

of scholarships for veterans as reasonable possible.

Beginning with the World War II GI Bill, the Department of Veterans Affairs has administered education programs designed to provide a wide range of education and training opportunities to veterans. Over the years, that mission expanded to include veterans, dependents, and survivors.

Since World War II, the number of degree-granting institutions and non-degree-training schools has significantly increased. According to the U.S. Department of Education, there are about 4,314 degree-granting institutions and about 2,222 nondegree-training entities that qualify for title IV education assistance programs.

Each of these may also offer non-Federal financial aid directly or indirectly to veterans through association with organizations such as foundations, but it is the very expansion of these sources that makes it imperative to assist veterans in accessing scholarship information.

With the proliferation of schools, the rapidly increasing cost of education and training, and the sources of potential financial assistance for veterans, there is a need for a centralized source of financial assistance where a veteran can find links to at least some of the aid available. For example, an Internet search for "veterans scholarships" yielded 8,570 sources of information. Mr. Speaker, I believe that the VA should also include sources of financial assistance for dependents and survivors if providers of such financial aid notify VA about the availability of such assistance.

During the legislative hearing on H.R. 1172, VA expressed some concerns about the bill. In response to their concerns, in cooperation with Chairwoman HERSETH SANDLIN of the Subcommittee on Economic Opportunity, the committee amended the bill to better define the bill's objectives and to include appropriate limitations on VA's role in providing scholarship information to veterans. I appreciate the opportunity to work in bipartisan cooperation in making these changes. The substitute states that VA shall make reasonable efforts to notify schools and appropriate entities, such as foundations, of the opportunity to be linked by the VA Web site as a provider of scholarships for veterans.

The bill, as amended, also requires VA to include statements on its Web site noting that VA does not endorse or guarantee any assistance offered by an entity included on the Web site, nor should the individual consider the list to be all inclusive.

Finally, the amended bill sets an effective date of June 1, 2010, to enable VA to concentrate on getting the new post-9/11 GI Bill up and running, which is so important before adding to their workload. I believe this bill's provisions will help veterans identify scholarships intended for their use.

I urge my colleagues to support the bill.

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

Mr. FILNER. I would like to recognize the gentlelady from South Dakota (Ms. HERSETH SANDLIN) for as much time as she may consume, but I also want to thank her for her incredible leadership as Chair of the Subcommittee on Economic Opportunity. Lots of bills have come forward from this committee and will continue to do so, and we thank her for her leadership.

Ms. HERSETH SANDLIN. I thank the gentleman, the distinguished chairman of the Veterans' Affairs Committee, for yielding and for his kind words in support of the work of the Subcommittee on Economic Opportunity.

I rise today in strong support of H.R. 1172, as amended. I would like to thank the chairman, Mr. FILNER, Ranking Member BUYER, and the sponsor of the bill, subcommittee ranking member, Mr. BOOZMAN, for their leadership and bipartisan support of this bill, which the full committee passed on June 10.

As Mr. BOOZMAN discussed, this legislation directs the Secretary of the VA to include a list of organizations that provide scholarships to veterans and their survivors on its official Web site. This list will help increase the educational opportunities available to veterans and their survivors by providing an easy-to-find portal to this information.

A key part of the VA's responsibility to our veterans is properly managing and providing the educational benefits our veterans have earned through their service. Legislation such as H.R. 1172 helps fulfill this responsibility and will give veterans and their survivors easier access to college scholarships for which they are eligible.

As Chair of the Economic Opportunity Subcommittee, I am extremely pleased to work with Ranking Member BOOZMAN in a bipartisan manner to improve educational benefits for veterans. We have held a series of important hearings on the post-9/11 GI bill, as well as other educational assistance programs, such as the Vocational Rehabilitation and Education Service. I appreciate Mr. BOOZMAN's efforts and cooperation on this important oversight, and I am pleased to support his bill today.

I urge all of my colleagues to support this legislation.

Mr. BOOZMAN. Mr. Speaker, I would like to again extend my thanks to the Subcommittee on Economic Opportunity chairwoman, STEPHANIE HERSETH SANDLIN, for her assistance on this bill, and also for her leadership in so many ways. STEPHANIE has done a tremendous job.

Again, I would also like to thank the full committee chairman, BOB FILNER, the ranking member, STEVE BUYER, and the committee staff on both sides that have worked very hard on this.

Mr. Speaker, I ask all of my colleagues to support H.R. 1172, as amended, and urge its immediate passage.

With that, having no further speakers, 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 H.R. 1172, 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, I urge my colleagues to support H.R. 1172, and 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. 1172, 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. BOOZMAN. 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 motion will be postponed.

VETERANS HEALTH CARE BUDGET REFORM AND TRANSPARENCY ACT OF 2009

Mr. FILNER. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1016) to amend title 38, United States Code, to provide advance appropriations authority for certain medical care accounts of the Department of Veterans Affairs, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1016

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 "Veterans Health Care Budget Reform and Transparency Act of 2009".

SEC. 2. SENSE OF CONGRESS.

It is the sense of Congress that the provision of health care services to veterans could be more effectively and efficiently planned and managed if funding was provided for the management and provision of such services in the form of advance appropriations.

SEC. 3. PRESIDENTS' BUDGET SUBMISSIONS.

Section 1105(a) of title 31, United States Code, is amended by adding at the end the following new paragraph:

"(36) information on estimates of appropriations for the fiscal year following the fiscal year for which the budget is submitted for the following accounts of the Department of Veterans Affairs:

"(A) Medical Services.

"(B) Medical Support and Compliance.

"(C) Medical Facilities.

"(D) Information Technology Systems.

"(E) Medical and Prosthetic Research."

SEC. 4. ADVANCE APPROPRIATIONS FOR CERTAIN ACCOUNTS OF THE DEPARTMENT OF VETERANS AFFAIRS.

(a) ADVANCE APPROPRIATIONS FOR CERTAIN ACCOUNTS.—

(1) IN GENERAL.—Chapter 1 of title 38, United States Code, is amended by inserting after section 116 the following new section:

“§ 117. Advance appropriations for certain accounts

“(a) IN GENERAL.—For each fiscal year, beginning with fiscal year 2011, discretionary new budget authority provided in an appropriations Act for the appropriations accounts of the Department specified in subsection (c) shall—

“(1) be made available for that fiscal year; and

“(2) include, for each such appropriations account, advance discretionary new budget authority that first becomes available for the first fiscal year after the budget year.

“(b) ESTIMATES REQUIRED.—The Secretary shall include in documents submitted to Congress in support of the President’s budget submitted pursuant to section 1105 of title 31, United States Code, detailed estimates of the funds necessary for the accounts of the Department specified in subsection (c) for the fiscal year following the fiscal year for which the budget is submitted.

“(c) ACCOUNTS SPECIFIED.—The accounts specified in this subsection are the following accounts of the Department of Veterans Affairs:

“(1) Medical Services.

“(2) Medical Support and Compliance.

“(3) Medical Facilities.

“(4) Information Technology Systems.

“(5) Medical and Prosthetic Research.

“(d) ANNUAL REPORT.—Not later than July 31 of each year, the Secretary shall submit to Congress an annual report on the sufficiency of the Department’s resources for the next fiscal year beginning after the date of the submittal of the report for the provision of medical care. Such report shall also include estimates of the workload and demand data for that fiscal year.”.

(2) CLERICAL AMENDMENT.—The table of sections at the beginning of such chapter is amended by inserting after the item relating to section 116 the following new item:

“117. Advance appropriations for certain accounts.”.

SEC. 5. COMPTROLLER GENERAL STUDY ON ADEQUACY AND ACCURACY OF BASELINE MODEL PROJECTIONS OF THE DEPARTMENT OF VETERANS AFFAIRS FOR HEALTH CARE EXPENDITURES.

(a) STUDY OF ADEQUACY AND ACCURACY OF BASE LINE MODEL PROJECTIONS.—The Comptroller General shall conduct a study of the adequacy and accuracy of the budget projections made by the Enrollee Health Care Projection Model (in this section referred to as the “Model”), its equivalent, or other methodologies utilized for the purpose of estimating and projecting health care expenditures of the Department of Veterans Affairs with respect to the fiscal year involved and the subsequent four fiscal years.

(b) REPORTS.—

(1) IN GENERAL.—Not later than the date of each year in 2011, 2012, and 2013, on which the President submits the budget request for the next fiscal year under section 1105 of title 31, United States Code, the Comptroller General shall submit to the appropriate committees of Congress and to the Secretary of Veterans Affairs a report.

(2) ELEMENTS.—Each report under this paragraph shall include, for the fiscal year concerning the year for which the budget is submitted, the following:

(A) A statement whether the amount requested in the budget of the President for expenditures of the Department for health care in such fiscal year is consistent with anticipated expenditures of the Department for health care

in such fiscal year as determined utilizing the Model.

(B) The basis for such statement.

(C) Such additional information as the Comptroller General determines appropriate.

(3) AVAILABILITY TO THE PUBLIC.—Each report submitted under this subsection shall be made available to the public by the Comptroller General.

(4) APPROPRIATE COMMITTEES OF CONGRESS DEFINED.—In this subsection, the term “appropriate committees of Congress” means—

(A) the Committees on Veterans’ Affairs, Appropriations, and the Budget of the Senate; and

(B) the Committees on Veterans’ Affairs, Appropriations, and the Budget of the House of Representatives.

SEC. 6. REPORT TO CONGRESS.

Not later than 90 days after the date of the enactment of this Act, the Secretary of Veterans Affairs, shall submit to the Committees on Veterans’ Affairs, Appropriations, and the Budget of the Senate and House of Representatives a report on the requirements of this Act and the amendments made by this Act. Such report shall include—

(1) the Secretary’s plans for improving the capability of the Department of Veterans Affairs to better and more accurately estimate future health care costs and demands; and

(2) a description of impediments, statutory or otherwise, to providing future year estimates and advance appropriations for the Medical Services, Medical Support and Compliance, Medical Facilities, Information Technology Systems, and Medical and Prosthetic Research accounts of the Department.

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.

Mr. Speaker, this is undoubtedly one of the most significant bills that this Congress will pass in this or any other session. The Veterans Health Care Budget Reform and Transparency Act was introduced in February, and this bipartisan measure is a response to years of chronic underfunding of the VA medical care system.

During the last two decades, the VA budget has been in place at the start of the fiscal year barely four times. We all know that this delay in providing vital funding puts the provision of health care to veterans at a risk and hampers the VA’s ability to plan its health care expenditures, hire needed health care professionals, and plan needed construction.

In an unprecedented step, nine veterans groups formed the Partnership for Veterans Health Care Budget Reform. These groups, including The American Legion, AMVETS, Blinded Veterans Association, Disabled American Veterans, Jewish War Veterans, Military Order of the Purple Heart, Paralyzed Veterans of America, Veterans of Foreign Wars, and the Vietnam Veterans of America, formed to advocate for a VA health care budget that is sufficient, timely, and predictable.

These groups put forward the idea that resources for VA health care should be provided through advanced

appropriations so that when the fiscal year starts on October 1, the VA will know what its budget is a year in advance. That is what will happen when H.R. 1016 passes. It will ensure the VA can best plan and utilize taxpayer dollars to provide veterans with the health care they have earned and deserved. It provides the framework with which we can realize advanced appropriations for VA medical care accounts.

As part of the annual budget submission, the President will be required to submit a request for certain VA accounts for the fiscal year following the fiscal year for which the budget is submitted. As part of the administration’s FY 2011 budget, the President will include budget estimates for VA medical care, information technology, and medical and prosthetic research accounts for FY 2012. The VA will be required to provide detailed estimates in the budget documents it submits annually to Congress.

Each July, the VA will be required to report to Congress if it has the resources it needs for the upcoming fiscal year in order for the Congress to address any funding imbalances. This will help to safeguard against the VA facing budget shortfalls such as it did just a few years ago.

H.R. 1016 provides the framework for advanced appropriations, and we look to our colleagues on the Appropriations Committee to provide the dollars. I want to express our thanks to our colleague, CHET EDWARDS, who chairs the Military Construction/VA Subcommittee, for providing advanced funding for the VA medical care accounts for 2011, providing for an 8 percent increase for fiscal year 2011 above the historic fiscal year 2010 levels.

□ 1230

I want to thank also Chairman OBEY for supporting advanced appropriations and Chairman SPRATT of the Budget Committee for including advanced appropriations language in his budget resolution.

All of us, working together, have succeeded in providing veterans with their top legislative priority. They spoke and we listened. I ask the rest of the House to join us in support of this bill, H.R. 1016, which passed unanimously from the Veterans’ Affairs Committee last week.

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

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

Mr. Speaker, I rise in strong support of H.R. 1016, as amended, a bill that would authorize appropriations for several veterans health care accounts a year in advance beginning with fiscal year 2011. I also thank Chairman FILNER for bringing this bill forward and trying to solve a problem that we’ve had in the past.

The goal of the bill is to provide an increased level of fiscal certainty regarding operations of the VA hospital

system. By funding the accounts for medical services, medical support and compliance, medical facilities, information technology systems, and medical and prosthetic research, the Department of Veterans Affairs should be able to manage its health care personnel needs in day-to-day operations. I would note that the last three accounts that I mentioned were included in the bill by an amendment offered by the ranking member, Mr. BUYER, and adopted by the full committee. Adding these accounts has improved the bill by providing more complete medical funding needs.

Advanced funding alone will not solve the VA's ability to provide quality medical care. Without accurate predictive data, advanced appropriations will not necessarily provide the right amount of funding the VA needs to operate its health care system. Therefore, the bill also contains provisions that require a combination of reports and analysis to determine the quality of the data VA will be using in its financial model to determine funding needs.

Mr. Speaker, this bill, while not a perfect solution, is a very reasonable way to allow the advanced funding concept to be tested in practice, and I urge all of my colleagues to support H.R. 1016, as amended.

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

Mr. FILNER. Mr. Speaker, I would like to yield 5 minutes to the gentlewoman from Illinois (Mrs. HALVORSON). She is a new member of our committee and of this Congress, but she has added a dynamic element to our deliberations, and we thank her for her commitment to veterans.

Mrs. HALVORSON. Mr. Speaker, I rise in support of H.R. 1016, the Veterans Health Care Budget Reform and Transparency Act of 2009, which was introduced under the leadership of the chairman of the Committee on Veterans' Affairs, Mr. FILNER. I want to thank Mr. FILNER and the Subcommittee on Health Care chairman, Mr. MICHAUD, for their great leadership on this issue.

The Veterans Affairs health care system includes 153 medical centers with a facility in each State, Puerto Rico, and the District of Columbia. Almost 5.5 million people received care in the VA health care facilities in 2008, and VA's outpatient clinics registered over 60 million visits. This is one of the largest health care providers in the country.

However, in fiscal year 2009, for only the third time in the past 20 years, VA received its budget prior to the start of the new fiscal year. It isn't reasonable to expect that one of the largest, fastest-growing health care providers in the country can operate in the most efficient and effective manner if they don't know what their budgets will be.

The current budget process continues to hamper and threaten VA health care delivery. When VA does not receive its funding in a timely manner, it is forced to ration its care. So much-needed

medical staff cannot be hired, equipment cannot be procured, waiting times increase, and the quality of care suffers.

H.R. 1016 will solve many of these problems and fund the VA 1 year in advance. It will allow the VA to spend money more efficiently while at the same time providing better and more comprehensive care for our veterans. H.R. 1016 will make sure that the VA has the resources that it needs in a timely manner so that it can provide quality care without having to question what funds will be available next month.

I am here today in an attempt to serve our veterans' best interest and to fight to make sure they receive the best care possible. To that end, I stand in favor of H.R. 1016 and strongly urge my colleagues to vote "yes."

I thank the chairman for yielding.

Mr. BOOZMAN. Mr. Speaker, I continue to reserve the balance of my time.

Mr. FILNER. Mr. Speaker, I would yield 3 minutes to another new Member from New Mexico (Mr. TEAGUE). He's also on a committee that has half of our committee's new members. They have added a real element of dynamism. We thank Mr. TEAGUE for his commitment to veterans also.

Mr. TEAGUE. Mr. Speaker, I rise today in support of H.R. 1016, the Veterans Health Care Budget Reform and Transparency Act of 2009. I would like to thank the distinguished gentleman from California, BOB FILNER, for introducing this bill. I'm happy to be a co-sponsor of this legislation. It is through his leadership, as chairman of the Committee on Veterans' Affairs, that we will finally be able to make advanced appropriations of the VA's health budget a reality.

I simply do not believe that it is right that we have lapsed in our care for our veterans when they have never lapsed in the defense of our country. I do not think that it's right that out of the last 22 budgets that we have passed for the VA, 19 of them have been late. Our veterans served their country and provided us with the security that we often take for granted, and we owe them quality health care.

Without a predictable and on-time funding source, it is difficult or impossible for the VA to provide our veterans with the high level of health care and services that they deserve. That is why I led 50 Members of Congress to demand a provision allowing for advanced appropriations in the fiscal year 2010 budget, and we were fortunate enough to convince the budget conference committee to support it.

As a result of allowing for advanced appropriation in the budget, tomorrow the Appropriations Committee will hold a hearing on the Military Construction and VA spending bill that contains \$48.2 billion in advanced appropriations for the VA for fiscal year 2011. This represents a 15 percent increase over fiscal year 2009 levels and a

step in the right direction for veterans health care.

Many people have compared advanced appropriations to a family budget. A family needs to know how much their income is before they know what they can spend. I think that about sums up why we need this bill. I think it's about common sense and being responsible. As a businessman, I never tried to make a purchase without knowing what my budget was going to be. I had to plan ahead and have a road map for all of the company's finances. Because the VA is a direct provider of services, they need to have the same ability to plan ahead. It's about delivering a quality product.

I urge my colleagues to take this giant step in improving the VA's ability to deliver quality health care services to our Nation's veterans.

Mr. BOOZMAN. Mr. Speaker, I continue to reserve the balance of my time.

Mr. FILNER. Mr. Speaker, Mr. HARE of Illinois came to us as the successor of a legendary member of our committee, Mr. Lane Evans, who worked so hard for veterans during his whole career, and our thoughts are with him as he faces his disease. Mr. HARE was on our committee. He had to go off this year, but we miss him greatly, and he's one of the strongest leaders for veterans in our Nation. I yield to him such time as he may consume.

Mr. HARE. Mr. Speaker, I rise in strong support of H.R. 1016, the Veterans Health Care Budget Reform and Transparency Act of 2009, and let me thank Chairman BOB FILNER for introducing this important legislation.

In the 110th Congress, we gave the VA its largest funding increase in 77 years, and we did it on time. But, sadly, punctual VA funding has not always been the case. The VA received its annual funding for health care programs late in the last 19 of 22 years.

This record of tardiness is deplorable. With the ongoing wars in Iraq and Afghanistan, the time to fix this broken system is now. Late funding is more than a missed deadline. It is a veteran with posttraumatic stress disorder who cannot access a treatment he or she needs. It is an injured hero who must wait for a prosthetic. It is a VA in disarray at a time when our wounded warriors are counting now more than ever on the department's services. That's why in the last Congress, I introduced the Assured Funding for Veterans Health Care Act. This bill would have replaced the annual appropriated discretionary funding for veterans health care with permanent direct spending authority.

Like the bill I introduced, advanced appropriations is the means to that end. That end is ensuring veterans receive the best possible care from a VA that has access to timely, sufficient, and predictable resources. The legislation that we're considering today will do just that. It will allow the VA to effectively budget and manage its health

care programs and services, meaning it can hire the appropriate number of doctors, nurses, clinicians, and support staff to meet the demand for high-quality care for our veterans. Anything less is unacceptable.

I'd also like to acknowledge and commend Chairman DAVID OBEY and Chairman EDWARDS for their strong proactive leadership in putting in an advanced appropriation for VA health care in the fiscal year 2010 Military Construction and Veterans Affairs Appropriations bill.

I enthusiastically support H.R. 1016, and I once again want to thank Chairman FILNER for drafting a bill that would ensure the VA has sufficient, timely, and predictable funding.

Mr. Speaker, I urge all of my colleagues to support this legislation.

Mr. BOOZMAN. Mr. Speaker, again I would ask that my colleagues vote for this bill. I appreciate Mr. FILNER's hard work on the bill. I think it's a great step in the right direction. And then also I would like to thank Ranking Member BUYER for offering a good amendment that I think helped the bill also.

So with that I urge adoption of the 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 H.R. 1016, as amended.

The SPEAKER pro tempore (Mr. KLEIN of Florida). Is there objection to the request of the gentleman from California?

There was no objection.

Mr. FILNER. Mr. Speaker, I think as we approach the July 4 holiday, this is an appropriate way to say thank you to our Nation's veterans. As I said earlier, this is one of the most significant steps, if not a revolutionary step, taken for veterans in the budgeting process. This will assure that one of the largest health systems in the world, if not the largest, will have, in fact, funding available on time and in the need that is required for our Nation's veterans.

So I urge my colleagues to unanimously support this bill, H.R. 1016, as amended.

Mr. BUYER. Mr. Speaker, I rise in opposition to H.R. 1016, as amended, a bill to amend title 38, United States Code, to provide advance appropriations authority for certain medical care accounts of the Department of Veterans Affairs, VA, and for other purposes.

In my view, it is premature for the House of Representatives to consider this legislation.

The bill was not considered by the Subcommittee on Health, to which it was referred, nor was there a full Committee legislative hearing, so the Administration has not provided its official analysis.

On April 29, 2009, we did hold a full Committee oversight hearing on the future funding of VHA. At this hearing, concerns were raised

about not including the "Information Technology Systems" and the "Medical and Prosthetic Research Accounts" in an advance appropriations bill.

The Secretary of Veterans Affairs, the Honorable Eric K. Shinseki, testified that information technology is very much integrated into the medical care activities and should be included so that VA is not hindered in its ability to provide health care services and operate new facilities.

Additionally, the Congressional Research Service, CRS, testified that funding information technology under a separate, annual appropriation could create a situation where VA would not be able to purchase computer software even though it had procured medical equipment that is reliant on such software.

CRS noted potential difficulty for VA in procuring the necessary IT infrastructure for the opening of new clinics, as well as difficulties that could arise in VA research due to a mismatch between accounts.

I was pleased that during the Committee markup, my amendment was adopted to include the IT, and medical and prosthetic research accounts to address these issues.

However, the Government Accountability Office, GAO, also expressed reservations about its possible role in an advance appropriations proposal. In a written response of June 17, 2009, to one of my hearing questions, GAO made a strong statement which leads me to believe that section 5 of the amended bill is not workable. This section would require GAO to obtain budgetary information from VA before the department makes its fiscal year budget request. GAO questioned whether it could conduct the required studies before the President's budget request is submitted to Congress. GAO cited significant challenges in obtaining, evaluating, reporting on the relevant budgetary and technical information.

GAO indicated that its role in the process would be inadvisable because executive agencies have consistently resisted releasing detailed information about the President's budget prior to its submission to Congress.

Again, VA's official views on this issue are currently unknown, and this issue should have been addressed before H.R. 1016, as amended, was reported to the House.

There is nothing before us to indicate that the administration is agreeable to this arrangement.

The failure to follow regular order and the unnecessary haste with which this legislation is being advanced results in the House being asked to pass obviously flawed legislation, and I urge my colleagues to oppose H.R. 1016, as amended.

Mr. MICHAUD. Mr. Speaker, I rise in strong support of the Veterans Health Care Budget Reform and Transparency Act of 2009.

I am here today as an original co-sponsor of this legislation. I would like to express my appreciation for all of the Chairman's hard work on it.

This bill accomplishes a simple, but a crucial goal we all share: To provide timely funding for veterans health care.

I represent a district in a state of 1.3 million people. Out of that number, I am proud that over 155,000 veterans call Maine home.

Maine is a state that works hard to honor its veterans.

The talented and dedicated professionals at Maine's Togus VA Medical Center do terrific

work. So do our community based outpatient clinics and all of VA's partners.

But too often in recent history, VA's ability to provide the best possible care has been hamstrung by the appropriations process.

In some cases, VA has not been funded until after the beginning of the fiscal year.

As a result, maintenance of facilities, cost saving investments in technology, and ultimately care for veterans was delayed or put in jeopardy.

This cannot be allowed to occur when we are dealing with the health care of our veterans.

There must be a timely, sufficient, and predictable funding stream. And that is exactly what this legislation is designed to achieve.

Passage of this legislation today is a huge step forward and will help make sure all veterans have access to the best possible health care.

I urge all of my colleagues to support this 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. 1016, 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. THOMPSON of Pennsylvania. Mr. Speaker, while I support the purpose of this bill, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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

The point of no quorum is considered withdrawn.

□ 1245

WOMEN VETERANS HEALTH CARE IMPROVEMENT ACT

Mr. FILNER. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1211) to amend title 38, United States Code, to expand and improve health care services available to women veterans, especially those serving in Operation Enduring Freedom and Operation Iraqi Freedom, from the Department of Veterans Affairs, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1211

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

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "Women Veterans Health Care Improvement Act".

(b) TABLE OF CONTENTS.—The table of contents of this Act is as follows:

Sec. 1. Short title; table of contents.