

119TH CONGRESS
1ST SESSION

H. R. 6835

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to offer annual preventative health evaluations to veterans with a spinal cord injury or disorder and increase access to assistive technologies, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 18, 2025

Mr. BERGMAN (for himself, Mr. BOST, Mr. NEGUSE, Mr. GOTTHEIMER, Mr. MOOLENAAR, Mr. GOLDEN of Maine, Mr. HUIZENGA, Mr. DAVIS of North Carolina, Ms. NORTON, Mr. LAWLER, Mr. CROW, Ms. LOFGREN, Mr. VAN ORDEN, Mr. JAMES, Mr. NUNN of Iowa, and Ms. LEE of Nevada) introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to offer annual preventative health evaluations to veterans with a spinal cord injury or disorder and increase access to assistive technologies, and for other purposes.

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

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Veterans Spinal Trau-
3 ma Access to New Devices Act” or the “Veterans STAND
4 Act”.

5 **SEC. 2. PROVISION OF PREVENTATIVE HEALTH EVALUA-**
6 **TIONS FOR VETERANS WITH A SPINAL CORD**
7 **INJURY OR DISORDER.**

8 Section 1706 of title 38, United States Code, is
9 amended by adding at the end the following new sub-
10 section:

11 “(d)(1) In managing the provision of hospital care
12 and medical services under section 1710(a) of this title,
13 the Secretary shall furnish (through direct provision of
14 service, referral, or a telehealth program operated by the
15 Department) a preventative health evaluation annually to
16 any veteran with a spinal cord injury or disorder who
17 elects to undergo the evaluation.

18 “(2) The evaluation described in paragraph (1) shall
19 include the following:

20 “(A) An assessment of any circumstance or
21 condition the veteran is experiencing that indicates
22 a risk for any health complication related to the spi-
23 nal cord injury or disorder, including a risk of
24 comorbidities.

25 “(B) An assessment regarding chronic pain
26 and, if applicable, the management of chronic pain.

1 “(C) An assessment regarding dietary manage-
2 ment and weight management.

3 “(D) An assessment regarding prosthetic equip-
4 ment, including which prosthetic equipment the vet-
5 eran needs, how well any existing prosthetic equip-
6 ment is functioning considering the needs of the vet-
7 eran, and any safety concerns regarding the pros-
8 thetic equipment in use by or recommended to the
9 veteran.

10 “(E) An assessment with respect to the provi-
11 sion of assistive technology, including spinal cord
12 neuromodulation technology (such as non-invasive
13 transcutaneous spinal stimulation), that could help
14 maximize the veteran’s voluntary motor or auto-
15 nomic function, independence, or mobility, including
16 suitability for home use and need for training, pro-
17 gramming, and remote follow-up.

18 “(3)(A) In maintaining, prescribing, or amending any
19 guidance, rules, or regulations issued by the Department
20 regarding the requirements set out in this subsection, the
21 Secretary shall consult with—

22 “(i) the spinal cord injury and disorder pro-
23 gram managers of the Department;

24 “(ii) clinicians employed by the Department as
25 specialists in spinal cord injuries and disorders;

1 “(iii) clinicians and technologists with dem-
2 onstrated expertise in spinal cord neuromodulation
3 therapies, including non-invasive transeutaneous ap-
4 proaches; and

5 “(iv) representatives of organizations recognized
6 under section 5902 of this title.

7 “(B) Before issuing any guidance, rules, or regula-
8 tions regarding the requirements set out in this sub-
9 section, the Secretary shall consult with manufacturers of
10 assistive technologies and other entities relevant to the
11 provision of assistive technologies if the guidance, rules,
12 or regulations would directly affect such manufacturers or
13 entities.

14 “(C) The Secretary shall ensure, to the extent pos-
15 sible, that any veteran known by the Secretary to have
16 a spinal cord injury or disorder receives information annu-
17 ally about the evaluation available under this subsection
18 and the benefits to the veteran of choosing to undergo the
19 evaluation.

20 “(4) As the Secretary determines clinically appro-
21 priate, the Secretary may provide training, programming,
22 remote monitoring, and follow-up for assistive technologies
23 through telehealth.

24 “(5) Not later than one year after the date of the
25 enactment of the Veterans Spinal Trauma Access to New

1 Devices Act, and every two years thereafter, the Secretary
2 shall submit to the Committees on Veterans' Affairs of
3 the Senate and the House of Representatives a report that
4 includes the following:

5 “(A) For the period covered by the report—

6 “(i) the number of veterans who—

7 “(I) received medical care or hospital
8 services from the Department and used an
9 assistive technology;

10 “(II) received medical care or hospital
11 services from the Department and were as-
12 sessed for the provision of an assistive
13 technology; and

14 “(III) received medical care or hos-
15 pital services from the Department and
16 were prescribed an assistive technology.

17 “(ii) for any assistive technology pre-
18 scribed, an identification of the category of such
19 technology, including spinal cord
20 neuromodulation, and a summary of functional
21 outcomes associated with the prescription of
22 such technology, if available.

23 “(B) The year-to-year change (for the period
24 covered by the report, including the two years imme-
25 diately prior to year the report is submitted) in the

1 percent of veterans with a spinal cord injury or dis-
2 order who received an evaluation under this sub-
3 section.

4 “(6) In reviewing the performance metrics of a Vet-
5 erans Integrated Service Network for any year beginning
6 after the date that is one year after the date of the enact-
7 ment of the Veterans Spinal Trauma Access to New De-
8 vices Act, the Secretary shall consider the provision of
9 evaluations under paragraph (1).

10 “(7) In this subsection, the term ‘assistive tech-
11 nology’ means a powered medical device or electronic tool
12 used to treat or alleviate symptoms or conditions caused
13 by a spinal cord injury or disorder, including the following:

14 “(A) A personal mobility device, including a
15 powered exoskeleton device.

16 “(B) A speech generating device.

17 “(C) A spinal cord neuromodulation technology,
18 including non-invasive transeutaneous spinal stimu-
19 lation using sensory (afferent) pathways, intended to
20 improve voluntary motor function, autonomic func-
21 tion, independence, or quality of life.

22 “(D) Where clinically appropriate, and con-
23 sistent with the prosthetic and sensory aids policies
24 of the Department, an implantable spinal cord stim-

- 1 ulation system that is approved by the Food and
- 2 Drug Administration.”.

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