S. 98

At the request of Mr. VITTER, the name of the Senator from Kansas (Mr. BROWNBACK) was added as a cosponsor of S. 98, a bill to impose admitting privilege requirements with respect to physicians who perform abortions.

S. 154

At the request of Mr. ENSIGN, the name of the Senator from Mississippi (Mr. WICKER) was added as a cosponsor of S. 154, a bill to require the Congressional Budget Office and the Joint Committee on Taxation to use dynamic economic modeling in addition to static economic modeling in the preparation of budgetary estimates of proposed changes in Federal revenue law.

S. 162

At the request of Mr. FEINGOLD, the name of the Senator from North Carolina (Mr. BURR) was added as a cosponsor of S. 162, a bill to provide greater accountability of taxpayers' dollars by curtailing congressional earmarking, and for other purposes.

S. 166

At the request of Mrs. HUTCHISON, the names of the Senator from Tennessee (Mr. CORKER), the Senator from Florida (Mr. MARTINEZ) and the Senator from Iowa (Mr. GRASSLEY) were added as cosponsors of S. 166, a bill to amend title VII of the Civil Rights Act of 1964 to clarify the filing period applicable to charges of discrimination, and for other purposes.

S. 211

At the request of Mrs. CLINTON, the name of the Senator from California (Mrs. BOXER) was added as a cosponsor of S. 211, a bill to facilitate nationwide availability of 2-1-1 telephone service for information and referral on human services and volunteer services, and for other purposes.

S. 225

At the request of Mr. BAYH, the name of the Senator from Illinois (Mr. DURBIN) was added as a cosponsor of S. 225, a bill to amend title XIX of the Social Security Act to establish programs to improve the quality, performance, and delivery of pediatric care.

S. 238

At the request of Mr. WYDEN, the name of the Senator from Mississippi (Mr. WICKER) was added as a cosponsor of S. 238, a bill to provide $50,000,000,000 in new transportation infrastructure funding through bonding to empower States and local governments to complete significant infrastructure projects across all modes of transportation, including roads, bridges, rail and transit systems, ports, and inland waterways, and for other purposes.

S. 247

At the request of Mrs. FEINSTEIN, the name of the Senator from Maryland (Ms. MIKULSKI) was added as a cosponsor of S. 247, a bill to accelerate motor fuel savings nationwide and provide incentives to registered owners of high fuel consumption automobiles to replace such automobiles with fuel efficient automobiles or public transportation.

S. 250

At the request of Mr. SCHUMER, the names of the Senator from Wisconsin (Mr. KOHL), the Senator from New Jersey (Mr. MENENDEZ) and the Senator from Maryland (Mr. CARDIN) were added as cosponsors of S. 250, a bill to amend the Internal Revenue Code of 1986 to provide a higher education opportunity credit in place of existing education tax incentives.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. AKAKA (for himself, Mr. DURBIN, and Mrs. MURRAY):

S. 252. a bill to amend title 38, United States Code, to enhance the capacity of the Department of Veterans Affairs to recruit and retain nurses and other critical health-care professionals, to improve the provision of health care veterans, and for other purposes; to the Committee on Veterans' Affairs.

Mr. AKAKA. Mr. President, today I am introducing legislation which is drawn in large measure from S. 2969, the proposed Veterans' Health Care Authorization Act, as reported by the Committee on Veterans' Affairs last Congress.

VA faces a looming shortage of health care personnel. Without concerted and timely action, this situation will only worsen in the years ahead. This is especially true as more Iraq and Afghanistan veterans return home injured and in need of new and specialized care. In order to avert this problem, VA must be able to offer competitive salaries, work schedules, and benefits. The provisions in the bill I am introducing will allow VA to recruit and retain nurses, home health aides, and specialty care providers.

This bill also contains measures that would improve the efficiency of health care delivery to veterans, including a number of pilot programs designed to help VA find new and innovative ways to deliver better, faster, and more comprehensive treatment.

Women make up an ever growing percentage of the Armed Forces. As such, they are also making up an ever growing percentage of the veteran population. While there have been efforts over the years to address the unique needs of women veterans, there is much more that VA might do. To that end, there are provisions in this bill to address current shortcomings and help VA better respond to the increased demand for care from women veterans. I particularly thank Senator MURRAY for her leadership on this issue.

One of the most troubling and difficult challenges of warfare, which can be seen particularly in the current conflicts in Iraq and Afghanistan, is diagnosing and treating those who suffer from the invisible wounds of war. The lack of understanding of these injuries, the stigma associated with them, and many other factors make effective treatment difficult. Last Congress, legislation I authored, the Veterans Mental Health and Other Care Improvements Act, was enacted as Public Law 110–387. This Congress, I seek to improve upon those advances, and to continue to provide accessible, cutting-edge care for those afflicted with invisible wounds. This bill would expand eligibility and authority for the Vet Centers to provide needed services, and would commission a comprehensive study on suicides among veterans so that we can improve efforts to prevent such tragedies.

This bill will also provide support for homeless veterans through a proposed series of innovative pilot programs. These programs are designed to significantly improve VA outreach to these veterans, in order to help them access the benefits and services provided by VA.

I look forward to working with all of our colleagues to bring this legislation to the full Senate for consideration early in this Session. Mr. President, I ask unanimous consent that the text of this bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 252

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 ''Veterans Health Care Authorization Act of 2009''.

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

SEC. 2. REFERENCES TO TITLE 38, UNITED STATES CODE.

Except as otherwise expressly provided, whenever in this Act an amendment or repeal is expressed in terms of an amendment or repeal to 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—DEPARTMENT PERSONNEL MATTERS

SEC. 101. ENHANCEMENT OF AUTHORITIES FOR RETENTION OF MEDICAL PROFESSIONALS.

(a) SECRETARIAL AUTHORITY TO EXTEND TITLE 38 STATUS TO ADDITIONAL POSITIONS.—

(1) IN GENERAL.—Paragraph (3) of section 7401 is amended by striking ''and blind rehabilitation outpatient specialists.'' and inserting the following: ''blind rehabilitation outpatient specialists, and such other classes of health care occupations as the Secretary considers necessary for the recruitment and retention needs of the Department subject to the following requirements:

''(A) Not later than 45 days before the Secretary appoints any personnel for a class of health care occupations that is not specifically listed in this paragraph, the Secretary shall submit to the Committee on Veterans' Affairs of the Senate, the Committee on Veterans' Affairs of the House of Representatives, and the Office of Management and Budget notice of such appointment.

''(B) Before submitting notice under subparagraph (A), the Secretary shall solicit comments from any labor organization representing employees in such class and include such comments in such notice.''.

(2) APPOINTMENT OF NURSE ASSISTANTS.—Such paragraph is further amended by inserting ''nurse assistants,'' after ''licensed practical or vocational nurses,''.

(b) PROBATIONARY PERIODS FOR REGISTERED NURSES.—Section 7403(b) is amended—

(1) in paragraph (1), by striking ''Appointments'' and inserting ''Except as otherwise provided in this subsection, appointments'';

(2) by redesignating paragraph (2) as paragraph (4); and

(3) by inserting after paragraph (1) the following new paragraphs:

''(2) An appointment of a registered nurse under this chapter, whether on a full-time basis or a part-time basis, shall be for a probationary period ending upon the completion by the person so appointed of a number of hours of work pursuant to such appointment that the Secretary considers appropriate for such appointment but not more than 4,180 hours.

''(3) An appointment described in subsection (a) on a part-time basis of a person who has previously served on a full-time basis for the probationary period for the position concerned shall be without a probationary period.''.

(c) PROHIBITION ON TEMPORARY PART-TIME REGISTERED NURSE APPOINTMENTS IN EXCESS OF 4,180 HOURS.—Section 7405 is amended by adding at the end the following new subsection:

''(g)(1) Employment of a registered nurse on a temporary part-time basis under subsection (a)(1) shall be for a probationary period ending upon the completion by the person so employed of a number of hours of work pursuant to such employment that the Secretary considers appropriate for such employment but not more than 4,180 hours.

''(2) Upon completion by a registered nurse of the probationary period described in paragraph (1)—

''(A) the employment of such nurse shall—

''(i) no longer be considered temporary; and

''(ii) be considered an appointment described in section 7403(a) of this title; and

''(B) the nurse shall be considered to have served the probationary period required by section 7403(b).''.

(d) WAIVER OF OFFSET FROM PAY FOR CERTAIN REEMPLOYED ANNUITANTS.—

(1) IN GENERAL.—Section 7405, as amended by subsection (c), is further amended by adding at the end the following new subsection:

''(h)(1) The Secretary may waive the application of sections 8344 and 8468 of title 5 (relating to annuities and pay on reemployment) or any other similar provision of law under a Government retirement system on a case-by-case basis for an annuitant reemployed on a temporary basis under the authority of subsection (a) in a position described under paragraph (1) of that subsection.

''(2) An annuitant to whom a waiver under paragraph (1) is in effect shall not be considered an employee for purposes of any Government retirement system.

''(3) An annuitant to whom a waiver under paragraph (1) is in effect shall be subject to the provisions of chapter 71 of title 5 (including all labor authority and labor representative collective bargaining agreements) applicable to the position to which appointed.

''(4) In this subsection:

''(A) The term 'annuitant' means an annuitant under a Government retirement system.

''(B) The term 'employee' has the meaning under section 2105 of title 5.

''(C) The term 'Government retirement system' means a retirement system established by law for employees of the Government of the United States.''.

(2) EFFECTIVE DATE.—The amendment made by paragraph (1) shall take effect on the date that is six months after the date of the enactment of this Act, and shall apply to pay periods beginning on or after such effective date.

(e) RATE OF BASIC PAY FOR APPOINTEES TO THE OFFICE OF THE UNDER SECRETARY FOR HEALTH SET TO RATE OF BASIC PAY FOR SENIOR EXECUTIVE SERVICE POSITIONS.—

(1) IN GENERAL.—Section 7404(a) is amended—

(A) by striking ''The annual'' and inserting ''(1) The annual'';

(B) by striking ''The pay'' and inserting the following:

''(2) The pay'';

(C) by striking ''under the preceding sentence'' and inserting ''under paragraph (1)''; and

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

''(3) The rate of basic pay for a position to which an Executive order applies under paragraph (1) and is not described by paragraph (2) shall be set in accordance with section 5382 of title 5 as if such position were a Senior Executive Service position (as such term is defined in section 3132(a) of title 5).''.

(2) EFFECTIVE DATE.—The amendments made by paragraph (1) shall take effect on the first day of the first pay period beginning after the day that is 180 days after the date of the enactment of this Act.

(f) COMPARABILITY PAY PROGRAM FOR APPOINTEES TO THE OFFICE OF THE UNDER SECRETARY FOR HEALTH.—Section 7410 is amended—

(1) by striking ''The Secretary may'' and inserting ''(a) IN GENERAL.—The Secretary may''; and

(2) by adding at the end the following new subsection:

''(b) COMPARABILITY PAY FOR APPOINTEES TO THE OFFICE OF THE UNDER SECRETARY FOR HEALTH.—(1) The Secretary may authorize the Under Secretary for Health to provide comparability pay of not more than $100,000 per year to individuals of the Veterans Health Administration appointed under section 7306 of this title who are not physicians or dentists and to individuals who are appointed to Senior Executive Service positions (as such term is defined in section 3132(a) of title 5) to achieve annual pay levels for such individuals that are comparable with annual pay levels of individuals with similar positions in the private sector.

''(2) Comparability pay under paragraph (1) for an individual is in addition to all other pay, awards, and performance bonuses paid to such individual under this title.

''(3) Except as provided in paragraph (4), comparability pay under paragraph (1) for an individual shall be considered basic pay for all purposes, including retirement benefits under chapters 83 and 84 of title 5, and other benefits.

''(4) Comparability pay under paragraph (1) for an individual shall not be considered basic pay for purposes of adverse actions under subchapter V of this chapter.

''(5) Comparability pay under paragraph (1) may not be awarded to an individual in an amount that would result in an aggregate amount of pay (including bonuses and awards) received by such individual in a year under this title that is greater than the annual pay of the President.''.

(g) SPECIAL INCENTIVE PAY FOR DEPARTMENT PHARMACIST EXECUTIVES.—Section 7410, as amended by subsection (f) of this section, is further amended by adding at the end the following new subsection:

''(c) SPECIAL INCENTIVE PAY FOR DEPARTMENT PHARMACIST EXECUTIVES.—(1) In order to recruit and retain highly qualified Department pharmacist executives, the Secretary may authorize the Under Secretary for Health to pay special incentive pay of not more than $40,000 per year to an individual of the Veterans Health Administration who is a pharmacist executive.

''(2) In determining whether and how much special pay to provide to such individual, the Under Secretary shall consider the following:

''(A) The grade and step of the position of the individual.

''(B) The scope and complexity of the position of the individual.

''(C) The personal qualifications of the individual.

''(D) The characteristics of the labor market concerned.

''(E) Such other factors as the Secretary considers appropriate.

''(3) Special incentive pay under paragraph (1) for an individual is in addition to all other pay (including basic pay) and allowances to which the individual is entitled.

''(4) Except as provided in paragraph (5), special incentive pay under paragraph (1) for an individual shall be considered basic pay for all purposes, including retirement benefits under chapters 83 and 84 of title 5, and other benefits.

''(5) Special incentive pay under paragraph (1) for an individual shall not be considered basic pay for purposes of adverse actions under subchapter V of this chapter.

''(6) Special incentive pay under paragraph (1) may not be awarded to an individual in an amount that would result in an aggregate amount of pay (including bonuses and awards) received by such individual in a year under this title that is greater than the annual pay of the President.''.

(h) PAY FOR PHYSICIANS AND DENTISTS.—

(1) NON-FOREIGN COST OF LIVING ADJUSTMENT ALLOWANCE.—Section 7431(b) is amended by adding at the end the following new paragraph:

''(5) The non-foreign cost of living adjustment allowance authorized under section 5941 of title 5 for physicians and dentists whose pay is set under this section shall be determined as a percentage of base pay only.''.

(2) MARKET PAY DETERMINATIONS FOR PHYSICIANS AND DENTISTS IN ADMINISTRATIVE OR EXECUTIVE LEADERSHIP POSITIONS.—Section 7431(c)(4)(B)(i) is amended by adding at the end the following: ''The Secretary may exempt physicians and dentists occupying administrative or executive leadership positions from the requirements of the previous sentence.''.

(3) EXCEPTION TO PROHIBITION ON REDUCTION OF MARKET PAY.—Section 7431(c)(7) is amended by striking ''concerned.'' and inserting ''concerned, unless there is a change in board certification or reduction of privileges.''.

(i) ADJUSTMENT OF PAY CAP FOR NURSES.—Section 7451(c)(2) is amended by striking ''level V'' and inserting ''level IV''.

(j) EXEMPTION FOR CERTIFIED REGISTERED NURSE ANESTHETISTS FROM LIMITATION ON AUTHORIZED COMPETITIVE PAY.—Section 7451(c)(2) is further amended by adding at the end the following new sentence: ''The maximum rate of basic pay for a grade for the position of certified registered nurse anesthetist pursuant to an adjustment under subsection (d) may exceed the maximum rate otherwise provided in the preceding sentence.''.

(k) LOCALITY PAY SCALE COMPUTATIONS.—

(1) EDUCATION, TRAINING, AND SUPPORT FOR FACILITY DIRECTORS IN WAGE SURVEYS.—Section 7451(d)(3) is amended by adding at the end the following new subparagraph:

''(F) The Under Secretary for Health shall provide appropriate education, training, and support to directors of Department health care facilities in the conduct and use of surveys, including the use of third-party surveys, under this paragraph.''.

(2) INFORMATION ON METHODOLOGY USED IN WAGE SURVEYS.—Section 7451(e)(4) is amended—

(A) by redesignating subparagraph (D) as subparagraph (E); and

(B) by inserting after subparagraph (C) the following new subparagraph (D):

''(D) In any case in which the director conducts such a wage survey during the period covered by the report and makes adjustment in rates of basic pay applicable to one or more covered positions at the facility, information on the methodology used in making such adjustment or adjustments.''.

(3) DISCLOSURE OF INFORMATION TO PERSONS IN COVERED POSITIONS.—Section 7451(e), as amended by paragraph (2) of this subsection, is further amended by adding at the end the following new paragraph:

''(6)(A) Upon the request of an individual described in subparagraph (B) for a report provided under paragraph (4) with respect to a Department health-care facility, the Under Secretary for Health or the director of such facility shall provide to the individual the most current report for such facility provided under such paragraph.

''(B) An individual described in this subparagraph is—

''(i) an individual in a covered position at a Department health-care facility; or

''(ii) a representative of the labor organization representing that individual who is designated by that individual to make the request.''.

(l) INCREASED LIMITATION ON SPECIAL PAY FOR NURSE EXECUTIVES.—Section 7452(g)(2) is amended by striking ''$25,000'' and inserting ''$100,000''.

(m) ELIGIBILITY OF PART-TIME NURSES FOR ADDITIONAL NURSE PAY.—

(1) IN GENERAL.—Section 7453 is amended—

(A) in subsection (a), by striking ''a nurse'' and inserting ''a full-time nurse or part-time nurse'';

(B) in subsection (b)—

(i) in the first sentence—

(I) by striking ''on a tour of duty'';

(II) by striking ''service on such tour'' and inserting ''such service''; and

(III) by striking ''of such tour'' and inserting ''of such service''; and

(ii) in the second sentence, by striking ''of such tour'' and inserting ''of such service'';

(C) in subsection (c)—

(i) by striking ''on a tour of duty''; and

(ii) by striking ''service on such tour'' and inserting ''such service''; and

(D) in subsection (e)—

(i) in paragraph (1), by striking ''eight hours in a day'' and inserting ''eight consecutive hours''; and

(ii) in paragraph (5)(A), by striking ''tour of duty'' and inserting ''period of service''.

(2) EXCLUSION OF APPLICATION OF ADDITIONAL NURSE PAY PROVISIONS TO CERTAIN ADDITIONAL EMPLOYEES.—Paragraph (3) of section 7454(b) is amended to read as follows:

''(3) Employees appointed under section 7408 of this title performing service on a tour of duty, any part of which is within the period commencing at midnight Friday and ending at midnight Sunday, shall receive additional pay in addition to the rate of basic pay provided such employees for each hour of service on such tour at a rate equal to 25 percent of such employee's hourly rate of basic pay.''.

(n) EXEMPTION OF ADDITIONAL NURSE POSITIONS FROM LIMITATION ON INCREASE IN RATES OF BASIC PAY.—Section 7455(c)(1) is amended by inserting after ''nurse anesthetists,'' the following: ''licensed practical nurses, licensed vocational nurses, and nursing positions otherwise covered by title 5,''.

SEC. 102. LIMITATIONS ON OVERTIME DUTY, WEEKEND DUTY, AND ALTERNATIVE WORK SCHEDULES FOR NURSES.

(a) OVERTIME DUTY.—

(1) IN GENERAL.—Subchapter IV of chapter 74 is amended by adding at the end the following new section:

''§ 7459. Nursing staff: special rules for overtime duty

''(a) LIMITATION.—Except as provided in subsection (c), the Secretary may not require nursing staff to work more than 40 hours (or 24 hours if such staff is covered under section 7456 of this title) in an administrative work week or more than eight consecutive hours (or 12 hours if such staff is covered under section 7456 or 7456A of this title).

''(b) VOLUNTARY OVERTIME.—(1) Nursing staff may on a voluntary basis elect to work hours otherwise prohibited by subsection (a).

''(2) The refusal of nursing staff to work hours prohibited by subsection (a) shall not be grounds to discriminate (within the meaning of section 704(a) of the Civil Rights Act of 1964 (42 U.S.C. 2000e–3(a))) against the staff, dismissal or discharge of the staff, or any other adverse personnel action against the staff.

''(c) OVERTIME UNDER EMERGENCY CIRCUMSTANCES.—(1) Subject to paragraph (2), the Secretary may require nursing staff to work hours otherwise prohibited by subsection (a) if—

''(A) the work is a consequence of an emergency that could not have been reasonably anticipated;

''(B) the emergency is non-recurring and is not caused by or aggravated by the inattention of the Secretary or lack of reasonable contingency planning by the Secretary;

''(C) the Secretary has exhausted all good faith, reasonable attempts to obtain voluntary workers;

''(D) the nurse staff have critical skills and expertise that are required for the work; and

''(E) the work involves work for which the standard of care for a patient assignment requires continuity of care through completion of a case, treatment, or procedure.

''(2) Nursing staff may not be required to work hours under this subsection after the requirement for a direct role by the staff in responding to medical needs resulting from the emergency ends.

''(d) NURSING STAFF DEFINED.—In this section, the term 'nursing staff' includes the following;

''(1) A registered nurse.

''(2) A licensed practical or vocational nurse.

''(3) A nurse assistant appointed under this chapter or title 5.

''(4) Any other nurse position designated by the Secretary for purposes of this section.''.

(2) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 74 is amended by inserting after the item relating to section 7458 the following new item:

''7459. Nursing staff: special rules for overtime duty.''.

(b) WEEKEND DUTY.—Section 7456 is amended—

(1) by striking subsection (c); and

(2) by redesignating subsection (d) as subsection (c).

(c) ALTERNATE WORK SCHEDULES.—

(1) IN GENERAL.—Section 7456A(b)(1)(A) is amended by striking ''three regularly scheduled'' and all that follows through the period at the end and inserting ''six regularly scheduled 12-hour periods of service within a pay period shall be considered for all purposes to have worked a full 80-hour pay period.''.

(2) CONFORMING AMENDMENTS.—Section 7456A(b) is amended—

(A) in the subsection heading, by striking ''36/40'' and inserting ''72/80'';

(B) in paragraph (2)—

(i) in subparagraph (A), by striking ''40-hour basic work week'' and inserting ''80-hour pay period'';

(ii) in subparagraph (B), by striking ''regularly scheduled 36-hour tour of duty within the work week'' and inserting ''scheduled 72-hour period of service within the bi-weekly pay period'';

(iii) in subparagraph (C)—

(I) in clause (i), by striking ''regularly scheduled 36-hour tour of duty within an administrative work week'' and inserting ''scheduled 72-hour period of service within an administrative pay period'';

(II) in clause (ii), by striking ''regularly scheduled 12-hour tour of duty'' and inserting ''scheduled 12-hour period of service''; and

(III) in clause (iii), by striking ''regularly scheduled 36-hour tour of duty work week'' and inserting ''scheduled 72-hour period of service pay period''; and

(iv) in subparagraph (D), by striking ''regularly scheduled 12-hour tour of duty'' and inserting ''scheduled 12-hour period of service''; and

(C) in paragraph (3), by striking ''regularly scheduled 12-hour tour of duty'' and inserting ''scheduled 12-hour period of service''.

SEC. 103. IMPROVEMENTS TO CERTAIN EDUCATIONAL ASSISTANCE PROGRAMS.

(a) REINSTATEMENT OF HEALTH PROFESSIONALS EDUCATIONAL ASSISTANCE SCHOLARSHIP PROGRAM.—

(1) IN GENERAL.—Section 7618 is amended by striking ''December 31, 1998'' and inserting ''December 31, 2014''.

(2) EXPANSION OF ELIGIBILITY REQUIREMENTS.—Section 7612(b)(2) is amended by striking ''(under section'' and all that follows through ''or vocational nurse.'' and inserting the following: ''as an appointee under paragraph (1) or (3) of section 7401 of this title.''.

(b) IMPROVEMENTS TO EDUCATION DEBT REDUCTION PROGRAM.—

(1) INCLUSION OF EMPLOYEE RETENTION AS PURPOSE OF PROGRAM.—Section 7681(a)(2) is amended by inserting ''and retention'' after ''recruitment'' the first time it appears.

(2) ELIGIBILITY.—Section 7682 is amended—

(A) in subsection (a)(1), by striking ''a recently appointed'' and inserting ''an''; and

(B) by striking subsection (c).

(3) MAXIMUM AMOUNTS OF ASSISTANCE.—Section 7683(d)(1) is amended—

(A) by striking ''$44,000'' and inserting ''$60,000''; and

(B) by striking ''$10,000'' and inserting ''$12,000''.

(c) LOAN REPAYMENT PROGRAM FOR CLINICAL RESEARCHERS FROM DISADVANTAGED BACKGROUNDS.—

(1) IN GENERAL.—The Secretary of Veterans Affairs may, in consultation with the Secretary of Health and Human Services, utilize the authorities available in section 487E of the Public Health Service Act (42 U.S.C. 288–5) for the repayment of the principal and interest of educational loans of appropriately qualified health professionals who are from disadvantaged backgrounds in order to secure clinical research by such professionals for the Veterans Health Administration.

(2) LIMITATIONS.—The exercise by the Secretary of Veterans Affairs of the authorities referred to in paragraph (1) shall be subject to the conditions and limitations specified in paragraphs (2) and (3) of section 487E(a) of the Public Health Service Act (42 U.S.C. 288–5(a)(2) and (3)).

(3) FUNDING.—Amounts for the repayment of principal and interest of educational loans under this subsection shall be derived from amounts available to the Secretary of Veterans Affairs for the Veterans Health Administration for Medical Services.

SEC. 104. STANDARDS FOR APPOINTMENT AND PRACTICE OF PHYSICIANS IN DEPARTMENT OF VETERANS AFFAIRS MEDICAL FACILITIES.

(a) STANDARDS.—

(1) IN GENERAL.—Subchapter I of chapter 74 is amended by inserting after section 7402 the following new section:

''§ 7402A. Appointment and practice of physicians: standards

''(a) IN GENERAL.—The Secretary shall, acting through the Under Secretary for Health, prescribe standards to be met by individuals in order to qualify for appointment in the Veterans Health Administration in the position of physician and to practice as a physician in medical facilities of the Administration. The standards shall incorporate the requirements of this section.

''(b) DISCLOSURE OF CERTAIN INFORMATION BEFORE APPOINTMENT.—Each individual seeking appointment in the Veterans Health Administration in the position of physician shall do the following:

''(1) Provide the Secretary a full and complete explanation of the following:

''(A) Each lawsuit, civil action, or other claim (whether open or closed) brought against the individual for medical malpractice or negligence (other than a lawsuit, action, or claim closed without any judgment against or payment by or on behalf of the individual).

''(B) Each payment made by or on behalf of the individual to settle any lawsuit, action, or claim covered by subparagraph (A).

''(C) Each investigation or disciplinary action taken against the individual relating to the individual's performance as a physician.

''(2) Submit a written request and authorization to the State licensing board of each State in which the individual holds or has held a license to practice medicine to disclose to the Secretary any information in the records of such State on the following:

''(A) Each lawsuit, civil action, or other claim brought against the individual for medical malpractice or negligence covered by paragraph (1)(A) that occurred in such State.

''(B) Each payment made by or on behalf of the individual to settle any lawsuit, action, or claim covered by subparagraph (A).

''(C) Each medical malpractice judgment against the individual by the courts or administrative agencies or bodies of such State.

''(D) Each disciplinary action taken or under consideration against the individual by an administrative agency or body of such State.

''(E) Any change in the status of the license to practice medicine issued the individual by such State, including any voluntary or nondisciplinary surrendering of such license by the individual.

''(F) Any open investigation of the individual by an administrative agency or body of such State, or any outstanding allegation against the individual before such an administrative agency or body.

''(G) Any written notification by the State to the individual of potential termination of a license for cause or otherwise.

''(c) DISCLOSURE OF CERTAIN INFORMATION FOLLOWING APPOINTMENT.—(1) Each individual appointed in the Veterans Health Administration in the position of physician after the date of the enactment of this section shall, as a condition of service under the appointment, disclose to the Secretary, not later than 30 days after the occurrence of such event, the following:

''(A) A judgment against the individual for medical malpractice or negligence.

''(B) A payment made by or on behalf of the individual to settle any lawsuit, action, or claim disclosed under paragraph (1) or (2) of subsection (b).

''(C) Any disposition of or material change in a matter disclosed under paragraph (1) or (2) of subsection (b).

''(2) Each individual appointed in the Veterans Health Administration in the position of physician as of the date of the enactment of this section shall do the following:

''(A) Not later than the end of the 60-day period beginning on the date of the enactment of this section and as a condition of service under the appointment after the end of that period, submit the request and authorization described in subsection (b)(2).

''(B) Agree, as a condition of service under the appointment, to disclose to the Secretary, not later than 30 days after the occurrence of such event, the following:

''(i) A judgment against the individual for medical malpractice or negligence.

''(ii) A payment made by or on behalf of the individual to settle any lawsuit, action, or claim disclosed pursuant to subparagraph (A) or under this subparagraph.

''(iii) Any disposition of or material change in a matter disclosed pursuant to subparagraph (A) or under this subparagraph.

''(3) Each individual appointed in the Veterans Health Administration in the position of physician shall, as part of the biennial review of the performance of the physician under the appointment, submit the request and authorization described in subsection (b)(2). The requirement of this paragraph is in addition to the requirements of paragraph (1) or (2), as applicable.

''(d) INVESTIGATION OF DISCLOSED MATTERS.—(1) The Director of the Veterans Integrated Services Network (VISN) in which an individual is seeking appointment in the Veterans Health Administration in the position of physician shall perform an investigation (in such manner as the standards required by this section shall specify) of each matter disclosed under subsection (b) with respect to the individual.

''(2) The Director of the Veterans Integrated Services Network in which an individual is appointed in the Veterans Health Administration in the position of physician shall perform an investigation (in a manner so specified) of each matter disclosed under subsection (c) with respect to the individual.

''(3) The results of each investigation performed under this subsection shall be fully documented.

''(e) APPROVAL OF APPOINTMENTS BY DIRECTORS OF VISNS.—(1) An individual may not be appointed in the Veterans Health Administration in the position of physician without the approval of the Director of the Veterans Integrated Services Network in which the individual will first serve under the appointment.

''(2) In approving the appointment under this subsection of an individual for whom any matters have been disclosed under subsection (b), a Director shall—

''(A) certify in writing the completion of the performance of the investigation under subsection (d)(1) of each such matter, including the results of such investigation; and

''(B) provide a written justification why any matters raised in the course of such investigation do not disqualify the individual from appointment.

''(f) ENROLLMENT OF PHYSICIANS WITH PRACTICE PRIVILEGES IN PROACTIVE DISCLOSURE SERVICE.—Each medical facility of the Department at which physicians are extended the privileges of practice shall enroll each physician extended such privileges in the Proactive Disclosure Service of the National Practitioner Data Bank.

''(g) ENCOURAGING HIRING OF PHYSICIANS WITH BOARD CERTIFICATION.—(1) The Secretary shall, for each performance contract with a Director of a Veterans Integrated Services Network (VISN), include in such contract a provision that encourages such director to hire physicians who are board eligible or board certified in the specialty in which the physicians will practice.

''(2) The Secretary may determine the nature and manner of the provision described in paragraph (1).''.

(2) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 74 is amended by inserting after the item relating to section 7402 the following new item:

''7402A. Appointment and practice of physicians: standards.''.

(b) EFFECTIVE DATE AND APPLICABILITY.—

(1) EFFECTIVE DATE.—Except as provided in paragraphs (2) and (3), the amendments made by subsection (a) shall take effect on the date of the enactment of this Act.

(2) APPLICABILITY OF CERTAIN REQUIREMENTS TO PHYSICIANS PRACTICING ON EFFECTIVE DATE.—In the case of an individual appointed to the Veterans Health Administration in the position of physician as of the date of the enactment of this Act, the requirements of section 7402A(f) of title 38, United States Code, as added by subsection (a) of this section, shall take effect on the date that is 60 days after the date of the enactment of this Act.

(3) APPLICABILITY OF REQUIREMENTS RELATED TO HIRING OF PHYSICIANS WITH BOARD CERTIFICATION.—The requirement of section 7402A(g) of such title, as added by subsection (a), shall begin with the first cycle of performance contracts for directors of Veterans Integrated Services Networks beginning after the date of the enactment of this Act.

TITLE II—HEALTH CARE MATTERS

SEC. 201. REPEAL OF CERTAIN ANNUAL REPORTING REQUIREMENTS.

(a) NURSE PAY REPORT.—Section 7451 is amended—

(1) by striking subsection (f); and

(2) by redesignating subsection (g) as subsection (f).

(b) LONG-TERM PLANNING REPORT.—

(1) IN GENERAL.—Section 8107 is repealed.

(2) CONFORMING AMENDMENT.—The table of sections at the beginning of chapter 81 is amended by striking the item relating to section 8107.

SEC. 202. MODIFICATIONS TO ANNUAL GULF WAR RESEARCH REPORT.

Section 707(c)(1) of the Persian Gulf War Veterans' Health Status Act (title VII of Public Law 102–585; 38 U.S.C. 527 note) is amended by striking ''Not later than March 1 of each year'' and inserting ''Not later than July 1, 2008, and July 1 of each of the five following years''.

SEC. 203. PAYMENT FOR CARE FURNISHED TO CHAMPVA BENEFICIARIES.

Section 1781 is amended at the end by adding the following new subsection:

''(e) Payment by the Secretary under this section on behalf of a covered beneficiary for medical care shall constitute payment in full and extinguish any liability on the part of the beneficiary for that care.''.

SEC. 204. PAYOR PROVISIONS FOR CARE FURNISHED TO CERTAIN CHILDREN OF VIETNAM VETERANS.

(a) CHILDREN OF VIETNAM VETERANS BORN WITH SPINA BIFIDA.—Section 1803 is amended—

(1) by redesignating subsection (c) as subsection (d); and

(2) by inserting after subsection (b) the following new subsection (c):

''(c) Where payment by the Secretary under this section is less than the amount of the charges billed, the health care provider or agent of the health care provider may seek payment for the difference between the amount billed and the amount paid by the Secretary from a responsible third party to the extent that the provider or agent thereof would be eligible to receive payment for such care or services from such third party, but—

''(1) the health care provider or agent for the health care provider may not impose any additional charge on the beneficiary who received the medical care, or the family of such beneficiary, for any service or item for which the Secretary has made payment under this section;

''(2) the total amount of payment a provider or agent of the provider may receive for care and services furnished under this section may not exceed the amount billed to the Secretary; and

''(3) the Secretary, upon request, shall disclose to such third party information received for the purposes of carrying out this section.''.

(b) CHILDREN OF WOMEN VIETNAM VETERANS BORN WITH BIRTH DEFECTS.—Section 1813 is amended—

(1) by redesignating subsection (c) as subsection (d); and

(2) by inserting after subsection (b) the following new subsection (c):

''(c) SEEKING PAYMENT FROM THIRD PARTIES.—Where payment by the Secretary under this section is less than the amount of the charges billed, the health care provider or agent of the health care provider may seek payment for the difference between the amount billed and the amount paid by the Secretary from a responsible third party to the extent that the health care provider or agent thereof would be eligible to receive payment for such care or services from such third party, but—

''(1) the health care provider or agent for the health care provider may not impose any additional charge on the beneficiary who received medical care, or the family of such beneficiary, for any service or item for which the Secretary has made payment under this section;

''(2) the total amount of payment a provider or agent of the provider may receive for care and services furnished under this section may not exceed the amount billed to the Secretary; and

''(3) the Secretary, upon request, shall disclose to such third party information received for the purposes of carrying out this section.''.

SEC. 205. DISCLOSURES FROM CERTAIN MEDICAL RECORDS.

Section 7332(b)(2) is amended by adding at the end the following new subparagraph:

''(F)(i) To a representative of a patient who lacks decision-making capacity, when a practitioner deems the content of the given record necessary for that representative to make an informed decision regarding the patient's treatment.

''(ii) In this subparagraph, the term 'representative' means an individual, organization, or other body authorized under section 7331 of this title and its implementing regulations to give informed consent on behalf of a patient who lacks decision-making capacity.''.

SEC. 206. DISCLOSURE TO SECRETARY OF HEALTH-PLAN CONTRACT INFORMATION AND SOCIAL SECURITY NUMBER OF CERTAIN VETERANS RECEIVING CARE.

(a) IN GENERAL.—Subchapter I of chapter 17 is amended by adding at the end the following new section:

''§ 1709. Disclosure to Secretary of health-plan contract information and social security number of certain veterans receiving care

''(a) REQUIRED DISCLOSURE OF HEALTH-PLAN CONTRACTS.—(1) Any individual who

applies for or is in receipt of care described in paragraph (2) shall, at the time of such application, or otherwise when requested by the Secretary, submit to the Secretary such current information as the Secretary may require to identify any health-plan contract (as defined in section 1729(i) of this title) under which such individual is covered, to include, as applicable—

''(A) the name, address, and telephone number of such health-plan contract;

''(B) the name of the individual's spouse, if the individual's coverage is under the spouse's health-plan contract;

''(C) the plan number; and

''(D) the plan's group code.

''(2) The care described in this paragraph is—

''(A) hospital, nursing home, or domiciliary care;

''(B) medical, rehabilitative, or preventive health services; or

''(C) other medical care under laws administered by the Secretary.

''(b) REQUIRED DISCLOSURE OF SOCIAL SECURITY NUMBER.—(1) Any individual who applies for or is in receipt of care described in paragraph (2) shall, at the time of such application, or otherwise when requested by the Secretary, submit to the Secretary—

''(A) the individual's social security number; and

''(B) the social security number of any dependent or Department beneficiary on whose behalf, or based upon whom, such individual applies for or is in receipt of such care.

''(2) The care described in this paragraph is—

''(A) hospital, nursing home, or domiciliary care;

''(B) medical, rehabilitative, or preventive health services; or

''(C) other medical care under laws administered by the Secretary.

''(3) This subsection does not require an individual to furnish the Secretary with a social security number for any individual to whom a social security number has not been assigned.

''(c) FAILURE TO DISCLOSE SOCIAL SECURITY NUMBER.—(1) The Secretary shall deny an individual's application for, or may terminate an individual's enrollment in, the system of patient enrollment established by the Secretary under section 1705 of this title, if such individual does not provide the social security number required or requested to be submitted pursuant to subsection (b).

''(2) Following a denial or termination under paragraph (1) with respect to an individual, the Secretary may, upon receipt of the information required or requested under subsection (b), approve such individual's application or reinstate such individual's enrollment (if otherwise in order), for such medical care and services provided on and after the date of such receipt of information.

''(d) CONSTRUCTION.—Nothing in this section shall be construed as authority to deny medical care and treatment to an individual in a medical emergency.''.

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of such chapter 17 is amended by inserting after the item relating to section 1708 the following new item:

''1709. Disclosure to Secretary of health-plan contract information and social security number of certain veterans receiving care.''.

SEC. 207. ENHANCEMENT OF QUALITY MANAGEMENT.

(a) ENHANCEMENT OF QUALITY MANAGEMENT THROUGH QUALITY MANAGEMENT OFFICERS.—

(1) IN GENERAL.—Subchapter II of chapter 73 is amended by inserting after section 7311 the following new section:

''§ 7311A. Quality management officers

''(a) NATIONAL QUALITY MANAGEMENT OFFICER.—(1) The Under Secretary for Health shall designate an official of the Veterans Health Administration to act as the principal quality management officer for the quality-assurance program required by section 7311 of this title. The official so designated may be known as the 'National Quality Management Officer of the Veterans Health Administration' (in this section referred to as the 'National Quality Management Officer').

''(2) The National Quality Management Officer shall report directly to the Under Secretary for Health in the discharge of responsibilities and duties of the Officer under this section.

''(3) The National Quality Management Officer shall be the official within the Veterans Health Administration who is principally responsible for the quality-assurance program referred to in paragraph (1). In carrying out that responsibility, the Officer shall be responsible for the following:

''(A) Establishing and enforcing the requirements of the program referred to in paragraph (1).

''(B) Developing an aggregate quality metric from existing data sources, such as the Inpatient Evaluation Center of the Department, the National Surgical Quality Improvement Program of the American College of Surgeons, and the External Peer Review Program of the Veterans Health Administration, that could be used to assess reliably the quality of care provided at individual Department medical centers and associated community based outpatient clinics.

''(C) Ensuring that existing measures of quality, including measures from the Inpatient Evaluation Center, the National Surgical Quality Improvement Program, System-Wide Ongoing Assessment and Review reports of the Department, and Combined Assessment Program reviews of the Office of Inspector General of the Department, are monitored routinely and analyzed in a manner that ensures the timely detection of quality of care issues.

''(D) Encouraging research and development in the area of quality metrics for the purposes of improving how the Department measures quality in individual facilities.

''(E) Carrying out such other responsibilities and duties relating to quality management in the Veterans Health Administration as the Under Secretary for Health shall specify.

''(4) The requirements under paragraph (3) shall include requirements regarding the following:

''(A) A confidential system for the submittal of reports by Veterans Health Administration personnel regarding quality management at Department facilities.

''(B) Mechanisms for the peer review of the actions of individuals appointed in the Veterans Health Administration in the position of physician.

''(b) QUALITY MANAGEMENT OFFICERS FOR VISNS.—(1) The Regional Director of each Veterans Integrated Services Network (VISN) shall appoint an official of the Network to act as the quality management officer of the Network.

''(2) The quality management officer for a Veterans Integrated Services Network shall report to the Regional Director of the Veterans Integrated Services Network, and to the National Quality Management Officer, regarding the discharge of the responsibilities and duties of the officer under this section.

''(3) The quality management officer for a Veterans Integrated Services Network shall—

''(A) direct the quality management office in the Network; and

''(B) coordinate, monitor, and oversee the quality management programs and activities of the Administration medical facilities in the Network in order to ensure the thorough and uniform discharge of quality management requirements under such programs and activities throughout such facilities.

''(c) QUALITY MANAGEMENT OFFICERS FOR MEDICAL FACILITIES.—(1) The director of each Veterans Health Administration medical facility shall appoint a quality management officer for that facility.

''(2) The quality management officer for a facility shall report directly to the director of the facility, and to the quality management officer of the Veterans Integrated Services Network in which the facility is located, regarding the discharge of the responsibilities and duties of the quality management officer under this section.

''(3) The quality management officer for a facility shall be responsible for designing, disseminating, and implementing quality management programs and activities for the facility that meet the requirements established by the National Quality Management Officer under subsection (a).

''(d) AUTHORIZATION OF APPROPRIATIONS.—(1) Except as provided in paragraph (2), there are authorized to be appropriated such sums as may be necessary to carry out this section.

''(2) There are authorized to be appropriated to carry out the provisions of subparagraphs (B), (C), and (D) of subsection (a)(3), $25,000,000 for the two-year period of fiscal years beginning after the date of the enactment of this section.''.

(2) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 73 is amended by inserting after the item relating to section 7311 the following new item:

''7311A. Quality management officers.''.

(b) REPORTS ON QUALITY CONCERNS UNDER QUALITY-ASSURANCE PROGRAM.—Section 7311(b) is amended by adding at the end the following new paragraph:

''(4) As part of the quality-assurance program, the Under Secretary for Health shall establish mechanisms through which employees of Veterans Health Administration facilities may submit reports, on a confidential basis, on matters relating to quality of care in Veterans Health Administration facilities to the quality management officers of such facilities under section 7311A(b) of this title. The mechanisms shall provide for the prompt and thorough review of any reports so submitted by the receiving officials.''.

(c) REVIEW OF CURRENT HEALTH CARE QUALITY SAFEGUARDS.—

(1) IN GENERAL.—The Secretary of Veterans Affairs shall conduct a comprehensive review of all current policies and protocols of the Department of Veterans Affairs for maintaining health care quality and patient safety at Department medical facilities. The review shall include a review and assessment of the National Surgical Quality Improvement Program (NSQIP), including an assessment of—

(A) the efficacy of the quality indicators under the program;

(B) the efficacy of the data collection methods under the program;

(C) the efficacy of the frequency with which regular data analyses are performed under the program; and

(D) the extent to which the resources allocated to the program are adequate to fulfill the stated function of the program.

(2) REPORT.—Not later than 60 days after the date of the enactment of this Act, the Secretary shall submit to Congress a report on the review conducted under paragraph (1), including the findings of the Secretary as a result of the review and such recommendations as the Secretary considers appropriate in light of the review.

SEC. 208. REPORTS ON IMPROVEMENTS TO DEPARTMENT HEALTH CARE QUALITY MANAGEMENT.

(a) REPORT.—Not later than December 15, 2009, and each year thereafter through 2012, the Secretary of Veterans Affairs shall submit to the congressional veterans affairs committees a report on the implementation of sections 104 and 207 of this Act and the amendments made by such sections during the preceding fiscal year. Each report shall include, for the fiscal year covered by such report, the following:

(1) A comprehensive description of the implementation of sections 104 and 207 of this Act and the amendments made by such sections.

(2) Such recommendations as the Secretary considers appropriate for legislative or administrative action to improve the authorities and requirements in such sections and the amendments made by such sections or to otherwise improve the quality of health care and the quality of the physicians in the Veterans Health Administration.

(b) CONGRESSIONAL VETERANS AFFAIRS COMMITTEES DEFINED.—In this section, the term ''congressional veterans affairs committees'' means—

(1) the Committees on Veterans' Affairs and Appropriations of the Senate; and

(2) the Committees on Veterans' Affairs and Appropriations of the House of Representatives.

SEC. 209. PILOT PROGRAM ON TRAINING AND CERTIFICATION FOR FAMILY CAREGIVER PERSONAL CARE ATTENDANTS FOR VETERANS AND MEMBERS OF THE ARMED FORCES WITH TRAUMATIC BRAIN INJURY.

(a) PILOT PROGRAM AUTHORIZED.—The Secretary of Veterans Affairs shall, in collaboration with the Secretary of Defense, carry out a pilot program to assess the feasibility and advisability of providing training and certification for family caregivers of veterans and members of the Armed Forces with traumatic brain injury as personal care attendants of such veterans and members.

(b) DURATION OF PROGRAM.—The pilot program required by subsection (a) shall be carried out during the three-year period beginning on the date of the commencement of the pilot program.

(c) LOCATIONS.—

(1) IN GENERAL.—The pilot program under this section shall be carried out—

(A) in three medical facilities of the Department of Veterans Affairs; and

(B) if determined appropriate by the Secretary of Veterans Affairs and the Secretary of Defense, one medical facility of the Department of Defense.

(2) EMPHASIS ON POLYTRAUMA CENTERS.—In selecting the locations of the pilot program at facilities of the Department of Veterans Affairs, the Secretary of Veterans Affairs shall give special emphasis to the polytrauma centers of the Department of Veterans Affairs designated as Tier I polytrauma centers.

(d) TRAINING CURRICULA.—

(1) IN GENERAL.—The Secretary of Veterans Affairs shall develop curricula for the training of personal care attendants under the pilot program under this section. Such curricula shall incorporate—

(A) applicable standards and protocols utilized by certification programs of national brain injury care specialist organizations; and

(B) best practices recognized by caregiving organizations.

(2) USE OF EXISTING CURRICULA.—In developing the curricula required by paragraph (1), the Secretary of Veterans Affairs shall, to the extent practicable, utilize and expand upon training curricula developed pursuant to section 744(b) of the John Warner National Defense Authorization Act for Fiscal Year 2007 (Public Law 109–364; 120 Stat. 2308).

(e) PARTICIPATION IN PROGRAMS.—

(1) IN GENERAL.—The Secretary of Veterans Affairs shall determine the eligibility of a family member of a veteran or member of the Armed Forces for participation in the pilot program under this section.

(2) BASIS FOR DETERMINATION.—A determination made under paragraph (1) shall be based on the needs of the veteran or member of the Armed Forces concerned, as determined by the physician of such veteran or member.

(f) ELIGIBILITY FOR COMPENSATION.—A family caregiver of a veteran or member of the Armed Forces who receives certification as a personal care attendant under the pilot program under this section shall be eligible for compensation from the Department of Veterans Affairs for care provided to such veteran or member.

(g) COSTS OF TRAINING.—

(1) TRAINING OF FAMILIES OF VETERANS.—Any costs of training provided under the pilot program under this section for family members of veterans shall be borne by the Secretary of Veterans Affairs.

(2) TRAINING OF FAMILIES OF MEMBERS OF THE ARMED FORCES.—The Secretary of Defense shall reimburse the Secretary of Veterans Affairs for any costs of training provided under the pilot program for family members of members of the Armed Forces.

(h) ASSESSMENT OF FAMILY CAREGIVER NEEDS.—

(1) IN GENERAL.—The Secretary of Veterans Affairs may provide to a family caregiver who receives training under the pilot program under this section—

(A) an assessment of their needs with respect to their role as a family caregiver; and

(B) a referral to services and support that—

(i) are relevant to any needs identified in such assessment; and

(ii) are provided in the community where the family caregiver resides, including such services and support provided by community-based organizations, publicly-funded programs, and the Department of Veterans Affairs.

(2) USE OF EXISTING TOOLS.—In developing and administering an assessment under paragraph (1), the Secretary shall, to the extent practicable, use and expand upon caregiver assessment tools already developed and in use by the Department.

(i) REPORT.—Not later than 2 years after the date of the enactment of this Act, the Secretary of Veterans Affairs shall submit to Congress a report on the pilot program carried out under this section, including the recommendations of the Secretary with respect to expansion or modification of the pilot program.

(j) CONSTRUCTION.—Nothing in this section shall be construed—

(1) to establish a mandate or right for a family caregiver to be trained and certified under this section; and

(2) to prohibit the Secretary from considering or adopting the preference of a veteran or member of the Armed Forces for services provided by a personal care attendant who is not a family caregiver.

(k) FAMILY CAREGIVER DEFINED.—In this section, with respect to member of the Armed Forces or a veteran with traumatic brain injury, the term ''family caregiver'' means a family member of such member or veteran, or such other individual of similar affinity to such member or veteran as the Secretary proscribes, who is providing care to such member or veteran for such traumatic brain injury.

SEC. 210. PILOT PROGRAM ON PROVISION OF RESPITE CARE TO MEMBERS OF THE ARMED FORCES AND VETERANS WITH TRAUMATIC BRAIN INJURY BY STUDENTS IN GRADUATE PROGRAMS OF EDUCATION RELATED TO MENTAL HEALTH OR REHABILITATION.

(a) PILOT PROGRAM AUTHORIZED.—The Secretary of Veterans Affairs shall, in collaboration with the Secretary of Defense, carry out a pilot program to assess the feasibility and advisability of providing respite care to members of the Armed Forces and veterans described in subsection (c) through students enrolled in graduate programs of education described in subsection (d)(1) to provide—

(1) relief to the family caregivers of such members and veterans from the responsibilities associated with providing care to such members and veterans; and

(2) socialization and cognitive skill development to such members and veterans.

(b) DURATION OF PROGRAM.—The pilot program required by subsection (a) shall be carried out during the three-year period beginning on the date of the commencement of the pilot program.

(c) COVERED MEMBERS AND VETERANS.—The members of the Armed Forces and veterans described in this subsection are the individuals as follows:

(1) Members of the Armed Forces who have been diagnosed with traumatic brain injury, including limitations of ambulatory mobility, cognition, and verbal abilities.

(2) Veterans who have been so diagnosed.

(d) PROGRAM LOCATIONS.—

(1) IN GENERAL.—The pilot program shall be carried out at not more than 10 locations selected by the Secretary of Veterans Affairs for purposes of the pilot program. Each location so selected shall be a medical facility of the Department of Veterans Affairs that is in close proximity to, or that has a relationship, affiliation, or established partnership with, an institution of higher education that has a graduate program in an appropriate mental health or rehabilitation related field, such as social work, nursing, psychology, occupational therapy, physical therapy, or interdisciplinary training programs.

(2) CONSIDERATIONS.—In selecting medical facilities of the Department for the pilot program, the Secretary shall give special consideration to the following:

(A) The polytrauma centers of the Department designated as Tier I polytrauma centers.

(B) Facilities of the Department in regions with a high concentration of veterans with traumatic brain injury.

(e) SCOPE OF ASSISTANCE.—

(1) USE OF GRADUATE STUDENTS.—In carrying out the pilot program, the Secretary shall—

(A) recruit students enrolled in a graduate program of education selected by the Secretary under subsection (d)(1) to provide respite care to the members of the Armed Forces and veterans described in subsection (c);

(B) train such students to provide respite care to such members and veterans; and

(C) match such students with such members and veterans in the student's local area for the provision of individualized respite care to such members and veterans.

(2) DETERMINATIONS IN CONJUNCTION WITH HEADS OF GRADUATE PROGRAMS OF EDUCATION.—The Secretary shall determine, in collaboration with the head of the graduate program of education chosen to participate in the pilot program under subsection (d)(1), the following:

(A) The amount of training that a student shall complete before providing respite care under the pilot program.

(B) The number of hours of respite care to be provided by the students who participate in the pilot program.

(C) The requirements for successful participation by a student in the pilot program.

(f) TRAINING STANDARDS AND BEST PRACTICES.—In providing training under subsection (e)(1)(B), the Secretary shall use—

(1) applicable standards and protocols used by certification programs of national brain injury care specialist organizations in the provision of respite care training; and

(2) best practices recognized by caregiving organizations.

(g) DEFINITIONS.—In this section:

(1) FAMILY CAREGIVER.—With respect to member of the Armed Forces or a veteran with traumatic brain injury, the term ''family caregiver'' means a relative, partner, or friend of such member or veteran who is providing care to such member or veteran for such traumatic brain injury.

(2) RESPITE CARE.—The term ''respite care'' means the temporary provision of care to an individual to provide relief to the regular caregiver of the individual from the ongoing responsibility of providing care to such individual.

SEC. 211. PILOT PROGRAM ON USE OF COMMUNITY-BASED ORGANIZATIONS AND LOCAL AND STATE GOVERNMENT ENTITIES TO ENSURE THAT VETERANS RECEIVE CARE AND BENEFITS FOR WHICH THEY ARE ELIGIBLE.

(a) PILOT PROGRAM REQUIRED.—The Secretary of Veterans Affairs shall carry out a pilot program to assess the feasibility and advisability of using community-based organizations and local and State government entities—

(1) to increase the coordination of community, local, State, and Federal providers of health care and benefits for veterans to assist veterans who are transitioning from military service to civilian life in such transition;

(2) to increase the availability of high quality medical and mental health services to veterans transitioning from military service to civilian life;

(3) to provide assistance to families of veterans who are transitioning from military service to civilian life to help such families adjust to such transition; and

(4) to provide outreach to veterans and their families to inform them about the availability of benefits and connect them with appropriate care and benefit programs.

(b) DURATION OF PROGRAM.—The pilot program shall be carried out during the two-year period beginning on the date of the enactment of this Act.

(c) PROGRAM LOCATIONS.—

(1) IN GENERAL.—The pilot program shall be carried out at five locations selected by the Secretary for purposes of the pilot program.

(2) CONSIDERATIONS.—In selecting locations for the pilot program, the Secretary shall consider the advisability of selecting locations in—

(A) rural areas;

(B) areas with populations that have a high proportion of minority group representation;

(C) areas with populations that have a high proportion of individuals who have limited access to health care; and

(D) areas that are not in close proximity to an active duty military installation.

(d) GRANTS.—The Secretary shall carry out the pilot program through the award of grants to community-based organizations and local and State government entities.

(e) SELECTION OF GRANT RECIPIENTS.—

(1) IN GENERAL.—A community-based organization or local or State government entity seeking a grant under the pilot program shall submit to the Secretary of Veterans Affairs an application therefor in such form and in such manner as the Secretary considers appropriate.

(2) ELEMENTS.—Each application submitted under paragraph (1) shall include the following:

(A) A description of how the proposal was developed in consultation with the Department of Veterans Affairs.

(B) A plan to coordinate activities under the pilot program, to the greatest extent possible, with the local, State, and Federal providers of services for veterans to reduce duplication of services and to increase the effect of such services.

(f) USE OF GRANT FUNDS.—The Secretary shall prescribe appropriate uses of grant funds received under the pilot program.

(g) REPORT ON PROGRAM.—

(1) IN GENERAL.—Not later than 180 days after the completion of the pilot program, the Secretary shall submit to Congress a report on the pilot program.

(2) ELEMENTS.—The report required by paragraph (1) shall include the following:

(A) The findings and conclusions of the Secretary with respect to the pilot program.

(B) An assessment of the benefits to veterans of the pilot program.

(C) The recommendations of the Secretary as to the advisability of continuing the pilot program.

SEC. 212. SPECIALIZED RESIDENTIAL CARE AND REHABILITATION FOR CERTAIN VETERANS.

Section 1720 is amended by adding at the end the following new subsection:

''(g) The Secretary may contract with appropriate entities to provide specialized residential care and rehabilitation services to a veteran of Operation Enduring Freedom or Operation Iraqi Freedom who the Secretary determines suffers from a traumatic brain injury, has an accumulation of deficits in activities of daily living and instrumental activities of daily living, and because of these deficits, would otherwise require admission to a nursing home even though such care would generally exceed the veteran's nursing needs.''.

SEC. 213. AUTHORITY TO DISCLOSE MEDICAL RECORDS TO THIRD PARTY FOR COLLECTION OF CHARGES FOR PROVISION OF CERTAIN CARE.

(a) LIMITED EXCEPTION TO CONFIDENTIALITY OF MEDICAL RECORDS.—Section 5701 is amended by adding at the end the following new subsection:

''(l) Under regulations that the Secretary shall prescribe, the Secretary may disclose the name or address, or both, of any individual who is a present or former member of the Armed Forces, or who is a dependent of a present or former member of the Armed Forces, to a third party, as defined in section 1729(i)(3)(D) of this title, in order to enable the Secretary to collect reasonable charges under section 1729(a)(2)(E) of this title for care or services provided for a non-service-connected disability.''.

(b) DISCLOSURES FROM CERTAIN MEDICAL RECORDS.—Section 7332(b)(2), as amended by section 205 of this Act, is further amended by adding at the end the following new subparagraph:

''(G) To a third party, as defined in section 1729(i)(3)(D) of this title, to collect reasonable charges under section 1729(a)(2)(E) of this title for care or services provided for a non-service-connected disability.''.

SEC. 214. EXPANDED STUDY ON THE HEALTH IMPACT OF PROJECT SHIPBOARD HAZARD AND DEFENSE.

(a) IN GENERAL.—Not later than 90 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall enter into a contract with the Institute of Medicine of the National Academies to conduct an expanded study on the health impact of Project Shipboard Hazard and Defense (Project SHAD).

(b) COVERED VETERANS.—The study required by subsection (a) shall include, to the extent practicable, all veterans who participated in Project Shipboard Hazard and Defense.

(c) UTILIZATION OF EXISTING STUDIES.—The study required by subsection (a) may use results from the study covered in the report entitled ''Long-Term Health Effects of Participation in Project SHAD'' of the Institute of Medicine of the National Academies.

SEC. 215. USE OF NON-DEPARTMENT FACILITIES FOR REHABILITATION OF INDIVIDUALS WITH TRAUMATIC BRAIN INJURY.

Section 1710E is amended—

(1) by redesignating subsection (b) as subsection (c);

(2) by inserting after subsection (a) the following new subsection (b):

''(b) COVERED INDIVIDUALS.—The care and services provided under subsection (a) shall be made available to an individual—

''(1) who is described in section 1710C(a) of this title; and

''(2)(A) to whom the Secretary is unable to provide such treatment or services at the frequency or for the duration prescribed in such plan; or

''(B) for whom the Secretary determines that it is optimal with respect to the recovery and rehabilitation for such individual.''; and

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

''(d) STANDARDS.—The Secretary may not provide treatment or services as described in subsection (a) at a non-Department facility under such subsection unless such facility maintains standards for the provision of such treatment or services established by an independent, peer-reviewed organization that accredits specialized rehabilitation programs for adults with traumatic brain injury.''.

SEC. 216. INCLUSION OF FEDERALLY RECOGNIZED TRIBAL ORGANIZATIONS IN CERTAIN PROGRAMS FOR STATE VETERANS HOMES.

(a) TREATMENT OF TRIBAL ORGANIZATION HEALTH FACILITIES AS STATE HOMES.—Section 8138 is amended—

(1) by redesignating subsection (e) as subsection (f); and

(2) by inserting after subsection (d) the following new subsection (e):

''(e)(1) A health facility (or certain beds in a health facility) of a tribal organization is treatable as a State home under subsection (a) in accordance with the provisions of that subsection.

''(2) Except as provided in paragraph (3), the provisions of this section shall apply to a health facility (or certain beds in such facility) treated as a State home under subsection (a) by reason of this subsection to the same extent as health facilities (or beds) treated as a State home under subsection (a).

''(3) Subsection (f) shall not apply to the treatment of health facilities (or certain beds in such facilities) of tribal organizations as a State home under subsection (a).''.

(b) STATE HOME FACILITIES FOR DOMICILIARY, NURSING, AND OTHER CARE.—

(1) IN GENERAL.—Chapter 81 is further amended—

(A) in section 8131, by adding at the end the following new paragraph:

''(5) The term 'tribal organization' has the meaning given such term in section 3765 of this title.'';

(B) in section 8132, by inserting ''and tribal organizations'' after ''the several States''; and

(C) by inserting after section 8133 the following new section:

"§ 8133A. Tribal organizations

''(a) AUTHORITY TO AWARD GRANTS.—The Secretary may award a grant to a tribal organization under this subchapter in order to carry out the purposes of this subchapter.

''(b) MANNER AND CONDITION OF GRANT AWARDS.—(1) Grants to tribal organizations under this section shall be awarded in the same manner, and under the same conditions, as grants awarded to the several States under the provisions of this subchapter, subject to such exceptions as the Secretary shall prescribe for purposes of this subchapter to take into account the unique circumstances of tribal organizations.

''(2) For purposes of according priority under subsection (c)(2) of section 8135 of this title to an application submitted under subsection (a) of such section, an application submitted under such subsection (a) by a tribal organization of a State that has previously applied for award of a grant under this subchapter for construction or acquisition of a State nursing home shall be considered under subparagraph (C) of such subsection (c)(2) an application from a tribal organization that has not previously applied for such a grant.''.

(2) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 81 is amended by inserting after the item relating to section 8133 the following new item:

''8133A. Tribal organizations.''.

SEC. 217. PILOT PROGRAM ON PROVISION OF DENTAL INSURANCE PLANS TO VETERANS AND SURVIVORS AND DEPENDENTS OF VETERANS.

(a) PILOT PROGRAM REQUIRED.—The Secretary of Veterans Affairs shall carry out a pilot program to assess the feasibility and advisability of providing a dental insurance plan to veterans and survivors and dependents of veterans described in subsection (b).

(b) COVERED VETERANS AND SURVIVORS AND DEPENDENTS.—The veterans and survivors and dependents of veterans described in this subsection are as follows:

(1) Any veteran who is enrolled in the system of annual patient enrollment under section 1705 of this title.

(2) Any survivor or dependent of a veteran who is eligible for medical care under section 1781 of this title.

(c) DURATION OF PROGRAM.—The pilot program shall be carried out during the three-year period beginning on the date of the enactment of this Act.

(d) PILOT PROGRAM LOCATIONS.—The pilot program shall be carried out in not less than two and not more than four Veterans Integrated Services Networks (VISNs) selected by the Secretary of Veterans Affairs for purposes of the pilot program.

(e) ADMINISTRATION.—The Secretary of Veterans Affairs shall contract with a dental insurer to administer the dental plan provided under the pilot program.

(f) BENEFITS.—The dental insurance plan under the pilot program shall provide such benefits for dental care and treatment as the Secretary considers appropriate for the dental insurance plan, including diagnostic services, preventative services, endodontics and other restorative services, surgical services, and emergency services.

(g) ENROLLMENT.—

(1) VOLUNTARY.—Enrollment in the dental insurance plan under this section shall be voluntary.

(2) MINIMUM PERIOD.—Enrollment in the dental insurance plan shall be for such minimum period as the Secretary shall prescribe for purposes of this section.

(h) PREMIUMS.—

(1) IN GENERAL.—Premiums for coverage under the dental insurance plan under the pilot program shall be in such amount or amounts as the Secretary of Veterans Affairs shall prescribe to cover all costs associated with the pilot program.

(2) ANNUAL ADJUSTMENT.—The Secretary shall adjust the premiums payable under the pilot program for coverage under the dental insurance plan on an annual basis. Each individual covered by the dental insurance plan at the time of such an adjustment shall be notified of the amount and effective date of such adjustment.

(3) RESPONSIBILITY FOR PAYMENT.—Each individual covered by the dental insurance plan shall pay the entire premium for coverage under the dental insurance plan, in addition to the full cost of any copayments.

(i) VOLUNTARY DISENROLLMENT.—

(1) IN GENERAL.—With respect to enrollment in the dental insurance plan under the pilot program, the Secretary shall—

(A) permit the voluntary disenrollment of an individual in the dental insurance plan if the disenrollment occurs during the 30-day period beginning on the date of the enrollment of the individual in the dental insurance plan; and

(B) permit the voluntary disenrollment of an individual in the dental insurance plan for such circumstances as the Secretary shall prescribe for purposes of this subsection, but only to the extent such disenrollment does not jeopardize the fiscal integrity of the dental insurance plan.

(2) ALLOWABLE CIRCUMSTANCES.—The circumstances prescribed under paragraph (1)(B) shall include the following:

(A) If an individual enrolled in the dental insurance plan relocates to a location outside the jurisdiction of the dental insurance plan that prevents utilization of the benefits under the dental insurance plan.

(B) If an individual enrolled in the dental insurance plan is prevented by a serious medical condition from being able to obtain benefits under the dental insurance plan.

(C) Such other circumstances as the Secretary shall prescribe for purposes of this subsection.

(3) ESTABLISHMENT OF PROCEDURES.—The Secretary shall establish procedures for determinations on the permissibility of voluntary disenrollments under paragraph (1)(B). Such procedures shall ensure timely determinations on the permissibility of such disenrollments.

(j) RELATIONSHIP TO DENTAL CARE PROVIDED BY SECRETARY.—Nothing in this section shall affect the responsibility of the Secretary to provide dental care under section 1712 of title 38, United States Code, and the participation of an individual in the dental insurance plan under the pilot program shall not affect the individual's entitlement to outpatient dental services and treatment, and related dental appliances, under that section.

(k) REGULATIONS.—The dental insurance plan under the pilot program shall be administered under such regulations as the Secretary shall prescribe.

TITLE III—WOMEN VETERANS HEALTH CARE

SEC. 301. REPORT ON BARRIERS TO RECEIPT OF HEALTH CARE FOR WOMEN VETERANS.

(a) REPORT.—Not later than June 1, 2010, the Secretary of Veterans Affairs shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a report on the barriers to the receipt of comprehensive health care through the Department of Veterans Affairs that are encountered by women veterans, especially veterans of Operation Iraqi Freedom and Operation Enduring Freedom.

(b) ELEMENTS.—The report required by subsection (a) shall include the following:

(1) An identification and assessment of the following:

(A) Any stigma perceived or associated with seeking mental health care services through the Department of Veterans Affairs.

(B) The effect on access to care through the Department of driving distance or availability of other forms of transportation to the nearest appropriate facility of the Department.

(C) The availability of child care.

(D) The receipt of health care through women's health clinics, integrated primary care clinics, or both.

(E) The extent of comprehension of eligibility requirements for health care through the Department, and the scope of health care services available through the Department.

(F) The quality and nature of the reception of women veterans by Department health care providers and other staff.

(G) The perception of personal safety and comfort of women veterans in inpatient, outpatient, and behavioral health facilities of the Department.

(H) The sensitivity of Department health care providers and other staff to issues that particularly affect women.

(I) The effectiveness of outreach on health care services of the Department that are available to women veterans.

(J) Such other matters as the Secretary identifies for purposes of the assessment.

(2) Such recommendations for administrative and legislative action as the Secretary considers appropriate in light of the report.

(c) FACILITY OF THE DEPARTMENT DEFINED.—In this section, the term ''facility of the Department'' has the meaning given that term in section 1701 of title 38, United States Code.

SEC. 302. PLAN TO IMPROVE PROVISION OF HEALTH CARE SERVICES TO WOMEN VETERANS.

(a) PLAN TO IMPROVE SERVICES.—

(1) IN GENERAL.—The Secretary of Veterans Affairs shall develop a plan—

(A) to improve the provision of health care services to women veterans; and

(B) to plan appropriately for the future health care needs, including mental health care needs, of women serving on active duty in the Armed Forces in the combat theaters of Operation Iraqi Freedom and Operation Enduring Freedom.

(2) REQUIRED ACTIONS.—In developing the plan required by this subsection, the Secretary of Veterans Affairs shall—

(A) identify the types of health care services to be available to women veterans at each Department of Veterans Affairs medical center; and

(B) identify the personnel and other resources required to provide such services to women veterans under the plan at each such medical center.

(b) SUBMITTAL OF PLAN TO CONGRESS.—Not later than 18 months after the date of the enactment of this Act, the Secretary of Veterans Affairs shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives the plan required by this section, along with such recommendations for administrative and legislative action as the Secretary considers appropriate in light of the plan.

SEC. 303. INDEPENDENT STUDY ON HEALTH CONSEQUENCES OF WOMEN VETERANS OF MILITARY SERVICE IN OPERATION IRAQI FREEDOM AND OPERATION ENDURING FREEDOM.

(a) STUDY REQUIRED.—The Secretary of Veterans Affairs shall enter into an agreement with a non-Department of Veterans Affairs entity for the purpose of conducting a study on health consequences for women veterans of service on active duty in the Armed

Forces in deployment in Operation Iraqi Freedom and Operation Enduring Freedom.

(b) SPECIFIC MATTERS STUDIED.—The study under subsection (a) shall include the following:

(1) A determination of any association of environmental and occupational exposures and combat in Operation Iraqi Freedom or Operation Enduring Freedom with the general health, mental health, or reproductive health of women who served on active duty in the Armed Forces in Operation Iraqi Freedom or Operation Enduring Freedom.

(2) A review and analysis of published literature on environmental and occupational exposures of women while serving in the Armed Forces, including combat trauma, military sexual trauma, and exposure to potential teratogens associated with reproductive problems and birth defects.

(c) REPORT.—

(1) IN GENERAL.—Not later than 18 months after entering into the agreement for the study under subsection (a), the entity described in subsection (a) shall submit to the Secretary of Veterans Affairs and to Congress a report on the study containing such findings and determinations as the entity considers appropriate.

(2) RESPONSIVE REPORT.—Not later than 90 days after the receipt of the report under paragraph (1), the Secretary shall submit to Congress a report setting forth the response of the Secretary to the findings and determinations of the entity described in subsection (a) in the report under paragraph (1).

SEC. 304. TRAINING AND CERTIFICATION FOR MENTAL HEALTH CARE PROVIDERS ON CARE FOR VETERANS SUFFERING FROM SEXUAL TRAUMA.

(a) PROGRAM REQUIRED.—Section 1720D is amended—

(1) by redesignating subsection (d) as subsection (f); and

(2) by inserting after subsection (c) the following new subsections:

''(d)(1) The Secretary shall implement a program for education, training, certification, and continuing medical education for mental health professionals to specialize in the provision of counseling and care to veterans eligible for services under subsection (a). In carrying out the program, the Secretary shall ensure that all such mental health professionals have been trained in a consistent manner and that such training includes principles of evidence-based treatment and care for sexual trauma.

''(2) The Secretary shall determine the minimum qualifications necessary for mental health professionals certified by the program under paragraph (1) to provide evidence-based treatment and therapy to veterans eligible for services under subsection (a) in facilities of the Department.

''(e) The Secretary shall submit to Congress each year a report on the counseling, care, and services provided to veterans under this section. Each report shall include data for the preceding year with respect to the following:

''(1) The number of mental health professionals and primary care providers who have been certified under the program under subsection (d), and the amount and nature of continuing medical education provided under such program to professionals and providers who have been so certified.

''(2) The number of women veterans who received counseling, care, and services under subsection (a) from professionals and providers who have been trained or certified under the program under subsection (d).

''(3) The number of training, certification, and continuing medical education programs operating under subsection (d).

''(4) The number of trained full-time equivalent employees required in each facility of the Department to meet the needs of veterans requiring treatment and care for sexual trauma.

''(5) Such other information as the Secretary considers appropriate.''.

(b) STANDARDS FOR PERSONNEL PROVIDING TREATMENT FOR SEXUAL TRAUMA.—The Secretary of Veterans Affairs shall establish education, training, certification, and staffing standards for Department of Veterans Affairs health-care facilities for full-time equivalent employees who are trained to provide treatment and care to veterans for sexual trauma.

SEC. 305. PILOT PROGRAM ON COUNSELING IN RETREAT SETTINGS FOR WOMEN VETERANS NEWLY SEPARATED FROM SERVICE IN THE ARMED FORCES.

(a) PILOT PROGRAM REQUIRED.—

(1) IN GENERAL.—Commencing not later than 180 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall carry out, through the Readjustment Counseling Service of the Veterans Health Administration, a pilot program to evaluate the feasibility and advisability of providing reintegration and readjustment services described in subsection (b) in group retreat settings to women veterans who are recently separated from service in the Armed Forces after a prolonged deployment.

(2) PARTICIPATION AT ELECTION OF VETERAN.—The participation of a veteran in the pilot program under this section shall be at the election of the veteran.

(b) COVERED SERVICES.—The services provided to a woman veteran under the pilot program shall include the following:

(1) Information on reintegration into the veteran's family, employment, and community.

(2) Financial counseling.

(3) Occupational counseling.

(4) Information and counseling on stress reduction.

(5) Information and counseling on conflict resolution.

(6) Such other information and counseling as the Secretary considers appropriate to assist a woman veteran under the pilot program in reintegration into the veteran's family and community.

(c) LOCATIONS.—The Secretary shall carry out the pilot program at not fewer than five locations selected by the Secretary for purposes of the pilot program.

(d) DURATION.—The pilot program shall be carried out during the two-year period beginning on the date of the commencement of the pilot program.

(e) REPORT.—Not later than 180 days after the completion of the pilot program, the Secretary shall submit to Congress a report on the pilot program. The report shall contain the findings and conclusions of the Secretary as a result of the pilot program, and shall include such recommendations for the continuation or expansion of the pilot program as the Secretary considers appropriate.

(f) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to the Secretary of Veterans Affairs for each of fiscal years 2010 and 2011, $2,000,000 to carry out the pilot program.

SEC. 306. REPORT ON FULL-TIME WOMEN VETERANS PROGRAM MANAGERS AT MEDICAL CENTERS.

The Secretary shall, acting through the Under Secretary for Health, submit to Congress a report on employment of full-time women veterans program managers at Department of Veterans Affairs medical centers to ensure that health care needs of women veterans are met. Such report should include an assessment of whether there is at least one full-time employee at each Department medical center who is a full-time women veterans program manager.

SEC. 307. SERVICE ON CERTAIN ADVISORY COMMITTEES OF WOMEN RECENTLY SEPARATED FROM SERVICE IN THE ARMED FORCES.

(a) ADVISORY COMMITTEE ON WOMEN VETERANS.—Section 542(a)(2)(A) is amended—

(1) in clause (ii), by striking ''and'' at the end;

(2) in clause (iii), by striking the period at the end and inserting ''; and''; and

(3) by inserting after clause (iii) the following new clause:

''(iv) women veterans who are recently separated from service in the Armed Forces.''.

(b) ADVISORY COMMITTEE ON MINORITY VETERANS.—Section 544(a)(2)(A) is amended—

(1) in clause (iii), by striking ''and'' at the end;

(2) in clause (iv), by striking the period at the end and inserting ''; and''; and

(3) by inserting after clause (iv) the following new clause:

''(v) women veterans who are minority group members and are recently separated from service in the Armed Forces.''.

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to appointments made on or after the date of the enactment of this Act.

SEC. 308. PILOT PROGRAM ON SUBSIDIES FOR CHILD CARE FOR CERTAIN VETERANS RECEIVING HEALTH CARE.

(a) PILOT PROGRAM REQUIRED.—The Secretary of Veterans Affairs shall carry out a pilot program to assess the feasibility and advisability of providing, subject to subsection (b), subsidies to qualified veterans described in subsection (c) to obtain child care so that such veterans can receive health care services described in such subsection.

(b) LIMITATION ON PERIOD OF PAYMENTS.—A subsidy may only be provided to a qualified veteran under the pilot program for receipt of child care during the period that the qualified veteran—

(1) receives the types of health care services referred to in subsection (c) at a facility of the Department; and

(2) requires to travel to and return from such facility for the receipt of such health care services.

(c) QUALIFIED VETERANS.—In this section, the term ''qualified veteran'' means a veteran who is the primary caretaker of a child or children and who is receiving from the Department one or more of the following health care services:

(1) Regular mental health care services.

(2) Intensive mental health care services.

(3) Such other intensive health care services that the Secretary determines that payment to the veteran for the provision of child care would improve access to those health care services by the veteran.

(d) LOCATIONS.—The Secretary shall carry out the pilot program in no fewer than three Veterans Integrated Service Networks (VISNs) selected by the Secretary for purposes of the pilot program.

(e) DURATION.—The pilot program shall be carried out during the two-year period beginning on the date of the commencement of the pilot program.

(f) EXISTING MODEL.—To the extent practicable, the Secretary shall model the pilot program after the Department of Veterans Affairs Child Care Subsidy Program that was established pursuant to section 630 of the Treasury and General Government Appropriations Act, 2002 (Public Law 107–67; 115 Stat. 552), using the same income eligibility standards and payment structure.

(g) REPORT.—Not later than six months after the completion of the pilot program, the Secretary shall submit to Congress a report on the pilot program. The report shall include the findings and conclusions of the Secretary as a result of the pilot program,

and shall include such recommendations for the continuation or expansion of the pilot program as the Secretary considers appropriate.

(h) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to the Secretary of Veterans Affairs for each of fiscal years 2010 and 2011, $1,500,000 to carry out the pilot program.

SEC. 309. CARE FOR NEWBORN CHILDREN OF WOMEN VETERANS RECEIVING MATERNITY CARE.

(a) IN GENERAL.—Subchapter VIII of chapter 17 is amended by adding at the end the following new section:

"SEC. 1786. CARE FOR NEWBORN CHILDREN OF WOMEN VETERANS RECEIVING MATERNITY CARE.

''(a) IN GENERAL.—The Secretary may furnish health care services described in subsection (b) to a newborn child of a woman veteran who is receiving maternity care furnished by the Department for not more than 7 days after the birth of the child if the veteran delivered the child in—

''(1) a facility of the Department; or

''(2) another facility pursuant to a Department contract for services relating to such delivery.

''(b) COVERED HEALTH CARE SERVICES.—Health care services described in this subsection are all post-delivery care services, including routine care services, that a newborn requires.''.

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 17 is amended by inserting after the item relating to section 1785 the following new item:

''1786. Care for newborn children of women veterans receiving maternity care.''.

TITLE IV—MENTAL HEALTH CARE

SEC. 401. ELIGIBILITY OF MEMBERS OF THE ARMED FORCES WHO SERVE IN OPERATION IRAQI FREEDOM OR OPERATION ENDURING FREEDOM FOR COUNSELING AND SERVICES THROUGH READJUSTMENT COUNSELING SERVICE.

(a) IN GENERAL.—Any member of the Armed Forces, including a member of the National Guard or Reserve, who serves on active duty in the Armed Forces in Operation Iraqi Freedom or Operation Enduring Freedom is eligible for readjustment counseling and related mental health services under section 1712A of title 38, United States Code, through the Readjustment Counseling Service of the Veterans Health Administration.

(b) NO REQUIREMENT FOR CURRENT ACTIVE DUTY SERVICE.—A member of the Armed Forces who meets the requirements for eligibility for counseling and services under subsection (a) is entitled to counseling and services under that subsection regardless of whether or not the member is currently on active duty in the Armed Forces at the time of receipt of counseling and services under that subsection.

(c) REGULATIONS.—The eligibility of members of the Armed Forces for counseling and services under subsection (a) shall be subject to such regulations as the Secretary of Defense and the Secretary of Veterans Affairs shall jointly prescribe for purposes of this section.

(d) SUBJECT TO AVAILABILITY OF APPROPRIATIONS.—The provision of counseling and services under subsection (a) shall be subject to the availability of appropriations for such purpose.

SEC. 402. RESTORATION OF AUTHORITY OF READJUSTMENT COUNSELING SERVICE TO PROVIDE REFERRAL AND OTHER ASSISTANCE UPON REQUEST TO FORMER MEMBERS OF THE ARMED FORCES NOT AUTHORIZED COUNSELING.

Section 1712A is amended—

(1) by redesignating subsections (c) through (f) as subsections (d) through (g), respectively; and

(2) by inserting after subsection (b) the following new subsection (c):

''(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 otherwise eligible for such counseling, the Secretary 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 Department; and

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

SEC. 403. STUDY ON SUICIDES AMONG VETERANS.

(a) STUDY REQUIRED.—The Secretary of Veterans Affairs shall conduct a study to determine the number of veterans who died by suicide between January 1, 1997, and the date of the enactment of this Act.

(b) COORDINATION.—In carrying out the study under subsection (b) the Secretary of Veterans Affairs shall coordinate with—

(1) the Secretary of Defense;

(2) Veterans Service Organizations;

(3) the Centers for Disease Control and Prevention; and

(4) State public health offices and veterans agencies.

(c) REPORT TO CONGRESS.—The Secretary of Veterans Affairs shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a report on the study required under subsection (b) and the findings of the Secretary.

(d) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated such sums as may be necessary to carry out this section.

SEC. 404. TRANSFER OF FUNDS TO SECRETARY OF HEALTH AND HUMAN SERVICES FOR GRADUATE PSYCHOLOGY EDUCATION PROGRAM.

(a) TRANSFER OF FUNDS.—Not later than September 30, 2010, the Secretary of Veterans Affairs shall transfer $5,000,000 from accounts of the Veterans Health Administration to the Secretary of Health and Human Services for the Graduate Psychology Education program established under section 755(b)(1)(J) of the Public Health Service Act (42 U.S.C. 294e(b)(1)(J)).

(b) USE OF FUNDS TRANSFERRED.—Funds transferred under subsection (a) shall be used to award grants to support the training of psychologists in the treatment of veterans with post traumatic stress disorder, traumatic brain injury, and other combat-related disorders.

(c) PREFERENCE FOR DEPARTMENT OF VETERANS AFFAIRS HEALTH CARE FACILITIES.—In the awarding of grants under subsection (b), the Graduate Psychology Education program shall give preference to health care facilities of the Department of Veterans Affairs and graduate programs of education that are affiliated with such facilities.

TITLE V—HOMELESS VETERANS

SEC. 501. PILOT PROGRAM ON FINANCIAL SUPPORT FOR ENTITIES THAT COORDINATE THE PROVISION OF SUPPORTIVE SERVICES TO FORMERLY HOMELESS VETERANS RESIDING ON CERTAIN MILITARY PROPERTY.

(a) ESTABLISHMENT.—

(1) IN GENERAL.—Subject to the availability of appropriations for such purpose, the Secretary of Veterans Affairs may carry out a pilot program to make grants to public and nonprofit organizations (including faith-based and community organizations) to coordinate the provision of supportive services available in the local community to very low income, formerly homeless veterans residing in permanent housing that is located on qualifying property described in subsection (b).

(2) NUMBER OF GRANTS.—The Secretary may make grants at up to 10 qualifying properties under the pilot program.

(b) QUALIFYING PROPERTY.—Qualifying property under the pilot program is property that—

(1) was part of a military installation that was closed in accordance with—

(A) decisions made as part of the 2005 round of defense base closure and realignment under the Defense Base Closure and Realignment Act of 1990 (part A of title XXIX of Public Law 101–510; 10 U.S.C. 2687 note); and

(B) subchapter III of chapter 5 of title 40, United States Code; and

(2) the Secretary of Defense determines, after considering any redevelopment plans of any local redevelopment authority relating to such property, may be used to assist the homeless in accordance with such redevelopment plan.

(c) CRITERIA FOR GRANTS.—The Secretary shall prescribe criteria and requirements for grants under this section and shall publish such criteria and requirements in the Federal Register.

(d) DURATION OF PROGRAM.—The authority of the Secretary to provide grants under a pilot program under this section shall cease on the date that is five years after the date of the commencement of the pilot program.

(e) VERY LOW INCOME DEFINED.—In this section, the term ''very low income'' has the meaning given that term in the Resident Characteristics Report issued annually by the Department of Housing and Urban Development.

(f) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated from amounts made available under the heading ''General Operating Expenses'', not more than $3,000,000 in each of fiscal years 2010 through 2014 to carry out the purposes of this section.

SEC. 502. PILOT PROGRAM ON FINANCIAL SUPPORT OF ENTITIES THAT COORDINATE THE PROVISION OF SUPPORTIVE SERVICES TO FORMERLY HOMELESS VETERANS RESIDING IN PERMANENT HOUSING.

(a) ESTABLISHMENT OF PILOT PROGRAM.—

(1) IN GENERAL.—Subject to the availability of appropriations for such purpose, the Secretary of Veterans Affairs may carry out a pilot program to make grants to public and nonprofit organizations (including faith-based and community organizations) to coordinate the provision of supportive services available in the local community to very low income, formerly homeless veterans residing in permanent housing.

(2) NUMBER OF GRANTS.—The Secretary may make grants at up to 10 qualifying properties under the pilot program.

(b) QUALIFYING PROPERTY.—Qualifying property under the pilot program is any property in the United States on which permanent housing is provided or afforded to formerly homeless veterans, as determined by the Secretary.

(c) CRITERIA FOR GRANTS.—The Secretary shall prescribe criteria and requirements for grants under this section and shall publish such criteria and requirements in the Federal Register.

(d) DURATION OF PILOT PROGRAM.—The authority of the Secretary to provide grants under a pilot program under this section shall cease on the date that is five years

after the date of the commencement of the pilot program.

(e) VERY LOW INCOME DEFINED.—In this section, the term ''very low income'' has the meaning given that term in the Resident Characteristics Report issued annually by the Department of Housing and Urban Development.

(f) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated from amounts made available under the heading ''General Operating Expenses'', not more than $3,000,000 in each of fiscal years 2010 through 2014 to carry out the purposes of this section.

SEC. 503. PILOT PROGRAM ON FINANCIAL SUPPORT OF ENTITIES THAT PROVIDE OUTREACH TO INFORM CERTAIN VETERANS ABOUT PENSION BENEFITS.

(a) AUTHORITY TO MAKE GRANTS.—In addition to the outreach authority provided to the Secretary of Veterans Affairs by section 6303 of title 38, United States Code, the Secretary may carry out a pilot program to make grants to public and nonprofit organizations (including faith-based and community organizations) for services to provide outreach to inform low-income and elderly veterans and their spouses who reside in rural areas of benefits for which they may be eligible under chapter 15 of such title.

(b) CRITERIA FOR GRANTS.—The Secretary shall prescribe criteria and requirements for grants under this section and shall publish such criteria and requirements in the Federal Register.

(c) DURATION OF PILOT PROGRAM.—The authority of the Secretary to provide grants under a pilot program under this section shall cease on the date that is five years after the date of the commencement of the pilot program.

(d) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated from amounts made available under the heading ''General Operating Expenses'', not more than $1,275,000 in each of fiscal years 2010 through 2014 to carry out the purposes of this section.

SEC. 504. PILOT PROGRAM ON FINANCIAL SUPPORT OF ENTITIES THAT PROVIDE TRANSPORTATION ASSISTANCE, CHILD CARE ASSISTANCE, AND CLOTHING ASSISTANCE TO VETERANS ENTITLED TO A REHABILITATION PROGRAM.

(a) PILOT PROGRAM AUTHORIZED.—

(1) IN GENERAL.—Subject to the availability of appropriations authorized under subsection (g), the Secretary of Veterans Affairs may carry out a pilot program to assess the feasibility and advisability of providing financial assistance to eligible entities to establish new programs or activities, or expand or modify existing programs or activities, to provide to each eligible transitioning individual who is entitled and eligible for a rehabilitation program under chapter 31 of title 38, United States Code, the following assistance:

(A) Transportation assistance to facilitate such eligible transitioning individual's participation in such rehabilitation program or related activity. Such assistance may include—

(i) providing transportation;

(ii) paying for or reimbursing transportation costs; and

(iii) paying for or reimbursing other transportation-related expenses (including orientation on the use of transportation) .

(B) Child care assistance to facilitate such eligible transitioning individual's participation in such rehabilitation program or related activity. Such assistance may include—

(i) child care services; or

(ii) reimbursement of expenses related to child care.

(C) Clothing assistance, which may include personal services in selecting, and payment of a monetary allowance to cover the cost of purchasing, clothing and accessories suitable for a job interview or related activity consistent with such eligible transitioning individual's participation in such rehabilitation program or related activity.

(2) ELIGIBLE TRANSITIONING INDIVIDUAL.—For purposes of this section, an eligible transitioning individual is a person—

(A) described in section 3102 of title 38, United States Code; or

(B) who was separated or released from active duty in the Armed Forces on or after October 1, 2006, because of a service-connected disability.

(b) DURATION OF PROGRAM.—The authority of the Secretary to provide grants under a pilot program established under subsection (a)(1) shall cease on the date that is three years after the date of the commencement of the pilot program.

(c) GRANTS.—

(1) IN GENERAL.—The Secretary of Veterans Affairs shall carry out the pilot program through the award of grants to eligible entities to establish new programs or activities, or to expand or modify existing programs or activities, as described in subsection (a)(1).

(2) GRANT CRITERIA.—

(A) IN GENERAL.—The Secretary shall establish criteria and requirements for grants under the pilot program, including criteria for eligible entities to receive such grants. The criteria established under this subparagraph shall include the following:

(i) Specification as to the kinds of projects or activities for which grants are available.

(ii) Specification as to the number of projects or activities for which grants are available.

(iii) Provisions to ensure that grants awarded under the pilot program do not result in duplication of ongoing services.

(B) PUBLICATION OF CRITERIA IN FEDERAL REGISTER.—The Secretary shall publish the criteria and requirements established under subparagraph (A) in the Federal Register.

(3) FUNDING LIMITATION.—A grant under the pilot program may not be used to support the operational costs of an eligible entity.

(d) ELIGIBLE ENTITIES.—For purposes of this section, an eligible entity is a public or nonprofit organization (including a faith-based or community organization) that—

(1) has the capacity to administer effectively a grant under the pilot program, as determined by the Secretary of Veterans Affairs;

(2) demonstrates that adequate financial support will be available to establish new programs or activities, or to expand or modify existing programs or activities, as described in subsection (a)(1) consistent with the plans, specifications, and schedule submitted by the applicant to the Secretary under subsection (e)(2);

(3) agrees to meet the applicable criteria and requirements established under subsection (c)(2) and described in subsection (e)(2)(C); and

(4) has the capacity, as determined by the Secretary, to meet the criteria and requirements described in paragraph (3).

(e) SELECTION OF GRANT RECIPIENTS.—

(1) APPLICATION.—An eligible entity seeking a grant under the pilot program shall submit to the Secretary of Veterans Affairs an application therefor in such form and in such manner as the Secretary considers appropriate.

(2) ELEMENTS.—Each application submitted under paragraph (1) shall include the following:

(A) The amount of the grant sought for the project or activity.

(B) Plans, specifications, and the schedule for implementation of the project or activity in accordance with criteria and requirements prescribed by the Secretary under subsection (c)(2).

(C) An agreement—

(i) to provide the services for which the grant is sought at locations accessible to eligible transitioning individuals;

(ii) to ensure the confidentiality of records maintained on eligible transitioning individuals receiving services through the pilot program; and

(iii) to establish such procedures for fiscal control and fund accounting as may be necessary to ensure proper disbursement and accounting with respect to the grant and to such payments as may be made under this section.

(3) APPLICANT AGREEMENT.—The Secretary may not select an eligible entity for a grant under the pilot program unless the eligible entity agrees to the provisions listed in paragraph (2)(C).

(f) RECOVERY OF UNUSED GRANT AMOUNTS.—

(1) IN GENERAL.—The United States shall be entitled to recover from a grant recipient under this section the total of all unused grant amounts made under this section to such recipient in connection with such program if such grant recipient—

(A) does not establish a program or activity in accordance with this section; or

(B) ceases to furnish services under such a program for which the grant was made.

(2) OBLIGATION.—Any amount recovered by the United States under paragraph (1) may be obligated by the Secretary of Veterans Affairs without fiscal year limitation to carry out provisions of this section.

(3) LIMITATION ON RECOVERY.—An amount may not be recovered under paragraph (1)(A) as an unused grant amount before the end of the three-year period beginning on the date on which the grant is made.

(g) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated from amounts made available under the heading ''General Operating Expenses'', not more than $5,000,000 in each of fiscal years 2010 through 2012 to carry out this section.

SEC. 505. ASSESSMENT OF PILOT PROGRAMS.

(a) PROGRESS REPORTS.—Not less than one year before the expiration of the authority to carry out a pilot program authorized by sections 501 through 504, the Secretary of Veterans Affairs shall submit to Congress a progress report on such pilot program.

(b) CONTENTS.—Each progress report submitted for a pilot program under subsection (a) shall include the following:

(1) The lessons learned by the Secretary of Veterans Affairs with respect to such pilot program that can be applied to other programs with similar purposes.

(2) The recommendations of the Secretary on whether to continue such pilot program.

(3) The number of veterans and dependents served by such pilot program.

(4) An assessment of the quality of service provided to veterans and dependents under such pilot program.

(5) The amount of funds provided to grant recipients under such pilot program.

(6) The names of organizations that have received grants under such pilot program.

TITLE VI—NONPROFIT RESEARCH AND EDUCATION CORPORATIONS

SEC. 601. GENERAL AUTHORITIES ON ESTABLISHMENT OF CORPORATIONS.

(a) AUTHORIZATION OF MULTI-MEDICAL CENTER RESEARCH CORPORATIONS.—

(1) IN GENERAL.—Section 7361 is amended—

(A) by redesignating subsection (b) as subsection (e); and

(B) by inserting after subsection (a) the following new subsection (b):

''(b)(1) Subject to paragraph (2), a corporation established under this subchapter may facilitate the conduct of research, education, or both at more than one medical center. Such a corporation shall be known as a 'multi-medical center research corporation'.

''(2) The board of directors of a multi-medical center research corporation under this subsection shall include the official at each Department medical center concerned who is, or who carries out the responsibilities of, the medical center director of such center as specified in section 7363(a)(1)(A)(i) of this title.

''(3) In facilitating the conduct of research, education, or both at more than one Department medical center under this subchapter, a multi-medical center research corporation may administer receipts and expenditures relating to such research, education, or both, as applicable, performed at the Department medical centers concerned.''.

(2) EXPANSION OF EXISTING CORPORATIONS TO MULTI-MEDICAL CENTER RESEARCH CORPORATIONS.—Such section is further amended by adding at the end the following new subsection:

''(f) A corporation established under this subchapter may act as a multi-medical center research corporation under this subchapter in accordance with subsection (b) if—

''(1) the board of directors of the corporation approves a resolution permitting facilitation by the corporation of the conduct of research, education, or both at the other Department medical center or medical centers concerned; and

''(2) the Secretary approves the resolution of the corporation under paragraph (1).''.

(b) RESTATEMENT AND MODIFICATION OF AUTHORITIES ON APPLICABILITY OF STATE LAW.—

(1) IN GENERAL.—Section 7361, as amended by subsection (a) of this section, is further amended by inserting after subsection (b) the following new subsection (c):

''(c) Any corporation established under this subchapter shall be established in accordance with the nonprofit corporation laws of the State in which the applicable Department medical center is located and shall, to the extent not inconsistent with any Federal law, be subject to the laws of such State. In the case of any multi-medical center research corporation that facilitates the conduct of research, education, or both at Department medical centers located in different States, the corporation shall be established in accordance with the nonprofit corporation laws of the State in which one of such Department medical centers is located.''.

(2) CONFORMING AMENDMENT.—Section 7365 is repealed.

(c) CLARIFICATION OF STATUS OF CORPORATIONS.—Section 7361, as amended by this section, is further amended—

(1) in subsection (a), by striking the second sentence; and

(2) by inserting after subsection (c) the following new subsection (d):

''(d)(1) Except as otherwise provided in this subchapter or under regulations prescribed by the Secretary, any corporation established under this subchapter, and its officers, directors, and employees, shall be required to comply only with those Federal laws, regulations, and executive orders and directives that apply generally to private nonprofit corporations.

''(2) A corporation under this subchapter is not—

''(A) owned or controlled by the United States; or

''(B) an agency or instrumentality of the United States.''.

(d) REINSTATEMENT OF REQUIREMENT FOR 501(C)(3) STATUS OF CORPORATIONS.—Subsection (e) of section 7361, as redesignated by subsection (a)(1) of this section, is further amended by inserting ''section 501(c)(3) of'' after ''exempt from taxation under''.

SEC. 602. CLARIFICATION OF PURPOSES OF CORPORATIONS.

(a) CLARIFICATION OF PURPOSES.—Subsection (a) of section 7362 is amended—

(1) in the first sentence—

(A) by striking ''Any corporation'' and all that follows through ''facilitate'' and inserting ''A corporation established under this subchapter shall be established to provide a flexible funding mechanism for the conduct of approved research and education at one or more Department medical centers and to facilitate functions related to the conduct of''; and

(B) by inserting before the period at the end the following: ''or centers''; and

(2) in the second sentence, by inserting ''or centers'' after ''at the medical center''.

(b) MODIFICATION OF DEFINED TERM RELATING TO EDUCATION AND TRAINING.—Subsection (b) of such section is amended in the matter preceding paragraph (1) by striking ''the term 'education and training' '' and inserting ''the term 'education' includes education and training and''.

(c) REPEAL OF ROLE OF CORPORATIONS WITH RESPECT TO FELLOWSHIPS.—Paragraph (1) of subsection (b) of such section is amended by striking the flush matter following subparagraph (C).

(d) AVAILABILITY OF EDUCATION FOR FAMILIES OF VETERAN PATIENTS.—Paragraph (2) of subsection (b) of such section is amended by striking ''to patients and to the families'' and inserting ''and includes education and training for patients and families''.

SEC. 603. MODIFICATION OF REQUIREMENTS FOR BOARDS OF DIRECTORS OF CORPORATIONS.

(a) REQUIREMENTS FOR DEPARTMENT BOARD MEMBERS.—Paragraph (1) of section 7363(a) is amended to read as follows:

''(1) with respect to the Department medical center—

''(A)(i) the director (or directors of each Department medical center, in the case of a multi-medical center research corporation);

''(ii) the chief of staff; and

''(iii) as appropriate for the activities of such corporation, the associate chief of staff for research and the associate chief of staff for education; or

''(B) in the case of a Department medical center at which one or more of the positions referred to in subparagraph (A) do not exist, the official or officials who are responsible for carrying out the responsibilities of such position or positions at the Department medical center; and''.

(b) REQUIREMENTS FOR NON-DEPARTMENT BOARD MEMBERS.—Paragraph (2) of such section is amended—

(1) by inserting ''not less than two'' before ''members''; and

(2) by striking ''and who'' and all that follows through the period at the end and inserting ''and who have backgrounds, or business, legal, financial, medical, or scientific expertise, of benefit to the operations of the corporation.''.

(c) CONFLICTS OF INTEREST.—Subsection (c) of section 7363 is amended by striking '', employed by, or have any other financial relationship with'' and inserting ''or employed by''.

SEC. 604. CLARIFICATION OF POWERS OF CORPORATIONS.

(a) IN GENERAL.—Section 7364 is amended to read as follows:

''§ 7364. General powers

''(a) IN GENERAL.—(1) A corporation established under this subchapter may, solely to carry out the purposes of this subchapter—

''(A) accept, administer, retain, and spend funds derived from gifts, contributions, grants, fees, reimbursements, and bequests from individuals and public and private entities;

''(B) enter into contracts and agreements with individuals and public and private entities;

''(C) subject to paragraph (2), set fees for education and training facilitated under section 7362 of this title, and receive, retain, administer, and spend funds in furtherance of such education and training;

''(D) reimburse amounts to the applicable appropriation account of the Department for the Office of General Counsel for any expenses of that Office in providing legal services attributable to research and education agreements under this subchapter; and

''(E) employ such employees as the corporation considers necessary for such purposes and fix the compensation of such employees.

''(2) Fees charged under paragraph (1)(C) for education and training described in that paragraph to individuals who are officers or employees of the Department may not be paid for by any funds appropriated to the Department.

''(3) Amounts reimbursed to the Office of General Counsel under paragraph (1)(D) shall be available for use by the Office of the General Counsel only for staff and training, and related travel, for the provision of legal services described in that paragraph and shall remain available for such use without fiscal year limitation.

''(b) TRANSFER AND ADMINISTRATION OF FUNDS.—(1) Except as provided in paragraph (2), any funds received by the Secretary for the conduct of research or education at a Department medical center or centers, other than funds appropriated to the Department, may be transferred to and administered by a corporation established under this subchapter for such purposes.

''(2) A Department medical center may reimburse the corporation for all or a portion of the pay, benefits, or both of an employee of the corporation who is assigned to the Department medical center if the assignment is carried out pursuant to subchapter VI of chapter 33 of title 5.

''(3) A Department medical center may retain and use funds provided to it by a corporation established under this subchapter. Such funds shall be credited to the applicable appropriation account of the Department and shall be available, without fiscal year limitation, for the purposes of that account.

''(c) RESEARCH PROJECTS.—Except for reasonable and usual preliminary costs for project planning before its approval, a corporation established under this subchapter may not spend funds for a research project unless the project is approved in accordance with procedures prescribed by the Under Secretary for Health for research carried out with Department funds. Such procedures shall include a scientific review process.

''(d) EDUCATION ACTIVITIES.—Except for reasonable and usual preliminary costs for activity planning before its approval, a corporation established under this subchapter may not spend funds for an education activity unless the activity is approved in accordance with procedures prescribed by the Under Secretary for Health.

''(e) POLICIES AND PROCEDURES.—The Under Secretary for Health may prescribe policies and procedures to guide the spending of funds by corporations established under this subchapter that are consistent with the purpose of such corporations as flexible funding mechanisms and with Federal and State laws and regulations, and executive orders, circulars, and directives that apply generally to the receipt and expenditure of funds by nonprofit organizations exempt from taxation

under section 501(c)(3) of the Internal Revenue Code of 1986.''.

(b) CONFORMING AMENDMENT.—Section 7362(a), as amended by section 602(a)(1) of this Act, is further amended by striking the last sentence.

SEC. 605. REDESIGNATION OF SECTION 7364A OF TITLE 38, UNITED STATES CODE.

(a) REDESIGNATION.—Section 7364A is redesignated as section 7365.

(b) CLERICAL AMENDMENTS.—The table of sections at the beginning of chapter 73 is amended—

(1) by striking the item relating to section 7364A; and

(2) by striking the item relating to section 7365 and inserting the following new item:

''7365. Coverage of employees under certain Federal tort claims laws.''.

SEC. 606. IMPROVED ACCOUNTABILITY AND OVERSIGHT OF CORPORATIONS.

(a) ADDITIONAL INFORMATION IN ANNUAL REPORTS.—Subsection (b) of section 7366 is amended to read as follows:

''(b)(1) Each corporation shall submit to the Secretary each year a report providing a detailed statement of the operations, activities, and accomplishments of the corporation during that year.

''(2)(A) A corporation with revenues in excess of $300,000 for any year shall obtain an audit of the corporation for that year.

''(B) A corporation with annual revenues between $10,000 and $300,000 shall obtain an audit of the corporation at least once every three years.

''(C) Any audit under this paragraph shall be performed by an independent auditor.

''(3) The corporation shall include in each report to the Secretary under paragraph (1) the following:

''(A) The most recent audit of the corporation under paragraph (2).

''(B) The most recent Internal Revenue Service Form 990 'Return of Organization Exempt from Income Tax' or equivalent and the applicable schedules under such form.''.

(b) CONFIRMATION OF APPLICATION OF CONFLICT OF INTEREST REGULATIONS TO APPROPRIATE CORPORATION POSITIONS.—Subsection (c) of such section is amended—

(1) by striking ''laws and'' each place it appears;

(2) in paragraph (1)—

(A) by inserting ''each officer and'' after ''under this subchapter,''; and

(B) by striking '', and each employee of the Department'' and all that follows through ''during any year''; and

(3) in paragraph (2)—

(A) by inserting '', officer,'' after ''verifying that each director''; and

(B) by striking ''in the same manner'' and all that follows before the period at the end.

(c) ESTABLISHMENT OF APPROPRIATE PAYEE REPORTING THRESHOLD.—Subsection (d)(3)(C) of such section is amended by striking ''$35,000'' and inserting ''$50,000''.

TITLE VII—MISCELLANEOUS PROVISIONS

SEC. 701. EXPANSION OF AUTHORITY FOR DEPARTMENT OF VETERANS AFFAIRS POLICE OFFICERS.

Section 902 is amended—

(1) in subsection (a)—

(A) by amending paragraph (1) to read as follows:

''(1) Employees of the Department who are Department police officers shall, with respect to acts occurring on Department property—

''(A) enforce Federal laws;

''(B) enforce the rules prescribed under section 901 of this title;

''(C) enforce traffic and motor vehicle laws of a State or local government (by issuance of a citation for violation of such laws) within the jurisdiction of which such Department property is located as authorized by an express grant of authority under applicable State or local law;

''(D) carry the appropriate Department-issued weapons, including firearms, while off Department property in an official capacity or while in an official travel status;

''(E) conduct investigations, on and off Department property, of offenses that may have been committed on property under the original jurisdiction of Department, consistent with agreements or other consultation with affected local, State, or Federal law enforcement agencies; and

''(F) carry out, as needed and appropriate, the duties described in subparagraphs (A) through (E) of this paragraph when engaged in duties authorized by other Federal statutes.'';

(B) by striking paragraph (2) and redesignating paragraph (3) as paragraph (2); and

(C) in paragraph (2), as redesignated by subparagraph (B) of this paragraph, by inserting '', and on any arrest warrant issued by competent judicial authority'' before the period; and

(2) by amending subsection (c) to read as follows:

''(c) The powers granted to Department police officers designated under this section shall be exercised in accordance with guidelines approved by the Secretary and the Attorney General.''.

SEC. 702. UNIFORM ALLOWANCE FOR DEPARTMENT OF VETERANS AFFAIRS POLICE OFFICERS.

Section 903 is amended—

(1) by amending subsection (b) to read as follows:

''(b)(1) The amount of the allowance that the Secretary may pay under this section is the lesser of—

''(A) the amount currently allowed as prescribed by the Office of Personnel Management; or

''(B) estimated costs or actual costs as determined by periodic surveys conducted by the Department.

''(2) During any fiscal year no officer shall receive more for the purchase of a uniform described in subsection (a) than the amount established under this subsection.''; and

(2) by striking subsection (c) and inserting the following new subsection (c):

''(c) The allowance established under subsection (b) shall be paid at the beginning of a Department police officer's employment for those appointed on or after October 1, 2008. In the case of any other Department police officer, an allowance in the amount established under subsection (b) shall be paid upon the request of the officer.''.

By Mrs. LINCOLN (for herself, Ms. SNOWE, and Mr. ISAKSON):

S. 254. A bill to amend title XVIII of the Social Security Act to provide for the coverage of home infusion therapy under the Medicare Program; to the Committee on Finance.

Ms. SNOWE. Mr. President, today I am pleased to join my colleague, Senator LINCOLN of Arkansas, to introduce the Medicare Home Infusion Coverage Act. As we do so, we recognize that Medicare has serious fiscal challenges. Currently, the Part A, Hospital, Trust Fund faces insolvency in 2019, when expenditures will exceed projected contributions and require additional taxpayer support to maintain the care required by our seniors and so many disabled Americans. At the same time, today Medicare beneficiaries struggle under the burden of paying nearly half of their health care costs. So the legislation we are re-introducing is vital to addressing the fiscal issues affecting Medicare.

Many serious conditions—including some cancers and drug-resistant infections—require the use of infusion therapy. Such treatment involves the administration of medication directly into the bloodstream via a needle or catheter. Specialized equipment, supplies, and professional services—such as sterile drug compounding, care coordination, and patient education and monitoring—are components of such therapy. Infusion treatment is an extensive medical treatment often lasting for several hours per day over a 6-to-8 week period.

The unfortunate fact is that under current Medicare rules, patients requiring infusion therapy must either bear that cost themselves or endure costly and unnecessary hospitalization in order to receive coverage—raising costs for both beneficiaries and Medicare alike. Current Medicare regulations authorize payment for infusion drugs, but do not pay for the services, equipment, and supplies necessary to safely provide infusion therapy in the home. Not surprisingly, even though home infusion therapy may cost as little as $100 a day, too few seniors can bear that cost.

The result is that patients are excessively hospitalized, producing costs of treatment as much as 10–20 times higher than treatment in the home. The process may even place the patient's health in jeopardy because unnecessary hospitalization places individuals at risk of exposure to a health care-acquired infection—which may be drug resistant and life-threatening.

Private health plans have long understood that home infusion therapy is not only less costly, but safer as well. Thus, private insurance coverage for home infusion therapy is common. Private plans also recognize that patients benefit from avoiding hospitalization. At home they have a familiar, comfortable environment with their family conveniently at hand—no small concerns when fighting a serious illness.

It is clear we must change the status quo, and achieve safer, more cost-effective treatment. By extending coverage of infusion therapy to the home, we will correct this inappropriate and unnecessary gap in Medicare coverage and take a significant step in reducing Medicare costs. This legislation offers an alternative to allowing our Medicare beneficiaries to be overcome with health care costs that are rising faster than inflation by reforming care delivery to emphasize high quality, lower cost services.

I hope my colleagues will join us in support of this legislation so we may further the goals of improving patient safety and reducing our escalating health care costs.

Mr. President, I ask unanimous consent that the text of the bill to be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 254

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 ''Medicare Home Infusion Therapy Coverage Act of 2009''.

SEC. 2. MEDICARE COVERAGE OF HOME INFUSION THERAPY.

(a) IN GENERAL.—Section 1861 of the Social Security Act (42 U.S.C. 1395x), as amended by section 152(b) of the Medicare Improvements for Patients and Providers Act of 2008 (Public Law 110–275), is amended—

(1) in subsection (s)(2)—

(A) by striking ''and'' at the end of subparagraph (DD);

(B) by adding ''and'' at the end of subparagraph (EE); and

(C) by adding at the end the following new subparagraph:

''(FF) home infusion therapy (as defined in subsection (hhh)(1));''; and

(2) by adding at the end the following new subsection:

''Home Infusion Therapy

''(hhh)(1) The term 'home infusion therapy' means the following items and services furnished to an individual, who is under the care of a physician, which are provided by a qualified home infusion therapy provider under a plan (for furnishing such items and services to such individual) established and periodically reviewed by a physician, which items and services are provided in an integrated manner in the individual's home in conformance with uniform standards of care established by the Secretary (after taking into account the standards commonly used for home infusion therapy by Medicare Advantage plans and in the private sector and after consultation with all interested stakeholders) and in coordination with the provision of covered infusion drugs under part D:

''(A) Professional services other than nursing services provided in accordance with the plan (including administrative, compounding, dispensing, distribution, clinical monitoring and care coordination services) and all necessary supplies and equipment (including medical supplies such as sterile tubing and infusion pumps, and other items and services the Secretary determines appropriate) to administer infusion drug therapies to an individual safely and effectively in the home.

''(B) Nursing services provided in accordance with the plan, directly by a qualified home infusion therapy provider or under arrangements with an accredited homecare organization, in connection with such infusion, except that such term does not include nursing services to the extent they are covered as home health services.

''(2) For purposes of paragraph (1):

''(A) The term 'home' means a place of residence used as an individual's home and includes such other alternate settings as the Secretary determines.

''(B) The term 'qualified home infusion therapy provider' means any pharmacy, physician, or other provider licensed by the State in which the pharmacy, physician, or provider resides or provides services, whose State authorized scope of practice includes dispensing authority and that—

''(i) has expertise in the preparation of parenteral medications in compliance with enforceable standards of the U.S. Pharmacopoeia and other nationally recognized standards that regulate preparation of parenteral medications as determined by the Secretary and meets such standards;

''(ii) provides infusion therapy to patients with acute or chronic conditions requiring parenteral administration of drugs and biologicals administered through catheters or needles, or both, in a home; and

''(iii) meets such other uniform requirements as the Secretary determines are necessary to ensure the safe and effective provision and administration of home infusion therapy on a 7 day a week, 24 hour basis (taking into account the standards of care for home infusion therapy established by Medicare Advantage plans and in the private sector), and the efficient administration of the home infusion therapy benefit.

A qualified home infusion therapy provider may subcontract with a pharmacy, physician, provider, or supplier to meet the requirements of this subsection.''.

(b) PAYMENT FOR HOME INFUSION THERAPY.—Section 1834 of the Social Security Act (42 U.S.C. 1395m) is amended by adding at the end the following new subsection:

''(n) PAYMENT FOR HOME INFUSION THERAPY.—The payment amount under this part for home infusion therapy is determined as follows:

''(1) IN GENERAL.—The Secretary shall determine a per diem schedule for payment for the professional services, supplies, and equipment described in section 1861(hhh)(1)(A) that reflects the reasonable costs which must be incurred by efficiently and economically operated qualified home infusion therapy providers to provide such services, supplies, and equipment in conformity with applicable State and Federal laws, regulations, and the uniform quality and safety standards developed under section 1861(hhh)(1) and to assure that Medicare beneficiaries have reasonable access to such therapy. The Secretary shall update such schedule from year to year by the percentage increase in the consumer price index for all urban consumers (United States city average) for the 12-month period ending with June of the preceding year.

''(2) NURSING SERVICES.—The Secretary shall develop a methodology for the separate payment for nursing services described in section 1861(hhh)(1)(B) provided in accordance with the plan under such section which reflects the reasonable costs incurred in the provision of nursing services in connection with infusion therapy in conformity with State and Federal laws, regulations, and the uniform quality and safety standards developed pursuant to this Act and to assure that Medicare beneficiaries have reasonable access to nursing services for infusion therapy. The Secretary shall update such schedule from year to year by the percentage increase in the consumer price index for all urban consumers (United States city average) for the 12-month period ending with June of the preceding year.''.

(c) CONFORMING AMENDMENTS.—

(1) PAYMENT REFERENCE.—Section 1833(a)(1) of the Social Security Act (42 U.S.C. 13951(a)(1)), as amended by section 101(a)(2) of the Medicare Improvements for Patients and Providers Act of 2008 (Public Law 110–275), is amended—

(A) by striking ''and'' before ''(W)''; and

(B) by inserting before the semicolon at the end the following: '', and (X) with respect to home infusion therapy, the amounts paid shall be determined under section 1834(n)''.

(2) DIRECT PAYMENT.—The first sentence of section 1842(b)(6) of such Act (42 U.S.C. 1395u(b)(6)) is amended—

(A) by striking ''and'' before ''(H)''; and

(B) by inserting before the period at the end the following: '', and (I) in the case of home infusion therapy, payment shall be made to the qualified home infusion therapy provider''.

(3) EXCLUSION FROM DURABLE MEDICAL EQUIPMENT AND HOME HEALTH SERVICES.—Section 1861 of such Act (42 U.S.C. 1395x) is amended—

(A) in subsection (m)(5), by inserting ''and supplies used in the provision of home infusion therapy'' after ''excluding other drugs and biologicals''; and

(B) in subsection (n), by adding at the end the following: ''Such term does not include home infusion therapy, other than equipment and supplies used in the provision of insulin.''.

(4) APPLICATION OF ACCREDITATION PROVISIONS.—The provisions of section 1865(b) of the Social Security Act (42 U.S.C. 1395bb(b)) apply to the accreditation of qualified home infusion therapy providers in the manner they apply to other suppliers.

SEC. 3. MEDICARE COVERAGE OF HOME INFUSION DRUGS.

(a) IN GENERAL.—Section 1860D–2(e)(1) of the Social Security Act (42 U.S.C. 1395w–102(e)(1)), as amended by section 182 of the Medicare Improvements for Patients and Providers Act of 2008 (Public Law 110–275), is amended—

(1) in paragraph (1)—

(A) by striking ''or'' at the end of subparagraph (A);

(B) by striking the comma at the end of subparagraph (B) and inserting ''; or''; and

(C) by inserting before the flush matter following subparagraph (B) the following new subparagraph:

''(C) an infusion drug (as defined in paragraph (5)),''; and

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

''(5) INFUSION DRUG DEFINED.—For purposes of this part, the term 'infusion drug' means a parenteral drug or biological administered via an intravenous, intraspinal, intra-arterial, intrathecal, epidural, subcutaneous, or intramuscular access device inserted into the body, and includes a drug used for catheter maintenance and declotting, a drug contained in a device, vitamins, intravenous solutions, diluents and minerals, and other components used in the provision of home infusion therapy.''.

(b) INFUSION DRUG FORMULARIES.—For the first 2 years after the effective date of this Act, notwithstanding any other provision of law, prescription drug plans and MA–PD plans under title XVIII of the Social Security Act shall maintain open formularies for infusion drugs (as defined in section 1860D–2(e)(5) of such Act, as added by subsection (a)). The Secretary of Health and Human Services shall request the United States Pharmacopeia to develop, in consultation with representatives of qualified home infusion therapy providers and other interested stakeholders, a model formulary approach for home infusion drugs for use by such plans after such 2-year period.

(c) PART D DISPENSING FEES.—Section 1860D–2(d)(1)(B) of the Social Security Act (42 U.S.C. 1395w–102(d)(1)(B)) is amended by inserting after ''any dispensing fees for such drugs'' the following: '', other than for an infusion drug''.

SEC. 4. ENSURING BENEFICIARY ACCESS TO HOME INFUSION THERAPY.

(a) OBJECTIVES IN IMPLEMENTATION.—The Secretary of Health and Human Services shall implement the Medicare home infusion therapy benefit under the amendments made by this Act in a manner that ensures that Medicare beneficiaries have timely and appropriate access to infusion therapy in their homes and that there is rapid and seamless coordination between drug coverage under part D of title XVIII of the Social Security Act and coverage for home infusion therapy services under part B of such title. Specifically, the Secretary shall ensure that—

(1) the benefit is practical and workable with minimal administrative burden for beneficiaries, qualified home infusion therapy providers, physicians, prescription drug plans, MA–PD plans, and Medicare Advantage plans, and the Secretary shall consider the use of consolidated claims encompassing covered part D drugs and part B services, supplies, and equipment under such part B to ensure the efficient operation of this benefit;

(2) any prior authorization or utilization review process is expeditious, allowing Medicare beneficiaries meaningful access to home infusion therapy;

(3) medical necessity determinations for home infusion therapy will be made—

(A) except as provided in subparagraph (B), by medicare administrative contractors under such part B and communicated to the appropriate prescription drug plans; or

(B) in the case of an individual enrolled in a Medicare Advantage plan, by the Medicare Advantage organization offering the plan;

and an individual may be initially qualified for coverage for such benefit for a 90-day period and subsequent 90-day periods thereafter;

(4) the benefit is modeled on current private sector coverage and coding for home infusion therapy; and

(5) prescription drug plans and MA–PD plans structure their formularies, utilization review protocols, and policies in a manner that ensures that Medicare beneficiaries have timely and appropriate access to infusion therapy in their homes.

(b) HOME INFUSION THERAPY ADVISORY PANEL.—In implementing such home infusion therapy benefit and meeting the objectives specified in subsection (a), the Secretary shall establish an advisory panel to provide advice and recommendations. Such panel shall—

(1) be comprised primarily of qualified home infusion therapy providers and their representative organizations;

(2) also include representatives of the following:

(1) Patient organizations.

(2) Hospital discharge planners, care coordinators, or social workers.

(3) Prescription drug plan sponsors and Medicare Advantage organizations.

(c) REPORT.—Not later than January 1, 2012, and every 2 years thereafter, the Comptroller General of the United States shall submit a report to Congress on Medicare beneficiary access to home infusion therapy. Each such report shall specifically address whether the objectives specified in subsection (a) have been met and shall make recommendations to Congress and the Secretary on how to improve the benefit and better ensure that Medicare beneficiaries have timely and appropriate access to infusion therapy in their homes.

SEC. 5. EFFECTIVE DATE.

The amendments made by this Act shall apply to home infusion therapy furnished on or after January 1, 2010.

By Mrs. FEINSTEIN (for herself, Mr. KYL, Mr. REID, Mr. DURBIN, Mr. MCCONNELL, Mr. BINGAMAN, Mr. ENSIGN, Mr. SCHUMER, Mr. INHOFE, Mrs. MCCASKILL, Mr. KERRY, Mr. BAYH, Mr. ALEXANDER, Mr. GRASSLEY, Mr. NELSON of Florida, Mr. JOHNSON, and Ms. CANTWELL):

S. 256. A bill to enhance the ability to combat methamphetamine; to the Committee on the Judiciary.

Mrs. FEINSTEIN. Mr. President, I am pleased to introduce, along with Senators KYL, REID, DURBIN, MCCONNELL, BINGAMAN, ENSIGN, SCHUMER, INHOFE, MCCASKILL, KERRY, BAYH, ALEXANDER, GRASSLEY, NELSON of Florida, JOHNSON, and CANTWELL the Combat Methamphetamine Enhancement Act of 2009.

This Act is designed to address problems that the Drug Enforcement Administration, DEA, has identified in the implementation of the Combat Methamphetamine Epidemic Act of 2005. I was pleased to join former Senator Talent in drafting, introducing, and securing the passage of the original bill. I am pleased to introduce this legislation today to ensure that it operates as Congress intended.

The bill that I introduce today would clarify that all retailers, including mail order retailers, who sell products that contain chemicals often used to make methamphetamine—like ephedrine, pseudoepedrine and phenylpropanolamine—must self-certify that they have trained their personnel and will comply with the Combat Meth Act's requirements; require distributors to sell these products only to retailers who have certified that they will comply with the law; require the DEA to publish the list of all retailers who have filed self-certifications, on the DEA's website; and clarify that any retailer who negligently fails to file self-certification as required, may be subject to civil fines and penalties.

The Combat Methamphetamine Epidemic Act that we passed in 2006 has been a resounding success. The number of methamphetamine labs in the United States has declined dramatically now that the ingredients used to make methamphetamine are harder to get.

The Combat Meth Act that became effective in September 2006 included important new provisions for retailer self-certification, employee training, requiring products to be placed behind counters, packaging requirements, required sales logbooks, and limits on the amounts that a person can purchase in a given day and over a 30-day period.

Now, because of that law's implementation, the number of methamphetamine labs decreased from about 12,000 labs to about 7,300 labs a 41 percent decrease in just 1 year. Once the bill was enacted into law, the number of meth ''super labs'' in my home State of California declined from 30 in 2005 to only 17 in 2006.

Fewer meth labs means more than just less illegal drug production. According to the Fresno Bee, the DEA has noted that in 2003, 3,663 children were reported exposed to toxic meth labs nationwide but that number had been reduced to 319 in 2006.

So things are moving in the right direction, and that is good news. But with more thousands of methamphetamine labs still operating in the U.S., and children still being exposed to their toxins, it is also clear that there is still work to be done.

After the Combat Meth Act became law, DEA examined how the retailer self-certification process was working. On May 16, 2007, DEA sent letters to the 1,600 distributors who they believed were selling products that contained ephedrine or pseudoephedrine, asking them to turn over lists of the retail stores that they sell to, so that DEA could check to see how many of those retailers had self-certified as that law requires.

Rather than actively assisting the DEA in its efforts, about ¾ of the distributors failed or declined to provide any information about the retail stores.

The distributors who did cooperate provided DEA with the names of 12,375 retail customers. When DEA checked those out, it found that about 8,300 of those retail stores had never self-certified as the law requires.

Based on these findings, the DEA estimates that nationwide, as many as 30,000 additional retail sellers of products are not complying with the law.

In short, retailers' non-compliance with the self-certification requirement appears to be widespread, and undercuts the effectiveness of the Combat Meth Act.

Unfortunately, there is no effective way for law enforcement to determine the universe of who is, and who is not, obeying the law. Currently, there is no requirement that retailers notify the DEA before they start selling products with these listed chemicals.

Retailers can likely avoid negative consequences if they are ever confronted with their failure to self-certify. Currently, the law imposes sanctions only for willful and reckless refusals to self-certify. There is no punishment available if a retailer negligently fails to self-certify as required. Not even civil sanctions are available.

In short, without distributors restricting the supply of these products to retailers who have self-certified, retailers may simply take their chances, rather than self-certifying as the law intended, figuring that they'll never get caught, or if they do get caught, that they will never be punished.

It is unacceptable that, over two years after the Combat Meth Act imposed this requirement and became fully effective, tens of thousands of retailers still are not following the law. It is unacceptable that distributors of these products can continue to profit off of their sales to retailers who are not complying, or are even refusing to comply with the law.

So this bill is designed to make the Combat Meth Act more effective, by putting in place a process that will ensure that every retailer who orders these products that can be used to make methamphetamine must comply with the law before they can get and resell the products.

First, it will require that all retail sellers of products with these listed chemicals must file self-certifications, closing a loophole that now exists for mail-order retailers.

Second, the DEA will be required to post all self-certified retailers on its

website, so that advocacy groups and others who are concerned about methamphetamine in their communities can identify retailers who are selling these products without complying with the law, and can notify the authorities.

Third, distributors of these products will only be allowed to sell to retailers who have self-certified, which they will be able to verify by checking the DEA's public website. Once recalcitrant retailers are faced with the real and immediate economic consequence of a possible cut-off of their desire to purchase these products, I am confident that most will file self-certifications as the law requires.

Finally, the bill clarifies that even a negligent failure to self-certify, if proven, can give rise to civil sanctions.

This is a common-sense bill, designed to strengthen the implementation of the Combat Methamphetamine Epidemic Act. This bill would create incentives to ensure that the self-certification process of the law is made both effective and enforceable.

I urge my colleagues to support this legislation.

Mr. Presdient, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 256

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 ''Combat Methamphetamine Enhancement Act of 2009''.

SEC. 2. REQUIREMENT OF SELF-CERTIFICATION BY ALL REGULATED PERSONS SELLING SCHEDULED LISTED CHEMICALS.

Section 310(e)(2) of the Controlled Substances Act (21 U.S.C. 830(e)(2)) is amended by inserting at the end the following:

''(C) Each regulated person who makes a sale at retail of a scheduled listed chemical product and is required under subsection (b)(3) to submit a report of the sales transaction to the Attorney General may not sell any scheduled listed chemical product at retail unless such regulated person has submitted to the Attorney General a self-certification including a statement that the seller understands each of the requirements that apply under this paragraph and under subsection (d) and agrees to comply with the requirements. The Attorney General shall by regulation establish criteria for certifications of mail-order distributors that are consistent with the criteria established for the certifications of regulated sellers under paragraph (1)(B).''.

SEC. 3. PUBLICATION OF SELF-CERTIFIED REGULATED SELLERS AND REGULATED PERSONS LISTS.

Section 310(e)(1)(B) of the Controlled Substances Act (21 U.S.C. 830(e)(1)(B)) is amended by inserting at the end the following:

''(v) PUBLICATION OF LIST OF SELF-CERTIFIED PERSONS.—The Attorney General shall develop and make available a list of all persons who are currently self-certified in accordance with this section. This list shall be made publicly available on the website of the Drug Enforcement Administration in an electronically downloadable format.''.

SEC. 4. REQUIREMENT THAT DISTRIBUTORS OF LISTED CHEMICALS SELL ONLY TO SELF-CERTIFIED REGULATED SELLERS AND REGULATED PERSONS.

Section 402(a) of the Controlled Substances Act (21 U.S.C. 842(a)) is amended—

(1) in paragraph (13), by striking ''or'' after the semicolon;

(2) in paragraph (14), by striking the period and inserting ''; or'';

(3) by inserting after paragraph (14) the following:

''(15) to distribute a scheduled listed chemical product to a regulated seller, or to a regulated person referred to in section 310(b)(3)(B), unless such regulated seller or regulated person is, at the time of such distribution, currently registered with the Drug Enforcement Administration, or on the list of persons referred to under section 310(e)(1)(B)(v).''; and

(4) inserting at the end the following: ''For purposes of paragraph (15), if the distributor is temporarily unable to access the list of persons referred to under section 310(e)(1)(B)(v), the distributor may rely on a written, faxed, or electronic copy of a certificate of self-certification submitted by the regulated seller or regulated person, provided the distributor confirms within 7 business days of the distribution that such regulated seller or regulated person is on the list referred to under section 310(e)(1)(B)(v).''.

SEC. 5. NEGLIGENT FAILURE TO SELF-CERTIFY AS REQUIRED.

Section 402(a) of the Controlled Substances Act (21 U.S.C. 842(a)(10)) is amended by inserting before the semicolon the following: ''or negligently to fail to self-certify as required under section 310 (21 U.S.C. 830)''.

SEC. 6. EFFECTIVE DATE AND REGULATIONS.

(a) EFFECTIVE DATE.—This Act and the amendments made by this Act shall take effect 180 days after the date of enactment of this Act.

(b) REGULATIONS.—In promulgating the regulations authorized by section 2, the Attorney General may issue regulations on an interim basis as necessary to ensure the implementation of this Act by the effective date.

By Mrs. FEINSTEIN (for herself, Mr. GRASSLEY, and Mr. BAYH):

S. 258. A bill to amend the Controlled Substances Act to provide enhanced penalties for marketing controlled substances to minors; to the Committee on the Judiciary.

Mrs. FEINSTEIN. Mr. President, I am pleased to introduce, along with Senators GRASSLEY and BAYH, the Saving Kids from Dangerous Drugs Act of 2009.

Over the last 2 years, Federal, State, and local law enforcement have increasingly seen drug dealers flavoring and marketing their illegal drugs to appeal to minors, using techniques like combing drugs with candy and other flavorings to entice younger users. This bill would increase the criminal penalties that apply when criminals do this. This bill will ensure these appalling tactics are criminalized and severely punished.

The problem of flavoring illegal drugs to entice minors is well documented. A 2007 USA Today Article entitled ''Flavored Meth Use on the Rise'' stated that ''reports of candy-flavored methamphetamine are emerging around the nation, stirring concern among police and abuse prevention experts that drug dealers are marketing the drug to younger people.''

The flavoring of meth to appeal to minors is widespread across the Nation. In California, police have made repeated seizures of strawberry-flavored meth and local drug counselors warn that it also comes in cola, cherry, and orange flavors.

Strawberry flavoring packets were found in a meth lab raid in Arkansas in May of 2007. Similar seizures of flavored meth have been made in Minnesota, Mississippi, Missouri, Nevada, North Carolina, Oregon, and Virginia. Two people were arrested for manufacturing cotton candy flavored meth in Colorado in March of 2008.

The candying and flavoring of controlled substances is not limited to methamphetamine. As recently as March of this year, the DEA seized 1½ pounds of strawberry flavored powdered cocaine in Modesto, CA.

DEA agents in California have also purchased cocaine with lemon, coconut, and cinnamon flavoring. It has also documented other controlled substances like marijuana and hash oil infused into candy bars and soda pop.

Drug dealers are even selling boxes of ''Pot Tarts'' that look exactly like commercial available Pop Tarts.

Federal, State and local law enforcement all agree that such flavoring is done to entice more minors to use these illegal drugs.

This bill would help address this growing problem by criminalizing the flavoring, coloring and marketing of such drugs and would impose enhanced penalties for these offenses.

Under current law, there is already an enhanced penalty if someone distributes drugs to a minor. The maximum sentence is doubled, and tripled for a repeat offense, and there is a minimum of at least a year in prison. But this enhancement only applies if there is an actual distribution of the drug to a minor. Even possession with intent to distribute flavored or candied drugs doesn't qualify.

This bill would fix this loophole. If someone manufactures, creates, distributes, or possesses with intent to distribute a schedule I or II controlled substance that is combined with a candy, marketed or packaged to appear similar to a candy product, or modified by flavoring or coloring with the intent to sell to a minor, they would face enhanced penalties.

The bill sends a strong and clear message to drug dealers—if you flavor or candy up your drugs to make them more appealing to our children, there will be a very heavy price to pay. It will make drug dealers think twice before flavoring up their drugs, and punish them appropriately if they don't.

The bill is supported by the National Narcotics Officers Association Coalition, which is comprised of 44 State narcotics officers' associations.

I urge my colleagues to join me in supporting this bill.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 258

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 ''Saving Kids from Dangerous Drugs Act of 2009''.

SEC. 2. OFFENSES INVOLVING CONTROLLED SUBSTANCES MARKETED TO MINORS.

Section 401 of the Controlled Substances Act (21 U.S.C. 841) is amended by adding at the end the following:

''(h) OFFENSES INVOLVING CONTROLLED SUBSTANCES MARKETED TO MINORS.—

''(1) UNLAWFUL ACTS.—Except as authorized under this title, including paragraph (3), it shall be unlawful for any person at least 18 years of age to knowingly or intentionally manufacture, create, distribute, dispense, or possess with intent to manufacture, create, distribute, or dispense, a controlled substance listed in schedule I or II that is—

''(A) combined with a candy product;

''(B) marketed or packaged to appear similar to a candy product; or

''(C) modified by flavoring or coloring the controlled substance with the intent to distribute, dispense, or sell the controlled substance to a person under 21 years of age.

''(2) PENALTIES.—Except as provided in section 418, 419, or 420, any person who violates paragraph (1) of this subsection shall be subject to—

''(A) 2 times the maximum punishment and at least 2 times any term of supervised release authorized by subsection (b) of this section for a first offense involving the same controlled substance and schedule; and

''(B) 3 times the maximum punishment and at least 3 times any term of supervised release authorized by subsection (b) of this section for a second or subsequent offense involving the same controlled substance and schedule.

''(3) EXCEPTIONS.—Paragraph (1) shall not apply to any controlled substance that—

''(A) has been approved by the Secretary under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355), if the contents, marketing, and packaging of the controlled substance have not been altered from the form approved by the Secretary; or

''(B) has been altered at the direction of a practitioner who is acting for a legitimate medical purpose in the usual course of professional practice.''.

By Mr. DORGAN (for himself, Ms. MIKULSKI, Mr. FEINGOLD, Mr. DURBIN, Mr. JOHNSON, Mr. BROWN, Mr. LEAHY, Mr. HARKIN, Mr. KENNEDY, Mr. WHITEHOUSE, Mr. KOHL, Ms. STABENOW, and Mrs. FEINSTEIN):

S. 260. A bill to amend the Internal Revenue Code of 1986 to provide for the taxation of income of controlled foreign corporations attributable to imported property; to the Committee on Finance.

Mr. DORGAN. Mr. President, today I am introducing legislation with Senator MIKULSKI and 10 of our colleagues that I hope will be added to any economic stimulus package considered by Congress in the coming weeks. This bill will put the brakes on a tax break granted to U.S. companies that move U.S. jobs offshore.

The U.S. economy is facing its most serious financial challenge since the Great Depression, and we must respond aggressively. I think a new economic stimulus plan is urgently needed to help prevent the economy from sliding deeper into a long-term recession. I agree with those who say that a major goal of the stimulus package should be to create more jobs, but I think we also have an opportunity to make a change to ensure that we keep the jobs we already have.

Employers have been slashing jobs at an alarming rate—2.6 million jobs last year—to reduce operating costs. The manufacturing and construction sectors have been particularly hard hit during this downturn. The manufacturing sector laid off 791,000 workers in 2008, continuing the disturbing loss of more than 4 million U.S. manufacturing jobs since the end of 2000. Federal tax laws have contributed to this problem.

There is one thing that Congress can do immediately to stem the loss of more manufacturing jobs: repeal the perverse tax subsidy in the Federal Tax Code for U.S. companies that move manufacturing operations and American jobs overseas. Not only will this help keep good-paying manufacturing jobs here at home, it will save American taxpayers more than $15 billion in revenue over the next decade.

Unbelievably, there is an insidious tax subsidy that rewards U.S. firms that move their production overseas and then turn around and import those now foreign-made products back to the United States for sale. When a U.S. company closes down a U.S. manufacturing plant such as Huffy bicycles or Radio Flyer little red wagons, fires its American workers and moves those good-paying jobs to China or other locations abroad, U.S. tax law actually provide those companies with a large tax break called deferral—allowing them to avoid paying any U.S. income taxes on their foreign earnings until those profits are returned, if ever, to this country. If a company making the same product decides to stay in this country, on the other hand, it is required to pay immediate U.S. taxes on the profits it earns here.

Repealing this jobs export tax subsidy will not hinder the ability of U.S. firms to compete against foreign competitors in foreign markets, as some special interests have claimed. It is targeted only to U.S. firms that move production abroad and then turn around and ship those products back to this country for sale.

If there was ever a tax policy change that would help save U.S. manufacturing jobs and should be part of a robust economic stimulus plan, this is it. I urge my colleagues to cosponsor this legislation. With a new Congress and administration in place, now is the time to kill this ill-advised tax subsidy once and for all. I look forward to working with my colleagues on this important tax policy matter in the coming weeks.

By Ms. STABENOW:

S. 264. A bill to amend title XIX of the Social Security Act to encourage the use of certified health information technology by providers in the Medicaid program and the Children's Health Insurance Program, and for other purposes; to the Committee on Finance.

Ms. STABENOW. Mr. President, I rise today to introduce the E-Centives Act, which will help ensure safety-net providers serving our most vulnerable citizens can acquire Health Information Technology, HIT.

As I have spoken about many times, HIT promises to transform the delivery of health care in the United States, improving the overall efficiency and effectiveness of healthcare. Some specific quality improvements that result from HIT include reduction in errors that come from illegible handwriting; electronic systems that prompt prescription of generic rather than brand-name drugs; reduction in duplicate diagnostic tests; physician reminders regarding appropriate preventive care; clinical decision support systems that encourage use of evidence-based medicine; identification of drug interactions and patient allergies; and assistance to physicians to manage patients with complex, chronic conditions.

While HIT holds great promise for transforming health care, unfortunately not all providers have the financial means to adopt and use this technology. In fact, the cost of acquiring technology is a major barrier to adoption among health care providers. Cost is particularly burdensome to small practices and safety-net providers that often operate with low financial margins.

Several organizations, including the Kaiser Commission on Medicaid and the Uninsured and the Healthcare Information and Management Systems Society, recognize the essential role that the Federal Government must play to assist providers in the Medicaid and Children's Health Insurance Program, CHIP, to acquire HIT. But absent Federal funding, we could see a ''digital divide'' in health care.

The bill that I am introducing today will help accelerate investment in certified HIT by providers predominantly serving Medicaid and CHIP beneficiaries. The bill accomplishes this by providing authority to State Medicaid programs to reimburse providers at the enhanced SCHIP FMAP rate for the costs associated with the meaningful use of a certified electronic medical record. This bill also helps streamline the administration and enrollment process for the Medicaid program by modifying the current regulation that governs the Medicaid Management Information System to include funding for electronic information and eligibility systems, patient registries for disease screening, and office staff training on electronic information and eligibility systems.

I look forward to working with my colleagues to ensure that all health

care providers and all Americans can see the benefit of health information technology. Widespread diffusion of HIT is a critical step in health care reform and making sure every American has the most efficient, optimal quality care.

By Mrs. MURRAY (for herself and Ms. STABENOW):

S. 267. A bill to provide funding for summer and year-round youth jobs and training programs; to the Committee on Health, Education, Labor, and Pensions.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be placed in the RECORD, as follows:

S. 267

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 ''Summer and Year-Round Jobs for Youth Stimulus Act of 2009''.

SEC. 2. SUMMER AND YEAR-ROUND YOUTH JOBS.

(a) FINDINGS.—Congress finds that—

(1) a $1,000,000,000 investment in summer and year-round employment for youth, through the program supported under this section, can create up to 1,000,000 jobs for economically disadvantaged youth and stimulate local economies;

(2) there is a serious and growing need for employment opportunities for economically disadvantaged youth (including young adults), as demonstrated by statistics from the Bureau of Labor Statistics stating that, in December 2008—

(A) the unemployment rate increased to 7.2 percent, as compared to 4.9 percent in December 2007;

(B) the unemployment rate for 16- to 19-year-olds rose to 20.8 percent, as compared to 16.9 percent in December 2007; and

(C) the unemployment rate for African-American 16- to 19-year-olds increased to 33.7 percent, as compared to 28 percent in December 2007;

(3) research from Northwestern University has shown that every $1 a youth earns has an accelerator effect of $3 on the local economy;

(4) summer and year-round jobs for youth help supplement the income of families living in poverty;

(5) summer and year-round jobs for youth provide valuable work experience for economically disadvantaged youth;

(6) often, a summer job provided under the Workforce Investment Act of 1998 is an economically disadvantaged youth's introduction to the world of work;

(7) according to the Center for Labor Market Studies at Northeastern University, early work experience is a very powerful predictor of success and earnings in the labor market, and early work experience raises earnings over a lifetime by 10 to 20 percent;

(8) participation in a youth jobs program can contribute to a reduction in criminal and high-risk behavior for youth; and

(9)(A) youth jobs programs benefit both youth and communities when designed around principles that promote mutually beneficial programs;

(B) youth benefit from jobs that provide them with work readiness skills and that help them make the connection between responsibility on the job and success in adulthood; and

(C) communities benefit when youth are engaged productively, providing much-needed services that meet real community needs.

(b) DEFINITION.—In this section, the term ''green-collar industries'' means industries throughout the economy of the United States—

(1) that promote energy efficiency, energy conservation, and environmental protection, including promoting renewable energy and clean technology;

(2) that offer jobs with substantial pay and benefits; and

(3) that are industries in which there is likely to be continued demand for workers.

(c) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to the Secretary of Labor for youth activities under the Workforce Investment Act of 1998 (29 U.S.C. 2801 et seq.), $1,000,000,000, which shall be available for the period of January 1, 2009 through December 31, 2010, under the conditions described in subsection (d).

(d) CONDITIONS.—

(1) USE OF FUNDS.—The funds appropriated under subsection (c) shall be used for youth jobs and training programs, to provide opportunities referred to in subparagraphs (C), (D), (E), and (F) of section 129(c)(2) of such Act (29 U.S.C. 2854(c)(2)) and, as appropriate, opportunities referred to in subparagraphs (A) and (G) of such section, except that no such funds shall be spent on unpaid work experiences.

(2) LIMITATION.—Such funds shall be distributed in accordance with sections 127 and 128 of such Act (29 U.S.C. 2852, 2853), except that no portion of such funds shall be reserved to carry out 128(a) or 169 of such Act (29 U.S.C. 2853(a), 2914).

(3) PRIORITY.—In using funds made available under this section, a local area (as defined in section 101 of such Act (29 U.S.C. 2801)) shall give priority to providing—

(A) work experiences in public and nonprofit sector green-collar industries;

(B) work experiences in other viable industries, including health care; and

(C) job referral services for youth to work experiences in green-collar industries in the private sector or work experiences in other viable industries in the private sector, for which the employer involved agrees to pay the wages and benefits, consistent with Federal and State child labor laws.

(4) MEASURE OF EFFECTIVENESS.—The effectiveness of the activities carried out with such funds shall be measured, under section 136 of such Act (29 U.S.C. 2871), only with performance measures based on the core indicators of performance described in section 136(b)(2)(A)(ii)(I) of such Act (29 U.S.C. 2871(b)(2)(A)(ii)(I)), applied to all youth served through the activities.

(e) AGE-RELATED.—As used in this Act, and in the provisions referred to in subsections (c) and (d) for purposes of this Act—

(1) a reference to a youth refers to an individual who is not younger than age 14 and not older than age 24, and meets any other requirements for that type of youth; and

(2) a reference to a youth activity refers to an activity covered in subsection (d)(1) that is carried out for a youth described in paragraph (1).

By Mrs. MURRAY (for herself and Ms. STABENOW):

S. 268. A bill to provide funding for a Green Job Corps program, YouthBuild Build Green Grants, and Green-Collar Youth Opportunity Grants, and for other purposes; to the Committee on Health, Education, Labor and Pensions.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be placed in the RECORD, as follows:

S. 268

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 ''Green-Collar Youth Jobs, Education, and Training Stimulus Act''.

SEC. 2. FINDING.

Congress finds that there is a serious and growing need for employment opportunities for economically disadvantaged youth (including young adults), as demonstrated by statistics from the Bureau of Labor Statistics stating that, in December 2008—

(1) the unemployment rate increased to 7.2 percent, as compared to 4.9 percent in December 2007;

(2) the unemployment rate for 16- to 19-year-olds rose to 20.8 percent, as compared to 16.9 percent in December 2007; and

(3) the unemployment rate for African-American 16- to 19-year-olds increased to 33.7 percent, as compared to 28 percent in December 2007.

SEC. 3. PURPOSES.

The purposes of this Act are—

(1) to increase knowledge of the importance of building a green economy;

(2) to increase energy efficiency and renewable energy usage;

(3) to strengthen the protection of the environment;

(4) to decrease carbon emissions; and

(5) to increase the number of well-trained youth workers who can obtain well-paying jobs in a range of green-collar industries and other viable industries.

SEC. 4. DEFINITIONS.

In this Act:

(1) GREEN-COLLAR INDUSTRIES.—In this section, the term ''green-collar industries'' means industries throughout the economy of the United States—

(A) that promote energy efficiency, energy conservation, and environmental protection, including promoting renewable energy and clean technology;

(B) that offer jobs with substantial pay and benefits; and

(C) that are industries in which there is likely to be continued demand for workers.

(2) LOCAL BOARD, LOW-INCOME INDIVIDUAL, SECRETARY.—The terms ''local board'', ''low-income individual'', and ''Secretary'' have the meanings given the terms in section 101 of the Workforce Investment Act of 1998 (29 U.S.C. 2801).

(3) REGISTERED APPRENTICESHIP PROGRAM.—The term ''registered apprenticeship program'' means an industry skills training program at the postsecondary level that combines technical and theoretical training through structured on-the-job learning with related instruction (in a classroom or through distance learning) while an individual is employed, working under the direction of qualified personnel or a mentor, and earning incremental wage increases aligned to enhanced job proficiency, resulting in the acquisition of a nationally recognized and portable certificate, under a plan approved by the Office of Apprenticeship or a State agency recognized by the Department of Labor.

SEC. 5. GREEN JOB CORPS PROGRAM.

(a) PURPOSES.—The purposes of this section are—

(1) to encourage youth participating in the Job Corps to become informed energy- and environmentally-conscious consumers;

(2) to enable the youth to acquire and expand skills related to green-collar industries; and

(3) to address Job Corps construction needs and energy costs and to make Job Corps centers more energy efficient, including retrofitting facilities and restoring campuses.

(b) DEFINITIONS.—In this section, the terms ''enrollee'', ''graduate'', and ''Job Corps Center'' have the meanings given the terms in section 142 of the Workforce Investment Act of 1998 (29 U.S.C. 2882).

(c) GENERAL AUTHORITY.—The Secretary is authorized to reserve not more than $500,000,000 of the funds appropriated under this Act to provide work experiences and training described in subsection (d) in green-collar industries. The Secretary shall provide the work experiences and training, in conjunction with activities described in section 148 of the Workforce Investment Act of 1998 (29 U.S.C. 2888), under subtitle C of title I of such Act (29 U.S.C. 2881 et seq.) (except that subsections (c) and (d) of section 159 of such Act (29 U.S.C. 2899) shall not apply to such experiences and training).

(d) USE OF FUNDS.—

(1) SKILL DEVELOPMENT PROGRAM ACTIVITIES.—The Secretary shall expand Job Corps skill development program activities by updating occupational training programs (including making changes in curriculum and equipment), including development of necessary academic skills in green-collar industries (including construction, facilities maintenance, and advanced manufacturing).

(2) PAID WORK OPPORTUNITIES.—As part of Job Corps career training, the Secretary shall provide paid work opportunities, in green-collar industries, primarily located at Job Corps centers, in order to address Job Corps construction needs and make those centers more energy efficient, including retrofitting facilities and restoring campuses. In carrying out this paragraph, the Secretary shall give priority to projects that help conserve, develop, or manage public natural resources or public recreational areas, or support the public interest.

(3) CONSUMER AND LEADERSHIP ACTIVITIES.—As part of the Job Corps life skills program, the Secretary shall offer consumer and leadership activities, to create a corps of intelligent and informed energy- and environmentally-conscious consumers, including activities that educate Job Corps members about how they can contribute to minimize the effects of climate change and become future leaders in their local communities who preserve and strengthen energy- and environmentally-conscious practices.

(e) REPORT TO CONGRESS.—

(1) INDICATOR.—For purposes of the Green Job Corps program carried out under this section, the indicators of performance shall be—

(A) entry of graduates who participated in work experiences described in subsection (d)(2) into unsubsidized employment in a green-collar industry;

(B) average wages received by such graduates upon entry into such employment; and

(C) number of such graduates who obtain an occupational or education-related credential.

(2) ASSESSMENT.—The Secretary shall prepare an assessment of the Green Job Corps program that—

(A) describes the use of funds made available under this section to carry out the program and the progress achieved through that program; and

(B) provides information on the performance of the program on the indicators of performance.

(3) REPORT.—The Secretary shall include the assessment described in paragraph (2) in the corresponding annual report described in subsection (c) of section 159 of such Act (29 U.S.C. 2899), in lieu of submitting any of the information described in subsection (c) or (d) of that section 159 with respect to the Green Job Corps program.

SEC. 6. YOUTHBUILD BUILD GREEN GRANTS.

(a) GENERAL AUTHORITY.—The Secretary is authorized to reserve $300,000,000 of the funds appropriated under this Act to provide to eligible youth education, work experiences (including service), and training, in green-collar industries, especially concerning the weatherization and energy retrofitting of homes of low-income individuals. The Secretary shall provide the services described in this subsection in conjunction with activities described in section 173A(c) of the Workforce Investment Act of 1998 (29 U.S.C. 2918a(c)), under the YouthBuild program set forth in section 173A of such Act (29 U.S.C. 2918a) (except that paragraphs (3), (4), and (5) of subsection (c), and subsection (d), of such section shall not apply to such services).

(b) GRANTS.—The Secretary is authorized to award from the reserved funds, on a competitive basis, YouthBuild Build Green grants to entities that are recipients of YouthBuild grants under section 173A of such Act.

(c) APPLICATION.—To be eligible to receive a grant under this section, an entity shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require.

(d) PRIORITY.—In awarding grants under this section, the Secretary shall give priority to entities who—

(1) demonstrate the ability to leverage additional resources, which may include materials, personnel, and supplies, from other public and private sources; and

(2) demonstrate the ability to build a foundation of public-private partnerships in a green-collar industry, related to construction, for future projects carried out by the entities.

(e) ELIGIBLE YOUTH.—To be eligible to participate in the program carried out under this section, a youth shall meet the requirements of section 173A(e)(1) of the Workforce Investment Act of 1998 (29 U.S.C. 2918a(e)(1)).

(f) USE OF FUNDS.—

(1) SKILLS DEVELOPMENT AND TRAINING.—An entity that receives a grant under this section shall use not less than 90 percent of the funds made available through the grant to provide to participants in the program carried out under this section a combination of classroom education and job skills development, through onsite training and work experiences (including construction or rehabilitation of facilities) in a construction trade that makes efficient use of green technologies. Such education and skills development shall be designed to prepare the participants for jobs in green-collar industries in their communities and States.

(2) SUPERVISION AND TRAINING.—The entity may use not more than 10 percent of the grant funds for supervision and training costs related to the activities described in paragraph (1).

(g) REPORT TO CONGRESS.—

(1) INDICATORS.—For purposes of the program carried out under this section, the indicators of performance shall be—

(A) entry of individuals who completed their participation in the program and who participated in activities described in subsection (f)(1) into registered apprenticeship programs in a construction trade in a green-collar industry or a related trade; and

(B) entry of such individuals, who participated in such activities, into unsubsidized employment in a green-collar industry.

(2) ASSESSMENT.—The Secretary shall prepare an assessment of the program that—

(A) describes the use of funds made available under this section to carry out the program and the progress achieved through that program; and

(B) provides information on the performance of the program on the indicators of performance.

(3) REPORT.—The Secretary shall annually submit to Congress a report containing the assessment described in paragraph (2).

SEC. 7. GREEN-COLLAR YOUTH OPPORTUNITY GRANTS.

(a) DEFINITION.—The term ''community college'' means a 2-year institution of higher education, as defined in section 101 of the Higher Education Act of 1965 (20 U.S.C. 1001).

(b) GENERAL AUTHORITY.—The Secretary is authorized to reserve $200,000,000 of the funds appropriated under this Act for work experiences and training in green-collar industries for eligible youth. The Secretary shall provide the work experiences and training in conjunction with activities described in section 169(b) of the Workforce Investment Act of 1998 (29 U.S.C. 2914(b)), under the Youth Opportunity Grants program described in section 169 of that Act (29 U.S.C. 2914) (except that subsections (a)(3), (b)(2), (d), (e)(2), (f), and (g) of such section shall not apply to such work experiences and training).

(c) GRANTS.—The Secretary is authorized to award from the reserved funds, on a competitive basis, Green-Collar Youth Opportunity Grants to eligible organizations.

(d) ELIGIBLE ORGANIZATIONS.—

(1) IN GENERAL.—To be eligible to receive a grant under this section, an organization shall be a local board described in section 169(c) of the Workforce Investment Act of 1998 (29 U.S.C. 2914(c)) an entity described in section 169(d) of such Act (29 U.S.C. 2914(d)), or an entity acting of behalf of an eligible strategic partnership.

(2) ELIGIBLE STRATEGIC PARTNERSHIP.—

(A) IN GENERAL.—For purposes of this subsection, an eligible strategic partnership shall be composed of at least 1 representative of a local board serving a community, and of each of the 8 types of organizations described in subparagraph (B).

(B) TYPES OF ORGANIZATIONS.—The types of organizations referred to in subparagraph (A) are businesses, unions, labor-management partnerships, schools (including community colleges), public agencies including law enforcement, nonprofit community organizations, economic development entities, and philanthropic organizations, that are actively engaged in providing learning, mentoring, and work opportunities to eligible youth.

(3) FISCAL AND ADMINISTRATIVE AGENT.—The strategic partnership shall designate an entity, which shall be a member of the partnership, as the strategic partnership's fiscal and administrative entity for the implementation of activities under the grant.

(e) APPLICATION.—To be eligible to receive a grant under this section, an organization shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require.

(f) PRIORITY.—In making grants under this section, the Secretary shall give priority to organizations located in communities described in subsection (c) or (d)(2) of section 169 of the Workforce Investment Act of 1998 (29 U.S.C. 2914).

(g) ELIGIBLE YOUTH.—To be eligible to participate in a program carried out under this section, a youth shall—

(1) be not less than age 14 and not more than age 24;

(2) reside in a community described in subsection (c) or (d)(2) of section 169 of such Act; and

(3) have multiple barriers to education and career success, as specified by the Secretary.

(h) USE OF FUNDS.—An organization that receives a grant under this section may use the funds made available through the grant to provide programs of work experiences and training in green-collar industries that include education and paid work experiences. The work experiences shall involve retrofitting buildings (including facilities of small businesses) to achieve energy savings, or enhancing, creating, or preserving public space, within the communities served. In providing the programs, the organization may provide any of the activities described in subsection (b)(1) of that section 169.

(i) REPORT TO CONGRESS.—

(1) INDICATORS.—For purposes of the program carried out under this section, the indicators of performance shall be—

(A) acquisition of a high school diploma or its generally recognized equivalent by individuals who completed their participation in the program and who participated in training described in subsection (b);

(B) entry of such individuals, who participated in work experiences described in subsection (b), into postsecondary education linked to the green economy, including registered apprenticeship programs in a green-collar industry; and

(C) entry of such individuals, who participated in work experiences described in subsection (b), into unsubsidized employment in a green-collar industry.

(2) ASSESSMENT.—The Secretary shall prepare an assessment of the program that—

(A) describes the use of funds made available under this section to carry out the program and the progress achieved through that program; and

(B) provides information on the performance of the program, including on the indicators of performance.

(3) REPORT.—The Secretary shall annually submit to Congress a report containing the assessment described in paragraph (2).

SEC. 8. AUTHORIZATION OF APPROPRIATIONS.

There is authorized to be appropriated to the Secretary for activities described in this Act $1,000,000,000, which shall be available for the period of January 1, 2009 through December 31, 2010.

By Mrs. MURRAY (for herself, Mr. BROWN, and Ms. STABENOW):

S. 269. A bill to provide funding for unemployment and training activities for dislocated workers and adults, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be placed in the RECORD, as follows:

S. 269

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 ''Retooling America's Workers for a Green Economy Act''.

SEC. 2. FINDINGS.

Congress finds the following:

(1) In October 2008, the numbers of mass layoffs (involving over 50 workers at one time) and initial unemployment claims reached their highest levels since 2001. According to the National Renewable Energy Laboratory, however, a major barrier to more rapid adoption of clean and renewable energy and energy efficiency measures is the lack of sufficient workers skilled in green technology.

(2) In December 2008, unemployment figures showed a sharp deterioration in the economy. The unemployment rate rose from 6.8 percent in November, to 7.2 percent in December, of 2008. Employers shed 524,000 jobs in December 2008, and 1,900,000 jobs were lost over just the last 4 months of 2008. These job losses were widespread across most major industry sectors.

(3) According to the Bureau of Labor Statistics, 11,100,000 people were unemployed in December 2008, an increase of 3,600,000 people since the recession started in December 2007. In December 2008, the number of workers who wanted to work full-time but worked part-time because their hours were cut or they could not find full-time jobs reached 8,000,000, up 3,400,000 since December 2007.

(4) Analysts say that the Nation has yet to see the worst of the economic fallout. The latest prediction from HIS Global Insight forecasts that unemployment will be an estimated 8.6 percent by the end of 2009.

(5) The reality of climate change and a shared desire to protect the environment for future generations have the potential to spur economic growth in green-collar jobs across the industrial spectrum. In order to prepare United States workers to build greener communities in both urban and rural settings, the Nation will need to make an investment in skills development for jobs in the current and future economies.

SEC. 3. PURPOSE.

The purpose of this Act is to retool America's workers—including dislocated workers, those who are long-term unemployed individuals, and those who are low-skilled individuals, limited English proficient individuals, individuals with disabilities, or older workers—for green-collar industries, for existing viable industries, and for new and emerging industries so that the workers described in this section can contribute to the long-term competitiveness of the United States and its quality of life.

SEC. 4. DEFINITIONS.

In this Act:

(1) IN GENERAL.—The terms ''adult'', ''chief elected official'', ''dislocated worker'', ''employment and training activities'', ''individual with a disability'', ''local area'', ''local board'', ''outlying area'', ''rapid response activities'', ''Secretary'', ''State'', and ''State board'' have the meanings given the terms in section 101 of the Workforce Investment Act of 1998 (29 U.S.C. 2801).

(2) COMMUNITY COLLEGE.—The term ''community college'' means a 2-year institution of higher education, as defined in section 101 of the Higher Education Act of 1965 (20 U.S.C. 1001).

(3) GREEN-COLLAR INDUSTRIES.—The term ''green-collar industries'' means industries throughout the economy of the United States—

(A) that promote energy efficiency, energy conservation, and environmental protection, including promoting renewable energy and clean technology;

(B) that offer jobs with substantial pay and benefits; and

(C) that are industries in which there is likely to be continued demand for workers.

SEC. 5. ACTIVITIES FOR DISLOCATED WORKERS.

(a) GENERAL AUTHORITY.—The Secretary is authorized to reserve $2,000,000,000 of the funds appropriated under this Act for rapid response activities, for dislocated worker employment and training activities under chapter 5 of subtitle B of title I of the Workforce Investment Act of 1998 (29 U.S.C. 2861 et seq.), or for employment and training assistance and additional assistance under section 173(a) of such Act (29 U.S.C. 2918(a)).

(b) NATIONAL EMERGENCY GRANTS.—Of the reserved funds, the Secretary may use not more than $500,000,000 to award national emergency grants—

(1) to provide employment and training assistance to workers affected by major economic dislocations under section 173(a)(1) of such Act (29 U.S.C. 2918(a)(1)); and

(2) to provide additional assistance under section 173(a)(3) of such Act (29 U.S.C. 2918(a)(3)) to a State or local board that meets the requirements of that section (in a case in which the expended funds involved were expended for assistance described in paragraph (1)).

(c) STATE ACTIVITIES.—

(1) IN GENERAL.—After determining an amount from the reserved funds to be used under subsection (b), the Secretary may use the remaining funds to make allotments to States, and outlying areas, consistent with the allotment formula under section 132(b)(2) of such Act (29 U.S.C. 2862(b)(2)). Each State or outlying area may use 25 percent of the State's or outlying area's allotment for statewide rapid response activities for permanent closures or mass layoffs described in section 101(38) of such Act (42 U.S.C. 2801(38)) and efforts to avert future permanent closures or mass layoffs described in such section.

(2) USE OF DISLOCATED WORKERS TO PROVIDE ACTIVITIES.—In providing statewide rapid response activities, States or entities designated by States (and outlying areas or entities designated by outlying areas), working in conjunction with local boards and chief elected officials, may enhance their services by employing dislocated workers to provide outreach, informal coaching, counseling or mentoring support, and information to other dislocated workers or unemployed persons.

(d) LOCAL ACTIVITIES.—

(1) IN GENERAL.—Each State or outlying area shall use 75 percent of the State's or outlying area's allotment to make allocations directly to local boards, for local areas, using the formula under section 133(b)(2)(B) of such Act (29 U.S.C. 2863(b)(2)(B)).

(2) PRIORITY.—A local board that receives an allocation under paragraph (1) shall use the funds made available through the allocation for dislocated worker employment and training activities. In providing the activities the local board shall give priority to providing the employment and training activities, including on-the-job training, in viable industries identified at the regional or local levels, including green-collar industries.

(e) REPORT TO SECRETARY.—Each State, in submitting an annual report under section 136(d) of such Act (29 U.S.C. 2871(d)), shall include information on entry of individuals who participated in employment and training activities in green-collar industries and other viable industries under this section into unsubsidized employment in a green-collar industry or other viable industry.

(f) REPORT TO CONGRESS.—The Secretary shall annually prepare and submit to the appropriate committees of Congress information on entry of individuals who received services under subsection (b) into unsubsidized employment in a green-collar industry or other viable industry.

SEC. 6. ACTIVITIES FOR ADULTS WITH MULTIPLE BARRIERS TO EMPLOYMENT.

(a) PURPOSE.—The purpose of this section is to fully utilize the Nation's human capital by—

(1) helping adults with multiple barriers to employment acquire the skills to obtain jobs in viable industries, by providing intensive services, training services, and other employment and training activities; and

(2) in particular, by providing employment and training activities in green-collar industries and other viable industries.

(b) DEFINITION.—The term ''adult with multiple barriers to employment'' means an

adult who is long-term unemployed, a low-skilled individual, limited English proficient, an individual with a disability, or an older worker, with multiple barriers to finding a job in a viable industry.

(c) GENERAL AUTHORITY.—The Secretary is authorized to reserve $800,000,000 of the funds appropriated under this Act to carry out this section. The Secretary shall use the reserved funds to make allotments to States and outlying areas, consistent with the allotment formula under section 132(b)(1) of the Workforce Investment Act of 1998 (29 U.S.C. 2862(b)(1)) to provide employment and training activities to adults with multiple barriers to employment.

(d) STATE ACTIVITIES.—Each State or outlying area may use 10 percent of the State's or outlying area's allotment to assist local boards in providing employment and training activities to adults with multiple barriers to employment, and assist the adults in attaining jobs in viable industries, with as much flexibility as is practicable. In providing assistance under this subsection, the State or outlying area may provide aid that includes assistance with system alignment (described in subsection (e)(1)(D), the provision of capacity building and professional development activities for staff, and the provision of enhanced regional sector-based labor market information.

(e) LOCAL ACTIVITIES.—

(1) IN GENERAL.—Each State or outlying area shall use 90 percent of the State's or outlying area's allotment to make grants, on a competitive basis, to local boards for local areas, to provide employment and training activities to adults with multiple barriers to employment.

(2) PRIORITY.—In making the grants, the chief executive officer of the State or outlying area, in consultation with the State board involved, shall give priority to those local boards that—

(A) align their local areas to create regions that reflect natural labor markets or economic development districts;

(B) reflect regional strategic partnerships described in paragraph (3) among local boards, industry (including business and labor), schools (including community colleges), and other community organizations to provide coherent programs of employment and training activities;

(C) make special efforts to conduct outreach and provide services to adults with multiple barriers to employment who need to advance their careers or seek second careers due to the economic downturn;

(D) align adult education, career and technical education, workforce investment, economic development, and related systems and resources to provide career pathway strategies for helping low-skilled individuals navigate through the continuum of needed education and supports, to ultimately achieve a postsecondary education credential or an industry-recognized certificate and a job leading to economic self-sufficiency;

(E) provide an assurance that the local board will use at least 90 percent of the grant funds for intensive services described in section 134(d)(3)(C) and training services described in section 134(d)(4)(D) of such Act (29 U.S.C. 2864(d)(3)(C), 2864(d)(4)(D)), without regard to the eligibility requirements of section 134(d) of such Act (29 U.S.C. 2864(d)).

(3) STRATEGIC PARTNERSHIP.—

(A) IN GENERAL.—For purposes of this section, a strategic partnership shall, in particular, be composed of at least 1 representative of a local board serving a community, and of each of the 8 types of organizations described in subparagraph (B).

(B) TYPES OF ORGANIZATIONS.—The types of organizations referred to in subparagraph (A) are businesses, unions, labor-management partnerships, schools (including community colleges), public agencies, nonprofit community organizations, economic development entities, and philanthropic organizations, that are actively engaged in providing employment and training activities, including work opportunities and support, to adults with multiple barriers to employment.

(f) REPORT TO SECRETARY.—

(1) IN GENERAL.—Each State, in submitting an annual report under section 136(d) of such Act (29 U.S.C. 2871(d)), shall include information—

(A) on acquisition of a recognized postsecondary education credential or an industry-recognized certificate by adults with multiple barriers to employment who participated in employment and training activities under this section;

(B) on entry of such adults, who participated in such activities, into positions in unsubsidized employment in viable industries; and

(C) for adults referred to in subparagraph (B), on average wages in such positions.

(2) REFINEMENTS.—In establishing standards for the reports, the Secretary shall refine indicators to eliminate any unintended consequences for adults with multiple barriers to employment, or such adults who may need and seek less than full-time employment along a career path.

SEC. 7. ENERGY EFFICIENCY AND RENEWABLE ENERGY WORKER TRAINING PROGRAM.

The Secretary shall reserve $625,000,000 of the funds appropriated under this Act to carry out section 171(e) of the Workforce Investment Act of 1998 (29 U.S.C. 2916(e)).

SEC. 8. AUTHORIZATION OF APPROPRIATIONS.

There is authorized to be appropriated to the Secretary of Labor for activities described in this Act, $3,425,000,000, which shall be available for the period of January 1, 2009 through December 31, 2010.

By Mr. CASEY (for himself and Mr. NELSON, of Nebraska):

S. 270. A bill to provide for programs that reduce the need for abortion, help women bear healthy children, and support new parents; to the Committee on Health, Education, Labor, and Pensions.

Mr. CASEY. Mr. President, I rise today to speak about a member of the American family for whom we all care, but for whom we don't do nearly enough to support: pregnant women.

I remember the times my wife Terese learned she was pregnant, and even though I can never experience it directly, I know through her and my sisters that there is one indelible and unforgettable moment when a woman finds out she is pregnant. For many women, this is a moment of great joy, the miracle of pregnancy. Perhaps it has been long awaited or perhaps it is something of a surprise, but it is welcome. Many of these women don't need help beyond what their families provide and others may receive adequate support within our existing framework of programs and services.

But there is another circumstance that a pregnant woman may face. For that woman, the moment of discovery is not a moment of joy. For her, it is a moment of terror, or panic or even shame. She may be in a doctor's office or clinic or she may be at home. For her, that moment begins a crisis in which she feels overwhelmingly and perhaps almost unbearably alone. She could be wealthy, middle income or poor, but most likely poor. Whatever her income, she feels, very simply, all alone.

A pregnant woman may have an abusive spouse or boyfriend who is tormenting her. She is all alone.

Another pregnant woman may believe that she cannot support or care for a new baby at this point in her life. She is all alone.

Another woman might believe that her financial situation is so precarious that she cannot care for and raise a child. She may feel alone and helpless.

We know that 48 percent of all pregnancies are unintended and, excluding miscarriages, 54 percent of unintended pregnancies end in abortion. The response ''cannot afford a baby'' is the second most frequently cited reason why women choose to have an abortion and 73 percent of women having abortions cited this reason as a contributing factor.

A woman who is facing the challenges of an unplanned pregnancy that may be a crisis for her does not need a lecture from a politician or a clinical reminder that she has a simple choice to make. The choice is never simple. Never. This woman needs support and love and understanding. She needs to be embraced in her time of crisis, not sent on her way to deal with it on her own. She needs our help to walk with her, not only throughout the nine months of her pregnancy, but also for the early months and years of her child's life.

We in the Congress, in both the House and Senate and both parties, need to address this issue in a comprehensive way that meets these needs. Some members have initiated good efforts and we should applaud and support those efforts, but I believe that neither political party is doing enough for pregnant women in America today. While there is tremendous disagreement on how we can best do this, there is one significant area of common ground—one thing we all agree upon. We all want to reduce the number of abortions.

Many women who have abortions do so very reluctantly, and while ''choice'' is a term that is widely used in this debate, many women who face unplanned pregnancies do not feel they have a genuine choice. That is why I am introducing the Pregnant Women Support Act. With this bill, it is my fervent hope that a new dialogue—a common ground—will emerge on how we can reduce abortions by offering pregnant women real choices:

This bill will: assist pregnant and parenting teens to finish high school and prepare for college or vocational training; help pregnant college students stay in school, offering them counseling as well as assistance with continuing their education, parenting support and classes, and child care assistance.

It will provide counseling and shelter to pregnant women in abusive relationships who may be fearful of continuing a (pregnancy in a crisis situation; establish a national toll-free number and public awareness campaign to offer women support and knowledge about options and resources available to them when they face an unplanned pregnancy; give women free sonogram examinations by providing grants for the purchase of ultrasound equipment; provide parents with information about genetic disability testing, including support for parents who receive a diagnosis of Down Syndrome; ensure that pregnant women receive prenatal and postnatal care by eliminating pregnancy as a pre-existing condition in the individual healthcare market and also eliminating waiting periods for women with prior coverage; increase funding for nurse home visitation for pregnant and first time mothers. One example of this is the Nurse-Family Partnership, an evidence-based program and national model in which nurses mentor young first-time and primarily low-income mothers, establishing a supportive relationship with both mother and child.

Studies have shown this program to be both cost effective and hugely successful in terms of life outcomes for both mothers and children; increase funding for the Women, Infants and Children Program, providing nutrition assessment, counseling and education, obesity prevention, breastfeeding support, prenatal and pediatric health care referrals, immunization screening and referral, and a host of other services for mothers and children; expand nutritional support for low-income parents by increasing the income eligibility level for food stamps; increase funding for the Child Care and Development Block Grant, the primary source of federal funding for child care assistance for low-income parents.

I introduce this bill with the deepest conviction that we can find common ground. I believe that we can transform this debate by focusing upon the issues that unite us, not the issues that divide us. It's well known where I stand on these issues. I am a pro-life Democrat. I believe that life begins at conception and ends when we draw our last breath. I believe that the role of government is to protect, enrich, and value life for everyone, at every moment, from beginning to end. And I believe that we as a nation have to do more to support women and their children when they are most vulnerable—during pregnancy and early childhood.

I support family planning programs because they avoid what can be a dark moment, when a woman, often alone, faces a pregnancy she feels she can't handle. I support family planning programs precisely because they reduce abortions. But that is not the issue I address today. Today, with this bill, I am focused on the woman who is pregnant and I am asking a question we should all be asking: ''What more can I do?'' ''What more can we do for pregnant women who need our help?''

I believe there is more common ground in America than we might realize—if only we focus on how we can truly help and support women who wish to carry their pregnancies to term and how we can give them and their babies what they really need to begin healthy and productive lives together.

For the past 35 years, the abortion issue has been used mostly as a way to divide people, even as the number of abortions remains unacceptably high. We have to find a better way. I believe the Pregnant Women Support Act is part of that better way. We must work toward real solutions to the issue of abortion by targeting the underlying factors that often lead women to have abortions. This is precisely what the Pregnant Women Support Act will do.

We need to walk in solidarity with pregnant women who face unplanned pregnancies and who need our support and help, not our judgment. That is exactly what this bill does for that woman who finds herself alone as she faces what may be the most difficult experience of her entire life: the woman who has no one to turn to for advice, for counsel, for support. I truly believe there are few things more terrifying than the prospect of supporting another human being when you have no support of your own.

Reducing the number of abortions should not be a partisan issue. It should not pit Democrats against Republicans. I seek. common ground. I ask my colleagues on both sides of the aisle to join me in seeking real solutions that will unite us in providing life with dignity, before and after birth, for pregnant women, mothers and children. Surely we must all agree that no woman should ever have to face the crisis of an unplanned pregnancy alone.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

S. 270

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 ''Pregnant Women Support Act''.

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

SEC. 2. FINDINGS.

The Congress finds as follows:

(1) In 2004, 839,226 abortions were reported to the Centers for Disease Control and Prevention.

(2) 48 percent of all pregnancies in America are unintended. Excluding miscarriages, 54 percent of unintended pregnancies end in abortion.

(3) 57 percent of women who have abortions have incomes below 200 percent of the poverty level.

(4) ''Cannot afford a baby'' is the second most frequently cited reason women choose

to have an abortion; 73 percent of women having abortions cited this reason as a contributing factor.

(5) This Act is an initiative to gather more complete information about abortion, to reduce the abortion rate by helping women carry their pregnancies to term and bear healthy children, and by affirming the right of women to be fully informed about their other options when they seek an abortion.

(6) The initiative will work to support women facing unplanned pregnancies, new parents and their children by providing comprehensive measures for health care needs, supportive services and helpful prenatal information and postnatal services.

SEC. 3. DEFINITIONS.

For purposes of this Act:

(1) The term ''Secretary'' means the Secretary of Health and Human Services.

(2) The term ''State'' includes the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, American Samoa, Guam, the Virgin Islands, and any other territory or possession of the United States.

TITLE I—PUBLIC AWARENESS AND ASSISTANCE FOR PREGNANT WOMEN AND NEW PARENTS

SEC. 101. GRANTS FOR INCREASING PUBLIC AWARENESS OF RESOURCES AVAILABLE TO ASSIST PREGNANT WOMEN IN CARRYING THEIR PREGNANCIES TO TERM AND TO ASSIST NEW PARENTS.

(a) GRANTS.—The Secretary may make grants to States to increase public awareness of resources available to pregnant women to carry their pregnancy to term and to new parents.

(b) USE OF FUNDS.—The Secretary may make a grant to a State under this section only if the State agrees to use the grant for the following:

(1) Identification of resources available to assist pregnant women to carry their pregnancy to term or to assist new parents, or both.

(2) Conducting an advertising campaign to increase public awareness of such resources.

(3) Establishing and maintaining a toll-free telephone line to direct people to—

(A) organizations that provide support services for pregnant women to carry their pregnancy to term;

(B) adoption centers; and

(C) organizations that provide support services to new parents.

(c) PROHIBITION.—The Secretary shall prohibit each State receiving a grant under this section from using the grant to direct people to an organization or adoption center that is for-profit.

(d) IDENTIFICATION OF RESOURCES.—The Secretary shall require each State receiving a grant under this section to make publicly available by means of the Internet (electronic and paper form) a list of the following:

(1) The resources identified pursuant to subsection (b)(1).

(2) The organizations and adoption centers to which people are directed pursuant to an advertising campaign or telephone line funded under this section.

(e) AUTHORIZATION OF APPROPRIATIONS.—The Secretary shall make such funds available as may be necessary to carry out the activities of this section.

TITLE II—INCREASING WOMEN'S KNOWLEDGE ABOUT THEIR PREGNANCY

SEC. 201. GRANTS TO HEALTH CENTERS FOR PURCHASE OF ULTRASOUND EQUIPMENT.

Part B of title III of the Public Health Service Act (42 U.S.C. 243 et seq.) is amended by inserting after section 317L the following:

''SEC. 317L–1. GRANTS FOR THE PURCHASE OR UPGRADE OF ULTRASOUND EQUIPMENT.

''(a) IN GENERAL.—The Secretary may make grants for the purchase of ultrasound equipment. Such ultrasound equipment shall be used by the recipients of such grants to provide, under the direction and supervision of a licensed medical physician, ultrasound examinations to pregnant women consenting to such services.

''(b) ELIGIBILITY REQUIREMENTS.—An entity may receive a grant under subsection (a) only if the entity meets the following conditions:

''(1) The entity is a health center eligible to receive a grant under section 330 (relating to community health centers, migrant health centers, homeless health centers, and public-housing health centers).

''(2) The entity agrees to comply with the following medical procedures:

''(A) The entity will inform each pregnant woman upon whom the ultrasound equipment is used that she has the right to view the visual image of the unborn child from the ultrasound examination and that she has the right to hear a general anatomical and physiological description of the characteristics of the unborn child.

''(B) The entity will inform each pregnant woman that she has the right to learn, according to the best medical judgment of the physician performing the ultrasound examination or the physician's agent performing such exam, the approximate age of the embryo or unborn child considering the number of weeks elapsed from the probable time of the conception of the embryo or unborn child, based upon the information provided by the client as to the time of her last menstrual period, her medical history, a physical examination, or appropriate laboratory tests.

''(c) APPLICATION FOR GRANT.—A grant may be made under subsection (a) only if an application for the grant is submitted to the Secretary and the application is in such form, is made in such manner, and contains such agreements, assurances, and information as the Secretary determines to be necessary to carry out this section.

''(d) ANNUAL REPORT TO SECRETARY.—A grant may be made under subsection (a) only if the applicant for the grant agrees to report on an annual basis to the Secretary, in such form and manner as the Secretary may require, on the ongoing compliance of the applicant with the eligibility conditions established in subsection (b).

''(e) AUTHORIZATION OF APPROPRIATIONS.—For the purpose of carrying out this section, there are authorized to be appropriated $3,000,000 for fiscal year 2010, and such sums as may be necessary for each of the fiscal years 2011 through 2014.''.

TITLE III—PREGNANCY AS A PREEXISTING CONDITION

SEC. 301. INDIVIDUAL HEALTH INSURANCE COVERAGE FOR PREGNANT WOMEN.

(a) LIMITATION ON IMPOSITION OF PRE-EXISTING CONDITION EXCLUSIONS AND WAITING PERIODS FOR WOMEN WITH PRIOR COVERAGE.—Title XXVII of the Public Health Service Act (42 U.S.C. 300gg et seq.) is amended by inserting after section 2753 the following new section:

''SEC. 2754. PROVIDING INDIVIDUAL HEALTH INSURANCE COVERAGE WITHOUT REGARD TO PREEXISTING CONDITION EXCLUSION AND WAITING PERIODS FOR PREGNANT WOMEN WITHIN ONE YEAR OF CONTINUOUS PRIOR COVERAGE.

''In the case of a woman who has had at least 12 months of creditable coverage before seeking individual health insurance coverage, such individual health insurance coverage, and the health insurance issuer offering such coverage, may not impose any preexisting condition exclusion relating to pregnancy as a preexisting condition, any waiting period, or otherwise discriminate in coverage or premiums against the woman on the basis that she is pregnant.''.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect on October 1, 2009, and shall apply to women who become pregnant on or after such date.

SEC. 302. CONTINUATION OF HEALTH INSURANCE COVERAGE FOR NEWBORNS.

(a) GROUP HEALTH PLAN COVERAGE.—Title XXVII of the Public Health Service Act (42 U.S.C. 300gg et seq.) is amended by inserting after section 2707 the following new section:

''SEC. 2708. CONTINUATION OF COVERAGE FOR NEWBORNS.

''(a) NOTIFICATION.—In the case of a pregnant woman who is covered under a group health plan, or under group health insurance coverage, for other than family coverage, the plan or issuer of the insurance shall provide notice to the woman during the 5th month of pregnancy, during the 8th month of pregnancy, and within 2 weeks after delivery, of the woman's option to provide continuing coverage of the newborn child under the group health plan or health insurance coverage under subsection (b).

''(b) OPTION OF CONTINUED COVERAGE FOR NEWBORNS.—In the case of a pregnant woman described in subsection (a) who has a newborn child under a group health plan or under group health insurance coverage, the plan or issuer offering the coverage shall provide the woman with the option of electing coverage of the newborn child at least through the end of the 30-day period beginning on the date of birth of the child and no waiting period or preexisting condition exclusion shall apply with respect to the coverage of such a newborn child under such plan or coverage. Such continuation coverage shall remain in effect, subject to payment of applicable premiums, for at least such period as the Secretary specifies.''.

(b) INDIVIDUAL HEALTH INSURANCE COVERAGE.—Such title is further amended by inserting after section 2754, as added by section 301, the following new section:

''SEC. 2755. CONTINUATION OF COVERAGE FOR NEWBORNS.

''The provisions of section 2708 shall apply with respect to individual health insurance coverage and the issuer of such coverage in the same manner as they apply to group health insurance coverage and the issuer of such coverage.''.

(c) EFFECTIVE DATE.—The amendments made by this section shall take effect on January 1, 2010, and shall apply to women who become pregnant on or after such date and children who are born of such women.

TITLE IV—MEDICAID AND SCHIP COVERAGE OF PREGNANT WOMEN AND UNBORN CHILDREN

SEC. 401. TREATMENT OF UNBORN CHILDREN.

(a) CODIFICATION OF CURRENT REGULATIONS.—Section 2110(c)(1) (42 U.S.C. 1397(c)(1)) is amended by striking the period at the end and inserting the following: '', and includes, at the option of a State, an unborn child.''.

(b) CLARIFICATIONS REGARDING COVERAGE OF MOTHERS.—Section 2103 (42 U.S.C. 1397cc) is amended by adding at the end the following new subsection:

''(g) CLARIFICATIONS REGARDING AUTHORITY TO PROVIDE POSTPARTUM SERVICES AND MATERNAL HEALTH CARE.—Any State that provides child health assistance to an unborn child under the option described in section 2110(c)(1) may—

''(1) continue to provide such assistance to the mother, as well as postpartum services, through the end of the month in which the

60-day period (beginning on the last day of pregnancy) ends; and

''(2) in the interest of the child to be born, have flexibility in defining and providing services to benefit either the mother or unborn child consistent with the health of both.''.

SEC. 402. COORDINATION WITH THE MATERNAL AND CHILD HEALTH PROGRAM.

(a) IN GENERAL.—Section 2102(b)(3) of the Social Security Act (42 U.S.C. 1397bb(b)(3)) is amended—

(1) in subparagraph (D), by striking ''and'' at the end;

(2) in subparagraph (E), by striking the period and inserting ''; and''; and

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

''(F) that operations and activities under this title are developed and implemented in consultation and coordination with the program operated by the State under title V in areas including outreach and enrollment, benefits and services, service delivery standards, public health and social service agency relationships, and quality assurance and data reporting.''.

(b) CONFORMING MEDICAID AMENDMENT.—Section 1902(a)(11) of such Act (42 U.S.C. 1396a(a)(11)) is amended—

(1) by striking ''and'' before ''(C)''; and

(2) by inserting before the semicolon at the end the following: '', and (D) provide that operations and activities under this title are developed and implemented in consultation and coordination with the program operated by the State under title V in areas including outreach and enrollment, benefits and services, service delivery standards, public health and social service agency relationships, and quality assurance and data reporting''.

(c) EFFECTIVE DATE.—The amendments made by this section take effect on October 1, 2009.

TITLE V—DISCLOSURE OF INFORMATION ON ABORTION SERVICES

SEC. 501. DISCLOSURE OF INFORMATION ON ABORTION SERVICES.

(a) IN GENERAL.—Health facilities that perform abortions in or affecting interstate commerce shall obtain informed consent from the pregnant woman seeking to have the abortion. Informed consent shall exist only after a woman has voluntarily completed or opted not to complete pre-abortion counseling sessions.

(b) ACCURATE INFORMATION.—Counseling sessions under subsection (a) shall include the following information:

(1) The probable gestational age and characteristics of the unborn child at the time the abortion will be performed.

(2) How the abortion procedure is performed.

(3) Possible short-term and long-term risks and complications of the procedure to be performed.

(4) Options or alternatives to abortion, including, but not limited to, adoption, and the resources available in the community to assist women choosing these options.

(5) The availability of post-procedure medical services to address the risks and complications of the procedure.

(c) EXCEPTION.—This section shall not apply when the pregnant woman is herself incapable, under State law, of making medical decisions. This section does not affect or modify any requirement under State law for making medical decisions for such patients.

(d) CIVIL REMEDIES.—

(1) CIVIL ACTION.—Any female upon whom an abortion has been performed or attempted without complying with the informed consent requirements may bring a civil action in an appropriate district court of the United States against the person who performed the abortion in knowing or reckless violation of this section for actual and punitive damages.

(2) CERTAIN AUTHORITIES AND REQUIREMENTS.—With respect to an action under paragraph (1):

(A) The court may award attorney's fees to the plaintiff if judgment is rendered in favor of the plaintiff, and may award attorney's fees to the defendant if judgment is rendered in favor of the defendant and the court finds that the plaintiff's case was frivolous and brought in bad faith.

(B) The court shall determine whether the anonymity of the female involved will be preserved from public disclosure if the female has not consented to her identity being disclosed. If the female's identity is to be shielded, the court shall issue an order sealing the record and excluding individuals from the courtroom to preserve her identity.

(C) In the absence of the female's written consent, anyone other than a public official who brings the action shall do so under a pseudonym.

(3) RULE OF CONSTRUCTION.—Nothing in this subsection may be construed to conceal the identity of the plaintiff or of the witnesses from the defendant.

(e) SEVERABILITY.—If any provision of this section requiring informed consent for abortions is found unconstitutional, the unconstitutional provision is severable and the other provisions of this section remain in effect.

(f) PREEMPTION.—Nothing in this section shall prevent a State from enacting and enforcing additional requirements with respect to informed consent.

TITLE VI—SERVICES TO PATIENTS RECEIVING POSITIVE TEST DIAGNOSIS OF DOWN SYNDROME OR OTHER PRENATALLY DIAGNOSED CONDITIONS

SEC. 601. SERVICES TO PATIENTS RECEIVING POSITIVE TEST DIAGNOSIS FOR DOWN SYNDROME OR OTHER PRENATALLY DIAGNOSED CONDITIONS.

(a) FINDINGS AND PURPOSES.—

(1) FINDINGS.—The Congress finds as follows:

(A) Pregnant women who choose to undergo prenatal genetic testing should have access to timely, scientific, and nondirective counseling about the conditions being tested for and the accuracy of such tests, from health care professionals qualified to provide and interpret these tests. Informed consent is a critical component of all genetic testing.

(B) A recent, peer-reviewed study and two reports from the Centers for Disease Control and Prevention on prenatal testing found a deficiency in the data needed to understand the epidemiology of prenatally diagnosed conditions, to monitor trends accurately, and to increase the effectiveness of health intervention.

(2) PURPOSES.—It is the purpose of this section, after the diagnosis of an unborn child with Down syndrome or other prenatally diagnosed conditions, to—

(A) increase patient referrals to providers of key support services to assist parents in the care, or placement for adoption, of a child with Down syndrome, or other prenatally diagnosed conditions, as well as to provide up-to-date, science-based information about life-expectancy and development potential for a child born with Down syndrome or other prenatally diagnosed condition;

(B) provide networks of support services described in subparagraph (A) through a Centers for Disease Control and Prevention patient and provider outreach program;

(C) improve available data by incorporating information directly revealed by prenatal testing into existing State-based surveillance programs for birth defects and prenatally diagnosed conditions; and

(D) ensure that patients receive up-to-date, scientific information about the accuracy of the test.

(b) AMENDMENT TO THE PUBLIC HEALTH SERVICE ACT.—Part P of title III of the Public Health Service Act (42 U.S.C. 280g et seq.) is amended by adding at the end the following:

''SEC. 399U. SUPPORT FOR PATIENTS RECEIVING A POSITIVE TEST DIAGNOSIS OF DOWN SYNDROME OR OTHER PRENATALLY DIAGNOSED CONDITIONS.

''(a) DEFINITIONS.—In this section:

''(1) DOWN SYNDROME.—The term 'Down syndrome' refers to a chromosomal disorder caused by an error in cell division that results in the presence of an extra whole or partial copy of chromosome 21.

''(2) HEALTH CARE PROVIDER.—The term 'health care provider' means any person or entity required by State or Federal law or regulation to be licensed, registered, or certified to provide health care services, and who is so licensed, registered, or certified.

''(3) PRENATALLY DIAGNOSED CONDITION.—The term 'prenatally diagnosed condition' means any fetal health condition identified by prenatal genetic testing or prenatal screening procedures.

''(4) PRENATAL TEST.—The term 'prenatal test' means diagnostic or screening tests offered to pregnant women seeking routine prenatal care that are administered by a health care provider based on medical history, family background, ethnic background, previous test results, or other risk factors.

''(5) SUPPORT.—The terms 'support' and 'supportive services' mean services to assist parents to care for, and prepare to care for, a child with Down Syndrome or another prenatally diagnosed condition, and to facilitate the adoption of such children as appropriate.

''(b) INFORMATION AND SUPPORT SERVICES.—The Secretary, acting through the Director of the National Institutes of Health, the Director of the Centers for Disease Control and Prevention, or the Administrator of the Health Resources and Services Administration, may authorize and oversee certain activities, including the awarding of grants, contracts, or cooperative agreements, to—

''(1) collect, synthesize, and disseminate current scientific information relating to Down syndrome or other prenatally diagnosed conditions;

''(2) coordinate the provision of, and access to, new or existing supportive services for patients receiving a positive test diagnosis for Down syndrome or other prenatally diagnosed conditions, including—

''(A) the establishment of a resource telephone hotline and Internet Website accessible to patients receiving a positive test result;

''(B) the establishment of national and local peer-support programs; and

''(C) the establishment of a national registry, or network of local registries, of families willing to adopt newborns with Down syndrome or other prenatally diagnosed conditions, and links to adoption agencies willing to place babies with Down syndrome or other prenatally diagnosed conditions, with families willing to adopt;

''(3) establish a clearinghouse of information regarding the scientific facts, clinical course, life expectancy, and development potential relating to Down syndrome or other prenatally diagnosed conditions; and

''(4) establish awareness and education programs for health care providers who provide

the results of prenatal tests for Down syndrome or other prenatally diagnosed conditions, to patients, consistent with the purpose described in section 601(a)(2)(A) of the Pregnant Women Support Act.

''(c) DATA COLLECTION.—

''(1) PROVISION OF ASSISTANCE.—The Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall provide assistance to State and local health departments to integrate the results of prenatal testing into State-based vital statistics and birth defects surveillance programs.

''(2) ACTIVITIES.—The Secretary shall ensure that activities carried out under paragraph (1) are sufficient to extract population-level data relating to national rates and results of prenatal testing.

''(d) PROVISION OF INFORMATION BY PROVIDERS.—Upon receipt of a positive test result from a prenatal test for Down syndrome or other prenatally diagnosed conditions performed on a patient, the health care provider involved (or his or her designee) shall provide the patient with the following:

''(1) Up-to-date, scientific, written information concerning the life expectancy, clinical course, and intellectual and functional development and treatment options for an unborn child diagnosed with or child born with Down syndrome or other prenatally diagnosed conditions.

''(2) Referral to supportive services providers, including information hotlines specific to Down syndrome or other prenatally diagnosed conditions, resource centers or clearinghouses, and other education and support programs described in subsection (b).

''(e) PRIVACY.—

''(1) IN GENERAL.—Notwithstanding subsections (c) and (d), nothing in this section shall be construed to permit or require the collection, maintenance, or transmission, without the health care provider obtaining the prior, written consent of the patient, of—

''(A) health information or data that identify a patient, or with respect to which there is a reasonable basis to believe the information could be used to identify the patient (including a patient's name, address, healthcare provider, or hospital); and

''(B) data that are not related to the epidemiology of the condition being tested for.

''(2) GUIDANCE.—Not later than 180 days after the date of enactment of this section, the Secretary shall establish guidelines concerning the implementation of paragraph (1) and subsection (d).

''(f) REPORTS.—

''(1) IMPLEMENTATION REPORT.—Not later than 2 years after the date of enactment of this section, and every 2 years thereafter, the Secretary shall submit a report to Congress concerning the implementation of the guidelines described in subsection (e)(2).

''(2) GAO REPORT.—Not later than 1 year after the date of enactment of this section, the Government Accountability Office shall submit a report to Congress concerning the effectiveness of current healthcare and family support programs serving as resources for the families of children with disabilities.

''(g) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section $5,000,000 for each of the fiscal years 2010 through 2014.''.

TITLE VII—SUPPORT FOR PREGNANT AND PARENTING COLLEGE STUDENTS

SEC. 701. SENSE OF CONGRESS.

It is the sense of Congress that—

(1) pregnant college students should not have to make a choice between keeping their baby and staying in school;

(2) the pilot program under this title will help interested, eligible institutions of higher education establish pregnancy and parenting student services offices that will operate independent of Federal funding no later than 5 years after the date of the enactment of this title; and

(3) amounts appropriated to carry out other Federal programs should be reduced to offset the costs of this title.

SEC. 702. DEFINITIONS.

In this title:

(1) ELIGIBLE INSTITUTION OF HIGHER EDUCATION.—The term ''eligible institution of higher education'' means an institution of higher education (as such term is defined in section 101 of the Higher Education Act of 1965 (20 U.S.C. 1001)) that has established and operates, or agrees to establish and operate upon the receipt of a grant under this title, a pregnant and parenting student services office described in section 706.

(2) PARENT; PARENTING.—The terms ''parent'' and ''parenting'' refer to a parent or legal guardian of a minor.

(3) SECRETARY.—The term ''Secretary'' means the Secretary of Education.

SEC. 703. PREGNANT AND PARENTING STUDENT SERVICES PILOT PROGRAM.

From amounts appropriated under section 708 for a fiscal year, the Secretary shall establish a pilot program to award grants to eligible institutions of higher education to enable the eligible institutions to establish (or maintain) and operate pregnant and parenting student services offices in accordance with section 706.

SEC. 704. APPLICATION; NUMBER OF GRANTS.

(a) APPLICATION.—An eligible institution of higher education that desires to receive a grant under this title shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require.

(b) REQUESTS FOR ADDITIONAL INFORMATION.—The Secretary may require an eligible institution submitting an application under subsection (a) to provide additional information if the Secretary determines such information is necessary to process the application.

(c) NUMBER OF GRANTS.—Subject to the availability of appropriations under section 708, the Secretary shall award grants under this title to no more than 200 eligible institutions.

SEC. 705. MATCHING REQUIREMENT.

An eligible institution of higher education that receives a grant under this title shall contribute to the conduct of the pregnant and parenting student services office supported by the grant an amount from non-Federal funds equal to the amount of the grant. The non-Federal share may be in cash or in kind, fairly evaluated, including services, facilities, supplies, or equipment.

SEC. 706. USE OF FUNDS.

(a) IN GENERAL.—An eligible institution of higher education that receives a grant under this title shall use grant funds to establish (or maintain) and operate a pregnant and parenting student services office, located on the campus of the eligible institution, that carries out the following programs and activities:

(1) Hosts an initial pregnancy and parenting resource forum—

(A) to assess pregnancy and parenting resources, located on the campus or within the local community, that are available to meet the needs described in paragraph (2); and

(B) to set goals for—

(i) improving such resources for pregnant, parenting, and prospective parenting students; and

(ii) improving access to such resources.

(2) Annually assesses the performance of the eligible institution and the office in meeting the following needs of students enrolled in the eligible institution who are pregnant or are parents:

(A) The inclusion of maternity coverage and the availability of riders for additional family members in student health care.

(B) Family housing.

(C) Child care.

(D) Flexible or alternative academic scheduling, such as telecommuting programs.

(E) Education to improve parenting skills for mothers and fathers and to strengthen marriages.

(F) Maternity and baby clothing, baby food (including formula), baby furniture, and similar items to assist parents and prospective parents in meeting the material needs of their children.

(G) Post-partum counseling and support groups.

(3) Identifies public and private service providers, located on the campus of the eligible institution or within the local community, that are qualified to meet the needs described in paragraph (2), and establishes programs with qualified providers to meet such needs.

(4) Assists pregnant and parenting students and their spouses in locating and obtaining services that meet the needs described in paragraph (2).

(5) If appropriate, provides referrals for prenatal care and delivery, infant or foster care, or adoption, to a student who requests such information. An office shall make such referrals only to service providers that primarily serve the following types of individuals:

(A) Parents.

(B) Prospective parents awaiting adoption.

(C) Women who are pregnant and plan on parenting or placing the child for adoption.

(D) Parenting or prospective parenting couples who are married or who plan on marrying in order to provide a supportive environment for each other and their child.

(b) EXPANDED SERVICES.—In carrying out the programs and activities described in subsection (a), an eligible institution of higher education receiving a grant under this title may choose to provide access to such programs and activities to a pregnant or parenting employee of the eligible institution, and the employee's spouse.

SEC. 707. REPORTING.

(a) ANNUAL REPORT BY INSTITUTIONS.—

(1) IN GENERAL.—For each fiscal year that an eligible institution of higher education receives a grant under this title, the eligible institution shall prepare and submit to the Secretary, by the date determined by the Secretary, a report that—

(A) itemizes the pregnant and parenting student services office's expenditures for the fiscal year;

(B) contains a review and evaluation of the performance of the office in fulfilling the requirements of this title, using the specific performance criteria or standards established under paragraph (2)(A); and

(C) describes the achievement of the office in meeting the needs listed in section 706(a)(2) of the students served by the eligible institution, and the frequency of use of the office by such students.

(2) PERFORMANCE CRITERIA.—Not later than 180 days before the date the annual report described in paragraph (1) is submitted, the Secretary—

(A) shall identify the specific performance criteria or standards that shall be used to prepare the report; and

(B) may establish the form or format of the report.

(3) ADDITIONAL INFORMATION.—After reviewing an annual report of an eligible institution of higher education, the Secretary may require that the eligible institution provide additional information if the Secretary determines that such additional information is necessary to evaluate the pilot program.

(b) REPORT BY SECRETARY.—The Secretary shall annually prepare and submit a report on the findings of the pilot program under this title, including the number of eligible institutions of higher education that were awarded grants and the number of students served by each pregnant and parenting student services office receiving funds under this title, to the appropriate committees of the Senate and the House of Representatives.

SEC. 708. AUTHORIZATION OF APPROPRIATIONS.

There is authorized to be appropriated to carry out this title not more than $10,000,000 for each of the fiscal years 2010 through 2014.

TITLE VIII—SUPPORT FOR PREGNANT AND PARENTING TEENS

SEC. 801. GRANTS TO STATES.

The Secretary shall make grants to States to allow early childhood education programs, including Head Start, to work with pregnant or parenting teens to complete high school and prepare for college or for vocational education.

TITLE IX—IMPROVING SERVICES FOR PREGNANT WOMEN WHO ARE VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, AND STALKING

SEC. 901. FINDINGS.

The Congress finds as follows:

(1) Pregnant and recently pregnant women are more likely to be victims of homicide than to die of any other causes, and evidence exists that a significant proportion of all female homicide victims are killed by their intimate partners.

(2) A 2001 study published by the Journal of the American Medical Association found that murder is the number one cause of death among pregnant women.

(3) Research suggests that injury-related deaths, including homicide and suicide, account for approximately one-third of all maternal mortality cases, while medical reasons make up the rest. Homicide is the leading cause of death overall for pregnant women, followed by cancer, acute and chronic respiratory conditions, motor vehicle collisions and drug overdose, peripartum and postpartum cardiomyopthy, and suicide.

SEC. 902. PROGRAM TO SUPPORT PREGNANT WOMEN WHO ARE VICTIMS OF DOMESTIC VIOLENCE.

(a) IN GENERAL.—For fiscal year 2010 and each subsequent fiscal year, the Attorney General, through the Director of the Office on Violence Against Women, may award grants to States, to be used for any of the following purposes:

(1) To assist States in providing intervention services, accompaniment, and supportive social services for eligible pregnant women who are victims of domestic violence, dating violence, or stalking.

(2) To provide for technical assistance and training (as described in subsection (c)) relating to violence against eligible pregnant women to be made available to the following:

(A) Federal, State, tribal, territorial, and local governments, law enforcement agencies, and courts.

(B) Professionals working in legal, social service, and health care settings.

(C) Nonprofit organizations.

(D) Faith-based organizations.

(b) STATE ELIGIBILITY.—To be eligible for a grant under subsection (a), a State shall—

(1) submit to the Attorney General an application in such time and manner, and containing such information, as specified by the Attorney General; and

(2) for a grant made for a fiscal year beginning on or after the date that is one year after the date of the enactment of this title, satisfy the requirement under section 903, relating to female homicide victim determinations and death certificates.

(c) TECHNICAL ASSISTANCE AND TRAINING DESCRIBED.—For purposes of subsection (a)(2), technical assistance and training is—

(1) the identification of eligible pregnant women experiencing domestic violence, dating violence, or stalking;

(2) the assessment of the immediate and short-term safety of such a pregnant woman, the evaluation of the impact of the violence or stalking on the pregnant woman's health, and the assistance of the pregnant woman in developing a plan aimed at preventing further domestic violence, dating violence, or stalking, as appropriate;

(3) the maintenance of complete medical or forensic records that include the documentation of any examination, treatment given, and referrals made, recording the location and nature of the pregnant woman's injuries, and the establishment of mechanisms to ensure the privacy and confidentiality of those medical records; and

(4) the identification and referral of the pregnant woman to appropriate public and private nonprofit entities that provide intervention services, accompaniment, and supportive social services.

(d) DEFINITIONS.—For purposes of this title:

(1) ACCOMPANIMENT.—The term ''accompaniment'' means assisting, representing, and accompanying a woman in seeking judicial relief for child support, child custody, restraining orders, and restitution for harm to persons and property, and in filing criminal charges, and may include the payment of court costs and reasonable attorney and witness fees associated therewith.

(2) ELIGIBLE PREGNANT WOMAN.—The term ''eligible pregnant woman'' means any woman who is pregnant on the date on which such woman becomes a victim of domestic violence, dating violence, or stalking or who was pregnant during the one-year period before such date.

(3) INTERVENTION SERVICES.—The term ''intervention services'' means, with respect to domestic violence, dating violence, or stalking, 24-hour telephone hotline services for police protection and referral to shelters.

(4) STATE.—The term ''State'' includes the District of Columbia, any commonwealth, possession, or other territory of the United States, and any Indian tribe or reservation.

(5) SUPPORTIVE SOCIAL SERVICES.—The term ''supportive social services'' means transitional and permanent housing, vocational counseling, and individual and group counseling aimed at preventing domestic violence, dating violence, or stalking.

(6) VIOLENCE.—The term ''violence'' means actual violence and the risk or threat of violence.

(e) AUTHORIZATION OF APPROPRIATIONS.—For the purpose of making allotments under subsection (a), there are authorized to be appropriated $4,000,000 for each of the fiscal years 2010 through 2014.

SEC. 903. HOMICIDE DEATH CERTIFICATES OF CERTAIN FEMALE VICTIMS.

For purposes of section 902(b)(2), the requirement under this section is that not later than the date that is one year after the date of the enactment of this title, a State shall require, with respect to any homicide case initiated after such one-year date and in which the victim is a female of possible child-bearing age, each of the following:

(1) A determination of which, if any, of the following categories, described the victim:

(A) The victim was pregnant on the date of her death.

(B) The victim was not pregnant on the date of her death, but had been pregnant during the 42-day period before such date.

(C) The victim was not pregnant on the date of her death, but had been pregnant during the period beginning on the date that was one year before such date of her death and ending on the date that was 43 days before such date of her death.

(D) The victim was not pregnant during the one-year period before the date of her death.

(E) It could not be determined whether or not the victim had been pregnant during the one-year period before the date of her death.

(2) The determination made under paragraph (1) shall be included in the death certificate of the victim.

TITLE X—LIFE SUPPORT CENTERS FOR PREGNANT WOMEN, MOTHERS, AND CHILDREN

SEC. 1001. LIFE SUPPORT CENTERS PILOT PROGRAM.

(a) IN GENERAL.—The Secretary shall establish a pilot program to fund comprehensive and supportive services for pregnant women, mothers, and children. Such services may include—

(1) child care for infants and toddlers to allow mothers to find jobs and finish their education;

(2) relocation assistance to establish good and stable homes;

(3) educational support, such as preparation for pregnant and parenting mothers for the recognized equivalent of a secondary school diploma;

(4) counseling, including adoption counseling;

(5) parenting classes;

(6) business skills training;

(7) emergency aid in times of crisis;

(8) nutrition education and food assistance; and

(9) outreach to seniors, many of whom volunteer to help with the children or who receive advice on helping raise their own grandchildren.

(b) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section no more than $10,000,000 for each of the fiscal years 2010 through 2014.

TITLE XI—PROVIDING SUPPORT TO NEW PARENTS

SEC. 1101. INCREASED SUPPORT FOR WIC PROGRAM.

(a) FINDINGS.—Congress finds the following:

(1) The special supplemental nutrition program for women, infants, and children (WIC) authorized in section 17 of the Child Nutrition Act of 1966 (42 U.S.C. 1786) served approximately 8,100,000 women, infants, and children per month in fiscal year 2006.

(2) Half of all infants in the United States and 1 in 4 young children under age 5 get crucial health and nutrition benefits from the WIC Program.

(3) It is estimated that every dollar spent on WIC results in between $1.92 and $4.21 in Medicaid savings for newborns and their mothers.

(4) The WIC program has been proven to increase the number of women receiving prenatal care, reduce the incidence of low birth weight and fetal mortality, reduce anemia, and enhance the nutritional quality of the diet of mothers and children.

(5) The WIC program's essential, effective nutrition services include nutrition assessment, counseling and education, obesity prevention, breastfeeding support and promotion, prenatal and pediatric health care referrals and follow-up, spousal and child abuse referral, drug and alcohol abuse referral, immunization screening, assessment and referral, and a host of other services for mothers and children.

(b) AUTHORIZATION OF APPROPRIATIONS.—For the purpose of carrying out the special supplemental nutrition program for women, infants, and children (WIC) authorized in section 17 of the Child Nutrition Act of 1966 (42

U.S.C. 1786), there is authorized to be appropriated such sums as may be necessary for each of fiscal years 2010 through 2014, of which—

(1) there is authorized to be appropriated $15,000,000 for fiscal year 2010, and such sums as may be necessary for each of fiscal years 2011 through 2014, for breast-feeding peer counselors; and

(2) there is authorized to be appropriated $14,000,000 for fiscal year 2010, and such sums as may be necessary for each of fiscal years 2011 through 2014, for infrastructure needs.

SEC. 1102. NUTRITIONAL SUPPORT FOR LOW-INCOME PARENTS.

Section 5(c)(2) of the Food and Nutrition Act of 2008 (7 U.S.C. 2014(c)(2)) is amended by striking ''30 per centum'' and inserting ''85 percent''.

SEC. 1103. INCREASED FUNDING FOR THE CHILD CARE AND DEVELOPMENT BLOCK GRANT PROGRAM.

(a) AUTHORIZATION OF APPROPRIATIONS.—Section 658B of the Child Care and Development Block Grant Act of 1990 (42 U.S.C. 9858) is amended to read as follows:

''SEC. 658B. AUTHORIZATION OF APPROPRIATIONS.

''There are authorized to be appropriated to carry out this subchapter $2,350,000,000 for fiscal year 2010 and such sums as may be necessary for fiscal years 2011 through 2014.''.

(b) CONFORMING AMENDMENT.—Section 658E(c)(3)(D) of the Child Care and Development Block Grant Act of 1990 (42 U.S.C. 9858c(c)(3)(D)) is amended by striking ''1997 through 2002'' and inserting ''2010 through 2014''.

SEC. 1104. TEENAGE OR FIRST-TIME MOTHERS; FREE HOME VISITS BY REGISTERED NURSES FOR EDUCATION ON HEALTH NEEDS OF INFANTS.

(a) IN GENERAL.—The Secretary may make grants to local health departments to provide to eligible mothers, without charge, education on the health needs of their infants through visits to their homes by registered nurses.

(b) ELIGIBLE MOTHER.—

(1) IN GENERAL.—For purposes of subsection (a), a woman is an eligible mother if, subject to paragraph (2), the woman—

(A) is the mother of an infant who is not more than 24 months of age; and

(B)(i) the woman was under the age of 20 at the time of birth; or

(ii) the infant referred to in subparagraph (A) is the first child of the woman.

(2) ADDITIONAL REQUIREMENTS FOR CERTAIN MOTHERS.—In the case of a woman described in paragraph (1)(B)(ii) who is 20 years of age or older, the woman is an eligible mother for purposes of subsection (a) only if the woman meets such standards in addition to the applicable standards under paragraph (1) as the local health department involved determines to be appropriate.

(c) CERTAIN REQUIREMENTS.—A grant may be made under subsection (a) only if the applicant involved agrees as follows:

(1) The program carried out under such subsection by the applicant will be designed to instill in eligible mothers confidence in their abilities to provide for the health needs of their newborns, including through—

(A) providing information on child development; and

(B) soliciting questions from the mothers.

(2) The registered nurses who make home visits under subsection (a) will, as needed, provide referrals for health and social services to serve the needs of the newborns.

(3) The period during which the visits will be available to an eligible mother will not be fewer than six months.

(d) AUTHORIZED SERVICES.—

(1) REQUIREMENTS.—A grant may be made under subsection (a) only if the applicant involved agrees that the following services will be provided by registered nurses in home visits under subsection (a):

(A) Information on child health and development, including suggestions for child-developmental activities that are enjoyable for parents and children.

(B) Advice on parenting, including information on how to develop a strong parent-child relationship.

(C) Information on resources about parenting, including identifying books and videos that are available at local libraries.

(D) Information on upcoming parenting workshops in the local region.

(E) Information on programs that facilitate parent-to-parent support services.

(F) In the case of an eligible mother who is a student, information on resources that may assist the mother in completing the educational courses involved.

(2) ADDITIONAL SERVICES.—A grant under subsection (a) may be expended to provide services during home visits under such subsection in addition to the services specified in paragraph (1).

(e) AUTHORIZATION OF APPROPRIATIONS.—For the purpose of carrying out this section, there are authorized to be appropriated $3,000,000 for fiscal year 2010, and such sums as may be necessary for each of fiscal years 2011 through 2014.

TITLE XII—COLLECTING AND REPORTING ABORTION DATA

SEC. 1201. GRANTS FOR COLLECTION AND REPORTING OF ABORTION DATA.

(a) GRANTS.—The Secretary, acting through the Director of the Centers for Disease Control and Prevention, may make grants to States for collecting and reporting abortion surveillance data.

(b) REPORTING REQUIREMENT.—

(1) IN GENERAL.—The Secretary may make a grant to a State under this section only if the State agrees to submit a report in each of fiscal years 2011 and 2013 on the State's abortion surveillance data.

(2) CONTENTS.—Each report submitted by a State under this subsection shall, with respect to the preceding 2 fiscal years, include—

(A) the number and characteristics of women obtaining abortions in the State; and

(B) the characteristics of these abortions, including the approximate gestational age of the unborn child, the abortion method, and any known physical or psychological complications.

(3) PERSONAL INFORMATION.—A report submitted by a State under this subsection shall not contain the name of any woman obtaining or seeking to obtain an abortion, any common identifier (such as a social security number), or any other identifier (including statistical information) that would make it possible to identify in any manner or under any circumstances an individual who has obtained or seeks to obtain an abortion.

(c) CONFIDENTIALITY.—The Secretary shall maintain the confidentiality of any individually identifiable information reported to the Secretary under this section.

(d) REPORT TO CONGRESS.—

(1) IN GENERAL.—Not later than the end of fiscal year 2013, the Secretary shall submit a report to the Congress on the abortion surveillance data reported to the Secretary under this section.

(2) PERSONAL INFORMATION.—A report submitted by the Secretary to the Congress under this subsection shall not contain any name or other identifier described in subsection (b)(3).

(e) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there are authorized to be appropriated such sums as may be necessary for each of fiscal years 2010 through 2014.

By Mr. HARKIN:

S. 272. A bill to amend the Commodity Exchange Act to ensure that all agreements, contracts, and transactions with respect to commodities are carried out on a regulated exchange, and for other purposes; to the Committee on Agriculture, Nutrition, and Forestry.

Mr. HARKIN. Mr. President, today, I am reintroducing legislation—the Derivatives Trading Integrity Act—which calls for establishing stronger standards of openness, transparency and integrity in the trading of financial swaps and other over-the-counter derivative contracts as a critical step toward rebuilding and restoring confidence in the financial system. Over the years, the Commodity Futures Trading Commission and laws enacted by Congress have allowed instruments that are in form and function futures contracts to be privately negotiated without the safeguards provided through trading on exchanges regulated by the Commodity Futures Trading Commission, CFTC.

The economic downturn in this country is forcing us to examine all contributing factors to the crisis in our financial markets. By restoring reasonable safeguards and regulation of swaps, including credit default swaps, along with all other futures contracts, this legislation will go a long way to restore confidence in the markets and reestablish soundness and integrity in the financial system. My bill will end the unregulated ''casino capitalism'' that has engendered great risks in swaps trading. And it will bring these transactions out into the sunlight where they can be monitored and appropriately and responsibly regulated. This legislation will establish authority and safeguards to ensure that parties can meet their obligations to manage and reduce danger and risk to the entire financial system and economy.

Virtually all contracts now commonly referred to as swaps fall under the definition of futures contracts and function basically in the same manner as futures contracts. This bill amends the Commodity Exchange Act to eliminate the distinctions in the regulatory treatment of futures contracts among ''excluded'' and ''exempt'' commodities, and the transactions in them, and regulated, exchange-traded commodities and transactions in them. Futures contracts for all commodities would be treated the same in the law and regulations.

In addition, the bill eliminates the statutory exclusion of swap transactions from regulation, and it ends the Commodity Futures Trading Commission's authority to exempt such transactions from the general requirement that a contract for the purchase or sale of a commodity for future delivery can only trade on a regulated board of trade. In effect, this proposed change

in the law means that all futures contracts must trade on a designated contract market or a derivatives transaction execution facility. The requirement for exchange trading would thus include over-the-counter trading of financial derivatives just as it does for futures contracts in physical commodities such as corn, soybeans and petroleum.

We have seen large negative consequences from the lack of price transparency and the failure to properly measure and collateralize the risk in trading over-the-counter derivatives. The problems have not been seen in the trading of financial futures on regulated futures markets, subject to the oversight of the Commodity Futures Trading Commission.

This legislation I am introducing will establish the standard that all futures contracts trade on regulated exchanges. The regulated exchanges will work with the Commodity Futures Trading Commission to ensure that trading on the exchange is fair and equitable and not subject to abuses. The Commodity Futures Trading Commission has the experience and expertise to oversee these matters.

Bringing necessary openness, transparency, soundness, and integrity to trading in contracts which are now unregulated over-the-counter swaps and related derivatives is a key element in restoring trust and confidence in the financial system so that we can rebuild our economy on a solid foundation.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 272

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 ''Derivatives Trading Integrity Act of 2009''.

SEC. 2. REGULATION OF CERTAIN AGREEMENTS, CONTRACTS, AND TRANSACTIONS.

(a) DEFINITIONS.—Section 1a of the Commodity Exchange Act (7 U.S.C. 1a) is amended—

(1) by striking paragraphs (10), (11), (13), (14), and (33); and

(2) by redesignating—

(A) paragraph (12) as paragraph (10);

(B) paragraphs (15) through (32) as paragraphs (11) through (28), respectively; and

(C) paragraph (34) as paragraph (29).

(b) EXCLUSIONS.—Section 2 of the Commodity Exchange Act (7 U.S.C. 2) is amended—

(1) by striking subsections (d), (e), (g), (h), and (i); and

(2) by redesignating subsection (f) as subsection (d).

(c) RESTRICTION OF FUTURES TRADING TO CONTRACT MARKETS OR DERIVATIVES TRANSACTION EXECUTION FACILITIES.—Section 4 of the Commodity Exchange Act (7 U.S.C. 6) is amended—

(1) in subsection (a), in the matter preceding paragraph (1), by striking ''Unless exempted by the Commission pursuant to subsection (c), it shall'' and inserting ''It shall'';

(2) by striking subsection (c); and

(3) by redesignating subsection (d) as subsection (c).

(d) EXEMPT BOARDS OF TRADE.—Section 5d of the Commodity Exchange Act (7 U.S.C. 7a–3) is repealed.

SEC. 3. CONFORMING AMENDMENTS.

(a) Section 1a of the Commodity Exchange Act (7 U.S.C. 1a) (as amended by section 2(a)(2)) is amended—

(1) in paragraph (10)(A)(x), by striking ''(other than an electronic trading facility with respect to a significant price discovery contract)'';

(2) in paragraph (25)—

(A) in subparagraph (C), by inserting ''and'' after the semicolon at the end;

(B) in subparagraph (D), by striking ''; and'' and inserting a period; and

(C) by striking subparagraph (E); and

(3) in paragraph (27), by striking ''section 2(c), 2(d), 2(f), or 2(g) of this Act'' and inserting ''subsection (c) or (d) of section 2''.

(b) Section 2(c) of the Commodity Exchange Act (7 U.S.C. 2(c)) is amended—

(1) in paragraph (1)—

(A) in the matter preceding subparagraph (A), by striking ''5d,''; and

(B) in subparagraph (F), by striking ''in an excluded commodity''; and

(2) in paragraph (2)(B)(i)(II)—

(A) in item (cc), by striking ''section 1a(20) of this Act'' each place it appears and inserting ''section 1a(16)''; and

(B) in item (dd), by striking ''section 1a(12)(A)(ii) of this Act'' and inserting ''section 1a(10)(A)(ii)''.

(c) Section 4a of the Commodity Exchange Act (7 U.S.C. 6a) is amended—

(1) in subsection (a)—

(A) in the first sentence, by striking ''or on electronic trading facilities with respect to a significant price discovery contract''; and

(B) in the second sentence, by striking ''or on an electronic trading facility with respect to a significant price discovery contract,'';

(2) in subsection (b)—

(A) in paragraph (1), by striking ''or electronic trading facility with respect to a significant price discovery contract''; and

(B) in paragraph (2), in the matter preceding the proviso, by striking ''or electronic trading facility with respect to a significant price discovery contract''; and

(3) in subsection (e)—

(A) in the first sentence—

(i) in the matter preceding the proviso—

(I) by striking ''or by any electronic trading facility'';

(II) by striking ''or on an electronic trading facility''; and

(III) by striking ''or electronic trading facility''; and

(ii) in the proviso, by striking ''or electronic trading facility''; and

(B) in the second sentence, in the matter preceding the proviso, by striking ''or electronic trading facility with respect to a significant price discovery contract''.

(d) Section 4g(a) of the Commodity Exchange Act (7 U.S.C. 6g(a)) is amended by striking ''and in any significant price discovery contract traded or executed on an electronic trading facility or''.

(e) Section 4i of the Commodity Exchange Act (7 U.S.C. 6i) is amended—

(1) in the matter preceding paragraph (1), by striking ''or any significant price discovery contract traded or executed on an electronic trading facility''; and

(2) in the matter following paragraph (2), by striking ''or electronic trading facility''.

(f) Section 5a of the Commodity Exchange Act (7 U.S.C. 7a) is amended—

(1) in subsection (b)(2)—

(A) in subparagraph (D)(ii), by inserting ''or'' after the semicolon at the end;

(B) in subparagraph (E), by striking ''; or'' and inserting a period; and

(C) by striking subparagraph (F); and

(2) in subsection (g)—

(A) in the heading, by striking ''ELECTION TO TRADE EXCLUDED AND EXEMPT COMMODITIES'' and inserting ''EXCLUDED SECURITIES''; and

(B) in paragraph (1)—

(i) by striking ''excluded or exempt commodities other than'' and inserting ''commodities other than an agricultural commodity enumerated in section 1a(4) or''; and

(ii) by striking '', 2(d), or 2(g) of this Act, or exempt under section 2(h) of this Act''.

(g) Section 5b of the Commodity Exchange Act (7 U.S.C. 7a–1) is amended—

(1) in subsection (a)(1), by striking ''section 2(a)(1)(C)(i), 2(c), 2(d), 2(f), or 2(g) of this Act or title IV of the Commodity Futures Modernization Act of 2000, or exempted under section 2(h) or 4(c) of this Act'' and inserting ''subsection (a)(1)(C)(i), (c), or (d) of section 2 or title IV of the Commodity Futures Modernization Act of 2000 (Public Law 106–554; 114 Stat. 2763A457)''; and

(2) in subsection (b), by striking ''section 2(c), 2(d), 2(f), or 2(g) of this Act or title IV of the Commodity Futures Modernization Act of 2000, or exempted under section 2(h) or 4(c) of this Act'' and inserting ''subsection (c) or (d) of section 2 or title IV of the Commodity Futures Modernization Act of 2000 (Public Law 106–554; 114 Stat. 2763A457)''.

(h) Section 5c of the Commodity Exchange Act (7 U.S.C. 7a–2) is amended—

(1) in subsection (a)(1), by striking ''and section 2(h)(7) with respect to significant price discovery contracts,'';

(2) in subsection (b)—

(A) in paragraph (1), by striking '', derivatives transaction execution facility, or electronic trading facility with respect to a significant price discovery contract'' and inserting ''or derivatives transaction execution facility''; and

(B) in paragraphs (2) and (3), by striking '', derivatives transaction execution facility, or electronic trading facility'' each place it appears and inserting ''or derivatives transaction execution facility''; and

(3) in subsection (d)(1), in the matter preceding subparagraph (A), by striking ''or 2(h)(7)(C) with respect to a significant price discovery contract traded or executed on an electronic trading facility,''.

(i) Section 5e of the Commodity Exchange Act (7 U.S.C. 7b) is amended by striking ''or revocation of the right of an electronic trading facility to rely on the exemption set forth in section 2(h)(3) with respect to a significant price discovery contract,''.

(j) Section 5f(b)(1) of the Commodity Exchange Act (7 U.S.C. 7b–1(b)(1)) is amended in the matter preceding subparagraph (A), by striking ''section 5f'' and inserting ''this section''.

(k) Section 6(b) of the Commodity Exchange Act (7 U.S.C. 8(b)) is amended—

(1) in the first sentence—

(A) by striking ''or to revoke the right of an electronic trading facility to rely on the exemption set forth in section 2(h)(3) with respect to a significant price discovery contract,''; and

(B) by striking ''or electronic trading facility''; and

(2) in the second sentence, in the matter preceding the proviso, by striking ''or electronic trading facility''.

(l) Section 12(e) of the Commodity Exchange Act (7 U.S.C. 16(e)) is amended by striking paragraph (2) and inserting the following:

''(2) EFFECT.—This Act supersedes and preempts the application of any State or local law that prohibits or regulates gaming or the operation of bucket shops (other than antifraud provisions of general applicability) in the case of an agreement, contract, or

transaction that is excluded from this Act under—

''(A) subsection (c) or (d) of section 2; or

''(B) title IV of the Commodity Futures Modernization Act of 2000 (Public Law 106–554; 114 Stat. 2763A457).''.

(m) Section 15(b) of the Commodity Exchange Act (7 U.S.C. 19(b)) is amended by striking ''4(c) or''.

(n) Section 22(b)(1)(A) of the Commodity Exchange Act (7 U.S.C. 25(b)(1)(A)) is amended by striking ''by section 2(h)(7) or sections 5 through 5c'' and inserting ''under sections 5 through 5c''.

(o) Section 13106(b)(1) of the Food, Conservation, and Energy Act of 2008 (7 U.S.C. 2 note; Public Law 110–246) is amended by striking ''section 1a(32)'' and inserting ''section 1a''.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 14—TO PROVIDE FUNDING FOR SENATE STAFF TRANSITIONS

Mr. MCCONNELL (for himself and Mr. REID) submitted the following resolution; which was considered and agreed to:

S. RES. 14

Resolved, That (a) for purposes of this section, the term ''eligible staff member'' means an individual—

(1) whose pay is disbursed by the Secretary of the Senate and was an employee as of January 2, 2009; and

(2) who was an employee of a Senator who stood for an additional term for the office of Senator but the office is not filled at the commencement of that term.

(b)(1) With respect to an eligible staff member who is being treated as a displaced staff member under section 6 of Senate Resolution 458 (98th Congress), as amended by Senate Resolution 9 (103d Congress), the period referred to in section 6(c)(1) of such resolution shall be 90 days.

(2)(A) Each eligible staff member may, with the approval, direction, and supervision of the Secretary of the Senate, perform limited duties such as archiving and transferring case files.

(B) The Secretary of the Senate may hire 2 additional eligible staff members to perform the duties described in subparagraph (A) subject to subparagraph (C). Such employees shall be treated as displaced staff members under section 6 of Senate Resolution 458 (98th Congress), as amended by Senate Resolution 9 (103d Congress), after the expiration of the period described in subparagraph (C). Expenses for such employees shall be paid from the Contingent Fund of the Senate.

(C) Subparagraph (A) shall apply for the period from January 2, 2009 through February 4, 2009 unless the eligible staff member becomes otherwise employed.

(3) A statement in writing by an eligible staff member that he or she was not gainfully employed during such period or the portion thereof for which payment is claimed under this subsection shall be accepted as prima facie evidence that he or she was not so employed.

(c) The Secretary of the Senate shall notify the Committee on Rules and Administration of the name of each eligible staff member.

(d)(1) During the period described in paragraph (2), the official office and State office expenses relating to archiving and transferring case files of a Senator who stood for an additional term for the office of Senator but whose office is not filled at the commencement of that term shall be paid from the account for Miscellaneous Items within the contingent fund of the Senate upon vouchers approved and obligated by the Secretary of the Senate or the Sergeant at Arms and Doorkeeper of the Senate, as appropriate.

(2) The period described in paragraph (1) is the period from January 2, 2009 through February 4, 2009.

(e) Except as provided in subsection (b)(2)(B), funds necessary to carry out the provisions of this section shall be available as set forth in section 1(d) of Senate Resolution 458, agreed to October 4, 1984 (98th Congress).

(f) This section shall expire 90 days after January 3, 2009.

SEC. 2. (a) For purposes of section 6(a)(4)(A)(i) of Senate Resolution 458 (98th Congress), as amended by Senate Resolution 9 (103d Congress), the term committee shall include subcommittee.

(b) This section shall take effect on January 2, 2009 and expire 120 days after such date.

AMENDMENTS SUBMITTED AND PROPOSED

SA 23. Mr. BINGAMAN (for himself and Ms. MURKOWSKI) proposed an amendment to the bill S. 22, to designate certain land as components of the National Wilderness Preservation System, to authorize certain programs and activities in the Department of the Interior and the Department of Agriculture, and for other purposes.

SA 24. Mr. BINGAMAN (for himself and Ms. MURKOWSKI) proposed an amendment to the bill S. 22, supra.

SA 25. Mrs. HUTCHISON (for herself, Mr. MARTINEZ, Mr. GRASSLEY, Mr. CORNYN, Mr. ALEXANDER, Mr. VOINOVICH, Mr. ENZI, Mr. THUNE, Ms. MURKOWSKI, Mr. BURR, and Mr. CORKER) proposed an amendment to the bill S. 181, to amend title VII of the Civil Rights Act of 1964 and the Age Discrimination in Employment Act of 1967, and to modify the operation of the Americans with Disabilities Act of 1990 and the Rehabilitation Act of 1973, to clarify that a discriminatory compensation decision or other practice that is unlawful under such Acts occurs each time compensation is paid pursuant to the discriminatory compensation decision or other practice, and for other purposes.

SA 26. Mr. SPECTER submitted an amendment intended to be proposed by him to the bill S. 181, supra; which was ordered to lie on the table.

SA 27. Mr. SPECTER submitted an amendment intended to be proposed by him to the bill S. 181, supra; which was ordered to lie on the table.

TEXT OF AMENDMENTS

SA 23. Mr. BINGAMAN (for himself and Ms. MURKOWSKI) proposed an amendment to the bill S. 22, to designate certain land as components of the National Wilderness Preservation System, to authorize certain programs and activities in the Department of the Interior and the Department of Agriculture, and for other purposes; as follows:

On page 976, strike lines 8 through 25.

On page 977, line 1, strike ''(6)'' and insert ''(5)''.

On page 977, line 3, insert ''and'' after ''interactions;''.

On page 977, line 4, strike ''(7)'' and insert ''(6)''.

On page 977, line 5, strike ''(6)'' and insert ''(5)''.

On page 977, line 8, strike ''scales;'' and insert ''scales.''.

On page 977, strike lines 9 through 17.

On page 1275, strike lines 3 through 6.

SA 24. Mr. BINGAMAN (for himself and Ms. MURKOWSKI) proposed an amendment to the bill S. 22, to designate certain land as components of the National Wilderness Preservation System, to authorize certain programs and activities in the Department of the Interior and the Department of Agriculture, and for other purposes; as follows:

Beginning on page 305, strike line 9 and all that follows through page 349, line 21.

On page 526, line 2, strike ''2'' and insert ''5''.

On page 526, line 7, strike ''5'' and insert ''2''.

On page 974, line 19, insert ''the Secretary of the Army, acting through'' before ''the Chief''.

On page 1188, line 19, strike ''or'' and insert ''of''.

Beginning on page 1271, strike line 3 and all that follows through page 1273, line 22, and insert the following:

Section 107(a)

SA 25. Mrs. HUTCHISON (for herself, Mr. MARTINEZ, Mr. GRASSLEY, Mr. CORNYN, Mr. ALEXANDER, Mr. VOINOVICH, Mr. ENZI, Mr. THUNE, Ms. MURKOWSKI, Mr. BURR, and Mr. CORKER) proposed an amendment to the bill S. 181, to amend title VII of the Civil Rights Act of 1964 and the Age Discrimination in Employment Act of 1967, and to modify the operation of the Americans with Disabilities Act of 1990 and the Rehabilitation Act of 1973, to clarify that a discriminatory compensation decision or other practice that is unlawful under such Acts occurs each time compensation is paid pursuant to the discriminatory compensation decision or other practice, and for other purposes; as follows:

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Title VII Fairness Act''.

SEC. 2. FINDINGS.

Congress finds the following:

(1) Filing limitations periods serve important functions. They ensure that all claims are promptly raised and investigated, and, when remediation is warranted, that the violations involved are promptly remediated.

(2) Limitations periods are particularly important in employment situations, where unresolved grievances have a singularly corrosive and disruptive effect.

(3) Limitations periods are also particularly important for a statutory process that favors the voluntary resolution of claims through mediation and conciliation. Promptly raised issues are invariably more susceptible to such forms of voluntary resolution.

(4) In instances in which that voluntary resolution is not possible, a limitations period ensures that claims will be adjudicated on the basis of evidence that is available, reliable, and from a date that is proximate in time to the adjudication.

(5) Limitations periods, however, should not be construed to foreclose the filing of a claim by a reasonable person who exercises