



(Original Signature of Member)

118TH CONGRESS  
1ST SESSION

**H. R.** \_\_\_\_\_

To amend title 38, United States Code, to improve certain programs of the Department of Veterans Affairs for home and community based services for veterans, and for other purposes.

---

IN THE HOUSE OF REPRESENTATIVES

Ms. BROWNLEY introduced the following bill; which was referred to the Committee on \_\_\_\_\_

---

**A BILL**

To amend title 38, United States Code, to improve certain programs of the Department of Veterans Affairs for home and community based services for veterans, and for other purposes.

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

3 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

4 (a) SHORT TITLE.—This Act may be cited as the  
5 “Elizabeth Dole Home- and Community-Based Services  
6 for Veterans and Caregivers Act of 2023” or the “Eliza-  
7 beth Dole Home Care Act”.

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

- Sec. 1. Short title; table of contents.
- Sec. 2. Increase of expenditure cap for noninstitutional care alternatives to nursing home care.
- Sec. 3. Coordination with Program of All-Inclusive Care for the Elderly.
- Sec. 4. Home- and community-based services: programs.
- Sec. 5. Coordination with assistance and support services for caregivers.
- Sec. 6. Development of centralized website for program information.
- Sec. 7. Improvements relating to Homemaker and Home Health Aide program.
- Sec. 8. Reviews and other improvements relating to home- and community-based services.
- Sec. 9. Definitions.

3 **SEC. 2. INCREASE OF EXPENDITURE CAP FOR NONINSTITU-**  
4 **TIONAL CARE ALTERNATIVES TO NURSING**  
5 **HOME CARE.**

6 (a) INCREASE OF EXPENDITURE CAP.—Section  
7 1720C(d) of title 38, United States Code, is amended—

8 (1) by striking “The total cost” and inserting  
9 “(1) Except as provided in paragraph (2), the total  
10 cost”;

11 (2) by striking “65 percent” and inserting “100  
12 percent”; and

13 (3) by adding at the end the following new  
14 paragraph:

15 “(2) The total cost of providing services or in-kind  
16 assistance in the case of any veteran for any fiscal year  
17 under the program may exceed 100 percent of the cost  
18 that would otherwise have been incurred as specified in  
19 paragraph (1) if the Secretary determines, based on a con-  
20 sideration of clinical need, geographic market factors, and

1 such other matters as the Secretary may prescribe  
2 through regulation, that such higher total cost is in the  
3 best interest of the veteran.”.

4 (b) APPLICABILITY.—The amendments made by sub-  
5 section (a) shall apply with respect to fiscal years begin-  
6 ning on or after the date of the enactment of this Act.

7 **SEC. 3. COORDINATION WITH PROGRAM OF ALL-INCLUSIVE**  
8 **CARE FOR THE ELDERLY.**

9 Section 1720C of title 38, United States Code, as  
10 amended by section 2, is further amended by adding at  
11 the end the following new subsection:

12 “(f) In furnishing services to a veteran under the pro-  
13 gram conducted pursuant to subsection (a), if a medical  
14 center of the Department through which such program is  
15 administered is located in a geographic area in which serv-  
16 ices are available to the veteran under a PACE program  
17 (as such term is defined in sections 1894(a)(2) and  
18 1934(a)(2) of the Social Security Act (42 U.S.C.  
19 1395eee(a)(2); 1396u–4(a)(2))), the Secretary shall seek  
20 to enter into an agreement with the PACE program oper-  
21 ating in that area for the furnishing of such services.”.

22 **SEC. 4. HOME- AND COMMUNITY-BASED SERVICES: PRO-**  
23 **GRAMS.**

24 (a) PROGRAMS.—Chapter 17 of title 38, United  
25 States Code, is amended by inserting after section 1720J

1 the following new section (and conforming the table of sec-  
2 tions at the beginning of such chapter accordingly):

3 **“§ 1720K. Home- and community-based services: pro-  
4 grams**

5 “(a) IN GENERAL.—In furnishing noninstitutional al-  
6 ternatives to nursing home care pursuant to the authority  
7 of section 1720C of this title (or any other authority under  
8 this chapter or other provision of law administered by the  
9 Secretary of Veterans Affairs), the Secretary shall carry  
10 out each of the programs specified in this section in ac-  
11 cordance with such relevant authorities except as other-  
12 wise provided in this section.

13 “(b) VETERAN-DIRECTED CARE PROGRAM.—(1) The  
14 Secretary of Veterans Affairs, in collaboration with the  
15 Secretary of Health and Human Services, shall carry out  
16 a program to be known as the ‘Veteran-Directed Care pro-  
17 gram’ under which the Secretary of Veterans Affairs may  
18 enter into agreements with the providers described in  
19 paragraph (2) to provide to eligible veterans funds to ob-  
20 tain such in-home care services and related items as may  
21 be determined appropriate by the Secretary of Veterans  
22 Affairs and selected by the veteran, including through the  
23 veteran hiring individuals to provide such services and  
24 items or directly purchasing such services and items.

1       “(2) The providers described in this paragraph are  
2 the following:

3               “(A) An Aging and Disability Resource Center,  
4 an area agency on aging, or a State agency.

5               “(B) A center for independent living.

6               “(C) An Indian tribe or tribal organization re-  
7 ceiving assistance under title VI of the Older Ameri-  
8 cans Act of 1965 (42 U.S.C. 3057 et seq.).

9       “(3) In carrying out the Veteran-Directed Care pro-  
10 gram, the Secretary of Veterans Affairs shall—

11               “(A) administer such program through each  
12 medical center of the Department of Veterans Af-  
13 fairs;

14               “(B) seek to ensure the availability of such pro-  
15 gram in American Samoa, Guam, the Common-  
16 wealth of the Northern Mariana Islands, the Com-  
17 monwealth of Puerto Rico, the Virgin Islands of the  
18 United States, and any other territory or possession  
19 of the United States, to the extent practicable; and

20               “(C) seek to ensure the availability of such pro-  
21 gram for eligible veterans who are Native American  
22 veterans receiving care and services furnished by the  
23 Indian Health Service, a tribal health program, an  
24 Urban Indian organization, or (in the case of a Na-

1           tive Hawaiian veteran) a Native Hawaiian health  
2           care system, to the extent practicable.

3           “(4) If a veteran participating in the Veteran-Di-  
4           rected Care program is catastrophically disabled, the vet-  
5           eran may continue to use funds under the program during  
6           a period of hospitalization in the same manner that the  
7           veteran would be authorized to use such funds under the  
8           program if the veteran were not hospitalized.

9           “(c) **HOMEMAKER AND HOME HEALTH AIDE PRO-**  
10          **GRAM.**—(1) The Secretary shall carry out a program to  
11          be known as the ‘Homemaker and Home Health Aide pro-  
12          gram’ under which the Secretary may enter into agree-  
13          ments with home health agencies to provide to eligible vet-  
14          erans such home health aide services as may be deter-  
15          mined appropriate by the Secretary.

16          “(2) In carrying out the Homemaker and Home  
17          Health Aide program, the Secretary shall ensure the avail-  
18          ability of such program—

19                 “(A) in the locations specified in subparagraph  
20                 (B) of subsection (b)(3); and

21                 “(B) for the veteran populations specified in  
22                 subparagraph (C) of such subsection.

23          “(d) **HOME-BASED PRIMARY CARE PROGRAM.**—The  
24          Secretary shall carry out a program to be known as the  
25          ‘Home-Based Primary Care program’ under which the

1 Secretary may furnish to eligible veterans in-home health  
2 care, the provision of which is overseen by a provider of  
3 the Department.

4 “(e) PURCHASED SKILLED HOME CARE PROGRAM.—  
5 The Secretary shall carry out a program to be known as  
6 the ‘Purchased Skilled Home Care program’ under which  
7 the Secretary may furnish to eligible veterans such in-  
8 home care services as may be determined appropriate and  
9 selected by the Secretary for the veteran.

10 “(f) CAREGIVER SUPPORT.—(1) With respect to a  
11 resident eligible caregiver of a veteran participating in a  
12 program under this section, the Secretary shall—

13 “(A) if the veteran meets the requirements of  
14 a covered veteran under section 1720G(b) of this  
15 title, provide to such caregiver the option of enroll-  
16 ing in the program of general caregiver support serv-  
17 ices under such section;

18 “(B) provide to such caregiver covered respite  
19 care of not less than 30 days annually; and

20 “(C) conduct on an annual basis (and, to the  
21 extent practicable, in connection with in-person serv-  
22 ices provided under the program in which the vet-  
23 eran is participating), a wellness contact of such  
24 caregiver.

1       “(2) Covered respite care provided to a resident eligi-  
2 ble caregiver of a veteran under paragraph (1) may exceed  
3 30 days annually if such extension is requested by the resi-  
4 dent eligible caregiver or veteran and determined medi-  
5 cally appropriate by the Secretary.

6       “(g) RULE OF CONSTRUCTION.—Nothing in this sec-  
7 tion shall be construed to limit the authority of the Sec-  
8 retary to carry out programs providing home- and commu-  
9 nity-based services under any other provision of law.

10       “(h) DEFINITIONS.—In this section:

11           “(1) The terms ‘Aging and Disability Resource  
12 Center’, ‘area agency on aging’, and ‘State agency’  
13 have the meanings given those terms in section 102  
14 of the Older Americans Act of 1965 (42 U.S.C.  
15 3002).

16           “(2) The terms ‘caregiver’ and ‘family care-  
17 giver’, with respect to a veteran, have the meanings  
18 given those terms, respectively, under subsection (e)  
19 of section 1720G of this title with respect to an eli-  
20 gible veteran under subsection (a) of such section or  
21 a covered veteran under subsection (b) of such sec-  
22 tion, as the case may be.

23           “(3) The term ‘center for independent living’  
24 has the meaning given that term in section 702 of  
25 the Rehabilitation Act of 1973 (29 U.S.C. 796a).



1           “(4) The term ‘covered respite care’ has the  
2 meaning given such term in section 1720G(d) of this  
3 title.

4           “(5) The term ‘eligible veteran’ means any vet-  
5 eran—

6                   “(A) for whom the Secretary determines  
7 participation in a specific program under this  
8 section is medically necessary to promote, pre-  
9 serve, or restore the health of the veteran; and

10                   “(B) who absent such participation would  
11 be at increased risk for hospitalization, place-  
12 ment in a nursing home, or emergency room  
13 care.

14           “(6) The term ‘home health aide’ means an in-  
15 dividual employed by a home health agency to pro-  
16 vide in-home care services.

17           “(7) The term ‘in-home care service’ means any  
18 service, including a personal care service, provided to  
19 enable the recipient of such service to live at home.

20           “(8) The terms ‘Indian tribe’ and ‘tribal organi-  
21 zation’ have the meanings given those terms in sec-  
22 tion 4 of the Indian Self-Determination and Edu-  
23 cation Assistance Act (25 U.S.C. 5304).

1           “(9) The terms ‘Native American’ and ‘Native  
2 American veteran’ have the meanings given those  
3 terms in section 3765 of this title.

4           “(10) The terms ‘Native Hawaiian’ and ‘Native  
5 Hawaiian health care system’ have the meanings  
6 given those terms in section 12 of the Native Hawai-  
7 ian Health Care Improvement Act (42 U.S.C.  
8 11711).

9           “(11) The terms ‘tribal health programs’ and  
10 ‘Urban Indian organizations’ have the meanings  
11 given those terms in section 4 of the Indian Health  
12 Care Improvement Act (25 U.S.C. 1603).

13           “(12) The term ‘resident eligible caregiver’  
14 means an individual who—

15                   “(A) is a caregiver, or a family caregiver,  
16 of a veteran and resides with that veteran; and

17                   “(B) has not entered into a contract,  
18 agreement, or other arrangement for such indi-  
19 vidual to act as a caregiver for that veteran un-  
20 less such individual is a family member of the  
21 veteran or is furnishing caregiver services  
22 through a medical foster home.”.

23           (b) DEADLINE FOR IMPROVED ADMINISTRATION.—  
24 The Secretary of Veterans Affairs shall ensure that the  
25 Veteran-Directed Care program and the Homemaker and

1 Home Health Aide program are administered through  
2 each medical center of the Department of Veterans Affairs  
3 in accordance with section 1720K of title 38, United  
4 States Code (as added by subsection (a)), by not later  
5 than two years after the date of the enactment of this Act.

6 **SEC. 5. COORDINATION WITH ASSISTANCE AND SUPPORT**  
7 **SERVICES FOR CAREGIVERS.**

8 (a) COORDINATION WITH PROGRAM OF COMPREHEN-  
9 SIVE ASSISTANCE FOR FAMILY CAREGIVERS.—

10 (1) COORDINATION.—Section 1720G(a) of title  
11 38, United States Code, is amended by adding at  
12 the end the following new paragraph:

13 “(14)(A) In the case of a veteran or caregiver who  
14 seeks services under this subsection and is denied such  
15 services, or a veteran or the family caregiver of a veteran  
16 who is discharged from the program under this subsection,  
17 the Secretary shall—

18 “(i) if the veteran meets the requirements of a  
19 covered veteran under subsection (b), provide to  
20 such caregiver the option of enrolling in the program  
21 of general caregiver support services under such sub-  
22 section;

23 “(ii) assess the veteran or caregiver for partici-  
24 pation in any other available program of the Depart-  
25 ment for home- and community-based services (in-

1 including the programs specified in section 1720K of  
2 this title) for which the veteran or caregiver may be  
3 eligible and, with respect to the veteran, store (and  
4 make accessible to the veteran) the results of such  
5 assessment in the electronic medical record of the  
6 veteran; and

7 “(iii) provide to the veteran or caregiver written  
8 information on any such program identified pursu-  
9 ant to the assessment under clause (ii), including in-  
10 formation about facilities, eligibility requirements,  
11 and relevant contact information for each such pro-  
12 gram.

13 “(B) For each veteran or family caregiver who is dis-  
14 charged from the program under this subsection, a care-  
15 giver support coordinator shall provide for a smooth and  
16 personalized transition from such program to an appro-  
17 priate program of the Department for home- and commu-  
18 nity-based services (including the programs specified in  
19 section 1720K of this title), including by integrating care-  
20 giver support across programs.”.

21 (2) APPLICABILITY.—The amendments made  
22 by paragraph (1) shall apply with respect to denials  
23 and discharges occurring on or after the date that  
24 is 180 days after the date of the enactment of this  
25 Act.

1           (3) TECHNICAL AND CONFORMING AMEND-  
2           MENTS.—Section 1720G(d) of such title is amend-  
3           ed—

4                   (A) by striking “or a covered veteran”  
5           each place it appears and inserting “, a veteran  
6           denied or discharged as specified in paragraph  
7           (14) of such subsection, or a covered veteran”;  
8           and

9                   (B) by striking “under subsection (a),  
10          means” each place it appears and inserting  
11          “under subsection (a) or a veteran denied or  
12          discharged as specified in paragraph (14) of  
13          such subsection, means”.

14          (b) CONFORMITY OF RESPITE CARE ACROSS PRO-  
15          GRAMS.—Section 1720G of title 38, United States Code,  
16          as amended by subsection (a)(3), is further amended—

17                   (1) in subsection (a)(3)—

18                           (A) by amending subparagraph (A)(ii)(III)  
19           to read as follows:

20                                   “(III) covered respite care of not less than  
21           30 days annually;” and

22                           (B) by striking subparagraph (B) and re-  
23           designating subparagraphs (C) and (D) as sub-  
24           paragraphs (B) through (C), respectively; and

1 (2) by amending subsection (b)(3)(A)(iii) to  
2 read as follows:

3 “(iii) Covered respite care of not less than 30  
4 days annually.”; and

5 (3) in subsection (d)—

6 (A) by redesignating paragraphs (2)  
7 through (4) as paragraphs (3) through (5), re-  
8 spectively; and

9 (B) by inserting after paragraph (1) the  
10 following new paragraph:

11 “(2) The term ‘covered respite care’ means,  
12 with respect to a caregiver of a veteran, respite care  
13 under section 1720B of this title that—

14 “(A) is medically and age appropriate for  
15 the veteran (including 24-hour per day care of  
16 the veteran commensurate with the care pro-  
17 vided by the caregiver); and

18 “(B) includes in-home care.”.

19 (c) REVIEW RELATING TO CAREGIVER CONTACT.—

20 The Secretary shall conduct a review of the capacity of  
21 the Department to establish a streamlined system for con-  
22 tacting all caregivers enrolled in the program of general  
23 caregiver support services under section 1720G(b) of title  
24 38, United States Code, to provide to such caregivers pro-

1 gram updates and alerts relating to emerging services for  
2 which such caregivers may be eligible.

3 **SEC. 6. DEVELOPMENT OF CENTRALIZED WEBSITE FOR**  
4 **PROGRAM INFORMATION.**

5 (a) CENTRALIZED WEBSITE.—The Secretary shall  
6 develop and maintain a centralized and publically acces-  
7 sible internet website of the Department as a clearing-  
8 house for information and resources relating to covered  
9 programs.

10 (b) CONTENTS.—The website under subsection (a)  
11 shall contain the following:

12 (1) A description of each covered program.

13 (2) An informational assessment tool that—

14 (A) explains the administrative eligibility,  
15 if applicable, of a veteran, or a caregiver of a  
16 veteran, for any covered program; and

17 (B) provides information, as a result of  
18 such explanation, on any covered program for  
19 which the veteran or caregiver (as the case may  
20 be) may be eligible.

21 (3) A list of required procedures for the direc-  
22 tors of the medical facilities of the Department to  
23 follow in determining the eligibility and suitability of  
24 veterans for participation in a covered program, in-  
25 cluding procedures applicable to instances in which

1 the resource constraints of a facility (or of a commu-  
2 nity in which a facility is located) may result in the  
3 inability to address the health needs of a veteran  
4 under a covered program in a timely manner.

5 (c) UPDATES.—The Secretary shall ensure the  
6 website under subsection (a) is updated on a periodic  
7 basis.

8 **SEC. 7. IMPROVEMENTS RELATING TO HOMEMAKER AND**  
9 **HOME HEALTH AIDE PROGRAM.**

10 (a) PILOT PROGRAM FOR COMMUNITIES WITH  
11 SHORTAGE OF HOME HEALTH AIDES.—

12 (1) PROGRAM.—Beginning not later than 18  
13 months after the date of the enactment of this Act,  
14 the Secretary shall carry out a three-year pilot pro-  
15 gram under which the Secretary shall provide home-  
16 maker and home health aide services to veterans  
17 who reside in communities with a shortage of home  
18 health aides.

19 (2) LOCATIONS.—The Secretary shall select not  
20 fewer than five geographic locations in which the  
21 Secretary determines there is a shortage of home  
22 health aides at which to carry out the pilot program  
23 under paragraph (1).

24 (3) NURSING ASSISTANTS.—



1           (A) IN GENERAL.—In carrying out the  
2 pilot program under paragraph (1), the Sec-  
3 retary may hire nursing assistants as new em-  
4 ployees of the Department of Veterans Affairs,  
5 or reassign nursing assistants who are existing  
6 employees of the Department, to provide to vet-  
7 erans in-home care services (including basic  
8 tasks authorized by the State certification of  
9 the nursing assistant) under the pilot program,  
10 in lieu of or in addition to the provision of such  
11 services through non-Department home health  
12 aides.

13           (B) RELATIONSHIP TO HOME-BASED PRI-  
14 MARY CARE PROGRAM.—Nursing assistants  
15 hired or reassigned under subparagraph (A)  
16 may provide services to a veteran under the  
17 pilot program under paragraph (1) while serv-  
18 ing as part of a health care team for the vet-  
19 eran under the Home-Based Primary Care pro-  
20 gram.

21           (4) REPORT TO CONGRESS.—Not later than one  
22 year after the date on which the Secretary deter-  
23 mines the pilot program under paragraph (1) has  
24 terminated, the Secretary shall submit to the Com-  
25 mittees on Veterans' Affairs of the House of Rep-

1        representatives and the Senate a report on the result of  
2        the pilot program.

3        (b) REPORT ON USE OF FUNDS.—Not later than one  
4        year after the date of the enactment of this Act, the Sec-  
5        retary of Veterans Affairs shall submit to the Committees  
6        on Veterans' Affairs of the House of Representatives and  
7        the Senate a report containing, with respect to the period  
8        beginning in fiscal year 2012 and ending in fiscal year  
9        2023, the following:

10            (1) An identification of the amount of funds  
11            that were included in a budget of the Department of  
12            Veterans Affairs during such period for the provision  
13            of in-home care to veterans under the Homemaker  
14            and Home Health Aide program but were not ex-  
15            pended for such provision, disaggregated by medical  
16            center of the Department for which such unex-  
17            pended funds were budgeted (if such disaggregation  
18            is possible).

19            (2) To the extent practicable, an identification  
20            of the number of veterans for whom, during such pe-  
21            riod, the hours during which a home health aide was  
22            authorized to provide services to the veteran under  
23            the Homemaker and Home Health Aide program  
24            were reduced for a reason other than a change in  
25            the health care needs of the veteran, and a detailed

1 description of the reasons why any such reductions  
2 may have occurred.

3 (c) UPDATED GUIDANCE ON PROGRAM.—Not later  
4 than one year after the date of the enactment of this Act,  
5 the Secretary shall issue updated guidance for the Home-  
6 maker and Home Health Aide program. Such updated  
7 guidance shall include the following:

8 (1) A process for the transition of veterans  
9 from the Homemaker and Home Health Aide pro-  
10 gram to other covered programs.

11 (2) A requirement for the directors of the med-  
12 ical facilities of the Department to complete such  
13 process whenever a veteran with care needs has been  
14 denied services from home health agencies under the  
15 Homemaker and Home Health Aide program as a  
16 result of the clinical needs or behavioral issues of the  
17 veteran.

18 **SEC. 8. REVIEWS AND OTHER IMPROVEMENTS RELATING**  
19 **TO HOME- AND COMMUNITY-BASED SERV-**  
20 **ICES.**

21 (a) OFFICE OF GERIATRIC AND EXTENDED CARE.—

22 (1) REVIEW OF PROGRAMS.—The Under Sec-  
23 retary for Health of the Department of Veterans Af-  
24 fairs shall conduct a review of each program admin-

1           istered through the Office of Geriatric and Extended  
2           Care of the Department, or successor office, to—

3                   (A) ensure consistency in program man-  
4                   agement;

5                   (B) eliminate service gaps at the medical  
6                   center level; and

7                   (C) ensure the availability of, and the ac-  
8                   cess by veterans to, home- and community-  
9                   based services.

10           (2) ASSESSMENT OF STAFFING NEEDS.—The  
11           Secretary of Veterans Affairs shall conduct an as-  
12           sessment of the staffing needs of the Office of Geri-  
13           atric and Extended Care of the Department of Vet-  
14           erans Affairs, or successor office.

15           (3) GOALS FOR GEOGRAPHIC ALIGNMENT OF  
16           CARE.—

17                   (A) ESTABLISHMENT OF GOALS.—The Di-  
18                   rector of the Office of Geriatric and Extended  
19                   Care, or successor office, shall establish quan-  
20                   titative goals to enable aging or disabled vet-  
21                   erans who are not located near medical centers  
22                   of the Department to access extended care serv-  
23                   ices (including by improving access to home-  
24                   and community-based services for such vet-  
25                   erans).

1 (B) IMPLEMENTATION TIMELINE.—Each  
2 goal established under subparagraph (A) shall  
3 include a timeline for the implementation of the  
4 goal at each medical center of the Department.

5 (4) GOALS FOR IN-HOME SPECIALTY CARE.—  
6 The Director of the Office of Geriatric and Extended  
7 Care, or successor office, shall establish quantitative  
8 goals to address the specialty care needs of veterans  
9 through in-home care, including by ensuring the  
10 education of home health aides and caregivers of vet-  
11 erans in the following areas:

12 (A) Dementia care.

13 (B) Care for spinal cord injuries and dis-  
14 eases.

15 (C) Ventilator care.

16 (D) Other speciality care areas as deter-  
17 mined by the Secretary.

18 (5) REPORT TO CONGRESS.—Not later than one  
19 year after the date of the enactment of this Act, the  
20 Secretary shall submit to the Committees on Vet-  
21 erans' Affairs of the House of Representatives and  
22 the Senate a report containing the findings of the  
23 review under paragraph (1), the results of the as-  
24 sessment under paragraph (2), and the goals estab-  
25 lished under paragraphs (3) and (4).

1 (b) REVIEW OF INCENTIVES AND EFFORTS RELAT-  
2 ING TO HOME- AND COMMUNITY-BASED SERVICES.—

3 (1) REVIEW.—The Secretary of Veterans Af-  
4 fairs shall conduct a review of the following:

5 (A) The financial and organizational incen-  
6 tives for the directors of medical centers of the  
7 Department to establish or expand covered pro-  
8 grams at such medical centers.

9 (B) Any incentives for such directors to  
10 provide to veterans home- and community-based  
11 services in lieu of institutional care.

12 (C) The efforts taken by the Secretary to  
13 enhance spending of the Department for ex-  
14 tended care by shifting the balance of such  
15 spending from institutional care to home- and  
16 community-based services.

17 (D) The plan of the Under Secretary for  
18 Health of the Department to accelerate efforts  
19 to enhance spending as specified in subpara-  
20 graph (C), to match the progress of similar ef-  
21 forts taken by the Administrator of the Centers  
22 for Medicare & Medicaid Services with respect  
23 to spending of the Centers for Medicare & Med-  
24 icaid Services for extended care.

1           (2) REPORT TO CONGRESS.—Not later than one  
2           year after the date of the enactment of this Act, the  
3           Secretary shall submit to the Committees on Vet-  
4           erans' Affairs of the House of Representatives and  
5           the Senate a report on the findings of the review  
6           under paragraph (1).

7           (c) REVIEW OF RESPITE CARE SERVICES.—Not later  
8           than two years after the date of the enactment of this Act,  
9           the Secretary of Veterans Affairs shall conduct a review  
10          of the use, availability, and effectiveness, of the respite  
11          care services furnished by the Secretary under chapter 17  
12          of title 38, United States Code.

13          (d) COLLABORATION TO IMPROVE HOME- AND COM-  
14          MUNITY-BASED SERVICES.—

15               (1) REPORT ON EXPANSION OF CERTAIN MEN-  
16          TAL HEALTH SERVICES.—

17                   (A) REPORT.—Not later than two years  
18                   after the date of the enactment of this Act, the  
19                   Secretary of Veterans Affairs, in collaboration  
20                   with the Secretary of Health and Human Serv-  
21                   ices, shall submit to the Committees on Vet-  
22                   erans' Affairs of the House of Representatives  
23                   and the Senate a report containing rec-  
24                   ommendations for the expansion of mental

1 health services and related support to the care-  
2 givers of veterans.

3 (B) MATTERS INCLUDED.—The report  
4 under subparagraph (A) shall include an assess-  
5 ment of the feasibility and advisability of au-  
6 thorizing access to Vet Centers by—

7 (i) family caregivers enrolled in a pro-  
8 gram under section 1720G of title 38,  
9 United States Code; and

10 (ii) family caregivers of veterans par-  
11 ticipating in a program specified in section  
12 1720K of such title, as added by section 4.

13 (2) RECOMMENDATIONS.—

14 (A) DEVELOPMENT.—The Secretary of  
15 Veterans Affairs shall develop recommendations  
16 as follows:

17 (i) With respect to home- and commu-  
18 nity-based services for veterans, the Sec-  
19 retary of Veterans Affairs shall develop  
20 recommendations regarding new services  
21 (in addition to those furnished as of the  
22 date of the enactment of this Act) in col-  
23 laboration with the Secretary of Health  
24 and Human Services.



1 (ii) With respect to the national short-  
2 age of home health aides, the Secretary of  
3 Veterans Affairs shall develop rec-  
4 ommendations regarding methods to ad-  
5 dress such shortage in collaboration with  
6 the Secretary of Health and Human Serv-  
7 ices and the Secretary of Labor.

8 (B) SUBMISSION TO CONGRESS.—The Sec-  
9 retary of Veterans Affairs shall submit to the  
10 Committees on Veterans' Affairs of the House  
11 of Representatives and the Senate a report con-  
12 taining the recommendations developed under  
13 subparagraph (A) and an identification of any  
14 changes in existing law or new statutory au-  
15 thority necessary to implement the rec-  
16 ommendations, as determined by the Secretary.

17 (C) CONSULTATION WITH SECRETARY OF  
18 LABOR.—In carrying out this paragraph, the  
19 Secretary of Veterans Affairs shall consult with  
20 the Secretary of Labor.

21 (3) FEEDBACK AND RECOMMENDATIONS ON  
22 CAREGIVER SUPPORT.—

23 (A) FEEDBACK AND RECOMMENDA-  
24 TIONS.—The Secretary of Veterans Affairs shall  
25 solicit from the entities described in subpara-

1 graph (B) feedback and recommendations re-  
2 garding opportunities for the Secretary to en-  
3 hance home- and community-based services for  
4 veterans and the caregivers of veterans, includ-  
5 ing through the potential provision by the entity  
6 of care and respite services to veterans and  
7 caregivers who may not be eligible for any pro-  
8 gram under section 1720G of title 38, United  
9 States Code, or section 1720K of such title (as  
10 added by section 4), but have a need for assist-  
11 ance.

12 (B) COVERED ENTITIES.—The entities de-  
13 scribed in this subparagraph are veterans serv-  
14 ice organizations and nonprofit organizations  
15 with a focus on caregiver support (as deter-  
16 mined by the Secretary).

17 (4) COLLABORATION FOR NATIVE AMERICAN  
18 VETERANS.—The Secretary of Veterans Affairs shall  
19 collaborate with the Director of the Indian Health  
20 Service and representatives from tribal health pro-  
21 grams and Urban Indian organizations to ensure the  
22 availability of home- and community-based services  
23 for Native American veterans, including Native  
24 American veterans receiving health care and medical  
25 services under multiple health care systems.

1 **SEC. 9. DEFINITIONS.**

2 In this Act:

3 (1) The terms “caregiver” and “family care-  
4 giver” have the meanings given those terms under  
5 section 1720K(h) of title 38, United States Code (as  
6 added by section 4).

7 (2) The term “covered program”—

8 (A) means any program of the Department  
9 of Veterans Affairs for home- and community-  
10 based services; and

11 (B) includes the programs specified in sec-  
12 tion 1720K of title 38, United States Code (as  
13 added by section 4).

14 (3) The term “home- and community-based  
15 services”—

16 (A) means the services referred to in sec-  
17 tion 1701(6)(E) of title 38, United States Code;  
18 and

19 (B) includes services furnished under a  
20 program specified in section 1720K of such title  
21 (as added by section 4).

22 (4) The terms “Home-Based Primary Care pro-  
23 gram”, “Homemaker and Home Health Aide pro-  
24 gram”, and “Veteran-Directed Care program” mean  
25 the programs of the Department of Veterans Affairs

1 specified in subsection (d), (c), and (b) of such sec-  
2 tion 1720K, respectively.

3 (5) The terms “home health aide”, “Native  
4 American”, “Native American veteran”, “tribal  
5 health programs”, and “Urban Indian organiza-  
6 tions” have the meanings given those terms in sub-  
7 section (h) of such section 1720K.

8 (6) The term “Vet Center” has the meaning  
9 given that term in section 1712A(h) of title 38,  
10 United States Code.

11 (7) The term “veterans service organization”  
12 means any organization recognized by the Secretary  
13 under section 5902 of such title.