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{ REPORT
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MILITARY CONSTRUCTION, VETERANS AFFAIRS, AND
RELATED AGENCIES APPROPRIATION BILL, 2019

JUNE 7, 2018.—Ordered to be printed

Mr. BOOZMAN, from the Committee on Appropriations,
submitted the following

REPORT

[To accompany S. 3024]

The Committee on Appropriations reports the bill (S. 3024) making appropriations for military construction, the Department of Veterans Affairs, and related agencies for the fiscal year ending September 30, 2019, and for other purposes, reports favorably thereon and recommends that the bill do pass.

Amounts in new budget authority

Total of bill as reported to the Senate	\$225,565,468,000
Amount of 2018 appropriations	205,791,908,000
Amount of 2019 budget estimate	224,608,740,000
Bill as recommended to Senate compared to—	
2018 appropriations	+ 19,773,560,000
2019 budget estimate	+ 956,728,000

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BACKGROUND

PURPOSE OF THE BILL

The Military Construction, Veterans Affairs, and Related Agencies appropriations bill provides necessary funding for the planning, design, construction, alteration, and improvement of military facilities worldwide. It also finances the cost of military family housing and the U.S. share of the NATO Security Investment Program. In addition, the bill provides funding, including environmental remediation, for base closures and realignments authorized by law. The bill provides resources to the Department of Veterans Affairs for veterans benefits and healthcare and funding for U.S. cemeteries and battlefield monuments both in the United States and abroad, including the American Battle Monuments Commission and Arlington National Cemetery. Additionally, the bill funds the U.S. Court of Appeals for Veterans Claims and the Armed Forces Retirement Homes.

COMMITTEE RECOMMENDATION

The Committee recommends new budget authority totaling \$225,565,468,000 for fiscal years 2019 and 2020 military construction, family housing, base closure, veterans healthcare and benefits, including fiscal year 2020 advance appropriations for veterans medical care and appropriated mandatories, and related agencies. This includes \$122,706,761,000 in mandatory funding and \$102,858,707,000 in discretionary funding. The table at the end of the report displays the Committee recommendation in comparison with the current fiscal year and the President's fiscal year 2019 request. The following table shows total budget authority available for fiscal year 2019.

APPROPRIATIONS FOR FISCAL YEAR 2019

	Budget request	Senate recommendation
New budget authority	\$224,608,740,000	\$225,565,468,000
Previous advances provided for fiscal year 2019 for medical care	70,699,313,000	70,699,313,000
Previous advances provided for fiscal year 2019 for appropriated mandatories	107,709,727,000	107,709,727,000
Less advances provided for fiscal year 2020 for medical care	- 75,550,600,000	- 75,550,600,000
Less advances provided for fiscal year 2020 for appropriated mandatories	- 121,296,429,000	- 121,296,429,000
Total appropriations for fiscal year 2019	206,170,751,000	207,127,479,000

OVERVIEW AND SUMMARY OF BILL

The Military Construction, Veterans Affairs, and Related Agencies appropriations bill funds an array of programs that are vital to America's military personnel and their families, and to the Na-

tions' veterans. For U.S. military forces and their families worldwide, the bill funds critical infrastructure, ranging from mission essential operational and training facilities, such as command and control centers, airfield improvements, and ranges, to key quality-of-life facilities, including barracks, family housing, child care centers, schools, and hospitals.

For America's 20 million veterans, the bill provides the necessary funding for veterans benefits and healthcare, from prescription drugs and clinical services to the construction of hospitals and other medical facilities throughout the Nation.

The bill also funds veterans cemeteries in the United States and provides funding for four independent agencies—the American Battle Monuments Commission, the U.S. Court of Appeals for Veterans Claims, Arlington National Cemetery, and the Armed Forces Retirement Homes.

TITLE I
MILITARY CONSTRUCTION
ITEMS OF SPECIAL INTEREST
HEARINGS

The Subcommittee on Military Construction, Veterans Affairs, and Related Agencies held one hearing related to the fiscal year 2019 military construction budget request. Witnesses included representatives of the Army, Navy, Marine Corps, Air Force, and the Office of the Secretary of Defense.

SUMMARY OF COMMITTEE RECOMMENDATIONS

The fiscal year 2019 budget request for military construction and family housing totals \$10,462,617,000. The Committee recommends \$10,319,000,000, which is \$143,617,000 below the President's budget request.

REPROGRAMMING GUIDELINES

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

The reprogramming criteria that apply to military construction projects (25 percent of the funded amount or \$2,000,000, whichever is less) continue to apply to new housing construction projects and to improvements over \$2,000,000. To provide the services the flexibility to proceed with construction contracts without disruption or delay, the costs associated with environmental hazard remediation such as asbestos removal, radon abatement, lead-based paint removal or abatement, and any other legislated environmental hazard remediation may be excluded, provided that such remediation requirements could not be reasonably anticipated at the time of the budget submission. This exclusion applies to projects authorized in this budget year, as well as projects authorized in prior years for which construction has not been completed.

Furthermore, in instances where prior approval of a reprogramming request for a project or account has been received from the Committee, the adjusted amount approved becomes the new base for any future increase or decrease via below-threshold reprogrammings (provided that the project or account is not a congressional interest item as defined above).

In addition to these guidelines, the services are directed to adhere to the guidance for military construction reprogrammings and notifications, including the pertinent statutory authorities contained in Department of Defense [DOD] Financial Management Regulation 7000.14–R and relevant updates and policy memoranda.

REAL PROPERTY MAINTENANCE

The Committee recommends a continuation of the following general rules for repairing a facility under “Operation and Maintenance” account funding:

- Components of the facility may be repaired by replacement, and such replacement may be up to current standards or code.
- Interior arrangements and restorations may be included as repair, but additions, new facilities, and functional conversions must be performed as military construction projects.
- Such projects may be done concurrent with repair projects, as long as the final conjunctively funded project is a complete and usable facility.
- The appropriate Service Secretary shall submit a 21-day notification prior to carrying out any repair project with an estimated cost in excess of \$7,500,000.

The Department is directed to continue to report on the real property maintenance backlog at all installations for which there is a requested construction project in future budget requests. This information is to be provided on the form 1390. In addition, for all troop housing requests, the form 1391 is to continue to show all real property maintenance conducted in the past 2 years and all future requirements for unaccompanied housing at that installation.

INCREMENTAL FUNDING

In general, the Committee supports full funding for military construction projects. However, it continues to be the practice of the Committee to provide incremental funding for certain large projects, despite administration policy to the contrary, to enable the services to more efficiently allocate military construction dollars among projects that can be executed in the year of appropriation. Therefore, the Committee has recommended incremental funding for six projects.

OTHER MATTERS

Military Construction Funding Initiatives.—The Committee is disappointed that military construction request levels do not reflect the level of investment needed to ensure both current and future force readiness. After years of deliberately “taking risk” by underfunding known military construction requirements, when the Department finally had the opportunity to take advantage of the significant resources provided under the 2018 budget agreement, the Department once again chose to ignore its growing list of infrastructure and construction needs. The fiscal year 2019 military construction budget request comprises less than 1.5 percent of the Department’s \$686 billion total request. Continued underfunding of infrastructure requirements will yield disastrous results as facili-

ties deteriorate and resources for repair or replacement are not available.

In addition to the long list of deferred recapitalization and critical vulnerabilities, there are several multi-billion dollar high priority initiatives critical to rebuilding readiness and enabling joint warfighter capabilities that the Department has been tasked with funding and executing. For example, the Army has been tasked with funding a \$17,000,000,000 modernization of Readiness Centers across the country. The Navy is taking steps to execute its Shipyard Infrastructure Optimization Plan, which will require a \$21,000,000,000 investment over the next 20 years. The Air Force is undertaking a Ground Based Strategic Deterrent facility modernization. All of this competes with ongoing and upcoming platform beddown and facility upgrade projects.

The Committee is concerned that reversing years of underfunding while simultaneously trying to accommodate the initiatives needed to provide ready and resilient installations that enable a platform for global operations is not viable without additional investment. The Committee urges the Secretary of Defense to ensure adequate funding for military construction in its planning, programming and budgeting processes. Further, the Committee directs the Secretary of each Service to provide an assessment at the time of submission of the fiscal year 2020 budget request identifying all military construction initiatives and targeted investments, such as the aforementioned, with a total estimated cost in excess of \$1,000,000,000 and how the request ensures sufficient progress in buying down these infrastructure needs.

The Committee also notes that major defense acquisition programs, particularly in the Air Force and Navy, do not adequately consider associated beddown and related infrastructure, which can result in late to need facilities, deferred recapitalization, and avoidable miscalculations in budget development. Therefore, the Committee also directs the Secretary of each Service to include in the above assessment expected military construction costs associated with new platform beddown by fiscal year, and process improvements to better identify these needs as well as obstacles in fully accounting for future projected infrastructure requirements.

Energy Assurance.—The Committee recognizes DOD's efforts to understand the vulnerability of its power generation, distribution, and storage systems on all of its military installations and to develop technologies, plans, and policies to mitigate its risks. However, the Committee remains concerned that DOD's plan to 'island' its military bases in an emergency is not a solution to addressing the hazards that exist outside the DOD property line, where vulnerabilities to civilian energy infrastructure pose a risk to troops, DOD civilians, and other mission-critical personnel living in the community. The Committee directs the Secretary to provide a report within 180 days of enactment of this act on the Department's efforts to address risks to critical energy systems outside of DOD property. The report should assess the ability of military installations to develop and sustain relationships with public utilities regardless of leadership rotations; the necessary legal authorities to enter arrangements with private or public companies to make improvements to energy infrastructure outside of DOD property;

what, if any, plans exist for local military bases to provide excess base load power to communities during long-term emergencies; and the efficacy of appointing an executive agent charged with department-wide decisionmaking and funding of resiliency projects outside of DOD property.

Joint Strike Fighter [JSF] Initial Joint Training Site.—The 2005 Base Realignment and Closure [BRAC] Commission recommended Eglin Air Force Base [AFB], Florida, as an Initial Joint Training Site [IJTS] that teaches entry-level aviators and maintenance technicians how to safely operate and maintain the new Joint Strike Fighter [JSF] [F-35] aircraft. To implement the JSF IJTS, the Air Force, Navy, and Marines identified the need for a cantonment area, sufficient airspace, and ground targets to support 107 F-35 Primary Assigned Aircraft [PAA] comprised of Air Force, Marine, and Navy variants. Development plans included training and maintenance facilities, hangars, dormitories, munitions storage and loading facilities as well as airfields, airspace and ground support to accommodate 107 PAA. The Committee is aware that since the selection of Eglin AFB as the site for JSF IJTS, the PAA has been reduced from 107 to 59 and that some Services conduct JSF training at installations other than Eglin AFB. The Committee is concerned that building construction, renovation and demolition may have already started to support the initial plan of 107 PAA and the full training mission. Therefore, the Committee directs the Secretary of Defense to report no later than 180 days after enactment of this act on the infrastructure plan supporting the JSF IJTS at Eglin AFB, to include completed facilities and associated capacity and current utilization, and how remaining infrastructure requirements have been adjusted to adapt to the reduced PAA and training mission. Additionally, the report should include the status of the Department's compliance with the 2005 BRAC decision to establish Eglin AFB as the JSF IJTS and the rationale and impact of not fully implementing the decision.

DOD Installation Energy Policy.—The Committee notes that DOD continues to take steps to increase installation energy efficiency and reduce overall energy consumption. However, more can be done bring down energy costs, and DOD must also ramp up its efforts to enhance energy security on its installations through a range of actions, to include exploring ways to mitigate potential vulnerabilities where installations draw from off-base energy sources.

The Committee supports DOD's investments in energy efficiency, renewable energy systems, and energy security, including through the Energy Resilience and Conservation Investment Program [ERCIP], however, is concerned that funding requested for the program has not increased since fiscal year 2014. This has resulted in a continued reduction of projects that can be undertaken, down to 18 this year from 33 projects in fiscal year 2016. The Committee directs the Secretary of Defense to provide a report within 90 days of enactment detailing how DOD integrates and prioritizes ERCIP projects in the future years defense program and to certify whether there are unfunded requirements within the program. The Committee recommends an increase of \$45,000,000 above the request for ERCIP and encourages the Department to prioritize funding for

energy-related projects, including renewable energy projects, to mitigate risk to mission-critical assets and promote energy security and efficiency at military installations.

Defense Access Roads.—The Committee is concerned about the lack of future planning for Defense Access Roads [DAR] and transportation infrastructure needs as flooding on roads at domestic installations that are vital to military operations increases in frequency and severity. The Committee directs the Secretary of Defense, in consultation with the Secretary of Transportation, to establish a process for assessing the flood risk to defense access roads, with particular attention to communities that have experienced severe flooding from non-storm surge flooding and flooding due to storm surge. The Committee expects that process to be informed by the best available science regarding flood risk in the United States. Further, the Committee directs the Secretary of Defense to report no later than 90 days after enactment of this act on the national security risks of neglected DAR roads and projects affected by flooding due to storm surge, including what data and other appropriate information it is using to inform its risk and need assessment, and any relevant obstacles, to include legal, in carrying out such projects.

Reserve Component Parity.—The Committee notes significant decreases in funding across the Reserve Component in the fiscal year 2019 Military Construction request from the fiscal year 2018 level. While the Committee understands that critical demand fluctuates by year and ongoing large-scale initiatives can skew data, it is concerned that reliance on the Real Property Asset Database [RPAD] as a key criterion does not accurately reflect current and future infrastructure needs across the components based on evolving operational requirements. Furthermore, despite steps taken by the Department to improve oversight of its global real property portfolio, multiple reports by the Government Accountability Office have found deficiencies in its tracking of real property assets and leased facilities, further undermining the credibility of this data. Therefore, the Committee directs the Secretaries of each Service to provide a report within 90 days of enactment of this act on if and how each determines base ratios for respective Active and Reserve Component military construction funding allocations, to include what data is used, specifically the extent to which the RPAD is weighted, and how frequently these ratios are updated.

Flight Line Infrastructure.—The Committee is concerned with the lack of sufficient flight line infrastructure and the potentially adverse impact it may have on aircraft and personnel. There are many examples throughout the Department where improvements in facilities and airfield infrastructure would save resources, and improve personnel and aircraft readiness. For example, at Laughlin Air Force Base, 82 percent of the T-1 fleet was unsheltered and damaged in a hail storm. The damaged aircraft were grounded, resulting in an 80 percent loss of T-1 pilot training production capability. At Al Dhafra Air Base, host nation sun shades are utilized to help protect F-22s from extreme heat and sunlight but are not always available. Adequate flight line infrastructure can help protect the Department's assets from not only damage but resulting decreased mission accomplishment. The Committee recommends

the Secretary of Defense review flight line infrastructure for both minor and major revitalization and recapitalization opportunities. This could include simple infrastructure such as sun shelters that protect both personnel and equipment from extreme heat and inclement weather, to more elaborate construction and maintenance projects such as repairing drainage issues on flight lines to keep ramp areas useable during extended rainy periods and prevent aircraft from sitting in standing water. The Committee urges the Department to prioritize these projects in future budget submissions.

Water Conservation on Military Installations.—Senate Report 115–130 reiterated a directive from Senate Report 114–237 requesting the Secretary of Defense provide a report on water usage and conservation on military installations. The Committee notes that the report is currently overdue and directs the Secretary to provide the report no later than October 1, 2018.

Federal, State and Local Intelligence Collaboration.—The Committee remains supportive of collaborative intelligence fusion centers that utilize National Guard facilities. These centers allow Federal, state, local, and tribal law enforcement officials to collaborate and share intelligence and threat information, and co-locating them with National Guard facilities offers opportunities for cost savings. The Committee urges the Department, the services, and the National Guard Bureau to prioritize needed workplace replacement projects, including Sensitive Compartmented Information Facility [SCIF] projects to conduct state and Federal intelligence analysis, in the fiscal year 2020 and future budget submissions.

Major Range and Test Facility Base [MRTFB].—The Committee remains concerned about the lack of investment and sustainment in MRTFB facilities. These ranges, which include Army, Navy, Air Force and Defense Agency facilities are critical to developing and maintaining the Nation’s military technological superiority. In order to support development of emerging advanced technologies, test and training range infrastructure and instrumentation must be modernized. Senate Report 115–130 contained direction to the Secretary of Defense to submit a comprehensive MRTFB modernization plan within 180 days of enactment outlining a timetable and specific actions for repair, replacement and renovation of infrastructure, equipment and instrumentation at mission-critical facilities. The Committee looks forward to receiving this report.

Family Housing Management.—The Committee is concerned that at times military families are faced with housing unit relocation or otherwise forced disposition due to untimely and mismanaged family housing renovations, particularly when service members and their families are in need of housing due to a permanent change of station. To understand the scale of this problem, the Committee directs the Department to assess the management of family housing renovations and identify any and all instances whereby military families have been relocated or forced to move from their assigned housing unit because of renovation or repair, specifically for government-controlled housing [owned and leased], with a focus on instances on duty stations outside the continental United States. The report should also include detailed data on wait times, identification of contributing factors, and potential mitigating solutions.

The Committee directs the Department to provide the report within 120 days of enactment of this act.

Simulation Center Planning Bays.—The Committee notes that combat maneuver simulation centers offer a valuable resource to train combat forces in real world situations while reducing cost, preserving equipment, enhancing training and decreasing risk to the warfighter. Military students utilize these centers, such as the Maneuver Center of Excellence and other educational posts, to augment their training and enhance readiness and should continue to do so at an increasing rate in the coming years. These centers often do not have the capacity for the entire unit to communicate, coordinate, and plan on site during their training. Therefore, the Committee encourages the Department to consider additional structures, such as covered planning bay areas, that could enhance the value of training by providing space to communicate, coordinate, and plan on site amidst the simulation training. As such, the Committee directs the Department to submit a report within 180 days of enactment of this Act assessing the value of having covered planning bay areas adjacent to or within current facilities that provide combat maneuver simulation training. The report should identify potential installations where these structures could be constructed adjacent to or within simulations centers.

Information Technology Infrastructure for Military Construction Projects.—The Committee recognizes that information technology is an essential component in constructing modern facilities for military missions as well as planning for future requirements. Technological advancements can lead to increased productivity and efficiencies on energy and space, which impact military construction and modernization projects. For example, the Committee is aware of technology that can streamline historically compartmented classified networks through cross domain solutions. Not only does this drastically impact future productivity for the workforce but it could also yield substantial savings and efficiencies on space, energy, and HVAC requirements. The Committee urges the Services to utilize such cost cutting solutions early in the planning process to gain efficiencies and savings on military construction projects.

Defense Workplace Facilities Improvements.—The Committee is concerned that continued constraints on the Defense budget in the face of increasing operational requirements is taking a serious toll on the Department's aging and structurally deficient workplace facilities inventory. The parking garage at the National Maritime Intelligence Center [NMIC], which serves a workforce of approximately 3,700 personnel, continues to be certified as unsafe and structurally deficient. While \$12,000,000 has already been spent on repairs in an effort to maintain the facility, the Committee remains concerned about the deficient operational status. A Navy commissioned engineering analysis validated the repairs as a stopgap measure because of the severity of the structural flaws, but needed investment continues to be deferred. In recognition of the fact that aging and structurally deficient workplace and support facility infrastructure has a significant impact on personnel safety and operational readiness, the Committee urges the Department and the services to prioritize needed workplace replacement projects, in-

cluding the NMIC parking structure, in the fiscal year 2020 and future budget submissions.

Special Operations Command Planning and Design.—The Committee is aware of numerous recent reprogramming requests submitted by U.S. Special Operations Command [SOCOM]. The additional funds requested, and delayed project execution timelines, have largely been a result of poor planning and design fundamentals, such as contracting design-build when requirements necessitated design-bid-build. The committee is encouraged that SOCOM is evaluating its planning and budgeting process to ensure that projects requested are appropriately scoped and prepared for execution. It also recognizes that SOCOM manpower and infrastructure needs continue to increase in demand. The committee urges SOCOM to continue to work with the Army Corps of Engineers and Naval Facilities Engineering Command to ensure best practices are being followed.

Fiscal Year 2018 Savings.—The Committee notes that the Department based certain project funding levels in the fiscal year 2019 Budget Request on lower expected appropriations than were provided in Public Law 115–141. As a result, the fiscal year 2019 requests for the Next NGA West Complex Phase 1 and Presidential Aircraft Recapitalization Complex exceed need. The Committee fully funds these projects as authorized in Public Law 115–91.

Military Construction Funding Initiatives.—The bill includes funding for military construction initiatives to address important unfunded priorities included in the Department of Defense’s unfunded priority lists provided to Congress. This includes an additional \$77,600,000 for the Army, \$244,400,000 for the Navy and Marine Corps, \$118,516,000 for the Air Force, \$22,000,000 for the Army National Guard, \$11,100,000 for the Air National Guard, \$10,000,000 for the Army Reserve, and \$14,400,000 for the Air Force Reserve. All additional funding is reserved for projects that were included in the unfunded priority lists submitted to Congress.

Rescissions.—The Committee recommends an administrative provision rescinding prior year unobligated funds due primarily to project bid savings and the slow execution of projects.

MILITARY CONSTRUCTION OVERVIEW

Appropriations, 2018 ¹	\$10,091,000,000
Budget estimate, 2019	10,462,617,000
Committee recommendation	10,319,000,000

¹ Total excludes \$920,981,000 in emergency funding provided in Public Law 115–123, the Further Additional Supplemental Appropriations for Disaster Relief Requirements Act and Public Law 115–96, Continuing Appropriations Act, Department of Defense Missile Defeat and Defense Enhancements Appropriations Act, 2018.

MILITARY CONSTRUCTION ACCOUNTS—PROGRAM DESCRIPTION

The military construction appropriation provides for acquisition, construction, installation, and equipment of temporary or permanent public works, military installations, facilities, and real property for the Department of Defense. This appropriation also provides for facilities required as well as funds for infrastructure projects and programs required to support bases and installations around the world.

MILITARY CONSTRUCTION, ARMY

Appropriations, 2018	\$923,994,000
Budget estimate, 2019	1,011,768,000
Committee recommendation	1,021,768,000

COMMITTEE RECOMMENDATION

The Committee recommends \$1,021,768,000 for the Army for fiscal year 2019. This amount is \$97,774,000 above the fiscal year 2018 enacted level and \$10,000,000 above the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

Army Training Schools.—The Committee is concerned about the impact of deferred investments in Army schoolhouses, especially those with aging facilities directly tied to warfighter training and readiness across the components. In particular, the Army Mountain Warfare School [AMWS], which directly supports the Army's top priority of building and sustaining readiness, continues to see increased demand with insufficient and outdated space requirements, while deferred maintenance compounds challenges with its aging infrastructure. AMWS provides critical mountain warfare and cold weather operations training to support the creation of an agile and highly mobile force, but is nearly 40 years old and sited in a flood plain, and has been forced to cap attendance due to inadequate facilities, despite continual demand for throughput. Therefore, the Committee urges the Secretary of the Army to prioritize funding for ready-to-execute schoolhouse projects, in particular those that support the growing demand for mountaineering skills and training.

Defense Laboratory Enterprise Facilities and Infrastructure.—The Committee remains concerned the unspecified minor military construction [UMMC] request is insufficient to support the Army Laboratories. As threats continue to emerge and construction costs continue to rise, outdated laboratory facilities lack the investment needed to deliver next generation capability to the U.S. military. While the Army can utilize funds from research, development, test and evaluation or operations and maintenance to fund laboratory projects, the higher UMMC threshold provided in Public Law 115-91 is intended to allow the services greater opportunity to keep up with threats that evolve faster than can be addressed through the normal military construction planning process. Therefore, an additional \$10,000,000 is provided to supplement Army unspecified minor construction projects. The committee urges the Secretary of the Army to adequately prioritize UMMC projects that support the Army Laboratories to ensure that Army Science and Technology continue to lay the foundation for future capabilities.

Army National Guard Readiness Center Investment.—The Committee remains concerned that the Department of the Army has not adequately prioritized funding to implement the "Affordable Readiness" strategy recommended by the 2014 Army National Guard Readiness Center Transformation Master Plan [RCTMP]. While the committee understands that the Army must balance these additional costs with existing infrastructure demands, the Committee also notes that the fiscal year 2019 Military Construction request for the Army National Guard was a 14 percent de-

crease from the fiscal year 2018 request, representing its smallest portion of the Army military construction budget since 2008. Except for the fiscal year 2015 budget request, the funding level is at its lowest in the post-2001 era. The Committee urges the Army to provide additional funding for the Army National Guard in its future years defense program in order to expedite execution of the RCTMP.

Army Pacific Readiness.—The Committee remains concerned about the risks that the Army, like the other military Services, has taken in funding infrastructure and the continued degradation these risks have on long-term readiness. The Committee is aware of the Army's \$2,600,000,000, 30-year plan to improve readiness in the Pacific by addressing critical shortfalls in aviation, operations, training, and munitions facilities at Schofield Barracks, Wheeler Army Airfield, and the Pohakuloa Training Area, in Hawaii. The Committee recognizes that the planned investment of \$300,000,000 over the future years defense program is important to meeting the Army's short- and long-term readiness needs and ensuring that U.S. Army Garrison Hawaii remains a deployment platform from which soldiers in the state can continue to meet critical national defense missions across the Asia-Pacific region. The Committee urges the Army to continue to obligate funding toward its long-range plan to improve its readiness in the Pacific over the next several decades.

Sunflower Army Ammunition Plant.—The Committee continues to urge the Army to proactively manage the environmental remediation of the former Sunflower Army Ammunition Plant [SFAAP]. The Committee is encouraged that the Army has addressed the need for improved communications with Sunflower Redevelopment, LLC [SRL] and supports regular stakeholder meetings and monthly conference calls with SRL to address questions or issues related to cleanup and redevelopment of the former SFAAP. The Committee expects the Army to continue its risk assessments and evaluations, consistent with applicable regulations and permit requirements, and to work with regulatory agencies to ensure all response sites are remediated to applicable and approved standards. The Committee further expects the Army to continue work in consultation and coordination with SRL and ensure SRL redevelopment priorities are synchronized with Army managed cleanup activities.

Badger Army Ammunition Plant.—The Committee continues to urge the Army to accelerate, to the extent practicable and appropriate, its environmental remediation actions at the former Badger Army Ammunition Plant and directs the Army to hold regular public meetings to update and engage with local stakeholders and to integrate local priorities in its remediation plans and final groundwater remedy for the site and affected surrounding communities. The Committee supports the Army's decision to work with the U.S. Geological Survey to review the current groundwater monitoring program and directs the Army to use the results of the review to improve the program to ensure that contaminated groundwater plumes are monitored and private drinking water wells are protected. The Committee recognizes that the Town of Merrimac, Wisconsin, acted in good faith to partner with the Army on the now-reversed plans to construct a municipal drinking water system, and

directs the Army to consider the construction of a such a system as a remedial alternative.

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

Appropriations, 2018 ¹	\$1,553,275,000
Budget estimate, 2019	2,543,189,000
Committee recommendation	2,222,522,000

¹Total excludes \$201,636,000 in emergency funding provided in Public Law 115-123, the Further Additional Supplemental Appropriations for Disaster Relief Requirements Act, 2018.

COMMITTEE RECOMMENDATION

The Committee recommends \$2,222,522,000 for Navy and Marine Corps military construction for fiscal year 2019. This amount is \$669,247,000 above the fiscal year 2018 enacted level and \$320,667,000 below the budget request. Further detail of the Committee’s recommendation is provided in the State table at the end of this report.

Causeway, Boat Channel & Turning Basin.—The Committee notes that the work in progress curve submitted with the budget request shows that the Navy cannot execute the full request of \$117,830,000 in fiscal year 2019. Therefore the Committee provides \$60,000,000 for the first increment of this project.

Naval Shipyard Modernization.—The committee is aware of the Shipyard Infrastructure Optimization Plan submitted to Congress in February 2018. The plan seeks to, among other requirements, assess existing facilities for efficiencies and address future infrastructure requirements at public shipyards. It also includes a master plan for each shipyard, including, but not limited to, capital equipment and facility investment requirements. The committee believes the Navy’s assessment of public shipyard dry dock capacity is particularly important, as it identifies 68 deferred maintenance availabilities under the status quo, 67 of which are restored upon making the public shipyard dry dock investments within the time-frame recommended by the plan. Accordingly, the Secretary of the Navy is urged to adequately prioritize the timely funding of public shipyard infrastructure, in particular dry dock and shore infrastructure necessary to support critical maintenance of surface and submarine fleets by public shipyards.

Navy Strategic Laydown and Dispersal.—The Committee continues to recognize the inherent risk of natural and man-made hazards associated with the stationing of U.S. capital ships at major ports, and the Navy’s corresponding requirement for the strategic dispersal of its fleet in the Pacific and Atlantic to mitigate that risk. The Navy’s internal guidance on making decisions regarding strategic basing requires that the Navy consider strategic dispersal strategies and that these strategies be factored into homeporting decisions to limit the risk associated with natural disasters or man-made catastrophes. The Committee continues to believe that strategic dispersal should be a key consideration in expanding the fleet, and that, as a first step, the Navy should program military construction funding, to include planning and design funds, for necessary infrastructure to achieve strategic dispersal of its fleet, beginning with the budget request and future years defense program for fiscal year 2020.

MILITARY CONSTRUCTION, AIR FORCE

Appropriations, 2018	\$1,543,558,000
Budget estimate, 2019	1,725,707,000
Committee recommendation	1,495,423,000

COMMITTEE RECOMMENDATION

The Committee recommends \$1,495,423,000 for the Air Force in fiscal year 2019. This amount is \$48,135,000 below the fiscal year 2018 enacted level and \$230,284,000 below the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

Little Rock Air Force Base.—The Committee is concerned with the failed attempt to repair the runway at Little Rock AFB, Arkansas. Little Rock AFB, the nation's tactical airlift Center of Excellence, has the world's largest fleet of C-130 aircraft and is the largest C-130 training base in the world, training C-130 crews from the U.S. and 47 other nations. The contract to repair the base's only runway, overseen by the Army Corps of Engineers [the Corps], was awarded in September 2014 and terminated in June 2017 due to problems with the project. Despite an estimated contract completion date of April 2017, the project was only one quarter complete when the Corps terminated the contract in June 2017. The Committee is concerned with the issues that led to termination of the contract, the coordination between the Air Force and the Corps, and ensuring a follow-on replacement project is adequately prioritized and funded. Prior Congressional inquiries have yielded conflicting and inconsistent information. Therefore, the Committee directs the Secretary of the Air Force to submit a report coordinated with the Corps no later than 90 days after enactment of this act providing the status on the cancelled project and replacement project, including what happened to the funding used for the original contract, a justification for the increase in cost for the new project, if any of the completed work from the cancelled project is salvageable, how the Air Force is resolving the issues that led to contract termination and ensuring, to the extent possible, that they are not repeated in follow-on contracts, and how and when a future project will be funded. Additionally, the Committee directs the Air Force to appoint a senior official who shall be responsible for the project and will provide quarterly project updates to the congressional defense committees.

Air Force Ballistic Missile Facilities.—The Committee remains concerned with the deteriorating infrastructure of the ground-based intercontinental ballistic missile facilities at Malmstrom AFB, Montana; Minot AFB, North Dakota; and F.E. Warren AFB, Wyoming. The Missile Alert Facilities [MAF] at these bases are in advanced states of disrepair. In February 2018, the Air Force provided the Committee a study that highlighted the need to recapitalize the MAFs. Further, the Committee understands that Air Force Global Strike Command continues to be in the process of identifying, validating, and finalizing facility requirements, as well as analyzing commercial electrical power infrastructure to support the missile fields. The Committee directs the Secretary of the Air Force to provide compiled results as soon as they become available.

Air Force Space Rapid Capabilities Office.—The Committee notes that Air Force facilities supporting the space enterprise reorganization are lacking the secure compartmentalized information facility [SCIF] space needed to interact with all commercial partners, especially small business partners that may be developing cutting edge technology to aid the Air Force’s space capabilities. This includes both secure office/meeting spaces as well as secure hardware development, integration and testing spaces. Therefore, the Committee directs the Air Force to submit an analysis within 180 days of enactment of this Act detailing the SCIF needs for both secure office/meeting spaces as well as secure hardware development, integration and testing spaces that could improve small business engagement with the Space RCO and the Space and Missile Systems Center. The analysis shall include a sample of current and would be business partners’ needs, as well as inputs from Space RCO, Space Command, and the Space and Missile Systems Center.

MILITARY CONSTRUCTION, DEFENSE-WIDE
(INCLUDING TRANSFER OF FUNDS)

Appropriations, 2018 ¹	\$2,811,513,000
Budget estimate, 2019	2,693,324,000
Committee recommendation	2,575,938,000

¹Total excludes \$200,000,000 in emergency funding provided in Public Law 115–96, Continuing Appropriations Act, Department of Defense Missile Defeat and Defense Enhancements Appropriations Act, 2018.

COMMITTEE RECOMMENDATION

The Committee recommends \$2,575,938,000 for projects considered within the Defense-Wide account in fiscal year 2019. This amount is \$235,575,000 below the fiscal year 2018 enacted level and \$117,386,000 below the budget request. Further detail of the Committee’s recommendation is provided in the State table at the end of this report.

Hydrant Fuel Systems in Support of Humanitarian Assistance and Disaster Relief Operations.—The Committee notes that the Department of Defense has a long history of successfully conducting urgently needed humanitarian assistance and disaster relief [HADR] missions. In recent years HADR missions have responded to major earthquakes, tsunamis, typhoons, hurricanes, floods, and the nuclear disaster in Fukushima, Japan. The Committee believes that hydrant fuel systems capable of supporting large scale fueling of heavy aircraft are an essential component of our HADR capability. The Committee continues to encourage the services and the Defense Logistics Agency to prioritize construction and enhancement of these systems in locations that serve as staging bases for HADR operations.

MILITARY CONSTRUCTION, ARMY NATIONAL GUARD

Appropriations, 2018 ¹	\$220,652,000
Budget estimate, 2019	180,122,000
Committee recommendation	190,122,000

¹Total excludes \$519,345,000 in emergency funding provided in Public Law 115–123, the Further Additional Supplemental Appropriations for Disaster Relief Requirements Act, 2018.

COMMITTEE RECOMMENDATION

The Committee recommends \$190,122,000 for Military Construction, Army National Guard for fiscal year 2019. This amount is \$30,530,000 below the fiscal year 2018 enacted level and \$10,000,000 above the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

MILITARY CONSTRUCTION, AIR NATIONAL GUARD

Appropriations, 2018	\$171,491,000
Budget estimate, 2019	129,126,000
Committee recommendation	139,126,000

COMMITTEE RECOMMENDATION

The Committee recommends \$139,126,000 for Military Construction, Air National Guard for fiscal year 2019. This amount is \$32,365,000 below the fiscal year 2018 enacted level and \$10,000,000 above the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

MILITARY CONSTRUCTION, ARMY RESERVE

Appropriations, 2018	\$83,712,000
Budget estimate, 2019	64,919,000
Committee recommendation	64,919,000

COMMITTEE RECOMMENDATION

The Committee recommends \$64,919,000 for Military Construction, Army Reserve for fiscal year 2019. This amount is \$18,793,000 below the fiscal year 2018 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

MILITARY CONSTRUCTION, NAVY RESERVE

Appropriations, 2018	\$95,271,000
Budget estimate, 2019	43,065,000
Committee recommendation	43,065,000

COMMITTEE RECOMMENDATION

The Committee recommends \$43,065,000 for Military Construction, Navy Reserve for fiscal year 2019. This amount is \$52,206,000 below the fiscal year 2018 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

MILITARY CONSTRUCTION, AIR FORCE RESERVE

Appropriations, 2018	\$73,535,000
Budget estimate, 2019	50,163,000
Committee recommendation	50,163,000

COMMITTEE RECOMMENDATION

The Committee recommends \$50,163,000 for Military Construction, Air Force Reserve for fiscal year 2019. This amount is

\$23,372,000 below the fiscal year 2018 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

NORTH ATLANTIC TREATY ORGANIZATION

SECURITY INVESTMENT PROGRAM

Appropriations, 2018	\$177,932,000
Budget estimate, 2019	171,064,000
Committee recommendation	171,064,000

PROGRAM DESCRIPTION

The North Atlantic Treaty Organization [NATO] appropriation provides for the U.S. cost share of the NATO Security Investment Program for the acquisition and construction of military facilities and installations (including international military headquarters) and for related expenses for the collective defense of the NATO Treaty area.

COMMITTEE RECOMMENDATION

The Committee recommends \$171,064,000 for the North Atlantic Treaty Organization Security Investment Program for fiscal year 2019. This amount is \$6,868,000 below the fiscal year 2018 enacted level and equal to the budget request.

DEPARTMENT OF DEFENSE BASE CLOSURE ACCOUNT

Appropriations, 2018	\$310,000,000
Budget estimate, 2019	267,538,000
Committee recommendation	277,538,000

PROGRAM DESCRIPTION

Section 2711 of the National Defense Authorization Act for Fiscal Year 2014 (Public Law 112-239) consolidated the Base Closure Account 1990 and the Base Closure Account 2005 into a single Department of Defense Base Closure Account. The Base Closure Account provides for cleanup and disposal of property consistent with the four closure rounds required by the base closure acts of 1988 and 1990, and with the 2005 closure round required by the Defense Base Closure and Realignment Act of 1990 (10 U.S.C. 2687 note).

COMMITTEE RECOMMENDATION

The Committee recommends a total of \$277,538,000 for the Department of Defense Base Closure Account for fiscal year 2019. This amount is \$32,462,000 below the fiscal year 2018 enacted level and \$10,000,000 above the budget request. Funds provided for fiscal year 2019 are for environmental cleanup and ongoing operations and maintenance.

Perfluorooctane Sulfonate [PFOS] and Perfluorooctanoic Acid [PFOA].—The Committee has provided \$10,000,000 in additional funds for identification, mitigation, and clean-up costs across the Department of Defense for PFOS and PFOA. DOD is directed to provide a spend plan for these additional funds to the Committee no later than 30 days after enactment of this act.

FAMILY HOUSING OVERVIEW

Appropriations, 2018	\$1,409,437,000
Budget estimate, 2019	1,582,632,000
Committee recommendation	1,582,632,000

FAMILY HOUSING ACCOUNTS—PROGRAM DESCRIPTION

The Family Housing appropriation provides funds for military family housing construction activities, operation and maintenance, the Family Housing Improvement Fund, and the Homeowners Assistance Program. Construction accounts provide funding for new construction, improvements and the Federal Government share of housing privatization. Operation and maintenance accounts fund costs associated with the maintenance and leasing of military family housing, including utilities, services, management, and furnishings.

COMMITTEE RECOMMENDATION

The Committee recommends \$1,582,632,000 for Family Housing Construction, Operations and Maintenance, and the Department's family housing improvement fund for fiscal year 2019. This amount is \$173,195,000 above the fiscal year 2018 enacted level and equal to the budget request.

FAMILY HOUSING CONSTRUCTION, ARMY

Appropriations, 2018	\$182,662,000
Budget estimate, 2019	330,660,000
Committee recommendation	330,660,000

COMMITTEE RECOMMENDATION

The Committee recommends \$330,660,000 for Army Family Housing Construction in fiscal year 2019. This amount is \$147,998,000 above the fiscal year 2018 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

FAMILY HOUSING OPERATION AND MAINTENANCE, ARMY

Appropriations, 2018	\$348,907,000
Budget estimate, 2019	376,509,000
Committee recommendation	376,509,000

COMMITTEE RECOMMENDATION

The Committee recommends \$376,509,000 for family housing operation and maintenance, Army for fiscal year 2019. This amount is \$27,602,000 above the fiscal year 2018 enacted level and equal to the budget request.

FAMILY HOUSING CONSTRUCTION, NAVY AND MARINE CORPS

Appropriations, 2018	\$83,682,000
Budget estimate, 2019	104,581,000
Committee recommendation	104,581,000

COMMITTEE RECOMMENDATION

The Committee recommends \$104,581,000 for Family Housing Construction, Navy and Marine Corps. This amount is \$20,899,000 above the fiscal year 2018 enacted level and equal to the budget request. Further detail of the Committee’s recommendation is provided in the State table at the end of this report.

FAMILY HOUSING OPERATION AND MAINTENANCE, NAVY AND MARINE CORPS

Appropriations, 2018	\$328,282,000
Budget estimate, 2019	314,536,000
Committee recommendation	314,536,000

COMMITTEE RECOMMENDATION

The Committee recommends \$314,536,000 for family housing operation and maintenance, Navy and Marine Corps, in fiscal year 2019. This amount is \$13,746,000 below the fiscal year 2018 enacted level and equal to the budget request.

Naval Support Activity Bahrain General and Flag Officers Quarters.—Public Law 115–141 provided \$2,138,000 for the construction of on-base housing. The Committee understands that the Navy no longer intends to construct the housing facility, and is in the process of determining a suitable alternative. Therefore, the Committee rescinds \$2,138,000 from the Navy Family Housing Construction account. Furthermore, the Committee is deeply concerned by the current off-base high cost lease and directs the Secretary of the Navy to keep the Committee apprised of progress on lease negotiation.

FAMILY HOUSING CONSTRUCTION, AIR FORCE

Appropriations, 2018	\$85,062,000
Budget estimate, 2019	78,446,000
Committee recommendation	78,446,000

COMMITTEE RECOMMENDATION

The Committee recommends \$78,446,000 for Family Housing Construction, Air Force, in fiscal year 2019. This amount is \$6,616,000 below the fiscal year 2018 enacted level and equal to the budget request. Further detail of the Committee’s recommendation is provided in the State table at the end of this report.

FAMILY HOUSING OPERATION AND MAINTENANCE, AIR FORCE

Appropriations, 2018	\$318,324,000
Budget estimate, 2019	317,274,000
Committee recommendation	317,274,000

COMMITTEE RECOMMENDATION

The Committee recommends \$317,274,000 for family housing operation and maintenance, Air Force, in fiscal year 2019. This amount is \$1,050,000 below the fiscal year 2018 enacted level and equal to the budget request.

FAMILY HOUSING OPERATION AND MAINTENANCE, DEFENSE-WIDE

Appropriations, 2018	\$59,169,000
Budget estimate, 2019	58,373,000
Committee recommendation	58,373,000

COMMITTEE RECOMMENDATION

The Committee recommends \$58,373,000 for family housing operation and maintenance, Defense-Wide, for fiscal year 2019. This amount is \$796,000 below the fiscal year 2018 enacted level and equal to the budget request.

DEPARTMENT OF DEFENSE FAMILY HOUSING IMPROVEMENT FUND

Appropriations, 2018	\$2,726,000
Budget estimate, 2019	1,653,000
Committee recommendation	1,653,000

PROGRAM DESCRIPTION

The Family Housing Improvement Fund appropriation provides for the Department of Defense to undertake housing initiatives and to provide an alternative means of acquiring and improving military family housing and supporting facilities. This account provides seed money for housing privatization initiatives.

COMMITTEE RECOMMENDATION

The Committee recommends \$1,653,000 for the Family Housing Improvement Fund in fiscal year 2019. This amount is \$1,073,000 below the fiscal year 2018 enacted level and equal to the budget request.

DEPARTMENT OF DEFENSE MILITARY UNACCOMPANIED HOUSING IMPROVEMENT FUND

Appropriations, 2018	\$623,000
Budget estimate, 2019	600,000
Committee recommendation	600,000

PROGRAM DESCRIPTION

The Military Unaccompanied Housing Improvement Fund appropriation provides for the Department of Defense to undertake housing initiatives and to provide an alternative means of acquiring and improving military unaccompanied housing and supporting facilities. This account provides seed money for housing privatization initiatives.

COMMITTEE RECOMMENDATION

The Committee recommends \$600,000 for the Military Unaccompanied Housing Improvement Fund in fiscal year 2019. This amount is \$23,000 below the fiscal year 2018 enacted level and equal to the budget request.

ADMINISTRATIVE PROVISIONS

Sec. 101. The Committee includes a provision that restricts payments under a cost-plus-a-fixed-fee contract for work, except in cases of contracts for environmental restoration at base closure sites.

Sec. 102. The Committee includes a provision that permits the use of funds for the hire of passenger motor vehicles.

Sec. 103. The Committee includes a provision that permits the use of funds for defense access roads.

Sec. 104. The Committee includes a provision that prohibits construction of new bases inside the continental United States for which specific appropriations have not been made.

Sec. 105. The Committee includes a provision that limits the use of funds for purchase of land or land easements.

Sec. 106. The Committee includes a provision that prohibits the use of funds to acquire land, prepare a site, or install utilities for any family housing except housing for which funds have been made available.

Sec. 107. The Committee includes a provision that limits the use of minor construction funds to transfer or relocate activities among installations.

Sec. 108. The Committee includes a provision that prohibits the procurement of steel unless American producers, fabricators, and manufacturers have been allowed to compete.

Sec. 109. The Committee includes a provision that prohibits payments of real property taxes in foreign nations.

Sec. 110. The Committee includes a provision that prohibits construction of new bases overseas without prior notification.

Sec. 111. The Committee includes a provision that establishes a threshold for American preference of \$500,000 relating to architect and engineering services for overseas projects.

Sec. 112. The Committee includes a provision that establishes preference for American contractors for military construction in the United States territories and possessions in the Pacific, and on Kwajalein Atoll, or in countries bordering the Arabian Gulf.

Sec. 113. The Committee includes a provision that requires notification of military exercises involving construction in excess of \$100,000.

Sec. 114. The Committee includes a provision that permits funds appropriated in prior years to be available for construction authorized during the current session of Congress.

Sec. 115. The Committee includes a provision that permits the use of expired or lapsed funds to pay the cost of supervision for any project being completed with lapsed funds.

Sec. 116. The Committee includes a provision that permits obligation of funds from more than 1 fiscal year to execute a construction project, provided that the total obligation for such project is consistent with the total amount appropriated for the project.

Sec. 117. The Committee includes a provision that permits the transfer of funds from Family Housing Construction accounts to the DOD Family Housing Improvement Fund and from Military Construction accounts to the DOD Military Unaccompanied Housing Improvement Fund.

Sec. 118. The Committee includes a provision that provides transfer authority to the Homeowners Assistance Fund.

Sec. 119. The Committee includes a provision that requires all acts making appropriations for military construction be the sole funding source of all operation and maintenance for family housing, including flag and general officer quarters, and limits the repair on flag and general officer quarters to \$35,000 per unit per year without prior notification to the congressional defense committees.

Sec. 120. The Committee includes a provision that provides authority to expend funds from the "Ford Island Improvement" account.

Sec. 121. The Committee includes a provision that allows the transfer of expired funds to the Foreign Currency Fluctuation, Construction, Defense Account.

Sec. 122. The Committee includes a provision that allows the reprogramming of military construction and family housing construction funds among projects and activities within the account in which they are funded.

Sec. 123. The Committee includes a provision that prohibits the use of funds in this title for planning and design and construction of projects at Arlington National Cemetery.

Sec. 124. The Committee includes a provision providing additional funds for unfunded military construction priorities.

Sec. 125. The Committee includes a provision rescinding unobligated balances from various Military Construction accounts.

Sec. 126. The Committee includes a provision defining the congressional defense committees.

Sec. 127. The Committee includes a provision prohibiting the use of funds in this title to close or realign Naval Station Guantanamo Bay, Cuba. The provision is intended to prevent the closure or transfer of the installation out of the possession of the United States, and maintain the Naval Station's long-standing regional security and migrant operations missions.

Sec. 128. The Committee includes a provision regarding the consolidation or relocation of a U.S. Air Force RED HORSE Squadron outside of the United States.

Sec. 129. The Committee includes a provision providing additional funding for Defense Access Roads.

Sec. 130. The Committee includes a provision directing all amounts appropriated to military construction accounts be immediately available and allotted for the full scope of authorized projects.

TITLE II
DEPARTMENT OF VETERANS AFFAIRS
ITEMS OF SPECIAL INTEREST
HEARINGS

The Subcommittee on Military Construction, Veterans Affairs, and Related Agencies held one hearing related to the fiscal year 2019 and 2020 Department of Veterans Affairs [VA] budget request. The subcommittee heard testimony from The Honorable Randy C. Reeves, Under Secretary for Memorial Affairs, National Cemetery Administration; The Honorable Jon J. Rychalski, Assistant Secretary for Management and Chief Financial Officer, Department of Veterans Affairs; Carolyn M. Clancy, M.D., Executive in Charge, Veterans Health Administration; and Mr. Thomas J. Murphy, Executive in Charge, Veterans Benefits Administration.

SUMMARY OF COMMITTEE RECOMMENDATIONS

The Committee recommendation includes \$195,569,404,000 for the Department of Veterans Affairs for fiscal year 2019, including \$109,120,059,000 in mandatory spending and \$86,449,345,000 in discretionary spending. The Committee also recommends \$75,550,600,000 in advance appropriations for veterans medical care for fiscal year 2020 and \$121,296,429,000 in advance appropriations for appropriated mandatories for fiscal year 2020.

DEPARTMENT OVERVIEW

The Veterans Administration was established on July 21, 1930, as an independent agency by Executive Order 5398, in accordance with the act of July 3, 1930 (46 Stat. 1016). This act authorized the President to consolidate and coordinate Federal agencies specially created for or concerned with the administration of laws providing benefits to veterans, including the Veterans' Bureau, the Bureau of Pensions, and the National Home for Disabled Volunteer Soldiers. On March 15, 1989, the Veterans Administration was elevated to Cabinet-level status as the Department of Veterans Affairs.

VA's mission is to serve America's veterans and their families as their principal advocate in ensuring they receive the care, support, and recognition they have earned in service to the Nation. As of September 30, 2017, there were an estimated 20 million living veterans, with 19.9 million of them residing in the United States and Puerto Rico. There were an estimated 23.5 million dependents (spouses and dependent children) of living veterans in the United States and Puerto Rico, and there were 579,000 survivors of deceased veterans receiving VA survivor benefits in the United States and Puerto Rico. Thus, approximately 44 million people, or 13.4

percent of the total estimated resident population of the United States and Puerto Rico, were recipients or potential recipients of veterans benefits from the Federal Government. VA's operating units include the Veterans Benefits Administration, Veterans Health Administration, National Cemetery Administration, and staff support offices.

The Veterans Benefits Administration [VBA] provides an integrated program of nonmedical veterans benefits. VBA administers a broad range of benefits to veterans and other eligible beneficiaries through 56 regional offices; three Pension Management Centers; six Fiduciary Hubs; three Educational Regional Processing Offices; eight Regional Loan Centers; one Insurance Center; eight National Call Centers; and a records processing center in St. Louis, Missouri. The benefits provided include: compensation for service-connected disabilities; pensions for wartime, needy, and totally disabled veterans; vocational rehabilitation assistance; educational and training assistance; home buying assistance; estate protection services for veterans under legal disability; information and assistance through personalized contacts; and six life insurance programs.

The Veterans Health Administration [VHA] develops, maintains, and operates a national healthcare delivery system for eligible veterans; carries out a program of education and training of healthcare personnel; conducts medical research and development; and furnishes health services to members of the Armed Forces during periods of war or national emergency. A system consisting of 145 VA Hospitals; 24 Health Care Centers [HCC]; 199 Multi-Specialty Community-Based outpatient clinics; 544 Primary Care Community-Based outpatient clinics; 294 Outpatient Services Sites; 134 community living centers; 120 domiciliary residential rehabilitation treatment programs [DRRTP]; 300 readjustment counseling vet centers; and 80 mobile vet centers is maintained to meet the VA's medical mission.

The National Cemetery Administration [NCA] provides for the interment of the remains of eligible deceased servicemembers and discharged veterans in any national cemetery with available grave space; permanently maintains these graves; provides headstones and markers for the graves of eligible persons in national and private cemeteries; administers the grant program for aid to States in establishing, expanding, or improving State veterans cemeteries; and provides certificates to families of deceased veterans recognizing their contributions and service to the Nation. In 2019, cemetery activities will encompass 139 national cemeteries (including four new national cemeteries), one national veterans' burial ground, and 33 soldiers' lots and monument sites.

Staff support offices include the Office of Inspector General, Boards of Contract Appeals and Veterans Appeals, and General Administration offices, which support the Secretary, Deputy Secretary, Under Secretary for Benefits, Under Secretary for Health, Under Secretary for Memorial Affairs, and General Counsel.

Aligning Veteran Benefits with Veteran Medical Care.—The Committee is concerned by reports that many veterans utilizing education benefits are not also registered for health benefits and are, therefore, not receiving adequate medical care for treatable condi-

tions such as mental health and musculoskeletal ailments. Given the impact that untreated psychological and physical ailments can have on educational success, the Department is directed to submit to the Committees on Appropriations of both Houses of Congress a report within 180 days of enactment of this act, detailing the number of veterans enrolled in education benefits but not medical benefits and any disparities in educational outcomes between veterans utilizing medical benefits as compared to those who are not.

Transitioning Servicemembers.—The ability of communities to build networks, including through public-private partnerships, to provide resources to servicemembers, veterans, and their families is critical for ensuring that transitioning service members and veterans have the support they need in their civilian lives. The Committee encourages the Department to provide support for such networked approaches, including through public-private partnerships.

Study and Measures to Address Regrettable Losses.—The Committee is concerned that VA has failed to follow-up on repeated recommendations of the Office of Inspector General to review data on regrettable losses and consider implementing measures to reduce such losses. Given the staffing demands on the Department and the challenges it faces in recruiting personnel, VA should work to retain those staff who could have remained with the Department but left. The Secretary should work expeditiously to better understand why personnel leave the Agency and work to mitigate such losses.

Contractor Accountability.—The Committee is concerned about the lack of transparency in the contract oversight process, as well as the lack of visibility into contractor performance. Whenever the Secretary provides notice to a contracted service provider that the service provider is failing to meet contractual obligations, VA must submit to the Appropriations Committees and the Committees on Veterans' Affairs of the Senate and the House of Representatives notification of such failure. At a minimum, the notification should include: (1) an explanation of the reasons for providing such notice; (2) a description of the effect of such failure, including with respect to cost, schedule, and requirements; (3) a description of the actions taken by the Secretary to mitigate such failure; and, (4) a description of the actions taken by the contractor to address such failure.

Contracting Fraud.—The Committee is concerned by continued incidents of willful misrepresentation of veteran or service-disabled veteran status for the purposes of winning Federal contract set-asides and believes that a more effective disincentive is required to prevent this fraudulent behavior, which harms legitimate veteran-owned and service-disabled veteran owned small businesses. The Committee encourages the Department, in consultation with relevant agency partners, to examine potential regulatory and legislative actions to more effectively prevent contracting fraud, including the possibility of expanding the current VA mandatory 5-year contracting debarment penalty to all Federal agencies.

Financial Hardship and Bankruptcy.—The Committee continues to support VA programs that combat the root causes of veteran and dependent financial hardship, which is a known contributory factor to negative outcomes such as mental health issues, substance use

disorder, and suicide. For example, disability-related benefits not only honor the service and sacrifice of the veterans who receive them, but also help to replace lost wages and provide a critical source of economic well-being. The Committee continues to be concerned by an inequity in current bankruptcy law that results in the inclusion of VA and DOD disability benefits in the calculation of a debtor's disposable income, while at the same time excluding Social Security disability benefits for non-veterans. The Committee hopes that this discrepancy between VA and Social Security disability benefits with regard to calculating a debtor's disposable income can be resolved in the near future.

Appeals Process.—The Committee directs the Secretary to ensure the Department is in full compliance with all requirements of the Veterans Appeals Improvement and Modernization Act of 2017 (Public Law 115–55). Additionally, the Committee urges the Department to fully implement the GAO's recommendations to better ensure the successful implementation of a new disability appeals process while attending to appeals in the current process.

Public Private Partnerships.—The Committee is aware of the need to expand the Department's research investment to leverage non-Federal initiatives which provide the opportunity for strong collocation of VA and university biomedical scientists for translational investigation which has high potential for precision medicine outcomes for wounded warriors and other high at risk veteran's populations. The Committee notes the high concentration of VA research enterprises on the Nation's two coasts. The Committee urges the Undersecretary for Health Affairs to expedite consideration of proposals for research complexes where there is multi-disciplinary investigation related to veterans and wounded warriors, including medicine, engineering and veterinary science. Such consideration should be timely to inform action in the fiscal year 2020 budget.

Improper Benefits.—The Department of Veterans Affairs [VA] currently uses the Social Security Administration's [SSA] Death Master File [DMF] as a tool for reducing improper benefits. Following a Government Accountability Office [GAO] report that highlighted the DMF did not always reflect the most current and accurate data, SSA began to take steps to address these shortcomings. The Committee encourages the Department to explore the utilization of commercially available sources for obtaining the most accurate and extensive deceased data resources to identify, validate, and document deceased veterans in order to prevent improper payment of benefits.

Security Risk Management.—The Committee understands the challenges associated with providing secure and accessible access to Department facilities. However, the Committee is concerned that the Department's current risk management policies are not sufficient to ensure medical facilities are adequately protected. The Department is urged to, in coordination with the Interagency Security Committee, review and revise its current risk management process, and develop an oversight strategy that allows the Department to properly assess risk management programs in all VHA facilities. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180

days after enactment of this act detailing the findings of its review and the steps taken to develop the oversight strategy.

Compensation Claims for Camp Lejeune Contaminated Water Veterans.—There is concern regarding the lack of consistency in the Department’s handling of disability compensation claims for veterans, former reservists, and former National Guard members who served at Marine Corps Base Camp Lejeune for no less than 30 days (consecutive or nonconsecutive) between August 1, 1953 and December 31, 1987. VA established a presumption of service connection for eight diseases associated with exposure to contaminants in the water supply at Camp Lejeune during that period. The Department made the decision to subject nonpresumptive Camp Lejeune Contaminated Water [CLCW] exposure claims to a higher level of scrutiny than is applied to other exposure claims and did so without providing notice or an opportunity for public comment. In addition, no other toxic exposure claims require a positive medical opinion to warrant service connection. The evidentiary burden VA requires for CLCW nonpresumptive exposure claims is significantly greater than the standard used for Agent Orange or any other exposure claims. Furthermore, there currently exists a wealth of “competent medical evidence” specific to diseases related to exposure to contaminated water at Camp Lejeune, as published by the Agency for Toxic Substances and Disease Registry [ATSDR], the Institute of Medicine [IoM], and other government sanctioned medical experts. Nevertheless, the Department’s same Clinical Subject Matter Experts, who provide medical opinions, have routinely rejected ATSDR and IoM’s findings without providing any justification or explanation for doing so.

The Department was directed to conduct a Special Focus Review for the CLCW claims process and submit the results of the review in the Explanatory Statement accompanying Public Law 115–141, the Consolidated Appropriations Act, 2018. The Committee looks forward to receiving this report in a timely manner.

Community Wellness Programs.—Public Law 115–141, the Consolidated Appropriations Act, 2018, established a 2-year program for VA to award grants to nonprofit Veterans Services Organizations [VSOs] to upgrade, through construction and repair, VSO community facilities into health and wellness centers, and to promote and expand complementary and integrative wellness programs. Complementary and integrative wellness programs are increasingly being recognized as useful adjuncts to meet the needs of veterans who have experienced trauma.

VETERANS BENEFITS ADMINISTRATION

Appropriations, 2018	\$107,038,649,000
Advance Appropriations, 2019	107,709,727,000
Budget estimate, 2019	4,481,437,000
Committee recommendation, 2019	4,568,858,000
Budget estimate, advance appropriations, 2020	121,296,429,000
Committee recommendation, advance appropriations, 2020	121,296,429,000

ADMINISTRATION OVERVIEW

The Veterans Benefits Administration is responsible for the payment of compensation and pension benefits to eligible service-con-

nected disabled veterans, as well as education benefits and housing loan guarantees.

COMMITTEE RECOMMENDATION

In fiscal year 2018, the Committee provided \$107,709,727,000 in advance appropriations for the Veterans Benefits Administration for fiscal year 2019. This included \$95,768,462,000 for Compensation and pensions; \$11,832,175,000 for Readjustment benefits; and \$109,090,000 for Veterans insurance and indemnities.

For fiscal year 2019, the Committee recommends an additional \$1,410,332,000 for Compensation and Pensions as requested by the administration. Additionally, the Committee recommendation includes \$200,612,000 for the Veterans Housing Benefit Program Fund administrative expenses; \$39,000 for the Vocational Rehabilitation Loans Program account, with \$396,000 for administrative expenses; \$1,163,000 for the Native American Veteran Housing Loan Program account; \$2,956,316,000 for General Operating Expenses, Veterans Benefits Administration account.

The Committee recommendation also provides \$121,296,429,000 in advance appropriations for the Veterans Benefits Administration’s mandatory accounts for fiscal year 2020.

COMPENSATION AND PENSIONS

(INCLUDING TRANSFER OF FUNDS)

Appropriations, 2018	\$90,119,449,000
Advance Appropriations, 2019	95,768,462,000
Budget estimate, 2019	1,410,332,000
Committee recommendation, 2019	1,410,332,000
Budget estimate, advance appropriations, 2020	107,119,807,000
Committee recommendation, advance appropriations, 2020	107,119,807,000

PROGRAM DESCRIPTION

Compensation is payable to living veterans who have suffered impairment of earning power from service-connected disabilities. The amount of compensation is based upon the impact of disabilities on a veteran’s earning capacity. Death compensation or dependency and indemnity compensation is payable to the surviving spouses and dependents of veterans whose deaths occur while on active duty or result from service-connected disabilities. A clothing allowance may also be provided for service-connected veterans who use a prosthetic or orthopedic device. In fiscal year 2019, the Department estimates it will obligate \$92,477,647,000 for payments to 4,850,289 veterans, 432,353 survivors, and 1,134 dependents receiving special benefits.

Pensions are an income security benefit payable to needy wartime veterans who are precluded from gainful employment due to nonservice-connected disabilities which render them permanently and totally disabled. Public Law 107–103, the Veterans Education and Benefits Expansion Act of 2001, restored the automatic presumption of permanent and total nonservice connected disability for purposes of awarding a pension to veterans age 65 and older, subject to the income limitations that apply to all pensioners. Death pensions are payable to needy surviving spouses and children of deceased wartime veterans. The rate payable for both dis-

ability and death pensions is determined on the basis of the annual income of the veteran or their survivors. In fiscal year 2019, the Department estimates that the Pensions program will provide benefits to 268,729 veterans and 199,972 survivors totaling \$5,560,719,000.

The Compensation and Pensions program funds certain burial benefits on behalf of eligible deceased veterans. These benefits provide the purchase and transportation costs for headstones and markers, graveliners, and pre-placed crypts; and provide partial reimbursement for privately purchased outer burial receptacles. In fiscal year 2019, the Department estimates the Compensation and Pensions program will obligate \$261,943,000 providing burial benefits. This funding will provide 62,184 burial allowances, 34,089 burial plot allowances, 44,609 service-connected death awards, 497,644 burial flags, 378,701 headstones or markers, 42,295 graveliners or reimbursement for privately purchased outer burial receptacles, and 310 caskets and urns for the internment of the remains of veterans without next of kin.

COMMITTEE RECOMMENDATION

In fiscal year 2018, the Committee provided an advance appropriation of \$95,768,462,000 for fiscal year 2019 for the Compensation and Pensions account. The Committee recommendation includes an additional \$1,410,332,000 for Compensation and Pensions as requested.

The Committee recommendation includes an advance appropriation of \$107,119,807,000 for Compensation and pensions for fiscal year 2020.

READJUSTMENT BENEFITS

Appropriations, 2018	\$13,708,648,000
Advance Appropriations, 2019	11,832,175,000
Budget estimate, advance appropriations, 2020	14,065,282,000
Committee recommendation, advance appropriations, 2020	14,065,282,000

PROGRAM DESCRIPTION

The Readjustment benefits appropriation finances the education and training of veterans and servicemembers under chapters 30, 31, 32, 33, 34, 35, 36, 37, 39, 41, 42 and 43 of title 38, United States Code. These benefits include the All-Volunteer Force Educational Assistance Program (Montgomery GI bill) and the Post 9/11 Educational Assistance Program. Basic benefits are funded through appropriations made to the readjustment benefits appropriation and by transfers from the Department of Defense. This account also finances vocational rehabilitation, specially adapted housing grants, specially adapted automobile grants for certain disabled veterans, and educational assistance allowances for eligible dependents of those veterans who died from service-connected causes or who have a total permanent service-connected disability, as well as dependents of servicemembers who were captured or missing in action.

COMMITTEE RECOMMENDATION

In fiscal year 2018, the Committee provided an advance appropriation of \$11,832,175,000 for the Readjustment Benefits account for fiscal year 2019.

The Committee recommendation includes an advance appropriation of \$14,065,282,000 for Readjustment benefits for fiscal year 2020.

VETERANS INSURANCE AND INDEMNITIES

Appropriations, 2018	\$120,338,000
Advance Appropriations, 2019	109,090,000
Budget estimate, advance appropriations, 2020	111,340,000
Committee recommendation, advance appropriations, 2020	111,340,000

PROGRAM DESCRIPTION

The Veterans insurance and indemnities appropriation consists of the former appropriations for military and naval insurance, applicable to World War I veterans; National Service Life Insurance, applicable to certain World War II veterans; servicemen’s indemnities, applicable to Korean conflict veterans; and veterans mortgage life insurance to individuals who have received a grant for specially adapted housing.

COMMITTEE RECOMMENDATION

In fiscal year 2018, the Committee provided an advance appropriation of \$109,090,000 for fiscal year 2019 for the Veterans Insurance and Indemnities account.

The Committee recommendation includes an advance appropriation of \$111,340,000 for Veterans insurance and indemnities for fiscal year 2020.

VETERANS HOUSING BENEFIT PROGRAM FUND

	Program account	Administrative expenses
Appropriations, 2018	\$178,626,000
Budget estimate, 2019	200,612,000
Committee recommendation	200,612,000

PROGRAM DESCRIPTION

The Veterans housing benefit program fund provides for all costs associated with VA’s direct and guaranteed housing loan programs, with the exception of the Native American veteran housing loan program.

VA loan guaranties are made to servicemembers, veterans, reservists, and unremarried surviving spouses for the purchase of homes, condominiums, and manufactured homes, and for refinancing loans. VA guarantees part of the total loan, permitting the purchaser to obtain a mortgage with a competitive interest rate, even without a downpayment, if the lender agrees. VA requires a downpayment be made for a manufactured home. With a VA guaranty, the lender is protected against loss up to the amount of the guaranty if the borrower fails to repay the loan.

COMMITTEE RECOMMENDATION

The Committee recommends such sums as may be necessary for funding subsidy payments, and \$200,612,000 for administrative expenses for fiscal year 2019. Bill language limits gross obligations for direct loans for specially adapted housing to \$500,000.

VOCATIONAL REHABILITATION LOANS PROGRAM ACCOUNT

	Program account	Administrative expenses
Appropriations, 2018	\$30,000	\$395,000
Budget estimate, 2019	39,000	396,000
Committee recommendation	39,000	396,000

PROGRAM DESCRIPTION

The Vocational Rehabilitation Loans Program account covers the cost of direct loans for vocational rehabilitation of eligible veterans and, in addition, includes administrative expenses necessary to carry out the direct loan program. Loans of up to \$1,235 (based on the indexed chapter 31 subsistence allowance rate) are currently available to service-connected disabled veterans enrolled in vocational rehabilitation programs, as provided under 38 U.S.C. chapter 31, when the veteran is temporarily in need of additional assistance. Repayment is made in monthly installments, without interest, through deductions from future payments of compensation, pension, subsistence allowance, educational assistance allowance, or retirement pay. Virtually all loans are repaid in full and most in less than one year.

COMMITTEE RECOMMENDATION

The Committee recommends \$39,000 for program costs and \$396,000 for administrative expenses for the Vocational Rehabilitation Loans Program account. The administrative expenses may be paid to the General Operating Expenses, Veterans Benefits Administration account. Bill language is included limiting program direct loans to \$2,037,366. It is estimated VA will make 2,039 loans in fiscal year 2019, with an average amount of \$999.

NATIVE AMERICAN VETERAN HOUSING LOAN PROGRAM ACCOUNT

Appropriations, 2018	\$1,163,000
Budget estimate, 2019	1,149,000
Committee recommendation	1,163,000

PROGRAM DESCRIPTION

The Native American veteran housing loan program is authorized by 38 U.S.C. chapter 37, section 3761 to provide direct loans to Native American veterans living on trust lands. The loans are available to purchase, construct, or improve homes to be occupied as veteran residences or to refinance a loan previously made under this program in order to lower the interest rate. The principal amount of a loan under this authority generally may not exceed \$424,100; however, in some locations, this limit may be higher depending on median area home prices. Veterans pay a funding fee of 1.25 percent of the loan amount, although veterans with a serv-

ice-connected disability are exempt from paying the fee. Before a direct loan can be made, the veteran’s tribal organization must sign a memorandum of understanding with VA regarding the terms and conditions of the loan. The Native American Veteran Housing Loan Program began as a pilot program in 1993 and was made permanent by Public Law 109–233, the Veterans Housing Opportunity and Benefits Act of 2006.

COMMITTEE RECOMMENDATION

The Committee recommends \$1,163,000 for administrative expenses associated with this program. This is equal to the fiscal year 2018 enacted level and \$14,000 more than the budget request.

GENERAL OPERATING EXPENSES, VETERANS BENEFITS
ADMINISTRATION

Appropriations, 2018	\$2,910,000,000
Budget estimate, 2019	2,868,909,000
Committee recommendation	2,956,316,000

PROGRAM DESCRIPTION

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

COMMITTEE RECOMMENDATION

The Committee recommends \$2,956,316,000 for the General Operating Expenses, Veterans Benefits Administration account, which is \$46,316,000 above the fiscal year 2018 enacted level and \$87,407,000 above the budget request. The Committee has included bill language to make available through September 30, 2020, up to 10 percent of the General Operating Expenses, Veterans Benefits Administration account.

Disability Claims Processing.—The Committee has not only fully funded the budget request for claims processing in recent years, but has provided increases above the budget requests for hiring and training claims processors, bolstering the migration to electronic claims processing systems, and addressing the increasing backlog of appeals at the Board of Veterans Appeals. The Committee expects for the Department to utilize these resources effectively to not only protect against a recurrence of a sizable disability backlog, but to also ensure that proper staffing and resources are being utilized to reduce the wait time and backlog of disability decisions on appeal and to meet the demand for other benefit programs. To that end, the Committee recommends an additional \$87,407,000 for VBA, GOE to hire additional claims and appellate staff, as well as to increase staff for the Vocational Rehabilitation and Employment Program. The VBA may also use these resources to support increased resources for the Veterans Claims Intake Program [VCIP] to scan and convert paper files into digital records. The Committee will continue to require the Department to provide monthly updates on performance measures for each Regional Office.

Education Benefits.—The Committee is concerned about the levels of overpayments and improper payments being paid to GI Bill beneficiaries. The Committee directs VA to work with education stakeholders to ensure that veteran educational benefits are paid in a timely and accurate manner and that efforts to recoup any overpayments or improper payments is done fairly and in a manner that is not overly burdensome on student veterans and their families. The Committee further directs VA, in collaboration with the Department of Defense and Department of Education, to provide an interagency report on the development and continued implementation of the Principles of Excellence, oversight of institutions complying with the Principles, and appropriate and timely accountability measures for educational programs receiving Federal funding. Lastly, the Committee directs VA to continue to reform the compliance survey process to allow early detection of fraudulent marketing or predatory recruiting practices among institutions of higher learning and to codify a set of tools that is sufficiently agile enough to curtail the behavior of scamming institutions that are wasting the VA education benefits of service members and their families.

Education Data Collection and Sharing.—The Committee believes that both students and VA should be able to make more evidence-based decisions when it comes to veterans' education. The Committee directs VA to work with the Department of Education and Department of Defense to ensure that there is a comprehensive database or at a minimum, a set of data-sharing agreements in place between Federal entities involved in the administration of Federal resources related to veteran educational attainment. The Committee further directs VA, in collaboration with the Department of Education and Department of Defense, to provide an interagency report on data-sharing priorities, the development and implementation of subsequent data-sharing agreements, and the uses and effectiveness of the data shared.

Gulf War Veterans Claims for Service-Connected Disability Compensation.—The Committee continues to be concerned by the Department's high rates of denial of Gulf War veterans' claims for undiagnosed illnesses and chronic multi-symptom illnesses. The Committee notes that according to the most recent VA data, 44 percent of Gulf War veterans develop Gulf War illness, but only 26 percent receive benefits. The Committee also notes that according to a 2016 GAO study, VA is still only approving 17 percent of Gulf War illness claims. To improve the accuracy and fairness of claims evaluation, the Committee directs the Department to adopt a single Disability Benefits Questionnaire [DBQ] for Gulf War illness. The Department is directed to submit to Committees on Appropriations of both Houses of Congress a report explaining the reasons for the high denial rate of claims, the Department's actions to increase the number of approved claims, the Department's efforts to ensure claims adjudicators are trained and held accountable for consistently following the Compensation and Pension manual, and the Department's timeline for finalizing the required DBQ.

Medical Disability Exams.—The Committee is concerned by recent reports indicating that contract physicians with revoked medical licenses have been performing medical disability examinations

on behalf of the Department. Consistent with statute, the Committee directs the Department to ensure that any non-VA physician contracted to conduct medical disability examinations must have a current unrestricted license to practice as a physician, and is not barred from practicing in any State, the District of Columbia, or a Commonwealth, Territory, or possession of the United States.

VETERANS HEALTH ADMINISTRATION

Appropriations, 2018 ¹	\$70,296,454,000
Advance appropriations, 2019	70,699,313,000
Budget estimate, 2019 ²	3,127,369,000
Committee recommendation, 2019	2,740,000,000
Budget estimate, advance appropriations, 2020	75,550,600,000
Committee recommendation, advance appropriations, 2020	75,550,600,000

¹Total excludes \$89,392,000 in emergency funding provided in Public Law 115–123, the Further Additional Supplemental Appropriations for Disaster Relief Requirements Act, 2018.

²Total includes \$1,900,000,000 requested in discretionary funding for the Mandatory Choice Program.

ADMINISTRATION OVERVIEW

The Veterans Health Administration [VHA] is home to the United States’ largest integrated healthcare system consisting of 145 VA Hospitals; 24 Health Care Centers [HCC]; 199 Multi-Specialty Community-Based outpatient clinics; 544 Primary Care Community-Based outpatient clinics; 294 Outpatient Services Sites; 134 community living centers; 120 domiciliary residential rehabilitation treatment programs [DRRTP]; 300 readjustment counseling vet centers; and 80 mobile vet centers.

The Department of Veterans Affairs Medical Care Collections Fund [MCCF] was established by the Balanced Budget Act of 1997 (Public Law 105–33). In fiscal year 2004, Public Law 108–199 allowed the Department to deposit first-party and pharmaceutical co-payments, third-party insurance payments and enhanced-use collections, long-term care co-payments, Compensated Work Therapy Program collections, Compensation and Pension Living Expenses Program collections, and Parking Program fees into the MCCF.

The Parking Program provides funds for the construction, alteration, and acquisition (by purchase or lease) of parking garages at VA medical facilities authorized by 38 U.S.C. 8109. The Secretary is required under certain circumstances to establish and collect fees for the use of such garages and parking facilities. Receipts from the parking fees are to be deposited into the MCCF and are used for medical services activities.

COMMITTEE RECOMMENDATION

In fiscal year 2018, the Committee provided \$70,699,313,000 in advance appropriations for VA’s medical care accounts for fiscal year 2019. This included \$49,161,165,000 for Medical services, \$8,384,704,000 for Medical community care, \$7,239,156,000 for Medical support and compliance, and \$5,914,288,000 for Medical facilities. The Committee also includes an Administrative Provision allowing the Department to carry forward into fiscal year 2019 certain amounts provided as an advance for fiscal year 2018.

For fiscal year 2019, the Committee recommends an additional \$750,000,000 for Medical services, \$1,000,000,000 for Medical com-

munity care, and \$211,000,000 for Medical facilities. Additionally, the Committee recommendation includes \$779,000,000 for Medical and prosthetic research. Medical care collections are expected to be \$3,590,000,000. The Committee recommendation also provides \$75,550,600,000 in advance appropriations for VA's medical care accounts for fiscal year 2020.

Allocations.—At the beginning of fiscal year 2018, without public notice, the Department considered fundamentally changing the manner in which Medical Service allocations were made to the Veterans Integrated Service Networks. Specifically, consideration was being given to converting almost \$1,000,000,000 of Specific Purpose funding to General Purpose funding. After consultation with Congress regarding the unknown and potentially serious impacts the conversion could have to programs, such as the successful Housing and Urban Development–Veterans Affairs Supportive Services program, the Department ceased implementation and determined that conversion to General Purpose funding would not go forward in fiscal year 2018. In the Explanatory Statement accompanying Public Law 115–141, the Consolidated Appropriations Act of 2018, the Department was directed to consult with the Committees on Appropriations and the Committees on Veterans Affairs of both Houses of Congress before any future attempts are made to realign these funds and to propose such proposals in an annual budget submission. The Committee notes, that no such consultation has occurred and that the fiscal year 2019 budget submission did not reflect any conversion of funding. Therefore, the Committee directs that the Department not convert any Special Purpose funding to General Purpose funding in fiscal year 2019.

Cross Government Credentialing of VA Healthcare Providers.—In order to better facilitate active recruitment of individuals who served in the healthcare field for the U.S. Armed Forces or while on duty with the U.S. Coast Guard, the Committee directs VA to establish coordinating relationships with the appropriate personnel divisions dealing with separating military personnel at the Departments of Defense and Homeland Security. As part of this coordination, the Department shall determine whether establishing a formal system for receiving advanced notice of separating members of the armed forces is feasible. The Committee further directs VHA to conduct an internal audit of its procedures for the recredentialing of providers when transferring within the VHA system. The Committee directs VHA to institute such policies and procedures to ensure the speedy and timely transfer of licensed personnel between facilities and to remove the unnecessary barrier of recredentialing triggered solely by a provider transferring facilities.

National Intrepid Center of Excellence Satellite Strategic Basing.—The Committee recognizes the value of the National Intrepid Center of Excellence [NICoE] at Walter Reed National Military Center as a global leader in traumatic brain injury [TBI] care, research and education. In recent years, the NICoE has broadened its reach to service members and families by establishing a successful model of satellite centers, known as Intrepid Spirit Centers, which are located in highly populated military and defense communities. The Committee believes the Departments of Defense and Veterans Affairs can benefit from a similar model and joint project to serve

both the active and veteran populations in support of complementary and comprehensive recovery from the effects of TBI. The Committee directs the Departments to study the value and merit to establishing a joint DOD/VA, NICoE Intrepid Spirit Center that serves both the active duty and veteran populations for the mutual benefit and growth in treatment and care. The study will be reported to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act, and include inputs from NICoE personnel and analysis regarding localities in geographically rural areas that may have existing DOD medical facilities that partner with the VA, academic institutions specializing in neurology and are distant from existing or planned NICoE satellite locations.

Unmet Healthcare Benefits Concerning Veterans in the Commonwealth of the Northern Mariana Islands, American Samoa, Guam, and Freely Associated States.—The Committee recognizes the challenges for veterans residing in the Commonwealth of the Northern Mariana Islands, American Samoa, Guam, and the Freely Associated States to access quality healthcare and is interested in exploring options to improve access and reduce overall costs. The Committee directs the Government Accountability Office to conduct a comparative analysis of delivering care to these veterans through the Department of Veterans Affairs Pacific Islands Health Care System [VAPIHCS] versus foreign medical facilities nearby, including the Philippines, Western Samoa, and New Zealand. The report should review the costs of providing care for these veterans, including travel and lodging costs in Hawaii and Guam; the medical outcomes and financial and psychological impacts of such referrals; and how veterans from other Pacific areas may reduce access to care for veterans residing in Hawaii. The report should also examine whether there is or needs to be existing administrative or legislative authority authorizing veteran care at foreign medical facilities.

In addition, as VA works to transform its Community Care programs, the Committee directs the Secretary to provide the Committees on Appropriations of both Houses of Congress with a strategic plan to implement and improve the utilization of healthcare services for veterans in outlying areas through piloting the expansion of health services via telehealth or other community care providers within 180 days of enactment of this act. The plan should include an assessment of the number of veterans residing in outlying areas who have utilized services in the VAPIHCS facilities over the last three fiscal years and an average estimated cost for these veterans to access VA care; the estimated costs for providing telehealth services in outlying areas through a pilot program; identification of statutory authorities which may impede the necessary steps to implement such a plan and; recommendations for how VA can reduce burdensome restrictions under the Foreign Medical Program under its existing authorities.

Furthermore, the Committee encourages the Department of Veterans Affairs to work with Federal and non-Federal partners, including the Departments of Defense, Interior, and Health and Human Services, non-VA healthcare facilities, and educational in-

stitutions to leverage shared resources and improve access for delivery of care through collaboration.

Prompt Payment.—The Committee remains committed to supporting VA's efforts to ensure timely reimbursement for non-VA healthcare providers and facilities that provide necessary care for our veterans. As VA plans to award new Community Care Network contracts in 2018, the Committee encourages the Department to provide stronger oversight and improve timely payment to non-VA providers. The Committee also urges VA to facilitate the completion of all outstanding reimbursement as promptly as possible.

Veterans Integrated Service Networks.—The Committee is aware that the Department intends to develop a plan to reorganize several regional Veterans Integrated Services Network [VISNs]. As the Department develops this reorganization plan, the Committee urges the Department to consider realignment strategies that keep whole States within the same VISN.

Critical Need Occupations Staffing Model.—It is critical that the Veterans Health Administration develop a staffing model so that it can better understand, and more quickly address, its staffing needs in critical need occupations. The Committee remains concerned that after nearly 2 years, VA has failed to follow-up on repeated recommendations of the Office of Inspector General [OIG] regarding the development of staffing models for critical need occupations, as well as set forth milestones and a timetable for further critical need occupations' staffing model development. The Committee recognizes that the Department has put forward some effort to move forward the process for creating a staffing model, but is disappointed with the pace. As such, the Committee directs VA to accelerate the creation of such a model so that veterans have access to the care they need.

VHA Corporate Planning & Market Survey Functions.—Various documents published by VHA, such as the Blueprint for Excellence and the fiscal year 2016 Annual Restoring Trust in Veterans Health Care Report, recognize the need for creating a high-performing, integrated health network that includes VHA providers and facilities, other federally funded providers and facilities, and VHA-credentialed community providers and facilities. To date, VA has not articulated an overarching strategy to achieve such a goal, does not provide metrics to show progress towards achieving stated goals, and has no structure to identify accountable senior officials for such an effort. Further, the Department's efforts in this area have been stymied by litigation, leading to further delays. The Committee recognizes that the complex and transformative nature of creating a system capable of serving veterans in the future requires direct and sustained VHA leadership involvement. To achieve this goal, the Committee directs VHA to form a corporate planning function patterned after high performing commercial health care delivery systems. Such function must include representation from VHA clinical leadership, and leaders from VHA offices that control, oversee, or manage facility investments, transition, facility operations, and organizational change, as well as the appropriate VA offices that are dedicated to the planning and procurement of capital infrastructure, whether built or leased by VA. The corporate planning function shall be responsible for planning and

implementing a high performing, integrated health network. The Department shall report to Congress no later than 180 days after enactment of this act detailing the corporate planning function and a plan to achieve a high-performing, integrated health network for the next 20 years. At a minimum, the plan shall clearly articulate VA's vision of a future network, include goals VA is working towards to achieve the vision, Key Performance Indicators and other metrics VA will use to judge success, and an organizational chart detailing the corporate planning function's direct reporting relationship to the Under Secretary of Health. The Committee recommends VA seek objective analysis and recommendations from organizations outside VA that have successfully created, implemented, or advised corporate planning functions at high-performing community health care systems. The Committee recommends VHA seek guidance from the leadership of the Department of Defense's Military Health System Facility Shared Service. Additionally, the Committee understands that VHA is now conducting market surveys to examine how VHA can develop a high-performing network by looking at community health care supplies and VHA services and capabilities. The Committee directs VHA to report back the findings of these market surveys within 180 days of the completion of the surveys.

Healthcare Fraud Prevention.—The Committee directs VA to evaluate the feasibility and advisability of utilizing health care fraud prevention initiatives to evaluate payments made to private sector providers and third party administrators to detect and prevent fraudulent billing by collecting data that evaluates trends, recognizes patterns consistent with potential fraud, and potentially uncover schemes or bad actors the Agency could not otherwise identify using only its own information.

Retrofitting Facilities to Eliminate Barriers to Care for Women Veterans.—The Committee is concerned about VA's lack of progress in addressing privacy and environment of care issues for women veterans, as highlighted in a 2016 GAO report. Therefore, not later than 180 days after enactment, the Committee directs VA to submit a report to the Committees on Appropriations and the Committees on Veterans Affairs of both Houses of Congress on the expenditures, including fixtures, materials, and other outfitting measures funded by major construction, minor construction, non-recurring maintenance, or other facilities accounts that provide for and enhance the privacy and environment of care for women veterans being treated. The report should further include a plan to address deficiencies in the environment of care for women veterans that serve as barriers to accessing the care that they have earned.

MEDICAL SERVICES

(INCLUDING TRANSFER OF FUNDS)

Appropriations, 2018 ¹	\$46,849,538,000
Advance appropriations, 2019	49,161,165,000
Budget estimate, 2019 .....	.....
Committee recommendation, 2019	750,000,000
Budget estimate, advance appropriations, 2020	48,747,988,000
Committee recommendations, advance appropriations, 2020	51,411,165,000

¹ Total excludes \$11,075,000 in emergency funding provided in Public Law 115-123, the Further Additional Supplemental Appropriations for Disaster Relief Requirements Act, 2018.

PROGRAM DESCRIPTION

The Medical Services account provides for medical services for eligible enrolled veterans and other beneficiaries in VA healthcare facilities, including VA medical centers and VA outpatient clinics.

COMMITTEE RECOMMENDATION

In fiscal year 2018, the Committee provided an advance appropriation of \$49,161,165,000 for fiscal year 2019 for the Medical Services account. The recommendation for fiscal year 2019 includes an additional \$750,000,000 which is \$750,000,000 above the budget request. The additional appropriation coupled with the advance appropriation provided for fiscal year 2019 provides the Department with total budget authority of \$49,911,165,000 which is \$3,061,627,000 above the fiscal year 2018 enacted amount. In addition, VA has the authority to retain co-payments and third-party collections, estimated to total \$3,590,000,000 in fiscal year 2019.

The Committee recommendation also includes an advance appropriation of \$51,411,165,000 for Medical services for fiscal year 2020. This is \$2,663,177,000 above the budget request. The Administration's budget proposed to consolidate the Medical Community Care account with the Medical Services account. The Medical Services account is used primarily for in-house VA medical care, while the Medical Community Care account funds non-VA care. The proposed consolidation of these accounts blurs the ability to readily identify how VA is executing funding between in-house care and non-VA care. However, according to the crosswalks contained in the justifications accompanying the budget submission, VA intended on allocating \$14,419,786,000 to community care programs with the remaining \$48,747,988,000 being utilized on traditional in-house VA care. This represented a proposed \$413,177,000 reduction for services provided under the current Medical Services account. In order to continue to provide proper budgetary oversight of these two important functions, the Committee recommendation rejects the consolidation of these two accounts and adjusts the fiscal year 2020 advance appropriation for this account to better reflect current utilization rates.

PREVENTING VETERANS HOMELESSNESS

The Committee remains strongly supportive of VA's homeless prevention programs and as such the recommendation includes \$1,888,534,000 to support these programs. This total includes an additional \$130,000,000 over the current estimate of \$320,000,000

for the Supportive Services for Veterans Families [SSVF] program and an additional \$5,000,000 over the request for the Justice Outreach Homeless Prevention program.

Limited Affordable Housing.—The Committee supports the continued efforts of the Department to shelter homeless veterans by providing case management services, housing grant assistance and access to low and no income housing opportunities, through programs such as the SSVF and HUD–VASH voucher programs. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act on the impacts of limited affordable housing opportunities on Department homelessness programs in rural communities and recommendations on how the Department may better partner with local housing entities to ensure rural access to housing services.

In addition, the lack of affordable housing in many urban areas hindered efforts to reduce the homeless veterans population. Therefore, as part of the report, the Committee directs VA to include a section addressing the feasibility of piloting a demonstration through one of its existing programs to provide housing and supportive services to homeless veterans in high cost urban areas.

Veterans Justice Outreach Program.—The goal of the Veterans Justice Outreach Program [VJO], authorized by section 2022 of title 38, United States Code, is to prevent homelessness, and avoid the unnecessary criminalization of mental illness and extended incarceration among veterans. This is accomplished by ensuring that eligible veterans encountered by police, and in jails or courts, have timely access to VA services including: mental health, substance abuse, and homeless programs. In 2017, the VJO program provided services to over 46,500 justice-involved veterans, supported 461 Veterans Treatment Courts and other veteran-focused court programs, and partnered with legal providers to offer 158 pro-bono legal clinics to veterans on site at local VA hospitals. In order to assist in the success of this program, the Committee recommendation includes an additional \$5,000,000 over the budget request for this program.

Collaboration for Grant Per Diem Mix of Housing Services.—The Committee agrees with the goal of ending veteran homelessness by ensuring veterans' access to permanent, affordable housing of their choice. However, the Committee recognizes that service-intensive transitional housing provided through the VA's Grant Per Diem Program [GPD] is an important programmatic option, particularly in areas with low vacancy rates, limited housing stock, and high market rates, and that substance-free and service-intensive housing may be a critical step for veterans at risk of relapse into substance abuse. The most appropriate mix of housing services for veterans should be determined through a collaborative process including local housing partners, service providers, and the Department of Veterans Affairs. The Department should continue to make funding available for GPD beds based on a collaborative process with the local VA Medical Centers and the Continuums of Care. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act on the contingency and remediation

plan for veterans impacted by changes in availability or losses of awards of Grant Per Diem Program funds for current providers that serve rural or highly rural areas that would result in the loss of veterans' access to transitional housing assistance.

Veteran Homelessness in the Greater Los Angeles Region.—The Committee is concerned by reports that the population of veterans in Los Angeles experiencing homeless on any given night increased by 57 percent between from 2016 and 2017 from 3,071 to 4,828. Given the increasing homeless population, in many areas including the Greater Los Angeles Region, the Committee urges the Department to ensure that additional case management personnel and resources are being deployed to meet the recommended 25–1 case management staffing ratio. Within 30 days of enactment of this act, the Department shall provide to the Committees on Appropriations of both Houses of Congress a report outlining the cost and feasibility of contracting with local community-based agencies and non-profit organizations to provide additional case management services in regions where the Department does not meet its own case management ratio goals.

Further, in order to better inform the Committee regarding HUD–VASH case management, not later than 120 days after enactment of this act, the Secretary shall submit to the Committees on Appropriations of both Houses of Congress a report that details the current ratio of HUD–VASH case managers to veterans serviced; steps taken to recruit and retain case managers for this program; a list of VA Medical Centers where HUD–VASH cases are being contracted out; and, efforts currently underway to assist HUD–VASH case management in highly rural areas.

TELEHEALTH SERVICES

The Committee recommendation includes an additional \$30,000,000 to expand VA's telehealth capabilities. The Department of Veterans Affairs along with the Department of Defense have long been leaders in the field of emerging technology and medicine. For VA, telehealth creates a bridge between rural and urban centers—providers at an urban site can diagnose and provide a care plan for veterans hundreds of miles away, allowing, VA to expand the resources of one facility by connecting those providers to providers in another area. Through telehealth, the Department has the means and flexibility to provide care to veterans who do not have easy access to a VA hospital or access to a VA hospital staffed with the care they need.

Telehealth is not only allowing the Department to expand access to care in areas where services are limited, but telehealth also allows care to be provided more effectively and efficiently for veterans closer to home and also through direct in-home access. While VA is once again leading the healthcare industry in the expansion of in-home telehealth and remote patient monitoring services, these services are often limited by the lack of broadband service in remote and rural areas. In order to better leverage other Federal partners, the Department is directed to provide a report to the Committee on Appropriations of both Houses of Congress by January 31, 2019, regarding ongoing collaborations VA has with other Federal agencies in targeting remote and rural areas with veteran

populations in order to ensure that grant programs administered by other Federal agencies maximize coverage areas to veterans.

The Committee is also aware telehealth has a potential for significant cost savings and cost avoidance for the Department, and the Department is urged to maintain its focus on this type of care, not only to better serve veterans, but also to be a good steward of its financial resources. In order to ensure cost effectiveness and faster deployment of telehealth platforms, the Committee urges the Department to take advantage of commercial-off-the-shelf technology solutions when appropriate.

MENTAL HEALTH/PREVENTING VETERANS SUICIDE

National Center for Post-Traumatic Stress Disorder.—The National Center for Post-Traumatic Stress Disorder [NCPTSD] is the Federal Government's foremost center of expertise on evidence-based treatment of post-traumatic stress. The Committee continues to support the mission and work of the NCPTSD and has provided \$40,000,000 to continue the center's advancement of the clinical care and social welfare of America's veterans who have experienced trauma or suffer from PTSD through research, education, and training in the science, diagnosis, and treatment of PTSD and stress-related disorders. The Committee supports the priorities for NCPTSD as described in the Congressional budget submission, and directs the Department to provide an assessment of the additional full time staff needed to carry out those priorities, as well as a hiring plan. Additionally, no later than 30 days after enactment of this act, the Department is directed to submit to the Committees on Appropriations of both Houses of Congress its plan for ensuring that all community care mental health providers receive information about NCPTSD and its consultation program.

PTSD Treatment at VA Facilities.—Advances in evidenced-based clinical treatments stemming from recent brain research have significantly increased the ability to treat veterans experiencing post-traumatic stress. However, the availability of all levels of care remains inconsistent throughout the VA system. Therefore, no later than 180 days after enactment of this act, the Department is directed to submit to the Committees on Appropriations of both Houses of Congress an itemized cost estimate for the establishment of specialized out-patient PTSD programs, specialized intensive PTSD programs, and residential PTSD treatment program at every level two or above VA facility.

Mental Health Staffing.—The Committee recognizes the importance of maintaining the appropriate number of mental health staff members at the Department of Veterans Affairs to provide veterans timely, effective, high-quality care. Therefore, the Committee urges the Department of Veterans Affairs to sufficiently fund its Mental Health Hiring Initiative in order to reach the recommended staffing ratio of 7.72 mental health outpatient staff to 1,000 veterans. Although the Committee is aware that the Department of Veterans Affairs currently seeks to increase the number of mental healthcare providers by 1,000 staff members. The Department is directed to keep the Committee apprised on a quarterly basis on meeting its hiring goals.

Suicide Prevention.—The Committee recognizes that preventing suicide among the veteran population requires a comprehensive and consistent effort to enhance the quality, continuity, and integration of mental healthcare. The Committee commends the Department for strengthening its focus on suicide prevention and urges the Department to increase support for primary care-mental health integration and recovery models, expand telemental health services, build on the success of evidence-based psychotherapy initiatives, and guide treatment decisions by measuring the outcomes of interventions. Additionally, the Committee recommends VHA develop a veterans suicide prevention strategy that is focused on preventing suicide by increasing focus on “upstream” prevention based interventions in order to more appropriately target interventions with veterans before they are at a crisis point. Interventions should be data-driven and executed in general areas of large veteran populations in the community as well as populations of at-risk veterans. The new strategy should include training for all VA employees who interact with veterans, not only those in the medical community, including chaplains, attorneys, law enforcement, and volunteers. The Department should also engage non-VA sectors such as employers, first responders, and the healthcare industry to ensure that all sectors are working across systems for suicide prevention.

Sleep Disorders.—The Committee recognizes the importance of sleep, including its impacts on PTSD, traumatic brain injury, and mental health. The Committee supports VA considering all treatment options for these conditions, including ensuring proper sleep health. The Committee continues to recommend the Department assign a program manager for sleep disorders, including sleep apnea, that affect at least 200,000 veterans of the Persian Gulf War and Operations Iraqi Freedom and Enduring Freedom. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this act on the status of this recommendation.

Trauma Management.—The Committee encourages the Secretary to consider establishing a Trauma Management Therapy pilot program utilizing exposure therapy involving virtual reality in combination with group therapy for the treatment of individuals with symptoms relating to PTSD. The Secretary shall submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act detailing the feasibility of such a pilot program and the metrics required to determine the value of exposure therapy in treating PTSD.

Mental Health/Suicide Prevention Best Practice Review.—The Committee is concerned that despite significant focus, addition of new programs, and increased funding, veterans suicide statistics are not changing. The Committee supports the Department’s Research efforts to synthesize information about successful practices and initiatives across the Department, and would like this effort to be expanded. As such, the Committee directs the Department to provide a report to the Committees on Appropriations of both Houses of Congress within 90 days after enactment, including:

- A complete list of all current and planned mental health and suicide prevention programs available to veterans within the VA and through community partnerships;

- For each program, the annual amount of funding and number of veterans served;
- The number of veterans receiving treatment in each program who ultimately committed suicide;
- The metrics used by the Department to track the efficacy of its mental health programs, including how those metrics are tracked longitudinally;
- Recommendations for additional metrics for VHA to better measure the efficacy of each mental health program;
- The impacts of local mental health and suicide prevention programs in rural communities; and
- Recommendations on how the Department may better partner with local communities to ensure rural access to mental health and suicide prevention programs.

Further, if the VA does not have a Veterans Suicide Coordinator, the Committee directs the establishment of the roll. That position will be responsible for tracking metrics on suicides among veterans, annually reporting trends, and providing feedback to VHA that can be used to adjust programming for veterans' mental health and suicide prevention to ensure funds are going to the most effective programs.

OPIOID REDUCTION AND SAFETY INITIATIVES

To continue to build upon opioid reduction efforts and safety initiatives, Committee recommendation includes \$400,025,000 for Opioid Prevention and Treatment programs at the VA. This includes \$348,000,000 for prevention and treatment programs, \$18,000,000 above the budget request and \$52,025,000 to continue implementation of the Comprehensive Addiction and Recovery Act of 2016. The additional resources are to be used to strengthen VA's Opioid Safety Initiative as well as to develop programs aimed at ensuring that non-VA providers treating veterans through the community care programs are informed and in compliance with all VA standards for opioid safety and prescription guidelines.

Office of Patient Advocate.—The Committee urges the Department to prioritize continued implementation of the reforms made to the patient advocacy program as required by the Jason Simcakoski Memorial and Promise Act (Title IX, Public Law 114–198). The Committee believes that the law's establishment of the Office of Patient Advocacy will ensure that patient advocates are independent of local facility management, truly work on behalf of veterans, and are properly trained according to national standards. Accordingly, within 30 days of enactment, the Committee directs VA to provide a report on its progress implementing the relevant sections of Public Law 114–198, including progress on patient advocate training at each VAMC and any outstanding recommendations included in the Inspector General's March 2017 audit of the patient advocacy program's fiscal year 2015 operations [VA OIG 15–05379–146].

Improvement of Opioid Safety Initiative.—The Committee supports VA's Opioid Safety Initiative [OSI] and encourages continued implementation at all VA medical facilities, as directed under Title IX of Public Law 114–198, the Jason Simcakoski Memorial and Promise Act. The Committee believes that it is imperative that all

VA providers who prescribe opioids continue to consistently use the Opioid Therapy Risk Report tool under the OSI, including prior to initiating opioid therapy, to ensure safe prescribing, and to help prevent diversion, abuse, and double-prescribing. Under Public Law 114–198, the Department must continue implementation of mandatory use of such tool for all providers prior to initiating opioid therapy for a patient to assess the risk for adverse outcomes; routine and random drug tests standards; provider use of the tool to access the State Prescription Drug Monitoring Program [PDMP]; and inclusion of information identifying when health care providers access the tool and the most recent urine drug test for each veteran. The Committee also urges VA to further improve the timeliness of data available in the tool to allow a provider to have real-time access to data on a patient who was prescribed opioid therapy by another facility, in another State, or by mail order to prevent overprescribing and abuse potential. Public Law 114–198 requires the Department to ensure VA providers can access information in the State PDMP including by seeking to enter into memoranda of understanding with States to allow shared access of such information between VA and the States. This is critical to ensure safe pain management care, as many veterans also seek care from providers in the community who may prescribe them medication. The Department must also include such information in the Opioid Therapy Risk Report tool and require VA providers to disclose certain veteran information to State controlled substance or PDMPs. The Department is directed to submit an updated report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act assessing compliance with mandatory provider use of the tool and utilization of and reporting to State PDMPs. The report must also include an assessment of the feasibility of improving the tool to allow for real-time tracking and feasibility of implementing an indication for use linked to opioid prescriptions in the tool to support oversight of safe opioid prescribing.

Opioid Therapy Clinical Practice Guidelines and Training.—The Committee believes that continued and robust implementation and dissemination of the updated 2017 VA/DoD Clinical Practice Guideline [CPG] for Management of Opioid Therapy for Chronic Pain, as required under Public Law 114–198, is critical to ensure that clinicians have routine access to the most updated information to help inform safe and quality care and improve pain management for veterans. In addition, to ensure that all providers have access to most recent scientific evidence, it is critical for opioid prescribing guidance to be as up to date and as consistent as possible across Federal agencies. As such, the Committee directs the Department to continue to routinely coordinate and consult with the Centers for Disease Control and Prevention and other relevant groups and Federal agencies on continued implementation and compliance with the CPG and latest scientific recommendations. As part of continued efforts to enhance safe pain management and education across the Department, the Committee directs the VA to ensure that all clinicians, including pharmacists, receive guidance on assessing the risks and benefits of critical drug interactions with opioids when a pharmacist overrides such interaction under section 913 of Public

Law 114–198. The Committee further directs VA to provide a report within 180 days after enactment of this act on implementation of the new CPG, including education and training of providers as well as certification from the new pain management teams at each facility that all health care professionals responsible for coordinating and overseeing pain management therapy utilize the updated CPG.

Opioid Control Procedures.—The Committee is aware a recent GAO report recommended that the Under Secretary for Health should ensure that VAMCs have established an additional control procedure, such as an alternate controlled substance coordinator or a pool of extra inspectors, to help coordinators meet their responsibilities and prevent missed inspections. The Committee urges the Secretary to fully implement these recommendations to improve oversight of the controlled substance inspection program and to document its progress. The Committee directs the Secretary to provide annual updates on its progress regarding its adoption of the GAO recommendations.

Community Care Opioid Safety.—The Committee recognizes that VA has made important progress increasing opioid safety and reducing overprescribing within the VA health care system. However, the Department has not made comparable progress implementing opioid safety reforms in VA community care programs. The Committee believes that the July 2017 VA Office of Inspector General report on opioid prescribing in VA community care programs provides further evidence that veterans receiving opioid therapy from community care providers, including through the VA Choice program, are at significant risk. The Office of Inspector General found that contract providers are not subject to many of the opioid safety reforms included in Public Law 114–198, the Jason Simcakoski Memorial and Promise Act, and implemented at VA [VA OIG 17–01846–316]. Specifically, community care providers are not aware of and thus, not complying with, VA opioid therapy and safe prescribing protocols. Furthermore, VA is not consistently tracking opioid prescriptions from community care programs due to significant information exchange gaps between VA and non-VA providers. To ensure community care providers follow the same safe opioid prescribing standards and have access to the same up-to-date pain care information as VA practitioners, the Committee directs the Department to implement the recommendations in the OIG report, including ensuring that community care providers review the safe opioid prescribing guidelines and Opioid Safety Initiative protocols and implementing a process to provide community care providers a complete up-to-date list of medications and medical history of the veteran during non-VA care consults. The Committee further directs the Department to provide a progress report on implementation of such recommendations within 180 days after enactment of this act.

Complementary and Integrative Health.—Expanding access to comprehensive pain management and complementary and integrative health [CIH] services is vital to improving the delivery of high-quality care for our veterans, especially those struggling with co-occurring conditions like chronic pain, mental health and substance use disorders. The Committee urges robust implementation of VA’s

plan to expand the scope of research, education, delivery, and integration of CIH into the health care services provided to veterans. In addition, as required under section 932 of Public Law 114–198, VA must continue to prioritize implementation of the pilot program at VA medical centers, including polytrauma rehabilitation centers, to assess the feasibility and advisability and delivery using wellness-based programs to complement pain management and related health care services. The Committee has been concerned with previous reports of VA’s dangerous opioid prescription practices at facilities, including at the Tomah VA Medical Center in Wisconsin, where such practices led to the tragic death of Marine veteran Jason Simcakoski in 2014. While the Committee supports the progress being made to reduce misuse and abuse of opioids and to improve pain care, the Committee believes that consideration of VISNs or medical centers with a history of or current prescription rates of opioids that are in conflict with or are inconsistent with the standards of appropriate and safe care should be given priority. The Committee encourages the Department to continue to expand access to CIH services as part of the VA’s Whole Health System approach and directs VA to report to the Committee on the progress of the 18 flagship facilities being launched to effectuate this effort.

Implementation of VA Participation in State Prescription Drug Monitoring Programs.—Within 90 days of enactment, VA shall submit a report to the Committees on Appropriations of both Houses of Congress regarding implementation of the VA Prescription Data Accountability Act of 2017 (Public Law 115–144) that requires VA to participate in State Prescription Drug Monitoring Programs. The report shall indicate progress in participation broken out by VISN and healthcare system, identify with specificity impediments to participation in particular State Prescription Drug Monitoring Programs and establish benchmarks and timeframes for full participation. Not later than February 1, 2020, VA shall submit an update report to the Committees identifying progress toward full participation during calendar year 2019. The committee also encourages VA, to the maximum extent permitted by law, to share prescription drug information with other Federal medical facilities that may serve veterans, including DOD medical facilities and Indian Health Service facilities.

LONG-TERM CARE

Long-Term Care.—The bill provides \$9,024,330,000 as requested by the Department for long-term care. This includes the \$6,168,524,000 for institutional care and \$2,855,806,000 for non-institutional care. The Committee supports the Department’s efforts to broaden veterans’ options regarding non-institutional long-term care support and services. As the Department realigns these programs under the Medical Community Care account, the Committee encourages VA to continue to prioritize veterans’ preferences in receiving home based services. The Committee notes the positive results of pilot programs such as the Veterans Independence Program, a veterans-directed Home and Community Based Services [HCBS] grant program originally created as a pilot administered jointly by VA and the Department of Health and Human Services [HHS]. The Committee encourages enhanced cooperation with HHS

to expand and grow these programs. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act on the cost avoidance associated with various non-institutional care programs. The report should include information on the demand for HCBS among the veteran population, the number of veterans currently being served by each program under HCBS, and the Department's plans to expand the size and scope of HCBS. Given the success of current HCBS pilot programs, the Department should include a cost analysis of growing the existing pilot programs prior to national expansion to leverage coordination with HHS, in addition to detail regarding the Department's efforts to coordinate with HHS on HCBS in future years. Given that mandatory eligibility for certain types of care is associated with disability levels adjudicated by VBA, this report should also include recommendations for modernizing the claims process for veterans requiring long-term care.

Home-Based Primary Care.—The Committee supports the collaboration between VA and the Indian Health Service [IHS] and collaboration by Federal agencies with Tribes to expand access to care for Native veterans, including the recent expansion of evidence-based home-based primary care [HBPC] programs at 14 VA medical centers. This expansion is designed to reach new populations of American Indian veterans living in rural reservation communities, which are served by medical facilities operated directly by the IHS or by Tribes and Tribal organizations with funding provided by the IHS. The Committee urges the Secretary to increase funding within the Office of Rural Health to expand HBPC programs to additional American Indian reservations and to other rural areas. Furthermore, the Secretary should continue to improve planning coordination with other Federal healthcare organizations. Planning efforts should take into account conducting a population-based needs assessment and allowing sufficient time to develop trusting relationships with Native veterans, Tribal health and social service personnel, IHS and Tribal community health representatives, and Tribal communities. Planning efforts should also consider availability of IHS and Tribal resources for patients, as well as identify potential opportunities for co-management to prevent unintended duplication of effort, over-prescribing of medications, and other inefficiencies.

RURAL HEALTHCARE

Office of Rural Health.—Veterans residing in rural and remote areas face unique barriers to receiving high-quality mental health, primary healthcare, and specialty care services. While enhanced community care programs offer veterans increased flexibility to obtain care close to home, often this same gap in services exists in the private market in rural and remote communities. Over the past 9 years, the Office of Rural Health and its Rural Health Initiative has played a critical role in assisting VA in its efforts to increase access to care. Therefore the Committee recommendation includes \$270,000,000 for the Office of Rural Health [ORH] and the Rural Health Initiative. This is \$20,000,000 above the budget request.

Through collaborations with other VA program offices, Federal partners, State partners, and rural communities, ORH works to optimize the use of available and emerging technologies, establish new access points to care, and employ strategies to increase healthcare options for all rural veterans. Currently, ORH identifies and implements initiatives that support rural clinics and rural home-based primary care, address barriers to access and quality of healthcare delivery in rural areas, develop workforce recruitment and retention initiatives, and accelerate and expand telehealth. ORH also operates Rural Health Resource Centers and works with Federal and non-Federal community partners to share resources and expand access to care for rural veterans. Given the important role these centers play in increasing access, the Committee encourages the Department to increase the number of these centers. Any expansion should also emphasize increasing access to healthcare for women veterans, treating traumatic brain injuries, and the recruitment and retention of healthcare providers to serve rural and remote areas.

Rural Health Continuity of Care.—The Committee notes the Access Received Closer to Home [ARCH] pilot program was highly successful in some areas in providing healthcare services to veterans who live in the rural and highly rural States in which it operated, such as in northern Maine and in Kansas. During the pilot, VISN analysis demonstrated that more than 90 percent of veterans who received medical care through ARCH were “completely satisfied” with their care and cited significantly shortened travel and wait times to receive care. Furthermore, the Committee is pleased the Department has made efforts to provide continuous, ARCH-like access to rural healthcare in northern Maine through the use of provider agreements. As the Department transitions away from the Choice Program to a reformed community care program, the Committee directs the Secretary to sustain continuity of care for rural veterans through provider agreements, based on previous models such as the ARCH program, to ensure veterans do not experience a lapse in existing healthcare access during the transition to the new community care program and any resulting integrated networks. The Committee continues to support enabling the Department to enter into provider agreements with non-VA long-term care providers, including skilled nursing facilities, in lieu of the current onerous Federal contracting requirements.

VA/Clergy Partnership for Rural Veterans.—The Committee supports the continuation of the efforts of the Department’s Community Clergy Training to Support Rural Veterans Mental Health Initiative. The Committee urges the Department to increase the financial resources made available in order to increase accessibility of this initiative to rural communities. Further, the Committee directs the Department to provide a report to the Committees on Appropriations of both Houses of Congress, no later than 180 days after enactment, on the participation rate of rural communities in this program and recommendations on how the Department may better partner with local faith-based organizations as well as the Department of Defense, in conjunction with the “Strong Bonds” program, to ensure access for veterans as well as total force servicemembers.

Rural Recruitment.—To improve recruitment and retention initiatives for healthcare providers in rural and highly rural areas the Committee urges the Department to conform with the recommendations contained in GAO report GAO–181–24. Specifically, that the VHA:

- Develop and implement a process to accurately count all physicians providing care at each medical center, including physicians not employed by VHA;
- Develop and issue guidance to the VAMCs on determining appropriate staffing levels for all mission-critical physician occupations;
- Ensure that when multiple offices issue similar productivity data on physician occupations, any methodological differences are clearly communicated and guidance is provided on how to interpret and reconcile the data;
- Establish a system-wide method to share information about physician trainees to help fill vacancies across VAMCs; and
- Conduct a comprehensive, system-wide evaluation of the physician recruitment and retention strategies used by VAMCs to determine their overall effectiveness, identify and implement improvements, ensure coordination across VHA offices, and establish an ongoing monitoring process.

Nurse Advice Line.—Last year, the Committee directed the Department to pursue a pilot program for a nurse advice line targeting rural areas and highly rural areas with a large percentage of veterans. The pilot was to be based on and improve upon the nurse advice line implemented by DOD for beneficiaries under the TRICARE program. No later than 30 days after enactment of this act, the Department is directed to submit to the Committees on Appropriations of both Houses of Congress a report detailing where the pilot was established and the progress made in implementing the directive. The reports shall also contain information on utilization of the pilot, to include a description of the individuals who benefitted from advice; a description of any impediments in carrying out, or encountered by individuals accessing, the pilot program; a description of any cost savings to the Department, and an assessment of the feasibility and advisability of expanding the pilot program to more veterans.

CAREGIVERS

The Committee recommendation includes \$860,828,000 for the VA's Caregivers Program, \$364,796,000 above the current estimate submitted with the budget request. The Committee expects VA to dedicate this funding to the program and not to divert the resources to other areas and notes that notification should be provided to the Committee of any reprogramming of this funding. In order to ensure proper budgetary oversight, the Department is directed to report to the Committees on Appropriations quarterly obligations for the Caregivers Program.

Caregivers.—The Committee notes the robust usage of the post-9/11 Caregiver program with its more than 21,000 approved applications, as well as the consistent reviews by caregiver families noting that the program's stipend, respite care, formal training, and support structure are critical components to its success. Given the

demonstrated success of the program, the Committee encourages the VA to ensure that the Caregiver coordinators at each Medical Center are fully resourced and, to the maximum extent possible, assigned designated Caregiver duties as their chief and only responsibility. The Department is also encouraged to work with the Department of Defense in order to develop and share best practices.

Many caregivers for severely wounded veterans are working dramatically reduced hours outside the home or have left the workforce completely, often leading to financial hardship. This reduction in outside earnings results in difficulties meeting financial obligations, including student loan debt held by the caregiver. The Committee directs the VA to survey all caregivers currently in the program to identify the number possessing outstanding student loan debt and to develop a plan to monitor this issue, by developing methods to capture this data routinely. The Department shall report to the Committees on Appropriations of both Houses of Congress within 120 days of enactment of this act survey results and details for future monitoring.

WOMEN VETERANS HEALTHCARE

Women Veterans.—Women represent 15.5 percent of today's active duty force and 19 percent of our National Guard and Reserves. Accordingly, women veterans are enrolling in VA healthcare at record levels, with the number of women veterans using VA healthcare tripling since 2001. With the upward trend of women serving in all branches of the Armed Forces, the Department must continue to aggressively expand efforts that address the current barriers to gender-specific healthcare services and plan accordingly for the type and length of the treatment needs of women veterans. The Committee continues to believe VA must be poised to address the changing demographic of today's and tomorrow's veterans in order to fulfill its mission. Toward this end, the Committee recommendation includes an additional \$20,000,000 over the budget request for fiscal year 2019 to support gender-specific healthcare services. The Committee also encourages the Department to consider a mobile healthcare pilot program, prioritizing rural and high need areas, to provide gender-specific services, awareness of benefits, and outreach to women veterans utilizing mobile healthcare infrastructure. This innovative model is designed to fill the current gap in gender-specific services as VA works to expand infrastructure and hire the needed staff for specialty care.

Female Primary Care and Mental Health Care Providers.—The Committee urges VA to make every effort to hire more women healthcare professionals and offer all women veterans the opportunity to choose the gender of their primary care and mental healthcare providers.

Intimate Partner Violence Program.—The VA Intimate Partner Violence Program expands VA's screening, prevention, and intervention services to veterans and strengthens collaboration with community partners as well as the Caregivers Support Program and VA programs to address homelessness. The program focuses on developing a culture of safety and adopts a holistic, trauma-informed, veteran-centered approach to services and support for

those veterans involved in a domestic violence situation. In recent years, VHA has run this program using general funds, and at times, the program has lapsed due to a lack of funds. The Committee directs the Department to fully resource this program at \$17,000,000 in fiscal year 2019 and include it as a program of interest with budget detail in the justifications accompanying the fiscal year 2020 budget submission.

OTHER ITEMS OF INTEREST

Adaptive Sports.—The Committee recommendation includes \$16,000,000 for adaptive sports programs. The Adaptive Sports Grant Program helps connect veterans with disabilities to sports programs and remains one of the most popular programs among veterans. Originally established to assist with training for Paralympic athletes, the program now supports veterans of all levels. The Committee recognizes that veterans have shown marked improvements in mental and physical health from participating in adaptive sports and recreational therapy and that veterans have expressed the need for these activities to be included in the healthcare services VA offers. The Committee also recognizes that adaptive sports and recreational therapy provide a low-cost alternative to other healthcare services that produce similar health outcomes. Therefore, the Committee requests that the Department provide a feasibility assessment for the cost of expanding the grant program to include recreational and lifelong sports, such as open-ocean swimming, surfing, outrigger canoeing, hunting, and fishing, as well as any legal barriers to expansion.

The Adaptive Sports Grants Program currently awards a limited number of grants for equine therapy, mostly related to physical disabilities. Therefore, of the increase provided, \$1,500,000 should be used by VA to increase its use of these grants for the purpose of equine therapy targeted to mental health issues.

Equine Therapy.—The Committee recommends that the Department utilize funding to conduct a comprehensive program evaluation to ensure the continued effectiveness of equine therapy in addressing the mental health needs of veterans that participate in these programs, including through the systematic assessment and tracking of mental health issues and symptoms, and the measurement of key outcomes, such as functional improvement in veterans' different life domains.

Cancer Treatment.—The Committee seeks to ensure that veterans have access to the highest quality cancer care available. The Committee, therefore, applauds the ongoing collaborative efforts between VA medical centers and NCI-designated comprehensive cancer centers. The Committee supports these efforts, especially as they relate to providing veterans access to groundbreaking new treatments through clinical trials led by academic cancer centers, as well as the linking of VA oncology care with national research databases involving patients at multiple academic cancer centers. The Committee is also pleased that VA is engaged with the NCI and VA Interagency Group to Accelerate Trials Enrollment partnership, which will improve access to certain clinical trials at a number of VA facilities. The Committee understands that initiating new clinical trials is a resource-intensive process requiring experi-

enced coordination staff with specialized expertise in data management and regulatory compliance. To improve its own capacity to coordinate a full range of cancer clinical trials with non-VA organizations, the Committee encourages VA to provide resources for coordination staff and continue to develop partnerships with non-VA organizations that have initiated pilot clinical trials programs. The Committee also requests a report, within 90 days of enactment of this act, which provides an overview of VA's credentialing process for non-VA clinical trial coordinators and recommendations, if any, to improve this process.

Inpatient Drug Rehabilitation Report.—The Secretary of Veterans Affairs, no later than 120 days after enactment, shall submit to Congress a report that includes: (1) the number of VA inpatient drug rehabilitation beds per VA Medical Center; (2) Number of occurrences, per VA Medical Center, that the VA furnished inpatient drug rehabilitation care in the community in previous 24 months; and, (3) specific demographic data on addicted veterans.

Beneficiary Travel.—The Committee is concerned about the allocation of beneficiary travel to VISNs where unconventional modes of travel, such as air, are the primary means for veterans to visit a VA hospital. The Committee directs the Secretary to conduct a review of the beneficiary travel program for VISNs that have exhausted available funds in the first or second quarter of the fiscal year. In conducting the review, the Secretary shall consider whether the traditional mileage reimbursement model remains appropriate for VISNs that serve the non-contiguous states and other rural, highly rural, and remote areas. The Secretary shall also report on the types of clinical services for which veterans are traveling and seeking reimbursement, and determine whether telemedicine could reduce the need for such travel and, if so, a plan to make those services available. Finally, the report shall assess how the beneficiary travel allocation in impacted VISNs affects timely reimbursements for veterans and what, if any, chilling effect delayed reimbursements have on veterans choosing to seek care. This report should be provided to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act.

Blood products.—The Committee is concerned about the safety of blood products being transfused to veterans at VA medical facilities given the aging and medically fragile populations being treated. Therefore, the Committee urges VA to request that all blood product providers use FDA-approved pathogen reduction technology, where available, before providing blood products for transfusion at VHA medical facilities, including VA medical centers, outpatient clinics, community-based outpatient clinics, and community living centers.

Orthotics & Prosthetics Workforce.—The Committee is concerned about the sustainability of the orthotics and prosthetics workforce treating veterans, particularly with retirements in an aging workforce and the lack of availability of advanced degree programs necessary to train new professionals. Reports indicate that up to 20 percent of the field's 7,100 clinicians nationwide are either past retirement age or within 5 years of retiring. The Committee recognizes the contributions made by the VHA's Orthotic and Prosthetic

Residency Program to provide rotation opportunities through the VA system, but acknowledges this program alone is inadequate to ensure a sustainable workforce for the future, especially in light of the skill set necessary to provide the increasingly complex, state-of-the-art orthotics and prosthetics care for Iraq and Afghanistan war veterans. The Committee directs the VHA to explore cost effective opportunities to grow the workforce pipeline in order to ensure the future orthotic and prosthetic workforce required by the nation's new generation of veterans and report findings to the Committees on Appropriations of both Houses of Congress within 180 days of enactment.

Sepsis Screening.—Sepsis is a major cause of mortality among veterans with spinal cord injury. The Committee believes that the Department, through its Center for Clinical Management Research and its Spinal Cord Injuries and Disorders Centers, can help improve the VA's diagnosis and management of Sepsis. The Committee urges the Department to provide a report on its costs related to sepsis management and how it has incorporated latest improvements in sepsis screening and diagnostics, including biomarker testing, across its healthcare facilities.

Veterans Exposed to Open Burn Pits and Airborne Hazards.—In order to provide full and effective medical care it is essential for the Department to better understand the impacts exposure during service has had on the health of veterans. Therefore the Committee includes \$5,000,000 for VHA clinical proposals, developed in conjunction with research, focusing on post-deployment health for veterans exposed to airborne hazards and open burn pits. Additionally, the Committee directs the Secretary to provide an assessment of the process by which veterans are informed by both VA and community care providers about the Airborne Hazards and Open Burn Pit Registry and their eligibility for registering. The assessment should include an analysis of the process by which VA or community care providers for veterans who may be suffering the effects of exposure to airborne hazards are connected to the VA experts at the Airborne Hazards Center of Excellence for additional resources and assistance.

The Committee is aware that the Department may be undertaking an effort to consolidate several health registries at the VA. In order to better understand the impacts this might have, the Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 60 days after enactment of this act outlining the number and type of registries being consolidated. The report should also include how such consolidation will affect implementation of the recommendations included in the National Academies of Sciences, Engineering, and Medicine's Assessment of the Department of Veterans Affairs Airborne Hazards and Open Burn Pit Registry for improving the registry.

Hospice Care.—From 1964 to 1975, more than nine million Americans served in the armed services, with more than one-third of them having served in Vietnam. As these Vietnam-era veterans age, many of them are facing unique end-of-life challenges related to their combat experience that standard hospice care and palliative services are not fully equipped to address. These challenges in-

clude psychological and post-traumatic stress disorders, a history of substance abuse, and neurological conditions resulting from toxic chemical exposure. While the VA provides hospice care and palliative services to qualified veterans, the Committee is aware that many non-profit organizations are developing programs designed to meet the specific end-of-life care needs for Vietnam-era veterans. The Committee also recognizes that such an approach could be beneficial to Iraq and Afghanistan combat veterans in the future.

The Committee supports the findings of the feasibility study on hospice care protocols tailored to the unique needs of combat veterans, including Vietnam-era veterans, as required in fiscal year 2018. Therefore, the VA is urged to deploy a pilot program to develop the techniques, best practices and support mechanisms to serve these veterans and to further implement the findings of the feasibility study. The Department is encouraged to engage non-profit hospice and palliative care providers with Vietnam veteran-centric programs. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act on this effort.

Veterans Transportation Service.—In order to ensure the Veterans Transportation Service [VTS] is improving veterans' access to healthcare and VA's ability to provide quality care in a cost effective manner, the Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this act outlining the progress made on these metrics. At a minimum, the report should include analysis of the healthcare costs impacted by non-emergency medical transportation, the impact of VTS on missed appointment rates at facilities utilizing the program, and VTS impact on health outcomes for veterans.

Center for Compassionate Innovation.—The Committee understands that VA has been operating a Center for Compassionate Innovation. The Center's stated purpose is to explore emerging therapies targeted to enhance veteran physical and mental well-being when other treatments have not been successful. The Committee encourages VA to always be testing and researching new and innovative treatments that may benefit veterans' lives. To more fully understand these treatments, the Committee directs VA to report within 180 days of the enactment of this act with a description of the proposals the Center received in fiscal year 2018 and the cost and disposition of such proposals. Further, the Committee directs VA to report on the actions the Department took regarding the data or results gleaned from these treatments and whether they have been utilized by the Department to determine the efficacy of the treatments.

Physician Assistants.—The Committee is concerned that VA has failed to utilize existing authorities to hire and retain Physician Assistants [PAs]. As such, the Committee directs VA to accelerate the rollout of competitive pay for PAs, and develop a plan on how to better utilize the Health Professional Scholarship Program and Education Debt Reduction Program. In addition, the Committee believes VA would benefit from the creation of a staffing plan on how to utilize PAs within the Department and directs the Agency to develop such a model.

Healthcare Workforce.—The Committee remains concerned with VHA’s ability to recruit and retain quality physicians. Accordingly, the Committee directs the Department to fully comply with GAO’s recommendations to improve staffing, recruitment, and retention strategies for physicians.

The Committee is aware of the ongoing challenges facing the VA Caribbean Healthcare System as a result of the devastating 2017 hurricane season. The Committee directs the Department to formulate a strategy to address the physician shortages currently facing the VA Caribbean Healthcare System. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act assessing the VA Caribbean Healthcare System’s emergency response to Hurricanes Irma and Maria and identifying areas for improvement.

Licensed Professional Mental Health Counselors and Marriage and Family Therapists.—The Committee directs VA to work with the Office of Personnel Management [OPM] to create an Occupational Series for Licensed Professional Mental Health Counselors [LPMHCs] and Marriage and Family Therapists [MFTs]. The Committee also directs VA to create a staffing plan for LPMHCs and MFTs to fill open positions and assess LPMHC and MFT shortages.

Rehabilitation Therapy Outcomes.—The Committee believes that rehabilitation therapy outcomes might be improved if VA collected functional status data that includes; functional status and improvement; effectiveness and efficiency of treatment; and patient satisfaction. The Committee encourages VA to pilot the collection of such data and compare outcomes with a control group for which such data is not collected and monitored.

Canadian Forces Base Gagetown.—The Committee is aware that many National Guard veterans engaged in training activities at Canadian Forces Base [CFB] Gagetown in the 1950s and 1960s. The Committee is also aware that Veterans Affairs Canada approved one-time, lump sum payments to eligible veterans exposed to Agent Orange and other defoliants who served at CFB Gagetown, and that American veterans who served there between June 20 and June 24, 1964, are currently eligible for an Agent Orange Registry Health Exam from the Veterans Health Administration. The Committee urges the Department to establish and maintain a health registry for American veterans who were stationed or underwent training at CFB Gagetown between 1956 and 2006 and who have subsequently experienced health problems which may be attributed to Agent Orange or other defoliants. The Committee further urges the Department to commission an independent study tasked with investigating the linkage between service at CFB Gagetown and the development of health problems and disease associated with exposure to Agent Orange.

VA Special Mode Transportation.—The Committee is concerned that blinded veterans are being denied transportation assistance because their disability is not considered “non-ambulatory.” The Committee directs VA to review this policy and report back to the Committee regarding the circumstance under which a denial of transportation assistance would be issued.

Emergency Ambulance Reimbursement.—The Committee is concerned that the Department’s medical documentation requirements for emergency ambulance services claims are resulting in veterans receiving bills for expenses properly borne by the VA. For example, the Committee is aware that the Health Insurance Portability and Accountability Act [HIPAA] frequently prevents ambulance providers from gathering the required medical information for submission to the VA for reimbursement. The Committee therefore urges the Department to take any necessary actions to process such claims using the “prudent layperson” standard, as utilized by other Federal health insurance programs such as Medicare and Medicaid. The Department is directed to provide a brief to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this act to update the Committees on this effort.

VA Transplant Centers.—The VA National Transplant Program currently maintains 13 VA transplant centers [VATCs] across the United States and performs approximately 300 organ transplants per year, with significant differences in volume and types of transplants being performed at the 13 facilities.

The Committee is very concerned with the inconsistent volume of transplants being performed at the 13 VATCs. High volume, particularly for complex procedures, is associated with better outcomes, and research has demonstrated that there is strong evidence for a volume-mortality relationship for hospitals and physicians.

The Committee also acknowledges the Office of Special Counsel’s [OSC] report released in January 2018, which noted that VA failed to address conflicting information regarding the availability of transplant care in the community and the coverage of organ harvesting and donor care through the CHOICE Program.

Therefore, the Committee directs the Secretary of the VA to deliver a report to the Committees on Appropriations of both Houses of Congress not later than 180 days after the enactment of this Act that addresses the following issues:

- The fully burdened annual cost of the Department’s National Transplant Program over the previous five fiscal years, including a per year cost breakdown for maintaining and operating each transplant center;
- A detailed accounting, by transplant center, of the number of transplants, by organ type, performed over the previous five fiscal years by month, indicating whether or not those were performed at a VATC or at a non-VA facility, and the average cost to the Department of performing each type of organ transplant;
- For those transplants performed at a non-VA facility, a listing of the statutory authority by which the transplants were covered by the VA;
- A detailed accounting of the travel and lodging costs associated with transporting veterans and authorized support members to each of the Department’s transplant centers for pre-operative, operative, and post-operative care for the previous five fiscal years with a per year breakdown;
- VA’s policy regarding the Veteran and his or her support member when travel has been authorized, to include per diem rates,

- dwelling options and travel allowances for visiting home during treatment; and
- A cost comparison by organ type of the average cost to perform an organ transplant, to include pre- and post-operative care, for the Department versus the Centers for Medicare & Medicaid Services.

The Committee directs the Secretary of the VA to provide this information from the previous fiscal year to the House and Senate Appropriations Committees and Veterans Affairs Committees, on an annual basis, no later than 60 days after the end of the fiscal year.

Pilot Program for Agritherapy.—An increasing number of States now have programs that assist veterans in starting farms, and many veterans turning to farming also suffer from PTSD. The benefits of agritherapy have been reported in the news media; however limited research and insufficient opportunities exist to offer the benefits of agritherapy to those suffering from PTSD. Therefore, the Department is urged to consider agritherapy for inclusion among VA's Complementary and Alternative Medicine therapies. Additionally, the Committee directs no less than \$4,000,000, made available through the Office of Rural Health, toward a pilot program to train veterans in agricultural vocations while also tending to behavioral and mental health needs with behavioral healthcare services and treatments from licensed providers at no fewer than three locations. The pilot locations may be sites that currently have an operational construct to train veterans for agricultural vocations and have the potential to expand operations that tend to veterans medical needs while creating a pathway to employment in agriculture related fields.

Hepatitis C.—The Department is directed to continue its quarterly updates to the Committees on Appropriations of both Houses of Congress detailing the expenditures and obligations of funding hepatitis C treatment, the number of veterans treated, the number of veterans deemed cured, the projection of spending, the number of new starts for drug treatment, and number of veterans who have been cured.

Colorectal Cancer Screening.—In the explanatory statement accompanying Public Law 115–141, the Department was directed to offer all 7 colorectal cancer screening strategies recommended by the United States Preventive Services Task Force and adopted by the National Committee for Quality Assurance Healthcare Effectiveness Data and Information Set measures, which are used by more than 90 percent of U.S. health plans to measure performance. The Committee reminds the Department that it is to report to the Committees on Appropriations no later than June 23, 2018 if it determines that it is unable to comply with this directive.

Lovell FHCC.—The Committee recognizes the innovative collaboration between VA and DOD at the Captain James A. Lovell Federal Health Care Center Demonstration Project, established in 2010 under Public Law 111–84. Given the unique nature of this joint facility, the Committee notes that the Lovell Federal Health Care Center has significant potential to improve access, quality, and cost-effectiveness of healthcare delivery to veterans, service members, and their families. The Committee also recognizes that

the important work of this integration effort must go on even as the two Departments continue to roll out their respective EHR programs. Therefore, the Committee directs the Department to provide, within 90 days of enactment, a comprehensive assessment of the status of integration efforts at Lovell FHCC, including an update on how to address ongoing challenges related to workforce planning and electronic health record and information technology systems integration, as well as an assessment of whether the model of a joint facility can be replicated in other parts of the country.

MEDICAL COMMUNITY CARE

Appropriations, 2018	\$9,828,294,000
Advance appropriations, 2019	8,384,704,000
Budget estimate, 2019	500,000,000
Committee recommendation, 2019	1,000,000,000
Budget estimate, advance appropriations, 2020	14,419,786,000
Committee recommendation, advance appropriations, 2020	10,758,399,000

PROGRAM DESCRIPTION

The Medical Community Care account provides for medical services for eligible enrolled veterans and other beneficiaries that is purchased from and provided by non-Department of Veterans Affairs facilities and providers, including contract hospitals, State homes, and outpatient services.

COMMITTEE RECOMMENDATION

In fiscal year 2018, the Committee provided an advance appropriation of \$8,384,704,000 for fiscal year 2019 for the Medical Community Care account. The recommendation for fiscal year 2019 includes an additional \$1,000,000,000. The additional appropriation coupled with the advance appropriation provided for fiscal year 2019 provides the Department with total budget authority of \$9,384,704,000.

The Committee recommendation also includes an advance appropriation of \$10,758,399,000 for Medical community care for fiscal year 2020.

VETERANS CHOICE FUND

Appropriations, 2018	
Budget estimate, 2019	\$1,900,000,000
Committee recommendation, 2019	

PROGRAM DESCRIPTION

The Choice Fund was created in Public Law 113-146, the legislation establishing the Choice program and providing mandatory funding for it.

COMMITTEE RECOMMENDATION

The Committee recommendation does not provide any funding for the Veterans Choice Fund. Since its inception, the authorizers have provided nearly \$20,000,000,000 in mandatory funding, a significant portion of which was designated as an emergency requirement, to support the Choice program. The account has never received discretionary funding. The Committee also notes the House

of Representatives and the United States Senate recently passed the VA MISSION Act of 2018, which provided an additional mandatory appropriation of \$5,200,000,000.

MEDICAL SUPPORT AND COMPLIANCE

Appropriations, 2018 ¹	\$6,754,480,000
Advance appropriations, 2019	7,239,156,000
Budget estimate, 2019 .....	.....
Committee recommendation, 2019 .....	.....
Budget estimate, advance appropriation, 2020	7,106,150,000
Committee recommendation, advance appropriation, 2020	7,239,156,000

¹Total excludes \$3,209,000 in emergency funding provided in Public Law 115-123, the Further Additional Supplemental Appropriations for Disaster Relief Requirements Act, 2018.

PROGRAM DESCRIPTION

The Medical Support and Compliance account provides funds for management, security, and administrative expenses within the VA healthcare system, in addition to providing costs associated with the operation of VA medical centers and clinics, VISN offices, and the VHA Central Office in Washington, DC. This appropriation also covers Chief of Staff and Facility Director operations, quality of care oversight, legal services, billing and coding activities, procurement, financial management, security, and human resource management.

COMMITTEE RECOMMENDATION

In fiscal year 2018, the Committee provided an advance appropriation of \$7,239,156,000 for fiscal year 2019 for the Medical Support and Compliance account.

The Committee recommendation also includes an advance appropriation of \$7,239,156,000 for Medical support and compliance for fiscal year 2020.

MEDICAL FACILITIES

Appropriations, 2018 ¹	\$6,141,880,000
Advance appropriations, 2019	5,914,288,000
Budget estimate, 2019 .....	.....
Committee recommendation, 2019	211,000,000
Budget estimate, advance appropriation, 2020	5,276,676,000
Committee recommendation, advance appropriation, 2020	6,141,880,000

¹Total excludes \$3,209,000 in emergency funding provided in Public Law 115-123, the Further Additional Supplemental Appropriations for Disaster Relief Requirements Act, 2018.

PROGRAM DESCRIPTION

The Medical Facilities account provides funds for the operation and maintenance of the VA healthcare system's vast capital infrastructure. This appropriation provides for costs associated with utilities, engineering, capital planning, leases, laundry, groundskeeping, housekeeping, facility repair, and property disposition and acquisition.

COMMITTEE RECOMMENDATION

In fiscal year 2018, the Committee provided an advance appropriation of \$5,914,288,000 for fiscal year 2019 for the Medical Facilities account. The recommendation for fiscal year 2019 includes

an additional \$211,000,000 which is \$211,000,000 above the budget request. The additional appropriation coupled with the advance appropriation provided for fiscal year 2019 provides the Department with total budget authority of \$6,125,288,000 which is \$16,592,000 below the fiscal year 2018 enacted amount.

For any VA renovation project for which energy systems are involved, the committee encourages the VA to use energy related Energy Savings Performance Contracting and Utility Energy Service Contracting in concert with appropriated funds to leverage more investment from the private sector.

VA Chapels.—The Committee has provided significant investment for the upkeep and maintenance of Department infrastructure. The Department owns and is responsible for maintaining a variety of structures to include chapels and other facilities to tend to the spiritual needs of veterans. The Committee encourages the Secretary to prioritize funding for maintenance and renovation of such sites owned by the Department.

Facility Assessments.—The Committee supports VA’s efforts to obtain analysis that provides a more holistic view of VA facilities and thereby allows the Department to make more informed, data driven decisions about its facilities and buildings. The Committee recognizes that annual analysis and benchmarking across the Department’s facilities will provide an invaluable tool for long-term system-wide planning, needs identification, and cost management for the Department. Therefore, the Committee encourages the Department to utilize an independent, third-party to provide facilities analysis, benchmarking and recommendations for all VHA hospitals, nursing homes, domiciliary facilities, and other necessary facilities.

MEDICAL AND PROSTHETIC RESEARCH

Appropriations, 2018	\$722,262,000
Budget estimate, 2019	727,369,000
Committee recommendation	779,000,000

PROGRAM DESCRIPTION

The Medical and Prosthetic Research account provides funds for medical, rehabilitative, and health services research. Medical research supports basic and clinical studies that advance knowledge leading to improvements in the prevention, diagnosis, and treatment of diseases and disabilities. Rehabilitation research focuses on rehabilitation engineering problems in the fields of prosthetics, orthotics, adaptive equipment for vehicles, sensory aids and related areas. Health services research focuses on improving the effectiveness and economy of the delivery of health services.

COMMITTEE RECOMMENDATION

The Committee recommends \$779,000,000 for the Medical and Prosthetic Research account. This is \$56,738,000 above the fiscal year 2018 enacted level and \$51,631,000 above the budget request.

The Committee remains highly supportive of this program, and recognizes its importance both in improving healthcare services to veterans and recruiting and retaining high quality medical professionals in the Veterans Health Administration.

Through the Department's research and development program, VA has implemented a comprehensive research agenda to develop new treatments and tools for clinicians to ease the physical and psychological pain of men and women returning from war zones, to improve access to VA healthcare services, and to accelerate discoveries and applications, especially for neurotrauma, sensory loss, amputation, polytrauma, and related prosthetic needs. The Committee encourages VA to continue its research into developing novel approaches to restoring veterans with amputation, central nervous system injuries, loss of sight or hearing, or other physical and cognitive impairments to full and productive lives.

VA Cancer Moonshot Contribution.—The Committee supports the Beau Biden Cancer Moonshot initiative, and the Department's contribution utilizing advances in genomic science to provide targeted treatment to veterans. The Department has identified prostate cancer, triple-negative breast cancer, and colorectal cancer as areas of priority. Due to the prevalence of various skin cancers among service members, the Committee directs that skin cancer be included as well.

Enewetak Atoll Registry Research.—The Committee is aware that thousands of veterans served on the Enewetak Atoll to clean up the island following its use for nuclear weapons testing. The Committee is also aware of many instances of veterans who conducted the cleanup suffering serious health problems, such as brittle bones, cancers, and birth defects in their children. The Committee urges the Department to study whether there is a connection between certain illnesses and the potential exposure of individuals to radiation related to service at Enewetak Atoll between January 1, 1977, and December 31, 1980.

Veterans Exposed to Open Burn Pits and Airborne Hazards.—The Committee directs the Secretary to provide an assessment of the process by which veterans are informed by both VA and community care providers about the Airborne Hazards and Open Burn Pit Registry and their eligibility for registering. The assessment should include an analysis of the process by which VA or community care providers for veterans who may be suffering the effects of exposure to airborne hazards are connected to the VA experts at the Airborne Hazards Center of Excellence for additional resources and assistance.

The Committee is also concerned about the need for a better understanding of and treatment options for rare cancers disproportionately impacting those who have served in the military. The Committee encourages the Department to support research to evaluate the health status of service members from their time of deployment to Iraq and Afghanistan over many years to determine their incidence of chronic diseases including cancers that tend not to show up for decades. The Committee further encourages the Department to establish a collaboration with the Department of Defense to examine the impact of rare cancers on those who serve and fund research in delivering treatments for rare cancers that take a platform-agnostic approach to developing new therapeutics.

Development of Veteran-Specific Therapies.—The Committee recognizes that commercial firms have expressed challenges with researching and developing veteran-specific therapies in light of the

nature of service-connected diseases and the relatively small population served. However, the Committee believes it is increasingly important for VA to better understand and develop treatment options for veteran-specific afflictions in order to fulfill its promise to provide timely access to care. The Committee directs VA, where practicable, to leverage appropriate research toward development of veteran-specific therapies and to use existing contracting authorities to work with commercial firms to deliver treatments that provide relief for veterans with service-connected diseases.

Gulf War Illness Studies.—The Committee recommends the Department continue to conduct epidemiological studies regarding the prevalence of Gulf War illness, morbidity, and mortality in Persian Gulf War veterans and the development of effective treatments, preventions, and cures. The Committee is concerned by the lack of public availability of the findings of all research conducted by or for the Executive Branch relating to the health consequences of military service in the Persian Gulf theater of operations during the Persian Gulf War and by the lack of coordination by the Department in ensuring the public availability of this information. The Committee urges the Department to publish disease-specific mortality data related specifically to Persian Gulf War veterans. The Committee remains concerned by VA's ever-evolving terminology for the signature adverse health outcome of the Persian Gulf War as recognized by the Institute of Medicine [IOM]—Gulf War illness—and encourages the Department to utilize the term, “Gulf War illness,” as IOM has recommended. The Committee continues to urge the Secretary to consider revising and updating the Clinical Practice Guideline for Chronic Multi-symptom Illness [CMI] consistent with the July 2011 Veterans Health Initiative, “Caring for Gulf War Veterans,” in that it, “cannot be reliably ascribed to any known psychiatric disorder,” and to focus on recent Gulf War illness treatment research findings and ongoing Gulf War illness treatment research direction. Furthermore, the Committee once again encourages VA to strengthen the training of primary, specialty, and mental healthcare providers on the Gulf War illness case definitions recommended by IOM.

VA/Department of Energy Computing Collaboration.—As requested, the Committee includes \$27,000,000 for VA to collaborate with the Department of Energy through the Advanced Computational and Translational Initiatives for Veterans and the Million Veterans Program Cohort—Computational Health Analytics for Medical Precision to Improve Outcomes Now [MVP-CHAMPION] programs. The Committee encourages VA to take advantage of the unique high-performance resources offered by the Department of Energy Laboratories to address their most pressing issues in veteran health data. Important research collaborations, such as the MVP-CHAMPION project, have already collected protected healthcare data for 23 million veterans and is helping researchers better understand the role genes play in our health. The Committee encourages VA to continue leveraging the high performance computer facilities available through its partnership with the Department of Energy.

MEDICAL CARE COST RECOVERY COLLECTIONS

MEDICAL CARE COLLECTION FUND

Appropriations, 2018	\$2,507,000,000
Budget estimate, 2019	3,590,000,000
Committee recommendation	3,590,000,000

MEDICAL CARE COLLECTION FUND—REVENUES APPLIED

Appropriations, 2018	-\$2,507,000,000
Budget estimate, 2019	-3,590,000,000
Committee recommendation	-3,590,000,000

PROGRAM DESCRIPTION

The Medical Care Collection Fund [MCCF] was established by the Balanced Budget Act of 1997 (Public Law 105–33). In fiscal year 2004, Public Law 108–199 allowed the Department of Veterans Affairs to deposit first-party and pharmacy co-payments; third-party insurance payments and enhanced-use collections; long-term care co-payments; Compensated Work Therapy Program collections; and Parking Program fees into the MCCF. The Secretary of Veterans Affairs has the authority to transfer funds from the MCCF to the Medical Services account.

COMMITTEE RECOMMENDATION

The Committee recommendation includes the authority to retain co-payments and third-party collections, estimated to total \$3,590,000,000 in fiscal year 2019.

NATIONAL CEMETERY ADMINISTRATION

Appropriations, 2018	\$306,193,000
Budget estimate, 2019	315,836,000
Committee recommendation	315,836,000

ADMINISTRATION OVERVIEW

The National Cemetery Administration was established in accordance with Public Law 93–94, the National Cemeteries Act of 1973. It has a four-fold mission: to provide for the interment in any national cemetery of the remains of eligible deceased servicemembers and discharged veterans, together with their spouses and certain dependents, and permanently maintain their graves; to provide headstones for, and to mark graves of, eligible persons in national, State, and private cemeteries; to administer the grant program for aid to States in establishing, expanding, or improving State veterans cemeteries; and to administer the Presidential Memorial Certificate Program.

COMMITTEE RECOMMENDATION

The Committee recommends \$315,836,000 for the National Cemetery Administration. This is an increase of \$9,643,000 above the fiscal year 2018 enacted level and equal to the budget request.

The Committee has included bill language to make available through September 30, 2020, up to 10 percent of the National Cemetery Administration appropriation.

DEPARTMENTAL ADMINISTRATION

Appropriations, 2018 ¹	\$6,508,439,000
Budget estimate, 2019	8,135,377,000
Committee recommendation	7,746,670,000

¹Total excludes \$4,088,000 in emergency funding provided in Public Law 115-123, the Further Additional Supplemental Appropriations for Disaster Relief Requirements Act, 2018.

ADMINISTRATION OVERVIEW

Departmental Administration provides for the administration of veterans benefits through the Veterans Benefits Administration, the executive direction of the Department, several top level supporting offices, the Board of Contract Appeals, and the Board of Veterans Appeals.

COMMITTEE RECOMMENDATION

The Committee recommends \$7,746,670,000 for Departmental Administration. The amount is composed of \$365,976,000 for General administration; \$174,748,000 for the Board of Veterans Appeals; \$4,184,571,000 for Information technology systems; \$800,000,000 for the Electronic Health Record; \$192,000,000 for the Office of the Inspector General; \$1,127,486,000 for Construction, major projects; \$706,889,000 for Construction, minor projects; \$150,000,000 for Grants for construction of State extended care facilities; and \$45,000,000 for Grants for the construction of State veterans cemeteries.

GENERAL ADMINISTRATION

(INCLUDING TRANSFER OF FUNDS)

Appropriations, 2018	\$335,891,000
Budget estimate, 2019	367,629,000
Committee recommendation	365,976,000

PROGRAM DESCRIPTION

The General Administration account provides funding for the Office of the Secretary, six assistant secretaries, and three independent staff offices.

COMMITTEE RECOMMENDATION

The Committee recommends \$365,976,000 for General Administration. This amount is \$30,085,000 above the fiscal year 2018 enacted level and \$1,653,000 below the budget request. The Committee has included bill language to make available through September 30, 2020, up to 10 percent of the General Administration appropriation.

BOARD OF VETERANS APPEALS

Appropriations, 2018	\$161,048,000
Budget estimate, 2019	174,748,000
Committee recommendation	174,748,000

PROGRAM DESCRIPTION

As set forth in section 7101(a) of title 38 United States Code, the Board of Veterans Appeals is responsible for making final decisions on claims for veterans benefits presented to the Board for appellate review. The vast majority of the Board’s workload derives from benefit claims initiated by the Veterans Benefits Administration’s Regional Offices. The appellate process has multiple steps, most of which occur at the local Regional Office level. If a veteran is not satisfied with the Regional Office determination, he or she may appeal to the Board for a final agency decision. The Board adjudicates appeals covering all areas of veterans benefits, including: service connection, increased disability ratings, total disability ratings, pensions, insurance benefits, educational benefits, home loan guaranties, vocational rehabilitation, waivers of indebtedness, fee basis medical care, and dependency and indemnity compensation.

COMMITTEE RECOMMENDATION

The Committee recommends \$174,748,000 for the Board of Veterans Appeals, which is \$13,700,000 above fiscal year 2018 enacted level and equal to the budget request. The Committee has included bill language to make available through September 30, 2020, up to 10 percent of the Board of Veterans Appeals appropriation.

INFORMATION TECHNOLOGY SYSTEMS

Appropriations, 2018	\$4,055,500,000
Budget estimate, 2019	4,184,571,000
Committee recommendation	4,184,571,000

PROGRAM DESCRIPTION

The Information Technology [IT] Systems appropriation, along with reimbursements, funds the costs of all IT staff salaries and expenses, the operations and maintenance of all existing information technology systems, and the development of new projects and programs designed to improve the delivery of service to veterans. This appropriation also funds the costs associated with the Office of Information and Technology which oversees the functions highlighted above.

COMMITTEE RECOMMENDATION

The Committee recommends \$4,184,571,000 for the Information Technology Systems account. This amount is \$129,071,000 above the fiscal year 2018 enacted level and equal to the budget request. The Committee recommendation includes \$1,243,220,000 for staff salaries and expenses, \$2,560,780,000 for operation and maintenance of existing programs, and \$380,571,000 for program development.

The Committee has appropriated the Information Technology Systems account as three subaccounts. This funding structure enhances the Committee’s ability to ensure funds are executed in a manner consistent with the Department’s budget submission. The Committee has provided sufficient flexibility within the subaccounts by way of authorized carryover amounts and reprogramming authority to give the Office of Information Technology as

much flexibility as possible to accomplish its mission and goals, while ensuring proper accountability and oversight. The Committee will continue to work with the Department to ensure the IT projects currently underway, as well as the projects planned for the future, have the resources needed for success.

INFORMATION TECHNOLOGY DEVELOPMENT PROJECTS

[In thousands of dollars]

Project	Fiscal year 2019 budget request	Committee recommendation
Clinical Applications		
Access and Billing	5,891	5,891
My HealtheVet	10,300	10,300
Health Data Interoperability	13,000	13,000
Registries	3,228	3,228
Subtotal Clinical Applications	32,419	32,419
Health Management Platform		
Digital Health Platform	15,682	15,682
Community Care	25,303	25,303
Patient Record System	14,300	14,300
Purchased Care	9,076	9,076
Telehealth	6,030	6,030
Subtotal Health Management Platform	70,391	70,391
Benefits Systems		
Benefits Appeals	2,500	2,500
Education Benefits	37,830	37,830
Veterans Customer Experience	47,564	47,564
Veterans Benefits Management	10,000	10,000
Benefits Systems	31,721	31,721
Subtotal Benefits Systems	129,615	129,615
Memorial Affairs		
Memorials Automation	18,800	18,800
Subtotal Memorial Affairs	18,800	18,800
Other IT Systems		
Human Resources	12,600	12,600
Financial and Acquisition Management Modernization	65,971	65,971
Subtotal Other IT Systems	78,571	78,571
Cyber Security	17,000	17,000
Information/Infrastructure Management		
Data Integration and Management	33,715	33,715
Subtotal Information/Infrastructure Management	33,715	33,715
Total IT Development	380,511	380,511

Scheduling System.—For more than 15 years, the Department has struggled to modernize the current patient scheduling system and the Committee remains concerned about the lack of progress. While the Department has made upgrades to the VistA scheduling system, these modifications only provide a more user friendly viewing environment and do not address more functional problems with the current system. The Committee understands that a scheduling system solution will be a component of the new Electronic Health

Record [EHR] program and that VA plans to deploy this new system over a 10 year period, with the first deployment to begin within the next 18 months. While the Committee supports VA's efforts to replace the antiquated EHR system currently in place and upgrade the deficient infrastructure in the field to handle the new functionality, it is concerning that many hospitals will not see functional modernization of the current scheduling system for another 10 years. The Committee understands that VA is conducting pilot programs involving commercial off-the-shelf solutions scheduling systems to assess if they provide substantial value over its current interim systems and whether the benefits of deploying off-the-shelf technology outweighs costs during the decade-long deployment plan to modernize the entire EHR is implemented. The Committee believes that the Department must provide an interim solution for those hospitals and clinics that fall toward the end of the deployment schedule to improve veteran access to care, shorten veteran wait times, allow the VA to track and manage patient progress throughout the care continuum, and improve resource utilization across the VA healthcare system. Therefore the Committee directs the Department to submit a scheduling modernization plan no later than 60 days after enactment of this act, describing plans and costs of utilizing off-the-shelf technology as an interim solution during EHR modernization.

Enhancing Local Control of Information Technology Needs.—The Committee is concerned that local facilities and VISN leadership do not have the ability to quickly address IT issues causing the disruption of patient care. Further, that they do not have the ability to utilize the technologies they have identified as enhancing patient experience, due to centralization of IT resources. VA is therefore directed to produce a report on the methods by which information technology funds are allocated to the VISNs and to facilities, and any plans to increase local control.

VETERANS ELECTRONIC HEALTH RECORD

Appropriations, 2018	\$782,000,000
Budget estimate, 2019	1,207,000,000
Committee recommendation, 2019	800,000,000

PROGRAM DESCRIPTION

The Veterans Electronic Health Record account funds all activities related to the acquisition, implementation, preparation, development, interface, management, rollout, and maintenance of a new electronic health record. The EHR solution and implementation will include program management; an enterprise-wide EHR system; change management; training; testing; deployment services; sustainment and other solutions encompassing the entire range of EHR requirements.

COMMITTEE RECOMMENDATION

The Committee recommends \$800,000,000 for the Veterans Electronic Health Record. This is \$18,000,000 above the fiscal year 2018 enacted level and \$407,000,000 below the budget request. In July 2017, the Secretary announced that Cerner Corporation, which had participated in the DOD EHR acquisition, had received

the sole source contract to develop the VA EHR. In support of this effort, the Committee appropriated \$782,000,000 in fiscal year 2018, with the expectation that award of a contract was imminent, however, execution of a contract became delayed, with the contract not being awarded until May 2018.

It is incumbent on the Department to present detailed justifications, including schedules and costs with any acquisition of this size and magnitude. Yet, the Department's justifications accompanying the budget submission lacked even the most basic of detail. While the Committee remains supportive of replacing the VA's current EHR with the same being acquired by DOD, the Department must address how delays in contracting, as well as slippage in timelines, including DOD's deployment schedule of MHS Genesis, will impact budgetary needs for fiscal year 2019 and beyond.

VA/DOD Interoperability.—As VA and DOD plan to deploy the same EHR, VA must remain committed to working towards assuring continued VA/DOD interoperability. The Committee directs VA and DOD to maintain clear and agreed-upon metrics and goals for interoperability, to establish clear timeframes for meeting those goals, to ensure clinician feedback is sought and considered as the respective electronic medical record systems are modernized, and to update the VA/DOD Interagency Program Office guidance to reflect agreed-upon metrics and goals. The need for well-functioning, up-to-date electronic health record technology is absolutely critical.

OFFICE OF INSPECTOR GENERAL

Appropriations, 2018	\$164,000,000
Budget estimate, 2019	172,054,000
Committee recommendation	192,000,000

PROGRAM DESCRIPTION

The Office of Inspector General [OIG] was established by the Inspector General Act of 1978 and is responsible for the audit, investigation, and inspection of all Department of Veterans Affairs programs and operations.

COMMITTEE RECOMMENDATION

The Committee recommends \$192,000,000 for the Office of Inspector General. This is \$28,000,000 above the fiscal year 2018 enacted level and \$19,946,000 above the budget request. The Committee has included bill language to make available through September 30, 2020, up to 10 percent of the Office of the Inspector General appropriation.

CONSTRUCTION, MAJOR PROJECTS

Appropriations, 2018	\$512,430,000
Budget estimate, 2019	1,127,486,000
Committee recommendation	1,127,486,000

PROGRAM DESCRIPTION

The Construction, Major Projects account provides for constructing, altering, extending, and improving any of the facilities (including parking projects) under the jurisdiction or for the use of VA, including planning, architectural and engineering services,

needs assessment, and site acquisition where the estimated cost of a project is more than the amount set forth in 38 U.S.C. 8104(a)(3)(A). Proceeds realized from Enhanced Use Lease activities may be deposited into the Construction, Major Projects and Construction, Minor Projects accounts.

COMMITTEE RECOMMENDATION

The Committee recommends an appropriation of \$1,127,486,000 for the construction of major projects. This is \$615,056,000 above the fiscal year 2018 enacted level and equal the budget request.

The following table reflects the President's budget request for major construction projects and the corresponding Committee recommendations.

MAJOR CONSTRUCTION PROJECTS

[In thousands of dollars]

Location and description	Fiscal year 2019 budget request	Committee recommendation
Veterans Health Administration [VHA]:		
St. Louis (JB), MO: Medical Facility Improvements and Cemetery Expansion	34,400	34,400
Canandaigua, NY: Construction and Renovation	190,000	190,000
Dallas, TX: Spinal Cord Injury	135,686	135,686
North Chicago, IL: Renovate Building 4	6,000	6,000
Oklahoma City, OK: New Surgical Intensive Care Unit	10,800	10,800
Advance Planning Fund	95,000	95,000
Asbestos	15,000	15,000
Major Construction Staff	27,500	27,500
Hazardous Waste	26,200	26,200
Judgment Fund	25,000	25,000
Non-Departmental Federal Entity Project Management Support	38,700	38,700
Seismic Corrections Initiative	400,000	400,000
Total VHA	1,004,286	1,004,286
National Cemetery Administration [NCA]:		
Ohio Western Reserve, OH: Gravesite Expansion, Phase 3	29,000	29,000
Great Lakes, MI: Gravesite Expansion, Phase 2	35,200	35,200
Cape Canaveral, FL: Gravesite Expansion Phase 2	38,000	38,000
Advance Planning Fund	10,000	10,000
NCA Land Acquisition Fund	5,000	5,000
Total NCA	117,200	117,200
General Administration—Staff Offices, Advance Planning Fund	6,000	6,000
Total Construction, Major Projects	1,127,486	1,127,486

CONSTRUCTION, MINOR PROJECTS

Appropriations, 2018 ¹	\$342,570,000
Budget estimate, 2019	706,889,000
Committee recommendation	706,889,000

¹ Total excludes \$4,088,000 in emergency funding provided in Public Law 115–123, the Further Additional Supplemental Appropriations for Disaster Relief Requirements Act, 2018.

PROGRAM DESCRIPTION

The Construction, Minor Projects account provides for constructing, altering, extending, and improving any of the facilities (including parking) under the jurisdiction or for the use of VA, including planning, assessment of needs, architectural and engineer-

ing services, and site acquisition, where the estimated cost of a project is equal to or less than \$20,000,000. Public Law 106–117, the Veterans Millennium Health Care and Benefits Act of 1999, gave VA authority to make capital contributions from minor construction in enhanced-use leases. Proceeds realized from enhanced-use lease activities may be deposited into the Construction, Major Projects and Construction, Minor Projects accounts.

COMMITTEE RECOMMENDATION

The Committee recommends \$706,889,000 for minor construction. This is \$364,319,000 above the fiscal year 2018 enacted level and equal to the budget request.

The recommendation includes \$449,149,000 for the Veterans Health Administration, \$171,820,000 for the National Cemetery Administration, \$46,820,000 for the Veterans Benefits Administration, and \$39,100,000 for staff offices and the Office of Information Technology. The Department is directed to provide an expenditure plan to the Committees on Appropriations of both Houses of Congress no later than 30 days after enactment of this act for the amount appropriated for minor construction.

GRANTS FOR CONSTRUCTION OF STATE EXTENDED CARE FACILITIES

Appropriations, 2018	\$110,000,000
Budget estimate, 2019	150,000,000
Committee recommendation	150,000,000

PROGRAM DESCRIPTION

This account is used to provide grants to assist States in acquiring or constructing State home facilities for furnishing domiciliary or nursing home care to veterans, and to expand, remodel, or alter existing buildings for furnishing domiciliary, nursing home, or hospital care to veterans in State homes. The grant may not exceed 65 percent of the total cost of the project. Public Law 102–585 granted permanent authority for this program, and Public Law 106–117 provided greater specificity in directing VA to prescribe regulations for the number of beds for which grant assistance may be furnished. This program has been a successful partnership between States and VA in meeting the long-term care needs of elderly veterans for decades.

COMMITTEE RECOMMENDATION

The Committee recommends \$150,000,000 for Grants for construction of State extended care facilities. This is equal to the budget request.

State Extended Care Facility Construction.—The Committee is concerned that VA continues to approve new grants for State home construction projects without adequate resources to fulfill the Federal cost share. In fiscal year 2018, VA budgeted only \$90,000,000 towards an outstanding list of 57 approved projects in 25 States valued at \$639,000,000. Recognizing this disparity, the Congress provided a one-time appropriation of \$575,000,000 in fiscal year 2018 to assist VA in resolving its backlog. The Committee directs VA to provide an update within 180 days of enactment of this act on the execution of those funds, that specifically addresses the pro-

jected schedule of execution by priority group, including estimated completion dates for each project, as well as actions the Department will take to prevent future backlogs.

GRANTS FOR CONSTRUCTION OF VETERANS CEMETERIES

Appropriations, 2018	\$45,000,000
Budget estimate, 2019	45,000,000
Committee recommendation	45,000,000

PROGRAM DESCRIPTION

Public Law 105–368 amended title 38 U.S.C. 2408 and established authority to provide aid to States for establishment, expansion, and improvement of State veterans cemeteries, which are operated and permanently maintained by the States. This statutory change increased the maximum Federal share from 50 percent to 100 percent in order to fund construction costs and initial equipment expenses when the cemetery is established. States remain responsible for providing the land and for paying all costs related to operation and maintenance of the cemeteries, including the costs for subsequent equipment purchases.

COMMITTEE RECOMMENDATION

The Committee recommends \$45,000,000 for Grants for construction of State veterans cemeteries. This is equal to the budget request.

ADMINISTRATIVE PROVISIONS

(INCLUDING TRANSFERS AND RESCISSIONS OF FUNDS)

Sec. 201. The Committee includes a provision which outlines transfer authority and responsibilities for the Veterans Benefits Administration.

Sec. 202. The Committee includes a provision which outlines transfer authority and responsibilities for the Veterans Health Administration.

Sec. 203. The Committee includes a provision which outlines the use of funds appropriated for salaries and expenses.

Sec. 204. The Committee includes a provision mandating that only construction funds may be used for land procurement or the construction of any new hospital or home.

Sec. 205. The Committee includes a provision allowing for reimbursements to the Medical Services account.

Sec. 206. The Committee includes a provision allowing for payments of prior year obligations.

Sec. 207. The Committee includes a provision which allows for the use of funds for prior year obligations.

Sec. 208. The Committee includes a provision which allows for payments from the National Service Life Insurance Fund.

Sec. 209. The Committee includes a provision which outlines the use of funds from enhanced-use lease proceeds.

Sec. 210. The Committee includes a provision which provides for funds for the Office of Resolution Management, the Office of Employment Discrimination Complaint Adjudication, the Office of Ac-

accountability and Whistleblower Protection, and the Office of Diversity and Inclusion.

Sec. 211. The Committee includes a provision which requires disclosure of third-party reimbursement information.

Sec. 212. The Committee includes a provision which allows for the transfer of revenue derived from enhanced-use leases into the construction accounts.

Sec. 213. The Committee includes a provision which outlines authorized uses for Medical Services account funds.

Sec. 214. The Committee includes a provision which allows funds in the Medical Care Collection Fund to be transferred into the Medical Services and Medical Community Care accounts.

Sec. 215. The Committee includes a provision which allows eligible veterans in the State of Alaska to obtain medical care services.

Sec. 216. The Committee includes a provision which allows for the transfer of funds into the construction accounts.

Sec. 217. The Committee includes a provision requiring the Secretary of Veterans Affairs to submit quarterly financial reports.

Sec. 218. The Committee includes a provision outlining transfer authority for the Information Technology Systems account.

Sec. 219. The Committee includes a provision allowing for the transfer of funds from certain accounts to the Joint Department of Defense/Department of Veterans Affairs Medical Facility Demonstration Fund, as authorized by Public Law 111-84.

Sec. 220. The Committee includes a provision allowing for the transfer of funds from certain advance appropriation accounts to the Joint Department of Defense/Department of Veterans Affairs Medical Facility Demonstration Fund, as authorized by Public Law 111-84.

Sec. 221. The Committee includes a provision allowing for the transfer of certain funds deposited in the Medical Care Collections Fund to the Joint Department of Defense/Department of Veterans Affairs Medical Facility Demonstration Fund, as authorized by Public Law 111-84.

Sec. 222. The Committee includes a provision directing a minimum of \$15,000,000 be transferred from Medical Services, Medical Support and Compliance, and Medical Facilities to the Department of Defense/Department of Veterans Affairs Health Care Sharing Incentive Fund, as authorized by section 8111 of title 38, United States Code.

Sec. 223. The Committee includes a provision prohibiting funds available to the Department in this or any other act from being used to replace the current system by which VISNs select and contract for diabetes monitoring supplies and equipment.

Sec. 224. The Committee includes a provision requiring notification of all bid savings for major construction projects.

Sec. 225. The Committee includes a provision restricting scope increases for major construction projects above that specified in the original project justification.

Sec. 226. The Committee includes a provision requiring the Department to submit reports relating to the Veterans Benefits Administration on claims processing at Regional Offices.

Sec. 227. The Committee includes a provision requiring VA to notify the Committee 15 days prior to any organizational changes within VA of 25 or more FTE.

Sec. 228. The Committee includes a provision requiring the Secretary to report to the Committees each quarter about any single national outreach and awareness marketing campaign exceeding \$2,000,000.

Sec. 229. The Committee includes a provision permitting the transfer to the Medical Services account of fiscal year discretionary 2019 appropriated funds.

Sec. 230. The Committee includes a provision permitting the transfer of funds between GOE, VBA and BVA.

Sec. 231. The Committee includes a provision prohibiting the reprogramming of funds in excess of \$7,000,000 among major construction projects or programs.

Sec. 232. The Committee includes a provision mandating certain professional standards for the veterans crisis hotline.

Sec. 233. The Committee includes a provision restricting funds from being used to close certain medical facilities in the absence of a national realignment strategy.

Sec. 234. The Committee includes a provision requiring VA to use the mammography screening guidelines announced by the Secretary on May 10, 2017.

Sec. 235. The Committee includes a provision allowing the use of Medical Services funding for assisted reproductive technology treatment and adoption reimbursement for veterans and their spouses if the veteran has a service-connected disability that results in being unable to procreate without such fertility treatment.

Sec. 236. The Committee includes a provision rescinding funds.

Sec. 237. The Committee includes a provision prohibiting any funds to be used to contract out any functions performed by more than 10 employees without a fair competition process.

Sec. 238. The Committee includes a provision pertaining to Native Hawaiian small businesses.

Sec. 239. The Committee includes a provision directing the discontinuation of the usage of social security numbers with the Department of Veterans Affairs.

Sec. 240. The Committee includes a provision pertaining to the certification of marriage and family therapists.

Sec. 241. The Committee includes a provision prohibiting the transfer of funds from the Filipino Veterans Equity Compensation Fund to any other VA account.

Sec. 242. The Committee includes a provision regarding a childcare program.

Sec. 243. The Committee includes a reference to a provision in the 2017 appropriations act identifying information which may be used to verify the status of coastwise merchant seamen who served during World War II for the purposes of eligibility for medals, ribbons, or other military decorations.

Sec. 244. The Committee includes a provision ensuring particular ratios of veterans to full-time employment equivalents within any VA program of rehabilitation.

Sec. 245. The Committee includes a provision prohibiting funds to be used to restrict an individual's ability to speak with a Member of Congress or his or her staff.

Sec. 246. The Committee includes a provision requiring certain data to be included in the budget justifications for the Construction, Major account.

Sec. 247. The Committee includes a provision prohibiting the use of canines in VA research unless: the scientific objectives of the study can only be met by using canines; the study has been directly approved by the Secretary; and the study is consistent with the revised VA canine research policy document released in December, 2017.

Sec. 248. The Committee includes a provision providing \$2,000,000,000 to be available until expended for VA infrastructure needs, of which \$1,000,000,000 is for Medical Facilities for non-recurring maintenance; \$500,000,000 is for Minor Construction; and \$500,000,000 is for Major Construction. This funding is not made available until VA provides and the Committees approve a detailed expenditure plan.

Sec. 249. The Committee includes a provision prohibiting the use of funds to interfere with the ability of veterans to participate in State-approved medicinal marijuana programs or deny service to such veterans.

TITLE III
RELATED AGENCIES

AMERICAN BATTLE MONUMENTS COMMISSION

OVERVIEW

The American Battle Monuments Commission [ABMC] was established by Congress in 1923 and is responsible for the following: designing, constructing, operating, and maintaining permanent American cemeteries in foreign countries; establishing and maintaining U.S. military memorials, monuments, and markers where American Armed Forces have served overseas since April 6, 1917, the date of the United States entry into World War I, and within the United States when directed by public law; and controlling the design and construction of permanent U.S. military monuments and markers by other U.S. citizens and organizations, both public and private, and encouraging their maintenance. ABMC administers, operates, and maintains 26 permanent American military cemeteries, 29 Federal memorial, monuments, and markers, and 8 non-Federal memorials located in 15 foreign countries, the U.S. Commonwealth of the Northern Mariana Islands, the British Dependency of Gibraltar, and the United States of America.

SALARIES AND EXPENSES

Appropriations, 2018	\$79,000,000
Budget estimate, 2019	75,100,000
Committee recommendation	81,000,000

COMMITTEE RECOMMENDATION

The Committee recommends \$81,000,000 for the Salaries and Expenses account. This amount is \$2,000,000 above the fiscal year 2018 enacted level and \$5,900,000 above the budget request. The recommendation includes an additional \$5,900,000 to bolster the Commission's maintenance and infrastructure program, including the interpretive program. The additional funds will restore the reduction proposed in the budget request for this program and provide additional funds to accelerate the Commission's 5-year plan, not only to maintain the cemeteries and monuments honoring America's war dead, but also to preserve and communicate these veterans' stories of courage and sacrifice.

Nisei Veterans.—The Committee recognizes the legacy of the 100th Infantry Battalion which, with the 442nd Regiment and Military Intelligence Service, became one the most decorated military units of the Second World War. The Committee is aware of the existence of exhibits and memorials dedicated to the 100th Infantry Battalion/442nd Regiment. However, the Committee believes it is

increasingly important to memorialize the important part they, and all Nisei veterans, have played in our country's history.

Not later than 90 days after enactment of this act, the American Battle Monuments Commission shall conduct a feasibility study to determine the viability of establishing a national memorial in recognition of the 100th Infantry Battalion/442nd Regiment. In conducting the feasibility study, ABMC shall consider the importance of telling the story of the 100th Infantry Battalion/442nd Regiment in the context of the contributions of all Nisei veterans and associated units during the Second World War, and the ability to adequately reach audiences, including Americans of Japanese ancestry, with the story of these Nisei veterans through existing exhibits and memorials.

National Memorial Cemetery of the Pacific Visitor Center.—The Committee is aware that the American Battle Monuments Commission prepared preliminary designs for a new visitors center at the National Memorial Cemetery of the Pacific, also known as the "Punchbowl." The Committee understands that the Punchbowl is the resting place of more than 13,000 Soldiers and sailors who died during the Second World War and that a new visitor center would enhance the story of Pacific Theatre of the Second World War by giving context to the headstones and columbaria through interpretive exhibits and other displays. Not later than 90 days after enactment of this act, the Committee directs the American Battle Monuments Commission to report on the status of this project, including what, if any, funding has been programmed in its future years' budgets.

FOREIGN CURRENCY FLUCTUATIONS

The Committee includes in the accompanying act, as proposed by the administration, such sums as necessary for the Foreign Currency Fluctuations account. Funding the account in this manner allows the Commission to maintain cemeteries regardless of the volatility of foreign currency fluctuations.

UNITED STATES COURT OF APPEALS FOR VETERANS CLAIMS

OVERVIEW

The United States Court of Appeals for Veterans Claims was established by the Veterans' Judicial Review Act of 1988. The Court is an independent judicial tribunal with exclusive jurisdiction to review decisions of the Board of Veterans Appeals. It has the authority to decide all relevant questions of law; interpret constitutional, statutory, and regulatory provisions; and determine the meaning or applicability of the terms of an action by the Secretary of Veterans Affairs. It is authorized to compel action by the Secretary. It is authorized to hold unconstitutional or otherwise unlawful and set aside decisions, findings, conclusions, rules, and regulations issued or adopted by the Secretary of Veterans Affairs, the Board of Veterans Appeals, or the Chairman of the Board that are found to be arbitrary or capricious. The Court's principal office location is Washington, DC; however, it is a national court, empowered to sit anywhere in the United States.

SALARIES AND EXPENSES

Appropriations, 2018	\$33,600,000
Budget estimate, 2019	107,455,000
Committee recommendation	34,955,000

COMMITTEE RECOMMENDATION

The Committee recommends \$34,955,000 for the U.S. Court of Appeals for Veterans Claims. This amount is \$1,355,000 above the fiscal year 2018 enacted level and \$72,500,000 below the budget request. Public Law 115–141 included funding for a feasibility study regarding a new courthouse. This study is not complete, therefore, the Committee does not include the funds requested for a new courthouse.

DEPARTMENT OF DEFENSE—CIVIL

CEMETERIAL EXPENSES, ARMY

OVERVIEW

The Secretary of the Army is responsible for the administration, operation, and maintenance of Arlington National Cemetery [ANC] and the Soldiers' and Airmen's Home National Cemetery. In addition to its principal function as a national cemetery, Arlington hosts more than 3,000 public wreath laying ceremonies, approximately 100 distinguished visitor honors wreath laying ceremonies, and approximately 4,000,000 visitors annually.

SALARIES AND EXPENSES

Appropriations, 2018	\$80,800,000
Budget estimate, 2019	70,800,000
Committee recommendation	80,800,000

COMMITTEE RECOMMENDATION

The Committee recommends \$80,800,000 for the Salaries and Expenses account. This amount is equal to the fiscal year 2018 enacted level and \$10,000,000 above the budget request.

The Committee remains concerned that ANC's operating account has been held artificially flat for a number of years, and this action is beginning to have deleterious effects on the Cemetery's performance and ability to meet its mission.

Arlington performs over 7,000 burial services each year for veterans and family members and an average of 27–30 each weekday. With this heavy workload, ANC cannot be under-resourced, and accordingly, the Committee has provided an additional \$10,000,000 to correct this problem.

This Committee remains unwavering in its support for the Cemetery and the successful completion of the Cemetery's truly unique and honored mission. Accordingly, the Secretary of the Army is again directed to include this increase in the Cemetery's baseline budget and ensure future budget requests provide ample resources for Arlington National Cemetery.

CONSTRUCTION

Appropriations, 2018	\$167,000,000
Budget estimate, 2019	
Committee recommendation, 2019	56,600,000

ARMED FORCES RETIREMENT HOME

TRUST FUND

OVERVIEW

Appropriations, 2018	\$64,300,000
Budget estimate, 2019	64,300,000
Committee recommendation	64,300,000

COMMITTEE RECOMMENDATION

The Committee recommends authority to expend \$64,300,000 from the Armed Forces Retirement Home Trust Fund to operate and maintain the Armed Forces Retirement Home—Washington, DC, and the Armed Forces Retirement Home—Gulfport, Mississippi.

ADMINISTRATIVE PROVISION

Sec. 301. The Committee includes a provision making available funds as authorized by 10 U.S.C. 4727.

TITLE IV
OVERSEAS CONTINGENCY OPERATIONS
DEPARTMENT OF DEFENSE

The Committee recommends title IV, Overseas Contingency Operations, for military construction projects related to the Global War on Terrorism and the European Reassurance Initiative that were requested by the Administration in the Fiscal Year 2019 Overseas Contingency Operations budget request.

MILITARY CONSTRUCTION, ARMY

The Committee recommends \$192,250,000 for “Military Construction, Army”, as requested in the Fiscal Year 2019 Overseas Contingency Operations budget request, for military construction and planning and design in support of Overseas Contingency Operations and the European Reassurance Initiative.

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

The Committee recommends \$227,320,000 for “Military Construction, Navy and Marine Corps”, as requested in the Fiscal Year 2019 Overseas Contingency Operations budget request, for military construction and planning and design in support of the European Reassurance Initiative.

MILITARY CONSTRUCTION, AIR FORCE

The Committee recommends \$414,800,000 for “Military Construction, Air Force”, as requested in the Fiscal Year 2019 Overseas Contingency Operations budget request, for military construction and planning and design in support of Overseas Contingency Operations and the European Reassurance Initiative.

MILITARY CONSTRUCTION, DEFENSE-WIDE

The Committee recommends \$87,050,000 for “Military Construction, Defense-Wide”, as requested in the Fiscal Year 2019 Overseas Contingency Operations budget request, for planning and design in support of the European Reassurance Initiative.

ADMINISTRATIVE PROVISIONS

SEC. 401. The Committee includes a provision which provides the contingent emergency designation for the Overseas Contingency Operations accounts.

SEC. 402. The agreement includes section 402 which requires the Department of Defense to provide a future year defense program

for European Deterrence/Reassurance Initiative to the congressional defense committees.

TITLE V

GENERAL PROVISIONS

Sec. 501. The Committee includes a provision that prohibits the obligation of funds beyond the current fiscal year unless expressly so provided.

Sec. 502. The Committee includes a provision that prohibits the use of funds for programs, projects, or activities not in compliance with Federal law relating to risk assessment, the protection of private property rights, or unfunded mandates.

Sec. 503. The Committee includes a provision that encourages the expansion of E-commerce technologies and procedures.

Sec. 504. The Committee includes a provision that specifies the congressional committees that are to receive all reports and notifications.

Sec. 505. The Committee includes a provision that limits funds from being transferred from this appropriations measure to any instrumentality of the United States Government without authority from an appropriations act.

Sec. 506. The Committee includes a provision regarding the posting of congressional reports on agency Web sites.

Sec. 507. The Committee includes a provision prohibiting the use of funds to establish or maintain a computer network unless such network blocks the viewing, downloading, and exchanging of pornography, except for law enforcement investigation, prosecution, or adjudication activities.

Sec. 508. The Committee includes a provision prohibiting the use of funds for the payment of first-class travel by an employee of the executive branch.

Sec. 509. The Committee includes a provision prohibiting the use of funds in this act for any contract where the contractor has not complied with E-Verify requirements.

Sec. 510. The Committee includes a provision 511 prohibiting the use of funds in this act by the Department of Defense or the Department of Veterans Affairs for the purchase or lease of a new vehicle except in accordance with Presidential Memorandum—Federal Fleet Performance, dated May 24, 2011.

Sec. 511. The Committee includes a provision limiting the construction of facilities in the United States, its territories, or possessions for the purposes of housing individuals detained at Guantánamo Bay, Cuba.

PROGRAM, PROJECT, AND ACTIVITY

In fiscal year 2019, for purposes of the Balanced Budget and Emergency Deficit Control Act of 1985 (Public Law 99–177) or the Balanced Budget and Emergency Deficit Control Reaffirmation Act of 1987 (Public Law 100–119), the following information provides the definition of the term “program, project, and activity” for departments, agencies and programs under the jurisdiction of the Military Construction and Veterans Affairs, and Related Agencies subcommittee. The term “program, project, and activity” shall include the most specific level of budget items identified in the Military Construction, Veterans Affairs, and Related Agencies Appropriations Act, 2019, the House and Senate Committee reports, and the conference report and accompanying joint explanatory statement of managers of the committee of conference.

If a sequestration order is necessary, in implementing the Presidential order, departments, and agencies shall apply any percentage reduction required for fiscal year 2019 pursuant to the provisions of Public Law 99–177 or Public Law 100–119 to all items specified in the justifications submitted to the Committees on Appropriations of the Senate and House of Representatives in support of the fiscal year 2019 budget estimates, as amended, for such departments and agencies, as modified by congressional action, and in addition, for the Department of Defense, Military Construction, the definition shall include specific construction locations as identified in the explanatory notes.

COMPLIANCE WITH PARAGRAPH 7, RULE XVI, OF THE STANDING RULES OF THE SENATE

Paragraph 7 of rule XVI requires that Committee reports accompanying general appropriations bills identify each recommended amendment which proposes an item of appropriation which is not made to carry out the provisions of an existing law, a treaty stipulation, or an act or resolution previously passed by the Senate during that session.

The Committee recommends funding for the following programs which currently lack authorization:

Title I: Department of Defense

- Military Construction, Army
- Military Construction, Navy and Marine Corps
- Military Construction, Air Force
- Military Construction, Defense-Wide
- Military Construction, Army National Guard
- Military Construction, Air National Guard
- Military Construction, Army Reserve
- Military Construction, Navy Reserve
- Military Construction, Air Force Reserve

North Atlantic Treaty Organization Security Investment Program

Department of Defense Base Closure Account

Family Housing Operation and Maintenance, Army

Family Housing Operation and Maintenance, Navy and Marine Corps

Family Housing Operation and Maintenance, Air Force

Family Housing Operation and Maintenance, Defense-Wide

Family Housing Construction, Army

Family Housing Construction, Navy and Marine Corps

Family Housing Construction, Air Force

Department of Defense Family Housing Improvement Fund

Department of Defense Military Unaccompanied Housing Improvement Fund

Title II: Department of Veterans Affairs

Veterans Benefits Administration

Veterans Health Administration

National Cemetery Administration

Departmental Administration

Title III: Related Agencies

American Battle Monuments Commission

U.S. Court of Appeals for Veterans Claims

Cemeterial Expenses, Army

Armed Forces Retirement Home

COMPLIANCE WITH PARAGRAPH 7(c), RULE XXVI OF THE
STANDING RULES OF THE SENATE

Pursuant to paragraph 7(c) of rule XXVI, on June 7, 2018, the Committee ordered favorably reported a bill (S. 3024) making appropriations for military construction, the Department of Veterans Affairs, and related agencies for the fiscal year ending September 30, 2019, and for other purposes, provided, that the bill be subject to amendment and that the bill be consistent with its budget allocation, and provided that the Chairman of the Committee or his designee be authorized to offer the substance of the original bill as a Committee amendment in the nature of a substitute to the House companion measure, by a recorded vote of 31–0, a quorum being present. The vote was as follows:

Yeas	Nays
Chairman Shelby	
Mr. McConnell	
Mr. Alexander	
Ms. Collins	
Ms. Murkowski	
Mr. Graham	
Mr. Blunt	
Mr. Moran	
Mr. Hoeven	
Mr. Boozman	
Mrs. Capito	
Mr. Lankford	
Mr. Daines	
Mr. Kennedy	
Mr. Rubio	
Mrs. Hyde-Smith	
Mr. Leahy	
Mrs. Murray	
Mrs. Feinstein	
Mr. Durbin	
Mr. Reed	
Mr. Tester	
Mr. Udall	
Mrs. Shaheen	
Mr. Merkley	
Mr. Coons	
Mr. Schatz	
Ms. Baldwin	
Mr. Murphy	
Mr. Manchin	
Mr. Van Hollen	

COMPLIANCE WITH PARAGRAPH 12, RULE XXVI OF THE
STANDING RULES OF THE SENATE

Paragraph 12 of rule XXVI requires that Committee reports on a bill or joint resolution repealing or amending any statute or part of any statute include “(a) the text of the statute or part thereof which is proposed to be repealed; and (b) a comparative print of that part of the bill or joint resolution making the amendment and of the statute or part thereof proposed to be amended, showing by stricken-through type and italics, parallel columns, or other appropriate typographical devices the omissions and insertions which would be made by the bill or joint resolution if enacted in the form recommended by the committee.”

In compliance with this rule, changes in existing law proposed to be made by the bill are shown as follows: existing law to be omitted is enclosed in black brackets; new matter is printed in italic; and existing law in which no change is proposed is shown in roman.

**CONSOLIDATED APPROPRIATIONS ACT, 2018,
PUBLIC LAW 115-141**

DIVISION J—MILITARY CONSTRUCTION, VETERANS AF-
FAIRS, AND RELATED AGENCIES APPROPRIATIONS ACT,
2018

* * * * *

TITLE II

DEPARTMENT OF VETERANS AFFAIRS

ADMINISTRATIVE PROVISIONS

* * * * *

【(INCLUDING TRANSFER OF FUNDS)】

SEC. 220. Of the amounts appropriated to the Department of Veterans Affairs which become available on October 1, 2018, for “Medical Services”, “Medical Community Care”, “Medical Support and Compliance”, and “Medical Facilities”, up to \$306,378,000, plus reimbursements, may be transferred to the Joint Department of Defense—Department of Veterans Affairs Medical Facility Demonstration Fund, established by section 1704 of the National Defense Authorization Act for Fiscal Year 2010 (Public Law 111-84; 123 Stat. 3571) and may be used for operation of the facilities designated as combined Federal medical facilities as described by section 706 of the Duncan Hunter National Defense Authorization Act for Fiscal Year 2009 (Public Law 110-417; 122 Stat. 4500): *Provided*, That additional funds may be transferred from accounts designated in this section to the Joint Department of Defense—Department of Veterans Affairs Medical Facility Demonstration Fund upon written notification by the Secretary of Veterans Affairs to the Committees on Appropriations of both Houses of Congress.】 *Repealed.*

BUDGETARY IMPACT OF BILL

PREPARED IN CONSULTATION WITH THE CONGRESSIONAL BUDGET OFFICE PURSUANT TO SEC.
308(a), PUBLIC LAW 93-344, AS AMENDED

[In millions of dollars]

	Budget authority		Outlays	
	Committee allocation	Amount in bill	Committee allocation	Amount in bill
Comparison of amounts in the bill with the subcommittee allocation for 2019: Subcommittee on Military Construction and Veterans Affairs, and Related Agencies:				
Mandatory	109,472	109,472	109,086	¹ 109,086
Discretionary	97,086	98,007	90,261	¹ 90,261
Security	10,319	11,240	NA	NA
Nonsecurity	86,767	86,767	NA	NA
Projections of outlays associated with the recommendation:				
2019 .....	.....	.....	.....	² 114,799
2020 .....	.....	.....	.....	5,486
2021 .....	.....	.....	.....	5,216
2022 .....	.....	.....	.....	3,202
2023 and future years .....	.....	.....	.....	3,590
Financial assistance to State and local governments for 2019	NA	277	NA	² 59

¹ Includes outlays from prior-year budget authority.

² Excludes outlays from prior-year budget authority.

NA: Not applicable.

NOTE.—Consistent with the funding recommended in the bill for overseas contingency operations and in accordance with subparagraph (A)(ii) of section 251(b)(2) of the BBEDCA of 1985, the Committee anticipates that the Budget Committee will provide, at the appropriate time, a 302(a) allocation for the Committee on Appropriations reflecting an upward adjustment of \$921,000,000 in budget authority plus the associated outlays.

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
ALABAMA			
ARMY:			
ANNISTON ARMY DEPOT:			
WEAPON MAINTENANCE SHOP	5,200	5,200	.....
TOTAL, ALABAMA	5,200	5,200	.....
ALASKA			
AIR FORCE:			
EIELSON AFB:			
F-35 AIRCRAFT MAINTENANCE UNIT ADMIN FACILITY	6,800	6,800	.....
F-35 CONVENTIONAL MUNITIONS MAINTENANCE FACILITY	15,500	15,500	.....
F-35A CATM RANGE	19,000	19,000	.....
F-35A SCHOOL AGE FACILITY	22,500	22,500	.....
DEFENSE-WIDE:			
CLEAR AFS:			
LONG RANGE DISCRIM RADAR SYS COMPLEX PHASE 2	174,000	174,000	.....
FORT GREELY:			
MISSILE FIELD #1 EXPANSION	8,000	8,000	.....
JOINT BASE ELMENDORF-RICHARDSON:			
OPERATIONS FACILITY REPLACEMENT	14,000	14,000	.....
ARMY NATIONAL GUARD:			
JOINT BASE ELMENDORF-RICHARDSON:			
UNITED STATES PROPERTY & FISCAL OFFICE	27,000	27,000	.....
TOTAL, ALASKA	286,800	286,800	.....
ARIZONA			
AIR FORCE:			
LUKE AFB:			
F-35A AIRCRAFT MAINTENANCE UNIT FACILITY	23,000	23,000	.....
F-35A SQUAD OPS #6	17,000	17,000	.....
TOTAL, ARIZONA	40,000	40,000	.....
ARKANSAS			
DEFENSE-WIDE:			
LITTLE ROCK AFB:			
HYDRANT FUEL SYSTEM ALTERATIONS	14,000	14,000	.....
TOTAL, ARKANSAS	14,000	14,000	.....
CALIFORNIA			
ARMY:			
FORT IRWIN:			
MULTIPURPOSE RANGE COMPLEX	29,000	29,000	.....
NAVY			
CAMP PENDLETON:			
AAV-ACV MAINTENANCE & WAREHOUSE FACILITY	49,410	49,410	.....
ELECTRICAL UPGRADES	4,020	4,020	.....
FULL MOTION TRAINER FACILITY	10,670	10,670	.....
POTABLE WATER DISTRIBUTION IMPROVEMENTS	47,230	47,230	.....
CORONADO:			
CMV-22B AIRFIELD IMPROVEMENTS	77,780	77,780	.....
LEMOORE:			
F-35 MAINTENANCE HANGAR	112,690	112,690	.....

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
MIRAMAR:			
AIRFIELD SECURITY IMPROVEMENTS	11,500	11,500	.....
F-35 VERTICAL LANDING PADS AND TAXIWAY	20,480	20,480	.....
POINT MUGU:			
DIRECTED ENERGY SYSTEMS INTERGRATION LAB	22,150	22,150	.....
SAN DIEGO:			
HARBOR DRIVE SWITCHING STATION	48,440	48,440	.....
PIER 8 REPLACEMENT	108,100	108,100	.....
SAN NICOLAS ISLAND:			
MISSILE ASSEMBLY BUILD & HIGH EXPLOSIVE MAGAZINE	31,010	31,010	.....
SEAL BEACH:			
CAUSEWAY, BOAT CHANNEL & TURNING BASIN	117,830	60,000	- 57,830
DEFENSE-WIDE:			
CAMP PENDLETON:			
SOF EOD FACILITY—WEST	3,547	3,547	.....
SOF HUMAN PERFORMANCE TRAINING CENTER—WEST	9,049	9,049	.....
CORONADO:			
SOF ATC APPLIED INSTRUCTION FACILITY	14,819	14,819	.....
SOF ATC TRAINING FACILITY	18,329	18,329	.....
SOF CLOSE QUARTERS COMBAT FACILITY	12,768	12,768	.....
SOF NSWG-1 OPERATIONS SUPPORT FACILITY	25,172	25,172	.....
DEFENSE DISTRIBUTION DEPOT-TRACY			
MAIN ACCESS CONTROL POINT UPGRADES	18,800	18,800	.....
AIR NATIONAL GUARD:			
CHANNEL ISLANDS ANGCS:			
CONSTRUCT C-130J FLIGHT SIMULATOR FACILITY	8,000	8,000	.....
ARMY RESERVE:			
BARSTOW:			
ECS MODIFIED TEMF / WAREHOUSE	34,000	34,000	.....
NAVY RESERVE:			
SEAL BEACH:			
RESERVE TRAINING CENTER	21,740	21,740	.....
TOTAL, CALIFORNIA	856,534	798,704	- 57,830
COLORADO			
ARMY:			
FORT CARSON:			
VEHICLE MAINTENANCE SHOP	77,000	77,000	.....
DEFENSE-WIDE:			
FORT CARSON:			
SOF HUMAN PERFORMANCE TRAINING CENTER	15,297	15,297	.....
SOF MOUNTAINEERING FACILITY	9,000	9,000	.....
TOTAL, COLORADO	101,297	101,297	.....
DISTRICT OF COLUMBIA			
NAVY:			
NAVAL OBSERVATORY:			
MASTER TIME CLOCKS & OPERATIONS FACILITY	115,600	40,000	- 75,600
TOTAL, DISTRICT OF COLUMBIA	115,600	40,000	- 75,600
FLORIDA			
NAVY:			
MAYPORT:			
LCS OPERATIONAL TRAINING FACILITY ADDITION	29,110	29,110	.....
LCS SUPPORT FACILITY	82,350	82,350	.....

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
AIR FORCE:			
EGLIN AFB:			
F-35A INTEGRATED TRNG CENTER ACADEMICS BLDG	34,863	34,863	.....
F-35A STUDENT DORMITORY II	28,000	28,000	.....
MACDILL AFB:			
KC135 BEDDOWN ADD FLIGHT SIMULATOR TRAINING	3,100	3,100	.....
TOTAL, FLORIDA	177,423	177,423	.....
GEORGIA			
ARMY:			
FORT GORDON:			
CYBER INSTRUCTIONAL FAC AND NETWORK CTR	99,000	99,000	.....
NAVY RESERVE:			
BENNING:			
RESERVE TRAINING CENTER	13,630	13,630	.....
TOTAL, GEORGIA	112,630	112,630	.....
HAWAII			
ARMY:			
FORT SHAFTER:			
COMMAND AND CONTROL FACILITY, INCR 4	105,000	105,000	.....
NAVY:			
JOINT BASE PEARL HARBOR-HICKAM:			
DRYDOCK WATERFRONT FACILITY	45,000	45,000	.....
KANEHOE BAY:			
CORROSION CONTROL HANGAR	66,100	66,100	.....
PEARL CITY:			
WATER TRANSMISSION LINE:	78,320	78,320	.....
AIR NATIONAL GUARD:			
JOINT BASE PEARL HARBOR-HICKAM:			
CONSTRUCT ADDITION TO F-22 LO/CRF B3408	17,000	17,000	.....
TOTAL, HAWAII	311,420	311,420	.....
ILLINOIS			
ARMY NATIONAL GUARD:			
MARSEILLES:			
AUTOMATED RECORD FIRE RANGE	5,000	5,000	.....
AIR NATIONAL GUARD:			
GREATER PEORIA REGIONAL AIRPORT:			
CONSTRUCT NEW FIRE CRASH/RESCUE STATION	9,000	9,000	.....
TOTAL, ILLINOIS	14,000	14,000	.....
INDIANA			
ARMY:			
CRANE ARMY AMMUNITION PLANT:			
RAILCAR HOLDING AREA	16,000	16,000	.....
AIR FORCE RESERVE:			
GRISSOM ARB:			
ADD/ALTER AIRCRAFT MAINTENANCE HANGAR	12,100	12,100	.....
TOTAL, INDIANA	28,100	28,100	.....
KENTUCKY			
ARMY:			
FORT CAMPBELL:			
VEHICLE MAINTENANCE SHOP	32,000	32,000	.....

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
FORT KNOX: DIGITAL AIR/GROUND INTEGRATION RANGE	26,000	26,000	.....
DEFENSE-WIDE: FORT CAMPBELL: FT CAMPBELL MIDDLE SCHOOL	62,634	62,634	.....
SOF AIR/GROUND INTEG. URBAN LIVE FIRE RANGE	9,091	9,091	.....
SOF LOGISTICS SUPPORT OPERATIONS FACILITY	5,435	5,435	.....
SOF MULTI-USE HELICOPTER TRAINING FACILITY	5,138	5,138	.....
TOTAL, KENTUCKY	140,298	140,298	.....
LOUISIANA			
AIR NATIONAL GUARD: NEW ORLEANS: NORTHCOM—CONSTRUCT ALERT APRON	15,000	15,000	.....
TOTAL, LOUISIANA	15,000	15,000	.....
MAINE			
NAVY: KITTERY: DRY DOCK #1 SUPERFLOOD BASIN	109,960	109,960	.....
EXTEND PORTAL CRANE RAIL	39,725	39,725	.....
DEFENSE-WIDE: KITTERY: CONSOLIDATED WAREHOUSE REPLACEMENT	11,600	11,600	.....
TOTAL, MAINE	161,285	161,285	.....
MARYLAND			
AIR FORCE: JOINT BASE ANDREWS: PAR RELOCATE HAZ CARGO PAD AND EOD RANGE	37,000	37,000	.....
PRESIDENTIAL AIRCRAFT RECAP COMPLEX, INC. 2	154,000	129,116	- 24,884
DEFENSE-WIDE: FORT MEADE: MISSION SUPPORT OPERATIONS WAREHOUSE FACILITY	30,000	30,000	.....
NSAW RECAPITALIZE BUILDING #2 INC 4	218,000	218,000	.....
NSAW RECAPITALIZE BUILDING #3 INC 1	99,000	99,000	.....
TOTAL, MARYLAND	538,000	513,116	- 24,884
MASSACHUSETTS			
AIR FORCE: HANSCOM AFB: MIT—LINCOLN LABORATORY (WEST LAB CSL/MIF)	225,000	90,000	- 135,000
TOTAL, MASSACHUSETTS	225,000	90,000	- 135,000
MINNESOTA			
AIR FORCE RESERVE: MINNEAPOLIS-ST PAUL IAP: SMALL ARMS RANGE	9,000	9,000	.....
TOTAL, MINNESOTA	9,000	9,000	.....
MISSISSIPPI			
AIR FORCE RESERVE: KEESLER AFB: AEROMEDICAL STAGING SQUADRON FACILITY	4,550	4,550	.....

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
TOTAL, MISSISSIPPI	4,550	4,550	.....
MISSOURI			
DEFENSE-WIDE:			
ST LOUIS:			
NEXT NGA WEST (N2W) COMPLEX PHASE 1 INC. 2	213,600	181,600	— 32,000
NEXT NGA WEST (N2W) COMPLEX PHASE 2 INC. 1	110,000	110,000	.....
TOTAL, MISSOURI	323,600	291,600	— 32,000
MONTANA			
ARMY NATIONAL GUARD:			
MALTA:			
NATIONAL GUARD READINESS CENTER	15,000	15,000	.....
TOTAL, MONTANA	15,000	15,000	.....
NEBRASKA			
AIR FORCE:			
OFFUTT AFB:			
PARKING LOT, USSTRATCOM	9,500	9,500	.....
TOTAL, NEBRASKA	9,500	9,500	.....
NEVADA			
AIR FORCE:			
CREECH AFB:			
MQ-9 CPIP GCS OPERATIONS FACILITY	28,000	28,000	.....
MQ-9 CPIP OPERATIONS & COMMAND CENTER FAC	31,000	31,000	.....
NELLIS AFB:			
CRH SIMULATOR	5,900	5,900	.....
ARMY NATIONAL GUARD:			
NORTH LAS VEGAS:			
NATIONAL GUARD READINESS CENTER	32,000	32,000	.....
TOTAL, NEVADA	96,900	96,900	.....
NEW HAMPSHIRE			
ARMY NATIONAL GUARD:			
PEMBROKE:			
NATIONAL GUARD READINESS CENTER	12,000	12,000	.....
TOTAL, NEW HAMPSHIRE	12,000	12,000	.....
NEW JERSEY			
ARMY:			
PICATINNY ARSENAL:			
MUNITIONS DISASSEMBLY COMPLEX	41,000	41,000	.....
DEFENSE-WIDE:			
JOINT BASE MCGUIRE-DIX-LAKEHURST:			
HOT CARGO HYDRANT SYSTEM REPLACEMENT	10,200	10,200	.....
TOTAL, NEW JERSEY	51,200	51,200	.....
NEW MEXICO			
ARMY:			
WHITE SANDS:			
INFORMATION SYSTEMS FACILITY	40,000	40,000	.....

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
AIR FORCE:			
HOLLOMAN AFB:			
MQ-9 FTU OPS FACILITY	85,000	85,000	.....
TOTAL, NEW MEXICO	125,000	125,000	.....
NEW YORK			
ARMY:			
U.S. MILITARY ACADEMY:			
ENGINEERING CENTER	95,000	95,000	.....
PARKING STRUCTURE	65,000	65,000	.....
AIR NATIONAL GUARD:			
FRANCIS S. GABRESKI AIRPORT:			
SECURITY FORCES/COMM.TRAINING FACILITY	20,000	20,000	.....
AIR FORCE RESERVE:			
NIAGARA FALLS IAP:			
PHYSICAL FITNESS CENTER	14,000	14,000	.....
TOTAL, NEW YORK	194,000	194,000	.....
NORTH CAROLINA			
ARMY:			
FORT BRAGG:			
DINING FACILITY	10,000	10,000	.....
NAVY:			
CHERRY POINT MARINE CORPS AIR STATION:			
AIRCRAFT MAINTENANCE HANGAR	133,970	60,000	— 73,970
FLIGHTLINE UTILITY MODERNIZATION	106,860	106,860	.....
DEFENSE-WIDE:			
FORT BRAGG:			
SOF REPLACE TRAINING MAZE AND TOWER	12,109	12,109	.....
SOF SERE RESISTANCE TRAINING LAB. COMPLEX	20,257	20,257	.....
NEW RIVER:			
AMB CARE CENTER/DENTAL CLINIC REPLACEMENT	32,580	32,580	.....
TOTAL, NORTH CAROLINA	315,776	241,806	— 73,970
NORTH DAKOTA			
AIR FORCE:			
MINOT AFB:			
CONSOLIDATED HELO/TRF OPS/AMU AND ALERT FACILITY	66,000	66,000	.....
ARMY NATIONAL GUARD:			
FARGO:			
NATIONAL GUARD READINESS CENTER	32,000	32,000	.....
TOTAL, NORTH DAKOTA	98,000	98,000	.....
OHIO			
AIR FORCE:			
WRIGHT-PATTERSON AFB:			
ADAL INTELLIGENCE PRODUCTION COMPLEX (NASIC)	116,100	116,100	.....
ARMY NATIONAL GUARD:			
CAMP RAVENNA:			
AUTOMATED MULTIPURPOSE MACHINE GUN RANGE	7,400	7,400	.....
TOTAL, OHIO	123,500	123,500	.....
OKLAHOMA			
AIR FORCE:			
ALTUS AFB:			
KC-46A FTU/FTC SIMULATOR FACILITY PHASE 3	12,000	12,000	.....

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
TINKER AFB:			
KC-46A DEPOT FUEL MAINTENANCE HANGAR	85,000	85,000	.....
KC-46A DEPOT MAINTENANCE HANGAR	81,000	81,000	.....
DEFENSE-WIDE:			
MCALESTER:			
BULK DIESEL SYSTEM REPLACEMENT	7,000	7,000	.....
TOTAL, OKLAHOMA	185,000	185,000	.....
PENNSYLVANIA			
NAVY:			
PHILADELPHIA:			
SUBMARINE PROPULSOR MANUFACTURING SUPPORT FACILITY	71,050	71,050	.....
AIR NATIONAL GUARD:			
FORT INDIANTOWN GAP:			
REPLACE OPERATIONS TRAINING/DINING HALL	8,000	8,000	.....
NAVY RESERVE:			
PITTSBURGH:			
RESERVE TRAINING CENTER—PITTSBURGH, PA .....	.....	.....	.....
TOTAL, PENNSYLVANIA	79,050	79,050	.....
SOUTH CAROLINA			
ARMY:			
FORT JACKSON:			
TRAINEE BARRACKS COMPLEX 3, PHASE 2	52,000	52,000	.....
NAVY:			
BEAUFORT:			
RECYCLING/HAZARDOUS WASTE FACILITY	9,517	9,517	.....
PARRIS ISLAND:			
RANGE IMPROVEMENTS & MODERNIZATION, PHASE 2	35,190	35,190	.....
AIR FORCE:			
SHAW AFB:			
CPIP MQ-9 MCE GROUP	53,000	53,000	.....
TOTAL, SOUTH CAROLINA	149,707	149,707	.....
SOUTH DAKOTA			
ARMY NATIONAL GUARD:			
RAPID CITY:			
NATIONAL GUARD READINESS CENTER	15,000	15,000	.....
TOTAL, SOUTH DAKOTA	15,000	15,000	.....
TEXAS			
ARMY:			
FORT BLISS:			
SUPPLY SUPPORT ACTIVITY	24,000	24,000	.....
AIR FORCE:			
JOINT BASE SAN ANTONIO:			
BMT RECRUIT DORMITORY 6	25,000	25,000	.....
DEFENSE-WIDE:			
JOINT BASE SAN ANTONIO:			
ENERGY AEROSPACE OPERATIONS FACILITY	10,200	10,200	.....
RED RIVER ARMY DEPOT:			
GENERAL PURPOSE WAREHOUSE	71,500	71,500	.....
AIR FORCE RESERVE:			
FORT WORTH:			
MUNITIONS TRAINING/ADMIN FACILITY	3,100	3,100	.....
TOTAL, TEXAS	133,800	133,800	.....

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
UTAH			
NAVY:			
HILL AFB:			
D5 MISSILE MOTOR RECEIPT/STORAGE FACILITY	105,520	105,520	.....
TOTAL, UTAH	105,520	105,520	.....
VIRGINIA			
NAVY:			
PORTSMOUTH:			
SHIPS MAINTENANCE FACILITY	26,120	26,120	.....
QUANTICO:			
TBS FIRE STATION	21,980	.....	— 21,980
DEFENSE-WIDE:			
DAM NECK:			
SOF MAGAZINES	8,959	8,959	.....
FORT A.P. HILL:			
TRAINING CAMPUS	11,734	11,734	.....
FORT BELVOIR:			
HUMAN PERFORMANCE TRAINING CENTER	6,127	6,127	.....
HUMPHREYS ENGINEER CENTER:			
MAINTENANCE AND SUPPLY FACILITY	20,257	20,257	.....
JOINT BASE LANGLEY-EUSTIS:			
FUEL FACILITIES REPLACEMENT	6,900	6,900	.....
GROUND VEHICLE FUELING FACILITY REPLACEMENT	5,800	5,800	.....
PENTAGON:			
EXTERIOR INFRASTRUC. & SECURITY IMPROVEMENTS	23,650	23,650	.....
NORTH VILLAGE VACP & FENCING	12,200	12,200	.....
AIR NATIONAL GUARD:			
JOINT BASE LANGLEY-EUSTIS:			
CONSTRUCT CYBER OPS FACILITY	10,000	10,000	.....
TOTAL, VIRGINIA	153,727	131,747	— 21,980
WASHINGTON			
NAVY:			
BANGOR:			
PIER AND MAINTENANCE FACILITY	88,960	88,960	.....
WHIDBEY ISLAND:			
FLEET SUPPORT FACILITY	19,450	19,450	.....
NEXT GENERATION JAMMER FACILITY	7,930	7,930	.....
DEFENSE-WIDE:			
JOINT BASE LEWIS-MCCHORD:			
REFUELING FACILITY	26,200	26,200	.....
TOTAL, WASHINGTON	142,540	142,540	.....
WISCONSIN			
ARMY RESERVE:			
FORT MCCOY:			
TRANSIENT TRAINING BARRACKS	23,000	23,000	.....
TOTAL, WISCONSIN	23,000	23,000	.....
BAHAMAS			
NAVY:			
ANDROS ISLAND:			
AUTECH AUSTERE QUARTERS	31,050	31,050	.....
TOTAL, BAHAMAS	31,050	31,050	.....

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
BAHRAIN ISLAND			
NAVY:			
SW ASIA:			
FLEET MAINTENANCE FACILITY & TOC	26,340	26,340	.....
TOTAL, BAHRAIN ISLAND	26,340	26,340	.....
BELGIUM			
DEFENSE-WIDE:			
CHIEVRES AB:			
EUROPE WEST DISTRICT SUPERINTENDENT'S OFFICE	14,305	14,305	.....
TOTAL, BELGIUM	14,305	14,305	.....
CONUS CLASSIFIED			
DEFENSE-WIDE:			
CLASSIFIED LOCATION:			
BATTALION COMPLEX, PHASE 2	49,222	49,222	.....
TOTAL, CONUS CLASSIFIED	49,222	49,222	.....
GERMANY			
ARMY:			
EAST CAMP GRAFENWOEHR:			
MISSION TRAINING COMPLEX	31,000	31,000	.....
NAVY:			
PANZER KASERNE:			
MARFOREUR HQ MODERNIZATION AND EXPANSION	43,950	43,950	.....
DEFENSE-WIDE:			
BAUMHOLDER:			
SOF JOINT PARACHUTE RIGGING FACILITY	11,504	11,504	.....
KAISERSLAUTERN AB:			
KAISERSLAUTERN MIDDLE SCHOOL	99,955	99,955	.....
RHINE ORDNANCE BARRACKS:			
MEDICAL CENTER REPLACEMENT INC. 8	319,589	319,589	.....
WIESBADEN:			
CLAY KASERNE ELEMENTARY SCHOOL	56,048	56,048	.....
TOTAL, GERMANY	562,046	562,046	.....
GUAM			
NAVY:			
JOINT REGION MARIANAS:			
ACE GYM & DINING	27,910	27,910	.....
EARTH COVERED MAGAZINES	52,270	52,270	.....
MACHINE GUN RANGE	141,287	50,000	- 91,287
ORDNANCE OPS	22,020	22,020	.....
UNACCOMPANIED ENLISTED HOUSING	36,170	36,170	.....
AIR FORCE:			
JOINT REGION MARIANAS:			
HAYMAN MUNITIONS STORAGE IGLOOS MSA 2	9,800	9,800	.....
TOTAL, GUAM	289,457	198,170	- 91,287
GUANTANAMO BAY, CUBA			
NAVY:			
GUANTANAMO BAY:			
SOLID WASTE MANAGEMENT FACILITY	85,000	85,000	.....

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
DEFENSE-WIDE:			
GUANTANAMO BAY:			
WORKING DOG TREATMENT FACILITY REPLACEMENT	9,080	9,080	.....
TOTAL, GUANTANAMO BAY, CUBA	94,080	94,080	.....
HONDURAS			
ARMY:			
SOTO CANO AB:			
BARRACKS	21,000	21,000	.....
TOTAL, HONDURAS	21,000	21,000	.....
JAPAN			
NAVY:			
KADENA AB:			
TACTICAL OPERATIONS CENTER	9,049	9,049	.....
DEFENSE-WIDE:			
CAMP MCTUREOUS:			
BECHTEL ELEMENTARY SCHOOL	94,851	94,851	.....
IWAKUNI:			
FUEL PIER	33,200	33,200	.....
KADENA AB:			
TRUCK UNLOAD FACILITIES	21,400	21,400	.....
YOKOSUKA:			
KINNICK HIGH SCHOOL	170,386	60,000	- 110,386
TOTAL, JAPAN	328,886	218,500	- 110,386
KOREA			
ARMY:			
CAMP TANGO:			
COMMAND AND CONTROL FACILITY	17,500	17,500	.....
TOTAL, KOREA	17,500	17,500	.....
KUWAIT			
ARMY:			
CAMP ARIFJAN:			
VEHICLE MAINTENANCE SHOP	44,000	44,000	.....
TOTAL, KUWAIT	44,000	44,000	.....
MARIANA ISLANDS			
AIR FORCE:			
TINIAN:			
APR—CARGO PAD WITH TAXIWAY EXTENSION	46,000	46,000	.....
APR—MAINTENANCE SUPPORT FACILITY	4,700	4,700	.....
TOTAL, MARIANA ISLANDS	50,700	50,700	.....
QATAR			
AIR FORCE:			
AL UDEID:			
FLIGHTLINE SUPPORT FACILITIES	30,400	.....	- 30,400
PERSONNEL DEPLOYMENT PROCESSING FACILITY	40,000	.....	- 40,000
TOTAL, QATAR	70,400	.....	- 70,400

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
UNITED KINGDOM			
AIR FORCE:			
ROYAL AIR FORCE LAKENHEATH:			
F-35A 6 BAY HANGAR	39,036	39,036	.....
F-35A ADAL CONVENTIONAL MUNITIONS MX	9,204	9,204	.....
F-35A ADAL PARTS STORE	13,926	13,926	.....
F-35A AGE FACILITY	12,449	12,449	.....
F-35A DORM	29,541	29,541	.....
F-35A FUEL SYSTEM MAINTENANCE DOCK 2 BAY	16,880	16,880	.....
F-35A PARKING APRON	27,431	27,431	.....
DEFENSE-WIDE:			
CROUGHTON RAF:			
AMBULATORY CARE CENTER ADDITION/ALTERATION	10,000	.....	- 10,000
TOTAL, UNITED KINGDOM	158,467	148,467	- 10,000
WORLDWIDE CLASSIFIED			
AIR FORCE:			
CLASSIFIED LOCATION:			
TACMOR—UTILITIES AND INFRASTRUCTURE SUPPORT	18,000	18,000	.....
TOTAL, WORLDWIDE CLASSIFIED	18,000	18,000	.....
NATO SECURITY INVESTMENT PROGRAM	171,064	171,064	.....
WORLDWIDE UNSPECIFIED			
ARMY:			
HOST NATION SUPPORT	34,000	34,000	.....
MINOR CONSTRUCTION	72,000	82,000	+ 10,000
PLANNING AND DESIGN	71,068	71,068	.....
PLANNING AND DESIGN	5,000	5,000	.....
NAVY:			
PLANNING AND DESIGN	185,542	185,542	.....
MINOR CONSTRUCTION	28,579	28,579	.....
AIR FORCE:			
PLANNING AND DESIGN	206,577	206,577	.....
MINOR CONSTRUCTION	38,500	38,500	.....
DEFENSE-WIDE:			
CONTINGENCY CONSTRUCTION	10,000	.....	- 10,000
ENERGY CONSERVATION INVESTMENT PROGRAM	150,000	195,000	+ 45,000
PLANNING AND DESIGN:			
DEFENSE WIDE	24,300	24,300	.....
DEFENSE HEALTH AGENCY	55,699	55,699	.....
DEFENSE INFORMATION SYSTEMS AGENCY	496	496	.....
DEFENSE LOGISTICS AGENCY	42,705	42,705	.....
MISSILE DEFENSE AGENCY	14,184	14,184	.....
SPECIAL OPERATIONS COMMAND	55,925	55,925	.....
WASHINGTON HEADQUARTERS SERVICE	2,036	2,036	.....
SUBTOTAL, PLANNING AND DESIGN	195,345	195,345	.....
UNSPECIFIED MINOR CONSTRUCTION:			
DEFENSE WIDE	3,000	3,000	.....
DEFENSE HEALTH AGENCY	5,000	5,000	.....
DEFENSE LOGISTICS AGENCY	17,366	17,366	.....
MISSILE DEFENSE AGENCY	10,000	10,000	.....
SPECIAL OPERATIONS COMMAND	13,642	13,642	.....
THE JOINT STAFF	12,479	12,479	.....
SUBTOTAL, UNSPECIFIED MINOR CONSTRUCTION	61,487	61,487	.....
ARMY NATIONAL GUARD:			
PLANNING AND DESIGN	16,622	16,622	.....

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
MINOR CONSTRUCTION	18,100	28,100	+ 10,000
AIR NATIONAL GUARD:			
PLANNING AND DESIGN	18,500	18,500	.....
MINOR CONSTRUCTION	23,626	33,626	+ 10,000
ARMY RESERVE:			
PLANNING AND DESIGN	5,855	5,855	.....
MINOR CONSTRUCTION	2,064	2,064	.....
NAVY RESERVE:			
PLANNING AND DESIGN	4,695	4,695	.....
MINOR CONSTRUCTION	3,000	3,000	.....
AIR FORCE RESERVE:			
PLANNING AND DESIGN	4,055	4,055	.....
MINOR CONSTRUCTION	3,358	3,358	.....
FAMILY HOUSING, ARMY			
WISCONSIN:			
FORT MCCOY:			
FAMILY HOUSING NEW CONSTRUCTION (7 units)	6,200	6,200	.....
PUERTO RICO:			
FORT BUCHANAN:			
FAMILY HOUSING NEW CONSTRUCTION (26 UNITS)	26,000	26,000	.....
KOREA:			
CAMP WALKER—DAEGU:			
FAMILY HOUSING REPLACEMENT CONSTRUCTION (90 UNITS)	68,000	68,000	.....
CAMP HUMPHRIES:			
FAMILY HOUSING NEW CONSTRUCTION	85,000	85,000	.....
ITALY:			
VICENZA:			
FAMILY HOUSING NEW CONSTRUCTION (111 UNITS)	95,134	95,134	.....
GERMANY:			
BAUMHOLDER:			
CONSTRUCTION IMPROVEMENTS (72 UNITS)	32,000	32,000	.....
PLANNING AND DESIGN	18,326	18,326	.....
SUBTOTAL, CONSTRUCTION	330,660	330,660	.....
OPERATION AND MAINTENANCE:			
UTILITIES ACCOUNT	57,872	57,872	.....
SERVICES ACCOUNT	10,502	10,502	.....
MANAGEMENT ACCOUNT	36,302	36,302	.....
MISCELLANEOUS ACCOUNT	408	408	.....
FURNISHINGS ACCOUNT	15,842	15,842	.....
LEASING	161,252	161,252	.....
MAINTENANCE OF REAL PROPERTY	75,530	75,530	.....
PRIVATIZATION SUPPORT COSTS	18,801	18,801	.....
SUBTOTAL, OPERATION AND MAINTENANCE	376,509	376,509	.....
FAMILY HOUSING, NAVY AND MARINE CORPS			
GUAM:			
NSA ANDERSON:			
REPLACEMENT HOUSING PHASE III	83,441	83,441	.....
JAPAN:			
IWAKUNI:			
CONSTRUCTION IMPROVEMENTS (44 UNITS)	16,638	16,638	.....
PLANNING AND DESIGN	4,502	4,502	.....
SUBTOTAL, CONSTRUCTION	104,581	104,581	.....
OPERATION AND MAINTENANCE:			
UTILITIES ACCOUNT	60,252	60,252	.....
SERVICES ACCOUNT	16,261	16,261	.....
MANAGEMENT ACCOUNT	50,870	50,870	.....

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
MISCELLANEOUS ACCOUNT	148	148	.....
FURNISHINGS ACCOUNT	16,395	16,395	.....
LEASING	62,515	62,515	.....
MAINTENANCE OF REAL PROPERTY	86,328	86,328	.....
PRIVATIZATION SUPPORT COSTS	21,767	21,767	.....
SUBTOTAL, OPERATION AND MAINTENANCE	314,536	314,536	.....
FAMILY HOUSING, AIR FORCE			
JAPAN:			
KADENA:			
CONSTRUCTION IMPROVEMENTS (130 UNITS)	72,129	72,129	.....
UNITED KINGDOM:			
RAF LAKENHEATH:			
CONSTRUCTION IMPROVEMENTS	3,118	3,118	.....
LANNING AND DESIGN	3,199	3,199	.....
SUBTOTAL, CONSTRUCTION	78,446	78,446	.....
OPERATION AND MAINTENANCE:			
UTILITIES ACCOUNT	48,566	48,566	.....
MANAGEMENT ACCOUNT	54,423	54,423	.....
SERVICES ACCOUNT	13,669	13,669	.....
FURNISHINGS ACCOUNT	30,645	30,645	.....
MISCELLANEOUS ACCOUNT	2,171	2,171	.....
LEASING	15,832	15,832	.....
MAINTENANCE	129,763	129,763	.....
PRIVATIZATION SUPPORT COSTS	22,205	22,205	.....
SUBTOTAL, OPERATION AND MAINTENANCE	317,274	317,274	.....
FAMILY HOUSING, DEFENSE-WIDE			
OPERATION AND MAINTENANCE:			
NATIONAL SECURITY AGENCY:			
UTILITIES	106	106	.....
FURNISHING	416	416	.....
LEASING	13,046	13,046	.....
MAINTENANCE OF REAL PROPERTY	121	121	.....
DEFENSE INTELLIGENCE AGENCY:			
UTILITIES	4,100	4,100	.....
FURNISHINGS	643	643	.....
LEASING	38,232	38,232	.....
DEFENSE LOGISTICS AGENCY:			
UTILITIES	9	9	.....
FURNISHINGS	1	1	.....
SERVICES	2	2	.....
MANAGEMENT	155	155	.....
MAINTENANCE OF REAL PROPERTY	1,542	1,542	.....
SUBTOTAL, OPERATION AND MAINTENANCE	58,373	58,373	.....
DOD MILITARY UNACCOMPANIED HOUSING IMPROVEMENT FUND	600	600	.....
DOD FAMILY HOUSING IMPROVEMENT FUND	1,653	1,653	.....
BASE REALIGNMENT AND CLOSURE:			
BASE REALIGNMENT AND CLOSURE ACCOUNT	267,538	277,538	+ 10,000
ADMINISTRATIVE PROVISIONS			
MILITARY CONSTRUCTION, ARMY		77,600	+ 77,600
MILITARY CONSTRUCTION, NAVY AND MARINE CORPS		244,400	+ 244,400
MILITARY CONSTRUCTION, AIR FORCE		118,516	+ 118,516
MILITARY CONSTRUCTION, ARMY NATIONAL GUARD		22,000	+ 22,000
MILITARY CONSTRUCTION, AIR NATIONAL GUARD		11,100	+ 11,100

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
MILITARY CONSTRUCTION, ARMY RESERVE		10,000	+ 10,000
MILITARY CONSTRUCTION, AIR FORCE RESERVE		14,400	+ 14,400
MILITARY CONSTRUCTION—ENHANCING FORCE PROTECTION AND SAFETY ON MILITARY INSTALLATIONS (SEC. 131)			
DEFENSE ACCESS ROADS PROGRAM (SEC. 129)		30,000	+ 30,000
RESCISSIONS FROM PRIOR YEAR UNOBLIGATED BALANCES			
AIR FORCE (RESCISSION)		- 31,158	- 31,158
ARMY NATIONAL GUARD (RESCISSION)		- 10,000	- 10,000
42 USC 3374 (SEC. 135) (RESCISSION)			
NATO SECURITY INVESTMENT PROGRAM (RESCISSION)			
FAMILY HOUSING, NAVY AND MARINE CORPS (RESCISSION)		- 2,138	- 2,138
RECAP			
ARMY	1,011,768	1,021,768	+ 10,000
RESCISSION			
NAVY AND MARINE CORPS	2,543,189	2,222,522	- 320,667
RESCISSION			
AIR FORCE	1,725,707	1,495,423	- 230,284
RESCISSION		- 31,158	- 31,158
DEFENSE-WIDE	2,693,324	2,575,938	- 117,386
RESCISSION			
ARMY NATIONAL GUARD	180,122	190,122	+ 10,000
RESCISSION		- 10,000	- 10,000
AIR NATIONAL GUARD	129,126	139,126	+ 10,000
RESCISSION			
ARMY RESERVE	64,919	64,919	
RESCISSION			
NAVY RESERVE	43,065	43,065	
RESCISSION			
AIR FORCE RESERVE	50,163	50,163	
RESCISSION			
NATO	171,064	171,064	
RESCISSION			
CHEMICAL DEMILITARIZATION CONSTRUCTION, DEFENSE-WIDE			
RESCISSION			
DOD UNACCOMPANIED HOUSING IMPROVEMENT FUND	600	600	
RESCISSION			
DOD FAMILY HOUSING IMPROVEMENT FUND	1,653	1,653	
RESCISSION			
HOMEOWNERS ASSISTANCE PROGRAM			
RESCISSION			
FAMILY HOUSING, ARMY	707,169	707,169	
CONSTRUCTION	(330,660)	(330,660)	
OPERATION AND MAINTENANCE	(376,509)	(376,509)	
RESCISSION			
FAMILY HOUSING, NAVY AND MARINE CORP	419,117	419,117	
CONSTRUCTION	(104,581)	(104,581)	
OPERATION AND MAINTENANCE	(314,536)	(314,536)	
RESCISSION		- 2,138	- 2,138
FAMILY HOUSING, AIR FORCE	395,720	395,720	
CONSTRUCTION	(78,446)	(78,446)	
OPERATION AND MAINTENANCE	(317,274)	(317,274)	
RESCISSION			
FAMILY HOUSING, DEFENSE-WIDE	58,373	58,373	
CONSTRUCTION			
OPERATION AND MAINTENANCE	(58,373)	(58,373)	
RESCISSION			
BRAC	267,538	277,538	+ 10,000
RESCISSION			
42 USC 3374 (SEC. 135)			

MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued
 [In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
RESCISSION .....	.....	.....	.....
ADMINISTRATIVE PROVISIONS .....	.....	528,016	+ 528,016
RESCISSION .....	.....	.....	.....
GRAND TOTAL	10,462,617	10,319,000	- 143,617

OVERSEAS CONTINGENCY OPERATIONS

[In thousands of dollars]

	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
BULGARIA			
ARMY:			
NEVO SELO FOS:			
EDI: AMMUNITION HOLDING AREA	5,200	5,200	.....
GERMANY			
AIR FORCE:			
RAMSTEIN AB:			
EDI: KMC DABS-FEV/RH STORAGE WAREHOUSES	119,000	119,000	.....
GREECE			
NAVY:			
SOUDA BAY:			
EDI: JOINT MOBILITY PROCESSING CENTER	41,650	41,650	.....
EDI: MARATHI LOGISTICS SUPPORT CENTER	6,200	6,200	.....
GUANTANAMO BAY, CUBA			
ARMY:			
GUANTANAMO BAY:			
OCO: HIGH VALUE DETENTION FACILITY	69,000	.....	- 69,000
ITALY			
NAVY:			
SIGONELLA:			
EDI: P-8A TAXIWAY	66,050	66,050	.....
NORWAY			
AIR FORCE:			
RYGGE:			
EDI: CONSTRUCT TAXIWAY	13,800	13,800	.....
POLAND			
ARMY:			
POWIDZ AB:			
EDI: AMMUNITION STORAGE FACILITY	52,000	52,000	.....
EDI: BULK FUEL STORAGE	21,000	21,000	.....
EDI: RAIL EXTENSION & RAILHEAD	14,000	14,000	.....
ZAGAN			
EDI: RAIL EXTENSION AND RAILHEAD	6,400	6,400	.....
EDI: STAGING AREA	51,000	.....	- 51,000
EDI: STAGING AREA .....	.....	34,000	+ 34,000
DRAWSKO POMORSKI:			
EDI: STAGING AREA .....	.....	17,000	+ 17,000
QATAR			
AIR FORCE:			
AL UDEID			
OCO: FLIGHTLINE SUPPORT FACILITIES .....	.....	29,000	+ 29,000
OCO: PERSONNEL DEPLOYMENT PROCESSING FCILITY .....	.....	40,000	+ 40,000
DEFENSE-WIDE:			
AL UDEID			
OCO: TRANS-REGIONAL LOGISTICS COMPLEX	60,000	60,000	.....
ROMANIA			
ARMY:			
MIHAIL KOGALNICEANU			
EDI: EXPLOSIVES & AMMO LOAD/UNLOAD APRON	21,651	21,651	.....

OVERSEAS CONTINGENCY OPERATIONS—Continued

[In thousands of dollars]

	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
SLOVAKIA			
AIR FORCE:			
MALACKY:			
EDI: REGIONAL MUNITIONS STORAGE AREA	59,000	59,000	.....
SPAIN			
NAVY:			
ROTA:			
EDI: PORT OPERATIONS FACILITIES	21,590	21,590	.....
UNITED KINGDOM			
NAVY:			
LOSSIEMOUTH:			
EDI: P-8 BASE IMPROVEMENTS	79,130	79,130	.....
AIR FORCE:			
RAF FAIRFORD:			
EDI: CONSTRUCT DABS-FEV STORAGE	87,000	87,000	.....
EDI: MUNITIONS HOLDING AREA	19,000	19,000	.....
ESTONIA			
DEFENSE-WIDE:			
UNSPECIFIED LOCATIONS:			
EDI: SOF OPERATIONS FACILITY	6,100	6,100	.....
EDI: SOF TRAINING FACILITY	9,600	9,600	.....
WORLDWIDE UNSPECIFIED			
ARMY:			
EDI: PLANNING AND DESIGN	20,999	20,999	.....
NAVY:			
EDI: PLANNING AND DESIGN	12,700	12,700	.....
AIR FORCE:			
EDI: PLANNING & DESIGN FUNDS	48,000	48,000	.....
DEFENSE-WIDE			
EDI: PLANNING AND DESIGN	7,100	7,100	.....
EDI: PLANNING AND DESIGN	4,250	4,250	.....
RECAP			
ARMY	261,250	192,250	-69,000
RESCISSION			
NAVY AND MARINE CORPS	227,320	227,320	
RESCISSION			
AIR FORCE	345,800	414,800	+69,000
RESCISSION			
DEFENSE-WIDE	87,050	87,050	
RESCISSION			
GRAND TOTAL	921,420	921,420	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2018 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 2019
 (In thousands of dollars)

Item	2018 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2018 appropriation	Budget estimate
TITLE I—DEPARTMENT OF DEFENSE					
Military Construction, Army	923,994	1,011,768	1,021,768	+97,774	+10,000
Military Construction, Navy and Marine Corps	1,553,275	2,543,189	2,222,522	+669,247	-320,667
Military Construction, Air Force	1,543,558	1,725,707	1,495,423	-48,135	-230,284
Military Construction, Defense-Wide	2,811,513	2,693,324	2,575,938	-235,575	-117,386
Total, Active components	6,832,340	7,973,988	7,315,651	+483,311	-658,337
Military Construction, Army National Guard	220,652	180,122	190,122	-30,530	+10,000
Military Construction, Air National Guard	171,491	129,126	139,126	-32,365	+10,000
Military Construction, Army Reserve	83,712	64,919	64,919	-18,793	.....
Military Construction, Navy Reserve	95,271	43,065	43,065	-52,206	.....
Military Construction, Air Force Reserve	73,535	50,163	50,163	-23,372	.....
Total, Reserve components	644,661	467,395	487,395	-157,266	+20,000
North Atlantic Treaty Organization Security Investment Program	177,932	171,064	171,064	-6,868	.....
Chemical demilitarization construction, Defense-Wide .....	.....	.....	.....	.....	.....
Department of Defense Base Closure Account	310,000	267,538	277,538	-32,462	+10,000
Total, Military Construction	7,964,933	8,879,985	8,251,648	+286,715	-628,337
Family Housing Construction, Army	182,662	330,660	330,660	+147,998	.....
Family Housing Operation and Maintenance, Army	348,907	376,509	376,509	+27,602	.....
Family Housing Construction, Navy and Marine Corps	83,682	104,581	104,581	+20,899	.....
Family Housing Operation and Maintenance, Navy and Marine Corps	328,282	314,536	314,536	-13,746	.....
Family Housing Construction, Air Force	85,062	78,446	78,446	-6,616	.....
Family Housing Operation and Maintenance, Air Force	318,324	317,274	317,274	-1,050	.....
Family Housing Operation and Maintenance, Defense-Wide	59,169	58,373	58,373	-796	.....
Department of Defense Family Housing Improvement Fund	2,726	1,653	1,653	-1,073	.....

	623	600	600	600	-23
DoD Military Unaccompanied Housing Improvement Fund	1,409,437	1,582,632	1,582,632	1,582,632	+173,195
Total, Family Housing					
ADMINISTRATIVE PROVISIONS					
Defense Access Roads (Sec. 132)					-31,158
Military Construction, Air Force (Sec. 125) (rescission)					+77,600
Military Construction, Army (Sec. 124)	93,800				+244,400
Military Construction, Navy and Marine Corps (Sec. 124)	202,130				+11,100
Military Construction, Air National Guard (Sec. 124)	52,000				+22,000
Military Construction, Army National Guard (Sec. 124)	113,500				-10,000
Military Construction, Army National Guard (Sec. 125) (rescission)					+10,000
Military Construction, Army Reserve (Sec. 124)	76,000				
NATO Security Investment Program (Sec. 125) (rescission)	-25,000				+25,000
42 USC 3374 (Sec. 125)					
Military Construction, Air Force (Sec. 124)	138,100				+118,516
Military Construction, Air Force Reserve (Sec. 124)	64,100				+14,400
Family Housing Construction, Army (Sec. 126)	-18,000				+18,000
Family Housing Construction, Navy and Marine Corps (Sec. 125)					-2,138
Family Housing Construction, Air Force (Sec. 126)					
Defense Access Roads Program (Sec. 129)	20,000				+10,000
Total, Administrative Provisions	716,630		484,720	-231,910	+484,720
Appropriations	(759,630)		(528,016)	(-231,614)	(+528,016)
Rescissions	(-43,000)		(-43,296)	(-296)	(-43,296)
Total, title I, Department of Defense	10,091,000	10,462,617	10,319,000	+228,000	-143,617
Appropriations	(10,134,000)	(10,462,617)	(10,362,296)	(+228,296)	(-100,321)
Rescissions	(-43,000)		(-43,296)	(-296)	(-43,296)
TITLE II—DEPARTMENT OF VETERANS AFFAIRS					
Veterans Benefits Administration					
Compensation and pensions:					
Advance from prior year	(90,119,449)	(95,768,462)	(95,768,462)	(+5,649,013)	
Current year request		1,410,332	1,410,332	+1,410,332	
Subtotal, current year	90,119,449	97,178,794	97,178,794	+7,059,345	
Advance appropriation, fiscal year 2020	95,768,462	107,119,807	107,119,807	+11,351,345	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2018 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2019—Continued

[In thousands of dollars]

Item	2018 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2018 appropriation	Budget estimate
Readjustment benefits:					
Advance from prior year	(13,708,648)	(11,832,175)	(11,832,175)	(- 1,876,473)	.....
Subtotal	13,708,648	11,832,175	11,832,175	-1,876,473	.....
Advance appropriation, fiscal year 2020	11,832,175	14,065,282	14,065,282	+ 2,233,107	.....
Veterans insurance and indemnities:					
Advance from prior year	(107,899)	(109,090)	(109,090)	(+ 1,191)	.....
Current year request	12,439	.....	.....	- 12,439	.....
Subtotal	120,338	109,090	109,090	- 11,248	.....
Advance appropriation, fiscal year 2020	109,090	111,340	111,340	+ 2,250	.....
Veterans housing benefit program fund:					
(Limitation on direct loans)	(500)	(500)	(500)	.....	.....
Administrative expenses	178,626	200,612	200,612	+ 21,986	.....
Vocational rehabilitation loans program account:					
(Limitation on direct loans)	30	39	39	+ 9	.....
Administrative expenses	(2,356)	(2,037)	(2,037)	(- 319)	.....
Administrative expenses	395	396	396	+ 1	.....
Native American veteran housing loan program account	1,163	1,149	1,163	.....	+ 14
General operating expenses, VBA	2,910,000	2,868,909	2,956,316	+ 46,316	+ 87,407
Total, Veterans Benefits Administration	110,812,380	125,777,866	125,865,287	+ 15,052,907	+ 87,421
Appropriations	(3,102,653)	(4,481,437)	(4,568,858)	(+ 1,466,205)	(+ 87,421)
Advance appropriations, fiscal year 2020	(107,709,727)	(121,296,429)	(121,296,429)	(+ 13,586,702)	.....
Advances from prior year appropriations	(103,935,996)	(107,709,727)	(107,709,727)	(+ 3,773,731)	.....
Veterans Health Administration:					
Medical services:					
Advance from prior year	(44,886,554)	(49,161,165)	(49,161,165)	(+ 4,274,611)	.....

Current year request ¹	1,962,984	.....	750,000	-1,212,984	+750,000
Subtotal	46,849,538	49,161,165	49,911,165	+3,061,627	+750,000
Advance appropriation, fiscal year 2020	49,161,165	48,747,988	51,411,165	+2,250,000	+2,663,177
Medical community care:					
Advance from prior year	(9,409,118)	(8,384,704)	(8,384,704)	(-1,024,414)	.....
Current year request	419,176	.....	.....	-419,176	.....
4/13/2018 Budget Amendment .....	.....	500,000	1,000,000	+1,000,000	+500,000
Subtotal	9,828,294	8,884,704	9,384,704	-443,590	+500,000
Advance appropriation, fiscal year 2020	8,384,704	14,413,786	10,758,399	+2,373,695	-3,661,387
Choice Fund .....	.....	1,900,000	.....	.....	-1,900,000
Medical support and compliance:					
Advance from prior year	(6,654,480)	(7,239,156)	(7,239,156)	(+584,676)	.....
Current year request	100,000	.....	.....	-100,000	.....
Subtotal	6,754,480	7,239,156	7,239,156	+484,676	.....
Advance appropriation, fiscal year 2020	7,239,156	7,106,150	7,239,156	.....	+133,006
Medical facilities:					
Advance from prior year	(5,434,880)	(5,914,288)	(5,914,288)	(+479,408)	.....
Current year request	707,000	.....	211,000	-496,000	+211,000
Subtotal	6,141,880	5,914,288	6,125,288	-16,592	+211,000
Advance appropriation, fiscal year 2020	5,914,288	5,276,676	6,141,880	+227,592	+865,204
Medical and prosthetic research	722,262	727,369	779,000	+56,738	+51,631
Medical care cost recovery collections:					
Offsetting collections	-2,507,000	-3,590,000	-3,590,000	-1,083,000	.....
Appropriations (indefinite)	2,507,000	3,590,000	3,590,000	+1,083,000	.....
Subtotal	(297,137)	(301,578)	(301,578)	(+4,441)	.....
DoD-VA Joint Medical Funds (by transfer)	(15,000)	(15,000)	(15,000)	.....	.....
DoD-VA Health Care Sharing Incentive Fund (by transfer)					
Total, Veterans Health Administration	74,610,735	78,677,969	78,290,600	+3,679,865	-387,369
Appropriations	(3,911,422)	(3,127,369)	(2,740,000)	(-1,171,422)	(-387,369)
(By transfer)	(312,137)	(316,578)	(316,578)	(+4,441)	.....
Advance appropriations, fiscal year 2020	(70,699,313)	(75,550,600)	(75,550,600)	(+4,851,287)	.....

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2018 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2019—Continued
(In thousands of dollars)

Item	2018 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2018 appropriation	Budget estimate
Advances from prior year appropriations	(66,385,032)	(70,699,313)	(70,699,313)	(+ 4,314,281)	.....
National Cemetery Administration	306,193	315,836	315,836	+ 9,643	.....
National Cemetery Administration					
Departmental Administration					
General administration	335,891	367,629	365,976	+ 30,085	- 1,653
Board of Veterans Appeals	161,048	174,748	174,748	+ 13,700	.....
Information technology systems	4,055,500	4,184,571	4,184,571	+ 129,071	.....
Veterans Electronic Health Record	782,000	1,207,000	800,000	+ 18,000	- 407,000
Office of Inspector General	164,000	172,054	192,000	+ 28,000	+ 19,946
Construction, major projects	512,430	1,127,486	1,127,486	+ 615,056	.....
Construction, minor projects	342,570	706,889	706,889	+ 364,319	.....
Grants for construction of State extended care facilities	110,000	150,000	150,000	+ 40,000	.....
Grants for the construction of veterans cemeteries	45,000	45,000	45,000	.....	.....
Total, Departmental Administration	6,508,439	8,135,377	7,746,670	+ 1,238,231	- 388,707
Administrative Provisions					
Mandatory disability exams language (Sec. 256)	25,000	.....	.....	- 25,000	.....
Medical Support and Compliance (Sec. 236) (rescission)	- 751,000	.....	- 211,000	- 211,000	- 211,000
Medical services (Sec. 237) (rescission)	2,000,000	.....	2,000,000	+ 751,000	.....
VA deferred maintenance (Sec. 248)	- 10,000	.....	.....	.....	+ 2,000,000
Construction, major projects:					
Sec. 243(a) rescission	10,000	.....	.....	+ 10,000	.....
Sec. 243(b) reappropriation	10,000	.....	.....	- 10,000	.....
Sec. 243(c) rescission	- 410,000	.....	.....	+ 410,000	.....
Sec. 243(d) reappropriation	410,000	.....	.....	- 410,000	.....

Total Administrative Provisions	1,274,000		1,789,000	+ 515,000	+ 1,789,000
Total, title II	193,511,747	212,907,048	214,007,393	+ 20,495,646	+ 1,100,345
Appropriations	(15,853,707)	(16,060,019)	(17,371,364)	(+ 1,517,657)	(+ 1,311,345)
Reappropriations	(420,000)			(- 420,000)	
Emergency appropriations					
Rescissions	(- 1,171,000)		(- 211,000)	(+ 960,000)	(- 211,000)
(By transfer)	(312,137)	(316,578)	(316,578)	(+ 4,441)	
TITLE III—RELATED AGENCIES					
American Battle Monuments Commission					
Salaries and expenses	79,000	75,100	81,000	+ 2,000	+ 5,900
Foreign currency fluctuations account					
Total, American Battle Monuments Commission	79,000	75,100	81,000	+ 2,000	+ 5,900
U.S. Court of Appeals for Veterans Claims					
Salaries and expenses	33,600	107,455	34,955	+ 1,355	- 72,500
(Transfer out)		(- 72,500)			(+ 72,500)
Department of Defense—Civil					
Cemeterial Expenses, Army					
Salaries and expenses	80,800	70,800	80,800		+ 10,000
Construction	167,000		56,600	- 110,400	+ 56,600
Total, Cemeterial Expenses, Army	247,800	70,800	137,400	- 110,400	+ 66,600
Armed Forces Retirement Home—Trust Fund					
Operation and maintenance	41,300	41,300	41,300		
Capital program	1,000	1,000	1,000		
Payment from General Fund	22,000	22,000	22,000		
Total, Armed Forces Retirement Home	64,300	64,300	64,300		
Total, title III	424,700	317,655	317,655	- 107,045	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2018 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2019—Continued
(In thousands of dollars)

Item	2018 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2018 appropriation	Budget estimate
TITLE IV—OVERSEAS CONTINGENCY OPERATIONS					
Overseas Contingency Operations					
Army	130,400	69,000	.....	- 130,400	- 69,000
Navy	13,390	.....	.....	- 13,390	.....
Air Force	275,522	.....	69,000	- 206,522	+ 69,000
Defense-Wide	22,400	60,000	60,000	+ 37,600	.....
Subtotal	441,712	129,000	129,000	- 312,712	.....
European Deterrence/Reassurance Initiative					
Army	15,700	192,250	192,250	+ 176,550	.....
Navy	19,858	227,320	227,320	+ 207,462	.....
Air Force	270,830	345,800	345,800	+ 74,970	.....
Defense-Wide	1,900	27,050	27,050	+ 25,150	.....
Subtotal	308,288	792,420	792,420	+ 484,132	.....
Total, title IV	750,000	921,420	921,420	+ 171,420	.....
OTHER APPROPRIATIONS					
DEPARTMENT OF DEFENSE					
Hurricane Supplemental (Public Law 115-123) (emergency)	201,636	.....	.....	- 201,636	.....
Additional Funds (Public Law 115-96) (emergency)	200,000	.....	.....	- 200,000	.....
Hurricane Supplemental (Public Law 115-123) (emergency)	519,345	.....	.....	- 519,345	.....
Total, Military Construction	920,981	.....	.....	- 920,981	.....

DEPARTMENT OF VETERANS AFFAIRS						
Veterans Health Administration						
Hurricane Supplemental (Public Law 115-123) (emergency)	11,075					-11,075
Hurricane Supplemental (Public Law 115-123) (emergency)	4,088					-4,088
Hurricane Supplemental (Public Law 115-123) (emergency)	3,209					-3,209
Hurricane Supplemental (Public Law 115-123) (emergency)	75,108					-75,108
Total, Veterans Health Administration	93,480					-93,480
Total, Further Additional Supplemental Appropriations for Disaster Relief Requirements Act, 2018		1,014,461				-1,014,461
Grand total	205,791,908	224,608,740	225,565,468	+19,773,560	+956,728	(+1,211,024)
Appropriations	(26,412,407)	(26,840,291)	(28,051,315)	(+1,638,908)	(+1,211,024)	
Reappropriations	(420,000)			(-420,000)		
Rescissions	(-1,214,000)			(-959,704)		(-254,296)
Advance appropriations, fiscal year 2020	(178,409,040)	(196,847,029)	(196,847,029)	(+18,437,989)		
Overseas contingency operations	(750,000)	(921,420)	(921,420)	(+171,420)		
Emergency appropriations	(1,014,461)			(-1,014,461)		
Advances from prior year appropriations	(170,321,028)	(178,409,040)	(178,409,040)	(+8,088,012)		
(By transfer)	(312,137)	(316,578)	(316,578)	(+4,441)		
(Limitation on direct loans)	(2,856)	(2,537)	(2,537)	(-319)		

¹ \$2.1 billion in emergency funding for Medical Services purposes was appropriated in H. J. Res. 124 in addition to these funds.

