

CONSOLIDATED REPORT OF EXPENDITURE OF FUNDS FOR FOREIGN TRAVEL BY MEMBERS AND EMPLOYEES OF THE U.S. SENATE, UNDER AUTHORITY OF SEC. 22, P.L. 95-384—22
U.S.C. 1754(b), COMMITTEE ON CODEL MCCONNELL FOR TRAVEL FROM APR. 4 TO APR. 15, 2009—Continued

Name and country	Name of currency	Per diem		Transportation		Miscellaneous		Total	
		Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency
Jordan	Dinar		1,108.00						1,108.00
United Arab Emirates	Dirham		1,105.00						1,105.00
Italy	Euro		1,740.00						1,740.00
Sharon Soderstrom:									
Egypt	Pound		809.00						809.00
Israel	Shekel		480.00						480.00
Jordan	Dinar		1,108.00						1,108.00
United Arab Emirates	Dirham		1,105.00						1,105.00
Italy	Euro		913.00						913.00
Tom Hawkins:									
Egypt	Pound		809.00						809.00
Israel	Shekel		480.00						480.00
Jordan	Dinar		1,108.00						1,108.00
United Arab Emirates	Dirham		1,105.00						1,105.00
Italy	Euro		1,510.00						1,510.00
Roy Brownell:									
Egypt	Pound		809.00						809.00
Israel	Shekel		480.00						480.00
Jordan	Dinar		1,108.00						1,108.00
United Arab Emirates	Dirham		1,105.00						1,105.00
Italy	Euro		1,520.00						1,520.00
Stefanie Hagar:									
Egypt	Pound		809.00						809.00
Israel	Shekel		480.00						480.00
Jordan	Dinar		1,108.00						1,108.00
United Arab Emirates	Dirham		1,105.00						1,105.00
Italy	Euro		1,494.00						1,494.00
Sally Walsh:									
Egypt	Pound		809.00						809.00
Israel	Shekel		480.00						480.00
Jordan	Dinar		1,108.00						1,108.00
United Arab Emirates	Dirham		1,105.00						1,105.00
Italy	Euro		1,635.00						1,635.00
Delegation Expenses*:									
Egypt	Pound						6,413.28		6,413.28
Israel	Shekel						4,539.54		4,539.54
Jordan	Dinar						7,797.48		7,797.48
United Arab Emirates	Dirham						3,867.24		3,867.24
Afghanistan	Dollar						530.83		530.83
Italy	Euro						6,674.02		6,674.02
Total:			51,512.00				29,822.39		81,334.39

*Delegation expenses include payments and reimbursements to the Department of State, and the Department of Defense under the authority of Sec. 502(b) of the Mutual Security Act of 1954, as amended by Sec. 22 of P.L. 95-384, and S. Res. 179 agreed to May 25, 1977.

SENATOR MITCH MCCONNELL,
Chairman, Republican Leader, June 15, 2009.

VETERANS HEALTH CARE BUDGET REFORM AND TRANSPARENCY ACT OF 2009

Mr. WHITEHOUSE. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of Calendar No. 101, S. 423.

The PRESIDING OFFICER. The clerk will report the bill by title.

The legislative clerk read as follows:

A bill (S. 423) to amend title 38, United States Code, to authorize advance appropriations for certain medical care accounts of the Department of Veterans Affairs by providing two-fiscal year budget authority, and for other purposes.

There being no objection, the Senate proceeded to consider the bill.

Mr. AKAKA. Mr. President, I am very gratified that the Senate is acting on S. 423, the proposed Veterans Health Care Budget and Transparency Act of 2009. This bill would authorize, beginning in fiscal year 2011, advance appropriations for certain medical care accounts of the Department of Veterans Affairs by providing two fiscal year budget authority.

The Committee on Veterans' Affairs held a hearing on pending health care legislation on April 22, 2009, during which the Committee received testimony on S. 423. Support for this bill was voiced by the Department of Veterans Affairs, Disabled American Veterans, American Federation of Govern-

ment Employees, and Paralyzed Veterans of America. The Committee ordered the bill reported on May 21, 2009. The Committee report—S. Rpt. 111-041—was filed on July 8, 2009.

In 19 of the past 22 fiscal years, final VA appropriations have been enacted late and requests for supplemental appropriations for VA health care have increased in frequency during recent years. Over the past 7 years, final VA appropriations were late approximately 3 months on average. While there has been some impact on the timeliness and overall quality of VA care from these financial and management difficulties in the past, there is a serious concern that continued funding problems could significantly weaken the quality of veterans' health care. Providing sufficient, timely and predictable funding to the VA health care system would mitigate these dangers and allow VA administrators and directors to more efficiently and effectively provide medical care to veterans.

Advanced funding would allow the VA to function more effectively, to better align with funding cycles, and to avoid annual partisan political maneuvering. Through appropriating funds in advance to the medical services, medical support and compliance, and medical facilities accounts, we can avoid any disruption to the provision of adequate and timely health care to those

who have sacrificed a great deal for this nation.

I understand that authorizing advanced appropriations is a serious endeavor and as such have made sure this legislation also enhances oversight of the VA health care budget process. The Comptroller General of the United States will be required to conduct a study of adequacy and accuracy of the budget projections made by VA's Enrollee Health Care Projection Model and any other model or methodology used to measure health care expenditures. The study would cover the five fiscal years included in each budget submission; however, the focus is intended to be upon the fiscal year for which the advance appropriation would be made. These reports would be submitted to the appropriate committees of Congress no later than the date on which the President submits the budget request for the following fiscal year.

This bill has received support from a myriad of organizations including The Partnership for Veterans Health Care Budget Reform, The Independent Budget Veterans Service Organizations, The Military Coalition, and the American Federation for Government Employees. I thank them for their efforts and ongoing commitment to this legislation.

I thank the many Senators who have cosponsored this legislation, including Committee members Senators BURR, ROCKEFELLER, MURRAY, SANDERS,

BROWN, TESTER, BEGICH, BURRIS, SPECTER and ISAKSON. I am also delighted that Senator SNOWE was an original cosponsor of this bill and has worked hard in support of it.

Mr. President, this legislation will bring much needed stability and predictability to the VA health care system and consistent, high-quality health care to the veterans and I am delighted with today's action by the Senate.

The bill was ordered to be engrossed for a third reading and was read the third time.

Mr. WHITEHOUSE. Mr. President, I ask unanimous consent that the Senate proceed to Calendar No. 129, H.R. 1016, the House companion; that all after the enacting clause be stricken and the text of S. 423 be inserted in lieu thereof; the bill, as amended, be read a third time and passed; the motions to reconsider be laid upon the table; that upon passage of H.R. 1016, S. 423 be returned to the calendar, with no intervening action or debate.

The PRESIDING OFFICER. Without objection, it is so ordered.

The amendment was ordered to be engrossed and the bill to be read a third time.

The bill (H.R. 1016), as amended, was read the third time and passed, as follows:

H.R. 1016

Resolved, That the bill from the House of Representatives (H.R. 1016) entitled "An Act to amend title 38, United States Code, to provide advance appropriations authority for certain accounts of the Department of Veterans Affairs, and for other purposes.", do pass with the following amendment:

Strike out all after the enacting clause and insert:

SECTION 1. SHORT TITLE.

This Act may be cited as the "Veterans Health Care Budget Reform and Transparency Act of 2009".

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) Title 38, United States Code, authorizes the Secretary of Veterans Affairs to furnish hospital and domiciliary care, medical services, nursing home care, and related services to eligible and enrolled veterans, but only to the extent that appropriated resources and facilities are available for such purposes.

(2) For 19 of the past 22 fiscal years, funds have not been appropriated for the Department of Veterans Affairs for the provision of health care as of the commencement of the new fiscal year, causing the Department great challenges in planning and managing care for enrolled veterans, to the detriment of veterans.

(3) The cumulative effect of insufficient, late, and unpredictable funding for the Department for health care endangers the viability of the health care system of the Department and impairs the specialized health care resources the Department requires to maintain and improve the health of sick and disabled veterans.

(4) Appropriations for the health care programs of the Department have too often proven insufficient over the past decade, requiring the Secretary to ration health care and Congress to approve supplemental appropriations for those programs.

(5) Providing sufficient, timely, and predictable funding would ensure the Government meets its obligation to provide health care to sick and disabled veterans and ensure that all

veterans enrolled for health care through the Department have ready access to timely and high quality care.

(6) Providing sufficient, timely, and predictable funding would allow the Department to properly plan for and meet the needs of veterans.

SEC. 3. TWO-FISCAL YEAR BUDGET AUTHORITY FOR CERTAIN MEDICAL CARE ACCOUNTS OF THE DEPARTMENT OF VETERANS AFFAIRS.

(a) TWO-FISCAL YEAR BUDGET AUTHORITY.—

(1) IN GENERAL.—Chapter 1 of title 38, United States Code, is amended by inserting after section 113 the following new section:

"§113A. Two-fiscal year budget authority for certain medical care accounts

"(a) IN GENERAL.—Beginning with fiscal year 2011, new discretionary budget authority provided in an appropriations Act for the appropriations accounts of the Department specified in subsection (b) shall be made available for the fiscal year involved, and shall include new discretionary budget authority for such appropriations accounts that first become available for the first fiscal year after such fiscal year.

"(b) MEDICAL CARE ACCOUNTS.—The medical care accounts of the Department specified in this subsection are the medical care accounts of the Veterans Health Administration as follows:

"(1) Medical Services.

"(2) Medical Support and Compliance.

"(3) Medical Facilities."

(2) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 1 of such title is amended by inserting after the item relating to section 113 the following new item:

"113A. Two-fiscal year budget authority for certain medical care accounts."

SEC. 4. COMPTROLLER GENERAL OF THE UNITED STATES STUDY ON ADEQUACY AND ACCURACY OF BASELINE MODEL PROJECTIONS OF THE DEPARTMENT OF VETERANS AFFAIRS FOR HEALTH CARE EXPENDITURES.

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

(b) REPORTS.—

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

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

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

(B) The basis for such statement.

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

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

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

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

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

TO AMEND TITLE XI OF THE SOCIAL SECURITY ACT

Mr. WHITEHOUSE. Mr. President, I ask unanimous consent that the Finance Committee be discharged from further consideration of H.R. 3325 and that the Senate then proceed to its consideration.

The PRESIDING OFFICER. Without objection, it is so ordered. The clerk will report the bill by title.

The legislative clerk read as follows:

A bill (H.R. 3325) to amend title XI of the Social Security Act to reauthorize for 1 year the Work Incentives Planning and Assistance program and the Protection and Advocacy for Beneficiaries of Social Security program.

There being no objection, the Senate proceeded to consider the bill.

Mr. WHITEHOUSE. Mr. President, I ask unanimous consent that the bill be read three times, passed, and the motion to reconsider be laid upon the table; further that any statements be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The bill (H.R. 3325) was ordered to a third reading, was read the third time, and passed.

CAMPUS FIRE SAFETY MONTH

Mr. WHITEHOUSE. Mr. President, I ask unanimous consent that the Judiciary Committee be discharged from further consideration of S. Res. 40, and the Senate proceed to its immediate consideration.

The PRESIDING OFFICER. Without objection, it is so ordered.

The clerk will state the resolution by title.

The legislative clerk read as follows:

A resolution (S. Res. 40) designating September 2009 as "Campus Fire Safety Month."

There being no objection, the Senate proceeded to consider the resolution.

Mr. WHITEHOUSE. Mr. President, I ask unanimous consent that the resolution be agreed to, the preamble be agreed to, the motions to reconsider be laid upon the table, with no intervening action or debate, and any statements related to the resolution be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The resolution (S. Res. 40) was agreed to.

The preamble was agreed to.

The resolution, with its preamble, reads as follows:

S. RES. 40

Whereas, each year, States across the Nation formally designate September as Campus Fire Safety Month;

Whereas, since January 2000, at least 129 people, including students, parents, and children have died in campus-related fires;

Whereas more than 80 percent of those deaths occurred in off-campus residences;