

ANS to HR 3224, Deborah Sampson Act Section-By-Section:

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Section 1 is the bill title, “Deborah Sampson Act” and the table of contents.

Section 101 is Rep. Brownley’s Draft Bill to Establish the Office of Women’s Health. establishes the Office of Women’s Health reporting to the Undersecretary for Health, to identify and address need and deficiencies in care, and adequately allocate resources throughout the Veterans Health Administration. This section allows the Undersecretary for Health to reorganize existing capabilities and consolidate them within one office that reports directly to the Undersecretary, and ensures that at least one women’s health primary care provider is staffed at each VA medical facility. The reports section of this bill also incorporates, **Rep. Underwood’s Caring for Our Women Veterans Act (H.R. 3636)**. This requires reporting on the use of women veterans of health care from VA, on the models of health care facilities for women’s primary health care, and the staffing of women’s primary health care in VA medical facilities. This section also incorporates part of **Rep. Correa’s Improving Oversight of Women Veterans Care Act (HR 4096)**. This requires the Secretary to submit to Congress an annual report on access of women veterans to gender specific services under community care contracts. This section also includes reporting on accessibility and treatment options for women veterans. This report will include an assessment of wheelchair accessibility of women’s health centers; an assessment of accessibility to radiology and mammography, including door sizes and hoists; options for women veterans to access mental health primary care providers; and options for clothing for women at medical centers.

Section 102 and Section 103 is Rep. Brindisi’s bill to improve communication of the Department of Veterans affairs related to services available for women veterans. This statutorily requires that the Department of Veterans Affairs include text messaging capability at the Women Veterans Call Center and requires expansion of VA websites to provide services available to women veterans.

Section 104 is a component of Rep. Rose’s Breaking Barriers for Women Veterans Act (HR 3036) This section requires reporting on retrofitting facilities to address women veterans’ healthcare, and deficiencies in environments of care for women veterans in VA medical facilities

Section 105 is a component of Rep. Correa’s Improving Oversight of Women Veterans Care Act (HR 4096). This requires adherence to Environment of Care standards and accountability and transparency for adherence to those standards.

Section 106-107 are components of Rep. Rose’s Breaking Barriers for Women Veterans Act (HR 3036) **Section 106** ensures additional funding for primary care and emergency care clinicians in women veterans’ health care mini-residency program

Section 107 establishes a women veteran training module for non-VA health care providers

Section 201 is Rep. Brownley’s Women Veterans Equal Access to Quality Care Act (HR 3224). This ensures that women’s health primary care is available during regular business hours;

requires a study by the Secretary on the use of extended hours as a means of reducing care barriers, and the need for extended hours, and report this study to Congress

Section 202 expands military sexual trauma counseling to members of the Reserve and National Guard.

Section 203 is Rep. Brownley's Building Supportive Networks for Women Veterans Act (HR 2798). This would expand and make permanent the U.S. Department of Veterans Affairs (VA) pilot program on counseling in retreat settings for women veterans coping with post-traumatic stress disorder and other wounds of war. In addition, this would also expand and make permanent counseling in retreat settings for all veterans and their families, while ensuring that there remain cohorts for only women veterans.

Section 204 is Rep. S. Lee's Newborn Care Improvement Act (HR 2645) and Rep. Allred's VA Newborn Emergency Treatment Act (HR 2752). This would extend coverage of newborn health care for children of veterans. Currently, veterans are only eligible to receive seven days of newborn care, after which they must find and sign up for health insurance for their newborn. This bill would double that available time to 14 days of care, providing additional time for veterans to find the best health coverage, especially during a high-stress period. Additionally, this bill requires VA to submit an annual report on the number of newborn children that have received such services.

This section also ensures that qualified newborns get access to VA covered medical care including in emergency situations or when the newborn is delivered at a non-VA facility. This measure expands the fourteen days of VA provided newborn medical care (through a waiver process) for a medically necessary extension; allows VA to cover the transportation of both newborn and parents between medical facilities; streamlines billing process to remove unnecessary burdens on veterans; and authorizes the Secretary to waive any outstanding debts associated with medically-necessary emergency transportation services for a newborn incurred by the veterans.

Section 301 is a component of Rep. Velazquez's Violence Against Women Veterans Act (HR 3867). This Requires the Advisory Committee on Women veterans to conduct assessments pertaining to the impact of intimate partner violence on women

Section 302 a component of Rep. Rose's Breaking Barriers for Women Veterans Act (HR3036). This requires the Secretary of Veterans Affairs to conduct a study on the use of the Women Veteran Program Manager of and the feasibility of creating a Women Veterans Ombudsman position.

Section 303 is Rep. Pappas's bill (HR 2681) requiring VA to assess the availability of prosthetics specifically for women veterans.

Section 304 is Rep. Cunningham's bill (HR 2982) . This requires the Secretary of Veterans Affairs to conduct a study of barriers for women veterans to health care from the Department of Veterans Affairs

Section 305 is Rep. Delgado's Improving Benefits for Underserved Veterans Act. This requires the Sec of the VA to publish a report regarding veterans who receive benefits, including the Transition Assistance Program. This report will include data regarding veterans and their sex, minority group member status, and by both categories, excluding personally identifiable information. The report will identify any disparities in the use of benefits, analysis of the cause of those disparities, and proposed recommendations to address those disparities.

Section 306 Requires the Secretary of Veterans Affairs to submit a report on the Women Veteran Coordinator Program, identifying if the program is appropriately staffed, if regional benefits offices have a Women Veteran Coordinator, the position description of the coordinator, and a description of metrics to determine the success and performance of the coordinator.

Section 321 is Rep. Brownley's Stop Harassment and Assault at VA Act (HR 4554). This requires the Secretary of Veterans Affairs to establish a comprehensive policy to end harassment and sexual assault, including gender-based harassment. The policy will include:

- Responses of incidents of harassment and sexual assault by any veteran or other public visitor to VA facility, and following disciplinary measures
- A process for reporting and responding to harassment and sexual assault
- Mandatory reporting requirement applicable to an employee or contractor of the VA who witnesses harassment or sexual assault
- Disciplinary actions for employees or contractors who fail to report these incidents
- Mandatory annual training for employees and contractors regarding how to report and address harassment and sexual assault, including bystander intervention training
- The distribution of anti-harassment and anti-sexual assault education materials by mail or email to individuals receiving a benefit
- The prominent display of anti-harassment and anti-sexual assault messages in each VA facility, including how to report harassment or assault
- The posting of these materials on the VA website
- Establish points of contacts for each VA facility, VISN facility, regional benefits office, and Central Office of the VA

Section 322-323 are Rep. Levin's Housing for Women Veterans Act (HR 2924)

Section 322 grants not less than \$20,000,000 to be available for the provision of financial assistance to organizations that have a focus on providing assistance to women veterans and their families.

Section 323 instructs the Secretary of Veterans Affairs to complete a gap analysis of VA programs that provide assistance to women veterans who are homeless and report it to Congress. This analysis will identify areas in which these programs are successful or where they fail to meet the needs of homeless women veterans.

Section 324 is Rep. Wild's Improving Legal Services for Female Veterans Act (HR 3189). This establishes a partnership between the Secretary of Veterans Affairs and at least one nongovernmental organization to provide legal services to women veterans.

Section 325-326 is Rep. Velazquez’s Violence Against Women Veterans Act (HR 3867). This necessitates that the Secretary of Veterans Affairs carry out a program to assist veterans who have experienced or who are experiencing intimate partner violence or sexual assault.

Section 325 The Sec of VA will carry out a program to assist former servicemembers who have experienced or are experiencing intimate partner violence or sexual assault in accessing benefits from VA. This program will be in collaboration with intimate violence shelters or programs, state assault coalitions, and other health or service providers. The Sec. may include in his program training for community-based service providers, assistance for service providers to ensure emergency services – including for members of Indian tribes – and other outreach and assistance deemed necessary. The Sec. may appoint local coordinators.

Section 326 Establishes a national baseline study and responsive task force. The Secretary of Veterans Affairs shall conduct a national baseline study of the scope of the problem of sexual assault and intimate partner violence among veterans, their spouses, or their intimate partners. Subsequently, The Secretary of Veterans Affairs – in consultation with the Attorney General and Secretary of Health and Human Services – shall establish a national task force to develop comprehensive national programs that include integrating facilities, services, and benefits of the VA. The task force will consult with representatives from not fewer than three national organizations and not fewer than three state coalitions. Task force duties include:

- Reviewing existing services and policies of the VA to develop a national program addressing intimate partner violence and sexual assault prevention, response, and treatment
- Reviewing feasibility of expedited processes regarding housing, temporary benefits in case of emergency
- Identifying requirements regarding domestic violence assistance or sexual assault response services that are not being met by the VA
- Making recommendations regarding feasibility of providing direct services for veterans in response to sexual assault, including through the use of a nurse examiner – especially in underserved/remote areas, including Native Americans.
- Reviewing availability of counseling services
- And reporting gathered information annually.