

113TH CONGRESS
2D SESSION

H. R. 3593

IN THE SENATE OF THE UNITED STATES

SEPTEMBER 17 (legislative day, SEPTEMBER 16), 2014

Received; read twice and referred to the Committee on Veterans' Affairs

AN ACT

To amend title 38, United States Code, to improve the construction of major medical facilities, and for other purposes.

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

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “VA Construction As-
3 sistance Act of 2014”.

4 **SEC. 2. FINDINGS; SENSE OF CONGRESS.**

5 (a) FINDINGS.—Congress finds the following:

6 (1) According to testimony by the Director of
7 Physical Infrastructure of the General Account-
8 ability Office before the Committee on Veterans’ Af-
9 fairs of the House of Representatives in May 2013,
10 schedule delays of major medical center construction
11 projects of the Department of Veterans Affairs have
12 averaged 35 months, with the delays ranging from
13 14 months to 74 months.

14 (2) The average cost increase attributed to such
15 delays has been \$336,000,000 per project.

16 (3) Management of the major medical facility
17 projects currently underway as of the date of the en-
18 actment of this Act in Denver, Colorado, Orlando,
19 Florida, and New Orleans, Louisiana, should be sub-
20 ject to the oversight of a special project manager of
21 the Army Corps of Engineers that is independent of
22 the Department of Veterans Affairs because, accord-
23 ing to the Comptroller General of the United States,
24 such projects have experienced continuous delays
25 and a total cost increase of nearly \$1,000,000,000.

1 (b) SENSE OF CONGRESS.—It is the sense of Con-
2 gress that—

3 (1) the management of the major medical cen-
4 ter construction projects of the Department of Vet-
5 erans Affairs has been an abysmal failure; and

6 (2) in order to minimize repeated delays and
7 cost increases to such projects, the Secretary of Vet-
8 erans Affairs should fully implement all rec-
9 ommendations made by the Comptroller General of
10 the United States in an April 2013 report to im-
11 prove construction procedures and practices of the
12 Department.

13 **SEC. 3. IMPLEMENTATION OF MAJOR MEDICAL FACILITY**
14 **CONSTRUCTION REFORMS.**

15 Section 8104 of title 38, United States Code, is
16 amended by adding at the end the following new sub-
17 section:

18 “(i)(1) With respect to each project described in
19 paragraph (2), the Secretary shall—

20 “(A) use the services of a medical equipment
21 planner as part of the architectural and engineering
22 firm for the project;

23 “(B) develop and use a project management
24 plan to ensure clear and consistent communication
25 among all parties;

1 “(C) subject the project to construction peer ex-
2 cellence review;

3 “(D) develop—

4 “(i) a metrics program to enable the moni-
5 toring of change-order processing time; and

6 “(ii) goals for the change-order process
7 consistent with the best practices of other de-
8 partments and agencies of the Federal Govern-
9 ment; and

10 “(E) to the extent practicable, use design-build
11 processes to minimize multiple change orders.

12 “(2) A project described in this paragraph is a con-
13 struction or alteration project that is a major medical fa-
14 cility project.”.

15 **SEC. 4. SPECIAL PROJECT MANAGER FOR CERTAIN MED-**
16 **ICAL CENTER CONSTRUCTION PROJECTS.**

17 (a) APPOINTMENT OF SPECIAL PROJECT MAN-
18 AGER.—Not later than 180 days after the date of the en-
19 actment of this Act, the Secretary of Veterans Affairs
20 shall enter into an agreement with the Army Corps of En-
21 gineers to procure, on a reimbursable basis, the services
22 of the Army Corps of Engineers with respect to appointing
23 not less than one special project manager who has experi-
24 ence in managing construction projects that exceed

1 \$60,000,000 to oversee covered projects until the date on
2 which the project is completed.

3 (b) DUTIES.—A special project manager appointed
4 under subsection (a) to oversee a covered project shall—

5 (1) conduct oversight of all construction-related
6 operations at the project, including with respect to—

7 (A) the performance of the Department of
8 Veterans Affairs involving the prime contrac-
9 tors; and

10 (B) the compliance of the Department with
11 the Federal Acquisition Regulation, including
12 the VA Acquisition Regulation;

13 (2) advise and assist the Department in any
14 construction-related activity at the project, including
15 the approval of change-order requests for the pur-
16 pose of achieving a timely completion of the project;
17 and

18 (3) conduct independent technical reviews and
19 recommend to the Department best construction
20 practices to improve operations for the project.

21 (c) PLANS AND REPORT.—

22 (1) COMPLETION PLANS.—Not later than 90
23 days after being appointed under subsection (a), a
24 special project manager shall submit to the Commit-
25 tees on Veterans' Affairs of the House of Represent-

1 atives and the Senate detailed plans of the covered
2 project for which the special project manager is so
3 appointed.

4 (2) PROGRESS REPORTS.—Not later than 180
5 days after being appointed under subsection (a), and
6 each 180-day period thereafter until the date on
7 which the covered project is completed, a special
8 project manager shall submit to the Committees on
9 Veterans' Affairs of the House of Representatives
10 and the Senate a report detailing the progress of the
11 covered project for which the special project man-
12 ager is so appointed. Each report shall include—

13 (A) an analysis of all advice and assistance
14 provided to the Department under subsection
15 (b);

16 (B) an analysis of all changes ordered by
17 the Department with respect to the project, or
18 claimed to have been made by contract between
19 the Department and the prime contractor, in-
20 cluding the extent to which such changes com-
21 ply with the Federal Acquisition Regulation, in-
22 cluding the VA Acquisition Regulation;

23 (C) an analysis of the communication and
24 working relationship between the Department
25 and the prime contractor, including any rec-

1 ommendations made by the prime contractor to
2 aid in the completion of the project; and

3 (D) identification of opportunities and rec-
4 ommendations with respect to improving the op-
5 eration of any construction-related activity to
6 reduce costs or complete the project in a more
7 timely manner.

8 (d) COOPERATION.—

9 (1) INFORMATION.—The Secretary of Veterans
10 Affairs shall provide a special project manager ap-
11 pointed under subsection (a) with any necessary doc-
12 uments or information necessary for the special
13 project manager to carry out subsections (b) and (c).

14 (2) ASSISTANCE.—Upon request by the special
15 project manager, the Secretary shall provide to the
16 special project manager administrative assistance
17 necessary for the special project manager to carry
18 out subsections (b) and (c).

19 (e) COVERED PROJECTS DEFINED.—In this section,
20 the term “covered projects” means each construction
21 project that is a major medical facility project (as defined
22 in section 8104(a)(3)(A) of title 38, United States Code)
23 that—

24 (1) was the subject of a report by the Comp-
25 troller General of the United States titled “Addi-

1 tional Actions Needed to Decrease Delays and
2 Lower Costs of Major Medical-Facility Projects”,
3 numbered GAO–13–302, and published in April
4 2013; and

5 (2) has not been activated to accept patients as
6 of the date of the enactment of this Act.

7 **SEC. 5. PROHIBITION ON NEW APPROPRIATIONS.**

8 No additional funds are authorized to be appro-
9 priated to carry out this Act and the amendments made
10 by this Act, and this Act and such amendments shall be
11 carried out using amounts otherwise made available for
12 such purposes.

Passed the House of Representatives September 16,
2014.

Attest:

KAREN L. HAAS,
Clerk.