1) DURATION.—The authority of the Secretary
9 to carry out the grant program under this section
10 shall terminate on the date that is three years after
11 the date of the enactment of this Act, except that
12 the Secretary may continue to use amounts made
13 available to carry out this section after such date
14 solely for the purpose of administering activities and
15 obligations incurred before such termination date.

16 (2) ANNUAL REVIEW.—During such three-year
17 period, the Secretary shall, on an annual basis, re-
18 view the effectiveness of the grant program to deter-
19 mine the potential of such grant program for con-
20 tinuation or expansion.

1 **SEC. 3. DEPARTMENT OF VETERANS AFFAIRS GRANT PRO-**
2 **GRAM FOR INDEPENDENT THIRD-PARTY RE-**
3 **SEARCH STUDIES AND TREATMENT WITH RE-**
4 **SPECT TO SUPPLEMENTAL**
5 **NEUROREHABILITATION TREATMENTS FOR**
6 **MTBI.**

7 (a) ESTABLISHMENT.—The Secretary of Veterans
8 Affairs shall establish and carry out a research grant pro-
9 gram to award grants to eligible entities described in sub-
10 section (b) to be used to carry out studies and applied
11 programs on approaches and methodologies for the treat-
12 ment of mTBI in veterans.

13 (b) ELIGIBLE ENTITIES DESCRIBED.—An eligible
14 entity described in this subsection is any of the following:

15 (1) A nonprofit organization that has dem-
16 onstrated the capability to conduct clinical trials and
17 to evaluate traumatic brain injury treatments
18 through patient care delivery.

19 (2) An academic institution that conducts sig-
20 nificant research on traumatic brain injury and has
21 demonstrated the capability to conduct clinical trials
22 relating to neurorehabilitation treatments.

23 (3) A partnership or consortium of two or more
24 entities described in paragraphs (1) and (2).

25 (c) APPLICATIONS.—An eligible entity desiring a
26 grant under this section shall submit to the Secretary an

1 application in such form, at such time, and containing
2 such information and assurances as the Secretary deter-
3 mines appropriate, including a summary of—

4 (1) the research and treatment activities pro-
5 posed to be carried out using grant funds;

6 (2) the methodology to be used for such activi-
7 ties;

8 (3) the expected outcomes of such activities;

9 (4) how the eligible entity will coordinate, as
10 practicable, with Veterans Health Administration fa-
11 cilities for referral and continuity of care for vet-
12 erans who participate in activities carried out using
13 grant funds, and for dissemination of aggregate
14 findings;

15 (5) the budget of the entity for the use of the
16 grant, including a narrative justification and an
17 identification of the estimated amount of grant
18 funds to be used for administrative or overhead
19 costs; and

20 (6) assurances of compliance with applicable
21 Federal laws and regulations relating to human sub-
22 jects protections and patient safety.

23 (d) ADMINISTRATION.—

1 (1) GRANT CATEGORIES.—In carrying out the
2 grant program under this section, each fiscal year
3 the Secretary shall—

4 (A) subject to the requirement under para-
5 graph (2), award four grants for exploratory or
6 pilot research and treatment projects, each of
7 which shall be in an amount of not more than
8 \$625,000; and

9 (B) award five grants for collaborative or
10 multidisciplinary research and treatment initia-
11 tives, each of which shall be in an amount of
12 not more than \$1,500,000.

13 (2) PRIORITY.—Of the grants awarded under
14 paragraph (1)(A), the Secretary shall award not
15 fewer than three to nonprofit organizations.

16 (3) ENFORCEMENT AUTHORITY.—The Sec-
17 retary may suspend, modify, or terminate a grant
18 awarded under this section, if the Secretary deter-
19 mines that the recipient of such grant has failed to
20 comply with the applicable terms and conditions of
21 the grant.

22 (e) AGREEMENT WITH INDEPENDENT ORGANIZA-
23 TION.—

24 (1) IN GENERAL.—The Secretary shall seek to
25 enter into an agreement with an independent organi-

1 zation that is not a component of the Department
2 and that has demonstrated expertise in randomized
3 controlled trials, neurorehabilitation outcomes eval-
4 uation, and research integrity, under which the orga-
5 nization agrees to—

6 (A) administer the research grant program
7 under this section;

8 (B) carry out studies and implement ef-
9 forts that include—

10 (i) analyzing data from mTBI treat-
11 ment methodologies developed pursuant to
12 the research grant program to assess the
13 effect, among veterans, of such methodolo-
14 gies on enhanced brain health outcomes,
15 mental health, and long-term recovery, in-
16 cluding, to the extent outcomes are col-
17 lected under the applicable clinical pro-
18 tocol, durability of outcomes at approxi-
19 mately six months following completion of
20 treatment;

21 (ii) identifying data-driven best prac-
22 tices and providing recommendations for
23 further research or clinical application, in-
24 cluding recommendations for dissemination

1 to Veterans Health Administration clini-
2 cians and facilities (as appropriate); and

3 (iii) randomized, controlled clinical
4 trials to—

5 (I) validate and deliver treat-
6 ments;

7 (II) establish a standard of care;
8 and

9 (III) improve access to such
10 treatments for veterans;

11 (C) submit to the Secretary not less fre-
12 quently than annually a report describing activi-
13 ties carried out under this section, including
14 outcome data and methodology; and

15 (D) make available to the Secretary all
16 data and findings from the grants made under
17 this section, consistent with applicable Federal
18 law, regulation, and Department policies relat-
19 ing to patient protections, data security, and
20 privacy.

21 (2) RULE OF CONSTRUCTION.—Nothing in this
22 section shall be construed to authorize the Secretary,
23 or an independent organization that enters into an
24 agreement with the Secretary under paragraph (1),
25 to require prior approval of, or changes to, any clin-

1 ical protocol, study design, outcome measures, or fol-
2 low-up schedule established by an eligible entity that
3 receives a grant under this section, except as nec-
4 essary to ensure compliance with applicable Federal
5 laws and regulations relating to human subjects pro-
6 tections and patient safety.

7 (3) REPORT.—An agreement under paragraph
8 (1) shall include a requirement that the independent
9 organization submits to Congress and the Secretary
10 a comprehensive report that includes—

11 (A) the findings of the studies required
12 under such agreement;

13 (B) recommendations with respect to the
14 expansion of successful TBI treatment meth-
15 odologies and standard of care recommenda-
16 tions, if any, developed pursuant to the research
17 grant program; and

18 (C) to the extent available from the reports
19 and study materials of grant recipients, a sum-
20 mary of—

21 (i) the durability of outcomes at ap-
22 proximately six months following comple-
23 tion of treatment, if collected under the ap-
24 plicable clinical protocol;

1 (ii) adverse events and serious adverse
2 events, including self-harm or suicide-re-
3 lated events, if collected under the applica-
4 ble clinical protocol or in the ordinary
5 course of care; and

6 (iii) aggregate expenditures of grant
7 funds, including administrative or overhead
8 costs.

9 (4) SURVEYS.—The Secretary may conduct sur-
10 veys of any independent organization that enters
11 into an agreement with the Secretary under para-
12 graph (1) in order to assess the effectiveness of such
13 organization in administering the research grant
14 program under this section.

15 (f) AVAILABLE AMOUNTS; AUTHORIZATION OF AP-
16 PROPRIATIONS.—

17 (1) AVAILABLE AMOUNTS.—The Secretary may
18 use amounts available to the Secretary for the oper-
19 ating budget of the National Center for
20 Posttraumatic Stress Disorder to carry out the re-
21 search grant program under this section, if the use
22 of such amounts supplements, and does not sup-
23 plant, amounts otherwise available for Department
24 programs and services.

1 (2) AUTHORIZATION OF APPROPRIATIONS.—

2 There is authorized to be appropriated to the Sec-
3 retary \$10,000,000 for each of fiscal years 2026
4 through 2028 to carry out this section.

5 (g) TERMINATION DATE.—The authority of the Sec-
6 retary to carry out the research grant program under this
7 section shall terminate on the date that is three years after
8 the date of the enactment of this Act.

9 **SEC. 4. REPORTS TO CONGRESS.**

10 Not later than two years after the date on which the
11 Secretary commences the research grant program under
12 tsection 2, and on an annual basis thereafter until the ter-
13 mination date specified in subsection (h) of such section,
14 the Secretary shall submit to Congress a report on the
15 grant programs under sections 2 and 3. Each such report
16 shall include—

17 (1) the findings of the studies under section
18 2(f)(2);

19 (2) a description of any agreement entered into
20 by the Secretary under section 3(e)(1);

21 (3) recommendations of the Secretary with re-
22 spect to policy and programmatic improvements to
23 services of the Department to treat mTBI among
24 veterans;

1 (4) any findings derived from surveys conducted
2 under section 3(e)(4), including any recommenda-
3 tions of the Secretary for improvements to the struc-
4 ture, oversight, administration, or performance of
5 the independent organization that enters into an
6 agreement with the Secretary under section 3(e)(1);
7 and

8 (5) such other matters as the Secretary deter-
9 mines appropriate.

10 **SEC. 5. MODIFICATION OF CERTAIN HOUSING LOAN FEES.**

11 The loan fee table in section 3729(b)(2) of title 38,
12 18 United States Code, is amended by striking “June 9,
13 2034” each place it appears and inserting “July 14,
14 2034”.

15 **SEC. 6. DEFINITIONS.**

16 In this Act:

17 (1) The terms “chronic mild traumatic brain in-
18 jury” and “mTBI” mean a mild traumatic brain in-
19 jury with symptoms that persist for not fewer than
20 six months after the inciting injury, as determined
21 using validated clinical criteria.

22 (2) The term “nonprofit organization”—

23 (A) means an organization described in
24 section 501(c)(3) of the Internal Revenue Code

1 of 1986 and exempt from taxation under sec-
2 tion 501(a) of such Code; and

3 (B) includes such an organization that is a
4 hospital, nonprofit health system, academic
5 medical center, or clinic that delivers
6 neurorehabilitation care or conducts clinical re-
7 search relating to mTBI.

8 (3) The term “veteran” has the meaning given
9 such term in section 101 of title 38, United States
10 Code.