

MILITARY CONSTRUCTION, VETERANS AFFAIRS, AND
RELATED AGENCIES APPROPRIATIONS BILL, 2026

JUNE XX, 2025.—Committed to the Committee of the Whole House on the State of
the Union and ordered to be printed

Mr. CARTER of Texas, from the Committee on Appropriations,
submitted the following

R E P O R T

together with

_____ VIEWS

[To accompany H.R. _____]

The Committee on Appropriations submits the following report in
explanation of the accompanying bill making appropriations for
military construction, veterans affairs and related agencies for the
fiscal year ending September 30, 2026.

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PURPOSE OF THE BILL

The Military Construction, Veterans Affairs, and Related Agencies Appropriations bill funds the Department of Defense's activities related to military construction; family housing construction, maintenance, and oversight; and environmental remediation at closed military bases. The bill also funds the Department of Veterans Affairs, including programs to assist veterans, such as disability and pension benefits, education, healthcare, and insurance and loan programs. The bill funds four related agencies that honor and respect the Nation's veterans including the American Battle Monuments Commission; Cemeterial Expenses, Army (including Arlington National Cemetery); the U.S. Court of Appeals for Veterans Claims; and the Armed Forces Retirement Home.

SUMMARY OF COMMITTEE RECOMMENDATION

The Committee recommends \$453,665,619,000 in total budget authority for the fiscal year 2026 programs and activities funded in the bill.

The bill includes \$301,574,619,000 for mandatory programs and \$152,091,000,000 for discretionary programs.

The bill provides \$17,989,000,000 for military construction and family housing. This is an increase of \$480,000,000 above the fiscal year 2025 enacted level.

The bill provides \$435,333,099,000 for fiscal year 2026 for the Department of Veterans Affairs, which is an increase of \$67,604,483,000 above the fiscal year 2025 enacted level. Of the total, \$301,574,619,000 is provided for mandatory benefit programs and \$133,758,480,000 is provided for discretionary programs, which is a 15 percent increase above the fiscal year 2025 level. Of the total for fiscal year 2026, \$131,439,000,000 for veterans' healthcare was advanced in the fiscal year 2025 Full-Year Continuing Appropriations and Extensions Act, 2023 (P.L. 119–4).

For fiscal year 2027, the Committee recommendation includes \$122,258,000,000 in advance appropriations for the four veterans' medical care accounts and \$262,103,337,000 in advance appropriations for mandatory benefits programs.

The Committee recommendation provides a total of \$324,101,000, which is \$178,209,000 below the fiscal year 2025 enacted level for the four Related Agencies: The American Battle Monuments Commission, the U.S. Court of Appeals for Veterans Claims, Army Cemeterial Expenses (including Arlington National Cemetery), and the Armed Forces Retirement Home.

The Committee notes that the President's Budget Request includes several important proposals to reform and reorganize the

Federal government. The Committee applauds these efforts to improve efficiency while reducing waste, fraud and abuse. Such reforms are long overdue. The Committee notes that the authorizing committees of jurisdiction have not yet had the opportunity to consider these reorganizational proposals. Accordingly, the Committee's bill and report reflect the current organizational structure of the agencies funded herein. The Committee looks forward to working with the authorizing committees of jurisdictions as they act on the President's proposed organization reforms.

Advertising Contracts for Small Business.—The Committee understands that, as the largest advertiser in the United States, the Federal government should work to ensure fair access to its advertising contracts for small, disadvantaged businesses and businesses owned by minorities and women. The Committee directs each department and agency to include the following information in its fiscal year 2026 budget justification: Expenditures for fiscal year 2024 and expected expenditures for fiscal year 2026, respectively, for (1) all contracts for advertising services; and (2) contracts for the advertising services of (I) socially and economically disadvantaged small businesses concerns (as defined in section 8(a)(4) of the Small Business Act (15 U.S.C. 637(a)(4))); and (II) women-and minority-owned businesses.

TITLE I

DEPARTMENT OF DEFENSE

MILITARY CONSTRUCTION OVERVIEW

Appropriation, fiscal year 2025	\$17,509,242,000
Committee recommendation, fiscal year 2026	17,989,000,000

Military construction accounts provide funds for new construction, construction improvements, planning and design, and host nation support. Projects funded by these accounts include facilities for operations, training, readiness, maintenance, research and development, supply, medical care, and force protection as well as unaccompanied housing, military-owned family housing, utilities infrastructure, and land acquisition.

COMMITTEE DIRECTIVES

In addition to the notification and reporting requirements for military construction programs contained in Title 10, United States Code, the Committee's recommendations include several provisions requiring the Department of Defense to report on various aspects of military construction programs and to provide notification to the Committee when certain actions are taken. The Committee also retains prior approval authority for any reprogramming of funds exceeding a specific threshold.

Reprogramming Guidelines.—The following reprogramming guidelines apply for all military construction and family housing projects. A project or account (including the sub-elements of an account) that has been specifically reduced by Congress in acting on the budget request is considered to be a Congressional interest item and as such, prior approval is required. Accordingly, no reprogramming to an item specifically reduced below the threshold

by Congress is permitted, except that the Department may seek reprogramming for appropriated increments.

The reprogramming criteria that applies to military construction projects is 25 percent of the funded amount or \$6,000,000 and includes new housing construction projects and improvements. To provide the Services the flexibility to proceed with construction contracts without disruption or delay, the costs associated with environmental hazard remediation such as asbestos removal, radon abatement, lead-based paint removal or abatement, and any other legislated environmental hazard remediation may be excluded, if such remediation requirements could not be reasonably anticipated at the time of the budget submission. Reprogramming is a courtesy provided to the Department by the Committee and can be taken away if the authority is abused. This exclusion applies to projects authorized in this budget year as well as projects authorized in prior years for which construction has not been completed. Design costs associated with military construction and family housing projects may also be excluded from these guidelines. In instances where prior approval for a reprogramming request for a project or account has been received from the Committees on Appropriations of both Houses of Congress, the adjusted amount approved becomes the new base for any future increase or decrease via below-threshold reprogramming (provided that the project or account is not a Congressional interest item as defined above).

In addition to these guidelines, the Services are directed to adhere to the guidance for military construction reprogramming actions and notifications, including the pertinent statutory authorities contained in DOD Financial Management Regulation 7000.14-R and relevant updates and policy memoranda. The Committee further encourages the Office of the Director of National Intelligence to use a format similar to that used by the Office of the Secretary of Defense to submit reprogramming requests.

Bid Savings.—The Committee directs the Secretary of Defense to submit 1002 reports on military construction bid savings not later than 180 days after enactment of this Act, and biannually thereafter, to the Committees on Appropriations of both Houses of Congress.

Facilities Sustainment, Restoration and Modernization (FSRM).—The Department is directed to continue describing on form 1390 the backlog of FSRM requirements at installations with future construction projects. For troop housing requests, form 1391 should describe any FSRM conducted in the past two years. Likewise, future requirements for unaccompanied housing at the corresponding installation should be included. Additionally, the forms should include English equivalent measurements for projects presented in metric measurement. Rules for funding repairs of facilities under the operation and maintenance accounts are described below:

- (1) components of the facility may be repaired by replacement. Such replacement can be up to current standards or codes;
- (2) interior arrangements and restorations may be included as repair;

(3) additions and new facilities, may be done concurrently with repair projects as long as the final conjunctively funded project is a complete and usable facility; and

(4) the appropriate Service Secretary shall notify the appropriate committees 21 days prior to carrying out any repair project with an estimated cost in excess of \$7,500,000.

Quarterly Summary of Notifications.—The Committee directs the Services and the Office of the Secretary of Defense (on behalf of itself and defense agencies) to continue to submit a quarterly report listing all notifications that have been submitted to the Committees during the preceding three-month period.

Incremental Funding of Projects.—In general, the Committee supports full funding for military construction projects if they are executable. However, it continues to be the practice of the Committee to provide incremental funding for certain large projects to enable the Services to more efficiently allocate military construction dollars among projects that can be executed in the year of appropriation.

Transfer of Funds to and from the Foreign Currency Fluctuations, Construction, Defense Account.—Committee directs the Department of Defense to submit a quarterly report to the Committees on Appropriations of both Houses of Congress on the transfer of funds from military construction and family housing accounts to the Foreign Currency Fluctuations, Construction, Defense account. The report shall specify the amount transferred to the Foreign Currency account from each military construction and/or family housing account, and all other accounts for which an appropriation is provided in this Act, during the preceding fiscal quarter, and the amounts transferred from the Foreign Currency account to the above accounts during the same period. This report shall be submitted no later than 30 days after the close of each fiscal quarter. In addition, the Department shall notify the Committees on Appropriations of both Houses of Congress within 7 days of transferring any amount in excess of \$10,000,000 to or from the Foreign Currency account.

Unfunded Priority List (UPL) and Future Years Defense Program (FYDP).—The Committee directs the Department of Defense and Military Services, active and reserve components as well as Combatant Commanders, as required by law, to submit a UPL and FYDP to the congressional defense committees for military construction projects no later than 10 days and 5 days, respectively, after the President's budget is submitted to Congress.

Work in Progress or Planned (WIP) Curve.—The Committee directs the Services and the Office of the Secretary of Defense (on behalf of itself and defense agencies) to submit a WIP curve for each project requested in a budget submission above \$90,000,000 with the form 1391 justification to the congressional defense committees. The Committee also directs the Secretary of Defense to report to the congressional defense committees quarterly, beginning in the second quarter of fiscal year 2024 and each quarter thereafter, of projects that remain unawarded from the current and prior fiscal years and the reasons for delay.

ITEMS OF INTEREST

Additive Manufacturing.—The Committee recognizes that recent advancements in additive manufacturing warrant continued research into local material sourcing for autonomous construction. The Department of Defense’s 2021 Additive Manufacturing (AM) Strategy emphasizes AM’s potential to enhance operational readiness by enabling rapid, on-site production of components, thereby reducing reliance on extended supply chains. Additionally, academic studies have demonstrated that AM can decrease labor costs, reduce material waste, and create customized complex geometries, which are particularly beneficial in challenging construction environments.

The Committee encourages the Department of Defense to further explore and implement these innovative technologies in future infrastructure projects. Moreover, the Committee recommends prioritizing applications in extreme weather environments that require enhanced protection from adversaries—such as Guam, where military construction premiums are significantly higher due to geographic distance, and locations like Alaska and Poland, where severe cold accelerates infrastructure deterioration.

Advanced Nuclear Power for Military Installations Program (ANPI).—The Committee recognizes the need to expand energy resilience across the Department of Defense and notes the potential for the ANPI program to improve installation level energy resilience. The Committee encourages the Secretary of Defense to work within the Department and with external partners to identify potential infrastructure needs for the ANPI.

Barracks and Dormitories.—The Committee remains concerned about the inadequate conditions of DOD unaccompanied housing and continues to direct the Department to expeditiously address the findings of the Government Accountability Office (GAO) report entitled, “Military Barracks: Poor Living Conditions Undermine Quality of Life and Readiness” (GAO–23–105797). The Committee directs the Secretary of Defense to report not later than 90 days after enactment of this Act of amounts utilized across the Department of Defense to address the recommendations by GAO in prior fiscal years and amounts required over the fiscal year 2026 to fiscal 2030 period for such purposes, and a long-term estimate of resources needed to fully address the findings in the report and ensure long-term commitment to quality barracks and dormitories across the Department of Defense.

Building Materials.—The Committee supports the use by the Department of a diversity of building materials, and directs the Department to ensure selected building materials are mature, cost effective, and advance the performance, sustainability, reliability, and resiliency of DoD infrastructure. The Committee believes that Federal resources are best utilized when all materials can compete on their own merits, allowing for the best solutions to address our infrastructure challenges. The Committee further notes the need for building materials and heating systems to undergo rigorous testing, including in extreme temperature and conditions.

Camp Bull Simons Child Development Center.—The Committee is concerned with the lack of affordable and accessible childcare for servicemembers stationed at Camp Bull Simons and Eglin Air

Force Base. The Army and the Air Force stood up a task force to review and propose solutions to construct a child development center that would meet the needs of affected families. The Committee directs the Secretaries of the Army and the Air Force to brief the Committee within 30 days of enactment of this Act on their funding plans for fiscal year 2026 with respect to construction of a CDC serving the families at these installations and what steps the Services are taking to expeditiously provide for a permanent childcare solution for families at Eglin Air Force Base and Camp Bull Simons.

Child Development Centers.—The Committee continues to be concerned about the chronic shortage of quality childcare at Department of Defense installations. The Committee encourages the Department of Defense and the Services to consider innovative solutions to improve childcare delivery on military installations, including programs similar to other successful public-private partnerships at the Department. The Secretary of Defense, in conjunction with the Services, shall deliver to the Committees on Appropriations a report on new potential solutions to the childcare challenges, including an evaluation of the feasibility of utilizing public-private partnerships to deliver childcare at Department installations, no later than 60 days after enactment of this Act.

Demolition of Excess Infrastructure.—The bill includes \$75,000,000 for unspecified minor military construction for demolition across the active and reserve components. The Committee is concerned about the amount of excess and obsolete infrastructure found on installations. While the Committee understands the need to balance demolition with other infrastructure needs, excess infrastructure can be costly to maintain and divert resources away from current requirements.

Diego Garcia.—The Committee notes the strategic importance of Diego Garcia in current and future conflicts. To better understand the Department of Defense's needs to support the security and infrastructure of the installation, the Committee directs the Secretary of Defense to provide a report, not later than 180 days after the date of the enactment of this Act, summarizing the plans for military construction and associated infrastructure needs to maximize the effectiveness of an enhanced posture in USINDOPACOM. Specifically, this report should contain an assessment of how the transfer of sovereignty of the Chagos Archipelago from the United Kingdom to Mauritius impacts the Department of Defense's military construction plans at the base.

Enhanced Integrated Air and Missile Defense System on Guam.—Not later than 120 days after the enactment of this Act, the Secretary of Defense shall submit a report to the Committee on Appropriations of the deployment of the Enhanced Integrated Air Missile Defense System on Guam detailing the impacts on public infrastructure in Guam along with a plan to mitigate any negative effects. Not later than 30 days after the enactment of this Act, the Secretary of Defense shall consult with the Committee on the elements to be evaluated as part of the report.

Evan's Law.—The Committee directs the Secretary of Defense to report to the congressional defense committees not later than 90 days after enactment of this Act on the implementation of Evan's Law and the use of funds to retrofit or install fall prevention de-

vices in both privatized and military-owned housing. The report shall include information on the use of funds for such purpose in prior fiscal years and the planned use of funds for such purpose in fiscal year 2026, and steps already taken and planned for fiscal year 2026 by the Department to ensure consistent implementation of Evan's Law across both privatized and military-owning housing.

Guam Military Housing.—The Committee directs the Secretary of Defense, in coordination with the Secretaries of the military departments, to submit a report to the Committee on Appropriations not later than 120 days after the enactment of this Act, detailing the cost implications and feasibility of transitioning military housing on Guam to a Public-Private Partnership model. Not later than 30 days after the enactment of this Act, the Secretary is directed to consult with the Committee on the elements to be evaluated as part of the report.

Hydro-Vacuum Excavation.—The Committee is aware that, according to construction industry reporting, 180,471 unique incidents of damage to underground utilities occurred across the United States during civilian infrastructure projects in 2023. The Committee is concerned that such utility strikes contribute to project delays, increased costs, and disruptions to essential services in communities surrounding construction sites, particularly when alternative excavation methods—such as hand-digging—are used. The Committee is further concerned that utility strikes during military construction projects present an additional risk, as resulting service interruptions could adversely impact military readiness and operational continuity. Therefore, the Committee urges the Department of Defense to incorporate hydro-vacuum excavation methods when locating underground utilities in advance of military construction activities, to reduce the risk of accidental strikes and ensure continuity of operations.

Innovative Construction Methods.—The Committee is aware of interest across the Department of Defense, including the U.S. Army Space and Missile Defense Command (SMDC) in innovative construction solutions to address the challenges of operating in remote or disaster-prone locations. These challenges include limited access to traditional construction materials, long logistical timelines, and vulnerability to extreme weather or natural disasters.

The Committee urges the Secretary of Defense to prioritize and support efforts by SMDC and other entities at the Department to identify, evaluate, and pilot novel construction methods, such as modular systems, additive manufacturing, and rapid-deployable structures, that can enhance the resilience, speed, and sustainability of infrastructure in austere environments.

The Committee directs the Secretary of Defense to provide a briefing to the Committee within 90 days of the enactment of this Act outlining current requirements, pilot projects under consideration, and potential resourcing gaps.

Laboratory Infrastructure.—The Committee is concerned that aging laboratory infrastructure threatens the ability of Services to maintain the advanced technology necessary to keep ahead of U.S. adversaries across all domains. Accordingly, the Committee provides an additional \$105,000,000 for laboratory infrastructure projects. The Services are directed to provide a spend plan not later

than 90 days after enactment of this Act regarding the use of these funds.

Linear Power Generation.—The Committee understands that fuel agnostic linear generators can achieve over 50% net system efficiency, are compatible with more than 22 fuel types, and can house 2 megawatts of power in a standard 20-foot shipping container. These systems can shift between different fuel types in real-time without depleting fuel tanks or requiring hardware changes. The committee encourages the DoD to invest in scalable, fuel agnostic linear power generation as a means of improving grid resiliency at military installations.

Mass Timber.—The Committee is aware that the use of cross laminated timber and other mass timber products as a building material has the potential to reduce costs, limit environmental impact, and increase functionality of various military structures. The Committee encourages the Department of Defense to continue exploring the application of these innovative technologies in future planning and design for military construction projects.

Progressive Design Build.—The Committee is encouraged by the Department of Defense's ongoing evaluation of Progressive Design-Build (PDB) as an alternative project delivery method for military construction projects. PDB offers the potential to improve cost control, schedule certainty, and collaborative planning on complex or large-scale efforts. The Committee commends the Department's efforts to explore innovative delivery models and encourages the use of PDB where appropriate to achieve greater efficiency and effectiveness in project execution.

Remote Pacific Locations.—The Committee is aware of the strategic importance of remote Pacific locations. While the committee applauds the focus on modernizing and strengthening our USINDOPACOM infrastructure through the Pacific Deterrence Initiative, the committee requests an update on the current projects and future need. Specifically, the Committee is requesting a classified briefing on military construction needs at Wake Island, Midway, Guam, Tinian, the Republic of Marshall Islands, the Federated States of Micronesia, the Republic of Palau, and other locations in the Pacific Islands. To better understand the Department of Defense's needs to support the security and infrastructure of these installations, the Committee directs the Secretary of Defense to provide a report, not later than 180 days after the date of the enactment of this Act, summarizing the plans for military construction and associated infrastructure needs to maximize the effectiveness of an enhanced posture in USINDOPACOM.

Resilient Military Installations.—The Committee supports the Department's continued efforts to build lasting and resilient military installations. These efforts include using methods that update hurricane-resistant building codes for bases, barracks, hospitals, and airfields and reviewing the effect of severe drought and desertification and how these two hazards affect installations and missions. The Committee encourages the Department to continue investing in innovative infrastructure projects to increase infrastructure resiliency and reduce costs.

Streamlining the Facilities Investment Plan Preparations.—The Committee is aware of the Department of the Army's Installation Management Command's (IMCOM) interest in leveraging artificial

intelligence (AI) to improve infrastructure planning processes. The Committee encourages the Department of Defense to explore and implement AI tools to streamline data collection, standardize facility condition assessments, and enhance the efficiency and accuracy of Facilities Investment Plan (FIP) preparations. AI-enabled systems can help prioritize projects based on mission impact, lifecycle costs, and readiness needs, thereby supporting more informed and timely investment decisions.

MILITARY CONSTRUCTION, ARMY

Appropriation, fiscal year 2025	\$2,236,357,000
Committee recommendation, fiscal year 2026	2,103,657,000

The Committee recommends \$2,103,657,000 for the Army in fiscal year 2026, including an additional \$12,000,000 above the fiscal year 2025 enacted level for unspecific minor military construction. Of the total, \$77,300,000 is for the following projects in the following amounts:

State	Location	Project	Amount
AL	Anniston Army Depot	Access Control Point	\$18,000,000
FL	Naval Air Station Key West	Joint Interagency Task Force South Command and Control Facility.	50,000,000
OK	Fort Sill	Automation-Aided Instruction Building	9,300,000

Aberdeen Proving Ground Lab and Test Building.—The Committee notes the inclusion of funding for a Lab and Test Building at the Aberdeen Proving Ground (APG) in the Army’s fiscal year 2025 to 2029 Future Years Defense Plan and supports the use of funds to modernize APG’s existing laboratories to state-of-the-art facilities, enhancing research and development capabilities.

Army Space and Missile Defense Command.—The Committee is aware that the U.S. Army Space and Missile Defense Command (SMDC) has expressed interest in innovative construction solutions to address the challenges of operating in remote or disaster-prone locations. These challenges include limited access to traditional construction materials, long logistical timelines, and vulnerability to extreme weather or natural disasters.

The Committee urges the Secretary of the Army to prioritize and support efforts by SMDC and other relevant components to identify, evaluate, and pilot novel construction methods, such as modular systems, additive manufacturing, and rapid-deployable structures, that can enhance the resilience, speed, and sustainability of infrastructure in austere environments.

The Committee directs the Department to provide a briefing to the Committee within 90 days of enactment outlining current requirements, pilot projects under consideration, and potential resourcing gaps.

Energy Reliability and Generator Deployment.—The Committee remains concerned about the reliability of energy across Army installations, particularly in remote or resource-constrained locations where interruptions in power may jeopardize mission readiness and operational continuity.

To address these concerns, the Committee directs the Department of Defense to support the design, simulation, development, and deployment of several modular generator systems to military

installations within the United States that represent a range of operational environments and climatic conditions. The Committee encourages the Department to consider modular, multi-fuel generator technologies, including linear power generators, as part of this effort to enhance energy resilience and flexibility across the force.

Engineer, Research & Development Center (ERDC).—The Committee notes the limited and outdated testing infrastructure at the Engineer Research and Development Center (ERDC) of the U.S. Army of Engineers and is concerned about the ERDC's ability to fulfill its mission to develop advanced airfield and pavement research requirements for high heat-resistant capability and sustainability. The Committee urges the Army Futures Command and ERDC to prioritize the development of a dedicated Jet Engine Thrust Simulator facility to conduct this critical research in support of operational readiness of the Department's advanced missile launch platforms and Vertical/Short Take-off and Landing aircraft and ensuring operational readiness.

Directorate of Public Works Facilities.—The Committee recognizes the critical role of Directorate of Public Works (DPW) in promoting mission readiness and quality of life of servicemembers and notes support for advancement of projects improving DPW facilities.

Fort Huachuca Infrastructure Improvements.—The Committee notes the need for investment in several important projects at Fort Huachuca, including the Fort's fire station and air traffic control tower, both of which are in dire need of investment to meet mission needs.

Oahu Wildland Fire Center.—The Committee understands the critical role the Army's wildland firefighters in Hawaii play in preventing wildfires on Army training lands on Oahu and assisting non-military partners during emergencies elsewhere on the island. To better understand the condition of the Army's existing facilities on Oahu, the Committee directs the Assistant Secretary of the Army for Installations, Energy and Environment to provide a report, not later than 90 days after the date of the enactment of this Act, summarizing the infrastructure investment needs to support these efforts.

Partnerships and Land-Lease Agreements.—The Committee is aware of strains on cost and timeline for military construction needs of the Department of Defense and recognizes efforts by the Services to explore alternative means by which to meet military construction needs. Therefore, the Committee directs the Assistant Secretary of the Army for Energy, Installations, and Environment to submit a report, no later than 120 days after enactment, to include the following: (1) a feasibility assessment on permitting military installations, such as Fort Bliss, to form partnerships for the construction of non-military facilities to be operated by the Army, to include unclassified office spaces, child development centers, and other non-sensitive structures in exchange for land-lease agreements to allow use of excess and unused land and infrastructure; and (2) a proposed oversight plan to permit the Army to conduct robust oversight, to include periodic inspections and reporting elements, in such proposed agreement.

Physical Fitness Centers.—The Committee recognizes the critical role fitness centers play towards mission readiness and the quality

of life of servicemembers. The Committee urges the Department of the Army to prioritize planning and design efforts to advance projects supporting the morale, wellness, recreation and fitness needs of the force.

Range Operations and Support Facilities.—The Committee recognizes the critical role of range operations and support facilities to the mission readiness of our servicemembers and for incorporating new technology capabilities, including unmanned aircraft systems, into training programs. The Committee supports design efforts that enhance range operations and supporting facilities.

U.S. Army Soldier Performance Readiness Center.—The Committee supports the construction of a prototype U.S. Army Soldier Performance Readiness Center (SPRC). The SPRC is integral to the advancement of the readiness and lethality of U.S. Army soldiers. The prototype design emphasizes increased facility throughput and optimized daily human performance training sessions. The SPRC is considered a crucial component for successfully implementing the Army's Holistic Health and Fitness (H2F) program.

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

Appropriation, fiscal year 2025	\$4,159,399,000
Committee recommendation, fiscal year 2026	4,104,499,000

The Committee recommends \$4,104,499,000 for the Navy and Marine Corps in fiscal year 2026, of which \$155,100,000 is for the following project in the following amount:

State	Location	Project	Amount
CA	Naval Air Weapons Station China Lake.	Child Development Center	\$8,900,000
CA	Naval Air Station Lemoore	F-35 Aircraft Maintenance Hangar	17,000,000
FL	Marine Corps Support Facility Blount Island.	Communications Infrastructure	45,425,000
FL	Naval Air Station Jacksonville ...	Child Development Center	4,575,000
GU	Guam	Defense Access Roads	50,000,000
VA	Joint Expeditionary Base Little Creek—Fort Story.	EOD Expeditionary Mine Countermeasures Facility.	12,000,000
VA	Naval Station Norfolk	Power Upgrades (Pier 14)	15,000,000
VA	Naval Weapons Station Yorktown.	Shore Power for Virginia Class Submarines	2,200,000

Battle Damage Requirements in Shipyard Infrastructure Optimization Program (SIOP).—As the Navy executes its 20-year, \$21 billion SIOP, it will make infrastructure improvements that will last generations and support both peacetime and wartime requirements, to include responding to battle damage. The Committee directs the Naval Facilities Engineering Systems Command and Naval Sea Systems Command to provide a joint report within 180 days of the enactment of this Act (1) summarizing the ability of existing shipyard infrastructure to support wartime battle damage requirements, (2) how SIOP is incorporating any shortfalls in meeting battle damage requirements into its long-term infrastructure plan at the naval public shipyards, and (3) any possible benefits of coordinating these efforts with the U.S. Coast Guard's SIOP.

Biosecurity for Northern Mariana Islands.—The Committee recognizes that the planned expansion of military infrastructure and operations in the Northern Mariana Islands significantly increases the risk of invasive species introduction, stemming primarily from

the anticipated rise in military-related air and maritime traffic. To address this critical issue, the Committee directs the Department of the Navy to submit a report, not later than 180 days after the date of enactment of this Act, summarizing the necessity and feasibility of establishing a biosecurity inspection facility in the Northern Mariana Islands. Not later than 30 days after the enactment of this Act, the Secretary of the Navy shall consult with the Committee on the elements to be evaluated as part of the report.

Drydocks.—The Committee recognizes the critical strategic and logistics role public shipyards play in the security of the nation. The Committee strongly supports efforts to modernize and improve facilities at the Navy's four public shipyards, including for the multi-mission dry dock (M2D2), and to address the complex maintenance needs of the Navy's current and future active fleet. The current modernization plans for Pearl Harbor Naval Shipyard and Intermediate Maintenance Facility (IMF) include converting Dry Dock 4 to focus on depot-level maintenance for nuclear submarines. To better understand the Navy's options for a floating dry dock at Pearl Harbor Naval Shipyard and IMF to address any infrastructure shortfalls, the Committee directs the Assistant Secretary of the Navy for Energy, Installations, and Environment to provide a report within 180 days of enactment of this Act (1) detailing potential locations for mooring a floating drydock, (2) a list of the individual major military construction projects needed to support a floating drydock, (3) the earliest a floating drydock could be brought into service given the timelines associated with the required military construction, and (4) how a floating drydock would be used to ensure extra capacity for potential crisis and conflict in the Indo-Pacific.

Ground-Based Midcourse Defense Planning and Design.—The Committee recognizes the need for an additional Ground-Based Midcourse Defense capability, both in total number of ballistic missile interceptors and sites from which those interceptors can engage ballistic missile threats. The Committee directs the Missile Defense Agency to bring planning and design of an additional East Coast based Ground-Based Midcourse Defense interceptor site to 35 percent complete.

Infrastructure Needs at Naval Air Station Corpus Christi.—The Committee recognizes the unique importance of the Naval Aviation Training Enterprise and is alarmed at the number of the poor and failing facilities that the Navy identified in its November 9, 2023 report to Congress, particularly at Naval Air Station Corpus Christi. The Committee urges the Navy to address the needs at Naval Air Station Corpus Christi, particularly as related to construction and other improvements for unaccompanied and family housing, child and youth development centers, and quality of life projects for servicemembers and their families.

Joint Base Pearl Harbor-Hickam Drinking and Wastewater Infrastructure.—The Committee is concerned about wastewater discharges from Joint Base Pearl Harbor-Hickam's aging wastewater facility and the condition of the base's drinking water systems. To help the Committee fully understand the long-term infrastructure needs at the base, the Committee directs the Assistant Secretary of the Navy for Energy, Installations, and Environment, to provide a report within 120 days after enactment of this Act summarizing:

(1) any actions needed to bring Joint Base Pearl Harbor-Hickam Infrastructure's Installation Development Plan into compliance with Navy regulations, (2) staffing needs for planning these military construction projects, and (3) efforts to coordinate long-term infrastructure needs with major tenants across the joint base.

Marine Corps Air Station Cherry Point.—The Committee notes the inclusion of funding for the first increment of the F-35 Aircraft Sustainment Center at MCAS Cherry Point in the Department of Defense's operation plan for military construction for fiscal year 2025, and supports anticipated future increments for the project. In addition, the Committee recognizes the need for additional investments in F-35 flightline utilities modernization at MCAS Cherry Point.

Marine Littoral Regiment (MLR) Infrastructure.—The Committee is concerned that the MLRs based in the Indo-Pacific may lack adequate infrastructure to support its personnel, equipment, and communications requirements. The Committee directs the Deputy Commandant for Installations and Logistics to conduct a study and produce a report within 180 days of enactment of this Act outlining the infrastructure requirements for MLRs based in the Indo-Pacific region, current shortfalls, and recommended investments to include specific projects with estimated costs and construction timelines.

Multi-Mission Drydock #1 Extension.—The Committee appreciates the inclusion of funding for the Multi-Mission Drydock#1 Extension project at Portsmouth Naval Shipyard in the Navy's fiscal year 2025 operating plan and supports additional increments as outlined in the Navy's fiscal year 2025 to 2029 Future Years Defense Plan.

Naval Air Station Whiting Field.—The Committee notes the need for additional investment at Naval Air Station Whiting Field, including a hangar to house the Advance Helicopter Training System and a child development center that meets current capacity, configuration and service requirements.

Naval Innovation Center.—The Committee supports the establishment of a Naval Innovation Center at the Naval Postgraduate School. The NIC is designed to be a facility that promotes collaboration, hands-on experimentation, advanced analytics, autonomous technologies, classified work and immersive demonstrations. The Committee underscores the importance of the Center for delivering solutions relevant to both current operations of the fleet and planning for future Naval operations.

NAWS China Lake Infrastructure.—The Committee appreciates the Navy prioritizing the rebuilding effort of NAWS China Lake after the 2019 earthquakes. Despite progress made on recovery, the Committee notes additional infrastructure challenges for NAWS China Lake and its largest tenant, Naval Air Warfare Center Weapons Division (NAWCWD) beyond those directly related to the earthquake. To ensure NAWS China Lake and NAWCWD have the resources needed to complete its mission, the Committee supports infrastructure upgrades and planning and design for military construction projects at NAWS China Lake. The Committee also directs the Navy to provide quarterly briefings to the Committee on Appropriations on the current challenges related to failing infrastructure impacting NAWS China Lake and resident naval air war-

fare divisions and steps the Navy is taking to resolve those challenges.

Naval Aviation Training Enterprise.—The Committee notes the importance of the Naval Aviation Training Enterprise and encourages the Navy to prioritize infrastructure projects within the coastal Naval Aviation Training Enterprise, especially those that build, remodel, and restore unaccompanied and family housing, child youth development centers, and quality of life projects for servicemembers and their families.

P-8 Poseidon Parking Aprons Naval Air Station Jacksonville.—The Committee is concerned about the degradation of the P-8 Poseidon parking aprons at Naval Air Station Jacksonville and its impact on the operational readiness of the aircraft, and directs the Assistant Secretary of the Navy for Energy, Installations, and Environment to provide a report within 60 days of enactment of this Act detailing the plan to recapitalize the P-8 parking apron infrastructure at Naval Air Station Jacksonville.

Port Improvements on Tinian Island.—The Committee notes that the Department of the Navy has previously acknowledged the critical nature of the Tinian Port Joint Area Development Plan in the Commonwealth of the Northern Mariana Islands. The Committee directs the Assistant Secretary of the Navy for Energy, Installations, and Environment to provide a report, not later than 180 days after the date of the enactment of this Act, summarizing (1) the major and minor military construction projects under consideration by the Department of the Navy to support port operations on the Island of Tinian, (2) design options to help maximize U.S. Marine Corps and U.S. Air Force training capabilities on the Island of Tinian, (3) efforts to coordinate the work and develop the requirements with the Commonwealth Ports Authority of the Commonwealth of the Northern Mariana Islands, and (4) actions the Navy can take to accelerate these projects.

Submarine Storage, Maintenance, and Operations Facility.—The Committee notes the inclusion of the Submarine Storage, Maintenance, and Operations Facility project in the Navy's fiscal year 2025 to 2029 Future Years Defense Plan and supports the project.

Trident Refit Facility Expansion program.—The Committee continues to support the Trident Refit Facility Expansion program and recognizes the need for continued modernization, expansion, and hardening of submarine bases in support of the new Columbia Class submarine.

Unexploded Ordinance on Military Construction in Guam.—The Committee continues to recognize the significant environmental, planning, and construction activities on Guam and the impact unexploded ordinance removal has on these projects. The Committee directs the Assistant Secretary of the Navy for Installations, Energy, and Environment within 180 days of enactment to provide a report on efforts to address this issue and to help keep construction projects on-time and on-budget.

United States Marine Corps Forces, Pacific Headquarters Needs Assessment.—The Committee is concerned about the condition of the infrastructure at Camp H. M. Smith, which was built in 1942 and whose planned major upgrades have been repeatedly delayed. The Committee directs the Deputy Commandant for Installations and Logistics to provide a report within 180 days after enactment

of this Act summarizing: (1) the Marine Corps' current assessment of the condition of Marine Corps Forces, Pacific Headquarters' infrastructure and (2) a plan for addressing failed or failing infrastructure, to include a detailed timeline, estimated cost, and specific projects that must be completed to meet Operational Plan requirements.

MILITARY CONSTRUCTION, AIR FORCE

Appropriation, fiscal year 2025	\$3,347,126,000
Committee recommendation, fiscal year 2026	3,169,526,000

The Committee recommends \$3,169,526,000 for the Air Force in fiscal year 2026, of which \$32,400,000 is for the following projects in the following amounts:

State	Location	Project	Amount
NE	Offutt Air Force Base	Survivable Airborne Operations Center	\$29,800,000
UT	Hill Air Force Base	F-35 Canopy Repair Facility	2,600,000

Air Force Infrastructure Hardening.—The Committee remains concerned with the hardening of aircraft hangers and shelters on Pacific bases and directs the Air Force to update the report required by House Report 118-228 on Air Force Infrastructure Hardening. The Committee supports a robust, multifaceted approach to hardening infrastructure in the Pacific, including military construction of hardened facilities, as appropriate, and other procurement options that increase the survivability of aircraft and infrastructure.

B-21 Raider infrastructure.—The Committee continues to support the modernization of infrastructure necessary to appropriately base the next generation B-21 Raider.

Ebbing Air National Guard Base.—The Committee recognizes the need for continued infrastructure investments at Ebbing Air National Guard Base to meet the training needs for the Department of Defense and international partners.

Fire Stations and Runway Upgrades.—The Committee notes crucial needs across the Air Force's fire stations and runway upgrades and urges the Air Force to prioritize projects to address those needs in fiscal year 2026 and in future budget requests.

Long Range Standoff (LRSO) Weapons Facilities.—The Committee directs the Secretary of the Air Force to submit a plan not later than 90 days after enactment of this Act to ensure that no fewer than two domestic locations have the ability to operate and maintain the Long Range Stand Off missile and its associated warheads when the LRSO weapon reaches its initial operating capability.

Ground Based Strategic Deterrent (GBSD).—The Committee was encouraged by the Air Force's fiscal year 2025 to 2029 Future Years Defense Program (FYDP) expectations for military construction related to the GBSD and supports future funding outlined in outyear FYDPs. The Committee requests that the Secretary of the Air Force continue engaging with Congress on its infrastructure needs related to the GBSD and include requirements for the program in the Department's base budget.

Sentinel Workforce Lodging and Care.—The Committee has previously expressed concerns about the Sentinel program's ability to

identify, hire and retain a skilled workforce. However, the needs of the workforce and affected communities extend beyond the skillsets and timely hiring of workers. The Committee is additionally concerned with some of the secondary requirements associated with bringing in a large workforce for an extended period of time to communities which may not currently have the infrastructure to support such an influx. Therefore, the Committee encourages the program and project managers to identify industry partners who have demonstrated experience in lodging and hospitality services for workforce in remote locations.

Solid Waste Management on Tinian.—The Committee is concerned that increased waste generation associated with expanded U.S. Air Force activities on Tinian, Northern Mariana Islands will soon overburden the island's only landfill. The Committee directs the Secretary of the Air Force, in coordination with the Governor of the Northern Mariana Islands, to provide a report no later than 180 days after the enactment of this Act, describing the development of a comprehensive solid waste management plan, including the possible development of a new landfill that can be jointly utilized by both the U.S. military and the Municipality of Tinian. The plan shall also include (1) site selection and design, (2) projected construction and operational costs, (3) permitting and regulatory compliance, and (4) design options to help maximize U.S. Air Force training capabilities on the Island of Tinian.

U.S. Space Command Headquarters.—The Committee encourages the Secretary of Defense to finalize a permanent location for the United States Space Command headquarters and directs the Secretary to provide a follow-on implementation plan within 60 days of enactment of this Act detailing the funding required to expedite the establishment of Space Command Headquarters' permanent location, including any funds that have been obligated or expended in all previous fiscal years and funds needed in fiscal year 2026 and future fiscal years for the construction, renovation, or improvement of facilities, including leases, for Space Command Headquarters.

U.S. Space Forces Indo-Pacific Headquarters Study.—The Committee is concerned that significant infrastructure shortfalls on Joint Base Pearl Harbor-Hickam could negatively impact Space Force's Indo-Pacific's ability to carry out its role as the Space Force Component to U.S. Indo-Pacific Command and as the Joint Force Space Component Commander. To better assess efforts to support this critical and emerging mission, the Committee directs the Assistant Secretary of the Air Force for Energy, Installations, and Environment to provide a report within 180 days after enactment of this Act summarizing: (1) the Department's assessment of the current Space Forces Indo-Pacific's headquarters, to include operational risks related to any command and control and required Sensitive Compartmented Information Facility or Special Access Program Facility workspace shortfalls, (2) the plan for addressing short-term facility requirements in the next five years, to include a detailed timeline, estimated cost, and specific projects that must be completed to meet near-term operational requirements, to include ensuring capacity and resiliency throughout crisis or conflict, and (3) the long-term plan for fully meeting operational capability facility requirements for Space Forces Indo-Pacific.

Weapons Storage Areas.—The Committee urges the Secretary of the Air Force to make appropriate investments, particularly with minor military construction funding, in securing existing weapons storage areas alongside long-term investments in weapons generation facilities. Investments in existing facilities is required to enhance efficiency and decrease operational risk at the entry points to existing weapons storage areas.

MILITARY CONSTRUCTION, DEFENSE-WIDE

Appropriation, fiscal year 2025	\$3,881,383,000
Committee recommendation, fiscal year 2026	3,963,383,000

The Committee recommends \$3,963,383,000 for Military Construction, Defense-Wide, in fiscal year 2026, of which \$82,000,000 is for the following projects in the following amounts:

State	Location	Project	Amount
AL	Anniston Army Depot	General Purpose Warehouse	\$32,000,000
NC	Fort Bragg	SOF Forward Operating Base Freedom Upgrades	44,700,000
NC	Fort Bragg	SOF Joint Intelligence Center	5,300,000

The Committee recommendation also includes not less than the fiscal year 2025 enacted level for the pilot program for minor military construction projects as established by the Fiscal Year 2024 National Defense Authorization Act.

Energy Resilience and Conservation Investment Program (ERCIP).—The Committee directs not less than the fiscal year 2025 enacted level for ERCIP. The Committee supports the Department's efforts to improve energy security, contribute to mission assurance, save energy, and reduce energy costs through ERCIP. The Committee encourages the Department to continue using all available tools and authorities to ensure the timely execution of ERCIP projects. Additionally, as the Department works to achieve base energy independence, the Committee encourages the Department to leverage new energy technologies.

Ramey Unit School Replacement.—The Committee notes the inclusion of funding for the Ramey Unit School Replacement project in the Defense-Wide 2025 to 2029 Future Years Defense Plan and supports the use of funds for the project.

Special Operations Command Pacific (SOCPAC) Headquarters Needs Assessment.—The Committee is aware that SOCPAC has personnel spread across Hawaii due to facility space limitations at its primary headquarters at Camp H. M. Smith. To better assess possible military construction projects that could consolidate these locations, the Committee directs U.S. Special Operations Command to provide a report within 180 days after enactment of this Act summarizing: (1) the operational impacts of having personnel spread across Hawaii, (2) SOCPAC's total square foot and operational requirements for operations on Oahu, and (3) construction options for overcoming facility shortfalls.

USSOCOM Headquarters.—The Committee is concerned that the United States Special Operation Command (USSOCOM) Headquarters is experiencing significant age-related infrastructure shortfalls that are negatively impacting mission assurance and the functional posture of the command. The Committee is aware that the Air Force is coordinating with USSOCOM and stakeholders to

undertake an initial planning charette, and the Committee encourages the continued advancement of planning towards a new headquarters facility.

USSOCOM Infrastructure.—The Committee notes the vital role in addressing rapidly evolving global threats and executing high-priority missions around the world. As operational demands on Special Operations Forces continue to grow, so too does the need for modern, resilient infrastructure to support training, readiness, and force protection. The Committee continues to support funding to replace outdated facilities, expand capacity, and ensure the specialized environments required for mission-specific preparation.

MILITARY CONSTRUCTION, ARMY NATIONAL GUARD

Appropriation, fiscal year 2025	\$398,489,000
Committee recommendation, fiscal year 2026	358,489,000

The Committee recommends \$358,489,000 for the Army National Guard in fiscal year 2026.

42nd Infantry Division Armory Headquarters.—The Committee notes the critical need for the planned renovation and modernization of the 42nd Infantry Division Headquarters in Troy, New York and understands that the State of New York will fully fund the design and contribute \$30,000,000 for the cost of the project. The Committee urges the Secretary of the Army to develop plans to provide the federal cost share for this vital project and keep the Committee informed about progress on the project.

Camp Shelby.—The Committee recognizes the role of Camp Shelby as a mobilization force generation installation and notes the need for additional investment to support rail center operations and handling of classified information.

Lodging Shortfalls.—The Committee continues to be concerned about lodging shortfalls at Army National Guard training centers that support training and readiness activities as well as support training for outside agencies. The Committee encourages the Army National Guard to allocate appropriate funding towards lodging requirements, particularly for installations with new training and readiness requirements.

Medical Readiness.—The Committee notes the key role the Army National Guard plays in medical readiness and supports the use of funds provided for projects that support the Guard's medical readiness mission.

Naval Weapons System Training Facility (NWSTF).—The Committee notes the need for a multiple-purpose machine gun range for use by the Army National Guard that meets the requirements of National Guard Regulation 415–5 at NWSTF Boardman.

MILITARY CONSTRUCTION, AIR NATIONAL GUARD

Appropriation, fiscal year 2025	\$290,492,000
Committee recommendation, fiscal year 2026	210,492,000

The Committee recommends \$210,492,000 for the Air National Guard (ANG) in fiscal year 2026.

The Committee supports the use of funding provided under this heading for construction projects, including planning and design, that enhance aircraft maintenance capabilities, mission effectiveness, mission resilience, and military readiness. The Committee

further notes the need for additional investments in facilities with runways at the end of their service life and encourages ANG to prioritize projects in fiscal year 2026 and future budget requests at facilities where the runway's service lifespan expires in the next four years.

125th Fighter Wing F-35 Beddown.—The Committee notes support for projects required to support the F-35 beddown at Jacksonville International Airport, including facilities and infrastructure related to the safe storing and maintenance of munitions required for the F-35 mission of the 125th Fighter Wing.

Kingsley Field Air National Guard Base.—The Committee notes the need for an adequately sized, properly configured, environmentally safe, and energy efficient academic training center facility for the purpose of conducting flight simulator training in support of the 173d Fighter Wing F-35 flight training mission.

MILITARY CONSTRUCTION, ARMY RESERVE

Appropriation, fiscal year 2025	\$295,032,000
Committee recommendation, fiscal year 2026	305,032,000

The Committee recommends \$305,032,000 for the Army Reserve in fiscal year 2026, of which \$50,000,000 is for the following projects in the following amounts:

State	Location	Project	Amount
KY	Fort Knox	Aviation Support Facility	\$50,000,000

Patrick Space Force Base Clear Water Rinse System.—The Committee notes the inclusion of a clear water rinse system for Patrick Space Force Base on the fiscal year 2025 “Buy List” for the National Guard and Reserve Equipment Account (NGREA) and supports the build out of the allied support infrastructure necessary to operationalize the system.

MILITARY CONSTRUCTION, NAVY RESERVE

Appropriation, fiscal year 2025	\$29,829,000
Committee recommendation, fiscal year 2026	79,829,000

The Committee recommends \$79,829,000 for the Navy Reserve in fiscal year 2026, of which \$50,000,000 is for the following projects in the following amounts:

State	Location	Project	Amount
TX	Naval Air Station Fort Worth	Maintenance Hangar	\$50,000,000

MILITARY CONSTRUCTION, AIR FORCE RESERVE

Appropriation, fiscal year 2025	\$74,663,000
Committee recommendation, fiscal year 2026	37,863,000

The Committee recommends \$37,863,000 for the Air Force Reserve in fiscal year 2026, of which \$3,200,000 is for the following projects in the following amounts:

State	Location	Project	Amount
GA	Dobbins Air Reserve Base	Entry Control Facility	\$3,200,000

NORTH ATLANTIC TREATY ORGANIZATION SECURITY INVESTMENT PROGRAM

Appropriation, fiscal year 2025	\$293,494,000
Committee recommendation, fiscal year 2026	293,434,000

The North Atlantic Treaty Organization Security Investment Program (NSIP) consists of annual contributions by North Atlantic Treaty Organization (NATO) member countries to finance the costs of construction needed to support the roles of the major NATO commands.

DEPARTMENT OF DEFENSE BASE CLOSURE ACCOUNT

Appropriation, fiscal year 2025	\$489,174,000
Committee recommendation, fiscal year 2026	489,174,000

The Committee recommends \$489,174,000 for the Base Closure account.

The Committee continues to be concerned about the extent of per- and polyfluoroalkyl substance (PFAS) contamination at closed U.S. military installations and the Committee recommendation includes not less than \$50,000,000 above the fiscal year 2026 budget request for PFAS remediation. The Committee continues to recognize the Navy's efforts towards the demolition and removal of non-historically designated buildings and structures under Navy control where the sampling or remediation of radiologically contaminated materials have been the subject of substantiated allegations of fraud.

Zeolite for PFAS Remediation.—The Committee recognizes that material zeolite is a promising tool for PFAS mitigation. As the Department of Defense continues to address PFAS contamination on military installations and other affected areas, the Committee urges the Services to consider the utilization of natural zeolite material in future mitigation and cleanup efforts.

FAMILY HOUSING OVERVIEW

Appropriation, fiscal year 2025	\$2,013,854,000
Committee recommendation, fiscal year 2026	2,043,622,000

Family housing construction accounts provide funds for new construction, construction improvements, the Federal government's costs for family housing privatization projects, and planning and design. The operation and maintenance accounts provide funds to pay for maintenance and repair, furnishings, management, services, utilities, leasing, interest, mortgage insurance, and miscellaneous expenses.

Housing Oversight.—The Committee provides an additional \$29,768,000 above the fiscal year 2025 enacted level to expand oversight of the entire housing portfolio, including government-owned and controlled family housing and privatized family and unaccompanied housing. The Committee requests an expenditure plan detailing the planned use of these funds within 30 days of enactment of this Act, including the specific, additional oversight activities these funds above the budget request will allow.

The Committee directs the Services to provide a briefing no later than 120 days after enactment of this Act detailing steps being taken to improve the conditions of each Service's privatized housing

portfolio and an update on the efforts to expeditiously implement the recommendations issued in GAO’s report, “DOD Can Further Strengthen Oversight of Its Privatized Housing Program” (GAO–23–105377), including the current backlog of maintenance requests; a summary of all MHPI tenant complaints; and an updated performance review of each MHPI management company.

Family Housing and CDC Heating and Air Conditioning.—The Committee recognizes the Services’ efforts to improve energy efficiency through scheduled seasonal deactivation of air conditioning and heating systems at its facilities. Certain military installations, deactivate these systems in family housing units and child development centers (CDC). The Committee encourages the Department to examine its energy conservation programs, including where family housing units and CDCs may be excluded from air conditioning and heating restrictions.

FAMILY HOUSING CONSTRUCTION, ARMY

Appropriation, fiscal year 2025	\$276,647,000
Committee recommendation, fiscal year 2026	276,647,000

FAMILY HOUSING OPERATION AND MAINTENANCE, ARMY

Appropriation, fiscal year 2025	\$485,611,000
Committee recommendation, fiscal year 2026	495,369,000

FAMILY HOUSING CONSTRUCTION, NAVY AND MARINE CORPS

Appropriation, fiscal year 2025	\$245,742,000
Committee recommendation, fiscal year 2026	245,742,000

FAMILY HOUSING OPERATION AND MAINTENANCE, NAVY AND MARINE CORPS

Appropriation, fiscal year 2025	\$387,217,000
Committee recommendation, fiscal year 2026	397,217,000

FAMILY HOUSING CONSTRUCTION, AIR FORCE

Appropriation, fiscal year 2025	\$221,549,000
Committee recommendation, fiscal year 2026	221,549,000

FAMILY HOUSING OPERATION AND MAINTENANCE, AIR FORCE

Appropriation, fiscal year 2025	\$336,250,000
Committee recommendation, fiscal year 2026	346,250,000

FAMILY HOUSING OPERATION AND MAINTENANCE, DEFENSE-WIDE

Appropriation, fiscal year 2025	\$52,156,000
Committee recommendation, fiscal year 2026	52,156,000

DEPARTMENT OF DEFENSE FAMILY HOUSING IMPROVEMENT FUND

Appropriation, fiscal year 2025	\$8,195,000
Committee recommendation, fiscal year 2026	8,195,000

DEPARTMENT OF DEFENSE MILITARY UNACCOMPANIED HOUSING IMPROVEMENT FUND

Appropriation, fiscal year 2025	\$497,000
Committee recommendation, fiscal year 2026	497,000

ADMINISTRATIVE PROVISIONS

The bill includes a total of 32 administrative provisions, 28 of which were effective in fiscal year 2025.

Section 101. Prohibits the use of funds for payments under a cost-plus-a-fixed-fee contract for construction where cost estimates exceed \$25,000. An exception for Alaska is provided.

Section 102. Permits the use of construction funds for the hire of passenger motor vehicles.

Section 103. Permits funds to be expended on the construction of defense access roads under certain circumstances.

Section 104. Prohibits construction of new bases in the United States without a specific appropriation.

Section 105. Limits the use of funds for the purchase of land or land easements that exceed 100 percent of value except under certain conditions.

Section 106. Prohibits the use of funds to acquire land, prepare sites, or install utilities for family housing except housing for which funds have been appropriated.

Section 107. Limits the use of minor construction funds to relocate any activity from one installation to another without prior notification.

Section 108. Prohibits the procurement of steel unless American producers, fabricators, and manufacturers have been allowed to compete.

Section 109. Prohibits the use of funds to pay real property taxes in foreign nations.

Section 110. Prohibits the use of funds to initiate a new installation overseas without prior notification.

Section 111. Establishes a preference for United States architectural and engineering services where the services are in Japan, NATO member countries, or countries bordering the Arabian Sea.

Section 112. Establishes a preference for United States contractors for military construction in the United States territories and possessions in the Pacific and on Kwajalein Atoll, or countries bordering the Arabian Gulf, except bids by Marshallese contractors for military construction on Kwajalein Atoll.

Section 113. Requires the Secretary of Defense to give prior notice to Congress of military exercises where construction costs exceed \$100,000.

Section 114. Allows funds appropriated in prior years to be used for new projects authorized during the current session of Congress.

Section 115. Allows the use of expired or lapsed funds to pay the cost of associated supervision, inspection, overhead, engineering and design on those projects and on subsequent claims.

Section 116. Provides that funds for military construction projects are available until the end of the fourth fiscal year following the fiscal year in which funds are appropriated, subject to certain conditions.

Section 117. Allows for the transfer of funds from Family Housing Construction accounts to the Department of Defense Family Housing Improvement Fund and funds from Military Construction accounts to the Department of Defense Military Unaccompanied Housing Improvement Fund.

Section 118. Provides transfer authority to the Homeowners Assistance Program.

Section 119. Requires that funds in this title be the sole source of all operation and maintenance for flag and general officer quarter houses and limits the repair on these quarters to \$20,000 per unit annually without notification.

Section 120. Makes funds in the Ford Island Improvement Fund available until expended.

Section 121. Allows the transfer of expired funds to the “Foreign Currency Fluctuations, Construction, Defense” account.

Section 122. Allows the transfer of funds in accordance with reprogramming guidelines.

Section 123. Prohibits the use of funds for projects at Arlington National Cemetery.

Section 124. Provides funds for certain projects identified in the respective military department’s unfunded priority and cost to complete list.

Section 125. Directs all amounts appropriated to Military Construction (all accounts) be immediately available and allotted for the full scope of the authorized project.

Section 126. Extends the eligibility of unobligated funding for fiscal year 2017, 2018, 2019, and 2020 projects that have not lapsed.

Section 127. Defines the congressional defense committees.

Section 128. Provides additional funds for planning and design for construction improvements to laboratory facilities.

Section 129. Provides funds for planning and design for child development centers.

Section 130. Provides funds for planning and design for barracks.

Section 131. Provides funds for unspecified minor construction for demolition.

Section 132. Prohibits funds from being used to carry out the closure or realignment of Naval Station Guantanamo Bay.

TITLE II

DEPARTMENT OF VETERANS AFFAIRS

Appropriation, fiscal year 2025	\$367,728,616,000
Committee recommendation, fiscal year 2026	435,333,099,000

The Department of Veterans Affairs (VA) provides health care for 9,000,000 veteran enrollees; disability compensation benefits to an estimated 6,094,440 veterans and 562,448 survivors; pension benefits for an estimated 136,678 veterans and 112,179 survivors; life insurance for more than 5,600,000 veterans, servicemembers and their families; educational assistance for nearly 820,000 students; and interment of more than 140,000 veterans and eligible family members in national cemeteries. To serve adequately the nation’s veterans, VA employs more than 450,000 staff, making it one of the largest Federal agencies in terms of employment.

Congressional Oversight of VA’s Actions on Abortion.—The bill prohibits funding to implement, administer, or otherwise carry out the actions in the interim final rule published September 9, 2022. The interim final rule clearly violated Section 106 of the Veterans Health Care Act of 1992 (P.L. 102–585; Title 38 U.S.C. 1710 note).

Contract Cancellations.—The Committee is concerned that the Department cancelled many contracts and purported to reprogram

funding originally dedicated to these contracts without proper analysis on the impacts to the veteran community, or without transparency about which contracts were ended, or proper notification to Congress. If the Department seeks to reprogram previously appropriated funding, Congressional approval is required by law. The Committee directs the Department to provide a report within 60 days of enactment of this Act with a list of the all cancelled contracts since January 2025, the original purpose, recipient, location, and dollar value of each contract, the date to which the contract was originally entered into by the recipient and the Department, and a detailed analysis of the decision-making process that led to the cancellations.

Further, if funds were reprogrammed from cancelled contracts, the report should list the accounts and purpose for which the funds were reprogrammed.

Foreign Born Veterans.—The Committee supports VA's role in the Immigrant Military Members and Veterans Initiative and urges VA to take steps to ensure non-citizen veterans are aware of their options to naturalize as U.S. citizens and provide administrative guidance and assistance with relevant applications and paperwork. The Department is encouraged to continue coordination with the Department of Homeland Security to develop methods that allow the Department to maintain contact with immigrant and non-citizen veterans and ensure that they can access immigration related assistance and other VA assistance and benefits to which they are entitled.

Oversight on Delays in Obtaining DD214s from National Archives.—The Committee is concerned about the prolonged delays veterans face in obtaining their DD214 forms from the National Archives. DD214 is a critical document for veterans, required for accessing benefits, employment opportunities, and other essential services. However, the current processing times for obtaining this document often exceed several months, causing unnecessary hardship and delays in veterans receiving the benefits and services they are entitled to. The Committee directs the Department to work closely with the National Archives and Records Administration (NARA) to identify the root causes of these delays, improve the process, and ensure that veterans receive their DD214s in a timely manner. The Committee requests a brief within 90 days of enactment, identifying reasons for the delays in processing DD214 requests, steps being taken to streamline the request and delivery process, including any improvements to digital record access and electronic submission, and efforts to enhance communication with veterans during the waiting period to keep them informed of the status of their request.

Supporting Pay Transparency for VA Police Officers.—The Secretary shall submit a report within 180 days of enactment of this act to the House and Senate Committees on Appropriations and Committee on Veterans Affairs in the House and Senate on the compensation paid to Department police officers inclusive of their salaries, availability pay under section 5545a of title 5, bonuses to recruit or retain Department police officers, and any additional compensation paid to Department police officers, including the Chief of Police, Deputy Chief of Police, Supervisory Police Officer, Criminal Investigator, Police Detective, Police Officer, Training Of-

ficer, Physical Security Specialist, Security Specialist Assistant, Dispatcher, and Administrative Officer.

Sexual Harassment and Sexual Assault Protections for VA Beneficiaries and Employees.—The Committee directs the Secretary to implement the recommendations laid out in GAO Report 20–387.

Veterans First Contracting Program.—The Committee recognizes the tremendous value of the Veterans First Contracting Program in assisting in the expansion and growth of service-disabled veteran and veteran-owned small businesses. The Committee encourages VA to continue to expand and make mandatory the training of contracting officers in the requirements of the Veterans First Contracting Program, with particular attention being paid to conducting the market research necessary to ensure that service-disabled veteran and veteran-owned small businesses, particularly women and minority veteran-led small businesses, are awarded VA contracts when appropriate.

Veterans in the Pacific.—The Committee directs the Department to continue efforts to improve and expand access to benefits, mental health, preventative and wellness programs, and telehealth, among other programs. The Committee requests a report not later than 90 days after enactment of this Act on the progress made in the prior fiscal year on improving access to such benefits and services.

VETERANS BENEFITS ADMINISTRATION

COMPENSATION AND PENSIONS

(INCLUDING TRANSFER OF FUNDS)

Appropriation, fiscal year 2025	\$177,020,200,000
Fiscal year 2026 advance appropriation (enacted)	227,240,071,000
Committee 2027 advance appropriation recommendation	241,947,603,000

This appropriation provides funds for service-connected compensation payments to an estimated 6,094,446 veterans and 562,448 survivors in fiscal year 2026. In addition, pension payments will be funded for an estimated 150,678 veterans and 112,179 survivors.

The appropriation includes authority to transfer funding not to exceed \$22,816,000 in fiscal year 2026 to General Operating Expenses, Veterans Benefits Administration (VBA) and Information Technology Systems. These funds are for the administrative expenses of implementing cost-saving provisions required by the Omnibus Budget Reconciliation Act of 1990 (P.L. 101–508), the Veterans’ Benefits Act of 1992 (P.L. 102–568), and the Veterans’ Benefits Improvements Act of 1994 (P.L. 103–446). The bill also continues to include language permitting this appropriation to reimburse such sums as may be earned to the Medical Care Collections Fund to help defray the operating expenses of individual medical facilities for nursing home care provided to pensioners.

The Committee recommendation includes \$227,240,071,000 for fiscal year 2026. For fiscal year 2027, the Committee recommendation includes an advance appropriation of \$241,947,603,000.

Customer Experience.—The Committee emphasizes the importance of implementing proper customer experience standards. Continued implementation of these standards includes providing sig-

nificant services directly to the public, identifying and surveying target customers, establishing effective experience standards and tracking internal performance against those standards. The Committee commends current efforts to implement improved customer experience among agencies and directs all agencies funded by this Act to continue developing standards to improve customer experience and incorporate the standards into the performance plans required under 31 U.S.C. 1115.

Ensuring VBA Access for Veterans.—The Committee is concerned about closure of VBA offices in rural areas. Physical VBA offices are crucial in rural areas as veterans have more limited broadband access and transportation options. The Committee directs VA to report VBA offices at risk of closure 180 days prior to VBA realignment, including analysis used as justification of closure, necessary resources needed to prevent closure and the projected realignment of VBA staffers to nearby facilities to impacted congressional districts, as well as VA's corresponding efforts to ensure continued services for impacted veterans in the area.

Signing of Veteran's Death Certificates.—The Committee is concerned that the Veterans Administration is not signing death certificates of all veterans who die of natural causes and who have as their primary doctor a VA physician in a timely fashion. The Committee directs the Department to work in consultation with stakeholders to prepare a report and submit it to the House and Senate Committees on Appropriations within 90 days of enactment of this Act on the average time the Department takes to sign a death certificate for a veterans family upon notice of their passing, the average number of delays lasting longer than 72-hours over the last 5 years, the total number of refusals by VA to sign death certificates and the reasoning behind any denial over the last 5 years, and solutions to ensure that a speedy signature is done and received by the family of our passed veterans.

Veterans Readiness & Employment Program (VR&E) Wait Times.—The Committee is deeply concerned about staff shortages and months-long wait times for the VR&E program. The Committee requests the Department brief both the House and Senate Committees on Appropriations within 180 days of enactment of this Act on the 15 Regional Offices with the longest VR&E wait times, outlining steps that have been taken to date to reduce wait times, and providing policy recommendations to address the problem.

READJUSTMENT BENEFITS

Appropriation, fiscal year 2025	\$13,317,066,000
Fiscal year 2026 advance appropriation (enacted)	20,372,030,000
Committee 2027 advance appropriation recommendation	20,057,841,000

This appropriation finances the education and training of veterans and servicemembers through the Post-9/11 GI Bill and the All-Volunteer Force Educational Assistance Program. In addition, certain disabled veterans are provided with vocational rehabilitation, specially adapted housing grants, and grants for automobiles with approved adaptive equipment. This account also finances educational assistance allowances for eligible dependents of veterans who died from service-connected causes or have a total and permanent service-connected disability, as well as dependents of servicemembers who were captured or are missing in action.

The Committee recommendation includes an advance appropriation of \$20,057,841,000 for fiscal year 2027.

Biomanufacturing Training.—The Committee encourages the Department to engage with an institution of higher education with expertise in and simulated Current Good Manufacturing Practice facilities for the provision of biomanufacturing training to consider the establishment of a program to provide targeted, hands-on, industrial biomanufacturing training for veterans, transitioning service members, and military spouses.

Financial Hardship and Bankruptcy.—The Committee continues to support VA programs that combat the root causes of veteran and dependent financial hardship, which is a known contributory factor to negative outcomes such as mental health issues, substance use disorder, and suicide. The Committee continues to be concerned by an inequity in current bankruptcy law that results in the inclusion of VA and DoD disability benefits in the calculation of a debtor's disposable income, while at the same time excluding Social Security disability benefits for non-veterans.

GI Bill Comparison Tool.—The Committee emphasizes the importance of providing veterans with the necessary information to make informed decisions when selecting institutions of higher education. The Committee urges the Department to continue to monitor and assess the effectiveness of the GI comparison tool, including usage metrics, the frequency that caution flags are checked and updated, and technical performance.

Post 9/11 GI Bill Books & Supplies Stipend.—The Committee acknowledges the increasing need for technology for education as coursework and class materials continue to shift from physical to virtual. Additionally, the Committee recognizes that the books and supply stipend has not been adjusted for inflation in 15 years. The Committee encourages the Secretary to evaluate the need to increase the books and supplies stipend from the current rate of \$1,000 per year to a higher inflation adjusted level.

Skills and Certifications.—The Committee recognizes the importance of expanding job opportunities for veterans after their discharge and encourages the Department to work with other Federal agencies and State licensing bureaus, as appropriate, to evaluate the transferability of DoD skills and certifications, including mechanical skills and certifications, to state certifications to aid in transition to civilian employment.

Technology for Student Veterans.—The Committee understands the importance of remote learning technologies, such as computers and routers for internet access, were widely used so students could continue their studies. House Report 118–122 directed a report within 180 days of enactment of this Act, on the cost, feasibility, and advisability of ensuring student veterans have access to the technologies needed to be successful in school. The Committee is looking forward to receiving this report.

Transition Coordination.—The Committee encourages the Department in consultation with the Departments of Defense and Labor, to coordinate efforts and resources to ensure veterans have a successful transition to civilian life. This includes sharing information on community resources, including nonprofits and Veterans Service Organizations, that are available to veterans and their families. The Committee also urges the Department to explore op-

tions for veterans to access hands-on job placement services that connect them directly with employers, including those offered through successful state and local programs.

Veteran Small Business Education.—The Committee recognizes the importance of supporting veterans pursuing entrepreneurship opportunities, and supports educating veterans on business ownership, especially on how digital tools, including artificial intelligence-enabled business software or cloud computing service that facilitate business operations, processing, payment, or tracking of payroll expenses, human resources, or sales and billing functions can provide efficiencies and productivity enhancements to improve their business success rate by saving time and money. As such, the Committee encourages the Department, in consultation with the Small Business Administration, to educate veterans on the growing digital tools ecosystem to better prepare veterans for an increasingly digital business environment.

Veteran Transition Assistance Grant Program (VTAG).—The Committee continues to support VSTAGP program and its goal of providing comprehensive employment-based resources, mentorship, and professional development to recently separated members of the Armed Forces and their spouses. The Committee encourages the Department to consider small and mid-sized non-profits, that have a strong professional network in their region, when reviewing applicants.

Dependent Education Assistance.—The Committee acknowledges the work and dedication of the Veterans Affairs Survivors and Dependents Educational Assistance (DEA) program. The Committee also recognizes that children of deceased or disabled veterans may require additional tutoring or educational training to prepare for college due to several unique challenges they face. The Committee encourages the Department to explore utilizing DEA funding to assist K–12 students in addressing these challenges to better tailor their services to meet the specific needs of children of deceased or disabled veterans, and ensuring these students their academic success and college readiness. The Department shall brief the Committee 120 days following enactment of this Act on how it could address assisting K–12 students.

VETERANS INSURANCE AND INDEMNITIES

Appropriation, fiscal year 2025	\$147,820,000
Fiscal year 2026 advance appropriation (enacted)	131,518,000
Committee 2027 advance appropriation recommendation	97,893,000

The Veterans Insurance and Indemnities appropriation is made up of the former appropriations for military and naval insurance, applicable to World War I veterans; national service life insurance (NSLI), applicable to certain World War II veterans; servicemember's indemnities, applicable to Korean Conflict veterans; and veterans mortgage life insurance, applicable to individuals who have received a grant for specially adapted housing.

For fiscal year 2027, the Committee recommendation includes an advance appropriation of \$97,893,000.

VETERANS HOUSING BENEFIT PROGRAM FUND PROGRAM ACCOUNT

	Program Account	Limitation on direct loans for specially adapted housing loans	Administrative Expenses
Appropriation, fiscal year 2025	---	(\$500,000)	\$316,742,419
Committee recommendation, fiscal year 2026	---	(500,000)	266,736,892

The purpose of the home loan guaranty program is to facilitate the extension of mortgage credit on favorable terms by private lenders to eligible veterans. This appropriation provides for all costs, with the exception of the Native American Veterans Housing Loan Program, of the Department's direct and guaranteed loans programs.

The Committee recommendation includes \$266,736,892 for fiscal year 2026 for administrative expenses to carry out the Veterans Housing Loan Program.

VA Home Loan Program.—The Committee has been made aware of the Department's decision to abolish the "Participation Rule" which required listing agents to make an offer of compensation to buyer brokers and could potentially disadvantage veterans utilizing the home loan under current rules. The Committee urges the Department to study its current policy of prohibiting borrowers from paying fees or commissions to a real estate agent and determine whether this policy negatively impacts veterans when buying a home. The Department is directed to report these findings to the Committee with 120 days of enactment of this Act.

VOCATIONAL REHABILITATION LOANS PROGRAM ACCOUNT

	Program Account	Limitation on direct loans	Administrative Expenses
Appropriation, fiscal year 2025	\$78,337	(\$2,026,000)	\$460,698
Committee recommendation, fiscal year 2026	45,428	(1,394,442)	507,254

This appropriation covers the subsidy cost of direct loans for vocational rehabilitation of eligible veterans and includes administrative expenses necessary to carry out the direct loan program. Loans of up to \$1,530 (based on indexed chapter 31 subsistence allowance rate) are available to service-connected disabled veterans enrolled in vocational rehabilitation programs when the veteran is temporarily in need of additional assistance.

The Committee recommendation includes \$45,428 for fiscal year 2026 for administrative expenses to carry out the Vocational Rehabilitation Direct Loan program.

NATIVE AMERICAN VETERAN HOUSING LOAN PROGRAM ACCOUNT

Appropriation, fiscal year 2025	\$5,845,241
Committee recommendation, fiscal year 2026	11,872,500

The Native American Veteran Housing Loan Program, as authorized by title 38 United States Code, chapter 37, subchapter V, provides the Secretary authority to make direct housing loans to Native American veterans for the purpose of purchasing, constructing, or improving dwellings on trust lands, including Hawaiian Home Lands. These loans are available to purchase, construct, or improve homes to be occupied as veterans' residences.

The Committee recommendation includes \$11,872,500 for fiscal year 2026, including \$6,865,235 for the cost of direct loans providing \$75,000,000 in loan authority for the principal amount of direct loans pursuant to subchapter V of chapter 37 of title 38, United States Code and \$5,007,265 for administrative expenses for the Native American Veteran Housing Loan Program.

GENERAL OPERATING EXPENSES, VETERANS BENEFITS
ADMINISTRATION

Appropriation, fiscal year 2025	\$3,899,000,000
Committee recommendation, fiscal year 2026	3,876,425,000

The General Operating Expenses, Veterans Benefits Administration (VBA) account provides funding for VBA to administer entitlement programs such as service-connected disability compensation, education benefits, and vocational rehabilitation services.

The Committee recommendation includes \$3,876,425,000 for fiscal year 2026 for General Operating Expenses, VBA. These resources will improve VBA's ability to address compensation and benefit claims. The bill makes available through September 30, 2027, up to ten percent of these funds.

Benefits Usage.—The Committee encourages the Department to include veteran benefit usage into its annual suicide prevention report, including usage of disability compensation, education and employment, home loan and foreclosure assistance benefits, as well as participation in housing and food security programs. Additional data may enable a better understanding of the correlation between benefit use and suicide and allow for more effective programs to assist veterans.

Compensation and Pension Exams.—The Committee understands the important role of contractors in providing medical disability exams. These exams are necessary for Veterans to receive the benefits that they have earned. The Committee urges the Department to apply standard timeliness and quality performance metrics across contract providers and VHA providers to ensure quality exams for all Veterans. Further, VA is directed to report to the Committee on the impact on VHA healthcare wait times before committing additional VHA providers to the delivery of medical disability exams.

Digitizing Veteran Records.—The Committee commends the efforts of VBA, in partnership with the National Archives and Records Administration, to address the backlog of veterans' records requests by creating digital copies of records that currently exist only in hardcopy form at the National Personnel Records Center (NPRC). The Committee encourages VBA to continue its efforts to create digital copies of veterans' records housed at NPRC. The Committee requests the Department update the analyses required by House Report 117–391 on resources needed to digitize all hard copy-only veteran records at NPRC not later than 90 days after enactment of this Act.

Equitable Relief.—The Committee understands the Department is working to implement new systems and protocols to eliminate instances of administrative error. However, as the Department enacts system-wide reforms, ending equitable relief for veterans who were deemed eligible for benefits in error would place an unfair burden on veterans and their families. The Secretary is encouraged

to continue to grant or extend equitable relief to eligible veterans initially deemed eligible in instances of administrative error. Not later than 120 days after the enactment of this Act, the Secretary is directed to submit a report containing a statement as to the disposition of each case recommended to the Secretary for equitable relief under section 503 of title 38, United States Code during the preceding calendar year to the House and Senate Committees on Appropriations.

Information for Toxic-Exposed Veterans.—The Committee encourages VA to ensure resources and materials provided by VA to toxic-exposed veterans be made available in the most commonly spoken languages in the United States, as required by the Veterans and Family Information Act (P.L. 117–62).

Mileage Reimbursements Kiosks.—The Committee is concerned with the removal of mileage reimbursement kiosks and requests the Department to report to the House and Senate Committees on Appropriations on the recent removal of mileage reimbursement kiosks from several VA facilities, which have been replaced by the online Beneficiary Travel Self Service System. The Committee urges the Department to reassess removing kiosks.

Military Sexual Trauma (MST).—The Committee is frustrated by the findings of the August 2021 OIG Report titled “Improvements Still Needed in Processing Military Sexual Trauma Claims” which found VBA has failed to ensure all claims processors handling MST-related claims have received specialized MST training. The Committee urges VBA to prioritize specialized MST training for claims processors, and to continue to involve MST survivors in the development of specialized training.

Over-The-Counter-Hearing Aids.—The Committee notes that over 2.7 million veterans are compensated for hearing loss and tinnitus, and noise exposure during military service being a major factor. The Committee encourages VA to reassess its current model for hearing aids. The lower cost of over the counter (OTC) hearing aids has the potential to reduce financial strain on VA’s budget, freeing up resources to invest in other critical areas of veteran care and support.

VETERANS HEALTH ADMINISTRATION (VHA)

The Department operates the largest integrated medical care delivery system in the United States, providing care at nearly 1,300 health care facilities, including 171 medical centers and more than 1,100 outpatient sites to more than 9,000,000 veterans enrolled in VA health care program.

Funding for veterans’ health care, VA research, and the Veterans Health Administration are provided through five discretionary accounts and the mandatory Cost of War Toxic Exposure Fund. The discretionary accounts are Medical Services, Medical Community Care, Medical Support and Compliance, Medical Facilities, and Medical and Prosthetic Research.

For fiscal year 2026, the Budget requested a total of \$134,439,000,000 for veterans’ medical care, including funding for medical care for the treatment of conditions related to toxic exposures.

In fiscal year 2026, VA will collect an estimated \$4,580,000,000 in the Medical Care Collections Fund.

The Committee provides \$943,000,000 for Medical and Prosthetic Research for fiscal year 2026, equal to the requested level.

The Committee provides \$122,258,000,000 in advance for fiscal year 2027. The discretionary advance appropriations is in conjunction with the Toxic Exposures Fund (TEF) mandatory funding of \$52,676,000,000 in 2026.

CoPay Costs.—As part of the efforts to ensure that services delivered by the Veterans Health Administration remain affordable to veterans, the Department is directed to provide the Committee an update on trends in the number of veterans that are subject to copays under the Veterans Health Administration over the last two years, the annual average amount of copays paid by veterans subject to a copay for healthcare services, and the top ten services subject to a copay within 90 days of enactment of this Act.

Dispute Resolution.—The Committee urges VA to ensure that veterans are advised of their rights to contest VA billing charges and determinations and of the step-by-step process for disputes. VA should ensure this information is available online and in publicly accessible areas at each VA medical center, and that it is made available in several commonly spoken languages.

Essential Medical Devices.—The United States' manufacturing capacity for essential medical devices is at serious risk due to organized efforts by Chinese manufacturers to enter the U.S. market in response to inflationary pressures faced by U.S.-based manufacturers, distributors, and providers. The current shift toward purchasing Chinese-made medical devices is drastic and occurring at a pace that will leave U.S. hospitals dependent on Chinese supplied devices. The Committee urges VA to purchase essential medical devices, like needles and syringes, from U.S. manufacturers or allied trading partners. The Committee directs the Department to submit a report to the House and Senate Committees on Appropriations not later than 90 days after enactment of this Act on the percentage of Chinese made devices for the 96 device medical countermeasures published by the Food and Drug Administration in 2020. The report should also include specific recommendations on how the Department can reduce its dependency on Chinese medical devices, increase the domestic supply chain, while safeguarding against shortages.

In-Vitro Diagnostic Testing for Veterans.—The Committee recognizes that in-vitro diagnostics, tools used in health care to detect diseases, infections, and other medical conditions by analyzing specimens taken from the body, provide valuable information to health care providers for accurate diagnosis, treatment planning, and monitoring of patients' health.

Native Hawaiian, Pacific Islander and United States-Affiliated Pacific Islander (NHPIUSAPI) Veterans Health.—The Committee continues to support VA Center for NHPIUSAPIs. The Committee encourages the Department to partner with universities in the Pacific region focusing on issues unique to the NHPISAPI community.

Timeliness of Care at VA Facilities.—The Committee recognizes the critical need for quality and timely health care for veterans. The Committee directs the Secretary to submit a detailed report to the House and Senate Committees on Appropriations within 180 days of the enactment of this Act regarding the average waiting periods experienced by veterans seeking health care services through

VA hospitals. This report should encompass data collected from various VA healthcare facilities nationwide, including to the extent possible non-VHA operated clinics, analyzing both the duration veterans wait from initial contact to their first appointment and any subsequent waits for further medical treatments. The data presented in this report should be broken out by state to facilitate a clear understanding of regional disparities and target improvements effectively.

MEDICAL SERVICES

Fiscal year 2025 enacted level	\$71,000,000,000
Fiscal year 2026 advance appropriation (enacted)	75,039,000,000
Committee 2027 advance appropriation recommendation	59,858,000,000

The bill includes \$59,858,000,000 for advance fiscal year 2027 funding for Medical Services. The Committee has included bill language to make \$2,000,000,000 of the Medical Services advance appropriation for fiscal year 2026 available through September 30, 2027.

Allocation of Health Funding.—The Committee continues to request a report each year, not later than 30 days after the Department allocates the medical services appropriation to the VISNs, that identifies: (1) the amount of general purpose funding that is allocated to each VISN; (2) the amount of funding that is retained by central headquarters for specific purposes, with amounts identified for each purpose; and (3) the amount of funding that is retained by each VISN before allocating it to the medical centers, identifying separately the amounts retained for purposes such as network operations, network initiatives, and emergencies.

Changes in Funding Requirements Due to Modeling.—The Committee expects the Department to continue to include in the sufficiency letter required by section 117(d) of title 38, United States Code, which is due to the Congress on July 31 of each year, a description of any changes exceeding \$250,000,000 in funding requirements for the Medical Services account resulting from the spring recalculation of the Enrollee Healthcare Projection Model.

Support for FAS Veterans.—Since the passage of the Consolidated Appropriations Act, 2024 (Public Law 118–42), the Department is no longer restricted from providing services to veterans residing in the Freely Associated States (FAS), including, but not limited to, direct care from VA providers, telehealth, and care through contracts with community providers, and shipping medications to the FAS. The Committee requests a brief within 60 days of enactment of this Act with the estimated cost and the plan for implementing this law in fiscal year 2026.

Treatments for Hypertension.—The Committee is concerned by the prevalence of hypertension, or high blood pressure, and uncontrolled hypertension across the veterans population. In light of recent advancements in hypertension treatment, such as FDA-approved renal denervation technologies, the Committee is interested in understanding the Department's current initiatives and resources allocated to addressing hypertension and uncontrolled hypertension within the Veteran community. The Committee requests a report be submitted to the House and Senate the Committees on Appropriations within 180 days of enactment of this Act regarding programs and services VA has in place to ensure that veterans

with hypertension, including uncontrolled hypertension, receive comprehensive and timely care, including access to specialist consultations and the integration of innovative treatments within its healthcare facilities nationwide.

CANCER AND RARE DISEASES

Advanced MRI-based Solutions.—The Committee recommends that to ensure access to advanced care for all veterans, VA Innovation Ecosystem (IE) include in its fiscal year 2026 portfolio activities expanding VA healthcare system's infrastructural reach to enrolled veterans residing in geographically underserved areas, including rural and highly rural. The Committee would like IE to engage industry with community stakeholders to co-develop transformative, highly deployable, mobile, and scalable advanced MRI-based solutions to identify, stratify, and manage the highly prevalent metabolic disease burden in VA population.

Cancer Screening at Veterans Affairs Medical Centers.—The Department is encouraged to ensure its healthcare providers screen for the numerous types of cancers that veterans experience so they can receive the best possible care.

Creutzfeldt-Jakob Disease (CJD) Monitoring.—The Committee continues to urge the Department to utilize reference data from existing medical records of veterans to determine the percentage of veterans who have more frequent or unexplained symptoms associated with CJD compared to the civilian population. This data could be helpful in clarifying the extent and specifics of the medical issues suffered by veterans from exposure to CJD.

Dermatological Care for Veterans.—The Committee is concerned by recent research studies, including those by the National Institutes of Health and the Journal of American Academy of Dermatology, regarding the increased risk of skin cancers in Veterans. Servicemembers' increased UV radiation exposure, lack of sun protective measures, and over two decades of deployments to regions in close equatorial proximity have placed veterans at higher risk for melanoma and other skin cancers. Veterans are also more likely to be diagnosed with advanced-stage skin cancers than the civilian population due to less frequent skin checks and access to specialized care. The committee supports continued access dermatology screening, dermatologic preventative care, and trained Mohs micrographic surgeons.

Expanding Lung Cancer Screening for Veterans.—The Committee recognizes the importance of early detection and timely diagnosis of cancers and encourages the Department to review and update its approach to lung cancer screening to optimize veterans' access to screenings given the unique risk factors and evolving demographics for this patient population. As part of this update, the Committee encourages the Department to issue a request for information and corresponding public docket to receive information and recommendations regarding the latest lung cancer research, data, and clinical best practices to inform the updates to the Department's lung cancer screening guidelines and update lung cancer screening guidelines to address those exposed to toxic hazards.

Improving Early Detection of Esophageal Cancer for Veterans.—The Committee recognizes that Veterans are four times as likely to develop esophageal cancer, one of the deadliest and fastest-growing

cancers, and that early detection saves lives. Despite technological advancements, the current standard of care for surveillance and diagnosis misses many cases due to its limited sample collection as well as pathologist subjectivity. The Committee urges the Department to implement enhanced sampling technology, utilizing a specialized brush, and accompanied by computer imaging with artificial intelligence, to identify abnormalities missed by the current standard of care and as a result identify patients for treatment at an earlier stage.

Low Helium MRI.—The Committee recognizes that our nation's helium stockpile is running dangerously low, jeopardizing Americans' access to diagnostic MRI exams, potentially leading to false or missed readings and diagnosis, in addition to risks to other important technologies. The Committee recognizes technology advancement in the industry that has led to the development of low helium machines (LH-MRI) to enable fast imaging for reduced cost to taxpayers with high resolution for improved diagnosis. Converting to LH-MRI reduces the amount of helium used by MRI machines by 95.5% and removes the need for helium refills and top offs over the lifetime of the system. The Committee encourages the use of LH-MRI machines to reduce our dependency on helium in the medical field for access to and diagnosis with MRI.

Medical Companion Program.—The Committee has heard from veterans about barriers to care for undergoing outpatient or ambulatory procedures using sedation or anesthesia that require a responsible adult available to assist in their care before and after the procedure. The Committee encourages the Department to support the development of more Medical Companion programs across the VHA system.

Molecular Diagnostics and Precision Oncology.—The Committee believes that every veteran with cancer deserves the highest quality and most medically advanced diagnosis and treatment available, and the Committee commends the Department's on-going Precision Oncology Program. The Committee continues to support the precision oncology clinical services, including molecular diagnostics for Veterans and directs that not less than \$30,300,000 be utilized for molecular diagnostics, the Department to provide a report on its progress within 120 days of enactment.

Reducing Health and Economic Burden of Chronic Liver Disease Among Veterans.—The health and economic burden of chronic liver disease is growing rapidly among veterans, fueled by the prevalence of obesity and related metabolic disorders. The Department mandates liver biopsy to confirm diagnosis of metabolic dysfunction-associated steatohepatitis (MASH) to authorize the use of new drug therapies. The Committee urges the Department to evaluate the impacts of therapy, including pharmaceutical and/or lifestyle measures, with the use of new, clinically validated, FDA-cleared, multiparametric MRI imaging solutions to diagnose, monitor, and improve management of veterans with MASH, while avoiding the need for biopsy in many patients.

CAREGIVER SUPPORT PROGRAM

Caregivers Program.—The Committee provides not less than fiscal year 2005 for the caregivers program. The Committee continues to require quarterly reporting on obligations for this program.

Caregiver Assistance Eligibility.—The Committee recognizes the important role of family caregivers in supporting the health and wellness of veterans. The Committee directs VA to report to the House and Senate Committees on Appropriations within 180 days of enactment of this Act on the feasibility, including cost estimates, of expanding eligibility for the Program of Comprehensive Assistance for Family Caregivers and the Program of General Caregiver Support Services to include veterans with lower continuous care needs and disability ratings.

CENTERS OF EXCELLENCE

Epilepsy Center of Excellence.—The Committee encourages the Department to ensure that all veterans with epilepsy are comprehensively evaluated at a VHA Epilepsy Center of Excellence to identify drug-resistant epilepsy patients who may be candidates for FDA-approved non-drug therapies.

Neurology Centers of Excellence.—The Committee recognizes the increasing number of veterans affected by neurologic conditions, including but not limited to epilepsy, headache, multiple sclerosis, and Parkinson's disease, and therefore provides \$87,200,000 for the Neurology Centers of Excellence. This includes \$29,212,000 for the Epilepsy Centers, \$32,700,000 for the Headache Centers, \$6,540,000 for the Multiple Sclerosis Centers, and \$17,440,000 for the Parkinson's Disease, Research, Education and Clinical Centers.

The Neurology Centers of Excellence provide essential innovative clinical care, education, and research efforts focused on these conditions. The Committee applauds the Department for recent investments into the headache, multiple sclerosis, and Parkinson's disease centers and acknowledges the advancement and expansion the Centers have begun. The Committee encourages further investment and collaboration of the Centers across disciplines and urges the Department to allocate robust funding for the Neurology Centers of Excellence for maintenance and expansion. The Committee also directs the Department to report back the use and allocation of funds for each Center within 120 of enactment of this Act.

COLLABORATIONS AND PARTNERSHIPS

Academic Collaborations at Community Based Outpatient Clinics (CBOC).—The Committee encourages VA to expand academic collaborations with CBOCs, as they provide valuable patient care and access to services that can be strengthened by collaboration with educational institutions. Through clinical traineeships and research fellowships, emerging health professionals can gain a better understanding of veterans' specific healthcare needs, improve patient outcomes, advance specialized research, and increase the talented workforce pipeline. VA is encouraged to consider including public academic medical centers in CBOC collaborations.

Increasing Veterans Enrollment in Medicare.—The Committee is aware that information gaps exist for some veterans related to the differences between hospital care and medical services available in VA system versus coverage provided under Medicare. The information gaps may have resulted in some veterans receiving late-enrollment penalties through the Medicare program. The Committee encourages the Veterans Health Administration to work with the Centers for Medicare and Medicaid Services and the Department of

Health and Human Services to ensure that veterans have accurate information regarding the differences between VA system and Medicare coverage, including for prescription drugs.

Private Sector Non-Profit Partnerships.—The Committee is aware of the efforts of private non-profit organizations to support veterans and their families in civilian life, lower veteran suicides, and make them aware of the benefits they earned for their service. The Committee encourages the Department to build upon its existing partnerships and seek opportunities to establish new ones. The Committee is interested in partnerships that seek to offer sustainable solutions, improve the quality of civilian life, and seek to improve veteran outreach to connect with those who may have slipped through the cracks.

Veterans Access to Long-Term Care.—The Committee is aware of the Department's support for extending exemptions to providers, including long-term care, operating pursuant to an agreement with VA to improve veterans' access to care. The Committee is concerned that any additional requirements imposed on the Department's community care providers will make it more difficult to recruit and retain these vital partners. The Committee encourages the Department to work with the Department of Labor to seek exemptions for Veterans Affairs Health Benefits Providers from its authority, similar to TRICARE providers, in order to increase veterans' access to care.

Whole Family Care Partnerships.—The Committee is aware of the efforts of private organizations to support veterans and their families and recognizes that they can sometimes provide services, such as counseling and wellness programs, for the families of veterans that the Department cannot. Recognizing that Congress, the Department, and private organizations share the same goal of supporting veterans, the Committee directs the Department to build upon its existing partnerships and seek opportunities to establish new ones. The Committee is particularly interested in partnerships related to mental health, including the mental health of veterans' families, and provides up to \$2,500,000 to increase outreach to this in-need underserved population.

DENTAL CARE

Dental Care.—The Committee directs that not less than fiscal year 2025 enacted amounts be used to provide dental care for veterans.

Dental Vans.—The Committee notes that many veterans residing in rural areas must travel long distances to access quality dental and oral care. Within 180 days of enactment of this Act, the Committee requests the Department brief the Committee on the feasibility of deploying mobile dental cleaning vans, in partnership with any appropriate federal agencies, academic institutions, public, or private organizations, to provide pop-up dental cleaning services across rural, remote locations to reach veteran populations.

Veterans Oral Health.—The Committee understands that veterans may experience a large oral disease burden, and therefore an integrated and whole-person approach is needed to prevent and manage oral disease in this population, which may also enable cost savings in VA Health Care at large. The Committee looks forward to receiving the report on the Department's assessment of its oral

healthcare program and its ability to meet current and future needs as required by House Report 118–122.

DIABETES CARE

Reducing Diabetes-Related Amputations in Veterans.—The Committee is encouraged by advancements in wound care technologies aimed at addressing diabetic foot ulcers (DFUs), which present a significant health risk and are the leading cause of lower-extremity amputation in veterans. The Committee directs the Department to explore methods that can be used for wounds such as diabetic ulcers, venous ulcers, burns, and pressure wounds and can lead to improved outcomes while reducing long-term costs. The Committee requests that VA provide a report within 90 days of enactment of this Act on its findings and potential cost savings.

Reducing Type 2 Diabetes in Veterans.—The Committee commends the Department for actively engaging with industry partners in a study using telehealth to provide individualized ketogenic nutrition programs and medical support to reduce the incidence of diabetes in VA patients. The Committee applauds the effectiveness of the study at reducing patient dependence on diabetes medication and the clinical improvements achieved by Veterans engaged individualized ketogenic nutrition programs. The Committee is aware of existing plans within the Department to expand ketogenic diabetes telehealth services beyond the pilot study to address the healthcare needs of Veterans living with Type 2 diabetes. The Committee encourages the Department to sustain and expand industry partnerships and programs focused on ketogenic diabetes telehealth services to support the health and quality of life of our Nation's Veterans.

Reducing Veteran Insulin-related Adverse Events.—The Committee encourages the Department to explore establishing a pilot program to improve glycemic management in VA medical centers. The pilot should target reductions in severe hyper- and hypoglycemia in hospitalized patients and consider existing commercial technologies that are FDA-cleared and proven to reduce patient length of stay and readmissions, integrate with existing electronic health record systems, and reduce administrative burden on hospital staff.

EMERGING AND NOTABLE HEALTHCARE ISSUES

Dialysis.—Over 18,000 veterans receive dialysis through the National Dialysis Services Contract. The Committee appreciates the Department's commitment to ensure care is not disrupted or diminished for the veterans who receive treatment. The Committee looks forward to working with the Department to utilize a value-based dialysis payment model.

Diagnosing and Treating Sleep Disorders.—The Committee encourages the Department to require sleep disorder diagnosis and treatment related study within the current Continuing Medical Education (CME) requirements of VA physician workforce to ensure that veterans seeking treatment for sleep disorders are appropriately diagnosed and treated to prevent compounding mental health disorders as well as to lower the high risk of cardiovascular disease which is affiliated with sleep disorders.

Fall Prevention.—The Committee appreciates the work the Administration has done to address and reduce fall risks in older veterans. The Committee encourages the Administration to expand its work on fall prevention.

Needle Stick Injuries.—The Committee remains interested in the Department's efforts to reduce or eliminate needlestick injury among caregivers and staff at VA facilities. The Committee encourages VA to use the most-up-to-date needle destruction technology.

Nuclear Medicine Quality Improvements.—The Committee notes that the Nuclear Regulatory Commission (NRC) has confirmed nuclear medicine extravasations can result in radiation-safety-significant doses to patients and is engaged in rulemaking to require medical event reporting of extravasations. The Committee encourages VA nuclear medicine facilities to monitor injection quality, image extravasations, conduct dosimetry, and notify patients when large extravasations occur.

Supporting Elderly Veterans Through Geriatric Patient Aligned Care Teams.—The Committee understands that there are currently more than 11 million aging veterans across the United States, making Geriatric Veterans the largest current demographic of those who have served. The Committee urges the Department to expand the Geriatrics Patient Aligned Care Team model to all medical centers and community-based outpatient clinics deemed feasible and needed.

Veterans Transportation.—The Committee supports the Department's programs that provide veterans with transportation to VA medical facilities and make it easier for veterans to receive medical care and encourages VA to explore options to strengthen and sustain the Volunteer Transportation Network, such as increased funding to recruit and retain drivers and provide vehicle maintenance.

HEALTHCARE TECHNOLOGIES

Bioelectronic Medicine for Veterans.—The Committee recognizes that Bioelectronic Medicine has the potential to harness the body's electrical signaling to advance treatments that save lives and lower medical expenditures. Accelerating studies, additional data collection, and the development and adoption of novel applications for Bioelectronic Medicine combined with machine learning and artificial intelligence (AI) can address challenging and expensive diseases by personalizing treatments and improving therapy delivery. The Committee encourages the Department to ensure that combined Bioelectronic Medicine and AI technologies are available to veterans.

Digital Quality Measures.—Health care quality measures currently rely on manual collection, exchange, management, and analysis that adds significant cost to VA health care. Digitizing health care quality measures will lower health care costs, decrease provider burden, increase transparency, and improve patient outcomes. The Department is encouraged to explore testing digital reporting methods for quality measures and consult with Centers for Medicare and Medicaid Services.

Medical Image Exchange.—The Committee applauds VA facilities in 17 of 18 VISNs that have deployed a modern software platform that supports bi-directional exchange of medical images, diagnostic

reports, and other clinical data between VA facilities, community providers, and federal partners. The Committee encourages the Department to expand this software's connections to Indian and tribal health clinics and work with the Department of Defense to expedite connections with military treatment facilities.

PhAIMIS.—The Committee recognizes the opportunity that IT modernization provides to realize cost savings and efficiency. Further, the Committee appreciates efforts by the Department to modernize supply chains to achieve these goals. The Committee encourages the Department to consider utilizing the Pharmacy Artificial Intelligence Managed Inventory System” (PhAIMIS) program and modernize the Supply Chain Master Catalog, utilizing commercial solutions and competition to maximize the benefit to Veterans and taxpayers.

HOMELESS ASSISTANCE PROGRAMS

The Committee provides \$3,459,000,000 for VA homeless assistance programs. An estimated \$12,007,323,000 is provided for homeless veterans treatment costs.

Programs to assist homeless veterans include the Homeless Providers Grant and Per Diem (GPD), Health Care for Homeless Veterans (HCHV), the Domiciliary Care for Homeless Veterans, the Supportive Services for Low Income Veterans and Families (SSVF), Veterans Justice Outreach Homeless Prevention (VJO), Compensated Work Therapy, and the Department of Housing and Urban Development-Department of Veterans Affairs Supported Housing (HUD-VASH) programs.

Cost of Care for Veterans' Homes.—The Committee is concerned with the current reimbursement rate for state and non-profit run Veterans' Homes. The Committee recognizes that the costs associated with Veterans' Homes are substantial due to the high acuity level of the veteran population served, and that current VHA rates are inconsistent with the current cost of care. The Committee requests a report, not later than 90 days following enactment of this Act, outlining how current reimbursement rates are calculated, how VHA makes locality adjustments, how the VHA works to reduce the cost of prescription drugs for veterans in homes, and recommended legislative changes for Congress to consider.

Healthcare for Homeless Veterans.—The Committee notes the benefits of the Homeless Patient Aligned Care Team (HPACT) program and encourages VA to expand this program to additional sites, including rural areas, and to consider additional services to improve the program. The Committee urges the Department to explore options to expand this program to additional sites, including cost estimates, with its fiscal year 2027 budget request.

Homeless Veterans in the Southwest.—The Committee continues to direct VA to work with the Department of Housing and Urban Development to develop strategies and recommendations for addressing veteran homelessness including the Southwest and to take into account undercounted veterans when awarding HUD-VASH vouchers. The Committee appreciates VA's efforts to implement strategies to decrease veteran homelessness in the Southwest.

HUD-VASH Case Management.—The Committee recognizes the value and impact of the HUD-VA Supportive Housing (VASH) program, which serves veterans experiencing homelessness and pairs

each HUD affordable housing voucher designated for veterans with intensive case management from VA to assist with benefits and income, mental healthcare, recovery services, and permanent housing stability. Case management services are critically important to the function of the program, and public housing authorities rely on VA Medical Centers' referrals to house veterans. Existing requirements mandate that a veteran must receive VA case management services to receive a HUD-VASH voucher. The inadequacy of staff for case management has contributed to the ongoing underutilization of HUD-VASH vouchers. The Committee recommends an increase in staffing for case management services to continue to improve the rate of lease referrals and to account for increased staffing costs and recent expansions in eligibility.

Legal Assistance for the Supportive Services for Veteran Families Program.—The Committee continues to encourage the Supportive Services for Veteran Families [SSVF] program to work with grantees to expand their legal service offerings, particularly in rural areas where access to private legal assistance can be limited.

Recovery-Oriented Care.—The health and well-being of the Nation's men and women who have served in uniform is the highest priority for the Department. Mental health care at VA comprises an unparalleled system of comprehensive treatments and services to meet the needs of each Veteran and the family members who are involved in the Veteran's care. The Committee notes these services support veteran resilience, identify and treat mental health conditions at their earliest onset, address acute mental health crises, and deliver recovery-oriented treatment.

SSVF-HVRP Coordination.—The Committee urges the Department to coordinate with the Department of Labor to maximize the impact of the Supportive Services for Veteran Families (SSVF) program and the Homeless Veterans' Reintegration Program (HVRP). The Departments are encouraged to provide grants to eligible entities with capabilities for delivering services under both programs.

Tiny Homes.—The Committee notes the success of the tiny home village model by multiple veterans service organizations (VSOs) and encourages VA, in coordination with the Department of Housing and Urban Development to support this work and facilitate the creation of additional villages of tiny homes villages within VA's existing Grant and Per-Diem (GPD) program.

Veterans At-Risk of Homelessness Data.—The Committee notes that homelessness data may currently undercount women veterans with children. The Committee encourages the Department to work with the Department of Housing and Urban Development's Continuums of Care to include data on veterans at-risk of homelessness within Section 5: Veterans Experiencing Homelessness of the Annual Homelessness Assessment Report (AHAR) to Congress.

INTIMATE PARTNER VIOLENCE ASSISTANCE PROGRAM

Intimate Partner Violence Program (IPV).—The Committee continues to support the Department's efforts to expand its IPV program, which provides a holistic approach that involves understanding, recognizing and responding to the effects of all types of trauma, with the ultimate goals to end violence, prevent further violence, and promote healthy relationships.

MENTAL HEALTH PROGRAMS

The Committee provides \$16,380,187,000 for mental health programs. Of the total, \$3,161,426,000 is for suicide prevention and treatment programs, including \$698,000,000 for suicide prevention outreach \$306,683,000 for the Veterans Crisis Line, and \$1,500,000 for the expansion of Mental Health Residential Rehabilitation Treatment Programs.

The Committee continues to direct the Department to focus on efforts to address parking lot suicides and connect veterans to care.

The Department is directed to provide a report to the Committee, not later than 90 days after enactment of this Act, identifying a detailed expenditure plan for all suicide outreach and treatment programs and how VA is meeting the Committee's directives.

Agritherapy.—The Committee supports efforts to train veterans in agricultural vocations, while also tending to behavioral and mental health needs with behavioral healthcare services and treatments from licensed providers. The Committee urges the Department to consider including agritherapy as a Complementary and Alternative Medicine therapy.

Depression and Precision Medicine.—The Committee recognizes that depression is one of the most common conditions associated with military service and combat service. Further, the risk of suicide increases with this diagnosis and each time a veteran tries and fails a medication. The Committee is encouraged by ongoing VA-sponsored genetic testing research to aid in depression treatment selection; however, veterans still have less access than Medicare beneficiaries to precision medicine tools. The Committee urges the Department to ensure the procurement of pharmacogenomic tests for use in the treatment of depression if they have been shown to improve health outcomes of veterans in clinical trials.

Faith Based Digital Applications Impact on Mental Health.—The Committee understands that recent data has shown that the use of digital, faith-based applications can have a measurable impact on mental health and wellness. The Committee urges the Department to review the effectiveness of such applications and requests a report on findings within 180 days of enactment of this Act.

Hyperbaric Oxygen Therapy.—The Committee urges the Department to research the efficacy of hyperbaric oxygen therapy (HBOT) as a treatment for post-traumatic stress disorder and traumatic brain injury and should permit case-by-case referrals for veterans to receive HBOT in the community.

Mental Health Treatment.—The Committee commends the Department of Veterans Affairs for its innovative implementation of immersive technology to improve Veterans' health care experiences. Immersive technology is currently being used in over 200 VA Medical Centers and Facilities across all 50 states, American Samoa, Guam, and Puerto Rico. Immersive technologies have proven effective in treating Veterans with difficult-to-treat post-traumatic stress disorder, depression, stress, and anxiety. The Committee encourages the Department to consider how the use of immersive technology can be used to expand veterans' access to these critical healthcare services.

Military Sexual Assault.—The Committee recommends that all veterans seeking treatment services are screened for sexual assault

using an evidence-based screening tool to successfully treat those who have experienced assault.

Patient Confidentiality.—The Committee recognizes that VA provides mental health services for posttraumatic stress disorder (PTSD), psychological effects of military sexual trauma (MST), depression, grief, anxiety, and other needs. It is essential that mental health clinicians employed or contracted by VA who are facing return-to-office directives be provided appropriate spaces to work and provide care to patients where confidentiality will not be breached.

Peer Support.—The Committee recognizes the critical role that peer support services play in helping veterans manage mental health challenges, navigate the transition to civilian life, and build community connections. The Committee urges the Department to continue expanding access to peer support programs across VA and to ensure that veterans are aware of the full range of available services. The Committee directs the Department to provide a report to the House and Senate Committees on Appropriations within 180 days of enactment of this Act outlining existing peer support tools and programs, including but not limited to Peer Specialist initiatives, Veteran Peer Support Networks, and VA-sponsored peer mentoring efforts. The report should also identify any gaps in peer support services and make recommendations for improving outreach, effectiveness, and veteran engagement.

Veterans Crisis Line (VCL).—The Committee is concerned about the continued functionality, accessibility, and performance of the VCL. The Committee recognizes the critical role of VCL personnel, and the importance of uninterrupted crisis support for veterans. The Committee directs the Department to submit a report to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this Act. The report shall include: (1) VCL staffing levels and service capacity; (2) performance metrics over the same period, including call answer rates, average wait times, and referrals to suicide prevention coordinators; (3) any contingency plans developed or implemented to maintain continuous crisis line functionality and workforce stability; and (4) steps taken to ensure alternative access to support or follow-up care for veterans who may have been unable to connect with VCL during or after this period.

MILITARY TOXIC EXPOSURE RESEARCH PROGRAM

The bill provides resources for research on military environmental exposures. The Committee supports efforts to improve diagnosis and treatment of conditions resulting from toxic exposures and appreciates the work of the Health Outcomes Military Exposures (HOME) program, the Office of Research and Development, and other VA program offices to increase attention to this issue.

The Committee encourages the Department to continue research on the effects of and treatments for veterans exposed to toxins, such as Agent Orange, open burn pits, PFAS, radiation, and asbestos, during the course of their active-duty service. The Committee also urges the Department to utilize reference data from existing medical records to determine how veterans who served in areas where toxins were dispersed may have more frequent or unexplained diseases compared to the civilian population.

Airborne Hazards and Burn Pits Center of Excellence.—The Committee provides \$15,165,000 and continues to support the Airborne Hazards and Burn Pits Center of Excellence on diagnoses, mitigation, and treatment of conditions related to airborne hazards and burn pits.

Colorectal Cancer Screening.—Colorectal cancer is the fourth most common cancer diagnosis among our nation's veterans. The Committee recognizes that early detection with screening is the most effective tool available to help prevent thousands of cancer deaths and that detecting cancers in earlier stages when they are most treatable saves lives, as well as providing cost savings for the patient and the system. The Committee urges the Department to review its policy related to colorectal cancer screening and take action to align it with the nationally recognized guideline recommendations from the United States Preventive Services Task Force (USPSTF), National Comprehensive Care Network, and the American Cancer Society and explore additional research on the prevalence of colorectal cancer in those exposed to burn pits and other environmental hazards.

OPIOID PREVENTION AND TREATMENT PROGRAM

The bill includes \$232,000,000 for opioid treatment and prevention efforts. Of the total, \$254,487,000 is provided for activities authorized by the Comprehensive Addiction and Recovery Act of 2016 (P.L. 114–198).

Nonaddictive Opioid Alternatives.—According to the National Institute on Drug Abuse, a significant number of veterans take a large amount of prescription drugs, often due to high rates of chronic pain and mental health conditions stemming from their military service. This can lead to over-prescribing of medications like opioids, potentially causing addiction and other health complications. The Committee encourages VA to assess policies and procedures and to work with Congress on efforts to facilitate coverage of non-addictive alternatives to opioids for pain treatment and management. The Committee supports efforts by VA to educate veterans and physicians in VA health system on FDA-approved, non-addictive alternatives to opioids for pain management.

Therapeutic Massage Services.—The Committee recognizes the growing body of evidence supporting therapeutic massage as an effective, non-opioid alternative for managing chronic pain and post-traumatic stress disorder among veterans. The Committee encourages the Department to expand access to certified therapeutic massage services within the Community Care Network, and to report on outcomes related to opioid prescription rates, emergency room visits, and veteran satisfaction. The Committee further urges VA to collaborate with external stakeholders and VSOs to promote education and awareness of non-pharmacologic pain management options for veterans.

PHARMACEUTICAL ISSUES

Novel Program for Optimizing Pain Management.—The Committee recognizes the balance between supporting access to care for veterans with pain and the veteran's risk of developing dependency for prescription pain medication. The Committee supports the implementation of a process improvement initiative that will reduce

the risk of tolerance, dependence, misuse, addiction, and diversion of prescription pain medication by establishing more precise and effective prescribing guidelines to ensure veterans receive appropriate care. The Committee expects VA to deploy an innovative clinical decision support tool to evaluate and interpret the acute and chronic pain management needs for military veterans, their dependents, and/or employees of VA. The Committee supports the use of a novel care model that is available to those receiving treatment through traditional VHA hospitals/clinics and those utilizing Care in the Community.

Prescription Drug Quality.—The availability of safe and effective prescription drugs has significant implications for the health of veterans, the workload of VHA personnel, and federal spending. The U.S. experiences over three drug recalls a day, and production of most drugs and active pharmaceutical ingredients (API) has shifted to China and India. VHA is one of the largest purchasers of pharmaceuticals in the U.S. but has no way to distinguish between higher- and lower-quality pharmaceutical manufacturers. Currently, the Uniformed Services University of the Health Sciences' (USUHS) Center for Health Services Research (CHSR) is piloting a system to evaluate the quality of drug products for essential medicines and develop a scoring tool for potential use in Department of Defense procurement. The Committee encourages the Department to explore a potential partnership with USUHS and work to develop a strategy for the use of drug quality scoring in VA procurement. The Committee directs the Department to report to the House and Senate Committees on Appropriations not later than 180 days after enactment of this Act and annually thereafter on the progress of this effort.

POST-TRAUMATIC STRESS DISORDER CARE

National Center for Post-traumatic Stress Disorder.—Recognizing the importance of VA's National Center for PTSD in promoting better prevention, diagnoses and treatment of PTSD, the Committee provides \$42,000,000 for the Center.

New Treatments for PTSD.—The Committee is aware of privately funded research regarding potential new treatments for PTSD, including psychedelic-assisted-therapy and encourages the Department to monitor these efforts and review the results of existing and future clinical trials.

Service Dogs for Veterans' Mental Health.—The Committee is aware of the positive impact service dogs have on military veterans suffering from post-traumatic stress disorder (PTSD) and those who have experienced military sexual trauma (MST). The Committee encourages the Department to establish a pilot program to provide grants to nonprofit organizations for the purpose of assisting such organizations in carrying out programs to provide service dogs to eligible veterans. The duties of such service dog programs shall be to plan, design, establish, or operate one or more programs that provide service dogs to eligible veterans. Within 180 days of enactment of this Act, the Department shall update the Committee on the feasibility of a program, including design, cost, and potential partnerships that could provide service dogs to eligible veterans.

Women Veterans Network.—The Committee continues to support the role of Women Veterans Network (WoVeN), a national peer

support network for women veterans managed by the National Center for PTSD–Women’s Health Sciences Division.

RURAL HEALTH

Office of Rural Health (ORH).—The bill includes \$342,000,000 for rural health to improve access and quality of care for the more than 3,000,000 enrolled veterans residing in rural and highly rural areas.

Office of Rural Health Operating Plan.—The Committee directs the Office of Rural Health to submit not later than 60 days after enactment of this Act an operating plan for fiscal year 2026 funding, as well as for the fiscal year 2027 funding provided in advance by this Act.

Rural Access Network for Growth Enhancement (RANGE).—The RANGE Program provides case management and treatment services to mentally ill veterans in rural areas. The bill includes sufficient funding to maintain three new centers of the RANGE Program, as authorized by the Sgt. Ketchum Rural Veterans Mental Health Act of 2021 (P.L. 117–21).

Rural and Tribal Healthcare Access.—The Committee recognizes the shortage of healthcare providers in rural communities and tribal lands, where approximately 4.4 million veterans face significant barriers to accessing care. The Northern Arizona VA Health Care System (NAVAHCS) provides timely access to healthcare services for Native American and other rural veterans through a program that encompasses mobile medical clinics, telehealth technologies, and clinical staffing services. The Committee supports the NAVAHCS model and encourages the Department to expand this model to ten VA Medical Centers. The Department shall submit a report to House and Senate Committees on Appropriations on these expansion efforts within 120 days after the date of enactment of this Act.

Transportation Challenges.—The Committee encourages the Office of Rural Health to use \$10,000,000 for the continued partnership between the Veterans Transportation Program and the Office of Rural Health to continue providing transportation to VA appointments for veterans who live in rural areas.

SUBSTANCE-USE DISORDER CARE

The bill includes \$232,881,000 for Substance-Use Disorder (SUD) efforts to ensure veterans can receive timely SUD specialty services.

Medication-Assisted Treatments.—The Committee encourages VA to expand clinical education among its primary care practitioners on use of long-acting injectable medications (LAIs) that are FDA-approved for the treatment of alcohol use disorder, opioid use disorder, and serious mental illnesses, as clinically indicated.

Substance Abuse Education and Outreach.—The Committee recognizes the ongoing work of the Department to reduce substance use disorder among veterans. The Committee supports new and innovative solutions, including internet-based substance abuse education programs, to intervene early with at-risk veterans and supports programs that provide veterans and their families with the tools they need to meet these challenges. The Committee encourages VA to increase education among its primary care practitioners

on the diagnosis and treatment of alcohol use disorders with Food and Drug Administration-approved medication-assisted treatment and counseling, as clinically indicated.

Tobacco Harm Reduction.—The Committee is concerned that smoking rates among U.S. military veterans is significantly higher than among the civilian population. The Committee is aware of the Department's smoking cessation program but is concerned that there is no publicly available information regarding the success of the program. The Committee is also aware that if the success rate of the tobacco cessation program reflects that of the civilian population, then over 90% of veteran participants are likely to continue using combustible cigarettes. The Committee encourages the Department to coordinate with the Food and Drug Administration to incorporate into the Department's smoking cessation program.

SUICIDE PREVENTION

The bill includes \$698,000,000 for suicide prevention outreach programs.

Brandon Act.—The Committee encourages the Department to further implement the Brandon Act which empowers service members to get the help they need confidentially.

Collaboration on Gun Safety and Storage.—The Committee is aware of the Administration's new national strategy, "Reducing Military and Veteran Suicide: Advancing a Comprehensive, Cross-Sector, Evidence-Informed Approach", and commends the Strategy's focus on improving Lethal Means Safety education and training for veterans, including firearms safety. The Committee continues to support collaboration across public and private sectors to end the national tragedy of suicide and encourages VA medical centers to focus particular efforts on collaboration with state and local law enforcement and health officials in states that have adopted gun safety laws to adopt programs and protocols on firearms safety and storage regarding veterans who may be struggling with suicidal thoughts.

Firearm Lockbox Program.—The Committee supports VA's efforts to address veteran suicide prevention, and the firearm lockbox program is a critical element. As VA implements this program, the Committee is concerned that funding limitations may impact the scope and reach of this initiative within the broader National Strategy for Preventing Veteran Suicide. The Committee encourages VA to ensure that access to firearms storage resources for Veterans is included in training for employees of the Veterans Crisis Line.

Guard and Reserve Components.—In House Report 118–122, the Committee noted that since 2020 the National Veteran Suicide Prevention Annual Reports have not included information regarding former members of the Guard and Reserve Components who were not activated for military service. The Committee encouraged the Department to continue to collaborate with the Department of Defense to monitor and to ensure appropriate measures are available to reduce suicide in this population. Within 180 days after the date of the enactment of this act, the Committee directs the Department to provide a report on efforts to reduce and monitor suicides amongst this military population.

InTransition Program.—The Committee recognizes service members are most vulnerable to dying from suicide in the first three months following separation from military service. The Committee is concerned that the Defense Health Agency's transition assistance programs are not connecting with over 70% of its automatically enrolled service members. The Committee believes that by moving away from a rigid one-size-fits-all approach and embracing a data-driven, personalized, and multi-channel model, the InTransition program can maximize engagement, improve mental health outcomes, and ensure resources are allocated efficiently.

Lethal Means Safety Training.—To prevent suicide among Veterans, VA has implemented mandatory lethal means safety training for clinical health care providers in VHA facilities, but the training remains optional for other VA employees, and for all community care providers and family caregivers. To ensure that every employee who regularly interacts with Veterans is prepared to have a conversation that could save a Veteran's life, the Committee continues to urge VA to implement mandatory lethal means safety training for all VHA and VBA employees who regularly interact with Veterans.

Public-Private Upstream Veteran Suicide Prevention Initiative.—The Committee supports funding of community-based organizations that serve as part of a public-private partnership with the Department to address upstream prevention needs of veterans. To better support veterans, the Committee encourages the Department to fund community based, non-profit organizations that serve in a statewide capacity, and have and coordinate an extensive network of public and private sector partners to increase access to critical services for veterans with the goal of preventing suicide; increasing access to care and services; and improving well-being outcomes for veterans.

Predictive Modeling and Analytics for Veterans Suicide Prevention.—The Committee remains supportive of VA's efforts to continue to address the growing number of Veteran suicides but recognizes that there is a significant need to improve early suicide indicators and detection using artificial intelligence and machine learning technologies that improve operational efficiency and effectiveness throughout veteran service delivery. To improve veteran service delivery, the Committee encourages the Department to evaluate the use of omnichannel technologies to improve identification of at-risk veterans. The Department may consider using all government service delivery channels with omnichannel capabilities and real-time analytics to ensure that interactions with a veteran can be used to gain appropriate insights that help the Department better identify veterans at-risk in real time and allow for the proper use of resources and decisive actions to be taken.

Suicide Prevention Coordinators.—The Committees recognize the importance of suicide prevention coordinators and encourages the Department to fully staff these positions and improve veterans' access to these coordinators.

Suicide Prevention Reporting.—The Committee directs the Department to incorporate full veteran benefit usage in its annual suicide prevention report to demonstrate the relationship between VA benefits and veterans who die by suicide. The report shall contain detailed usage of benefits the same way VA reports on veteran

interactions with VHA. Additionally, the Committee directs VA to provide annual utilization reports on community grants for suicide prevention.

Veteran Resiliency, Suicide Prevention and Response.—The Committee notes that death by suicide in our veteran population remains an alarming crisis. Tragically, 18 to 24 Veterans die by suicide daily. The Department's data demonstrates that veterans suicide rates have increased over the last 20 years. The Committee directs VA to modernize current suicide prevention models to better ensure they are reaching at risk veterans.

TELEHEALTH AND CONNECTED CARE

The bill includes resources for telehealth and connected care, which includes home telehealth, home telehealth prosthetics, and clinic-based telehealth.

The Committee directs the Department to continue to expand telehealth availability, including the facilitation of public private partnerships, to include additional mental health, primary care, and rehabilitation services as a means to deliver care in rural and underserved communities.

The Department is encouraged to leverage newly gained telehealth capacity to address backlogs for disability exams and healthcare appointments when appropriate. The Committee further directs VA to continue to implement plans to improve veteran and provider satisfaction, increase awareness of the telehealth program, and enhance adoption of telehealth by veterans and providers.

VA Telehealth Benefits.—VA Telehealth Services are transforming how veterans access high-quality VA care by making it easier for veterans to connect with health specialists from across the country. Not later than 180 days after the enactment of this Act, the Secretary shall submit a report to the House and Senate Committees on Appropriations on the wait times for VA telehealth services and the active public-private partnerships that enable and enhance telehealth access to Veterans. The report shall include an update on obligations of public-private partnerships (P3s) included in the Mission Act of 2018.

Veteran Access to Telehealth.—The Committee urges the Department to continue efforts to improve and expand access to telehealth services. The Committee requests a report not later than 120 days of enactment of this Act on the estimated number of veterans who lack access to telehealth services according to the best available data, including the number of Veterans who lack necessary access to the internet.

WHOLE HEALTH

The Committee supports the Whole Health model of care and the expansion of Whole Health to all VA facilities.

Adaptive Sports.—The Committee provides not less than fiscal year 2025 enacted levels for National Veterans Sports Programs, including resources for adaptive sports programs. The Committee recognizes the significant improvements that adaptive sports and recreational therapy have on veterans' mental and physical health. It applauds the efforts of community providers of these grants, especially in rural areas, who have been able to utilize this key program in successfully reintegrating veterans back into their commu-

nities. The Committee is aware that community providers of adaptive sports grants spend considerable time and effort in planning and implementing their veteran service programs. The Committee encourages the Adaptive Sports Grants Office to recognize that recruitment and planning activities are not administrative in nature and should not be considered as such in future grant solicitations.

Continued Support and Expansion of Whole Health.—Since FY 2021, the Committee has consistently praised the Veterans Administration (VA) Whole Health System, citing its ability to provide efficient and effective patient-centered, integrative care to veterans, especially those who are struggling with opioid use disorder and chronic pain. The Committee recognizes that Veterans who engage in Whole Health services experience significantly greater reductions in opioid use compared to those receiving conventional care alone. The Committee encourages continued investment in the expansion and integration of Whole Health services across the VA system as a proactive, evidence-based strategy to address pain management, reduce reliance on prescription opioids, and enhance long-term Veteran health outcomes.

Creative Arts Therapies.—The Committee continues to acknowledge the effective use of creative arts therapies and arts and humanities partnerships in treating veterans with traumatic brain injuries and psychological health conditions.

Prescription Produce.—The Committee is concerned with food insecurity among the veteran population and requests the Office of Nutrition & Food Services work with clinicians to determine the feasibility of delivery and coverage work streams to facilitate integration of a local produce prescription service delivery. Within one year of the enactment of this Act, the Department shall update the Committee on this effort.

WOMEN VETERANS HEALTH CARE

The recommendation includes a total of \$1,323,444,000 to support care for women, the Office of Women's Health and programmatic efforts, including the childcare initiative. Within this amount, VA is encouraged to continue hiring women primary care providers and increase the number of peer support specialists for women veterans.

Breast Cancer Screening Guidelines.—The Committee commends VA's decision to offer breast cancer screening and mammography to eligible women veterans beginning at age 40. However, the Department should be prepared to offer screening to eligible younger women veterans, especially women at higher risk for breast cancer, should a physician determine medical necessity, or risk factors warrant, screening before age 40. The Committee supports this effort to ensure that women veterans have access to and receive adequate and timely care and requests an update on the Department's implementation of this policy no later than 60 days after enactment of this Act.

Care for Women.—The Committee recognizes that women are now the fastest growing cohort within the veteran community. The increased number of women using VHA services necessitates a greater investment of resources to provide and expand VA's services to women veterans and ensure women veterans' health needs, which often differ from men, are met. The Committee supports con-

tinued efforts to identify and address the unique issues experienced by women veterans. VA is encouraged to continue redesigning its women's healthcare delivery system and improving its facilities to ensure women receive equitable, timely, and high-quality healthcare.

Copper Intrauterine Devices.—The Committee encourages the Department VA to study the impacts of intrauterine devices (IUDs), especially copper IUDs, on women Veterans receiving VA reproductive health services. The study should focus on physical and non-physical side effects, such as anxiety, depression, fatigue, headaches, insomnia, and potential copper toxicity. The Committee urges the Department to evaluate these effects, analyze clinical data and patient outcomes, and submit a report to House and Senate Committees on Appropriations on findings no later than 120 of enactment of this Act.

Ensuring Access to Quality Care.—The Committee recognizes the Deborah Sampson Act is the most comprehensive legislation for women veterans in a decade that helps address barriers that women veterans may face when accessing VA care and benefits. The Committee encourages VA to continue to ensure women veterans have access to high quality, well-coordinated care and robust services as required by the law.

Maternal and Infant Health Outcomes for Women Veterans.—The Committee directs the Department to provide a report within 180 days of enactment of this Act regarding the incidence of birth defects, miscarriage, stillbirth, and maternal morbidity and mortality that can be related to military service and provide recommendations to raise awareness and improve maternal and infant health outcomes. The Committee encourages the VHA to publicly disseminate the information found in this report to aid in awareness and prevention measures to improve maternal and infant health outcomes.

Maternity Healthcare and Coordination Programs.—The Committee is pleased that the Department established maternity healthcare and coordination programs to coordinate prenatal and postpartum care provided in the community which have been successful in ensuring that veterans can receive high-quality, appropriate care and robust support during and after pregnancy. The Committee supports these programs and encourages the Department to continue to ensure veterans have access to high-quality, well-coordinated care, and robust services and directs the Department to continue to implement the Protecting Moms Who Served Act (P.L. 117–69).

Women's Health Research and Innovation.—The Committee is aware of a new joint collaborative to improve women's health research for service members and veterans that will develop a roadmap to close pressing research gaps specific to women who served in the military. Of the areas of research that will benefit women veterans, the Committee notes that 80 percent of patients diagnosed with an autoimmune disease are women. The Committee encourages VA to engage with experts who are researching autoimmune diseases in women veterans, including myalgic encephalomyelitis/chronic fatigue syndrome and Gulf War Illness. The Committee requests a detailed report within 180 days of enactment of this Act on how the Department is addressing and

prioritizing research gaps and how it will engage with nationally recognized experts on diseases that impact women veterans.

WORKFORCE AND STAFFING ISSUES

Expanding Recruitment.—The Committee recognizes the challenge the Department has in the recruitment and retention of clinicians. To help the Department better keep pace with other providers and continue to train its workforce to improve their service to veterans, the Committee urges the Department to explore potential options to enhance recruitment and retention, such as expanding benefits to relocate to underserved VA medical facilities and expanding reimbursement to clinicians for Continuing Professional Education, regardless of individual specialty or board certification.

Expedited Hiring Authority.—The Committee strongly encourages the Department to focus hiring efforts on converting clinical trainees to full VA employment immediately upon completion of their residencies through the utilization of the expedited hiring authority granted to VA by Title 38.

Staffing Report.—The Committee looks forward to the annual comprehensive report required by the Joint Explanatory Statement accompanying the Consolidated Appropriations Act, 2022 (P.L. 117–103) on the Department’s plan to address critical workforce issues.

Staffing at Richard A. Pittman Community-Based Outpatient Clinic.—The Committee celebrates the recent opening of the Richard A. Pittman Community-Based Outpatient Clinic in San Joaquin County, California. The Committee recognizes the crucial role this clinic has in expanding primary care and specialty health care services to veterans across California’s Central Valley. The Committee urges the Department to continue meeting staffing requirements to ensure clinic operations are not uninterrupted.

Sterile Processing Medical Supply Technician Certification.—The Committee is aware that the Veterans Health Administration recently updated its training and certification requirements for certain Sterile Processing Services (SPS) staff, bringing them more in line with those of leading civilians healthcare organizations. The Committee is concerned that only those serving as a VA medical facility’s SPS Chief, SPS Assistant Chief, and SPS supervisory positions must meet those updated requirements. The Committee encourages the Department to train and certify all SPS staff, especially those doing the day-to-day work of sterilization.

VA/HHS Collaboration on Health Workforce Shortages.—The Committee understands that one of the biggest hurdles in retaining health care professionals within VA health care system is the agency’s ability to compete with market pay rates. The Committee highlights the VA COMPETES Act, which became law as a part of the Elizabeth Dole Act in 2025 and allows the Secretary of VA to waive pay caps for physicians. The Committee urges the Department to assess how pay caps are contributing to physician shortages for key services and how adjusting pay caps may alleviate these shortages.

VHA Physician Salaries.—The Committee understands that one of the biggest hurdles in retaining health care professionals within the VA health care system is the agency’s ability to compete with market pay rates. The Committee highlights the VA COMPETES Act, which became law as a part of the Elizabeth Dole Act in 2025

and allows the Secretary to waive pay caps for physicians. The Committee urges the Department to assess how pay caps are contributing to physician shortages for key services and how adjusting pay caps may alleviate these shortages.

MEDICAL COMMUNITY CARE

Fiscal year 2025 enacted level	\$20,382,000,000
Fiscal year 2026 advance appropriation (enacted)	34,000,000,000
Committee 2027 advance appropriation recommendation	38,700,000,000

The Committee recommendation includes an advance appropriation of \$38,700,000,000 for fiscal year 2026 for Medical Community Care, of which \$2,000,000,000 is available until September 30, 2028.

Dystonia.—The Committee continues to note the connection between traumatic brain injury (TBI) and dystonia. The Committee requests a report within 90 days of enactment of this Act on efforts to pursue collaborative opportunities with the dystonia stakeholder community and related federal agencies.

Ground Ambulance Providers.—The Committee is concerned that the Department is inadvertently disadvantaging veterans in connection to reimbursement for ground ambulance services. Specifically, under the Community Care Program, ground ambulance providers are required to notify VA and seek approval for payment within 72-hours. By contrast, veterans have a 30-day window to notify VA of their receipt of emergency treatment in a non-VA facility. This results in ground ambulance provider claims being denied and the burden falls upon the veterans to seek reimbursement. The Committee directs the Department to provide a briefing within 90 days of enactment of this Act regarding how the Department and its respective VISNs could reduce the financial burden on veterans by reducing the number of ground ambulance service claims that are denied for failure to meet the 72-hour notification requirement but ultimately comply with VA's coverage rules.

Long-Term Care for Veterans with Severe Traumatic Brain Injury (TBI).—The Committee continues to note the increasing prevalence of deployment-related traumatic brain injuries. This increase continues to demonstrate the longstanding need for providing adequate long-term specialty care for Veterans suffering from severe TBIs. The Committee is encouraged by the Department's progress in using agreements with non-VA providers to ensure all Veterans receive such long-term specialty care in their communities and encourages the Department to continue entering into such agreements, to educate case managers on all tools available to provide veterans with long-term specialty care outside the VA system.

MEDICAL SUPPORT AND COMPLIANCE

Fiscal year 2025 enacted level	\$11,800,000,000
Fiscal year 2026 advance appropriation (enacted)	12,700,000,000
Committee 2027 advance appropriation recommendation	12,000,000,000

The Committee recommendation includes an advance appropriation of \$12,000,000,000 for fiscal year 2027 for Medical Support and Compliance, of which \$350,000,000 shall remain available through September 30, 2028.

Identity Governance and Administration (IGA).—The Committee recognizes that the current IGA pilot has failed to earn authority

to operate, therefore the Committee encourages the Department explore alternative commercial IGA programs, interoperable with CISA's CDM architecture with hybrid cloud features.

MEDICAL FACILITIES

Fiscal year 2025 enacted level	\$9,549,485,000
Fiscal year 2026 advance appropriation (enacted)	9,700,000,000
Committee 2027 advance appropriation recommendation	11,700,000,000

The Committee recommendation includes an advance appropriation of \$11,700,000,000, for fiscal year 2027 for Medical Facilities, of which \$500,000,000 shall remain available until September 30, 2027.

Community-Based Outpatient Clinic in Bakersfield, California.—The Committee remains disappointed that the new Bakersfield CBOC remains unbuilt more than a decade after Congress authorized this facility in fiscal year 2010 through Public Law 111–82. The Committee directs the Secretary to expeditiously execute Lease No. 36C10F20L0008 and, unless prevented by an order issued by a federal or state court, commence construction of the CBOC by no later than September 30, 2026, as provided in the lease. Furthermore, the Committee directs the Secretary to provide monthly reports to the House and Senate Committees on Appropriations on the CBOC's progress until completion and activation. The Committee also directs the Secretary to examine any lessons learned, determine what additional actions can be taken by VA to complete this project, and provide a briefing to the Committee focused on what legislative remedies to the current situation exist and what legislative actions are needed to ensure this situation never happens again.

Food Pantry Program.—The Committee recognizes the success of the Department's food pantry program in easing veteran access to quality food and reducing stigma around veteran food insecurity. The Committee understands the Department collaborates with non-profit organizations to identify potential VA medical centers with the need and capacity for enrolling in this program and encourages VA to ensure that at least one VA medical center in a dense urban area offers food on-site. The Committee directs VA to identify the additional funds necessary to scale up the food pantry program.

Lactation Spaces at VA Facilities.—The Committee recognizes the obstacles female veterans face when trying to nurse their children in VA facilities. The Committee requests VA ensures that each medical center contains a lactation space.

Medical Center Services.—The Committee reminds the Department to ensure it consults with a wide variety of stakeholders regarding any changes to services, hours, and staffing prior to making changes and to ensure veterans are not negatively affected.

Personal Protective Equipment.—The Committee encourages the Department to prioritize the purchase of domestically manufactured personal protective equipment in VA facilities.

Spend Plan.—The Committee expects the Department to provide, not later than 30 days after enactment of this Act, an expenditure plan detailing the planned use of the funds provided. The Committee understands that some of the projects planned for fiscal year 2026 may not be ready within that timeframe, requiring an adjustment to the spending plan. The Committee requests a quarterly

update of the plan if the funding for any single project changes by more than \$3,000,000 during that time period.

VA Healthcare System Patient Communication Platform Expansion.—The Committee is concerned about gaps in patient communication and health education across the Department’s healthcare system, which can hinder veterans’ access to timely, relevant health information. The Committee encourages support for the expansion and implementation of a comprehensive digital communication platform at all VA facilities. This initiative will deploy cloud-based content management systems deliver veteran-specific health education, promote VA healthcare initiatives, and improve patient engagement in real time.

Veterans Integrated Service Network Distribution.—The Committee is interested in learning how the Veterans Integrated Services Network (VISN) (1) determines patient service catchment areas (2) assesses where to build new VA medical centers, and (3) plans the distribution of VA medical centers and outpatient clinics compared to the number of veterans in each area. The Committee requests an update within 180 days of enactment, that details the criteria used to determine how various types of medical facilities including VAMCs and CBOCs are distributed, and the distribution of VA medical facilities given the number of veterans in each location.

Zero Water Laboratory Diagnostic Systems.—The Committee remains concerned about cost savings for VA hospital laboratories, and the need to increase water conservation efforts as the U.S. continues to experience record-breaking national disasters. The Committee supports the adaptation of laboratory modernization by implementing little to no water laboratory systems utilizing dry chemistry solutions for VA Medical Centers and Community Based Outpatient Clinics where feasible.

BRIDGING RENTAL ASSISTANCE FOR VETERAN EMPOWERMENT

Appropriation, fiscal year 2025	\$—
Committee recommendation, fiscal year 2026	970,000,000

The Committee supports the Department’s effort to end veteran homelessness and provides \$970,000,000 for the Bridging Rental Assistance for Veteran Empowerment (BRAVE). The Committee recognizes legislative authority is required before this initiative can get underway. The Committee directs monthly updates as BRAVE moves towards implementation. Updates shall include, but are not limited to, a spend plan on how resources will be utilized, status of obtaining needed authorities, scope and operations of the program, personnel needs to execute BRAVE and anticipated roll out schedule.

MEDICAL AND PROSTHETIC RESEARCH

Appropriation, fiscal year 2025	\$943,000,000
Committee recommendation, fiscal year 2026	943,000,000

The Committee recommendation includes \$950,000,000 for Medical and Prosthetic Research, available through September 30, 2026. The Committee appreciates the Department’s plans to focus on critical research areas that include environmental exposures,

traumatic brain injury, cancer and precision oncology, and mental health.

In addition to this appropriation, resources from other sources, including appropriations from the medical care accounts, reimbursements from DOD, grants from the National Institutes of Health, private sources, and voluntary organizations, support the Department's researchers. The total amount estimated available for fiscal year 2026 is \$1,400,000,000.

Advanced Platform Technology (APT) Center.—The Committee recognizes the Department for progress being made to provide veterans with new assistive and restorative technologies that address sensory, motor, or cognitive deficits, as well as limb loss. The APT Center has effectively utilized a partnership model to leverage local and national research expertise to drive progress in diverse areas including artificial lung development, wound healing, and neural connected sensory prosthesis. The Committee continues to support the APT Center's efforts.

Endometriosis.—The Committee directs the Department to ensure its research program adequately addresses the unique needs and concerns of veterans with endometriosis. The Committee encourages VA to prioritize endometriosis research to expand basic, clinical, and translational research into the mechanics of endometriosis, identify early diagnostic markets, and develop new treatment methods.

Gulf War Illness Studies.—The Committee recommends the Department continue to conduct epidemiological studies regarding the prevalence of Gulf War Illness, morbidity, and mortality in Persian Gulf War veterans and the development of effective treatments, preventions, and cures. The Department is encouraged to make the findings of all research conducted by or for the Executive Branch publicly available as soon as possible and continue to publish disease-specific mortality data related specifically to Persian Gulf War veterans.

Herbicide-Related Toxic Exposure Research.—To understand the residual effects of Agent Orange, dioxins, and other herbicide-related toxic exposures, the Committee urges the Department to utilize reference data from existing medical records of veterans who served in Vietnam, Thailand, Guam, the Northern Mariana Islands, America Samoa, and other geographic areas where these toxic substances were dispersed to determine the percentage who have frequent or unexplained diseases compared to the civilian population.

Limb Loss.—The Committee commends the Department's work with veterans living with limb loss, particularly its support of programs that engage amputees to become certified peer visitors for other veterans. However, the Committee continues to note that veterans fall through the cracks, as highlighted in the House Veterans Affairs Committee hearing "Life After Limb Loss: Examining VA Amputee Prosthetics Care, due to a lack of specific resources provided for care coordination". The Committee supports the Department expanding their efforts to reach all veteran amputees across the country and to strengthen its current program by providing enhanced care coordination services.

Metastatic Cancer Research.—The Committee supports the Department's work to achieve therapeutic advances that extend the

life of metastatic cancer survivors, including through clinical trials that treat patients with diverse types of cancer, demographics, and genetics, and recognizes more studies are required to develop a comprehensive understanding of this complex process. The 2018 Department of Defense report to Congress on the Metastatic Cancer Task Force noted there are few active duty servicemembers with metastatic cancer because they are medically retired prior to metastasis, while the Department's FY25 budget justification notes that there were more than 51,000 new cases of metastasis among veterans in 2017. The Committee directs the Department to conduct a study assessing the correlation between service in the military, including types of service and exposure to different toxins or environments, and veterans' likelihood of a metastatic cancer diagnosis, and directs the Department to continue to increase veterans' participation. The Committee requests that the Fiscal Year 2027 budget justification include an update on its progress on the issue.

National Intrepid Center of Excellence (NICoE).—The Committee recognizes the high-quality mental health care and neurological research being conducted at the NICoE and urges the Department to expand its work with NICoE to strengthen VA's research capacity. The Committee continues to encourage the Department to pursue new collaborative initiatives with NICoE, consider public academic medical centers as partners in such efforts, and assist DOD-wide efforts to optimize research to implement solutions and deliver better health outcomes for veterans.

PFAS Research and Testing.—The Committee encourages the Department to employ the most accurate per- and polyfluoroalkyl substances (PFAS) testing methods to ensure comprehensive and reliable results in its scientific assessment of the relationship between PFAS exposure during military service and kidney cancer among veterans. As PFAS comprises over 12,000 chemicals and scientific understanding of their health impact is growing, advanced blood testing methods including additional analytes, more in line with the CDC NHANES 18 analyte panel, would enable the Department to detect a broader range of PFAS compounds that veterans encountered during service, providing more comprehensive data to evaluate. Further, current clinical guidelines from the National Academies of Science, Engineering, and Medicine have identified 9 PFAS compounds that impact human health. Blood testing methods that include these 9 PFAS analytes must be the minimum standard for VA to detect PFAS compounds that veterans encountered during service and evaluate establishing kidney cancer as a presumptive condition.

Research Using Animals.—The Department is directed to include in any report to Congress describing animal research approved under section 247 in division A of the Consolidated Appropriations Act, 2024 (P.L. 118–42), submitted after the date of filing of this report, details on the specific alternatives to animals that were considered, why those alternatives were not chosen, and an explanation for why these animal subjects were the only viable option for this research. The Committee looks forward to the Department fully implementing its plan to curtail the research conducted using canines, felines, or non-human primates by 2026 and directs the Department to not approve any new animal research that would not be complete before 2026.

Vietnam Veterans Liver Fluke Cancer.—The Committee urges the Secretary to prioritize efforts to determine whether cholangiocarcinoma diagnoses among Vietnam-era veterans are connected to service-related exposure to liver fluke parasites. The Committee recognizes that emerging research suggests a potential link between liver fluke infection and the later development of cholangiocarcinoma. The Committee directs the Department to report to the House and Senate Committees on Appropriations within 180 days of enactment of this Act on steps taken to review existing evidence, update claims adjudication guidance if necessary, and enhance outreach to potentially impacted Vietnam-era veterans.

MEDICAL CARE COLLECTIONS FUND

The Department of Veterans Affairs Medical Care Collections Fund (MCCF) was established by the Balanced Budget Act of 1997 (P.L. 105–33). The Department deposits first-party and pharmacy co-payments, third-party insurance payments and enhanced-use collections, long-term care co-payments, Compensated Work Therapy Program collections, Compensation and Pension Living Expenses Program collections, and Parking Program fees into the MCCF. The Department uses these funds for medical care and services to veterans. The estimate of fees that will be collected in fiscal year 2026 is \$4,580,000,000.

NATIONAL CEMETERY ADMINISTRATION

Appropriation, fiscal year 2025	\$480,000,000
Committee recommendation, fiscal year 2026	497,000,000

The Committee recommends \$497,000,000 for fiscal year 2026. NCA should prioritize maintaining the current level of services at existing cemeteries and activating new cemeteries to increase burial access. In addition, the bill includes language making ten percent of the total available until September 30, 2027.

Assessing the National Cemetery Administration’s Population Data Collection Methodology.—The Committee is concerned that the National Cemetery Administration (NCA) may not be fully leveraging all available data sources to effectively target underserved veteran populations for cemetery services. To ensure underserved veteran populations have access to cemetery services, the Committee encourages NCA to explore utilizing U.S. Census Bureau data into its methodologies for estimating and tracking served and unserved veteran populations, as suggested in Government Accountability Office (GAO) Report GAO–19–121. The Committee requests an update not later than 180 days of the enactment of this Act on prospective new methodologies for collecting veteran population data. The update should include an examination of the utility and feasibility of incorporating U.S. Census Bureau data to either replace or supplement the NCA’s current county-based methodology and include calculated percentages of confidence levels for all methodologies.

Fort Sam Houston National Cemetery Veterans Day Community Remembrance.—The Committee reaffirms its unwavering commitment to honoring the service and sacrifice of America’s veterans by strongly supporting the upkeep and dignified maintenance of our national cemeteries. These sacred grounds must be preserved not

only as final resting places but as enduring symbols of gratitude where families and communities can reflect on the legacy of those who served. The Committee recognizes the importance of maintaining national traditions that honor veterans, including the annual Veterans Day commemoration at Fort Sam Houston National Cemetery, a vital event that reinforces our nation's promise to never forget.

Identifying Unknown Remains of Veterans.—For eight decades, unidentified remains of veterans have been interred at the National Memorial Cemetery of the Pacific (NMCP). Efforts to identify these remains have been ongoing, including the collection of DNA family reference samples. Advancements in forensic genetic genealogy (FGG) analysis enable the identification of previously unidentified human remains, even those dating back centuries. The Committee recognizes that the National Missing and Unidentified Persons System (NamUs) at the Department of Justice, formally authorized by the Help Find the Missing Act (P.L. 117–327), has successfully identified hundreds of previously unidentified sets of human remains by leveraging FGG DNA testing technology in partnership with accredited private laboratories. The Committee provides \$1,500,000 to partner with a private laboratory to utilize FGG sequencing technology to identify the remains of fallen soldiers buried at NMCP. The Committee further directs the Department to produce an annual report to Congress that tracks the samples analyzed, the types of DNA technology deployed, and the time elapsed to produce an identification.

DEPARTMENTAL ADMINISTRATION

GENERAL ADMINISTRATION

(INCLUDING TRANSFER OF FUNDS)

Appropriation, fiscal year 2025	\$475,000,000
Committee recommendation, fiscal year 2026	450,000,000

The General Administration account provides funds for the Office of the Secretary, the General Counsel, six Assistant Secretaries, and two Department-level staff offices.

The Committee recommendation includes \$450,000,000 for General Administration.

The Committee has included bill language to make available through September 30, 2027, up to ten percent of these funds and to permit the transfer of funds in this account to the General Operating Expenses, Veterans Benefits Administration account.

Additional Budgetary Information.—The Committee continues its request that items described in previous House reports continue to be included in the budget justifications submitted each year. Further, the Committee directs the Department to include in its budget justification materials a table for each account that shows a five-year funding history for requested and enacted levels.

Data Governance Analytics.—The Committee continues to support the work carried out by the Department's Office of Enterprise Integration for the continuous improvement of veterans' access and outcomes throughout their lifetimes, as outlined in VA Data Strategy. VA, as a learning enterprise, should manage, integrate, and consolidate its various data sources to ensure its data of highest

quality and is used to support operational decision making. As such, the Committee encourages OEI to further coordinate enterprise-wide efforts to manage VA data as a strategic asset, in order to enhance veterans' insights and to strengthen VA's delivery of services and benefits to veterans, their families, survivors, and caregivers.

Delays With Board of Veterans Appeals.—The Committee is concerned about ongoing delays veterans and their families experience before the Board of Veterans Appeals, often causing years-long wait times for final adjudication and resolution of claims. Within the funds provided, the Committee urges VA to prioritize hiring the staff necessary to allow the efficient process of the Board's current inventory of cases.

Modernization of Financial and Acquisition Systems.—The Committee is concerned that the Department's current approach to modernizing its financial and acquisition systems through the Financial Management and Business Transformation (FMBT) program has thus far yielded little progress and encourages evaluation of a new approach. Therefore, the Committee directs the Department to provide a report of the House and Senate Committees on Appropriations within 90 days of enactment of this Act that includes an analysis to determine if a viable path forward exists to procure and deploy a flexible, modernized acquisition system, independent of the financial system modernization efforts and ensure that any effort to move in this direction includes an analysis of alternatives and the evaluation of secure FedRAMP authorized technologies.

Quarterly Financial Information Reports.—The bill includes an administrative provision that extends the requirement for submission of the quarterly financial information required in the fiscal year 2017 bill and conference report.

Staff Relocations Within VA.—The bill continues the administrative provision requiring written notification 15 days prior to organizational changes that result in the transfer of 25 or more full-time equivalent staff from one organizational unit of the Department to another.

BOARD OF VETERANS APPEALS

Appropriation, fiscal year 2025	\$287,000,000
Committee recommendation, fiscal year 2026	287,000,000

The Committee recommendation includes \$287,000,000 for the Board of Veterans Appeals. Ten percent of this funding is available through September 30, 2027.

VA Board of Appeals Backlog.—Congress has provided funding increases to enable the Department to hire the staff, acquire the technology, and change work processes necessary to significantly reduce the appeals backlog. The Committee is concerned that despite these investments, the Board of Veterans' Appeals has not adequately addressed the backlog of veterans waiting for a decision and that the inventory of pending appeals cannot be depleted with the Board of Veterans' Appeals' current policies and procedures. The Committee directs the Department to prioritize the processing of appeals and to submit a plan not later than 90 days after the enactment of this Act detailing a strategy to clear the backlog of cases within 36 months.

INFORMATION TECHNOLOGY SYSTEMS
(INCLUDING TRANSFER OF FUNDS)

Appropriation, fiscal year 2025	\$6,401,000,000
Committee recommendation, fiscal year 2026	5,882,000,000

The Committee recommendation includes \$5,882,000,000 for Information Technology Systems. Within the account total, the Committee allocates \$1,350,000,000 for pay and associated costs; \$4,413,000,000 for operations and maintenance; and \$118,900,000 for activations.

The bill makes available three percent of pay and associated costs and five percent of operations and maintenance funds until September 30, 2027. All development funds are available until September 30, 2027.

The Committee continues to include bill language permitting the transfer of funding among the three subaccounts upon approval of the Committees on Appropriations of both Houses of Congress.

The bill also continues language allowing for the reprogramming of funds among development projects upon approval by the Committees on Appropriations of both Houses of Congress.

The Committee continues to include bill language limiting the funds available for information technology systems development to the projects and in the amounts specified in the report. The bill limits the amount of funds that can be transferred into the IT account to ten percent of the total of either the source or destination account. The bill contains language that permits the reprogramming of funds among development projects upon prior notification to, and approval by, the Committees on Appropriations of both Houses of Congress.

The Committee expects the Office of Information and Technology (OIT) to continue to provide an IT expenditure report to the Committees on Appropriations of both Houses of Congress on a monthly basis. This report should include a comparison to the project costs included in the development funding chart above and provide an explanation for any differences in excess of \$3,000,000.

Identity Governance and Administration (IGA) Commercial Pilot Program.—The Committee understands the current IGA pilot has failed to earn authority to operate. The Committee recommends the Department explore alternative commercial IGA pilot programs, interoperable with CISA's CDM architecture with hybrid cloud features.

IT Asset Management.—The Committee is aware of improvements made by the Office of Information Technology to the Department's IT software and hardware asset management practices and systems, which are producing significant annual cost savings, ensuring more accurate baseline inventories of assets owned, and improving the Department's ability to measure the total cost of ownership of IT assets and applications. The Committee encourages the Department to continue replicating this success across all software and hardware portfolios, and to ensure all software and hardware assets are accurately reflected in the system throughout their full lifecycles, from the time of acquisition through final disposal.

VETERANS ELECTRONIC HEALTH RECORD

Appropriation, fiscal year 2025	\$1,322,000,000
Committee recommendation, fiscal year 2026	2,515,893,000

The bill includes \$2,515,893,000 for Veterans Electronic Health Record. This increase reflects additional deployments and focus on current site optimization, sustaining infrastructure, and supporting 19 live sites. It also assumes costs for activities related to the development and rollout of VA's Electronic Health Record Modernization (EHRM) initiative, the associated contractual costs, and the salaries and expenses of employees hired under titles 5 and 38, United States Code.

This account is intended to be the single source of funding within VA for the electronic health record effort. No authority is provided for funds from other VA accounts to be transferred into this account nor for funds from this account to be transferred out to other accounts.

The bill continues language requiring the Secretary to submit a quarterly report to the Committees on Appropriations of both Houses of Congress detailing obligations, expenditures, and deployment strategy by facility. The Department is directed to continue quarterly briefings on performance milestones, costs, and changes to implementation and management plans, and to provide an accurate up-to-date deployment schedule prior to each quarterly briefing. Additionally, the Committee directs the Department to provide updates on plans and efforts to integrate community care providers into the new EHR system. Such updates should be submitted concurrently with the quarterly reports.

In addition, bill language is included that makes 25 percent of the total funding available contingent upon the Secretary providing notice to and receiving approval from the Committees on Appropriations of both Houses of Congress of any changes to the deployment schedule, as well as an updated plan outlining benchmarks and measurable metrics for deployment and an updated plan for addressing all required infrastructure upgrades. The Committee also urges the Department to notify the Committees on Appropriations of both Houses of Congress if there are any staffing challenges in go-live preparation and implementation at VA medical centers.

The Committee repeats the fiscal year 2019 directive for GAO to perform quarterly performance reviews of the electronic health record deployment. It is expected that this quarterly report will provide the Committees and VA with timely information to properly oversee this effort and address important issues.

VistA as a Service.—As the Veterans Health Administration continues transitioning from the legacy Veterans Health Information Systems and Technology Architecture (VistA) Electronic Health Record (EHR) System to the Oracle Health/Cerner Millennium EHR solution, the Department must continue to sustain, maintain, and evolve the existing VistA infrastructure. Assuming no further delays, the full deployment of the new EHR system is not expected until 2031, leaving patient care, services and many Veterans Integrated Service Networks (VISNs) on the later end of the implementation schedule reliant on the legacy VistA EHR several more years.

Maintaining the legacy EHR while deployment of the new system is ongoing has proven to be labor intensive, requiring significant manpower and financial investment in a tight budgetary environment. The Committee believes the Department can reduce manpower, costs, and streamline maintenance efforts by leveraging a model similar to that used by Department of Defense in its EHR modernization program. DoD is efficiently utilizing private sector system integrators to maintain and sustain the legacy system as a service while deployment of the new system is undertaken. In doing so, the Department would also be able to divert much needed, experienced Office of Information and Technology (OI&T) staff to the Federal EHR deployment of the new system. The Committee urges the Department to assess the feasibility of adopting and implementing a “VistA as a Service” model for the maintenance and sustainment of the legacy EHRM system.

Contractor Accountability.—The Committee expects the Department to hold its contractors accountable. The Department is expected to work closely with Oracle Cerner to resolve usability problems and dramatically improve training to ensure that when deployments restart the new system can be adopted easily by clinicians and healthcare staff.

OFFICE OF INSPECTOR GENERAL

Appropriation, fiscal year 2025	\$290,000,000
Committee recommendation, fiscal year 2026	295,000,000

The Committee recommendation includes \$295,000,000 for fiscal year 2026 for the Office of the Inspector General. The bill makes up to ten percent of this funding available until September 30, 2027.

The Committee continues to request robust oversight of the Electronic Health Record Modernization initiative and medical community care claims.

CONSTRUCTION, MAJOR PROJECTS

Appropriation, fiscal year 2025	\$961,000,000
Committee recommendation, fiscal year 2026	1,750,000,000

The Committee recommendation includes \$1,750,000,000 for Construction, Major Projects for fiscal year 2026 which shall remain available until September 30, 2030. The Committee supports the Department’s efforts for projects in St. Louis, MO and Riverside, CA. While supportive, the Committee requests further information on plans to utilize resources to support homeless affordable housing in West Los Angeles and New Hampshire.

As required by language that is in permanent law, all major construction projects costing more than \$100,000,000 must be managed by a non-VA government entity, such as the Army Corps of Engineers. While the Committee no longer duplicates this language, the Committee intends to continue its oversight of the quality of the outside entity management and expects to receive quarterly briefings on each of the large construction projects.

Construction Reports.—The Committee continues to request the Department provide quarterly briefings on the progress and cost of each facility managed by an outside entity. Several additional bill language provisions are included to enhance the Committee’s ca-

capacity to conduct oversight of VA's facility construction efforts including: (1) no funding greater than \$7,000,000 may be reprogrammed between construction projects unless approved by the Committees on Appropriations of both Houses of Congress; (2) any change to the scope of a construction project is prohibited without the approval of the Committees; and (3) VA must report any bid savings of \$5,000,000 or more on projects as soon as they are identified.

The Committee does not provide transfer authority between twelve VA appropriations and for funds to be transferred to major or minor construction to be made available for five years.

To enhance the Committee's capacity to conduct oversight on VA's facility construction efforts, several administrative provisions are continued in the bill: (1) No funding amount greater than \$7,000,000 may be reprogrammed between construction projects unless approved by the Committees on Appropriations of both Houses of Congress; (2) any change to the scope of a construction project is not permitted without the approval of the Committees; and (3) VA must report any bid savings of \$5,000,000 or more on projects as soon as they are identified.

CONSTRUCTION, MINOR PROJECTS

Appropriation, fiscal year 2025	\$692,000,000
Committee recommendation, fiscal year 2026	232,000,000

The Committee recommendation includes \$232,000,000 for Construction, Minor Project for fiscal year 2026, of which \$200,000,000 shall remain available until September 30, 2030, and \$32,000,000 shall remain available until expended.

Greater Los Angeles Healthcare System's Master Plan.—The Committee continues to encourage the Department to engage with the Principal Developer Team responsible for the Greater Los Angeles Health Care System's Master Plan and support the operationalization of the Master Plan.

GRANTS FOR CONSTRUCTION OF STATE EXTENDED CARE FACILITIES

Appropriation, fiscal year 2025	\$171,000,000
Committee recommendation, fiscal year 2026	171,000,000

The Committee recommendation includes \$171,000,000 for fiscal year 2026 for Grants for Construction of State Extended Care Facilities. A grant may not exceed 65 percent of the total cost of the project. The bill makes this funding available until expended.

Cost of Care for Veterans' Homes.—The Committee is concerned with the current reimbursement rate for state and non-profit run Veterans' Homes. The Committee recognizes that the costs associated with Veterans' Homes are substantial due to the high acuity level of the veteran population served, and that current VHA rates are inconsistent with the current cost of care. The Committee directs VHA to submit a report, no later than 90 days following the adoption of this bill, outlining how current reimbursement rates are calculated, how VHA makes locality adjustments, how the VHA works to reduce the cost of prescription drugs for veterans in homes, and recommended legislative changes for Congress to consider.

Duplicative State Veterans Home Surveys.—The Committee recognizes that State Veterans Homes undergo annual inspection surveys from the Department of Veterans Affairs and that many undergo an additional and separate, yet nearly identical, survey from the Centers for Medicare & Medicaid Services. This practice is disruptive to the veterans and financially inefficient. The Committee encourages VA, in coordination with CMS, to review this practice and provide a report on whether or not this process could be streamlined by conducting only one survey.

GRANTS FOR CONSTRUCTION OF VETERANS CEMETERIES

Appropriation, fiscal year 2025	\$60,000,000
Committee recommendation, fiscal year 2026	60,000,000

The Committee recommendation includes \$60,000,000 for Grants for Construction of Veterans Cemeteries. The bill makes this funding available until expended.

COST OF WAR TOXIC EXPOSURE FUND

Appropriation, fiscal year 2025	\$28,800,000,000
Committee recommendation, fiscal year 2026	52,676,000,000

The bill provides \$52,676,000,000 for the Cost of War Toxic Exposure Fund (TEF) veterans medical care related to toxic exposures.

Congressional Commitment to the PACT Act.—The enactment of the Honoring our Promise to Address Comprehensive Toxics Act (PACT Act) resulted in the largest expansion of veterans benefits in a generation, providing healthcare and benefits for veterans who were exposed to burn pits, Agent Orange and other toxic substances during their military service. The PACT Act created the Cost of War Toxic Exposure Fund (TEF) which provides mandatory funding for the delivery of health care and benefits for impacted veterans. The Committee remains committed to providing full funding to the Department in order to ensure successful implementation the PACT Act.

PACT Act Incremental Costs.—The Committee directs the Department to include in its fiscal year 2027 and all future budget justification materials a detailed description of the incremental costs for implementation of the PACT Act for all requested funds on an account-by-account basis.

ADMINISTRATIVE PROVISIONS

The bill includes 61 administrative provisions. The administrative provisions included in the bill are as follows:

Section 201. Allows for the transfer of funds among three mandatory appropriations. The Administration proposal to modify this provision is not adopted.

Section 202. Allows the Department to transfer funding among the four medical appropriations accounts in fiscal year 2026. The Administration proposal to modify this provision is not adopted.

Section 203. Allows for salaries and expenses funds to be used for hire of passenger vehicles, lease of facilities or land, and purchase of uniforms.

Section 204. Provides that only funding in “Construction, Major Projects” and “Construction, Minor Projects” can be used for the

purchase of any site for any new hospital or home or to construct any new hospital or home.

Section 205. Requires the Department to be reimbursed for medical services it provides to any person not defined as a beneficiary to ensure the Department is receiving payment for all medical services provided.

Section 206. Allows for the use of funds appropriated in fiscal year 2026 for “Compensation and Pensions”, “Readjustment Benefits”, and “Veterans Insurance and Indemnities” for payment of accrued obligations recorded in the last quarter of fiscal year 2025.

Section 207. Allows for the use of fiscal year 2026 funds to pay prior year obligations resulting from implementation of sections 3328(a), 3334, and 3712(a) of title 31, United States Code.

Section 208. Allows the Department to use surplus earnings from the national service life insurance, U.S. Government life insurance, and veterans’ special life insurance program to administer these programs.

Section 209. Allows enhanced-use lease proceeds deducted for administrative expenses that were incurred in a prior fiscal year to be available until expended.

Section 210. Limits the amount of reimbursement the Office of Resolution Management, Diversity and Inclusion, the Office of Employment Discrimination Complaint Adjudication, and the Alternative Dispute Resolution function within the Office of Human Resources and Administration can charge other offices and accounts of the Department for services provided.

Section 211. Requires the Department to collect current and accurate third-party reimbursement information for the purposes of third-party insurance collections. If persons receiving care or medical services do not disclose this information, the Department is allowed to bill them reasonable charges for services provided.

Section 212. Allows the Department to use enhanced-use lease funds for construction and alteration of medical facilities.

Section 213. Allows the Department to use the Medical Services appropriation for expenses related to the broader mission of medical care to veterans.

Section 214. Allows the Department to transfer Medical Care Collections to the “Medical Services” and “Medical Community Care” accounts to be used for veterans medical care and makes those funds available until expended.

Section 215. Allows veterans who reside in Alaska to obtain medical services from medical facilities supported by the Indian Health Service or tribal organizations, and provides for reimbursement for those services from VA.

Section 216. Allows the Department to transfer the proceeds received from the transfer of real property deposited into the VA Capital Asset Fund to the Major and Minor Construction appropriations accounts and makes those funds available until expended.

Section 217. Requires the Secretary to submit quarterly reports to the Committees on Appropriations of both Houses of Congress on the financial status of the Department of Veterans Affairs.

Section 218. Prohibits the Department from increasing total resources of the Information Technology appropriation by more than ten percent by transferring funding from the other VA accounts and requires the Department to receive approval from the Commit-

tees on Appropriations of both Houses of Congress before such transfer. The Administration proposal to modify this provision is not adopted.

Section 219. Provides up to \$739,918,000 of fiscal year 2026 funds for transfer to the Joint DOD–VA Medical Facility Demonstration Fund. Additional funding may be transferred from these accounts upon written notification to the Committees on Appropriations of both Houses of Congress.

Section 220. Permits the transfer of \$664,625,000 of fiscal year 2026 funding appropriated for medical accounts to the Joint DOD–VA Medical Facility Demonstration Fund for the operation of facilities designated as combined Federal medical facilities.

Section 221. Permits the transfer of funds deposited in the Medical Care Collections Fund to the Joint DOD–VA Medical Facility Demonstration Fund for facilities designated as combined Federal medical facilities.

Section 222. Directs that a minimum of \$15,000,000 shall be transferred from the four medical care appropriations to the Department of Defense/Department of Veterans Affairs Health Care Sharing Incentive Fund, to be available until expended.

Section 223. Requires the Secretary to notify the Committees on Appropriations of both Houses of Congress of all bid savings when identified in Major Construction projects that total at least \$5,000,000 or five percent of the programmed amount of the project.

Section 224. Prohibits the original scope of work for a Major Construction project from being increased above the scope specified for that project in the original justification data provided to Congress unless approved by the Committees on Appropriations of both Houses of Congress.

Section 225. Requires a quarterly report from each VBA regional office on pending disability claims, both initial and supplemental; error rates; the number of claims processing personnel; corrective actions taken; training programs; and review team audit results. In addition, the bill requires quarterly reporting on pending appeals at VBA, as well as BVA. The Administration proposal to delete this provision is not adopted.

Section 226. Requires advance written notification to the Committees on Appropriations of both Houses of Congress 15 days prior to organizational changes which result in the transfer of 25 or more full-time equivalent staff from one organizational unit to another. The Administration proposal to delete this provision is not adopted.

Section 227. Requires the Secretary to provide, on a quarterly basis to the Committees on Appropriations of both Houses of Congress, notification of any single national outreach and awareness marketing campaign in which obligations exceed \$1,000,000.

Section 228. Permits the transfer to “Medical Services” from any discretionary program except “General Operating Expenses, Veterans Benefits Administration” upon approval of the Committees on Appropriations of both Houses of Congress. This provision is intended to give VA flexibility as it administers the changes to its traditional healthcare program and the MISSION Act.

Section 229. Permits the transfer of funds between the “Board of Veterans Appeals” and “General Operating Expenses, Veterans

Benefits Administration” upon approval of the Appropriations Committees on Appropriations of both Houses of Congress.

Section 230. Prohibits the reprogramming of funds exceeding \$7,000,000 among the Major Construction projects unless the Committees on Appropriations of both Houses of Congress approve the request.

Section 231. Requires the Secretary to ensure that the toll-free suicide hotline provides immediate assistance from a trained professional and adheres to all requirements of the American Association of Suicidology.

Section 232. Requires the Department to use the mammography screening guidelines announced by the Secretary on May 10, 2017, through January 1, 2026.

Section 233. Allows the use of Medical Services funding for assisted reproductive technology treatment and adoption reimbursement for veterans and their spouses.

Section 234. Prohibits any funds from being used in a manner that is inconsistent with statutory limitations on outsourcing.

Section 235. Pertains to exceptions for Indian- or Native Hawaiian-owned businesses contracting with the Department.

Section 236. Directs the elimination over a series of years of the use of Social Security numbers in VA programs.

Section 237. References the provision in the Continuing Appropriations and Military Construction, Veterans Affairs, and Related Agencies Appropriations Act, 2017, and Zika Response and Preparedness Act (P.L. 114–223) pertaining to certification of marriage and family therapists.

Section 238. Prohibits funds from being used to transfer funding from the Filipino Veterans Equity Compensation Fund to any other VA account.

Section 239. Permits funding to be used in fiscal years 2025 and 2026 to carry out and expand the childcare pilot program authorized by section 205 of the Caregivers and Veterans Omnibus Health Services Act of 2010 (P.L. 111–163).

Section 240. Prohibits the Department from using funds to enter into an agreement to resolve a dispute or claim with an individual that would restrict the individual from speaking to Members of Congress or their staff on any topic, except those required to be kept secret in the interest of national defense or the conduct of foreign affairs.

Section 241. References language in the Continuing Appropriations and Military Construction, Veterans Affairs, and Related Agencies Appropriations Act, 2017, and Zika Response and Preparedness Act (P.L. 114–223) requiring certain data to be included in budget justifications for major construction projects.

Section 242. Prohibits the use of funds to deny the Inspector General timely access to information unless a provision of law expressly refers to the Inspector General and expressly limits such access.

Section 243. Prohibits funding from being used in a manner that would increase wait times for veterans at medical facilities.

Section 244. Prohibits the use of funds in fiscal year 2026 to convert any program that received specific purpose funds in fiscal year 2026 to a general purpose-funded program without the approval of the Committees on Appropriations of both Houses of Congress at

least 30 days prior to any such action. The Administration request to delete this provision is not adopted.

Section 245. Language regarding verification of service for coast-wise merchant seamen.

Section 246. Language regarding the use of canines, felines, and non-human primates in VA research.

Section 247. Includes language regarding staffing ratios.

Section 248. Allows fiscal year 2026 and 2027 “Medical Community Care” funds to be used to cover obligations that would have otherwise been paid by the Veterans Choice Fund.

Section 249. Allowing obligations and expenditures applicable to the “Medical Services” account in fiscal years 2017 through 2019 for aid to state homes to remain in the “Medical Community Care” account for such fiscal years.

Section 250. Specifies an amount from the four medical care accounts for gender-specific care for women.

Section 251. Language regarding a community-based outpatient clinic in Bakersfield, California.

Section 252. Requires quarterly reports on the status of the “Veterans Medical Care and Health Fund,” established to execute section 8002 of the American Rescue Plan (P.L. 117–2).

Section 253. Establishes a timeline for construction in accordance with a lease.

Section 254. Language regarding the use of unobligated balances to support construction projects in the CHIP-IN program.

Section 255. Prohibits federal funding for abortions except in cases of incest, rape, or life of the mother and prohibiting federal funding to implement the Department of Veterans Affairs’ Interim Final Rule on abortion.

Section 256. Prohibits federal funding for hormone therapies or surgeries for gender-affirming care.

Section 257. Language prohibiting federal funding for administering, implementing, or enforcing the final rule issued by the Secretary of Veterans Affairs related to special modes of transportation (88 Fed. Reg. 10032).

Section 258. Prohibits federal funds for carrying out the Coronavirus Disease 2019 Vaccination for Veterans Health Administration Health Care Personnel (VHA Directive 11903).

Section 259. Includes language in the eligibility for certain healthcare.

Section 260. Prohibits the Secretary of Veterans Affairs to use federal funding to report a person who is deemed mentally incapacitated, mentally incompetent, or to be experiencing an extended loss of consciousness who has been adjudicated as a mental defective, without the order or finding a judge, magistrate, or other judicial authority that a person is in danger to himself or herself or others.

Section 261. Includes a rescission of funds.

TITLE III

RELATED AGENCIES

AMERICAN BATTLE MONUMENTS COMMISSION

SALARIES AND EXPENSES

Appropriation, fiscal year 2025	\$158,630,000
Committee recommendation, fiscal year 2026	106,000,000

The recommendation includes \$106,000,000 for Salaries and Expenses of the American Battle Monuments Commission (ABMC).

Identifying Improperly Buried Servicemembers.—The Committee recommendation includes \$500,000 for ABMC to award a contract for the purpose of researching and identifying American-Jewish servicemembers buried at American military cemeteries who were buried under markers incorrectly representing their religion and heritage. The research should also include identifying surviving next of kin of these servicemembers. The ABMC should prioritize making an award to an organization with a demonstrated capability and expertise in conducting such research and identification activities. The Committee requests a report within 180 days of enactment of this Act on progress towards identifying incorrect markers for American-Jewish servicemembers, timeline for completion, and expected future funding requirements.

ABMC Mission.—The Committee requests that ABMC submit to the Committee on Appropriations a report not later than 90 days after enactment of the Act on the role of remembrance activities including facilitating flower orders for families of the fallen in its mission and the reason for any changes to that role and in its mission over time.

FOREIGN CURRENCY FLUCTUATIONS ACCOUNT

The recommendation includes such sums as necessary for the Foreign Currency Fluctuations Account (FCFA). The Foreign Currency Fluctuations account addresses exchange rate imbalances between the U.S. Dollar, the European Euro, and other foreign currencies. If exchange rates change at time of expenditure, funds from FCFA are transferred to Salaries and Expenses.

UNITED STATES COURT OF APPEALS FOR VETERANS CLAIMS

SALARIES AND EXPENSES

Appropriation, fiscal year 2025	\$47,200,000
Committee recommendation, fiscal year 2026	49,000,000

The recommendation includes \$49,000,000 for Salaries and Expenses for the United States Court of Appeals for Veterans Claims.

DEPARTMENT OF DEFENSE—CIVIL

CEMETERIAL EXPENSES, ARMY

SALARIES AND EXPENSES

Appropriation, fiscal year 2025	\$98,800,000
Committee recommendation, fiscal year 2026	115,000,000

The recommendation includes \$115,000,000 for Salaries and Expenses for Arlington National Cemetery.

Virtual Tours.—The Committee appreciates the on-going efforts of Arlington National Cemetery (ANC) to improve the interactive tools available to visitors and understands ANC is currently working to create a three-dimensional virtual tour to improve the visitor experience.

ARMED FORCES RETIREMENT HOME

TRUST FUND

The recommendation includes a total of \$70,520,000 for the Armed Forces Retirement Home (AFRH) Trust Fund, including \$1,000,000 for capital projects and \$25,000,000 from the general fund of the Treasury.

OPERATION AND MAINTENANCE

Appropriation, fiscal year 2025	\$43,060,000
Committee recommendation, fiscal year 2026	44,520,000

The Committee makes these operation and maintenance funds available until September 30, 2027 to provide AFRH greater ability to respond to emergency situations and ensure stable operations.

CAPITAL PROGRAM

Appropriation, fiscal year 2025	\$8,940,000
Committee recommendation, fiscal year 2026	1,000,000

Capital Maintenance Spending Plan.—The Committee directs AFRH to provide, not later than 30 days after enactment of this Act, an expenditure plan detailing the planned use of the funds provided for construction and renovation. The Committee continues to direct AFRH to prioritize completing projects that are currently underway.

MAJOR CONSTRUCTION

Appropriation, fiscal year 2025	\$31,000,000
Committee recommendation, fiscal year 2026	— — —

The Committee reminds Armed Forces Retirement Home (AFRH) to provide quarterly reports on the status of construction projects, including obligations of funds, anticipated timelines, and any changes to the overall cost of the project. Public Law 119–4 included \$31,000,000 to complete the Sheridan Building renovation project.

ADMINISTRATIVE PROVISION

The bill includes section 301 permitting funds from concessions at Army National Military Cemeteries to be used to support activities at the Cemeteries.

TITLE IV

GENERAL PROVISIONS

Section 401. The bill includes language prohibiting the obligation of funds beyond the current fiscal year unless expressly so provided.

Section 402. The bill includes language prohibiting the use of funds for programs, projects, or activities not in compliance with Federal law relating to risk assessment, the protection of private property rights, or unfunded mandates.

Section 403. The bill includes language encouraging all departments and agencies funded in this Act to expand the use of “E-Commerce” technologies and procedures.

Section 404. The bill includes language specifying the Congressional committees that are to receive all reports and notifications.

Section 405. The bill includes language prohibiting the transfer of funds to any instrumentality of the United States Government without authority from an appropriations Act.

Section 406. The bill includes language prohibiting any funds in this Act to be used for a project or program named for an individual serving as a Member, Delegate, or Resident Commissioner of the United States House of Representatives.

Section 407. The bill includes language requiring all reports submitted to Congress to be posted on official websites of the submitting agency.

Section 408. The bill includes language prohibiting the use of funds to establish or maintain a computer network unless such network blocks the viewing, downloading, and exchanging of pornography, except for law enforcement investigation, prosecution, or adjudication activities.

Section 409. The bill includes language prohibiting the use of funds for payment of first-class travel by an employee of the executive branch.

Section 410. The bill includes language prohibiting the use of funds in this Act for any contract where the contractor has not complied with E-Verify requirements.

Section 411. The bill includes language prohibiting the use of funds in this Act to construct facilities on military installations that do not meet resiliency standards.

Section 412. The bill includes language prohibiting the use of funds in this Act for the renovation, expansion, or construction of any facility in the continental United States for the purposes of housing any individual who has been detained at the United States Naval Station, Guantanamo Bay, Cuba.

Section 413. The bill includes language prohibiting the use of funds to support or defeat legislation pending before Congress.

Section 414. The bill includes language requiring a study on the prevalence and mortality of certain cancers of individuals who served active-duty aircrew in the Armed Forces.

Section 415. The bill includes language to assist in identifying the remains of fallen soldiers at the National Memorial Cemetery of the Pacific.

Section 416. The bill includes language prohibiting the Department of Veterans Affairs from purchasing computers, printers, software, or hardware needed for an office environment from the Peo-

ple's Republic of China or entities that contribute to the defense industry of the Chinese Communist Party.

Section 417. The bill includes language related to freedom of speech.

Section 418. The bill includes language establishing a "Spending Reduction Account."

HOUSE OF REPRESENTATIVES REPORTING REQUIREMENTS

The following items are included in accordance with various requirements of the Rules of the House of Representatives:

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

Pursuant to clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the following is a statement of general performance goals and objectives for which this measure authorizes funding:

The Committee on Appropriations considers program performance, including a program's success in developing and attaining outcome-related goals and objectives, in developing funding recommendations.

RESCISSION OF FFUNDS

Pursuant to clause 3(f)(2) of rule XIII of the Rules of the House of Representatives, the following statements are submitted describing the rescissions in the accompanying bill:

[TO BE PROVIDED]

TRANSFER OF FUNDS

Pursuant to clause 3(f)(2) of rule XIII of the Rules of the House of Representatives, the following statements are submitted describing the transfer of funds provided in the accompanying bill.

[TO BE PROVIDED]

DISCLOSURE OF EARMARKS AND CONGRESSIONALLY DIRECTED SPENDING ITEMS

The following table is submitted in compliance with clause 9 of rule XXI, and lists the congressional earmarks (as defined in paragraph (e) of clause 9) contained in the bill or in this report. Neither the bill nor the report contain any limited tax benefits or limited tariff benefits as defined in paragraphs (f) or (g) of clause 9 of rule XXI.

MILITARY CONSTRUCTION, VETERANS AFFAIRS, AND RELATED AGENCIES
[Community Project Funding]

Account	State	Project	Location	House Amount	House Requestor(s)
Army	AL	Access Control Point	Aniston Army Depot	\$18,000,000	Rogers
Army	FL	Joint Interagency Task Force-South Command and Control Facility	Naval Air Station Key West	50,000,000	Gimenez
Army	OK	Automation-Aided Instruction Building	Fort Sill	9,300,000	Cole
Navy	CA	Child Development Center	Naval Air Weapons Station China Lake	8,900,000	Fong
Navy	CA	F-35 Aircraft Maintenance Hangar	Naval Air Station Lemoore	17,000,000	Fong
Navy	FL	Communications Infrastructure	USMC Support Facility Blount Island	45,425,000	Rutherford
Navy	FL	Child Development Center	Naval Air Station Jacksonville	4,575,000	Rutherford
Navy	GU	Defense Access Roads	Guam	50,000,000	Moylan
Navy	VA	EOD Expeditionary Mine Countermeasures Facility	Joint Expeditionary Base Little Creek—Fort Story	12,000,000	Kiggins
Navy	VA	Power Upgrades (Pier 14)	Naval Station Norfolk	15,000,000	Kiggins
Navy	VA	Shore Power for Virginia Class Submarines	Naval Weapons Station Yorktown	2,200,000	Wittman
Air Force	NE	Survivable Airborne Operations Center	Offutt Air Force Base	29,800,000	Bacon, Flood
Air Force	UT	F-35 Canopy Repair Facility	Hill Air Force Base	2,600,000	Moore
Defense-wide	AL	General Purpose Warehouse	Aniston Army Depot	32,000,000	Rogers
Defense-wide	NC	SOF Forward Operating Base Freedom Upgrades	Fort Bragg	44,700,000	Hudson
Defense-wide	NC	SOF Joint Intelligence Center	Fort Bragg	5,300,000	Hudson
Army Reserve	KY	Aviation Support Facility	Fort Knox	50,000,000	Guthrie
Navy Reserve	TX	Maintenance Hangar	Naval Air Station Fort Worth	50,000,000	Elzey
Air Force Reserve	GA	Entry Control Facility	Dobbins Air Reserve Base	3,200,000	Loudermilk

COMPLIANCE WITH RULE XIII, CL. 3(e) (RAMSEYER RULE)

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italics, existing law in which no change is proposed is shown in roman):

[TO BE PROVIDED]

CHANGES IN THE APPLICATION OF EXISTING LAW

Pursuant to clause 3(f)(1)(A) of rule XIII of the Rules of the House of Representatives, the following statements are submitted describing the effect of provisions in the accompanying bill that directly or indirectly change the application of existing law.

[TO BE PROVIDED]

APPROPRIATIONS NOT AUTHORIZED BY LAW

Pursuant to clause 3(f)(1)(B) of rule XIII of the Rules of the House of Representatives, the following table lists the appropriations in the accompanying bill which are not authorized by law for the period concerned:

[TO BE PROVIDED]

PROGRAM DUPLICATION

Pursuant to clause 3(c)(5) of rule XIII of the Rules of the House of Representatives, no provision of this bill establishes or reauthorizes a program of the Federal Government known to be duplicative of another Federal program, a program that was included in any report from the Government Accountability Office to Congress pursuant to section 21 of Public Law 111-139, or a program related to a program identified in the most recent Catalog of Federal Domestic Assistance.

COMPARISON WITH THE BUDGET RESOLUTION

Pursuant to clause 3(c)(2) of rule XIII of the Rules of the House of Representatives and Section 308(a)(1)(A) of the Congressional Budget Act of 1974 (P.L. 93-344), as amended, the following table compares the levels of new budget authority provided in the bill with the appropriate allocations under section 302(b) of the Budget Act:

[TO BE PROVIDED]

FIVE-YEAR OUTLAY PROJECTIONS

Pursuant to clause 3(c)(2) of rule XIII and section 308(a)(1)(B) of the Congressional Budget Act of 1974 (P.L. 93-344), as amended, the following table contains five-year projections associated with the budget authority provided in the accompanying bill as provided to the Committee by the Congressional Budget Office.

[TO BE PROVIDED]

ASSISTANCE TO STATE AND LOCAL GOVERNMENTS

Pursuant to clause 3(c)(2) of rule XIII and section 308(a)(1)(C) of the Congressional Budget Act of 1974 (P.L. 93–344), as amended, the Congressional Budget Office has provided the following estimates of new budget authority and outlays provided by the accompanying bill for financial assistance to State and local governments.

[TO BE PROVIDED]

COMMITTEE HEARINGS

Pursuant to clause 3(c)(6) of rule XIII of the Rules of the House of Representatives, the following hearings were used to develop or consider the Military Construction, Department of Veterans Affairs, and Related Agencies Appropriations Act, 2026:

The Subcommittee on Military Construction, Department of Veterans Affairs, and Related Agencies held a hearing on March 11, 2025, entitled “Innovative Technology Opportunities in Military Construction”. The Subcommittee received testimony from:

Director of Military Programs, Mr. Dave Morrow, U.S. Army Corp of Engineers

Chief Engineer and Assistant Commander for Planning, Design, and Construction Naval Facilities Engineering Systems Command, Keith Hamilton

Brent Richardson, PE, Energy, Infrastructure, and Environmental Program, CNA

Thomas Healy, Founder and CEO of Hyliion

The Subcommittee on Military Construction, Department of Veterans Affairs, and Related Agencies held a hearing on April 8, 2025, entitled “Oversight Hearing—Quality of Life in the Military”. The Subcommittee received testimony from:

Sergeant Major Michael A. Weimer, U.S. Army

Master Chief Petty Officer James A. Honea, U.S. Navy

Sergeant Major Carlos A. Ruiz, U.S. Marine Corps

Chief Master Sergeant David A. Flossi, U.S. Air Force

Chief Master Sergeant John F. Bentivegna, U.S. Space Force

The Subcommittee on Military Construction, Department of Veterans Affairs, and Related Agencies held a hearing on May 15, 2025, entitled “Budget Hearing—Fiscal Year 2026 Request for the Department of Veterans Affairs”. The Subcommittee received testimony from:

The Honorable Douglas Collins, Secretary, Department of Veterans Affairs

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL)
AUTHORITY

The following table provides a detailed summary, for each Department and agency, comparing the amounts recommended in the bill with amounts enacted for fiscal year 2025 and budget estimates presented for fiscal year 2026.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request

TITLE I - DEPARTMENT OF DEFENSE					

Military Construction					

Active Components:					
Military Construction, Army.....	2,236,357	2,173,959	2,103,657	-132,700	-70,302
Military Construction, Navy and Marine Corps.....	4,159,399	6,012,677	4,104,499	-54,900	-1,908,178
Military Construction, Air Force.....	3,347,126	3,721,473	3,169,526	-177,600	-551,947
Military Construction, Defense-Wide.....	3,881,383	3,792,301	3,963,383	+82,000	+171,082
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Subtotal, Active components.....	13,624,265	15,700,410	13,341,065	-283,200	-2,359,345

Reserve Components:					
Military Construction, Army National Guard.....	398,489	151,880	358,489	-40,000	+206,609
Military Construction, Air National Guard.....	290,492	188,646	210,492	-80,000	+21,846
Military Construction, Army Reserve.....	295,032	42,239	305,032	+10,000	+262,793
Military Construction, Navy Reserve.....	29,829	2,255	79,829	+50,000	+77,574
Military Construction, Air Force Reserve.....	74,663	60,458	37,863	-36,800	-22,595
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Subtotal, Reserve components.....	1,088,505	445,478	991,705	-96,800	+546,227

North Atlantic Treaty Organization Security Investment Program.....	293,434	481,832	293,434	---	-188,398
Department of Defense Base Closure Account.....	489,174	410,161	489,174	---	+79,013
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Total, Military Construction.....	15,495,378	17,037,881	15,115,378	-380,000	-1,922,503
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COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
Family Housing					
Family Housing Construction, Army.....	276,647	228,558	276,647	---	+48,089
Family Housing Operation and Maintenance, Army.....	485,611	378,418	495,369	+9,758	+116,951
Family Housing Construction, Navy and Marine Corps....	245,742	177,597	245,742	---	+68,145
Family Housing Operation and Maintenance, Navy and Marine Corps.....	387,217	374,108	397,217	+10,000	+23,109
Family Housing Construction, Air Force.....	221,549	274,230	221,549	---	-52,681
Family Housing Operation and Maintenance, Air Force....	336,250	359,765	346,250	+10,000	-13,515
Family Housing Operation and Maintenance, Defense-Wide	52,156	53,374	52,156	---	-1,218
Department of Defense Family Housing Improvement Fund.	8,195	8,315	8,195	---	-120
Department of Defense Military Unaccompanied Housing Improvement Fund.....	497	497	497	---	---
Total, Family Housing.....	2,013,864	1,854,862	2,043,622	+29,758	+188,760
Administrative Provisions					
Unfunded Requirements (Sec. 124):					
Military Construction, Army	---	---	100,000	+100,000	+100,000
Military Construction, Navy and Marine Corps	---	---	100,000	+100,000	+100,000
Military Construction, Air Force.....	---	---	100,000	+100,000	+100,000
Military Construction, Army National Guard	---	---	40,000	+40,000	+40,000
Military Construction, Air National Guard	---	---	80,000	+80,000	+80,000
Military Construction, Army Reserve	---	---	40,000	+40,000	+40,000
Military Construction, Air Force Reserve	---	---	40,000	+40,000	+40,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
Lab Infrastructure (Sec. 128):					
Lab Infrastructure, Army.....	---	---	35,000	+35,000	+35,000
Lab Infrastructure, Navy & Marine Corps.....	---	---	35,000	+35,000	+35,000
Lab Infrastructure, Air Force.....	---	---	35,000	+35,000	+35,000
Child Development Centers (Sec. 130):					
Military Construction, Army.....	---	---	25,000	+25,000	+25,000
Military Construction, Navy & Marine Corps.....	---	---	25,000	+25,000	+25,000
Military Construction, Air Force.....	---	---	25,000	+25,000	+25,000
Barracks Replacement (Sec. 131):					
Military Construction, Army.....	---	---	25,000	+25,000	+25,000
Military Construction, Navy & Marine Corps.....	---	---	25,000	+25,000	+25,000
Military Construction, Air Force.....	---	---	25,000	+25,000	+25,000
Demolition (Sec. 132):					
Military Construction, Army.....	---	---	25,000	+25,000	+25,000
Military Construction, Navy & Marine Corps.....	---	---	25,000	+25,000	+25,000
Military Construction, Air Force.....	---	---	25,000	+25,000	+25,000
Total, Administrative Provisions.....	---	---	830,000	+830,000	+830,000
Total, title I, Department of Defense.....	17,509,242	18,892,743	17,989,000	+479,758	-903,743

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
TITLE II - DEPARTMENT OF VETERANS AFFAIRS					
Veterans Benefits Administration					
Compensation and pensions:					
Budget year appropriations.....	30,242,064	---	---	-30,242,064	---
Advance from prior year appropriations.....	182,310,515	227,240,071	227,240,071	+44,929,556	---
Subtotal, Compensation and pensions available in fiscal year.....	212,552,579	227,240,071	227,240,071	+14,687,492	---
Advance appropriations, FY 2027.....	227,240,071	241,947,603	241,947,603	+14,707,532	---
Less appropriations from prior year advances.....	-182,310,515	-227,240,071	-227,240,071	-44,929,556	---
Total, Compensation and pensions appropriated in this bill.....	257,482,135	241,947,603	241,947,603	-15,534,532	---
Readjustment benefits:					
Budget year appropriations.....	4,864,566	---	---	-4,864,566	---
Advance from prior year appropriations.....	13,399,805	20,372,030	20,372,030	+6,972,225	---
Subtotal, readjustment benefits available in fiscal year.....	18,264,371	20,372,030	20,372,030	+2,107,659	---
Advance appropriations, FY 2027.....	20,372,030	20,057,841	20,057,841	-314,189	---
Less appropriations from prior year advances.....	-13,399,805	-20,372,030	-20,372,030	-6,972,225	---
Total, Readjustment benefits appropriated in this bill.....	25,236,596	20,057,841	20,057,841	-5,178,755	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
Veterans insurance and indemnities:					
Budget year appropriations.....	12,701	---	---	-12,701	---
Advance from prior year appropriations.....	135,119	131,518	131,518	-3,601	---
Subtotal, Veterans insurance and indemnities available in fiscal year.....	147,820	131,518	131,518	-16,302	---
Advance appropriations, FY 2027.....	131,518	97,893	97,893	-33,625	---
Less appropriations from prior year advances.....	-135,119	-131,518	-131,518	+3,601	---
Total, Veterans insurance and indemnities appropriated in this bill.....	144,219	97,893	97,893	-46,326	---
Veterans housing benefit program fund:					
Credit subsidy:					
Direct.....	-83,000	---	136,000	+219,000	+136,000
Guaranteed.....	1,803,000	---	1,019,000	-784,000	+1,019,000
Subtotal (Credit subsidy).....	1,720,000	---	1,155,000	-565,000	+1,155,000
(Limitation on direct loans).....	(500)	(500)	---	(-500)	(-500)
Administrative expenses.....	316,742	266,737	266,737	-50,005	---
Subtotal (available this fiscal year).....	2,036,742	266,737	1,421,737	-615,005	+1,155,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
Vocational rehabilitation loans program account.....	78	45	45	-33	---
(Limitation on direct loans).....	(2,026)	(1,394)	(1,394)	(-632)	---
Administrative expenses.....	461	507	507	+46	---
Native American veteran housing loan program account..	2,719	---	---	-2,719	---
Administrative expenses.....	---	5,845	5,007	+5,007	-838
Cost of Direct Loan	---	6,865	6,866	+6,866	+1
General operating expenses, VBA.....	3,899,000	3,879,000	3,876,425	-22,575	-2,575
Total, Veterans Benefits Administration.....	288,801,950	266,262,336	267,413,924	-21,388,026	+1,151,588
Budget year appropriations.....	(41,058,331)	(4,158,999)	(5,310,587)	(-35,747,744)	(+1,151,588)
Advance appropriations, FY 2027.....	(247,743,619)	(262,103,337)	(262,103,337)	(+14,359,718)	---
Advances from prior year appropriations.....	(195,845,439)	(247,743,619)	(247,743,619)	(+51,898,180)	---
Veterans Health Administration					
Medical services (MS):					
Advance from prior year appropriations.....	71,000,000	75,039,000	75,039,000	+4,039,000	---
Subtotal, MS available in fiscal year.....	71,000,000	75,039,000	75,039,000	+4,039,000	---
Advance appropriations, FY 2027.....	75,039,000	59,858,000	59,858,000	-15,181,000	---
Total, MS appropriated in this bill.....	75,039,000	59,858,000	59,858,000	-15,181,000	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
Medical community care (MCC):					
Advance from prior year appropriations.....	20,382,000	34,000,000	34,000,000	+13,618,000	---
Subtotal, MCC available in fiscal year.....	20,382,000	34,000,000	34,000,000	+13,618,000	---
Advance appropriations, FY 2027.....	34,000,000	38,700,000	38,700,000	+4,700,000	---
Total, MCC appropriated in this bill.....	34,000,000	38,700,000	38,700,000	+4,700,000	---
Medical support and compliance (MSC):					
Advance from prior year appropriations.....	11,800,000	12,700,000	12,700,000	+900,000	---
Subtotal, MSC available in fiscal year.....	11,800,000	12,700,000	12,700,000	+900,000	---
Advance appropriations, FY 2027.....	12,700,000	12,000,000	12,000,000	-700,000	---
Total, MSC appropriated in this bill.....	12,700,000	12,000,000	12,000,000	-700,000	---
Medical facilities (MF):					
Budget year appropriations.....	149,485	---	---	-149,485	---
Advance from prior year appropriations.....	9,400,000	9,700,000	9,700,000	+300,000	---
Subtotal, MF available in fiscal year.....	9,549,485	9,700,000	9,700,000	+150,515	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
Advance appropriations, FY 2027.....	9,700,000	11,700,000	11,700,000	+2,000,000	---
Total, HF appropriated in this bill.....	9,849,485	11,700,000	11,700,000	+1,850,515	---
Total, VA Medical Care available in fiscal year.....	112,731,485	131,439,000	131,439,000	+18,707,515	---
Medical and prosthetic research.....	943,000	943,000	943,000	---	---
Medical care cost recovery collections: Offsetting collections.....	-4,632,000	---	-4,279,000	+353,000	-4,279,000
Appropriations (indefinite).....	4,632,000	---	4,279,000	-353,000	+4,279,000
Subtotal.....	---	---	---	---	---
Medical Care Collections Fund (MCCF) (transfer out) (Sec. 214).....	(-501,000)	---	(-666,000)	(-165,000)	(-666,000)
Medical Community Care and Medical Services (by transfer) (Sec. 214).....	(501,000)	---	(666,000)	(+165,000)	(+666,000)
VA medical funds (transfer out) (Sec. 219).....	(-594,828)	---	(-739,918)	(-145,090)	(-739,918)
DoD-VA Joint Medical Facility Demonstration Fund (by transfer) (Sec. 219).....	(594,828)	---	(739,918)	(+145,090)	(+739,918)
MCCF to DoD-VA Joint Medical Facility Demonstration Fund (transfer out) (Sec. 221).....	(-17,000)	---	(-17,000)	---	(-17,000)
DoD-VA Joint Medical Facility Demonstration Fund (by transfer) (Sec. 221).....	(17,000)	---	(17,000)	---	(+17,000)
VA Medical Care Funds (transfer out) (Sec. 222).....	(-15,000)	---	(-15,000)	---	(-15,000)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
DoD-VA Health Care Sharing Incentive Fund (by transfer) (Sec. 222).....	(15,000)	---	(15,000)	---	(+15,000)
Bridging Rental Assistance for Veteran Empowerment ..	---	1,100,000	970,000	+970,000	-130,000
Total, Veterans Health Administration.....	132,531,485	124,301,000	124,171,000	-8,360,485	-130,000
Budget year appropriations.....	(1,092,485)	(2,043,000)	(1,913,000)	(+820,515)	(-130,000)
Advance appropriations (FY 2027).....	(131,439,000)	(122,258,000)	(122,258,000)	(-9,181,000)	---
Advances from prior year appropriations.....	(112,582,000)	(131,439,000)	(131,439,000)	(+18,857,000)	---
VA Medical Care.....	112,731,485	131,439,000	131,439,000	+18,707,515	---
(Medical Services).....	71,000,000	75,039,000	75,039,000	+4,039,000	---
(Medical Community Care).....	20,382,000	34,000,000	34,000,000	+13,618,000	---
(Medical Support and Compliance).....	11,800,000	12,700,000	12,700,000	+900,000	---
(Medical Facilities).....	9,549,485	9,700,000	9,700,000	+150,515	---
(By transfer).....	(1,127,828)	---	(1,437,918)	(+310,090)	(+1,437,918)
(Transfer out).....	(-1,127,828)	---	(-1,437,918)	(-310,090)	(-1,437,918)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
National Cemetery Administration					
National Cemetery Administration.....	480,000	497,000	497,000	+17,000	---
Departmental Administration					
General Administration.....	475,000	440,000	450,000	-25,000	+10,000
Board of Veterans Appeals.....	287,000	277,000	287,000	---	+10,000
Subtotal.....	762,000	717,000	737,000	-25,000	+20,000
Information Technology Systems (IT Systems).....	6,401,000	5,908,000	5,882,000	-519,000	-26,000
Veterans Electronic Health Record (EHR).....	1,334,142	3,495,000	2,515,893	+1,181,751	-979,107
Office of Inspector General.....	296,000	296,000	295,000	-1,000	-1,000
Construction, major projects.....	981,219	1,871,000	1,750,000	+788,781	-121,000
Construction, minor projects.....	692,000	232,000	232,000	-460,000	---
Grants for construction of State extended care facilities.....	171,000	171,000	171,000	---	---
Grants for the construction of Veterans cemeteries....	60,000	60,000	60,000	---	---
Total, Departmental Administration.....	10,677,361	12,750,000	11,642,893	+965,532	-1,107,107

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
Cost of War Toxic Exposures Fund					
Budget Year Appropriations.....	6,000,000	52,676,000	52,676,000	+46,676,000	---
Administrative Provisions					
Recurring Expenses Transformational Fund (Sec. 252)(non-add).....	(646,000)	---	---	(-646,000)	---
Veterans Electronic Health Record (Sec. 256) (rescission).....	-7,000	---	---	+7,000	---
Total, Administrative Provisions.....	-7,000	---	---	+7,000	---
Total, title II, Department of Veterans Affairs.					
	438,483,796	456,486,336	456,400,817	+17,917,021	-85,519
Budget year appropriations.....	(59,308,177)	(72,124,999)	(72,039,480)	(+12,731,303)	(-85,519)
Rescissions.....	(-7,000)	---	---	(+7,000)	---
Advance Appropriations, FY27:					
(Mandatory).....	(247,743,619)	(262,103,337)	(262,103,337)	(+14,359,718)	---
(Discretionary).....	(131,439,000)	(122,258,000)	(122,258,000)	(-9,181,000)	---
(By transfer).....	(1,127,828)	---	(1,437,918)	(+310,090)	(+1,437,918)
(Transfer out).....	(-1,127,828)	---	(-1,437,918)	(-310,090)	(-1,437,918)
(Limitation on direct loans).....	(2,526)	(1,894)	(1,394)	(-1,132)	(-500)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
Advances from prior year appropriations:					
(Mandatory).....	(195,845,439)	(247,743,619)	(247,743,619)	(+51,898,180)	---
(Discretionary).....	(112,582,000)	(131,439,000)	(131,439,000)	(+18,857,000)	---
Total, available this fiscal year.....	367,728,616	451,307,618	451,222,099	+83,493,483	-85,519
(Mandatory).....	(238,684,770)	(300,419,619)	(301,574,619)	(+62,889,849)	(+1,155,000)
(Discretionary).....	(129,043,846)	(150,887,999)	(149,647,480)	(+20,603,634)	(-1,240,519)
Advances from prior year less FY 2027 advances	-51,898,180	-14,359,718	-14,359,718	+37,538,462	---
Total, VA Medical Care available this fiscal year.....	60,833,305	117,079,282	117,079,282	+56,245,977	---
Net mandatory.....	-51,898,180	-14,359,718	-14,359,718	+37,538,462	---
(Discretionary).....	112,731,485	131,439,000	131,439,000	+18,707,515	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
TITLE III - RELATED AGENCIES					
American Battle Monuments Commission					
Salaries and expenses.....	158,630	106,281	106,000	-52,630	-281
Total, American Battle Monuments Commission.....	158,630	106,281	106,000	-52,630	-281
U.S. Court of Appeals for Veterans Claims					
Salaries and expenses.....	47,200	49,000	49,000	+1,800	---
Department of Defense - Civil					
Cemeterial Expenses, Army					
Salaries and expenses.....	99,880	118,780	115,000	+15,120	-3,780
Construction.....	88,600	---	---	-88,600	---
Total, Cemeterial Expenses, Army.....	188,480	118,780	115,000	-73,480	-3,780
Armed Forces Retirement Home - Trust Fund					
Operation and maintenance.....	43,060	77,000	44,520	+1,460	-32,480
Capital program.....	8,940	---	1,000	-7,940	+1,000
Payment from General Fund.....	25,000	---	25,000	---	+25,000
Subtotal, Armed Forces Retirement Home - Trust Fund.....	77,000	77,000	70,520	-6,480	-6,480

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
Armed Forces Retirement Home - Major Construction					
Major Construction.....	31,000	---	---	-31,000	---
Total, Armed Forces Retirement Home.....	108,000	77,000	70,520	-37,480	-6,480
Total, title III, Related Agencies.....	502,310	351,061	340,520	-161,790	-10,541

TITLE IV - GENERAL PROVISIONS

National Academies study on certain cancers (Sec. 414)	---	---	1,500	+1,500	+1,500
Pilot in Unidentified Remains (Sec. 417).....	---	---	1,500	+1,500	+1,500
Rescission.....	---	---	-15,889,000	-15,889,000	-15,889,000
Total, title IV, General Provisions.....	---	---	-15,886,000	-15,886,000	-15,886,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
OTHER APPROPRIATIONS					
FISCAL RESPONSIBILITY ACT, 2023 (P.L. 118-5)					
Cost of War Toxic Exposures Fund, FY 2024 Budget Year (non-add).....	(20,268,000)	---	---	(-20,268,000)	---
Cost of War Toxic Exposures Fund, FY 2025 Advance Appropriation (non-add).....	(24,455,000)	---	---	(-24,455,000)	---
Total, Fiscal Responsibility Act, 2023 (P.L. 118-5).....	(44,723,000)	---	---	(-44,723,000)	---
INDO-PACIFIC SECURITY SUPPLEMENTAL APPROPRIATIONS ACT, 2024					
DEPARTMENT OF DEFENSE					
Military Construction, Navy and Marine Corps (emergency).....	281,917	---	---	-281,917	---
Total, Indo-Pacific Security Supplemental.....	281,917	---	---	-281,917	---
Total, Other Appropriations.....	281,917	---	---	-281,917	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2025
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2026
(Amounts in thousands)

	FY 2025 Enacted	FY 2026 Request	Bill	Bill vs. Enacted	Bill vs. Request
Grand total.....	456,777,265	475,730,140	458,844,337	+2,067,072	-16,885,803
Budget year appropriations.....	(77,319,729)	(91,368,803)	(90,372,000)	(+13,052,271)	(-996,803)
Emergency appropriations in this bill.....	(281,917)	---	---	(-281,917)	---
(Emergencies).....	(281,917)	---	---	(-281,917)	---
Rescissions.....	(-7,000)	---	(-15,889,000)	(-15,882,000)	(-15,889,000)
Advance appropriations, FY26.....	(379,182,619)	(384,361,337)	(384,361,337)	(+5,178,718)	---
Advances from prior year appropriations.....	(308,427,439)	(379,182,619)	(379,182,619)	(+70,755,180)	---
(By transfer).....	(1,127,828)	---	(1,437,918)	(+310,090)	(+1,437,918)
(Transfer out).....	(-1,127,828)	---	(-1,437,918)	(-310,090)	(-1,437,918)
(Limitation on direct loans).....	(2,526)	(1,894)	(1,394)	(-1,132)	(-500)
Less advances for subsequent years.....	-247,743,619	-262,103,337	-262,103,337	-14,359,718	---
Plus advances provided in prior years.....	112,582,000	131,439,000	131,439,000	+18,857,000	---
Less advances for subsequent years.....	-131,439,000	-122,258,000	-122,258,000	+9,181,000	---

FULL COMMITTEE VOTES

[TO BE PROVIDED]

MINORITY VIEWS

[TO BE PROVIDED]