

veterans coming back. We simply left thousands of our veterans without adequate resources to treat these brain injuries or PTSD or other issues that arise. No matter what denial that comes from the minority party, no matter what denial comes from the administration, we have not prepared for adequate treatment of these veterans. We are passing legislation today to do that, and we will not deny that there will be thousands and thousands of brain-injured veterans. We should bring them home now and we should treat them well when they get back.

Mr. SPACE. Mr. Speaker, I rise again today in support of H.R. 2199, the Traumatic Brain Injury Health Enhancement and Long-Term Support Act. This bill offers a comprehensive legislative solution to confronting our servicemembers' increasing suffering from Traumatic Brain Injury.

Our brave men and women who serve in Operation Iraqi Freedom and Operation Enduring Freedom are faced with daunting physical and mental challenges every day as they carry out their duties. Troops deployed in Iraq, specifically, encounter the widespread use of IEDs, which can cause Traumatic Brain Injury. Extended deployments put our troops at risk for longer periods of time.

H.R. 2199 brings together solutions to begin addressing the needs of our wounded warriors who have been diagnosed with TBI. The bill requires the VA to establish five centers for TBI research, education, and clinical activities. It also instructs the VA to establish a TBI screening program that would provide critical information to Congress regarding the number of veterans screened, the prevalence of TBI symptoms, and recommendations for improving care. H.R. 2199 dictates that the VA should create a comprehensive program for the long-term care and rehabilitation for veterans who suffer from TBI. The bill also requires the VA to create a Traumatic Brain Injury Veterans Health Registry to generate a list of those who served in Iraq and/or Afghanistan, who have symptoms of TBI, and who apply for VA medical care or file a disability claim. The VA can then notify those on the registry of significant developments in research on health consequences of serving in Iraq and/or Afghanistan.

Additionally, this bill authorizes funding for a pilot program of mobile VA centers for rural areas. These mobile VA centers would improve access to readjustment benefits as well as mental health services. The mobile centers would also assist veterans in making disability claims.

I represent a rural district comprised of small towns and villages. I know that my rural veterans' constituency desperately needs better access to VA services and care, and these mobile VA centers could be part of the solution.

I strongly urge my colleagues to support this bill because it makes great strides in providing comprehensive care for our Nation's wounded warriors suffering from Traumatic Brain Injury.

Mr. HARE. Mr. Speaker, I rise today in strong support of H.R. 2199, the Traumatic Brain Injury Health Enhancement and Long-Term Support Act. As a Member of the Committee on Veterans' Affairs, I had the privilege of working on this bipartisan bill, which I believe provides critical resources to our heroes

with combat-related brain injuries. I commend Representative ALTMIRE who initiated this effort and I thank VA Subcommittee Chairman MICHAUD, and VA Chairman FILNER for quickly bringing this bill to the floor.

Traumatic brain injury (TBI) is the most common wound suffered by troops returning from Iraq and Afghanistan; unfortunately it is often undetected until it is too late. The bill before us today ensures we preemptively screen all veterans for brain injury and that we have the facilities and research necessary to provide the best care possible.

Additionally, this bill addresses the needs of the 44 percent of service members who live in rural areas, like those in my district, by establishing an Advisory Committee on Rural Veterans. It also creates a pilot program for mobile counseling and mental health services.

Mr. Speaker, I am proud we took up this bill in the Veterans' Affairs Committee because it is a strong investment in timely healthcare for our returning troops. I urge my colleagues to support our military heroes by voting for the Traumatic Brain Injury Health Enhancement and Long-Term Support Act.

Mr. REYES. Mr. Speaker, I rise today in support of H.R. 2199, the Traumatic Brain Injury Health Enhancement and Long Term Support Act of 2007. As a Vietnam combat veteran, I have seen the long term effects that war-related wounds and illnesses can have on the lives of our returning soldiers.

As Agent Orange sickness and Post Traumatic Stress Disorder (PTSD) came to typify the Vietnam War, I believe that Traumatic Brain Injuries (TBI) have become a signature wound of the current conflicts in Iraq and Afghanistan. Advances in body armor and battlefield medicine have allowed our troops to survive head wounds that once would have been fatal. However, the number of identified traumatic brain injuries is alarming. Of the 23,000-plus troops who have been wounded in the wars in Iraq and Afghanistan, two-thirds reportedly have been diagnosed with traumatic brain injuries. These numbers may even be higher since many cases are often undiagnosed and go untreated. Some reports suggest that 150,000 veterans of the war in Iraq have suffered a traumatic brain injury of some kind.

Many of those affected by these devastating injuries are unable to perform the most basic cognitive functions and have great difficulties with the tasks of everyday life. These injured soldiers will require quality care and treatment for the rest of their lives.

While it is our obligation to ensure that our military forces have all the necessary arms and equipment to safely carry out their missions, we are also responsible for making sure that our troops know that we will take care of them when they return home. Today we have an opportunity to demonstrate to our wounded veterans our appreciation for their sacrifices and our firm commitment to providing them with the means for living a full and rewarding life. I urge my colleagues to join me in supporting this important bill.

Mr. FILNER. Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. FILNER) that the House suspend the rules and pass the bill, H.R. 2199, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the yeas have it.

Mr. FILNER. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this question will be postponed.

EARLY ACCESS TO VOCATIONAL REHABILITATION AND EMPLOYMENT BENEFITS ACT

Mr. FILNER. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 2239) to amend title 38, United States Code, to expand eligibility for vocational rehabilitation benefits administered by the Secretary of Veterans Affairs, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 2239

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Early Access to Vocational Rehabilitation and Employment Benefits Act".

SEC. 2. EXPANSION OF ELIGIBILITY FOR VOCATIONAL REHABILITATION BENEFITS ADMINISTERED BY THE SECRETARY OF VETERANS AFFAIRS.

Section 3102 of title 38, United States Code, is amended—

(1) in paragraph (1)(B), by striking "or" at the end;

(2) in paragraph (2), by striking the period at the end and inserting "; or"; and

(3) by adding at the end the following new paragraph:

"(3) the person—

"(A) at the time of the Secretary's determination under subparagraph (B), is a member of the Armed Forces who is hospitalized or receiving outpatient medical care, services, or treatment;

"(B) is determined by the Secretary to have a disability incurred or aggravated in the line of duty in the active military, naval, or air service that is likely to be rated at 10 percent or more; and

"(C) is likely to be discharged or released from such service for such disability."

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from California (Mr. FILNER) and the gentleman from Arkansas (Mr. BOOZMAN) each will control 20 minutes.

The Chair recognizes the gentleman from California.

Mr. FILNER. Mr. Speaker, I yield myself such time as I may consume.

This bill, the Early Access to Vocational Rehabilitation and Employment Benefits Act, was authored by my good friend from Arkansas (Mr. BOOZMAN), and we appreciate his efforts over many years on behalf of our veterans. I was glad that we could get this bill to the floor today. It is the last of seven that say thank you to our Nation's veterans as we come up on Memorial Day.

This would extend vocational rehabilitation and employment benefits to members of the Armed Forces who are

determined to have a disability incurred while on active duty of at least 10 percent and likely to be discharged from service due to that disability. The servicemembers would still have to qualify under usual vocational rehabilitation and employment criteria of at least 20 percent, with an employment handicap of 10 percent with a serious employment handicap.

H.R. 2239 will help veterans begin their rehab earlier and will be very beneficial to those veterans in extended convalescence which could be over a year. This is the ideal time, as veterans will still be on active duty, continuing to receive their military pay, making it easier to support his or her family. One of the factors that leads to servicemembers dropping out of vocational rehabilitation and employment is the need to support their families.

Due to the severity of the injury or injuries, most veterans will be expected to experience a drop in pay once they are discharged. However, if a veteran begins their rehab immediately, they may be able to enter the job market much earlier.

I urge my colleagues to support H.R. 2239. It is an important bill. This is the least we can do for these brave men and women. It will ease the transition from the military to civilian employment market. And, again, I thank Mr. BOOZMAN for his leadership on this issue.

Mr. Speaker, I reserve the balance of my time.

Mr. BOOZMAN. Mr. Speaker, I yield myself such time as I may consume.

H.R. 2239, the Early Access to Vocational Rehabilitation and Employment Benefits Act, implements a common-sense involvement in the speed with which we provide vocational rehabilitation to injured servicemembers. This bill makes it clear that active duty servicemembers are entitled to begin using vocational rehabilitation benefits prior to discharge.

The bill directs the Department of Veterans Affairs to coordinate with the military services to determine the likelihood that a servicemember undergoing hospitalization or outpatient treatment will be discharged or returned to active duty. If the member is likely to be discharged and will likely have a disability rating of at least 10 percent, VA is authorized to evaluate and award the full range of vocational rehabilitation benefits prior to the servicemember's discharge. Such a decision would be made using the current statutory and regulatory processes to determine eligibility.

Mr. Speaker, it makes no sense to delay access to benefits that will speed an injured servicemember's return to productive civilian life. For severely injured servicemembers, these benefits often make the difference between whether or not they are able to live independently. Many of those wounded in the global war on terror spend 2 or 3 years recovering from their injuries

and often find themselves with significant free time outside of their therapy sessions. That free time offers an ideal opportunity to make use of their vocational rehabilitation and employment benefits to prepare them for the civilian job market. I am happy to let my colleagues know that CBO has said that this bill "would have no direct impact on direct spending." The bill simply affects the timing of when our servicemembers receive the benefits.

All of us have gone over to Bethesda and Walter Reed to visit injured troops. And, again, this is an effort to give them the best of both worlds, the best that we can offer them being on active duty, but to go ahead and start those vocational rehab services so that we can get vocational counselors in there and then, again, as they pursue their getting stronger and heal physically, to go ahead and direct them in such a way that we can provide a new occupation for them in the future.

So I appreciate Chairman FILNER, Ranking Member BUYER, Chairwoman HERSETH SANDLIN, and especially the chairwoman in the sense that she was instrumental in helping us amend the bill to improve it.

So, again, I would urge that my colleagues support this legislation.

Mr. Speaker, I reserve the balance of my time.

Mr. FILNER. Mr. Speaker, I yield such time as she may consume to the dynamic chair of our Economic Opportunity Subcommittee, the gentlewoman from South Dakota (Ms. HERSETH SANDLIN).

Ms. HERSETH SANDLIN. Mr. Speaker, again I thank the chairman for yielding.

I rise today in strong support of H.R. 2239, the Early Access to Vocational Rehabilitation and Employment Benefits Act.

I want to thank the ranking member of the Economic Opportunity Subcommittee, my good friend and trusted colleague, Mr. BOOZMAN, for introducing this important bill and for working with me prior to the committee markup to strengthen the bill. I also want to thank Chairman FILNER and Ranking Member BUYER for their support of the bill as well.

While current law requires servicemembers to be discharged from active duty prior to applying and receiving benefits from the VA, H.R. 2239 would extend vocational rehabilitation and employment benefits to members of the U.S. Armed Forces who are determined to have a disability of at least 10 percent or more, incurred or aggravated while on duty, and likely to be discharged from service due to that disability.

This important legislation would help veterans begin their rehabilitation earlier and could be very beneficial for those who are in extended convalescence, which may last more than a year for some servicemembers. As the chairman explained, today we do find that a major factor for new vet-

erans dropping out of the VR&E program is the immediate need to financially support the family. We can reduce the risk of these individuals dropping out of the program prematurely if we extend the benefits while they are still on active duty.

Now, in some cases, due to the severity of their injuries, a number of veterans may likely experience a drop in pay after their discharge and when they enter the civilian workforce. However, if a veteran begins his or her rehabilitation immediately, he or she may be able to enter the job market much earlier with a level of readiness and a set of skills to command a higher-paying position than otherwise might be obtained.

I look forward to continuing to work in a bipartisan manner with Mr. BOOZMAN on the Economic Opportunity Subcommittee to ensure Federal services are available to help our fighting men and women successfully transition to civilian life.

I ask my colleagues to join me in supporting H.R. 2239 so that we may ensure our servicemembers are more readily afforded the benefits they need to heal and succeed after their service to our country.

Mr. BOOZMAN. Mr. Speaker, I yield for the purpose of making a unanimous consent request to the gentleman from Indiana (Mr. BUYER).

(Mr. BUYER asked and was given permission to revise and extend his remarks.)

Mr. BUYER. Mr. Speaker, I rise in support of the bill and compliment Ms. HERSETH SANDLIN for her work and Mr. BOOZMAN.

Mr. Speaker, the bill, as amended does two important things. First, it lowers the existing eligibility for servicemembers undergoing treatment prior to discharge to 10 percent vice the current 20 percent. Second, it clarifies existing law to reaffirm Congress' intent that VA provide vocational rehabilitation and employment benefits to eligible service members undergoing what is normally long-term convalescence.

This bill will be especially important to service members being treated at our major trauma centers such as Walter Reed, Bethesda, Palo Alto and Tampa Bay. Many of these service members are facing what may be years of physical and emotional therapy and it makes good sense to begin the process of reintegration into the workforce prior to discharge from active duty. Voc rehab benefits available under this bill will also provide positive reinforcement to DoD and VA therapy sessions by concentrating on issues other than any residual disability(s) they may have from their injuries.

Mr. Speaker, this is an excellent bill and I strongly urge my colleagues to support it.

Mr. FILNER. Mr. Speaker, I have no further requests for time, and I reserve the balance of my time.

Mr. BOOZMAN. Mr. Speaker, again, I would like to urge the passage of H.R. 2239. I appreciate the work of my chairman and ranking member and especially the work of the staff on this bill.

Mr. Speaker, I yield back the balance of my time.

GENERAL LEAVE

Mr. FILNER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on both H.R. 2199 and H.R. 2239, as amended.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from California?

There was no objection.

Mr. FILNER. Mr. Speaker, we have come to the end of a day of thanks to our Nation's veterans. We have seven bills, all of which will go to really improve our services, our health care, our sense of commitment to our Nation's veterans. We have had seven good bills today, and I think they will all be approved by this body.

I was a professor of European history before I became a Congressman, and I used to talk about the Roman world. And there was this famous Roman senator named Cato. And Cato would end all his speeches, no matter on what subject, which they might be about the sewer system of Rome or they might be about gladiator games or war against the Parthians or whoever, but he would always end his speech, no matter what the thing was, and everybody would expect it and he sort of became the laughingstock of the senate because they would know he would end all his speeches with "and we must destroy Carthage." And nobody paid any attention to his speeches because they were all waiting for that conclusion no matter on what subject.

So with that little history lesson, I urge my colleagues to unanimously support H.R. 2239.

Mr. SPACE. Mr. Speaker, I rise again today in support of H.R. 2239, the Early Access to Vocational Rehabilitation Benefits Act.

Currently, vocational rehabilitation benefits provided by the VA are not available to veterans until after they have been discharged from military service. This bill extends eligibility for vocational rehabilitation benefits to current members of the armed forces who are hospitalized or are undergoing out-patient medical care, who have a disability of at least 10 percent incurred or aggravated while on active duty, and who are likely to be discharged from service due to that disability.

As a member of the Veterans' Affairs Committee, I am dedicated to providing our Nation's veterans with every service that they have earned and that they were promised. Access to vocational rehabilitation is part of what our Nation's heroes are entitled to, and this bill is a step in the right direction.

By supporting this bill, we are ensuring that wounded servicemembers can access rehabilitational benefits more quickly without having to wait for their paperwork to catch up to them. This bill will get our wounded vets back on their feet and reintegrated into the workforce sooner than is currently possible by providing them with vocational benefits while they are awaiting military discharge. Reintegration into the workforce is a key part of easing stability back into the lives of our servicemembers who have often spent months in incredibly tense and mentally-exhausting environments. Re-establishing a "normal"

working routine at a pace that better suits our servicemembers is beneficial to all parties involved.

I urge my colleagues to support H.R. 2239 because the bill provides our Nation's veterans with more timely access to a promised service as they transition back to civilian life.

Mr. DAVIS of Illinois. Mr. Speaker, I rise in strong support of H.R. 2239, to expand eligibility for vocational rehabilitation benefits administered by the Secretary of Veterans Affairs. I would like to take some of my time to express my deepest appreciation for our Nation's veterans. It is with this that I strongly ask you to expand eligibility for vocational rehabilitation benefits for all of our veterans. Every day, we find more and more of our veterans returning home with severe physical and mental disabilities. This legislation is a step in the right direction and will act as a cornerstone necessity for providing the medical care, services and treatment that all of our country's finest deserve.

This Congress to must ensure that our injured soldiers, sailors, airmen and any other veterans who have returned home with a disability not only receive the basics in terms of medical attention, but also receive proper rehabilitation so that suitable employment in the future can become a viable option. The act of a person once again living independently is the highest goal that this legislation can achieve. Services that provide counseling, education, financial aid, and job assistance are the best tools for our veterans to use in order to get back on their feet and live a life of independence and dignity. Let us not revisit the fatal mistakes made after Vietnam. To quote my good friend and colleague, DICK DURBIN, "We owe our disabled veterans more than speeches, parades and monuments." Let's do our best to convey our appreciation for their sacrifices.

Mr. FILNER. Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. FILNER) that the House suspend the rules and pass the bill, H.R. 2239, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. FILNER. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this question will be postponed.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, proceedings will resume on motions to suspend the rules previously postponed.

Votes will be taken in the following order: H.R. 67, H.R. 612, H.R. 1470, H.R. 2199, and H.R. 2239, in each case by the yeas and nays.

The first electronic vote will be conducted as a 15-minute vote. Remaining electronic votes will be conducted as 5-minute votes.

VETERANS OUTREACH IMPROVEMENT ACT OF 2007

The SPEAKER pro tempore. The unfinished business is the vote on the motion to suspend the rules and pass the bill, H.R. 67, as amended, on which the yeas and nays were ordered.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. FILNER) that the House suspend the rules and pass the bill, H.R. 67, as amended.

The vote was taken by electronic device, and there were—yeas 421, nays 0, not voting 11, as follows:

[Roll No. 410]

YEAS—421

Abercrombie	Cleaver	Goodlatte
Ackerman	Clyburn	Gordon
Aderholt	Coble	Graves
Akin	Cohen	Green, Al
Alexander	Cole (OK)	Green, Gene
Allen	Conaway	Grijalva
Altmire	Conyers	Gutierrez
Andrews	Cooper	Hall (NY)
Arcuri	Costa	Hall (TX)
Baca	Costello	Hare
Bachmann	Courtney	Harman
Bachus	Cramer	Hastert
Baird	Crenshaw	Hastings (FL)
Baker	Crowley	Hastings (WA)
Baldwin	Cubin	Hayes
Barrett (SC)	Cuellar	Heller
Barrow	Culberson	Hensarling
Bartlett (MD)	Cummings	Hergert
Barton (TX)	Davis (AL)	Herseth Sandlin
Bean	Davis (CA)	Higgins
Becerra	Davis (IL)	Hill
Berkley	Davis (KY)	Hinchee
Berman	Davis, David	Hinojosa
Berry	Davis, Lincoln	Hirono
Biggert	Davis, Tom	Hobson
Bilbray	Deal (GA)	Hodes
Billirakis	DeFazio	Hoekstra
Bishop (GA)	Delahunt	Holden
Bishop (NY)	DeLauro	Holt
Bishop (UT)	Dent	Honda
Blackburn	Diaz-Balart, L.	Hooley
Blumenauer	Diaz-Balart, M.	Hoyer
Blunt	Dicks	Inglis (SC)
Boehner	Dingell	Insliee
Bonner	Doggett	Israel
Bono	Donnelly	Issa
Boozman	Doolittle	Jackson (IL)
Boren	Doyle	Jackson-Lee
Boswell	Drake	(TX)
Boucher	Dreier	Jefferson
Boustany	Duncan	Jindal
Boyd (FL)	Edwards	Johnson (GA)
Boyd (KS)	Ehlers	Johnson (IL)
Brady (PA)	Ellison	Johnson, E. B.
Brady (TX)	Ellsworth	Johnson, Sam
Bralley (IA)	Emanuel	Jones (NC)
Brown (SC)	Emerson	Jordan
Brown, Corrine	Eshoo	Kagen
Brown-Waite,	Etheridge	Kanjorski
Ginny	Everett	Kaptur
Buchanan	Fallin	Keller
Burgess	Farr	Kennedy
Burton (IN)	Fattah	Kildee
Butterfield	Feeney	Kilpatrick
Buyer	Ferguson	Kind
Calvert	Filner	King (IA)
Camp (MI)	Flake	King (NY)
Campbell (CA)	Forbes	Kingston
Cannon	Fortenberry	Kirk
Cantor	Fox	Klein (FL)
Capito	Frank (MA)	Kline (MN)
Capps	Franks (AZ)	Knollenberg
Capuano	Frelinghuysen	Kucinich
Cardoza	Gallely	Kuhl (NY)
Carnahan	Garrett (NJ)	LaHood
Carney	Gerlach	Lamborn
Carson	Giffords	Lampson
Carter	Gilchrest	Langevin
Castle	Gillibrand	Lantos
Castor	Gillmor	Larsen (WA)
Chabot	Gingrey	Larson (CT)
Chandler	Gohmert	Latham
Clarke	Gonzalez	LaTourette
Clay	Goode	Lee