

Public Law 96-22  
96th Congress

An Act

To amend title 38, United States Code, to revise and improve certain health-care programs of the Veterans' Administration, to authorize the construction, alteration, and acquisition of certain medical facilities, and to expand certain benefits for disabled veterans; and for other purposes.

June 13, 1979

[S. 7]

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,* That (a) this Act may be cited as the "Veterans' Health Care Amendments of 1979".

Veterans'  
Health Care  
Amendments of  
1979.  
38 USC 101 note.

(b) Except as otherwise expressly provided, whenever in this Act an amendment or repeal is expressed in terms of an amendment to, or repeal of, a section or other provision, the reference shall be considered to be made to a section or other provision of title 38, United States Code.

TITLE I—HEALTH SERVICES PROGRAMS

PRIORITY FOR MEDICAL EXAMINATIONS FOR SERVICE-CONNECTED  
DISABILITIES

SEC. 101. Clause (3) of section 612(i) is amended by inserting "(including any veteran being examined to determine the existence or rating of a service-connected disability)" before the period.

38 USC 612.

DENTAL SERVICES AND TREATMENT FOR CERTAIN VETERANS

SEC. 102. (a) Section 610(c) is amended by adding at the end thereof the following new sentence: "The Administrator may furnish dental services and treatment, and related dental appliances, under this subsection for a non-service-connected dental condition or disability of a veteran only (1) to the extent that the Administrator determines that the dental facilities of the Veterans' Administration to be used to furnish such services, treatment, or appliances are not needed to furnish services, treatment, or appliances for dental conditions or disabilities described in section 612(b) of this title, or (2) if (A) such non-service-connected dental condition or disability is associated with or aggravating a disability for which such veteran is receiving hospital care, or (B) a compelling medical reason or a dental emergency requires furnishing dental services, treatment, or appliances (excluding the furnishing of such services, treatment, or appliances of a routine nature) to such veteran during the period of hospitalization under this section."

38 USC 610.

(b)(1) Subsection (b) of section 612 is amended—

(A) by striking out "or" at the end of clause (5);

(B) by striking out the period at the end of clause (6) and inserting in lieu thereof a semicolon; and

(C) by adding at the end thereof the following:

"(7) from which any veteran of World War I, World War II, the Korean conflict, or the Vietnam era who was held as a prisoner of war for a period of not less than six months is suffering; or

"(8) from which a veteran who has a service-connected disability rated as total is suffering.

38 USC 612;  
*infra.*

38 USC 612.  
*Infra.*  
*Post*, p. 54.

38 USC 610;  
*ante*, p. 47.

Report to  
congressional  
committees.

Outpatient  
dental services  
and treatment.

38 USC 601.

38 USC 610, 612.

In any year in which the President's Budget for the fiscal year beginning October 1 of such year includes an amount for expenditures for contract dental care under the provisions of subsections (a) and (f) of this section and section 601(4)(C) of this title during such fiscal year in excess of the level of expenditures made for such purpose during fiscal year 1978, the Administrator shall, not later than February 15 of such year, submit a report to the appropriate committees of the Congress justifying the requested level of expenditures for contract dental care and explaining why the application of the criteria prescribed in section 601(4)(C) of this title for contracting with private facilities and in the second sentence of section 610(c) of this title for furnishing incidental dental care to hospitalized veterans will not preclude the need for expenditures for contract dental care in excess of the fiscal year 1978 level of expenditures for such purpose. In any case in which the amount included in the President's Budget for any fiscal year for expenditures for contract dental care under such provisions is not in excess of the level of expenditures made for such purpose during fiscal year 1978 and the Administrator determines after the date of submission of such budget and before the end of such fiscal year that the level of expenditures for such contract dental care during such fiscal year will exceed the fiscal year 1978 level of expenditures, the Administrator shall submit a report to the appropriate committees of the Congress containing both a justification (with respect to the projected level of expenditures for such fiscal year) and an explanation as required in the preceding sentence in the case of a report submitted pursuant to such sentence. Any report submitted pursuant to this subsection shall include a comment by the Administrator on the effect of the application of the criteria prescribed in the second sentence of section 610(c) of this title for furnishing incidental dental care to hospitalized veterans."

(2) Subsection (f) of such section is amended by adding at the end thereof the following new sentence: "The Administrator may also furnish outpatient dental services and treatment, and related appliances, to any veteran described in subsection (b)(7) of this section."

(c) Section 601 is amended—

(1) by inserting "of the first sentence, or in the third sentence," in paragraph (4)(C)(ii) after "(1)(B) or (2)"; and

(2) by striking out "authorized in section 612 (b), (c), (d), and (e)" in paragraph (6)(A)(i) and inserting in lieu thereof "described in sections 610 and 612".

#### READJUSTMENT COUNSELING PROGRAM FOR VETERANS OF THE VIETNAM ERA

SEC. 103. (a)(1) Subchapter II of chapter 17 is amended by inserting after section 612 the following new section:

38 USC 612A.

#### "§612A. Eligibility for readjustment counseling and related mental health services

"(a) Upon the request of any veteran who served on active duty during the Vietnam era, the Administrator shall, within the limits of Veterans' Administration facilities, furnish counseling to such veteran to assist such veteran in readjusting to civilian life if such veteran requests such counseling within two years after the date of such veteran's discharge or release from active duty or two years after the effective date of this section, whichever is later. Such counseling shall include a general mental and psychological assess-

ment to ascertain whether such veteran has mental or psychological problems associated with readjustment to civilian life.

“(b)(1) If, on the basis of the assessment furnished under subsection (a) of this section, a physician or psychologist employed by the Veterans’ Administration (or, in areas where no such physician or psychologist is available, a physician or psychologist carrying out such function under a contract or fee arrangement with the Administrator) determines that the provision of mental health services to such veteran is necessary to facilitate the successful readjustment of the veteran to civilian life, such veteran shall, within the limits of Veterans’ Administration facilities, be furnished such services on an outpatient basis under the conditions specified in clause (1)(B) of section 612(f) of this title. For the purposes of furnishing such mental health services, the counseling furnished under subsection (a) of this section shall be considered to have been furnished by the Veterans’ Administration as a part of hospital care. Any hospital care and other medical services considered necessary on the basis of the assessment furnished under subsection (a) of this section shall be furnished only in accordance with the eligibility criteria otherwise set forth in this chapter (including the eligibility criteria set forth in section 611(b) of this title).

Outpatient  
service.

38 USC 612.

38 USC 611.

“(2) Mental health services furnished under paragraph (1) of this subsection may, if determined to be essential to the effective treatment and readjustment of the veteran, include such consultation, counseling, training, services, and expenses as are described in section 601(6)(B) of this title.

38 USC 601.

“(c) Upon receipt of a request for counseling under this section from any individual who has been discharged or released from active military, naval, or air service but who is not eligible for such counseling, the Administrator shall—

“(1) provide referral services to assist such individual, to the maximum extent practicable, in obtaining mental health care and services from sources outside the Veterans’ Administration; and

“(2) if pertinent, advise such individual of such individual’s rights to apply to the appropriate military, naval, or air service and the Veterans’ Administration for review of such individual’s discharge or release from such service.

“(d) The Chief Medical Director may provide for such training of professional, paraprofessional, and lay personnel as is necessary to carry out this section effectively, and, in carrying out this section, may utilize the services of paraprofessionals, individuals who are volunteers working without compensation, and individuals who are veteran-students (as described in section 1685 of this title), in initial intake and screening activities.

Training of  
professional,  
paraprofessional  
and lay  
personnel.

38 USC 1685.

“(e)(1) In furnishing counseling and related mental health services under subsections (a) and (b) of this section, the Administrator shall have available the same authority to enter into contracts with private facilities that is available to the Administrator (under sections 612(f)(2) and 601(4)(C)(ii) of this title) in furnishing medical services to veterans suffering from total service-connected disabilities.

38 USC 612, 601.

“(2) Before furnishing counseling or related mental health services described in subsections (a) and (b) of this section through a contract facility, as authorized by this subsection, the Administrator shall approve (in accordance with criteria which the Administrator shall prescribe by regulation) the quality and effectiveness of the program

operated by such facility for the purpose for which the counseling or services are to be furnished.

“(3) The authority of the Administrator to enter into contracts under this subsection shall be effective for any fiscal year only to such extent or in such amounts as are provided in appropriation Acts.

Eligibility  
assistance,  
notification.

“(f) The Administrator, in cooperation with the Secretary of Defense, shall take such action as the Administrator considers appropriate to notify veterans who may be eligible for assistance under this section of such potential eligibility.”

(2) The table of sections at the beginning of chapter 17 is amended by inserting after the item relating to section 612 the following new item:

“612A. Eligibility for readjustment counseling and related mental health services.”

Eligibility  
assistance in  
case of  
declaration of  
war.  
38 USC 612A  
note.

(b) In the event of a declaration of war by the Congress after the date of the enactment of this Act, the Administrator of Veterans' Affairs, not later than six months after the date of such declaration, shall determine and recommend to the Congress whether eligibility for the readjustment counseling and related mental health services provided for in section 612A of title 38, United States Code (as added by subsection (a) of this section) should be extended to the veterans of such war.

Ante, p. 48.

PILOT PROGRAM FOR TREATMENT AND REHABILITATION OF VETERANS  
WITH ALCOHOL OR DRUG DEPENDENCE OR ABUSE DISABILITIES

SEC. 104. (a) Subchapter II of chapter 17 is amended by adding at the end thereof the following new section:

38 USC 620A.

“§ 620A. Treatment and rehabilitation for alcohol or drug dependence or abuse disabilities; pilot program

“(a)(1) The Administrator, in furnishing hospital, nursing home, and domiciliary care and medical and rehabilitative services under this chapter, may conduct a pilot program under which the Administrator may contract for care and treatment and rehabilitative services in halfway houses, therapeutic communities, psychiatric residential treatment centers, and other community-based treatment facilities of eligible veterans suffering from alcohol or drug dependence or abuse disabilities. Such pilot program shall be planned, designed, and conducted by the Chief Medical Director, with the approval of the Administrator, so as to demonstrate any medical advantages and cost effectiveness that may result from furnishing such care and services to veterans with such disabilities in contract facilities as authorized by this section, rather than in facilities over which the Administrator has direct jurisdiction.

Program quality  
and  
effectiveness,  
approval.

“(2) Before furnishing such care and services to any veteran through a contract facility as authorized by paragraph (1) of this subsection, the Administrator shall approve (in accordance with criteria which the Administrator shall prescribe by regulation) the quality and effectiveness of the program operated by such facility for the purpose for which such veteran is to be furnished such care and services.

Employment  
and training  
opportunities.

“(b) The Administrator, in consultation with the Secretary of Labor and the Director of the Office of Personnel Management, may take appropriate steps to (1) urge all Federal agencies and appropriate private and public firms, organizations, agencies, and persons to provide appropriate employment and training opportunities for veterans who have been provided treatment and rehabilitative services

under this title for alcohol or drug dependence or abuse disabilities and have been determined by competent medical authority to be sufficiently rehabilitated to be employable, and (2) provide all possible assistance to the Secretary of Labor in placing such veterans in such opportunities.

“(c) Upon receipt of an application for treatment and rehabilitative services under this title for an alcohol or drug dependence or abuse disability from any individual who has been discharged or released from active military, naval, or air service but who is not eligible for such treatment and services, the Administrator shall—

Noneligible individuals, provisions.

“(1) provide referral services to assist such individual, to the maximum extent practicable, in obtaining treatment and rehabilitative services from sources outside the Veterans’ Administration; and

“(2) if pertinent, advise such individual of such individual’s rights to apply to the appropriate military, naval, or air service and the Veterans’ Administration for review of such individual’s discharge or release from such service.

“(d)(1) Any person serving in the active military, naval, or air service who is determined by the Secretary concerned to have an alcohol or drug dependence or abuse disability may not be transferred to any facility in order for the Administrator to furnish care or treatment and rehabilitative services for such disability unless such transfer is during the last thirty days of such member’s enlistment period or tour of duty, in which case such care and services provided to such member shall be provided as if such member were a veteran. Any transfer of any such member for such care and services shall be made pursuant to such terms as may be agreed upon by the Secretary concerned and the Administrator, subject to the provisions of the Act of March 4, 1915 (31 U.S.C. 686).

Transfer to another facility, requirement.

“(2) No person serving in the active military, naval, or air service may be transferred pursuant to an agreement made under paragraph (1) of this subsection unless such person requests such transfer in writing for a specified period of time during the last thirty days of such person’s enlistment period or tour of duty. No such person transferred pursuant to such a request may be furnished such care and services by the Administrator beyond the period of time specified in such request, unless such person requests in writing an extension for a further specified period of time and such request is approved by the Administrator.

Written request for transfer; extension.

“(e) The Administrator may not furnish care and treatment and rehabilitative services under subsection (a) of this section after the last day of the fifth fiscal year following the fiscal year in which the pilot program authorized by such subsection is initiated.

Termination.

“(f) Not later than March 31, 1983, the Administrator shall report to the Committees on Veterans’ Affairs of the Senate and House of Representatives on the findings and recommendations of the Administrator pertaining to the operation through September 30, 1982, of the pilot program authorized by this section.

Report to congressional committees.

“(g) The authority of the Administrator to enter into contracts under this section shall be effective for any fiscal year only to such extent or in such amounts as are provided in appropriation Acts.”

Contract provision.

(b) The table of sections at the beginning of chapter 17 is amended by adding after the item relating to section 620 the following new item:

"620A. Treatment and rehabilitation for alcohol or drug dependence or abuse disabilities; pilot program."

PILOT PROGRAM OF PREVENTIVE HEALTH-CARE SERVICES

SEC. 105. (a) Chapter 17 is amended by adding at the end thereof the following new subchapter:

**"Subchapter VII—Preventive Health-Care Services Pilot Program**

38 USC 661.

**"§ 661. Purpose**

"The purpose of this subchapter is to provide for a preventive health-care services pilot program under which the Administrator may attempt to (1) ensure the best possible health care for certain veterans with service-connected disabilities rated at 50 per centum or more and for certain veterans being furnished treatment involving a service-connected disability under this chapter, by furnishing to such veterans feasible and appropriate preventive health-care services, and (2) determine the cost-effectiveness and medical advantages of furnishing such preventive health-care services.

38 USC 662.

**"§ 662. Definition**

"For the purposes of this subchapter, the term 'preventive health-care services' means—

- "(1) periodic medical and dental examinations;
- "(2) patient health education (including nutrition education);
- "(3) maintenance of drug use profiles, patient drug monitoring, and drug utilization education;
- "(4) mental health preventive services;
- "(5) substance abuse prevention measures;
- "(6) immunizations against infectious disease;
- "(7) prevention of musculoskeletal deformity or other gradually developing disabilities of a metabolic or degenerative nature;
- "(8) genetic counseling concerning inheritance of genetically determined diseases;
- "(9) routine vision testing and eye care services;
- "(10) periodic reexamination of members of likely target populations (high-risk groups) for selected diseases and for functional decline of sensory organs, together with attendant appropriate remedial intervention; and
- "(11) such other health-care services as the Administrator may determine to be necessary to provide effective and economical preventive health care.

38 USC 663.

**"§ 663. Preventive health-care services**

"(a)(1) In order to carry out the purpose of this subchapter, the Administrator, within the limits of Veterans' Administration facilities and in accordance with regulations which the Administrator shall prescribe, may furnish to any veteran described in section 612(f)(2) of this title, and to any veteran receiving care and treatment under this chapter involving a service-connected disability, such preventive health-care services as the Administrator determines are feasible and appropriate.

38 USC 612.

"(2) In connection with preventive health-care services furnished under paragraph (1) of this subsection, the Administrator, in accordance with regulations which the Administrator shall prescribe, may institute appropriate controls and carry out followup studies (includ-

ing research) to determine the medical advantages and cost-effectiveness of furnishing such preventive health-care services.

“(b) In carrying out the pilot program provided for by this subchapter, the Administrator may not furnish preventive health-care services after September 30, 1984.

Services,  
termination  
date.

“(c) In carrying out this subchapter, the Administrator shall emphasize the utilization of interdisciplinary health-care teams composed of various professional and paraprofessional personnel.

Professional and  
paraprofessional  
personnel.

“(d) In order to carry out the program provided for in this subchapter, the Administrator may not expend more than \$10,000,000 in fiscal year 1980, more than \$12,000,000 in fiscal year 1981, more than \$13,000,000 in fiscal year 1982, more than \$14,000,000 in fiscal year 1983, or more than \$15,000,000 in fiscal year 1984.

“§ 664. Reports

“The Administrator shall include in the annual report to the Congress required by section 214 of this title a comprehensive report on the administration of this subchapter, including such recommendations for additional legislation as the Administrator considers necessary.”

Report to  
Congress.  
38 USC 664.  
38 USC 214.

(b) The table of sections at the beginning of such chapter is amended by adding at the end thereof the following:

“SUBCHAPTER VII—PREVENTIVE HEALTH-CARE SERVICES PILOT PROGRAM

“661. Purpose.

“662. Definition.

“663. Preventive health-care services.

“664. Reports.”

HOSPITAL AND NURSING HOME CARE AND MEDICAL SERVICES WITHIN THE UNITED STATES FOR COMMONWEALTH ARMY VETERANS AND NEW PHILIPPINE SCOUTS

SEC. 106. (a) Subchapter IV of chapter 17 is amended by redesignating section 634 as section 635 and by inserting after section 633 the following new section:

“§ 634. Hospital and nursing home care and medical services in the United States

38 USC 634.

“The Administrator, within the limits of Veterans’ Administration facilities, may furnish hospital and nursing home care and medical services to Commonwealth Army veterans and new Philippine Scouts for the treatment of the service-connected disabilities of such veterans and scouts.”

(b) The table of sections at the beginning of chapter 17 is amended by striking out the item relating to section 634 and inserting in lieu thereof the following new items:

“634. Hospital and nursing home care and medical services in the United States.

“635. Definitions.”

EFFECTIVE DATE OF CERTAIN PROVISIONS

SEC. 107. The amendments made to title 38, United States Code, by sections 102, 103, 104, 105, and 106 of this Act shall be effective on October 1, 1979.

38 USC 601 note.  
Ante, pp. 47, 48,  
50, 52.  
Supra.

## TITLE II—CONTRACT-CARE PROGRAMS

## DEFINITION OF "VETERANS' ADMINISTRATION FACILITIES"

38 USC 601.

SEC. 201. (a) Paragraph (4) of section 601 is amended—

38 USC 612.

(1) by inserting "or of a veteran described in section 612(g) of this title if the Administrator has determined, based on an examination by a physician employed by the Veterans' Administration (or, in areas where no such physician is available, by a physician carrying out such function under a contract or fee arrangement), that the medical condition of such veteran precludes appropriate treatment in facilities described in clauses (A) and (B) of this paragraph" before the semicolon at the end of subclause (ii) of clause (C);

(2) by striking out "or" after the semicolon at the end of subclause (iv) of clause (C), and striking out the period at the end of such clause and inserting in lieu thereof a semicolon and the following: "or (vi) diagnostic services necessary for determination of eligibility for, or of the appropriate course of treatment in connection with, the provision of medical services at independent Veterans' Administration outpatient clinics to obviate the need for hospital admission."; and

Treatment in private facility, review.

(3) by adding below clause (C) the following new sentence: "In the case of any veteran for whom the Administrator contracts to provide treatment in a private facility pursuant to the provisions of this paragraph, the Administrator shall periodically review the necessity for continuing such contractual arrangement pursuant to such provision."

Reports to congressional committees.  
38 USC 601 note.

(b) Not later than February 1, 1980, and annually thereafter, the Chief Medical Director of the Veterans' Administration shall submit to the appropriate committees of the Congress, through the Administrator of Veterans' Affairs, a full report on the implementation of section 601(4)(C)(v) of title 38, United States Code, and the amendments made by this section, and on the numbers of veterans provided contract treatment (and the average cost and duration thereof) in each State (as defined in section 101(20) of title 38, United States Code) in the categories described in the following provisions of such title: sections 601(4)(C), 610(a), 612(a), 612(f)(1)(A), 612(f)(1)(B), 612(f)(2), 612(g), 612A (as added by section 103(a)(1) of this Act), the third sentence of section 612(f) (as added by section 102(b)(2) of this Act), and section 620A (as added by section 104(a) of this Act).

38 USC 101.  
38 USC 601, *ante*, p. 48; 38 USC 610; 38 USC 612; *ante*, p. 48; *ante*, p. 50.

EMERGENCY MEDICAL SERVICES AT NATIONAL CONVENTIONS OF  
RECOGNIZED VETERANS' SERVICE ORGANIZATIONS

38 USC 611.

SEC. 202. Section 611 is amended by adding at the end thereof the following new subsection:

"(c)(1) The Administrator may contract with any organization recognized by the Administrator for the purposes of section 3402 of this title to provide for the furnishing by the Administrator, on a reimbursable basis (as prescribed by the Administrator), of emergency medical services to individuals attending any national convention of such organization, except that reimbursement shall not be required for services furnished under this subsection to the extent that the individual receiving such services would otherwise be eligible under this chapter for medical services.

“(2) The authority of the Administrator to enter into contracts under this subsection shall be effective for any fiscal year only to such extent or in such amounts as are provided in appropriation Acts.”.

### TITLE III—CONSTRUCTION, ALTERATION, LEASE, AND ACQUISITION OF MEDICAL FACILITIES

#### REVISION OF AUTHORITY FOR CONSTRUCTION, ALTERATION, LEASE, AND ACQUISITION OF MEDICAL FACILITIES

SEC. 301. (a) Subchapter I of chapter 81 is amended to read as follows:

#### “Subchapter I—Acquisition and Operation of Medical Facilities

##### “§ 5001. Definitions

38 USC 5001.

“For the purposes of this subchapter:

“(1) The term ‘alter’, with respect to a medical facility, means to repair, remodel, improve, or extend such medical facility.

“(2) The terms ‘construct’ and ‘alter’, with respect to a medical facility, include such engineering, architectural, legal, fiscal, and economic investigations and studies and such surveys, designs, plans, working drawings, specifications, procedures, and other similar actions as are necessary for the construction or alteration, as the case may be, of such medical facility and as are carried out after the completion of the advanced planning (including the development of project requirements and preliminary plans) for such facility.

“(3) The term ‘medical facility’ means any facility or part thereof which is, or will be, under the jurisdiction of the Administrator for the provision of health-care services (including hospital, nursing home, or domiciliary care or medical services), including any necessary building and auxiliary structure, garage, parking facility, mechanical equipment, trackage facilities leading thereto, abutting sidewalks, accommodations for attending personnel, and recreation facilities associated therewith.

“(4) The term ‘committee’ means the Committee on Veterans’ Affairs of the House of Representatives or the Committee on Veterans’ Affairs of the Senate, and the term ‘committees’ means both such committees.

##### “§ 5002. Acquisition of medical facilities

38 USC 5002.

“(a) The Administrator shall provide medical facilities for veterans entitled to hospital, nursing home, or domiciliary care or medical services under this title.

“(b) No medical facility may be constructed or otherwise acquired or altered except in accordance with the provisions of this subchapter.

“(c) In carrying out this subchapter, the Administrator—

Functions.

“(1) shall provide for the construction and acquisition of medical facilities in a manner that results in the equitable distribution of such facilities throughout the United States, taking into consideration the comparative urgency of the need for the services to be provided in the case of each particular facility; and

“(2) shall give due consideration to excellence of architecture and design.

38 USC 5003.

**“§ 5003. Authority to construct and alter, and to acquire sites for, medical facilities***Infra.*

“(a) Subject to section 5004 of this title, the Administrator—

“(1) may construct or alter any medical facility and may acquire, by purchase, lease, condemnation, donation, exchange, or otherwise, such land or interests in land as the Administrator considers necessary for use as the site for such construction or alteration;

“(2) may acquire, by purchase, lease, condemnation, donation, exchange, or otherwise, any facility (including the site of such facility) that the Administrator considers necessary for use as a medical facility; and

*Post, p. 59.*

“(3) in order to assure compliance with section 5010(a)(2) of this title, in the case of any outpatient medical facility for which it is proposed to lease space and for which a qualified lessor and an appropriate leasing arrangement are available, shall execute a lease for such facility within 12 months after funds are made available for such purpose.

“(b) Whenever the Administrator considers it to be in the interest of the United States to construct a new medical facility to replace an existing medical facility, the Administrator (1) may demolish the existing facility and use the site on which it is located for the site of the new medical facility, or (2) if in the judgment of the Administrator it is more advantageous to construct such medical facility on a different site in the same locality, may exchange such existing facility and the site of such existing facility for the different site.

“(c) Whenever the Administrator determines that any site acquired for the construction of a medical facility is not suitable for that purpose, the Administrator may exchange such site for another site to be used for that purpose or may sell such site.

38 USC 5004.

**“§ 5004. Congressional approval of certain medical facility acquisitions**

“(a) In order to ensure the equitable distribution of medical facilities throughout the United States, taking into consideration the comparative urgency of the need for the services to be provided in the case of each particular facility—

Construction cost, limitation.

“(1) no appropriation may be made for the construction, alteration, or acquisition (not including exchanges) of any medical facility which involves a total expenditure of more than \$2,000,000 unless each committee has first adopted a resolution approving such construction, alteration, or acquisition and setting forth the estimated cost thereof; and

Lease rental charge, limitation.

“(2) no appropriation may be made for the lease of any space for use as a medical facility at an average annual rental of more than \$500,000 unless each committee has first adopted a resolution approving such lease and setting forth the estimated cost thereof.

Prospectus.

“(b) In the event that the President or the Administrator proposes to the Congress the funding of any construction, alteration, lease, or other acquisition to which subsection (a) of this section is applicable, the Administrator shall submit to each committee, on the same day, a prospectus of the proposed medical facility. Such prospectus shall include—

Contents.

“(1) a detailed description of the medical facility to be constructed, altered, leased, or otherwise acquired under this subchapter, including a description of the location of such facility;

“(2) an estimate of the cost to the United States of the construction, alteration, lease, or other acquisition of such facility (including site costs, if applicable); and

“(3) an estimate of the cost to the United States of the equipment required for the operation of such facility.

“(c) The estimated cost of any construction, alteration, lease, or other acquisition that is approved under this section, as set forth in the pertinent resolutions described in subsection (a) of this section, may be increased by the Administrator in the contract for such construction, alteration, lease, or other acquisition by an amount equal to the percentage increase, if any, as determined by the Administrator, in construction, alteration, lease, or other acquisition costs, as the case may be, from the date of such approval to the date of contract, but in no event may the amount of such increase exceed 10 per centum of such estimated cost.

Cost increase, limitation.

“(d) In the case of any medical facility approved for construction, alteration, lease, or other acquisition by each committee under subsection (a) of this section for which funds have not been appropriated within one year after the date of such approval, either such committee may by resolution rescind its approval at any time thereafter before such funds are appropriated.

Rescinding of approval.

“(e) In any case in which the Administrator proposes that funds be used for a purpose other than the purpose for which such funds were appropriated, the Administrator shall promptly notify each committee, in writing, of the particulars involved and the reasons why such funds were not used for the purpose for which appropriated.

“(f) The Administrator may accept gifts or donations for any of the purposes of this subchapter.

Gifts or donations.

“§ 5005. Structural requirements

38 USC 5005.

“(a) Each medical facility (including each nursing home facility for which the Administrator contracts under section 620 of this title and each State home facility constructed or altered under section 5031 of this title) shall be of fire, earthquake, and other natural disaster resistant construction in accordance with standards which the Administrator shall prescribe on a State or regional basis after surveying appropriate State and local laws, ordinances, and building codes and climatic and seismic conditions pertinent to each such facility. When an existing structure is acquired for use as a medical facility, it shall be altered to comply with such standards.

38 USC 620.

38 USC 5031.

“(b)(1) In order to carry out this section, the Administrator shall appoint an advisory committee to be known as the ‘Advisory Committee on Structural Safety of Veterans’ Administration Facilities’, on which shall serve at least one architect and one structural engineer who are experts in structural resistance to fire, earthquake, and other natural disasters and who are not employees of the Federal Government.

Advisory Committee on Structural Safety of Veterans’ Administration Facilities; membership.

“(2) Such advisory committee shall advise the Administrator on all matters of structural safety in the construction and altering of medical facilities in accordance with the requirements of this section and shall review and make recommendations to the Administrator on the regulations prescribed under this section.

Function.

“(3) The Associate Deputy Administrator, the Chief Medical Director or the designee of the Chief Medical Director, and the Veterans’ Administration official charged with the responsibility for construction shall be ex officio members of such advisory committee.

Ex officio members.

38 USC 5006.

**“§ 5006. Construction contracts**

“(a) The Administrator may carry out any construction or alteration authorized under this subchapter by contract if the Administrator considers it to be advantageous to the United States to do so.

“(b)(1) The Administrator may obtain, by contract or otherwise, the services of individuals who are architects or engineers and of architectural and engineering corporations and firms, to the extent that the Administrator may require such services for any medical facility authorized to be constructed or altered under this subchapter.

“(2) No corporation, firm, or individual may be employed under the authority of paragraph (1) of this subsection on a permanent basis.

“(c) Notwithstanding any other provision of this section, the Administrator shall be responsible for all construction authorized under this subchapter, including the interpretation of construction contracts, the approval of materials and workmanship supplied pursuant to a construction contract, approval of changes in the construction contract, certification of vouchers for payments due the contractor, and final settlement of the contract.

38 USC 5007.

**“§ 5007. Reports to congressional committees**

“(a) In order to promote effective planning for the orderly construction, replacement, and alteration of medical facilities in accordance with the comparative urgency of the need for the services to be provided by such facilities, the Administrator shall submit to each committee an annual report on the construction, replacement, and alteration of medical facilities. Such report shall be submitted to the committees on the same day each year and shall contain—

Contents.

“(1) a five-year plan for the construction, replacement, or alteration of those medical facilities that, in the judgment of the Administrator, are most in need of construction, replacement, or alteration;

“(2) a list, in order of priority, of not less than ten hospitals that, in the judgment of the Administrator, are most in need of construction or replacement; and

“(3) general plans (including projected costs, site location, and, if appropriate, necessary land acquisition) for each medical facility included in the five-year plan required under clause (1) of this subsection or the list required under clause (2) of this subsection.

The first such report shall be submitted not later than September 1, 1979, and each succeeding report shall be submitted not later than June 30 of each year.

Medical facility data.

“(b) The Administrator shall submit to each committee not later than January 31 of each year (beginning in 1981) a report showing the location, space, cost, and status of each medical facility the construction, alteration, lease, or other acquisition of which has been approved under section 5004(a) of this title and, in the case of the second and each succeeding report made under this subsection, which was uncompleted as of the date of the last preceding report made under this subsection.

Ante, p. 56.

38 USC 5008.

**“§ 5008. Contributions to local authorities**

“The Administrator may make contributions to local authorities toward, or for, the construction of traffic controls, road improvements, or other devices adjacent to a medical facility if considered necessary for safe ingress or egress.

**“§ 5009. Garages and parking facilities**

38 USC 5009.

“(a) The Administrator may construct, alter, operate, and maintain, on reservations of medical facilities, garages and parking facilities for the accommodation of privately owned vehicles of employees of such facilities and vehicles of visitors and other individuals having business at such facilities.

“(b)(1) The Administrator may establish and collect (or provide for the collection of) fees for the use of such garages and parking facilities at such rate or rates which the Administrator determines would be reasonable under the particular circumstances; but no fee may be charged for the accommodation of any publicly or privately owned vehicle used in connection with the transportation of a veteran to or from any medical facility for the purposes of examination or treatment or in connection with any visit to any patient in such facility. Employees using such garages shall make such reimbursement therefor as the Administrator may deem reasonable.

Fees.

“(2) The Administrator may contract, by lease or otherwise, with responsible persons, firms, or corporations for the operation of such parking facilities, under such terms and conditions as the Administrator shall prescribe, and without regard to the laws concerning advertising for competitive bids.

Lease of parking facilities.

“(c)(1) There are authorized to be appropriated such amounts as are necessary to finance in part the construction, alteration, operation, and maintenance of garages and parking facilities (other than the construction or alteration of any garage or parking facility involving the expenditure of more than \$2,000,000). Amounts appropriated under the authority of this section, and all income from fees collected for the use of such garages and parking facilities, shall be administered as a revolving fund to effectuate the provisions of this section, but only to the extent provided for in appropriation Acts.

Appropriation authorization.

Revolving fund.

“(2) The revolving fund shall be deposited in a checking account with the Treasurer of the United States, except that such amounts thereof as the Administrator may determine to be necessary to establish and maintain operating accounts for the various garages and parking facilities may be placed in depositories selected by the Administrator.

**“§ 5010. Operation of medical facilities**

38 USC 5010.

“(a)(1) The Administrator, subject to the approval of the President, is authorized to establish and operate not less than one hundred and twenty-five thousand hospital beds in medical facilities over which the Administrator has direct jurisdiction for the care and treatment of eligible veterans. The Administrator shall staff and maintain, in such a manner as to ensure the immediate acceptance and timely and complete care of patients, sufficient beds and other treatment capacities to accommodate, and provide such care to, eligible veterans applying for admission and found to be in need of hospital care or medical services.

“(2) The Administrator shall maintain the bed and treatment capacities of all Veterans' Administration medical facilities so as to ensure the accessibility and availability of such beds and treatment capacities to eligible veterans in all States and to minimize delays in admissions and in the provision of hospital, nursing home, and domiciliary care, and of medical services furnished pursuant to section 612 of this title.

“(3) The Chief Medical Director shall periodically analyze agencywide admission policies and the records of those eligible

38 USC 612; *ante*, p. 47. Analysis of treatment facilities.

veterans who apply for hospital care and medical services but are rejected or not immediately admitted or provided such care or services, and the Administrator shall annually advise each committee of the results of such analysis and the number of any additional beds and treatment capacities and the appropriate staffing and funds therefor found necessary to meet the needs of such veterans for such necessary care and services.

Nursing home care.

“(b) The Administrator, subject to the approval of the President, is authorized to establish and operate not less than twelve thousand beds during fiscal year 1980, and during each fiscal year thereafter, for the furnishing of nursing home care to eligible veterans in facilities over which the Administrator has direct jurisdiction. The beds authorized by this subsection shall be in addition to the beds provided for in subsection (a) of this section.

Personnel with linguistic abilities.

“(c) When the Administrator determines, in accordance with regulations which the Administrator shall prescribe, that a Veterans' Administration facility serves a substantial number of veterans with limited English-speaking ability, the Administrator shall establish and implement procedures, upon the recommendation of the Chief Medical Director, to ensure the identification of sufficient numbers of individuals on such facility's staff who are fluent in both the language most appropriate to such veterans and in English and whose responsibilities shall include providing guidance to such veterans and to appropriate Veterans' Administration staff members with respect to cultural sensitivities and bridging linguistic and cultural differences.

38 USC 5011.

**“§ 5011. Use of Armed Forces facilities**

“The Administrator and the Secretary of the Army, the Secretary of the Air Force, and the Secretary of the Navy may enter into agreements and contracts for the mutual use or exchange of use of hospital and domiciliary facilities, and such supplies, equipment, and material as may be needed to operate such facilities properly, or for the transfer, without reimbursement of appropriations, of facilities, supplies, equipment, or material necessary and proper for authorized care for veterans, except that at no time shall the Administrator enter into any agreement which will result in a permanent reduction of Veterans' Administration hospital and domiciliary beds below the number established or approved on June 22, 1944, plus the estimated number required to meet the load of eligibles under this title, or in any way subordinate or transfer the operation of the Veterans' Administration to any other agency of the Government.

38 USC 5012.

**“§ 5012. Partial relinquishment of legislative jurisdiction**

“The Administrator, on behalf of the United States, may relinquish to the State in which any lands or interests therein under the supervision or control of the Administrator are situated, such measure of legislative jurisdiction over such lands or interests as is necessary to establish concurrent jurisdiction between the Federal Government and the State concerned. Such partial relinquishment of legislative jurisdiction shall be initiated by filing a notice thereof with the Governor of the State concerned, or in such other manner as may be prescribed by the laws of such State, and shall take effect upon acceptance by such State.

Filing of notice with Governor of State.

**“§ 5013. Property formerly owned by National Home for Disabled Volunteer Soldiers**

38 USC 5013.

“If by reason of any defeasance or conditional clause or clauses contained in any deed of conveyance of property to the National Home for Disabled Volunteer Soldiers, which property is owned by the United States, the full and complete enjoyment and use of such property is threatened, the Attorney General, upon request of the President, shall institute in the United States district court for the district in which the property is located such proceedings as may be proper to extinguish all outstanding adverse interests. The Attorney General may procure and accept, on behalf of the United States, by gift, purchase, cession, or otherwise, absolute title to, and complete jurisdiction over, all such property.

**“§ 5014. Use of federally owned facilities; use of personnel**

38 USC 5014.

“(a) The Administrator, subject to the approval of the President, may use as medical facilities such suitable buildings, structures, and grounds owned by the United States on March 3, 1925, as may be available for such purposes, and the President may by Executive order transfer any such buildings, structures, and grounds to the control and jurisdiction of the Veterans' Administration upon the request of the Administrator.

“(b) The President may require the architectural, engineering, constructing, or other forces of any of the departments of the Government to do or assist in the construction and alteration of medical facilities, and the President may employ for such purposes individuals and agencies not connected with the Government, if in the opinion of the President such is desirable, at such compensation as the President may consider reasonable.

**“§ 5015. Acceptance of certain property**

38 USC 5015.

“The President may accept from any State or other political subdivision, or from any person, any building, structure, equipment, or grounds suitable for the care of disabled persons, with due regard to fire or other hazards, state of repair, and all other pertinent considerations. The President may designate which agency of the Federal Government shall have the control and management of any property so accepted.”

(b)(1) Subchapter II of chapter 81 is amended by redesignating sections 5011, 5012, 5013, and 5014 as sections 5021, 5022, 5023, and 5024, respectively.

38 USC  
5011-5014,  
5021-5024.

(2) Section 5022(b) (as so redesignated) is amended by striking out the comma and “clinical, medical, and outpatient treatment” after “administrative”.

(c) The table of sections at the beginning of chapter 81 is amended by striking out the item relating to subchapter I and all that follows through the item relating to section 5014 and inserting in lieu thereof the following:

## "SUBCHAPTER I—ACQUISITION AND OPERATION OF MEDICAL FACILITIES

- "Sec.  
 "5001. Definitions.  
 "5002. Acquisition of medical facilities.  
 "5003. Authority to construct and alter, and to acquire sites for, medical facilities.  
 "5004. Congressional approval of certain medical facility acquisitions.  
 "5005. Structural requirements.  
 "5006. Construction contracts.  
 "5007. Reports to congressional committees.  
 "5008. Contributions to local authorities.  
 "5009. Garages and parking facilities.  
 "5010. Operation of medical facilities.  
 "5011. Use of Armed Forces facilities.  
 "5012. Partial relinquishment of legislative jurisdiction.  
 "5013. Property formerly owned by National Home for Disabled Volunteer Soldiers.  
 "5014. Use of federally owned facilities; use of personnel.  
 "5015. Acceptance of certain property.

## "SUBCHAPTER II—PROCUREMENT AND SUPPLY

- "5021. Revolving supply fund.  
 "5022. Authority to procure and dispose of property and to negotiate for common services.  
 "5023. Procurement of prosthetic appliances.  
 "5024. Grant of easements in Government-owned lands."

## EFFECTIVE DATES

38 USC 5001  
*note.*  
*Ante*, p. 55.

SEC. 302. (a) Except as provided in subsection (b) of this section, the amendments made by section 301 shall take effect on October 1, 1979.

38 USC 5001.

(b)(1) The amendments made by section 301 shall not apply with respect to the acquisition, construction, or alteration of any medical facility (as defined in section 5001(3) of title 38, United States Code, as amended by section 301(a) of this Act) if such acquisition, construction, or alteration (not including exchange) was approved before October 1, 1979, by the President.

38 USC 5007.

(2) The provisions of section 5007(a) of title 38, United States Code, as amended by section 301(a) of this Act, shall take effect on the date of the enactment of this Act.

TITLE IV—BENEFITS PAYABLE TO PERSONS RESIDING  
OUTSIDE THE UNITED STATES

## CHILDREN ADOPTED UNDER LAWS OF FOREIGN COUNTRIES

38 USC 101.

SEC. 401. Paragraph (4) of section 101 is amended—

(1) by inserting "(A)" before "The" and redesignating clauses (A), (B), and (C) as clauses (i), (ii), and (iii), respectively; and

(2) by adding at the end of such paragraph the following new subparagraph:

"(B) For the purposes of subparagraph (A) of this paragraph, in the case of an adoption under the laws of any jurisdiction other than a State (as defined in section 101(20) of this title and including the Commonwealth of the Northern Mariana Islands)—

38 USC 1766.

"(i) a person residing outside any of the States shall not be considered to be a legally adopted child of a veteran during the lifetime of such veteran (including for purposes of this subparagraph a Commonwealth Army veteran or new Philippine Scout, as defined in section 1766 of this title) unless such person—

"(I) was less than eighteen years of age at the time of adoption;

"(II) is receiving one-half or more of such person's annual support from such veteran;

“(III) is not in the custody of such person’s natural parent, unless such natural parent is such veteran’s spouse; and

“(IV) is residing with such veteran (or in the case of divorce following adoption, with the divorced spouse who is also an adoptive or natural parent) except for periods during which such person is residing apart from such veteran (or such divorced spouse) for purposes of full-time attendance at an educational institution or during which such person or such veteran (or such divorced spouse) is confined in a hospital, nursing home, other health-care facility, or other institution; and

“(ii) a person shall not be considered to have been a legally adopted child of a veteran as of the date of such veteran’s death and thereafter unless—

“(I) at any time within the one-year period immediately preceding such veteran’s death, such veteran was entitled to and was receiving a dependent’s allowance or similar monetary benefit under this title for such person; or

“(II) for a period of at least one year prior to such veteran’s death, such person met the requirements of clause (i) of this subparagraph.”.

STUDY OF BENEFITS PAYABLE TO PERSONS RESIDING OUTSIDE THE  
UNITED STATES

SEC. 402. (a) The Administrator of Veterans’ Affairs, in consultation with the Secretary of State, shall carry out a comprehensive study of benefits payable under the provisions of title 38, United States Code, to persons who reside outside the fifty States and the District of Columbia. The Administrator shall include in such study—

38 USC 101 note.

38 USC 101 *et seq.*

(1) an analysis of the issues involved in the payment of such benefits to persons who reside outside the fifty States and the District of Columbia, together with analyses of such aspects of the economy of each foreign country and each territory, possession, and Commonwealth of the United States in which a substantial number of persons receiving such benefits reside as are relevant to such issues (such as the rate of inflation, the standard of living, and health care, educational, housing, and burial costs);

(2) an analysis of the issues involved in the payment of such benefits as the result of adoptions under laws other than the laws of any of the fifty States or the District of Columbia;

(3) an analysis of the amounts and method of payment of benefits payable to persons entitled, by virtue of sections 107 and 1765 of such title, to benefits under chapters 11, 13, and 35 of such title;

38 USC 107,  
1765.  
38 USC 301, 401,  
1700.

(4) estimates of the present and future costs of paying monetary benefits under such title to persons described in clauses (1) and (3);

(5) an evaluation of the desirability of continuing to maintain the Veterans’ Administration Regional Office in the Republic of the Philippines, taking into consideration (A) the current and expected future workloads of such office, (B) the estimated cost in fiscal years 1981 through 1985 of continuing to maintain such regional office, (C) the feasibility and desirability of transferring appropriate functions of such regional office to the United States

Veterans’  
Administration  
Regional Office  
in the Republic  
of the  
Philippines,  
continuance  
evaluation.

Embassy in the Republic of the Philippines, and (D) a provisional plan, which the Administrator shall develop, for the closing of such office and so transferring such functions, together with cost estimates for fiscal years 1981 through 1985 for the implementation of such plan assuming that such office is closed before October 1, 1981; and

38 USC 401.  
Report to  
Congress and  
President.

(6) an evaluation of the effects of the amendments to such title made by section 401 of this Act.

(b) Not later than February 1, 1980, the Administrator shall report to the Congress and to the President on the results of such study together with the Administrator's recommendations for resolving the issues to be analyzed and evaluated in such study.

38 USC 521 note.

(c) The Administrator shall (1) carry out the study required under subsection (a) of this section in conjunction with the study required under section 308(a) of the Veterans' and Survivors' Pension Improvement Act of 1978 (Public Law 95-588), and (2) submit the reports of such studies as a combined report.

## TITLE V—MISCELLANEOUS PROVISIONS

### ACCEPTANCE OF PAYMENT FOR TRAVEL OF EMPLOYEES

38 USC 4108.

SEC. 501. Section 4108 is amended by adding after subsection (c) the following new subsection:

Regulations.

“(d) Notwithstanding any other provision of law, the Administrator may prescribe regulations establishing conditions under which officers and employees of the Department of Medicine and Surgery who are nationally recognized principal investigators in medical research may be permitted, in connection with their attendance at meetings or in performing advisory services concerned with the functions or activities of the Veterans' Administration, or in connection with acceptance of significant awards or with activity related thereto concerned with functions or activities of the Veterans' Administration, to accept payment, in cash or in kind, from non-Federal agencies, organizations, and individuals, for travel and such reasonable subsistence expenses as are approved by the Administrator pursuant to such regulations, to be retained by such officers and employees to cover the cost of such expenses or deposited to the credit of the appropriation from which the cost of such expenses is paid, as may be provided in such regulations.”

### CONFIRMATION OF DEPUTY ADMINISTRATOR OF VETERANS' AFFAIRS

38 USC 210.

SEC. 502. (a) The first sentence of section 210(d) is amended by striking out “by the Administrator” and inserting in lieu thereof “by the President, by and with the advice and consent of the Senate”.

Effective date.  
38 USC 210 note.

(b)(1) The amendment made by subsection (a) shall take effect (A) on the date on which a vacancy first occurs in the office of Deputy Administrator of Veterans' Affairs after the date of the enactment of this Act or on such earlier date as the President submits to the Senate, for the advice and consent of the Senate, the nomination of any individual for appointment to such office, or (B) on the date of the enactment of this Act if such office is vacant on such date.

Acting  
Administrator of  
Veterans'  
Affairs,  
designation.

(2) The Administrator of Veterans' Affairs may designate the individual holding the office of Deputy Administrator of Veterans' Affairs on the date of the enactment of this Act, or any other individual, to serve in such office in an acting capacity pending the

first appointment of an individual to such office as provided for in the amendment made by subsection (a).

## OVERSEAS AUTHORITIES

SEC. 503. (a) Section 230 is amended by striking out subsection (c). 38 USC 230.

(b) Section 235 is amended— 38 USC 235.

(1) in the matter preceding clause (1), by striking out “or to the Veterans’ Administration office in Europe, established pursuant to section 230(c) of this title,”;

(2) in clause (2), by striking out “and (7)” and inserting in lieu thereof “(7), and (11)”; and

(3) by inserting after clause (5) the following new clauses:

“(6) Section 5724a(a)(3) of title 5 (relating to subsistence expenses for 30 days in connection with the return to the United States of the employee and such employee’s immediate family). 5 USC 5724.

“(7) Section 5724a(a)(4) of title 5 (relating to the sale and purchase of the residence or settlement of an unexpired lease of the employee when transferred from one station to another station and both stations are in the United States, its territories or possessions, or the Commonwealth of Puerto Rico).”

(c)(1) The section heading of section 235 is amended to read as follows:

“§ 235. Benefits to employees at overseas offices who are United States citizens”. 38 USC 235.

(2) The item relating to such section in the table of sections at the beginning of chapter 3 is amended to read as follows:

“235. Benefits to employees at overseas offices who are United States citizens.”.

(d) The amendment made by subsection (b)(3) shall take effect on October 1, 1979. Effective date. 38 USC 235 note.

## CONFORMING AMENDMENTS TO REFLECT PREVIOUS ADJUSTMENTS MADE IN DEPARTMENT OF MEDICINE AND SURGERY SALARY SCHEDULES

SEC. 504. (a) Subsection (a) of section 4107 is amended to read as follows: 38 USC 4107.

“(a) The annual rates or ranges of rates of basic pay for positions provided in section 4103 of this title shall be as follows: 38 USC 4103.

## “SECTION 4103 SCHEDULE

“Chief Medical Director, \$68,909.

“Deputy Chief Medical Director, \$66,104.

“Associate Deputy Chief Medical Director, \$63,315.

“Assistant Chief Medical Director, \$61,449.

“Medical Director, \$52,429 minimum to \$59,421 maximum.

“Director of Nursing Service, \$52,429 minimum to \$59,421 maximum.

“Director of Podiatric Service, \$44,756 minimum to \$56,692 maximum.

“Director of Chaplain Service, \$44,756 minimum to \$56,692 maximum.

“Director of Pharmacy Service, \$44,756 minimum to \$56,692 maximum.

“Director of Dietetic Service, \$44,756 minimum to \$56,692 maximum.

“Director of Optometric Service, \$44,756 minimum to \$56,692 maximum.”

(b) Paragraph (1) of subsection (b) of such section is amended to read as follows:

38 USC 4104.

“(1) The grades and annual ranges of rates of basic pay for positions provided for in paragraph (1) of section 4104 of this title shall be as follows:

“PHYSICIAN AND DENTIST SCHEDULE

“Director grade, \$44,756 minimum to \$56,692 maximum.

“Executive grade, \$41,327 minimum to \$53,729 maximum.

“Chief grade, \$38,160 minimum to \$49,608 maximum.

“Senior grade, \$32,442 minimum to \$42,171 maximum.

“Intermediate grade, \$27,453 minimum to \$35,688 maximum.

“Full grade, \$23,087 minimum to \$30,017 maximum.

“Associate grade, \$19,263 minimum to \$25,041 maximum.

“NURSE SCHEDULE

“Director grade, \$38,160 minimum to \$49,608 maximum.

“Assistant Director grade, \$32,442 minimum to \$42,171 maximum.

“Chief grade, \$27,453 minimum to \$35,688 maximum.

“Senior grade, \$23,087 minimum to \$30,017 maximum.

“Intermediate grade, \$19,263 minimum to \$25,041 maximum.

“Full grade, \$15,920 minimum to \$20,699 maximum.

“Associate grade, \$13,700 minimum to \$17,813 maximum.

“Junior grade, \$11,712 minimum to \$15,222 maximum.

“CLINICAL PODIATRIST AND OPTOMETRIST SCHEDULE

“Chief grade, \$38,160 minimum to \$49,608 maximum.

“Senior grade, \$32,442 minimum to \$42,171 maximum.

“Intermediate grade, \$27,453 minimum to \$35,688 maximum.

“Full grade, \$23,087 minimum to \$30,017 maximum.

“Associate grade, \$19,263 minimum to \$25,041 maximum.”

STUDY OF HOME MODIFICATIONS FOR TOTALLY BLINDED SERVICE-  
CONNECTED VETERANS

SEC. 505. The Administrator of Veterans' Affairs shall submit a report to the Committees on Veterans' Affairs of the Senate and House of Representatives, not later than October 1, 1979, on the needs of veterans who are totally blind from service-connected causes for home modifications the cost of which exceed the amount allowable for such purposes under section 612(a) of title 38, United States Code, and on the reasons why such veterans have not applied for home health services under such section 612(a).

Report to congressional committees.  
38 USC 612 note.

38 USC 612.

Approved June 13, 1979.

LEGISLATIVE HISTORY:

HOUSE REPORTS: No. 96-140 accompanying H.R. 1608 (Comm. on Veterans' Affairs) and No. 96-223 (Comm. of Conference).

SENATE REPORTS: No. 96-100 (Comm. on Veterans' Affairs) and No. 96-195 (Comm. of Conference).

CONGRESSIONAL RECORD, Vol. 125 (1979):

May 16, considered and passed Senate.

May 21, H.R. 1608 considered and passed House; proceedings vacated and S. 7, amended, passed in lieu.

May 30, House agreed to conference report.

June 4, Senate agreed to conference report.

WEEKLY COMPILATION OF PRESIDENTIAL DOCUMENTS, Vol. 15, No. 24:

June 14, Presidential statement.