

116<sup>TH</sup> CONGRESS  
1<sup>ST</sup> SESSION

# H. R. 3224

---

## AN ACT

To amend title 38, United States Code, to provide for increased access to Department of Veterans Affairs medical care for women veterans.

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

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

2 (a) SHORT TITLE.—This Act may be cited as the  
3 “Deborah Sampson Act”.

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

Sec. 1. Short title; table of contents.

TITLE I—VETERANS HEALTH ADMINISTRATION

- Sec. 101. Office of Women’s Health in the Department of Veterans Affairs.  
Sec. 102. Expansion of capabilities of women veterans call center to include text messaging.  
Sec. 103. Requirement for Department of Veterans Affairs internet website to provide information on services available to women veterans.  
Sec. 104. Report on Women Veterans Retrofit Initiative.  
Sec. 105. Establishment of environment of care standards and inspections at Department of Veterans Affairs medical centers.  
Sec. 106. Additional funding for primary care and emergency care clinicians in Women Veterans Health Care Mini-Residency Program.  
Sec. 107. Establishment of women veteran training module for non-Department of Veterans Affairs health care providers.

TITLE II—MEDICAL CARE

- Sec. 201. Improved access to Department of Veterans Affairs medical care for women veterans.  
Sec. 202. Counseling and treatment for sexual trauma.  
Sec. 203. Counseling in retreat settings for women veterans and other individuals.  
Sec. 204. Improvement of health care services provided to newborn children by Department of Veterans Affairs.

TITLE III—REPORTS AND OTHER MATTERS

Subtitle A—Reports

- Sec. 301. Assessment of effects of intimate partner violence on women veterans by Advisory Committee on Women Veterans.  
Sec. 302. Study on staffing of Women Veteran Program Manager program at medical centers of the Department of Veterans Affairs and training of staff.  
Sec. 303. Report on availability of prosthetic items for women veterans from the Department of Veterans Affairs.  
Sec. 304. Study of barriers for women veterans to health care from the Department of Veterans Affairs.  
Sec. 305. Report regarding veterans who receive benefits under laws administered by the Secretary of Veterans Affairs.  
Sec. 306. Study on Women Veteran Coordinator program.

Subtitle B—Other Matters

Sec. 321. Anti-harassment and anti-sexual assault policy of the Department of Veterans Affairs.

Sec. 322. Support for organizations that have a focus on providing assistance to women veterans and their families.

Sec. 323. Gap analysis of Department of Veterans Affairs programs that provide assistance to women veterans who are homeless.

Sec. 324. Department of Veterans Affairs public-private partnership on legal services for women veterans.

Sec. 325. Program to assist veterans who experience intimate partner violence or sexual assault.

Sec. 326. Study and task force on veterans experiencing intimate partner violence or sexual assault.

## 1           **TITLE I—VETERANS HEALTH** 2                                   **ADMINISTRATION**

### 3   **SEC. 101. OFFICE OF WOMEN’S HEALTH IN THE DEPART-** 4                                   **MENT OF VETERANS AFFAIRS.**

5           (a) DIRECTOR OF WOMEN’S HEALTH.—Subsection

6 (a) of section 7306 of title 38, United States Code, is  
7 amended—

8                   (1) by redesignating paragraph (10) as para-  
9                   graph (11); and

10                   (2) by inserting after paragraph (9) the fol-  
11                   lowing new paragraph:

12                           “(10) The Director of Women’s Health.”.

13           (b) ORGANIZATION OF OFFICE.—

14                   (1) IN GENERAL.—Subchapter I of chapter 73  
15                   of title 38, United States Code, is amended by add-  
16                   ing at the end of the following new sections:

#### 17   **“§ 7310. Office of Women’s Health**

18                   “(a) ESTABLISHMENT.—(1) The Under Secretary for  
19                   Health shall establish and operate in the Veterans Health  
20                   Administration the Office of Women’s Health (hereinafter

1 in this section referred to as the ‘Office’). The Office shall  
2 be located at the Central Office of the Department of Vet-  
3 erans Affairs.

4 “(2) The head of the Office is the Director of Wom-  
5 en’s Health (hereinafter in this section referred to as the  
6 ‘Director’). The Director shall report to the Under Sec-  
7 retary for Health.

8 “(3) The Under Secretary for Health shall provide  
9 the Office with such staff and other support as may be  
10 necessary for the Office to carry out effectively its func-  
11 tions under this section.

12 “(4) The Under Secretary for Health may reorganize  
13 existing offices within the Veterans Health Administration  
14 as of the date of the enactment of this section in order  
15 to avoid duplication with the functions of the Office.

16 “(b) PURPOSE.—The functions of the Office include  
17 the following:

18 “(1) To provide a central office for monitoring  
19 and encouraging the activities of the Veterans  
20 Health Administration with respect to the provision,  
21 evaluation, and improvement of women veterans’  
22 health care services in the Department.

23 “(2) To develop and implement standards of  
24 care for the provision of health care for women vet-  
25 erans in the Department.

1           “(3) To monitor and identify deficiencies in  
2 standards of care for the provision of health care for  
3 women veterans in the Department, to provide tech-  
4 nical assistance to medical facilities of the Depart-  
5 ment to address and remedy deficiencies, and to per-  
6 form oversight of implementation of standards of  
7 care for women veterans’ health care in the Depart-  
8 ment.

9           “(4) To monitor and identify deficiencies in  
10 standards of care for the provision of health care for  
11 women veterans provided through the community  
12 pursuant to this title, and to provide recommenda-  
13 tions to the appropriate office to address and rem-  
14 edy any deficiencies.

15           “(5) To oversee distribution of resources and  
16 information related to women veterans’ health pro-  
17 gramming under this title.

18           “(6) To promote the expansion and improve-  
19 ment of clinical, research, and educational activities  
20 of the Veterans Health Administration with respect  
21 the health care of women veterans.

22           “(7) To provide, as part of the annual budg-  
23 eting process, recommendations with respect to the  
24 amount of funds to be requested for furnishing hos-  
25 pital care and medical services to women veterans

1       pursuant to chapter 17 of this title, including, at a  
2       minimum, recommendations that ensure that such  
3       amount of funds either reflect or exceed the propor-  
4       tion of veterans enrolled in the patient enrollment  
5       system under section 1705 of this title who are  
6       women.

7               “(8) To provide recommendations to the Under  
8       Secretary for Health with respect to modifying the  
9       Veterans Equitable Resource Allocation system to  
10      ensure that resource allocations under such system  
11      reflect the health care needs of women veterans.

12              “(9) To carry out such other duties as the  
13      Under Secretary for Health may require.

14              “(c) RECOMMENDATIONS.—If the Under Secretary  
15      for Health determines not to implement any recommenda-  
16      tion made by the Director with respect to the allocation  
17      of resources to address the health care needs of women  
18      veterans, the Secretary shall notify the appropriate con-  
19      gressional committees of such determination by not later  
20      than 30 days after the date on which the Under Secretary  
21      for Health receives the recommendation. Each such notifi-  
22      cation shall include the following:

23                   “(1) The reasoning of the Under Secretary for  
24      Health in making such determination.

1           “(2) An alternative, if one is selected, to such  
2           recommendation that the Under Secretary for  
3           Health will carry out to fulfill the health care needs  
4           of women veterans.

5           “(d) STANDARDS OF CARE.—In this section, the  
6           standards of care for the provision of health care for  
7           women veterans in the Department shall include, at a min-  
8           imum, the following:

9           “(1) Requirement for—

10           “(A) at least one designated women’s  
11           health primary care provider at each medical  
12           center whose duties include, to the extent prac-  
13           ticable, providing training to other health care  
14           providers of the Department with respect to the  
15           needs of women veterans; and

16           “(B) at least one designated women’s  
17           health primary care provider at each commu-  
18           nity-based outpatient clinic of the Department  
19           who may serve female patients as a percentage  
20           of the total duties of the provider.

21           “(2) Other requirements as determined by the  
22           Under Secretary for Health.

23           “(e) OUTREACH.—The Director shall ensure that—

24           “(1) not less frequently than biannually, each  
25           medical facility of the Department holds a public

1 forum for women veterans that occurs outside of  
2 regular business hours; and

3 “(2) not less frequently than quarterly, each  
4 medical facility of the Department convenes a focus  
5 group of women veterans that includes a discussion  
6 of harassment occurring at such facility.

7 “(f) DEFINITIONS.—In this section:

8 “(1) The term ‘appropriate congressional com-  
9 mittees’ has the meaning given that term in section  
10 7310A of this title.

11 “(2) The term ‘facility of the Department’ has  
12 the meaning given the term in section 1701(3).

13 “(3) The term ‘Veterans Equitable Resource  
14 Allocation system’ means the resource allocation sys-  
15 tem established pursuant to section 429 of the De-  
16 partments of Veterans Affairs and Housing and  
17 Urban Development, and Independent Agencies Ap-  
18 propriations Act, 1997 (Public Law 104–204; 110  
19 Stat. 2929).

20 **“§ 7310A. Annual reports on women’s Health**

21 “(a) ANNUAL REPORTS.—Not later than December  
22 1 of each year, the Director of Women’s Health shall sub-  
23 mit to the appropriate congressional committees a report  
24 containing the matters under subsections (b) through (g).

1       “(b) OFFICE OF WOMEN’S HEALTH.—Each report  
2 under subsection (a) shall include a description of—

3           “(1) actions taken by the Office of Women’s  
4 Health in the preceding fiscal year to improve the  
5 Department’s provision of health care to women vet-  
6 erans;

7           “(2) any identified deficiencies related to the  
8 Department’s provision of health care to women vet-  
9 erans and the standards of care established in sec-  
10 tion 7310 of this title, and the Department’s plan to  
11 address such deficiencies;

12           “(3) the funding and personnel provided to the  
13 Office and whether additional funding or personnel  
14 are needed to meet the requirements of such section;  
15 and

16           “(4) other information that would be of interest  
17 to the appropriate congressional committees with re-  
18 spect to oversight of the Department’s provision of  
19 health care to women veterans.

20       “(c) ACCESS TO GENDER-SPECIFIC SERVICES.—  
21 Each report under subsection (a) shall include an analysis  
22 of the access of women veterans to gender-specific services  
23 under contracts, agreements, or other arrangements with  
24 non-Department medical providers entered into by the  
25 Secretary for the provision of hospital care or medical

1 services to veterans. Such analysis shall include data and  
2 performance measures for the availability of gender spe-  
3 cific services, including—

4 “(1) the average wait time between the vet-  
5 eran’s preferred appointment date and the date on  
6 which the appointment is completed;

7 “(2) the average driving time required for vet-  
8 erans to attend appointments; and

9 “(3) reasons why appointments could not be  
10 scheduled with non-Department medical providers.

11 “(d) LOCATIONS WHERE WOMEN VETERANS ARE  
12 USING HEALTH CARE.—Each report under subsection (a)  
13 shall include an analysis of the use by women veterans  
14 of health care from the Department, including the fol-  
15 lowing information:

16 “(1) The number of women veterans who reside  
17 in each State.

18 “(2) The number of women veterans in each  
19 State who are enrolled in the system of patient en-  
20 rollment of the Department established and operated  
21 under section 1705(a) this title.

22 “(3) Of the women veterans who are so en-  
23 rolled, the number who have received health care  
24 under the laws administered by the Secretary at

1 least one time during the 1-year period preceding  
2 the submittal of the report.

3 “(4) The number of women veterans who have  
4 been seen at each medical facility of the Department  
5 during such year.

6 “(5) The number of appointments that women  
7 veterans have had at each such facility during such  
8 year.

9 “(6) If known, an identification of the medical  
10 facility of the Department in each Veterans Inte-  
11 grated Service Network with the largest rate of in-  
12 crease in patient population of women veterans as  
13 measured by the increase in unique women veteran  
14 patient use.

15 “(7) If known, an identification of the medical  
16 facility of the Department in each Veterans Inte-  
17 grated Service Network with the largest rate of de-  
18 crease in patient population of women veterans as  
19 measured by the decrease in unique women veterans  
20 patient use.

21 “(e) MODELS OF CARE.—Each report under sub-  
22 section (a) shall include an analysis of the use by the De-  
23 partment of general primary care clinics, separate but  
24 shared spaces, and women’s health centers as models of

1 providing health care to women veterans. Such analysis  
2 shall include the following:

3           “(1) The number of facilities of the Department  
4 that fall into each such model, disaggregated by Vet-  
5 erans Integrated Service Network and State.

6           “(2) A description of the criteria used by the  
7 Department to determine which such model is most  
8 appropriate for each facility of the Department.

9           “(3) An assessment of how the Department de-  
10 cides to make investments to modify facilities to a  
11 different model.

12           “(4) A description of what, if any, plans the  
13 Department has to modify facilities from general  
14 primary care clinics to another model.

15           “(5) An assessment of whether any facilities  
16 could be modified to a separate but shared space for  
17 a women’s health center within planned investments  
18 under the strategic capital investment planning proc-  
19 ess of the Department.

20           “(6) An assessment of whether any facilities  
21 could be modified to a separate or shared space, or  
22 women’s health center with minor modifications to  
23 existing plans under the strategic capital investment  
24 planning process of the Department.

1           “(7) An assessment of whether the Department  
2           has a goal for how many facilities should fall into  
3           each such model.

4           “(f) STAFFING.—Each report under subsection (a)  
5           shall include an analysis of the staffing of the Department  
6           relating to the treatment of women, including the fol-  
7           lowing, disaggregated by Veterans Integrated Service Net-  
8           work and State (except with respect to paragraph (4)):

9           “(1) The number of women’s health centers.

10          “(2) The number of patient aligned care teams  
11          of the Department relating to women’s health.

12          “(3) The number of full- and part-time gyne-  
13          cologists of the Department.

14          “(4) The number of designated women’s health  
15          care providers of the Department, disaggregated by  
16          facility of the Department.

17          “(5) The number of health care providers of the  
18          Department who have completed a mini-residency  
19          for women’s health care through Women Veterans  
20          Health Care Mini-Residency Program of the Depart-  
21          ment during the 1-year period preceding the sub-  
22          mittal of the report, and the number that plan to  
23          participate in such a mini-residency during the 1-  
24          year period following such date.

1           “(6) The number of designated women’s health  
2           care providers of the Department who have suffi-  
3           cient female patients to retain their competencies  
4           and proficiencies.

5           “(g) ACCESSIBILITY AND TREATMENT OPTIONS.—  
6           Each report under subsection (a) shall include an analysis  
7           of the accessibility and treatment options for women vet-  
8           erans, including the following:

9           “(1) An assessment of wheelchair accessibility  
10          of women’s health centers of the Department, in-  
11          cluding, with respect to each such facility, an assess-  
12          ment of such accessibility for each kind of treatment  
13          provided at the center, including with respect to ra-  
14          diology and mammography, that addresses all rel-  
15          evant factors, including door sizes, hoists, and equip-  
16          ment.

17          “(2) The options for women veterans to access  
18          female mental health providers and primary care  
19          providers.

20          “(3) The options for women veterans at medical  
21          facilities of the Department with respect to clothing  
22          sizes, including for gowns, drawstring pants, and pa-  
23          jamas.

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

1           “(1) The term ‘appropriate congressional com-  
2           mittees’ means—

3                   “(A) the Committees on Veterans’ Affairs  
4                   of the House of Representatives and the Sen-  
5                   ate; and

6                   “(B) the Committees on Appropriations of  
7                   the House of Representatives and the Senate.

8           “(2) The term ‘gender-specific services’ means  
9           mammography, obstetric care, gynecological care,  
10          and such other services as the Secretary determines  
11          appropriate.”.

12           (2) CLERICAL AMENDMENT.—The table of sec-  
13          tions for such chapter is amended by inserting after  
14          the item relating to section 7309A the following new  
15          items:

“7310. Office of Women’s Health.

“7310A. Annual reports on women’s Health.”.

16          (c) INITIAL REPORT.—The Secretary of Veterans Af-  
17          fairs shall submit the initial report under section 7310A  
18          of title 38, United States Code, as added by subsection  
19          (b), by not later than 180 days after the date of the enact-  
20          ment of this Act.

1 **SEC. 102. EXPANSION OF CAPABILITIES OF WOMEN VET-**  
2 **ERANS CALL CENTER TO INCLUDE TEXT MES-**  
3 **SAGING.**

4 The Secretary of Veterans Affairs shall expand the  
5 capabilities of the Women Veterans Call Center of the De-  
6 partment of Veterans Affairs to include a text messaging  
7 capability.

8 **SEC. 103. REQUIREMENT FOR DEPARTMENT OF VETERANS**  
9 **AFFAIRS INTERNET WEBSITE TO PROVIDE IN-**  
10 **FORMATION ON SERVICES AVAILABLE TO**  
11 **WOMEN VETERANS.**

12 (a) IN GENERAL.—The Secretary of Veterans Affairs  
13 shall survey the internet websites and information re-  
14 sources of the Department of Veterans Affairs in effect  
15 on the day before the date of the enactment of this Act  
16 and publish an internet website that serves as a central-  
17 ized source for the provision to women veterans of infor-  
18 mation about the benefits and services available to them  
19 under laws administered by the Secretary.

20 (b) ELEMENTS.—The internet website published  
21 under subsection (a) shall provide to women veterans in-  
22 formation regarding all of the services available in the dis-  
23 trict in which the veteran is seeking such services, includ-  
24 ing, with respect to each medical center and community-  
25 based outpatient clinic in the applicable Veterans Inte-  
26 grated Service Network—

1           (1) the name and contact information of each  
2 women veterans program manager;

3           (2) a list of appropriate staff for other benefits  
4 available from the Veterans Benefits Administration,  
5 the National Cemetery Administration, and such  
6 other entities as the Secretary considers appropriate;  
7 and

8           (3) such other information as the Secretary  
9 considers appropriate.

10       (c) UPDATED INFORMATION.—The Secretary shall  
11 ensure that the information described in subsection (b)  
12 that is published on the internet website required by sub-  
13 section (a) is updated not less frequently than once every  
14 90 days.

15       (d) OUTREACH.—In carrying out this section, the  
16 Secretary shall ensure that the outreach conducted under  
17 section 1720F(i) of title 38, United States Code, includes  
18 information regarding the internet website required by  
19 subsection (a).

20       (e) DERIVATION OF FUNDS.—Amounts used by the  
21 Secretary to carry out this section shall be derived from  
22 amounts made available to the Secretary to publish inter-  
23 net websites of the Department.

1 **SEC. 104. REPORT ON WOMEN VETERANS RETROFIT INITIA-**  
2 **TIVE.**

3 (a) REPORT.—Not later than 180 days after the date  
4 of the enactment of this Act, the Secretary of Veterans  
5 Affairs shall submit to the Committees on Veterans' Af-  
6 fairs and the Committees on Appropriations of the Senate  
7 and the House of Representatives a report on require-  
8 ments to retrofit existing medical facilities of the Depart-  
9 ment of Veterans Affairs with fixtures, materials, and  
10 other outfitting measures to support the provision of care  
11 to women veterans at such facilities.

12 (b) ELEMENTS.—The report under subsection (a)  
13 shall include the following:

14 (1) An assessment of how the Secretary  
15 prioritizes retrofitting existing medical facilities to  
16 support provision of care to women veterans in com-  
17 parison to other requirements.

18 (2) A 5-year plan for retrofitting medical facili-  
19 ties of the Department to support the provision of  
20 care to women veterans.

21 **SEC. 105. ESTABLISHMENT OF ENVIRONMENT OF CARE**  
22 **STANDARDS AND INSPECTIONS AT DEPART-**  
23 **MENT OF VETERANS AFFAIRS MEDICAL CEN-**  
24 **TERS.**

25 (a) IN GENERAL.—The Secretary of Veterans Affairs  
26 shall establish a policy under which the environment of

1 care standards and inspections at medical centers of the  
2 Department of Veterans Affairs include—

3 (1) an alignment of the requirements for such  
4 standards and inspections with the women’s health  
5 handbook of the Veterans Health Administration;

6 (2) a requirement for the frequency of such in-  
7 spections;

8 (3) delineation of the roles and responsibilities  
9 of staff at the medical center who are responsible for  
10 compliance;

11 (4) the requirement that each medical center  
12 submit to the Secretary and make publicly available  
13 a report on the compliance of the medical center  
14 with the standards; and

15 (5) a remediation plan.

16 (b) REPORT.—Not later than 180 days after the date  
17 of the enactment of this Act, the Secretary shall submit  
18 to the Committees on Veterans’ Affairs of the Senate and  
19 House of Representatives certification in writing that the  
20 policy required by subsection (a) has been finalized and  
21 disseminated to Department all medical centers.

1 **SEC. 106. ADDITIONAL FUNDING FOR PRIMARY CARE AND**  
2 **EMERGENCY CARE CLINICIANS IN WOMEN**  
3 **VETERANS HEALTH CARE MINI-RESIDENCY**  
4 **PROGRAM.**

5 (a) IN GENERAL.—There is authorized to be appro-  
6 priated to the Secretary of Veterans Affairs \$1,000,000  
7 for each fiscal year for the Women Veterans Health Care  
8 Mini-Residency Program of the Department of Veterans  
9 Affairs to provide opportunities for participation in such  
10 program for primary care and emergency care clinicians.

11 (b) TREATMENT OF AMOUNTS.—The amounts au-  
12 thorized to be appropriated under subsection (a) shall be  
13 in addition to amounts otherwise made available to the  
14 Secretary for the purposes set forth in such subsection.

15 **SEC. 107. ESTABLISHMENT OF WOMEN VETERAN TRAINING**  
16 **MODULE FOR NON-DEPARTMENT OF VET-**  
17 **ERANS AFFAIRS HEALTH CARE PROVIDERS.**

18 (a) IN GENERAL.—Not later than 1 year after the  
19 date of the enactment of this Act, the Secretary of Vet-  
20 erans Affairs shall establish and make available to commu-  
21 nity providers a training module that is specific to women  
22 veterans.

23 (b) COMMUNITY PROVIDER DEFINED.—In this sec-  
24 tion, the term “community provider” means a non-Depart-  
25 ment of Veterans Affairs health care provider who pro-

1 vides health care to veterans under the laws administered  
2 by the Secretary of Veterans Affairs.

3 **TITLE II—MEDICAL CARE**

4 **SEC. 201. IMPROVED ACCESS TO DEPARTMENT OF VET-**  
5 **ERANS AFFAIRS MEDICAL CARE FOR WOMEN**  
6 **VETERANS.**

7 (a) IN GENERAL.—Subchapter II of chapter 17 of  
8 title 38, United States Code, is amended by adding at the  
9 end the following new section:

10 **“§ 1720J. Medical services for women veterans**

11 “(a) ACCESS TO CARE.—The Secretary shall ensure  
12 that women’s health primary care services are available  
13 during regular business hours at every medical center and  
14 community based outpatient clinic of the Department.

15 “(b) STUDY ON EXTENDED HOURS OF CARE.—The  
16 Secretary shall conduct a study to assess—

17 “(1) the use of extended hours as a means of  
18 reducing barriers to care;

19 “(2) the need for extended hours based on  
20 interviews with women veterans and employees; and

21 “(3) the best practices and resources required  
22 to implement use of extended hours.

23 “(c) ANNUAL REPORT TO CONGRESS.—Not later  
24 than September 30 of each year, the Secretary shall sub-  
25 mit to the Committee on Veterans’ Affairs of the Senate

1 and the Committee on Veterans' Affairs of the House of  
2 Representatives a report on compliance with subsection  
3 (a).”.

4 (b) CLERICAL AMENDMENT.—The table of sections  
5 at the beginning of such chapter is amended by inserting  
6 after the item relating to section 1720I the following new  
7 item:

“1720J. Medical services for women veterans.”.

8 **SEC. 202. COUNSELING AND TREATMENT FOR SEXUAL**  
9 **TRAUMA.**

10 Section 1720D of title 38, United States Code, is  
11 amended—

12 (1) in subsection (a)—

13 (A) in paragraph (1), by striking “active  
14 duty, active duty for training, or inactive duty  
15 training” and inserting “duty, regardless of  
16 duty status or line of duty determination (as  
17 that term is used in section 12323 of title 10)”;  
18 and

19 (B) in paragraph (2)(A), by striking “ac-  
20 tive duty, active duty for training, or inactive  
21 duty training” and inserting “duty, regardless  
22 of duty status or line of duty determination (as  
23 that term is used in section 12323 of title 10)”;

1           (2) by striking “veteran” each place it appears  
2           and inserting “former member of the Armed  
3           Forces”;

4           (3) by striking “veterans” each place it appears  
5           and inserting “former members of the Armed  
6           Forces”; and

7           (4) by adding at the end the following new sub-  
8           section:

9           “(g) In this section, the term ‘former member of the  
10          Armed Forces’ includes the following:

11           “(1) A veteran described in section 101(2) of  
12          this title.

13           “(2) An individual not described in paragraph  
14          (1) who was discharged or released from the Armed  
15          Forces under a condition that is not honorable but  
16          not—

17                       “(A) a dishonorable discharge; or

18                       “(B) a discharge by court-martial.”.

19          **SEC. 203. COUNSELING IN RETREAT SETTINGS FOR WOMEN**  
20                               **VETERANS AND OTHER INDIVIDUALS.**

21           (a) IN GENERAL.—Chapter 17 of title 38, United  
22          States Code, is amended by inserting after section 1712C  
23          the following new section:

1 **“§ 1712D. Counseling in retreat settings for women**  
2 **veterans and other individuals**

3 “(a) PROGRAM.—(1) Commencing not later than  
4 January 1, 2021, the Secretary shall carry out, through  
5 the Readjustment Counseling Service of the Veterans  
6 Health Administration, a program to provide reintegration  
7 and readjustment services described in subsection (b) in  
8 group retreat settings to covered individuals, including co-  
9 horts of women veterans who are eligible for readjustment  
10 counseling services under section 1712A of this title.

11 “(2) The participation of a covered individual in the  
12 program under paragraph (1) shall be at the election of  
13 the individual.

14 “(b) COVERED SERVICES.—The services provided to  
15 a covered individual under the program under subsection  
16 (a)(1) shall include the following:

17 “(1) Information on reintegration into the fam-  
18 ily, employment, and community of the individual.

19 “(2) Financial counseling.

20 “(3) Occupational counseling.

21 “(4) Information and counseling on stress re-  
22 duction.

23 “(5) Information and counseling on conflict res-  
24 olution.

25 “(6) Such other information and counseling as  
26 the Secretary considers appropriate to assist the in-

1       dividual in reintegration into the family, employ-  
2       ment, and community of the veteran.

3       “(c) BIENNIAL REPORTS.—Not later than December  
4 31, 2022, and each even-numbered year thereafter, the  
5 Secretary shall submit to the Committees on Veterans’ Af-  
6 fairs of the House of Representatives and the Senate a  
7 report on the program under subsection (a)(1).

8       “(d) COVERED INDIVIDUAL DEFINED.—In this sec-  
9 tion, the term ‘covered individual’ means—

10               “(1) Any veteran who is enrolled in the system  
11 of annual patient enrollment under section 1705 of  
12 this title.

13               “(2) Any survivor or dependent of a veteran  
14 who is eligible for medical care under section 1781  
15 of this title.”.

16       (b) CLERICAL AMENDMENT.—The table of sections  
17 at the beginning of such chapter is amended by inserting  
18 after the item relating to section 1712C the following new  
19 item:

“1712D. Counseling in retreat settings for women veterans and other individ-  
uals.”.

20 **SEC. 204. IMPROVEMENT OF HEALTH CARE SERVICES PRO-**  
21 **VIDED TO NEWBORN CHILDREN BY DEPART-**  
22 **MENT OF VETERANS AFFAIRS.**

23       (a) EXPANSION.—Section 1786 of title 38, United  
24 States Code, is amended—

1           (1) in subsection (a), in the matter preceding  
2           paragraph (1), by striking “seven days” and insert-  
3           ing “14 days”; and

4           (2) by adding at the end the following new sub-  
5           section:

6           “(f) ANNUAL REPORT.—Not later than 60 days after  
7           the end of each fiscal year, the Secretary shall submit to  
8           the Committee on Veterans’ Affairs of the Senate and the  
9           Committee on Veterans’ Affairs of the House of Rep-  
10          resentatives a report on the health care services provided  
11          under subsection (a) during such fiscal year, including the  
12          number of newborn children who received such services  
13          during such fiscal year.”.

14          (b) AUTHORITY TO FURNISH MEDICALLY NEC-  
15          CESSARY TRANSPORTATION FOR NEWBORN CHILDREN OF  
16          CERTAIN WOMEN VETERANS.—Such section is further  
17          amended—

18                (1) in subsection (a)—

19                    (A) in the matter before paragraph (1)—

20                           (i) by inserting “and transportation  
21                           necessary to receive such services” after  
22                           “described in subsection (b)”; and

23                           (ii) by inserting “, except as provided  
24                           in subsection (e),” after “14 days”;

25                    (B) in paragraph (1), by striking “or”;

1 (C) in paragraph (2), by striking the pe-  
2 riod at the end and inserting “; or”; and

3 (D) by adding at the end the following new  
4 paragraph:

5 “(3) another location, including a health care  
6 facility, if the veteran delivers the child before arriv-  
7 ing at a facility described in paragraph (1) or (2).”;

8 (2) in subsection (b), by inserting before the pe-  
9 riod at the end the following: “, including necessary  
10 health care services provided by a facility other than  
11 the facility where the newborn child was delivered  
12 (including a specialty pediatric hospital) that accepts  
13 transfer of the newborn child and responsibility for  
14 treatment of the newborn child”; and

15 (3) by inserting before subsection (f), as added  
16 by subsection (a), the following new subsections:

17 “(c) TRANSPORTATION.—(1) Transportation fur-  
18 nished under subsection (a) to, from, or between care set-  
19 tings to meet the needs of a newborn child includes costs  
20 for either or both the newborn child and parents.

21 “(2) Transportation furnished under subsection (a)  
22 is transportation by ambulance, including air ambulance,  
23 or other appropriate medically staffed modes of transpor-  
24 tation—

1           “(A) to another health care facility (including a  
2 specialty pediatric hospital) that accepts transfer of  
3 the newborn child or otherwise provides post-delivery  
4 care services when the treating facility is not capable  
5 of furnishing the care or services required; or

6           “(B) to a health care facility in a medical emer-  
7 gency of such nature that a prudent layperson rea-  
8 sonably expects that delay in seeking immediate  
9 medical attention would be hazardous to life or  
10 health.

11          “(3) Amounts paid by the Department for transpor-  
12 tation under this section shall be derived from the Medical  
13 Services appropriations account of the Department.

14          “(d) REIMBURSEMENT OR PAYMENT FOR HEALTH  
15 CARE SERVICES OR TRANSPORTATION.—(1) Pursuant to  
16 regulations the Secretary shall prescribe to establish rates  
17 of reimbursement and any limitations thereto under this  
18 section, the Secretary shall directly reimburse a covered  
19 entity for health care services or transportation services  
20 provided under this section, unless the cost of the services  
21 or transportation is covered by an established agreement  
22 or contract. If such an agreement or contract exists, its  
23 negotiated payment terms shall apply.

24          “(2)(A) Reimbursement or payment by the Secretary  
25 under this section on behalf of an individual to a covered

1 entity shall, unless rejected and refunded by the covered  
2 entity within 30 days of receipt, extinguish any liability  
3 on the part of the individual for the health care services  
4 or transportation covered by such payment.

5 “(B) Neither the absence of a contract or agreement  
6 between the Secretary and a covered entity nor any provi-  
7 sion of a contract, agreement, or assignment to the con-  
8 trary shall operate to modify, limit, or negate the require-  
9 ments of subparagraph (A).

10 “(3) In this subsection, the term ‘covered entity’  
11 means any individual, transportation carrier, organization,  
12 or other entity that furnished or paid for health care serv-  
13 ices or transportation under this section.

14 “(e) EXCEPTION.—Pursuant to such regulations as  
15 the Secretary shall prescribe to carry out this section, the  
16 Secretary may furnish more than 14 days of health care  
17 services described in subsection (b), and transportation  
18 necessary to receive such services, to a newborn child  
19 based on medical necessity if the child is in need of addi-  
20 tional care, including a case in which the newborn child  
21 has been discharged or released from a hospital and re-  
22 quires readmittance to ensure the health and welfare of  
23 the newborn child.”.

24 (c) TREATMENT OF CERTAIN EXPENSES ALREADY  
25 INCURRED.—Pursuant to such regulations as the Sec-

1 retary of Veterans Affairs shall prescribe, the Secretary  
2 may provide reimbursement under section 1786 of title 38,  
3 United States Code, as amended by subsection (a), health  
4 care services or transportation services furnished to a new-  
5 born child during the period beginning on May 5, 2010,  
6 and ending on the date of the enactment of this Act, if  
7 the Secretary determines that, under the circumstances  
8 applicable with respect to the newborn, such reimburse-  
9 ment appropriate.

## 10 **TITLE III—REPORTS AND OTHER** 11 **MATTERS**

### 12 **Subtitle A—Reports**

#### 13 **SEC. 301. ASSESSMENT OF EFFECTS OF INTIMATE PART-** 14 **NER VIOLENCE ON WOMEN VETERANS BY AD-** 15 **VISORY COMMITTEE ON WOMEN VETERANS.**

16 Section 542(c)(1) of title 38, United States Code, is  
17 amended—

18 (1) in subparagraph (B), by striking “and” at  
19 the end;

20 (2) by redesignating subparagraph (C) as sub-  
21 paragraph (D); and

22 (3) by inserting after subparagraph (B) the fol-  
23 lowing new subparagraph (C):

24 “(C) an assessment of the effects of inti-  
25 mate partner violence on women veterans; and”.

1 **SEC. 302. STUDY ON STAFFING OF WOMEN VETERAN PRO-**  
2 **GRAM MANAGER PROGRAM AT MEDICAL**  
3 **CENTERS OF THE DEPARTMENT OF VET-**  
4 **ERANS AFFAIRS AND TRAINING OF STAFF.**

5 (a) STUDY.—The Secretary of Veterans Affairs shall  
6 conduct a study on the use of the Women Veteran Pro-  
7 gram Manager program of the Department of Veterans  
8 Affairs to determine—

9 (1) if the program is appropriately staffed at  
10 each medical center of the Department;

11 (2) whether each medical center of the Depart-  
12 ment is staffed with a Women Veteran Program  
13 Manager; and

14 (3) whether it would be feasible and advisable  
15 to have a Women Veteran Program Ombudsman at  
16 each medical center of the Department.

17 (b) REPORT.—Not later than 270 days after the date  
18 of the enactment of this Act, the Secretary shall submit  
19 to the Committee on Veterans' Affairs of the Senate and  
20 the Committee on Veterans' Affairs of the House of Rep-  
21 resentatives a report on the study conducted under sub-  
22 section (a).

23 (c) TRAINING.—The Secretary shall ensure that all  
24 Women Veteran Program Managers and Women Veteran  
25 Program Ombudsmen receive the proper training to carry  
26 out their duties.

1 **SEC. 303. REPORT ON AVAILABILITY OF PROSTHETIC**  
2 **ITEMS FOR WOMEN VETERANS FROM THE**  
3 **DEPARTMENT OF VETERANS AFFAIRS.**

4 Not later than 1 year after the date of the enactment  
5 of this Act, the Secretary of Veterans Affairs shall submit  
6 to the Committee on Veterans' Affairs of the Senate and  
7 the Committee on Veterans' Affairs of the House of Rep-  
8 resentatives a report on the availability from the Depart-  
9 ment of Veterans Affairs of prosthetic items made for  
10 women veterans, including an assessment of the avail-  
11 ability of such prosthetic items at each medical facility of  
12 the Department. The report shall—

13 (1) address efforts on research, development,  
14 and employment of additive manufacture technology  
15 (commonly referred to as “3D printing”) to provide  
16 prosthetic items for women veterans; and

17 (2) include a survey with a representative sam-  
18 ple of 50,000 veterans (of which women shall be  
19 overrepresented) in amputee care program on satis-  
20 faction with prosthetics furnished or procured by the  
21 Department that replace appendages or their func-  
22 tion.

1 **SEC. 304. STUDY OF BARRIERS FOR WOMEN VETERANS TO**  
2 **HEALTH CARE FROM THE DEPARTMENT OF**  
3 **VETERANS AFFAIRS.**

4 (a) **STUDY REQUIRED.**—The Secretary of Veterans  
5 Affairs shall conduct a comprehensive study of the bar-  
6 riers to the provision of comprehensive health care by the  
7 Department of Veterans Affairs encountered by women  
8 who are veterans. In conducting the study, the Secretary  
9 shall—

10 (1) survey women veterans who seek or receive  
11 hospital care or medical services provided by the De-  
12 partment of Veterans Affairs as well as women vet-  
13 erans who do not seek or receive such care or serv-  
14 ices;

15 (2) administer the survey to a representative  
16 sample of women veterans from each Veterans Inte-  
17 grated Service Network; and

18 (3) ensure that the sample of women veterans  
19 surveyed is of sufficient size for the study results to  
20 be statistically significant and is a larger sample  
21 than that of the study referred to in subsection  
22 (b)(1).

23 (b) **USE OF PREVIOUS STUDIES.**—In conducting the  
24 study required by subsection (a), the Secretary shall build  
25 on the work of the studies of the Department of Veterans  
26 Affairs titled—

1           (1) “National Survey of Women Veterans in  
2           Fiscal Year 2007–2008”; and

3           (2) “Study of Barriers for Women Veterans to  
4           VA Health Care 2015”.

5           (c) ELEMENTS OF STUDY.—In conducting the study  
6           required by subsection (a), the Secretary shall conduct re-  
7           search on the effects of the following on the women vet-  
8           erans surveyed in the study:

9           (1) The barriers associated with seeking mental  
10          health care services, including with respect to pro-  
11          vider availability, telehealth access, and family,  
12          work, and school obligations.

13          (2) The effect of driving distance or availability  
14          of other forms of transportation to the nearest med-  
15          ical facility on access to care.

16          (3) The effect of access to care in the commu-  
17          nity.

18          (4) The availability of child care.

19          (5) The acceptability of integrated primary  
20          care, women’s health clinics, or both.

21          (6) The comprehension of eligibility require-  
22          ments for, and the scope of services available under,  
23          hospital care and medical services.

1           (7) The perception of personal safety and com-  
2           fort in inpatient, outpatient, and behavioral health  
3           facilities.

4           (8) The gender sensitivity of health care pro-  
5           viders and staff to issues that particularly affect  
6           women.

7           (9) The effectiveness of outreach for health care  
8           services available to women veterans.

9           (10) The location and operating hours of health  
10          care facilities that provide services to women vet-  
11          erans.

12          (11) The perception of women veterans regard-  
13          ing the motto of the Department of Veterans Af-  
14          fairs.

15          (12) Such other significant barriers as the Sec-  
16          retary considers appropriate.

17          (d) DISCHARGE BY CONTRACT.—The Secretary shall  
18          enter into a contract with a qualified independent entity  
19          or organization to carry out the study and research re-  
20          quired under this section.

21          (e) MANDATORY REVIEW OF DATA BY CERTAIN DE-  
22          PARTMENT DIVISIONS.—

23                 (1) IN GENERAL.—The Secretary shall ensure  
24                 that the head of each division of the Department of  
25                 Veterans Affairs specified in paragraph (2) reviews

1 the results of the study conducted under this sec-  
2 tion. The head of each such division shall submit  
3 findings with respect to the study to the Under Sec-  
4 retary for responsibilities relating to health care  
5 services for women veterans.

6 (2) SPECIFIED DIVISIONS.—The divisions of the  
7 Department of Veterans Affairs specified in this  
8 paragraph are the following:

9 (A) The Under Secretary for Health.

10 (B) The Office of Women’s Health.

11 (C) The Center for Women Veterans estab-  
12 lished under section 318 of title 38, United  
13 States Code.

14 (D) The Advisory Committee on Women  
15 Veterans established under section 542 of such  
16 title.

17 (f) REPORT.—Not later than 30 months after the  
18 date of the enactment of this Act, the Secretary shall sub-  
19 mit to Congress a report on the study required under this  
20 section. The report shall include recommendations for  
21 such administrative and legislative action as the Secretary  
22 considers appropriate. The report shall also include the  
23 findings of the head of each division of the Department  
24 specified under subsection (e)(2) and of the Under Sec-  
25 retary for Health.

1 **SEC. 305. REPORT REGARDING VETERANS WHO RECEIVE**  
2 **BENEFITS UNDER LAWS ADMINISTERED BY**  
3 **THE SECRETARY OF VETERANS AFFAIRS.**

4 (a) REPORT.—Not later than 180 days after the date  
5 of the enactment of this Act, the Secretary of Veterans  
6 Affairs shall publish a report regarding veterans who re-  
7 ceive benefits under laws administered by the Secretary,  
8 including the Transition Assistance Program under sec-  
9 tions 1142 and 1144 of title 10, United States Code.

10 (b) DATA.—The data regarding veterans published in  
11 the report under subsection (a)—

12 (1) shall be disaggregated by—

13 (A) sex;

14 (B) minority group member status; and

15 (C) minority group member status listed  
16 by sex.

17 (2) may not include any personally identifiable  
18 information.

19 (c) MATTERS INCLUDED.—The report under sub-  
20 section (a) shall include—

21 (1) identification of any disparities in the use of  
22 benefits under laws administered by the Secretary;  
23 and

24 (2) an analysis of the cause of such disparities  
25 and recommendations to address such disparities.

1 (d) MINORITY GROUP MEMBER DEFINED.—In this  
2 section, the term “minority group member” has the mean-  
3 ing given that term in section 544 of title 38, United  
4 States Code.

5 **SEC. 306. STUDY ON WOMEN VETERAN COORDINATOR PRO-**  
6 **GRAM.**

7 Not later than 180 days after the date of the enact-  
8 ment of this Act, the Secretary of Veterans Affairs shall  
9 submit to the Committees on Veterans’ Affairs of the  
10 House of Representatives and the Senate a report con-  
11 taining a study on the Women Veteran Coordinator pro-  
12 gram of the Veterans Benefits Administration of the De-  
13 partment of Veterans Affairs. Such study shall identify  
14 the following:

15 (1) If the program is appropriately staffed at  
16 each regional benefits office of the Department.

17 (2) Whether each regional benefits office of the  
18 Department is staffed with a Women Veteran Coor-  
19 dinator.

20 (3) The position description of the Women Vet-  
21 eran Coordinator.

22 (4) Whether an individual serving in the  
23 Women Veteran Coordinator position concurrently  
24 serves in any other position, and if so, the allocation  
25 of time the individual spends in each such position.

1           (5) A description of the metrics the Secretary  
2           uses to determine the success and performance of  
3           the Women Veteran Coordinator.

## 4           **Subtitle B—Other Matters**

### 5   **SEC. 321. ANTI-HARASSMENT AND ANTI-SEXUAL ASSAULT**

#### 6                   **POLICY OF THE DEPARTMENT OF VETERANS**

#### 7                   **AFFAIRS.**

8           (a) IN GENERAL.—Subchapter II of chapter 5 of title  
9   38, United States Code, is amended by adding at the end  
10 the following new section:

11   **“§ 533. Anti-harassment and anti-sexual assault pol-**  
12                   **icy**

13           “(a) ESTABLISHMENT.—The Secretary of Veterans  
14   Affairs shall establish a comprehensive policy to end har-  
15   assment and sexual assault, including sexual harassment  
16   and gender-based harassment, throughout the Depart-  
17   ment of Veterans Affairs. This policy shall include the fol-  
18   lowing:

19           “(1) A process for employees and contractors of  
20   the Department to respond to reported incidents of  
21   harassment and sexual assault committed by any  
22   non-Department individual within a facility of the  
23   Department, including with respect to accountability  
24   or disciplinary measures.

1           “(2) A process for employees and contractors of  
2 the Department to respond to reported incidents of  
3 harassment and sexual assault of any non-Depart-  
4 ment individual within a facility of the Department.

5           “(3) A process for any non-Department indi-  
6 vidual to report harassment and sexual assault de-  
7 scribed in paragraph (1), including an option for  
8 confidential reporting, and for the Secretary to re-  
9 spond to and address such reports.

10          “(4) Clear mechanisms for non-Department in-  
11 dividuals to readily identify to whom and how to re-  
12 port incidents of harassment and sexual assault  
13 committed by another non-Department individual.

14          “(5) Clear mechanisms for employees and con-  
15 tractors of the Department to readily identify to  
16 whom and how to report incidents of harassment  
17 and sexual assault and how to refer non-Department  
18 individuals with respect to reporting an incident of  
19 harassment or sexual assault.

20          “(6) A process for, and mandatory reporting re-  
21 quirement applicable to, any employee or contractor  
22 of the Department who witnesses harassment or sex-  
23 ual assault described in paragraph (1) or (2) within  
24 a facility of the Department, regardless of whether  
25 the individual affected by such harassment or sexual

1 assault wants to report such harassment or sexual  
2 assault.

3 “(7) The actions possible, including disciplinary  
4 actions, for employees or contractors of the Depart-  
5 ment who fail to report incidents of harassment and  
6 sexual assault described in paragraph (1) or (2) that  
7 the employees or contractors witness.

8 “(8) On an annual or more frequent basis,  
9 mandatory training for employees and contractors of  
10 the Department regarding how to report and ad-  
11 dress harassment and sexual assault described in  
12 paragraphs (1) and (2), including bystander inter-  
13 vention training.

14 “(9) On an annual or more frequent basis, the  
15 distribution of the policy under this subsection and  
16 anti-harassment and anti-sexual assault educational  
17 materials by mail or email to each individual receiv-  
18 ing a benefit under a law administered by the Sec-  
19 retary.

20 “(10) The prominent display of anti-harass-  
21 ment and anti-sexual assault messages in each facil-  
22 ity of the Department, including how non-Depart-  
23 ment individuals may report harassment and sexual  
24 assault described in paragraphs (1) and (2) at such

1 facility and the points of contact under subsection  
2 (b).

3 “(11) The posting on internet websites of the  
4 Department, including the main internet website re-  
5 garding benefits of the Department and the main  
6 internet website regarding health care of the Depart-  
7 ment, of anti-harassment and anti-sexual assault  
8 banners specifically addressing harassment and sex-  
9 ual assault described in paragraphs (1) and (2).

10 “(b) POINTS OF CONTACT.—The Secretary shall des-  
11 ignate, as a point of contact to receive reports of harass-  
12 ment and sexual assault described in paragraphs (1) and  
13 (2) of subsection (a)—

14 “(1) at least one individual, in addition to law  
15 enforcement, at each facility of the Department (in-  
16 cluding Vet Centers under section 1712A of this  
17 title), with regard to that facility;

18 “(2) at least one individual employed in each  
19 Veterans Integrated Service Network, with regards  
20 to facilities in that Veterans Integrated Service Net-  
21 work;

22 “(3) at least one individual employed in each  
23 regional benefits office;

24 “(4) at least one individual employed at each lo-  
25 cation of the National Cemetery Administration; and

1           “(5) at least one individual employed at the  
2           Central Office of the Department to track reports of  
3           such harassment and sexual assault across the De-  
4           partment, disaggregated by facility.

5           “(c) ACCOUNTABILITY.—The Secretary shall estab-  
6           lish a policy to ensure that each facility of the Department  
7           and each director of a Veterans Integrated Service Net-  
8           work is responsible for addressing harassment and sexual  
9           assault at the facility and the Network. Such policy shall  
10          include—

11           “(1) a remediation plan for facilities that expe-  
12          rience five or more incidents of sexual harassment,  
13          sexual assault, or combination thereof, during any  
14          single fiscal year; and

15           “(2) taking appropriate actions under chapter 7  
16          or subchapter V of chapter 74 of this title.

17          “(d) DATA.—The Secretary shall ensure that the in-  
18          take process for veterans at medical facilities of the De-  
19          partment includes a survey to collect the following infor-  
20          mation:

21           “(1) Whether the veteran feels safe at the facil-  
22          ity and whether any events occurred at the facility  
23          that affect such feeling.

1           “(2) Whether the veteran wants to be contacted  
2 later by the Department with respect to such safety  
3 issues.

4           “(e) WORKING GROUP.—(1) The Secretary shall es-  
5 tablish a working group to assist the Secretary in imple-  
6 menting policies to carry out this section.

7           “(2) The working group established under paragraph  
8 (1) shall consist of representatives from—

9           “(A) veterans service organizations;

10           “(B) State, local, and Tribal veterans agencies;

11           and

12           “(C) other persons the Secretary determines  
13 appropriate.

14           “(3) The working group established under paragraph  
15 (1) shall develop, and the Secretary shall carry out—

16           “(A) an action plan for addressing changes at  
17 the local level to reduce instances of harassment and  
18 sexual assault;

19           “(B) standardized media for veterans service  
20 organizations and other persons to use in print and  
21 on the internet with respect to reducing harassment  
22 and sexual assault; and

23           “(C) bystander intervention training for vet-  
24 erans.

1       “(f) REPORTS.—The Secretary shall submit to the  
2 Committees on Veterans’ Affairs of the Senate and the  
3 House of Representatives an annual report on harassment  
4 and sexual assault described in paragraphs (1) and (2)  
5 of subsection (a) in facilities of the Department. Each  
6 such report shall include the following:

7           “(1) Results of harassment and sexual assault  
8 programming, including the End Harassment pro-  
9 gram.

10          “(2) Results of studies from the Women’s  
11 Health Practice-Based Research Network of the De-  
12 partment relating to harassment and sexual assault.

13          “(3) Data collected on incidents of sexual har-  
14 assment and sexual assault.

15          “(4) A description of any actions taken by the  
16 Secretary during the year preceding the date of the  
17 report to stop harassment and sexual assault at fa-  
18 cilities of the Department.

19          “(5) An assessment of the implementation of  
20 the training required in subsection (a)(7).

21          “(6) A list of resources the Secretary deter-  
22 mines necessary to prevent harassment and sexual  
23 assault at facilities of the Department.

24       “(g) DEFINITIONS.—In this section:

1           “(1) The term ‘non-Department individual’  
2 means any individual present at a facility of the De-  
3 partment who is not an employee or contractor of  
4 the Department.

5           “(2) The term ‘sexual harassment’ has the  
6 meaning given that term in section 1720D of this  
7 title.”.

8           (b) CLERICAL AMENDMENT.—The table of sections  
9 at the beginning of such chapter is amended by adding  
10 after the item relating to section 532 the following new  
11 item:

“533. Anti-harassment and anti-sexual assault policy.”.

12           (c) DEFINITION OF SEXUAL HARASSMENT.—Section  
13 1720D(f) of such title is amended by striking “repeated,”.

14           (d) DEADLINE.—The Secretary shall commence car-  
15 rying out section 533 of such title, as added by subsection  
16 (a), not later than 180 days after the date of enactment  
17 of this Act.

18 **SEC. 322. SUPPORT FOR ORGANIZATIONS THAT HAVE A**  
19 **FOCUS ON PROVIDING ASSISTANCE TO**  
20 **WOMEN VETERANS AND THEIR FAMILIES.**

21           Section 2044(e) of title 38, United States Code, is  
22 amended by adding at the end the following new para-  
23 graph:

24           “(4) There is authorized to be appropriated  
25 \$20,000,000 for fiscal year 2020 to provide, under

1 subsection (a), financial assistance to organizations  
2 that have a focus on providing assistance to women  
3 veterans and their families.”.

4 **SEC. 323. GAP ANALYSIS OF DEPARTMENT OF VETERANS**  
5 **AFFAIRS PROGRAMS THAT PROVIDE ASSIST-**  
6 **ANCE TO WOMEN VETERANS WHO ARE HOME-**  
7 **LESS.**

8 (a) IN GENERAL.—The Secretary of Veterans Affairs  
9 shall complete an analysis of programs of the Department  
10 of Veterans Affairs that provide assistance to women vet-  
11 erans who are homeless or precariously housed to identify  
12 the areas in which such programs are failing to meet the  
13 needs of such women.

14 (b) REPORT.—Not later than 270 days after the date  
15 of the enactment of this Act, the Secretary shall submit  
16 to the Committee on Veterans’ Affairs of the Senate and  
17 the Committee on Veterans’ Affairs of the House of Rep-  
18 resentatives a report on the analysis completed under sub-  
19 section (a).

20 **SEC. 324. DEPARTMENT OF VETERANS AFFAIRS PUBLIC-**  
21 **PRIVATE PARTNERSHIP ON LEGAL SERVICES**  
22 **FOR WOMEN VETERANS.**

23 (a) PARTNERSHIP REQUIRED.—The Secretary of  
24 Veterans Affairs shall establish a partnership with at least

1 one nongovernmental organization to provide legal services  
2 to women veterans.

3 (b) FOCUS.—The focus of the partnership established  
4 under subsection (a) shall be on the 10 highest unmet  
5 needs of women veterans as set forth in the most recently  
6 completed Community Homelessness Assessment, Local  
7 Education and Networking Groups for Veterans  
8 (CHALENG for Veterans) survey.

9 **SEC. 325. PROGRAM TO ASSIST VETERANS WHO EXPERI-**  
10 **ENCE INTIMATE PARTNER VIOLENCE OR SEX-**  
11 **UAL ASSAULT.**

12 (a) PROGRAM REQUIRED.—The Secretary of Vet-  
13 erans Affairs shall carry out a program to assist former  
14 members of the armed forces who have experienced or are  
15 experiencing intimate partner violence or sexual assault in  
16 accessing benefits from the Department of Veterans Af-  
17 fairs, including coordinating access to medical treatment  
18 centers, housing assistance, and other benefits from the  
19 Department.

20 (b) COLLABORATION.—The Secretary shall carry out  
21 the program under subsection (a) in collaboration with—

- 22 (1) intimate partner violence shelters and pro-  
23 grams;  
24 (2) rape crisis centers;

1           (3) State intimate partner violence and sexual  
2 assault coalitions; and

3           (4) such other health care or other service pro-  
4 viders that serve intimate partner violence or sexual  
5 assault victims as determined by the Secretary, par-  
6 ticularly those providing emergency services or hous-  
7 ing assistance.

8           (c) AUTHORIZED ACTIVITIES.—In carrying out the  
9 program under subsection (a), the Secretary may conduct  
10 the following activities:

11           (1) Training for community-based intimate  
12 partner violence or sexual assault service providers  
13 on—

14                   (A) identifying former members of the  
15 Armed Forces who have been victims of inti-  
16 mate partner violence or sexual assault;

17                   (B) coordinating with local service pro-  
18 viders of the Department; and

19                   (C) connecting former members of the  
20 Armed Forces with appropriate housing, mental  
21 health, medical, and other financial assistance  
22 or benefits from the Department.

23           (2) Assistance to service providers to ensure ac-  
24 cess of veterans to intimate partner violence and  
25 sexual assault emergency services, particularly in un-

1       derserved areas, including services for Native Amer-  
2       ican veterans (as defined in section 3765 of title 38,  
3       United States Code).

4               (3) Such other outreach and assistance as the  
5       Secretary determines necessary for the provision of  
6       assistance under subsection (a).

7       (d) INTIMATE PARTNER VIOLENCE AND SEXUAL AS-  
8       SAULT OUTREACH COORDINATORS.—

9               (1) IN GENERAL.—In order to effectively assist  
10       veterans who have experienced intimate partner vio-  
11       lence or sexual assault, the Secretary may establish  
12       local coordinators to provide outreach under the pro-  
13       gram required by subsection (a).

14              (2) LOCAL COORDINATOR KNOWLEDGE.—The  
15       Secretary shall ensure that each coordinator estab-  
16       lished under paragraph (1) is knowledgeable about—

17              (A) the dynamics of intimate partner vio-  
18       lence and sexual assault, including safety con-  
19       cerns, legal protections, and the need for the  
20       provision of confidential services;

21              (B) the eligibility of veterans for services  
22       and benefits from the Department that are rel-  
23       evant to recovery from intimate partner violence  
24       and sexual assault, particularly emergency

1 housing assistance, mental health care, other  
2 health care, and disability benefits; and

3 (C) local community resources addressing  
4 intimate partner violence and sexual assault.

5 (3) LOCAL COORDINATOR ASSISTANCE.—Each  
6 coordinator established under paragraph (1) shall  
7 assist intimate partner violence shelters and rape  
8 crisis centers in providing services to veterans.

9 **SEC. 326. STUDY AND TASK FORCE ON VETERANS EXPERI-**  
10 **ENCING INTIMATE PARTNER VIOLENCE OR**  
11 **SEXUAL ASSAULT.**

12 (a) NATIONAL BASELINE STUDY.—

13 (1) IN GENERAL.—Not later than 1 year after  
14 the date of the enactment of this Act, the Secretary  
15 of Veterans Affairs, in consultation with the Attor-  
16 ney General, shall conduct a national baseline study  
17 to examine the scope of the problem of intimate  
18 partner violence and sexual assault among veterans  
19 and spouses and intimate partners of veterans.

20 (2) MATTERS INCLUDED.—The study under  
21 paragraph (1) shall—

22 (A) include a literature review of all rel-  
23 evant research on intimate partner violence and  
24 sexual assault among veterans and spouses and  
25 intimate partners of veterans;

1 (B) examine the prevalence of the experi-  
2 ence of intimate partner violence among—

3 (i) women veterans;

4 (ii) veterans who are minority group  
5 members (as defined in section 544 of title  
6 38, United States Code, and including  
7 other minority populations as the Sec-  
8 retary determines appropriate);

9 (iii) urban and rural veterans;

10 (iv) veterans who are enrolled in a  
11 program under section 1720G of title 38,  
12 United States Code;

13 (v) veterans who are in intimate rela-  
14 tionships with other veterans; and

15 (vi) veterans who are described in  
16 more than one clause of this subparagraph;

17 (C) examine the prevalence of the per-  
18 petration of intimate partner violence by vet-  
19 erans; and

20 (D) include recommendations to address  
21 the findings of the study.

22 (3) REPORT.—Not later than 30 days after the  
23 date on which the Secretary completes the study  
24 under paragraph (1), the Secretary shall submit to  
25 the Committees on Veterans' Affairs of the House of

1 Representatives and the Senate a report on such  
2 study.

3 (b) TASK FORCE.—Not later than 90 days after the  
4 date on which the Secretary completes the study under  
5 subsection (a), the Secretary, in consultation with the At-  
6 torney General and the Secretary of Health and Human  
7 Services, shall establish a national task force (in this sec-  
8 tion referred to as the “Task Force”) to develop a com-  
9 prehensive national program, including by integrating fa-  
10 cilities, services, and benefits of the Department of Vet-  
11 erans Affairs into existing networks of community-based  
12 intimate partner violence and sexual assault services, to  
13 address intimate partner violence and sexual assault  
14 among veterans.

15 (c) CONSULTATION WITH STAKEHOLDERS.—In car-  
16 rying out this section, the Task Force shall consult with—

17 (1) representatives from veteran service organi-  
18 zations and military service organizations;

19 (2) representatives from not fewer than three  
20 national organizations or State coalitions with dem-  
21 onstrated expertise in intimate partner violence pre-  
22 vention, response, or advocacy; and

23 (3) representatives from not fewer than three  
24 national organizations or State coalitions, particu-  
25 larly those representing underserved and ethnic mi-

1 nority communities, with demonstrated expertise in  
2 sexual assault prevention, response, or advocacy.

3 (d) DUTIES.—The duties of the Task Force shall in-  
4 clude the following:

5 (1) To review existing services and policies of  
6 the Department and develop a comprehensive na-  
7 tional program to address intimate partner violence  
8 and sexual assault prevention, response, and treat-  
9 ment.

10 (2) To review the feasibility and advisability of  
11 establishing an expedited process to secure emer-  
12 gency, temporary benefits, including housing or  
13 other benefits, for veterans who are experiencing in-  
14 timate partner violence or sexual assault.

15 (3) To review and make recommendations re-  
16 garding the feasibility and advisability of estab-  
17 lishing dedicated, temporary housing assistance for  
18 veterans experiencing intimate partner violence or  
19 sexual assault.

20 (4) To identify any requirements regarding inti-  
21 mate partner violence assistance or sexual assault  
22 response and services that are not being met by the  
23 Department and make recommendations on how the  
24 Department can meet such requirements.

1           (5) To review and make recommendations re-  
2           garding the feasibility and advisability of providing  
3           direct services or contracting for community-based  
4           services for veterans in response to a sexual assault,  
5           including through the use of sexual assault nurse ex-  
6           aminers, particularly in underserved or remote  
7           areas, including services for Native American vet-  
8           erans.

9           (6) To review the availability of counseling serv-  
10          ices provided by the Department and through peer  
11          network support, and to provide recommendations  
12          for the enhancement of such services, to address—

13                 (A) the perpetration of intimate partner vi-  
14                 olence and sexual assault; and

15                 (B) the recovery of veterans, particularly  
16                 women veterans, from intimate partner violence  
17                 and sexual assault.

18          (7) To review and make recommendations to  
19          expand services available for veterans at risk of per-  
20          petrating intimate partner violence.

21          (e) REPORT.—Not later than 1 year after the date  
22          of the enactment of this Act, and not less frequently than  
23          annually thereafter by October 1 of each year, the Task  
24          Force shall submit to the Secretary of Veterans Affairs  
25          and Congress a report on the activities of the Task Force,

1 including any recommendations for legislative or adminis-  
2 trative action.

3 (f) DEFINITIONS.—In this section:

4 (1) The term “Native American veteran” has  
5 the meaning given that term in section 3765 of title  
6 38, United States Code.

7 (2) The term “State” has the meaning given  
8 that term in section 101 of title 38, United States  
9 Code.

Passed the House of Representatives November 12,  
2019.

Attest:

*Clerk.*



116<sup>TH</sup> CONGRESS  
1<sup>ST</sup> SESSION

---

---

**H. R. 3224**

**AN ACT**

To amend title 38, United States Code, to provide for increased access to Department of Veterans Affairs medical care for women veterans.