

up-to-date policy on reporting of cases of infectious diseases, to require an independent assessment of the Veterans Integrated Service Networks and medical centers of the Department, and for other purposes.

S. 1592

At the request of Mr. RUBIO, the names of the Senator from Missouri (Mr. BLUNT) and the Senator from Alaska (Ms. MURKOWSKI) were added as cosponsors of S. 1592, a bill to provide for a delay of the individual mandate under the Patient Protection and Affordable Care Act until the American Health Benefit Exchanges are functioning properly.

S. 1610

At the request of Mr. MENENDEZ, the name of the Senator from Pennsylvania (Mr. CASEY) was added as a cosponsor of S. 1610, a bill to delay the implementation of certain provisions of the Biggert-Waters Flood Insurance Reform Act of 2012, and for other purposes.

S. 1642

At the request of Ms. LANDRIEU, the names of the Senator from North Carolina (Mrs. HAGAN) and the Senator from Arkansas (Mr. PRYOR) were added as cosponsors of S. 1642, a bill to permit the continuation of certain health plans.

S. 1647

At the request of Mr. ROBERTS, the name of the Senator from Florida (Mr. RUBIO) was added as a cosponsor of S. 1647, a bill to amend the Patient Protection and Affordable Care Act to repeal distributions for medicine qualified only if for prescribed drug or insulin.

S. RES. 75

At the request of Mr. KIRK, the name of the Senator from Arkansas (Mr. PRYOR) was added as a cosponsor of S. Res. 75, a resolution condemning the Government of Iran for its state-sponsored persecution of its Baha'i minority and its continued violation of the International Covenants on Human Rights.

S. RES. 165

At the request of Mr. DURBIN, the name of the Senator from Oklahoma (Mr. INHOFE) was added as a cosponsor of S. Res. 165, a resolution calling for the release from prison of former Prime Minister of Ukraine Yulia Tymoshenko in light of the recent European Court of Human Rights ruling.

S. RES. 251

At the request of Mr. SESSIONS, the names of the Senator from Missouri (Mr. BLUNT) and the Senator from South Dakota (Mr. JOHNSON) were added as cosponsors of S. Res. 251, a resolution expressing the sense of the Senate that the United States Preventive Services Task Force should reevaluate its recommendations against prostate-specific antigen-based screening for prostate cancer for men in all age groups in consultation with appropriate specialists.

S. RES. 284

At the request of Mr. RISCH, the name of the Senator from Kansas (Mr. MORAN) was added as a cosponsor of S. Res. 284, a resolution calling on the Government of Iran to immediately release Saeed Abedini and all other individuals detained on account of their religious beliefs.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. MCCONNELL:

S. 1662. A bill to provide for the introduction of pay-for-performance compensation mechanisms into contracts of the Department of Veterans Affairs with community-based outpatient clinics for the provision of health care services, and for other purposes; to the Committee on Veterans' Affairs.

Mr. MCCONNELL. 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. 1662

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

SECTION 1. SHORT TITLE.

This Act may be cited as the "Veterans Health Care Improvement Act of 2013".

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) Veterans of the Armed Forces have made tremendous sacrifices in the defense of freedom and liberty.

(2) Congress recognizes these great sacrifices and reaffirms America's strong commitment to its veterans.

(3) As part of the on-going congressional effort to recognize the sacrifices made by America's veterans, Congress has dramatically increased funding for the Department of Veterans Affairs for veterans health care in the years since September 11, 2001.

(4) Part of the funding for the Department of Veterans Affairs for veterans health care is allocated toward community-based outpatient clinics (CBOCs).

(5) A number of CBOCs are administered by private contractors.

(6) CBOCs administered by private contractors operate on a capitated basis.

(7) Some current contracts for CBOCs may create an incentive for contractors to enroll as many veterans as possible, without ensuring timely access to high quality health care for such veterans.

(8) The top priorities for CBOCs should be to provide quality health care and patient satisfaction for America's veterans.

(9) The Department of Veterans Affairs currently tracks the quality of patient care through its Computerized Patient Record System. However, fees paid to contractors are not currently adjusted automatically to reflect the quality of care provided to patients.

(10) A pay-for-performance payment model offers a promising approach to health care delivery by aligning the payment of fees to contractors with the achievement of better health outcomes for patients.

(11) The Department of Veterans Affairs should begin to emphasize pay-for-performance in its contracts with CBOCs.

SEC. 3. PAY-FOR-PERFORMANCE UNDER DEPARTMENT OF VETERANS AFFAIRS CONTRACTS WITH COMMUNITY-BASED OUTPATIENT HEALTH CARE CLINICS.

(a) PLAN REQUIRED.—Not later than one year after the date of the enactment of this Act, the Secretary of Veterans Affairs shall submit to Congress a plan to introduce pay-for-performance measures into contracts which compensate contractors of the Department of Veterans Affairs for the provision of health care services through community-based outpatient clinics (CBOCs).

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

(1) Measures to ensure that contracts of the Department for the provision of health care services through CBOCs begin to utilize pay-for-performance compensation mechanisms for compensating contractors for the provision of such services through such clinics, including mechanisms as follows:

(A) To provide incentives for clinics that provide high-quality health care.

(B) To provide incentives to better assure patient satisfaction.

(C) To impose penalties (including termination of contract) for clinics that provide substandard care.

(2) Mechanisms to collect and evaluate data on the outcomes of the services generally provided by CBOCs in order to provide for an assessment of the quality of health care provided by such clinics.

(3) Mechanisms to eliminate abuses in the provision of health care services by CBOCs under contracts that continue to utilize capitated-basis compensation mechanisms for compensating contractors.

(4) Mechanisms to ensure that veterans are not denied care or face undue delays in receiving care.

(c) IMPLEMENTATION.—The Secretary shall commence the implementation of the plan on the date that is 60 days after the date of the submittal of the plan. In implementing the plan, the Secretary may initially carry out one or more pilot programs to assess the feasibility and advisability of mechanisms under the plan.

(d) REPORTS.—Not later than 180 days after the date of the enactment of this Act and every 180 days thereafter, the Secretary shall submit to Congress a report setting forth the recommendations of the Secretary as to the feasibility and advisability of utilizing pay-for-performance compensation mechanisms in the provision of health care services by the Department by means in addition to CBOCs.

By Mr. NELSON (for himself, Mr. GRASSLEY, Mr. ROCKEFELLER, and Mr. ENZI):

S. 1672. A bill to amend title XIX of the Social Security Act to empower individuals with disabilities to establish their own supplemental needs trusts; to the Committee on Finance.

Mr. NELSON. Mr. President, I am pleased to introduce the Special Needs Trust Fairness Act with my friends, Senators GRASSLEY, ROCKEFELLER, and ENZI. Our common-sense bill will correct a fundamental flaw that prevents individuals with disabilities from creating their own trusts. This is a basic right that should have never been overlooked.

November is Long-Term Care Awareness Month, when hopefully many families will discuss and decide how to best plan for their retirement and their future health care needs. Unfortunately,

current law assumes people with disabilities lack the requisite capacity to create such trusts for their long-term care needs, so these individuals must turn to others to create such a trust. This creates an unnecessary and sometimes costly burden on the individual and additional caseloads in our over-worked courts.

I also am pleased to have the support of the American Association of People with Disabilities and Easter Seals as well as the National Academy of Elder Law Attorneys, the Academy of Florida Elder Law Attorneys, the Academy of Special Needs Planners, and the Florida Joint Public Policy Task Force for the Elderly and Disabled.

I urge my colleagues to support me in this legislation so that we can finally correct this flaw.

Mr. President, I ask unanimous consent that letters of support be printed in the RECORD.

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

AMERICAN ASSOCIATION OF
PEOPLE WITH DISABILITIES,
Washington, DC, October 31, 2013.

Hon. BILL NELSON,
U.S. Senate, Senate Hart Office Building,
Washington, DC.

Hon. CHARLES GRASSLEY,
U.S. Senate, Senate Hart Office Building,
Washington, DC.

DEAR SENATOR NELSON AND SENATOR GRASSLEY: I am pleased to support the Special Needs Trust Fairness Act of 2013 (H.R. 2123 in the House) on behalf of the American Association of People with Disabilities (AAPD). I commend your bipartisan effort to empower people with disabilities by introducing this legislation. The Special Needs Trust Fairness Act will allow people with disabilities to set up a special needs trust for themselves.

AAPD is the nation's largest disability rights organization. We promote equal opportunity, economic power, independent living and political participation for people with disabilities. Our members, including people with disabilities and our family, friends, and supporters, represent a powerful force for change.

A special needs trust allows assets to be held in a trust and protects against the risk of complete impoverishment. As you know, due to a glitch in the current law, a capable, competent person with a disability is prohibited from creating her or his own special needs trust. We are in the position of having to ask a parent, grandparent, guardian, or the court to do so for us. This legislation not only eradicates this discrimination against people with disabilities, but also promotes self-sufficiency and independence.

Thank you for your leadership on this important issue. AAPD looks forward to working with you on passage of the Special Needs Trust Fairness Act of 2013. Please feel free to contact Colin Schwartz if you have any questions.

Sincerely,

HENRY CLAYPOOL,
Executive Vice President.

EASTER SEALS,

OFFICE OF PUBLIC AFFAIRS,
Washington, DC, October 31, 2013.

Hon. BILL NELSON,
Chairman, Special Committee on Aging, U.S.
Senate, Dirksen Senate Office Building,
Washington, DC.

DEAR CHAIRMAN NELSON: Easter Seals is pleased to support your efforts to introduce the Special Needs Trust Fairness Act of 2013 in the United States Senate. This legislation would empower individuals with disabilities to help plan and save for their future daily living expenses by allowing them to set up a special needs trust for themselves, which is prevented under current law.

Easter Seals is a national nonprofit organization that provides individualized services and supports to help people with disabilities or special needs and their families reach their potential. Through our network of 72 community-based affiliates, including the four that serve the state of Florida, Easter Seals assisted more than 1.4 million individuals and their families last year through community-based services, including medical rehabilitation, employment, child care, adult and senior services, caregiving, and camping and recreation.

Easter Seals understands how important access to quality services and long-term supports are for individuals with disabilities. One tool to help ensure individuals with disabilities have access to these essential services and support beyond what is available through the government is through a special needs trust. Currently, a special needs trust can be created for a person with a disability by family members, a guardian or the court. Unfortunately, current law prevents people with disabilities from creating their own special needs trust for their asset, which can later be used to supplement living expenses and care when government benefits alone are insufficient. This legislation would remove this barrier, giving individuals with disabilities direct access to a current tool that can help them live independently and improve their health and well-being.

Thank you for your leadership on this important issue. Easter Seals looks forward to working with you following your introduction of the Special Needs Trust Fairness Act of 2013 to help ensure the legislation receives consideration and approval during the 113th Congress.

Sincerely,

KATY BEH NEAS,
Senior Vice President,
Government Relations.

NATIONAL ACADEMY OF ELDER
LAW ATTORNEYS, INC.,
Vienna, VA, November 7, 2013.

Hon. BILL NELSON,
Senate Hart Office Building,
Washington, DC.

DEAR SENATOR NELSON: We congratulate you for your leadership in protecting individuals with disabilities from unjust and discriminatory laws and we applaud your introduction of the Special Needs Trust Fairness Act of 2013. As you know, currently under the law, individuals with disabilities who have the requisite mental capacity are prevented from creating their own special needs trusts, which Congress has already authorized. They must have a parent, grandparent, guardian, or the court create their special needs trust even though they have the mental capacity to do it themselves.

As elder law attorneys, NAELA members' clients experience this injustice on a regular basis. Not all individuals have a parent, grandparent or guardian who can create their special needs trusts for them, and many of these individuals are forced to petition a court and pay additional fees to have

a special needs trust. The Special Needs Trust Fairness Act of 2013 will remove the current barriers that prevent an individual with disabilities from creating his or her own special needs trust.

NAELA is a professional association consisting of more than 4,300 attorneys who advocate for the rights of seniors and people with disabilities. Elder law attorneys are specialized and trained in a variety of areas in the law that address an individual's long-term care needs.

NAELA has made your legislation a top priority and stands ready to assist you in securing passage of the Fairness Act and eliminating this unjustified discrimination in the law.

Sincerely,

PETER G. WACHT, CAE,
Executive Director.
HOWARD S. KROOKS, CELA,
CAP,
President.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 289—EX-PRESSING THE SENSE OF THE SENATE THAT AMBUSH MARKETING ADVERSELY AFFECTS THE UNITED STATES OLYMPIC AND PARALYMPIC TEAMS AND SHOULD BE DISCOURAGED

Mr. BEGICH (for himself and Mr. BENNET) submitted the following resolution; which was referred to the Committee on Commerce, Science, and Transportation:

S. RES. 289

Whereas the 2014 Olympic and Paralympic Games will occur on February 7 through February 23, 2014, and March 7 through March 16, 2014, respectively, in Sochi, Russia;

Whereas more than 5,500 athletes from 80 nations will compete in 7 Olympic sports and 1,350 Paralympic athletes will compete in 5 sports;

Whereas American athletes have spent countless days, months, and years training to earn a spot on the United States Olympic or Paralympic teams;

Whereas the Ted Stevens Olympic and Amateur Sports Act (36 U.S.C. 220501 et seq.)—

(1) established the United States Olympic Committee as the coordinating body for all Olympic and Paralympic athletic activity in the United States;

(2) gave the United States Olympic Committee the exclusive right in the United States to use the words "Olympic", "Olympiad", "Paralympic", and "Paralympiad", the emblem of the United States Olympic Committee, and the symbols of the International Olympic Committee and the International Paralympic Committee; and

(3) empowered the United States Olympic Committee to authorize sponsors that contribute to the United States Olympic or Paralympic teams to use any trademark, symbol, insignia, or emblem of the International Olympic Committee, International Paralympic Committee, the Pan-American Sports Organization, or the United States Olympic Committee;

Whereas Team USA is significantly funded by 31 sponsors who assure that the United States has the best Olympic teams possible;

Whereas, in recent years, a number of entities in the United States have engaged in ambush marketing as a marketing strategy, affiliating themselves with the Olympic and Paralympic Games without becoming sponsors of Team USA;