material shall be used to perform domestic Federal contracts for
construction, with certain exceptions. VA policy is to not accept foreign
construction material. However, if a bidder chooses to submit a bid that
includes foreign material, VA will
consider such bids if the material is
specifically identified and the price of
the material is provided. VAAR clause
852.236–89, Buy American Act, advises
bidders of these provisions and requires
bidders who want to offer foreign
construction material to list the material
and its price. Bidders who do not intend
to offer foreign material do not need to
submit any information under this
clause. The information is required to
allow VA to make an informed decision
as to whether or not to accept a bid that
includes foreign construction material.
In actual practice, very few bidders ever
offer foreign materials and, when they
do, very few of those offers are accepted.

An agency may not conduct or
sponsor, and a person is not required to
respond to a collection of information
unless it displays a currently valid OMB
collection control number. The Federal Register
Notice with a 60-day comment period
soliciting comments on this collection
of information was published at 82 FR
142 on July 26, 2017, pages 34747 and
34748.

Affected Public: Business or other for-
profit and not-for-profit institutions.

Estimated Annual Burden: VAAR
clause 852.236–89, Buy American Act—
22 hours.

Estimated Average Burden per
Respondent: VAAR clause 852.236–89,
Buy American Act—30 minutes.

Frequency of Response: On occasion.

Estimated Number of Respondents:
VAAR clause 852.236–89, Buy
American Act—43.

By direction of the Secretary.

Cynthia Harvey-Pryor,
Department Clearance Officer, Office of
Quality, Privacy and Risk, Department of Veterans Affairs.

[FR Doc. 2018–00002 Filed 1–4–18; 8:45 am]
BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS
AFFAIRS

Notice of Request for Information on the
Program of Comprehensive Assistance for Family Caregivers (PCAFC)

AGENCY: Department of Veterans Affairs.

ACTION: Request for information.

SUMMARY: The Department of Veterans Affairs (VA) is requesting information
regarding its Program of Comprehensive Assistance for Family Caregivers
(PCAFC). Through PCAFC, VA provides certain medical, travel, training, and
stipend benefits to designated family caregivers of eligible veterans and
servicemembers who were seriously injured in the line of duty on or after
September 11, 2001. This notice requests information and comments from interested parties to help inform
PCAFC of any changes needed to increase consistency across the program,
as well as ensure it supports those family caregivers of veterans
servicemembers most in need.

DATES: Comments in response to this
request for information must be received by VA on or before February 5, 2018.

ADDRESSES: Written comments may be
submitted through http://
www.Regulations.gov; by mail or hand
delivery to the Director, Office of
Regulation Policy and Management
(00REG), Department of Veterans Affairs,
810 Vermont Avenue NW, Room 1063B, Washington, DC 20420; or
by fax to (202) 461–9026. Comments
should indicate that they are submitted
in response to “Notice of Request for
Information on the Department of
Veterans Affairs Program of
Comprehensive Assistance for Family
Caregivers (PCAFC)”. Copies of
comments received will be available for
public inspection in the Office of
Regulation Policy and Management
(00REG), Department of Veterans Affairs,
810 Vermont Ave, NW, Room
1063B, Washington, DC 20420, between
the hours of 8:00 a.m. and 4:30 p.m.,
Monday through Friday (except Federal
holidays). Please call (202) 461–4902
(this is not a toll-free number) for an
appointment. During the comment
period, comments may also be viewed
online through the Federal Docket
Management System at

FOR FURTHER INFORMATION CONTACT:
Margaret Kabat, National Director,
Caregiver Support Program, 10P4C,
Veterans Health Administration,
Department of Veterans Affairs, 810
Vermont Avenue NW, Washington, DC
20420, 202–461–6780 (this is not a toll
free number).

SUPPLEMENTARY INFORMATION: The
Program of Comprehensive Assistance for Family Caregivers (PCAFC) was
established by Title I of Public Law
111–163, Caregivers and Veterans Omnibus Health Services Act of 2010,
and is codified in section 1720G(a) of
title 38, United States Code (U.S.C.). VA has been administering PCAFC
continuously since 2011 and has implemented this program through its
regulations in part 71 of title 38, Code
of Federal Regulations (CFR). The
purpose of PCAFC is to support family
caregivers of eligible veterans (as
defined in 38 U.S.C. 1720G(a)(2) and 38
CFR 71.20 to include certain
servicemembers) through the provision
of caregiver benefits, including training,
respite care, counseling, technical
support, beneficiary travel (in certain
circumstances), a monthly stipend
payment, and access to health care (if
qualified) through the Civilian Health
and Medical Program of the Department
of Veterans Affairs (CHAMPVA). 38

For purposes of this notice
hereinafter, the term “veteran” refers to
veterans and servicemembers who apply
for or participate in the Program of
Comprehensive Assistance for Family
Caregivers.

We are issuing this notice in order to solicit input on several components of
the program, as further explained below. This notice and request for information
serves as a means for VA to consult with key stakeholders on whether and how
PCAFC should be modified to provide
the highest quality care and support
to veterans and their family caregivers
in a consistent manner. We will use the
information to inform any updates to
this program and its implementing
regulations. To the extent that there are
any comments related to, or which
would require changing, the relevant
statutory authorities, those comments
are outside the scope of this notice, as
those would require Congressional
action. The intent of this notice is for
VA to gather input from the public on
whether and how to change its
regulations under the current statute.

This notice and request for
information has a comment period of 45
days, during which individuals, groups,
and entities may reply to the questions
presented below. VA believes that 45
days is sufficient to provide comments,
as the individuals, groups, and entities
interested in this program likely have
information and opinions readily
available or can quickly compile and
submit such information. Commenters
are encouraged to provide complete but
concise responses to the questions
outlined below. Please note that VA will
not respond to comments or questions
regarding policy plans, decisions, or
issues with regard to this notice. VA may
choose to contact individual
commenters, and such communications
would serve to further clarify their
written comments.

In order to improve PCAFC, we are
seeking information on the following
topics and issues:

1. Unmet needs of family caregivers
2. Changes to current regulations
3. Alternatives to current program initiatives
4. Additional support needed by family caregivers
5. Communication and coordination between VA and non-VA entities
6. Opportunities for collaboration and integration with existing programs
Initial and Ongoing Eligibility of Veterans and Servicemembers

In order to be eligible for PCAFC under the statute, the individual must be a veteran or a servicemember undergoing medical discharge from the Armed Forces and must have a serious injury (including traumatic brain injury, psychological trauma, or other mental disorder) incurred or aggravated in the line of duty in the active military, naval, or air service on or after September 11, 2001. 38 U.S.C. 1720G(a)(2)(A)–(B), 38 CFR 71.20(a)–(b). We have defined “serious injury” as “any injury, including traumatic brain injury, psychological trauma, or other mental disorder, incurred or aggravated in the line of duty in the active military, naval, or air service on or after September 11, 2001, that renders the veteran or his or her surrogate, subject to certain exceptions. Additionally, under §71.45(c), caregiver benefits continue for 90 days after the date of revocation initiated by VA, subject to certain exceptions. We provide these extended periods of benefits to allow a family caregiver, who did not request the revocation, a transition period before benefits are discontinued (particularly, for certain benefits like health care). We believe these extended benefits periods are consistent with the purpose of 38 U.S.C. 1720G and represent an appropriate and compassionate way to interpret and enforce the law. 76 FR 26155–26156. The 30- and 90-day periods set forth in §71.45(b)(4) and (c), respectively, are the only instances in which the regulations provide for extended caregiver benefits beyond the date of revocation.

While a family caregiver can voluntarily leave the program at any time, when a family caregiver initiates revocation, his or her caregiver benefits terminate at the present or future date of revocation as specified by the family caregiver. 38 CFR 71.45(a). While a family caregiver is not required to provide a basis for revocation, a family caregiver’s voluntary revocation may involve instances when the family caregiver leaves because of a situation involving actions of the veteran. VA is seeking input on whether there are any circumstances in which a family caregiver’s benefits should be extended beyond the revocation date when the family caregiver makes the decision to be removed as the family caregiver as well as the length of such an extension.

**Determination of Stipend Payment Methodology for Primary Family Caregivers**

Section 1720G(a)(3)(A)(ii)(V) of title 38, U.S.C., requires VA to provide a monthly stipend to primary family caregivers of eligible veterans. Under the statute, VA is required to base the stipend amount on the amount and degree of personal care services provided; to the extent practicable, ensure that the amount is not less than the monthly amount a commercial home health care entity would pay an individual in the geographic area of the veteran to provide equivalent personal care services; and in the instance that the geographic area does not have a commercial home health entity, VA must take into consideration the costs of commercial providers of personal care services in those geographic areas with similar costs of living. See 38 U.S.C. 1720G(a)(3)(C).

Under the implementing regulations, VA relies on the U.S. Department of Labor’s Bureau of Labor Statistics (BLS) hourly wage rate for home health aides at the 75th percentile in the veteran’s geographic area of residence, which is multiplied by the Consumer Price Index for All Urban Consumers. 38 CFR 71.15, 71.40(c)(4). We have used the BLS wage rate to meet the intent of the statute to ensure that primary family caregivers are not paid less than home health aides in the applicable geographic area. 76 FR 26154. These rates, however, fluctuate annually in conjunction with changing geographical area designations, which can result in alterations to stipend amounts.

VA also calculates the stipend amount based on a veteran’s assigned tier level which is determined by a clinical assessment of functional needs, as further detailed in 38 CFR 71.40(c)(4). Specifically, VA determines the veteran’s level of dependency based on the degree to which he or she is unable to perform one or more activities of daily living or the degree to which he or she is in need of supervision or protection based on symptoms or residuals of neurological or other impairment or injury. VA conducts a clinical assessment, which is scored and summed. Based on the sum of all ratings, the veteran is assigned a tier level. Each tier level is assigned a...
number of hours, up to forty hours per week. The primary family caregiver receives a stipend based on the assigned tier level. Currently, this is a determination based upon the needs of the veteran, not the family caregiver, and it distinguishes among three different tiers.

Request for Information

Through this notice, we are soliciting information on PCAFC. We ask respondents to address the following questions, where possible, in the context of the discussion in this document. Commenters do not need to address every question and should focus on those that relate to their expertise or perspectives. To the extent possible, please clearly indicate which question(s) you address in your response. As previously mentioned, responses to this request will inform our updates to PCAFC. Accordingly, we request comments on the following:

1. Should VA change how “serious injury” is defined for the purposes of eligibility?
   a. Should the severity of injury be considered in determining eligibility to ensure VA is supporting family caregivers of Veterans most in need? If so, how should the level of severity be determined?
   b. How should VA define veterans who are most in need?
   c. Should eligibility be limited to only those veterans who without a family caregiver providing personal care services would otherwise require institutionalization? If so, how should this be determined?

2. One of the bases upon which a veteran can be determined to need personal care services is his or her need for supervision or protection based on symptoms or residuals of neurological or other impairment or injury.
   a. What should be the criteria to assess a veteran’s need for supervision or protection?
   b. What standardized tools should be used to assess a veteran’s need for supervision or protection because of a mental health condition?

3. To be eligible for the program, participation must be determined to be in the “best interest” of the veteran. How should “best interest” be defined?
   a. How can VA improve consistency in “best interest” determinations for participation in the program?
   b. Are there any conditions under which participation would not be in a veteran’s best interest?

4. Once approved for PCAFC, should the veteran’s eligibility be reassessed at specific time intervals or based on certain clinical indicators?
   a. If so, what intervals and/or what clinical indicators should be used?
   b. Should reassessments be standard for every participant? Are there conditions under which continued eligibility should be presumed and a reassessment not needed? If so, what would these conditions be?

5. When VA determines that a veteran or family caregiver is no longer eligible for PCAFC or the family caregiver or veteran no longer wishes to participate in PCAFC, the family caregiver’s designation is “revoked”. The term “revoked” is used in the statute (38 U.S.C. 1720G(a)(9)(C)(ii)(III)); however, stakeholders have expressed concerns that this term is not supportive of participants. What terminology should VA use in reference to those participants who are determined to be no longer eligible for the program?
   a. Should VA use such language as removal, discharge, or graduate in reference to participants who become ineligible for the program?
   b. Should the timeframes for continuation of benefits for family caregivers who are revoked from the Program be modified?

6. Should these conditions be?
   a. If so, how?
   b. Under what circumstances should family caregiver benefits be continued after revocation? For example, should VA continue providing benefits to a family caregiver who requests revocation due to an unsafe environment created by a veteran, such as an instance involving intimate partner violence committed by a veteran? How long should the benefits be continued under such circumstances?

7. VA’s methodology of stipend calculations using the U.S. Department of Labor’s Bureau of Labor Statistics (BLS) wage rates is complex and creates variability in stipend amounts annually across localities. How should VA calculate stipend rates?
   a. What other standards or rates should VA consider using to calculate stipends?
   b. Should VA use one BLS rate per state, i.e., one rate that is applicable to all veterans residing in a particular state?

8. A veteran is assigned a stipend tier based on the amount and degree of personal care services provided. How should VA assess and determine the amount and degree of personal care services provided to the veteran by the family caregiver?
   a. How should “degree of” need be determined, for both physical needs and those related to the need for supervision and protection?
   b. Should “degree of” need be based on either physical needs or needs related to psychological disorder? Or should all factors be considered together?
   c. Should the three tier system be changed? If so, how should it be changed?

Paperwork Reduction Act

This request for information constitutes a general solicitation of public comments as stated in the implementing regulations of the Paperwork Reduction Act of 1995 at 5 CFR 1320.3(b)(4). Therefore, this request for information does not impose information collection requirements (i.e., reporting, recordkeeping or third-party disclosure requirements). Consequently, there is no need for review by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.).

Signing Authority

The Secretary of Veterans Affairs, or designee, approved this document and authorized the undersigned to sign and submit the document to the Office of Federal Register for publication electronically as an official document of the Department of Veterans Affairs. Gina S. Ferrise, Deputy Chief of Staff, Department of Veterans Affairs, approved this document on December 6, 2017, for publication.

Dated: December 6, 2017.

Jeffrey Martin,
Impact Analyst, Office of Regulation Policy & Management, Office of the Secretary, Department of Veterans Affairs.

[FR Doc. 2018–00004 Filed 1–4–18; 8:45 am]
BILLING CODE 8320–01–P