Senator from Delaware (Mr. COONS) and the Senator from Florida (Mr. NELSON) were added as cosponsors of S. 2223, a bill to provide for an increase in the Federal minimum wage and to amend the Internal Revenue Code of 1986 to extend increased expensing limitations and the treatment of certain real property as section 179 property.

S. CON. RES. 34

At the request of Mr. RUBIO, the name of the Senator from Utah (Mr. HATCH) was added as a cosponsor of S. Con. Res. 34, a concurrent resolution expressing the sense of Congress that the President should hold the Russian Federation accountable for being in material breach of its obligations under the Intermediate-Range Nuclear Forces Treaty.

S. RES. 413

At the request of Mr. COONS, the names of the Senator from Maryland (Mr. CARDIN) and the Senator from New Hampshire (Mrs. SHAHEEN) were added as cosponsors of S. Res. 413, a resolution recognizing 20 years since the genocide in Rwanda, and affirming it is in the national interest of the United States to work in close coordination with international partners to help prevent and mitigate acts of genocide and mass atrocities.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. CARDIN (for himself, Mr. LEAHY, Mr. DURBIN, Mr. WHITEHOUSE, Mr. BOOKER, Mr. HARKIN, Mr. SANDERS, and Mrs. GILLIBRAND):

S. 2235. A bill to secure the Federal voting rights of persons when released from incarceration; to the Committee on the Judiciary.

Mr. CARDIN. Mr. President, today I am pleased to introduce the Democracy Restoration Act, known as the DRA. I want to thank Judiciary Committee Chairman LEAHY and Senators DURBIN, WHITEHOUSE, BOOKER, HARKIN, and SANDERS as original cosponsors of this legislation.

As the late Senator Kennedy often said, civil rights is the ''unfinished business'' of America. The Democracy Restoration Act would restore voting rights in Federal elections to approximately 5.8 million citizens who have been released from prison and are back living in their communities.

After the Civil War, Congress enacted and the States ratified the Fifteenth Amendment, which provides that ''the right of citizens of the United States to vote shall not be denied or abridged by the United States or by any State on account of race, color, or previous condition of servitude. The Congress shall have power to enforce this article by appropriate legislation.''

Unfortunately, many States passed laws during the Jim Crow period after the Civil War to make it more difficult for newly-freed slaves to vote in elections. Such laws included poll taxes, literacy tests, and disenfranchisement measures. Some disenfranchisement measures applied to misdemeanor convictions and in practice could result in lifetime disenfranchisement, even for individuals that successfully reintegrated into their communities as law-abiding citizens.

It took Congress and the States nearly another century to eliminate the poll tax, upon the ratification of the Twenty-Fourth Amendment in 1964. The Amendment provides that ''the rights of citizens of the United States to vote in any primary or other election for President or Vice President, or for Senator or Representative in Congress, shall not be denied or abridged by the United States or any State by reason of failure to pay any poll tax or other tax.''

Shortly thereafter Congress enacted the Voting Rights Act of 1965, which swept away numerous State laws and procedures that had denied African-Americans and other minorities their constitutional right to vote. For example, the act outlawed the use of literacy or history tests that voters had to pass before registering to vote or casting their ballot.

The act specifically prohibits States from imposing any ''voting qualification or prerequisite to voting, or standard, practice, or procedure . . . to deny or abridge the right of any citizen of the United States to vote on account of race or color.'' Congress overwhelmingly reauthorized the Act in 2006, which was signed into law by President George W. Bush. Congress is now working on legislation to revitalize the VRA after recent Supreme Court decisions curtailed its reach.

In 2014, I am concerned that there are still several areas where the legacy of Jim Crow laws and State disenfranchisement statutes lead to unfairness in Federal elections. First, State laws governing the restoration of voting rights vary widely throughout the country, such that persons in some States can easily regain their voting rights, while in other States persons effectively lose their right to vote permanently. Second, these State disenfranchisement laws have a disproportionate impact on racial and ethnic minorities. Third, this patchwork of State laws results in the lack of a uniform standard for eligibility to vote in Federal elections, and leads to an unfair disparity and unequal participation in Federal elections based solely on where an individual lives. Finally, studies indicate that former prisoners who have voting rights restored are less likely to reoffend, and disenfranchisement hinders their rehabilitation and reintegration into their community.

In 35 States, convicted individuals may not vote while they are on parole. In 11 States, a conviction can result in lifetime disenfranchisement. Several States require prisoners to seek discretionary pardons from Governors, or action by the parole or pardon board, in order to regain their right to vote. Several States deny the right to vote to individuals convicted of certain misdemeanors. States are slowly moving or repeal or loosen many of these barriers to voting for ex-prisoners.

An estimated 5,850,000 citizens of the United States, or about 1 in 40 adults in the United States, currently cannot vote as a result of a felony conviction. Of the 5,850,000 citizens barred from voting, only 25 percent are in prison. By contrast, 75 percent of the disenfranchised reside in their communities while on probation or parole after having completed their sentences. Approximately 2,600,000 citizens who have completed their sentences remain disenfranchised due to restrictive State laws. In six States: Alabama, Florida, Kentucky, Mississippi, Tennessee, and Virginia—more than 7 percent of the total population is disenfranchised.

Studies show that a growing number of African-American men, for example, will be disenfranchised at some point in their life, partly due to mandatory minimum sentencing laws that have a disproportionate impact on minorities.

Eight percent of the African-American population, or 2 million African-Americans, are disenfranchised. Given current rates of incarceration, approximately 1 in 3 of the next generation of African-American men will be disenfranchised at some point during their lifetime. Currently, 1 of every 13 African-Americans are rendered unable to vote because of felony disenfranchisement, which is a rate 4 times greater than non African-Americans. Nearly 8 percent of African-Americans are disenfranchised, compared to less than 2 percent of non-African-Americans. In 3 states more than 1 in 5 African-Americans are unable to vote because of prior convictions: the rates are Florida at 23 percent, Kentucky at 22 percent, and Virginia at 20 percent.

Latino citizens are disproportionately disenfranchised based on their disproportionate representation in the criminal justice system. If current incarceration trends hold, 17 percent of Latino men will be incarcerated during their lifetime, in contrast to less than 6 percent of non-Latino white men. When analyzing the data across 10 States, Latinos generally have disproportionately higher rates of disenfranchisement compared to their presence in the voting age population. In 6 out of 10 States studies in 2003, Latinos constitute more than 10 percent of the total number of persons disenfranchised by State felony laws. In 4 States, California, 37 percent; New York, 34 percent; Texas, 30 percent; and Arizona, 27 percent, Latinos were disenfranchised by a rate of more than 25 percent. Native Americans are also disproportionately disenfranchised.

Congress has addressed part of this problem by enacting the Fair Sentencing Act to partially reduce the sentencing disparity between crack cocaine and powder cocaine convictions. Congress is now considering legislation

that would more broadly revise mandatory sentencing procedures and create a fairer system of sentencing. While I welcome these steps, I believe that Congress should take stronger action now to remedy this particular problem.

The legislation would restore voting rights to prisoners after their release from incarceration. It requires that prisons receiving Federal funds notify people about their right to vote in Federal elections when they are leaving prison, sentenced to probation, or convicted of a misdemeanor. The bill authorizes the Department of Justice and individuals harmed by violation of this act to sue to enforce its provisions. The bill generally provides State election officials with a grace period to resolve voter eligibility complaints without a lawsuit before an election.

The legislation is narrowly crafted to apply to Federal elections, and retains the States' authorities to generally establish voting qualifications. This legislation is therefore consistent with Congressional authority under the Constitution and voting rights statutes, as interpreted by the U.S. Supreme Court.

I am pleased that this legislation has been endorsed by a large coalition of public interest organizations, including: civil rights and reform organizations; religious and faith-based organizations; and law enforcement and criminal justice organizations. In particular I want to thank the Brennan Center for Justice, the ACLU, the Leadership Conference on Civil and Human Rights, and the NAACP for their work on this legislation.

This legislation is ultimately designed to reduce recidivism rates and help reintegrate ex-prisoners back into society. When prisoners are released, they are expected to obey the law, get a job, and pay taxes as they are rehabilitated and reintegrated into their community. With these responsibilities and obligations of citizenship should also come the rights of citizenship, including the right to vote.

In 2008, President George W. Bush signed the Second Chance Act into law, after overwhelming approval and strong bipartisan support in Congress. The legislation expanded the Prison Re-Entry Initiative, by providing job training, placement services, transitional housing, drug treatment, medical care, and faith-based mentoring. At the signing ceremony, President Bush said: ''We believe that even those who have struggled with a dark past can find brighter days ahead. One way we act on that belief is by helping former prisoners who have paid for their crimes. We help them build new lives as productive members of our society.''

The Democracy Restoration Act is fully consistent with the goals of the Second Chance Act, as Congress and the States seek to reduce recidivism rates, strengthen the quality of life in our communities and make them safer, and reduce the burden on taxpayers.

More recently, in a February 2014 speech, Attorney General Eric Holder called on elected officials to reexamine disenfranchisement statutes and enact reforms to restore voting rights.

I therefore urge Congress to address the issue of disenfranchisement and support this legislation.

By Mrs. MURRAY:

S. 2243. A bill to expand eligibility for the program of comprehensive assistance for family caregivers of the Department of Veterans Affairs, to expand benefits available to participants under such program, to enhance special compensation for members of the uniformed services who require assistance in everyday life, and for other purposes; to the Committee on Veterans' Affairs.

Mrs. MURRAY. Mr. President, I come to the floor today to introduce the Military and Veteran Caregiver Services Improvement Act. This is a bill that will make critical improvements to how we support our ill and injured veterans and their caregivers.

I am especially pleased to be joined this morning by our former colleague Senator Elizabeth Dole, who has come to the floor today and who has been such a tremendous and invaluable person in working to bring these caregiver issues to national attention. I really appreciate her being here and being such a champion on this, and a leader. She has brought people from all over the country together to make a difference for our caregivers and for our veterans.

We also have many of the very caregivers this bill is designed to help—representing, by the way, almost every State—in the gallery today to see this legislation introduced. I am very proud they are here. It is incredibly important that they are here today and on Capitol Hill because, as the Presiding Officer knows, our caregivers work extremely hard without any recognition, and they rarely ask for anything for themselves. In fact, most of the caregivers I have met sound much like the veterans and servicemembers they care for when they say: Oh, this isn't about me; I am just doing my part.

So last week, when RAND released their comprehensive, groundbreaking study on military caregivers, they chose a very appropriate title: ''Hidden Heroes.'' That is why it is so important to have all of those caregivers here today and working constantly to make sure we all understand what they do.

I am very proud to be introducing this bill not only as a Senator and a senior member of the Veterans' Affairs Committee and someone who has fought so hard for the implementation of the VA caregivers program, but, as many of my colleagues know, for me, this is really a deeply personal issue.

Growing up, I saw firsthand the many ways military service can affect both veterans and their families. My father served in World War II. He was among the first soldiers to land in Okinawa. He came home as a disabled veteran and was awarded the Purple Heart.

Later in life he was diagnosed with multiple sclerosis. Eventually he became too sick to work at the little five-and-dime store he managed, and my mom became his caregiver. This was no small burden for my mom, who had to raise seven children, care for my dad, and was now all of a sudden the primary source of income for our family.

Today, after more than a decade of two wars, men and women in uniform, as did my father, have done everything that has been asked of them and so much more. But now, as our role in this conflict winds down, the support we provide cannot end when the war no longer leads the nightly news broadcasts and disappears from the front pages of our newspapers. It is an enduring commitment for those who will first need help now or those who will need help later in their lives. It is a lifetime of care for so many.

In so many cases, the responsibility for providing that care often falls on the loved ones of severely injured veterans. Their courage and their devotion in taking on these responsibilities is inspiring for all of us. They are the reason we created the VA caregivers program, which now provides these family members with health care and counseling and training and respite and a living stipend.

I was proud to lead congressional efforts to push the VA to stop delaying the implementation of the caregivers program and restore the eligibility criteria to the intent of the law. Thankfully, as we know, in the end the White House and the VA announced they would allow more caregivers of more veterans to be eligible for benefits and finally got the program implemented. But there is a lot more we can do because, as the RAND study clearly shows us, caregivers are still struggling. Military caregivers have significantly worse health than noncaregivers, and they are at higher risk for depression. The stress they live under jeopardizes their relationships and puts them at greater risk of divorce, and they have trouble with employment and keeping health insurance. There is no way we will sit by and let caregivers and veterans face this on their own—not when we can make it a little bit easier.

The bill we are introducing this morning, the Military and Veterans Caregivers and Services Improvement Act, makes some broad changes to help give caregivers and veterans the tools they need to help tackle what they face. I wish to take a moment on the floor today to highlight just a few of the important provisions contained in this bill.

First and foremost, this bill will make veterans of all eras eligible for the full range of caregiver support services. We took an important first step in creating the post-9/11 veterans caregivers program. Now that the VA has had some time to get this program

working, it is time for us to get services to our older veterans who are also in great need.

The bill also expands eligibility for the VA caregivers program by recognizing a wider array of needs which may require caregiving, placing greater emphasis on mental health injuries and removing restrictions on who is eligible to become a caregiver.

Under the bill, caregiver services will also be expanded to include childcare, financial advice, and legal counseling. Those are some of the top and currently unmet needs of family caregivers.

The bill will also require the Federal Government to meet the unique needs of employees who are caregivers with flexible work arrangements so they can stay employed while caring for their veteran. I, of course, want to see all employers make these kinds of accommodations for caregivers, but I want the Federal Government to lead by example.

When it comes to the Department of Defense, the bill makes several improvements to the special compensation for assistance with activities of daily living—first, by making those benefits tax exempt, and second, eligibility for special compensation would also be set at a more appropriate level of disability and would be more inclusive of mental health injuries and TBI.

The Military and Veteran Caregiver Services Improvement Act also addresses a key theme identified by RAND. There are many services inside the government and outside to assist caregivers, but these programs are not coordinated. Eligibility criteria are different for each one of them, and there is not enough oversight to ensure the quality of those services. So what our bill does is create a national interagency working group on caregiver services. It will coordinate caregiver policy among all the different departments and create standards of care and oversight tools to make sure our veterans and their caregivers receive high-quality services.

The last provision I wish to highlight is intended to help a military spouse who may be required to become the primary source of income for the family after the servicemember has been injured, just as my mom was. In order to help that spouse get the job they need to support the family, this bill will allow the injured servicemember or veteran to transfer their post-9/11 GI bill benefits to their dependents by exempting them from the length of service requirements that would currently prevent them from transferring those benefits. Injured veterans should not be penalized because their injury occurred early in their service.

This provision is extremely important because for 2013 the unemployment rate for people with bachelor's degrees was only 4 percent—about one-third lower than the national average—and their median weekly earnings were 34 percent higher than the national average. Meanwhile, the RAND study found that 62 percent of post-9/11 caregivers reported financial strain because of their caregiving.

I know this is important because I saw it in my family. For my family, the additional education my mom obtained got her a better job so she could support her family while she was caring for my dad. It is what made the difference.

I want to again thank some key people who have been true leaders to get this to this point.

I again want to thank Senator Dole and her great staff at the Elizabeth Dole Foundation for keeping our country focused on the needs of our military and veteran caregivers and for bringing such national momentum to make the changes we need.

I also want to thank the Wounded Warrior Project, which was a driving force in creating the very first VA caregivers program. They have provided invaluable advice in developing the bill I am introducing today.

Finally, I really want to thank the outstanding folks at the RAND Corporation. They have put together a truly groundbreaking study that takes stock of where care and benefits have fallen short, where new needs are emerging, and how we can make it easier for veterans to get the care and benefits they deserve.

There are many ways for the whole country—government, nonprofits, businesses, community leaders, faith leaders—to do more to help. For all of us in Congress, that starts with passing this legislation to help our hidden heroes—our military and veteran caregivers.

I again want to thank all of our tremendous caregivers in this country for their service, for not asking for help, as they should. We are the ones who need to ask for help for them and to be there to provide it.

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. 2243

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 ''Military and Veteran Caregiver Services Improvement Act of 2014''.

SEC. 2. EXPANSION OF ELIGIBILITY FOR PARTICIPATION IN AND SERVICES PROVIDED UNDER FAMILY CAREGIVER PROGRAM OF DEPARTMENT OF VETERANS AFFAIRS.

(a) FAMILY CAREGIVER PROGRAM.—

(1) EXPANSION OF ELIGIBILITY.—Subsection (a)(2)(B) of section 1720G of title 38, United States Code, is amended by striking ''on or after September 11, 2001''.

(2) CLARIFICATION OF ELIGIBILITY FOR ILLNESS.—Such subsection is further amended by inserting ''or illness'' after ''serious injury''.

(3) EXPANSION OF NEEDED SERVICES IN ELIGIBILITY CRITERIA.—Subsection (a)(2)(C) of such section is amended—

(A) in clause (ii), by striking ''; or'' and inserting a semicolon;

(B) by redesignating clause (iii) as clause (iv); and

(C) by inserting after clause (ii) the following new clause (iii):

''(iii) a need for regular or extensive instruction or supervision in completing two or more instrumental activities of daily living; or''.

(4) EXPANSION OF SERVICES PROVIDED.—Subsection (a)(3)(A)(ii) of such section is amended—

(A) in subclause (IV), by striking ''; and'' and inserting a semicolon;

(B) in subclause (V), by striking the period at the end and inserting a semicolon; and

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

''(VI) child care services or a monthly stipend for such services if such services are not readily available from the Department;

''(VII) financial planning services relating to the needs of injured and ill veterans and their caregivers; and

''(VIII) legal services, including legal advice and consultation, relating to the needs of injured and ill veterans and their caregivers.''.

(5) EXPANSION OF RESPITE CARE PROVIDED.—Subsection (a)(3)(B) of such section is amended by striking ''shall be'' and all that follows through the period at the end and inserting ''shall—

''(i) be medically and age-appropriate;

''(ii) include in-home care; and

''(iii) include peer-oriented group activities.''.

(6) MODIFICATION OF STIPEND CALCULATION.—Subsection (a)(3)(C) of such section is amended—

(A) by redesignating clause (iii) as clause (iv); and

(B) by inserting after clause (ii) the following new clause (iii):

''(iii) In determining the amount and degree of personal services provided under clause (i) with respect to an eligible veteran whose need for personal care services is based in whole or in part on a need for supervision or protection under paragraph (2)(C)(ii) or regular instruction or supervision in completing tasks under paragraph (2)(C)(iii), the Secretary shall take into account the following:

''(I) The assessment by the family caregiver of the needs and limitations of the veteran.

''(II) The extent to which the veteran can function safely and independently in the absence of such supervision, protection, or instruction.

''(III) The amount of time required for the family caregiver to provide such supervision, protection, or instruction to the veteran.''.

(7) PERIODIC EVALUATION OF NEED FOR CERTAIN SERVICES.—Subsection (a)(3) of such section is amended by adding at the end the following new subparagraph:

''(D) In providing instruction, preparation, and training under subparagraph (A)(i)(I) and technical support under subparagraph (A)(i)(II) to each family caregiver who is approved as a provider of personal care services for an eligible veteran under paragraph (6), the Secretary shall periodically evaluate the needs of the eligible veteran and the skills of the family caregiver of such veteran to determine if additional instruction, preparation, training, or technical support under those subparagraphs is necessary.''.

(b) REPEAL OF GENERAL CAREGIVER SUPPORT PROGRAM.—Such section is amended by striking subsection (b).

(c) PROVISION OF ASSISTANCE TO CAREGIVERS OF CERTAIN VETERANS.—Such section is further amended by inserting after subsection (a) the following new subsection (b):

''(b) PROVISION OF ASSISTANCE TO CAREGIVERS OF CERTAIN VETERANS.—(1) In providing assistance under subsection (a) to family caregivers of eligible veterans who were discharged from the Armed Forces before September 11, 2001, the Secretary may enter into memoranda of understanding with agencies, States, and other entities to provide such assistance to such veterans.

''(2) The Secretary may provide assistance under this subsection only if such assistance is reasonably accessible to the veteran and is substantially equivalent or better in quality to similar services provided by the Department.

''(3) The Secretary may provide fair compensation to entities that provide assistance under this subsection pursuant to memoranda of understanding entered into under paragraph (1).

''(4) In carrying out this subsection, the Secretary shall work with the interagency working group on policies relating to caregivers of veterans and members of the Armed Forces established under section 7 of the Military and Veteran Caregiver Services Improvement Act of 2014.''.

(d) MODIFICATION OF DEFINITION OF FAMILY MEMBER.—Subparagraph (B) of subsection (d)(3) of such section is amended to read as follows:

''(B) is not a member of the family of the veteran and does not provide care to the veteran on a professional basis.''.

(e) MODIFICATION OF DEFINITION OF PERSONAL CARE SERVICES.—Subsection (d)(4) of such section is amended—

(1) in subparagraph (A), by striking ''independent'';

(2) by redesignating subparagraph (B) as subparagraph (D); and

(3) by inserting after subparagraph (A) the following new subparagraphs:

''(B) Supervision or protection based on symptoms or residuals of neurological or other impairment or injury.

''(C) Regular or extensive instruction or supervision in completing two or more instrumental activities of daily living.''.

(f) ANNUAL EVALUATION REPORT.—

(1) IN GENERAL.—Paragraph (2) of section 101(c) of the Caregivers and Veterans Omnibus Health Services Act of 2010 (Public Law 111–163; 38 U.S.C. 1720G note) is amended to read as follows:

''(2) CONTENTS.—Each report required by paragraph (1) after the date of the enactment of the Military and Veteran Caregiver Services Improvement Act of 2014 shall include the following with respect to the program of comprehensive assistance for family caregivers required by subsection (a)(1) of such section 1720G:

''(A) The number of family caregivers that received assistance under such program.

''(B) The cost to the Department of providing assistance under such program.

''(C) A description of the outcomes achieved by, and any measurable benefits of, carrying out such program.

''(D) An assessment of the effectiveness and the efficiency of the implementation of such program, including a description of any barriers to accessing and receiving care and services under such program.

''(E) A description of the outreach activities carried out by the Secretary under such program.

''(F) An assessment of the manner in which resources are expended by the Secretary under such program, particularly with respect to the provision of monthly personal caregiver stipends under subsection (a)(3)(A)(ii)(V) of such section 1720G.

''(G) An evaluation of the sufficiency and consistency of the training provided to family caregivers under such program in preparing family caregivers to provide care to veterans under such program.

''(H) Such recommendations, including recommendations for legislative or administrative action, as the Secretary considers appropriate in light of carrying out such program.''.

(g) CONFORMING AMENDMENTS.—

(1) ELIGIBLE VETERAN.—Subsection (a)(2) of such section is amended, in the matter preceding subparagraph (A), by striking ''subsection'' and inserting ''section''.

(2) DEFINITIONS.—Subsection (d) of such section is amended—

(A) in paragraph (1), by striking ''under subsection (a) or a covered veteran under subsection (b)'';

(B) in paragraph (2), by striking ''under subsection (a)'';

(C) in paragraph (3), by striking ''under subsection (a)''; and

(D) in paragraph (4), in the matter preceding subparagraph (A), by striking ''under subsection (a) or a covered veteran under subsection (b)''; and

(3) COUNSELING, TRAINING, AND MENTAL HEALTH SERVICES.—Section 1782(c)(2) of title 38, United States Code, is amended by striking ''or a caregiver of a covered veteran''.

SEC. 3. AUTHORITY TO TRANSFER ENTITLEMENT TO POST-9/11 EDUCATION ASSISTANCE TO FAMILY MEMBERS BY SERIOUSLY INJURED VETERANS IN NEED OF PERSONAL CARE SERVICES.

(a) IN GENERAL.—Subchapter II of chapter 33 of title 38, United States Code, is amended by adding at the end the following new section:

''§ 3319A. Authority to transfer unused education benefits to family members by seriously injured veterans

''(a) IN GENERAL.—Subject to the provisions of this section, the Secretary may permit an individual described in subsection (b) who is entitled to educational assistance under this chapter to elect to transfer to one or more of the dependents specified in subsection (c) a portion of such individual's entitlement to such assistance, subject to the limitation under subsection (d).

''(b) ELIGIBLE INDIVIDUALS.—An individual referred to in subsection (a) is any individual who—

''(1) retired for physical disability under chapter 61 of title 10; or

''(2) is described in paragraph (2) of section 1720G(a) of this title and who is participating in the program established under paragraph (1) of such section.

''(c) ELIGIBLE DEPENDENTS.—An individual approved to transfer an entitlement to educational assistance under this section may transfer the individual's entitlement as follows:

''(1) To the individual's spouse.

''(2) To one or more of the individual's children.

''(3) To a combination of the individuals referred to in paragraphs (1) and (2).

''(d) LIMITATION ON MONTHS OF TRANSFER.—(1) The total number of months of entitlement transferred by a individual under this section may not exceed 36 months.

''(2) The Secretary may prescribe regulations that would limit the months of entitlement that may be transferred under this section to no less than 18 months.

''(e) DESIGNATION OF TRANSFEREE.—An individual transferring an entitlement to educational assistance under this section shall—

''(1) designate the dependent or dependents to whom such entitlement is being transferred;

''(2) designate the number of months of such entitlement to be transferred to each such dependent; and

''(3) specify the period for which the transfer shall be effective for each dependent designated under paragraph (1).

''(f) TIME FOR TRANSFER; REVOCATION AND MODIFICATION.—(1) Transfer of entitlement to educational assistance under this section shall be subject to the time limitation for use of entitlement under section 3321 of this title.

''(2)(A) An individual transferring entitlement under this section may modify or revoke at any time the transfer of any unused portion of the entitlement so transferred.

''(B) The modification or revocation of the transfer of entitlement under this paragraph shall be made by the submittal of written notice of the action to the Secretary.

''(3) Entitlement transferred under this section may not be treated as marital property, or the asset of a marital estate, subject to division in a divorce or other civil proceeding.

''(g) COMMENCEMENT OF USE.—A dependent child to whom entitlement to educational assistance is transferred under this section may not commence the use of the transferred entitlement until either—

''(1) the completion by the child of the requirements of a secondary school diploma (or equivalency certificate); or

''(2) the attainment by the child of 18 years of age.

''(h) ADDITIONAL ADMINISTRATIVE MATTERS.—(1) The use of any entitlement to educational assistance transferred under this section shall be charged against the entitlement of the individual making the transfer at the rate of one month for each month of transferred entitlement that is used.

''(2) Except as provided under subsection (e)(2) and subject to paragraphs (5) and (6), a dependent to whom entitlement is transferred under this section is entitled to educational assistance under this chapter in the same manner as the individual from whom the entitlement was transferred.

''(3) The monthly rate of educational assistance payable to a dependent to whom entitlement referred to in paragraph (2) is transferred under this section shall be payable at the same rate as such entitlement would otherwise be payable under this chapter to the individual making the transfer.

''(4) The death of an individual transferring an entitlement under this section shall not affect the use of the entitlement by the dependent to whom the entitlement is transferred.

''(5)(A) A child to whom entitlement is transferred under this section may use the benefits transferred without regard to the 15-year delimiting date specified in section 3321 of this title, but may not, except as provided in subparagraph (B), use any benefits so transferred after attaining the age of 26 years.

''(B)(i) Subject to clause (ii), in the case of a child who, before attaining the age of 26 years, is prevented from pursuing a chosen program of education by reason of acting as the primary provider of personal care services for a veteran or member of the Armed Forces under section 1720G(a) of this title, the child may use the benefits beginning on the date specified in clause (iii) for a period whose length is specified in clause (iv).

''(ii) Clause (i) shall not apply with respect to the period of an individual as a primary provider of personal care services if the period concludes with the revocation of the individual's designation as such a primary provider under section 1720G(a)(7)(D) of this title.

''(iii) The date specified in this clause for the beginning of the use of benefits by a child under clause (i) is the later of—

''(I) the date on which the child ceases acting as the primary provider of personal care services for the veteran or member concerned as described in clause (i);

''(II) the date on which it is reasonably feasible, as determined under regulations prescribed by the Secretary, for the child to initiate or resume the use of benefits; or

''(III) the date on which the child attains the age of 26 years.

''(iv) The length of the period specified in this clause for the use of benefits by a child under clause (i) is the length equal to the length of the period that—

''(I) begins on the date on which the child begins acting as the primary provider of personal care services for the veteran or member concerned as described in clause (i); and

''(II) ends on the later of—

''(aa) the date on which the child ceases acting as the primary provider of personal care services for the veteran or member as described in clause (i); or

''(bb) the date on which it is reasonably feasible, as so determined, for the child to initiate or resume the use of benefits.

''(6) The purposes for which a dependent to whom entitlement is transferred under this section may use such entitlement shall include the pursuit and completion of the requirements of a secondary school diploma (or equivalency certificate).

''(7) The administrative provisions of this chapter shall apply to the use of entitlement transferred under this section, except that the dependent to whom the entitlement is transferred shall be treated as the eligible individual for purposes of such provisions.

''(i) OVERPAYMENT.—(1) In the event of an overpayment of educational assistance with respect to a dependent to whom entitlement is transferred under this section, the dependent and the individual making the transfer shall be jointly and severally liable to the United States for the amount of the overpayment for purposes of section 3685 of this title.

''(2)(A) Except as provided in subparagraph (B), if an individual transferring entitlement under this section fails to complete the service agreed to by the individual under subsection (b)(1) in accordance with the terms of the agreement of the individual under that subsection, the amount of any transferred entitlement under this section that is used by a dependent of the individual as of the date of such failure shall be treated as an overpayment of educational assistance under paragraph (1).

''(B) Subparagraph (A) shall not apply in the case of an individual who fails to complete service agreed to by the individual—

''(i) by reason of the death of the individual; or

''(ii) for a reason referred to in section 3311(c)(4) of this title.

''(j) REGULATIONS.—(1) The Secretary shall prescribe regulations to carry out this section.

''(2) Such regulations shall specify—

''(A) the manner of authorizing the transfer of entitlements under this section;

''(B) the eligibility criteria in accordance with subsection (b); and

''(C) the manner and effect of an election to modify or revoke a transfer of entitlement under subsection (f)(2).''.

(b) CONFORMING AMENDMENTS.—

(1) TRANSFERS BY MEMBERS OF ARMED FORCES.—The heading of section 3319 of such title is amended by inserting ''**by members of the Armed Forces**'' after ''**family members**''.

(2) BAR TO DUPLICATION OF EDUCATIONAL ASSISTANCE BENEFITS.—Section 3322(e) of such title is amended by inserting ''or 3319A'' after ''and 3319''.

(c) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 33 of such title is amended by striking the item relating to section 3319 and inserting the following new items:

''3319. Authority to transfer unused education benefits to family members by members of the Armed Forces.

''3319A. Authority to transfer unused education benefits to family members by seriously injured veterans.''.

SEC. 4. ENHANCEMENT OF SPECIAL COMPENSATION FOR MEMBERS OF THE UNIFORMED SERVICES WITH INJURIES OR ILLNESSES REQUIRING ASSISTANCE IN EVERYDAY LIVING.

(a) EXPANSION OF COVERED MEMBERS.—Subsection (b) of section 439 of title 37, United States Code, is amended—

(1) by striking paragraphs (1) through (3) and inserting the following new paragraphs:

''(1) has a serious injury or illness that was incurred or aggravated in the line of duty;

''(2) is in need of personal care services (including supervision or protection or regular instruction or supervision) as a result of such injury or illness; and''; and

(2) by redesignating paragraph (4) as paragraph (3).

(b) NONTAXABILITY OF SPECIAL COMPENSATION.—Such section is further amended—

(1) by redesignating subsections (e), (f), (g), and (h) as subsections (g), (h), (i) and (j), respectively; and

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

''(e) NONTAXABILITY OF COMPENSATION.—Monthly special compensation paid under subsection (a) shall not be included in income for purposes of the Internal Revenue Code of 1986.''.

(c) PROVISION OF ASSISTANCE TO FAMILY CAREGIVERS.—Such section is further amended by inserting after subsection (e), as amended by subsection (b) of this section, the following new subsection (f):

''(f) ASSISTANCE FOR FAMILY CAREGIVERS.—(1) The Secretary of Veterans Affairs shall provide family caregivers of a member in receipt of monthly special compensation under subsection (a) the assistance required to be provided to family caregivers of eligible veterans under section 1720G(a)(3)(A) of title 38 (other than the monthly personal caregiver stipend provided for in clause (ii)(V) of such section). For purposes of the provision of such assistance under this subsection, the definitions in section 1720G(d) of title 38 shall apply, except that any reference in such definitions to a veteran or eligible veteran shall be deemed to be a reference to the member concerned.

''(2) The Secretary of Veterans Affairs shall provide assistance under this subsection—

''(A) in accordance with a memorandum of understanding entered into by the Secretary of Veterans Affairs and the Secretary of Defense; and

''(B) in accordance with a memorandum of understanding entered into by the Secretary of Veterans Affairs and the Secretary of Homeland Security (with respect to members of the Coast Guard).''.

(d) EXPANSION OF COVERED INJURIES AND ILLNESSES.—Subsection (i) of such section, as redesignated by subsection (b)(1) of this section, is amended to read as follows:

''(i) SERIOUS INJURY OR ILLNESS DEFINED.—In this section, the term 'serious injury or illness' means an injury, disorder, or illness (including traumatic brain injury, psychological trauma, or other mental disorder) that—

''(1) renders the afflicted person unable to carry out one or more activities of daily living;

''(2) renders the afflicted person in need of supervision or protection due to the manifestation by such person of symptoms or residuals of neurological or other impairment or injury;

''(3) renders the afflicted person in need of regular or extensive instruction or supervision in completing two or more instrumental activities of daily living; or

''(4) otherwise impairs the afflicted person in such manner as the Secretary of Defense (or the Secretary of Homeland Security, with respect to the Coast Guard) prescribes for purposes of this section.''.

(e) CLERICAL AMENDMENTS.—

(1) HEADING AMENDMENT.—The heading for such section is amended to read as follows:

''§ 439. Special compensation: members of the uniformed services with serious injuries or illnesses requiring assistance in everyday living''.

(2) TABLE OF SECTIONS AMENDMENT.—The table of sections at the beginning of chapter 7 of such title is amended by striking the item relating to section 439 and inserting the following new item:

''439. Special compensation: members of the uniformed services with serious injuries or illnesses requiring assistance in everyday living.''.

SEC. 5. FLEXIBLE WORK ARRANGEMENTS FOR CERTAIN FEDERAL EMPLOYEES.

(a) DEFINITION OF COVERED EMPLOYEE.—In this section, the term ''covered employee'' means an employee (as defined in section 2105 of title 5, United States Code) who—

(1) is a caregiver, as defined in section 1720G of title 38, United States Code; or

(2) is a caregiver of an individual who receives compensation under section 439 of title 37, United States Code.

(b) AUTHORITY TO ALLOW FLEXIBLE WORK ARRANGEMENTS.—The Director of the Office of Personnel Management may promulgate regulations under which a covered employee may—

(1) use a flexible schedule or compressed schedule in accordance with subchapter II of chapter 61 of title 5, United States Code; or

(2) telework in accordance with chapter 65 of title 5, United States Code.

SEC. 6. LIFESPAN RESPITE CARE.

(a) DEFINITIONS.—Section 2901 of the Public Health Service Act (42 U.S.C. 300ii) is amended—

(1) in paragraph (1)—

(A) by redesignating subparagraphs (A) through (C) as clauses (i) through (iii), respectively, and realigning the margins accordingly;

(B) by striking ''who requires care or supervision to—'' and inserting ''who—

''(A) requires care or supervision to—'';

(C) by striking the period and inserting ''; or''; and

(D) by adding at the end the following:

''(B) is a veteran participating in the program of comprehensive assistance for family caregivers under section 1720G of title 38, United States Code.''; and

(2) in paragraph (5), by striking ''or another unpaid adult,'' and inserting ''another unpaid adult, or a family caregiver as defined in section 1720G of title 38, United States Code, who receives compensation under such section,''.

(b) GRANTS AND COOPERATIVE AGREEMENTS.—Section 2902(c) of the Public Health Service Act (42 U.S.C. 300ii-1(c)) is amended by inserting ''and the interagency working group on policies relating to caregivers of veterans established under section 7 of the Military and Veteran Caregiver Services Improvement Act of 2014'' after ''Human Services''.

(c) AUTHORIZATION OF APPROPRIATIONS.—Section 2905 of the Public Health Service Act (42 U.S.C. 300ii-4) is amended—

(1) in paragraph (4), by striking ''and'' at the end;

(2) in paragraph (5), by striking the period and inserting ''; and''; and

(3) by adding at the end the following:

''(6) $15,000,000 for each of fiscal years 2015 through 2019.''.

SEC. 7. INTERAGENCY WORKING GROUP ON CAREGIVER POLICY.

(a) ESTABLISHMENT.—There shall be established in the executive branch an interagency working group on policies relating to caregivers of veterans and members of the Armed Forces (in this section referred to as the ''working group'').

(b) COMPOSITION.—

(1) IN GENERAL.—The working group shall be composed of the following:

(A) A chair selected by the President.

(B) A representative from each of the following agencies or organizations selected by the head of such agency or organization:

(i) The Department of Veterans Affairs.

(ii) The Department of Defense.

(iii) The Department of Health and Human Services.

(iv) The Department of Labor.

(v) The Centers for Medicare and Medicaid Services.

(2) ADVISORS.—The chair may select any of the following individuals that the chair considers appropriate to advise the working group in carrying out the duties of the working group:

(A) Academic experts in fields relating to caregivers.

(B) Clinicians.

(C) Caregivers.

(D) Individuals in receipt of caregiver services.

(c) DUTIES.—The duties of the working group are as follows:

(1) To regularly review policies relating to caregivers of veterans and members of the Armed Forces.

(2) To coordinate and oversee the implementation of policies relating to caregivers of veterans and members of the Armed Forces.

(3) To evaluate the effectiveness of policies relating to caregivers of veterans and members of the Armed Forces, including programs in each relevant agency, by developing and applying specific goals and performance measures.

(4) To develop standards of care for caregiver services and respite care services provided to a caregiver, veteran, or member of the Armed Forces by a non-profit or private sector entity.

(5) To ensure the availability of mechanisms for agencies, and entities affiliated with or providing services on behalf of agencies, to enforce the standards described in paragraph (4) and conduct oversight on the implementation of such standards.

(6) To develop recommendations for legislative or administrative action to enhance the provision of services to caregivers, veterans, and members of the Armed Forces, including eliminating gaps in such services and eliminating disparities in eligibility for such services.

(7) To coordinate with State and local agencies and relevant non-profit organizations on maximizing the use and effectiveness of resources for caregivers of veterans and members of the Armed Forces.

(d) REPORTS.—

(1) IN GENERAL.—Not later than December 31, 2014, and annually thereafter, the chair of the working group shall submit to Congress a report on policies and services relating to caregivers of veterans and members of the Armed Forces.

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

(A) An assessment of the policies relating to caregivers of veterans and members of the Armed Forces and services provided pursuant to such policies as of the date of submittal of such report.

(B) A description of any steps taken by the working group to improve the coordination of services for caregivers of veterans and members of the Armed Forces among the entities specified in subsection (b)(1)(B) and eliminate barriers to effective use of such services, including aligning eligibility criteria.

(C) An evaluation of the performance of the entities specified in subsection (b)(1)(B) in providing services for caregivers of veterans and members of the Armed Forces.

(D) An evaluation of the quality and sufficiency of services for caregivers of veterans and members of the Armed Forces available from non-governmental organizations.

(E) A description of any gaps in care or services provided by caregivers to veterans or members of the Armed Forces identified by the working group, and steps taken by the entities specified in subsection (b)(1)(B) to eliminate such gaps or recommendations for legislative or administrative action to address such gaps.

(F) Such other matters or recommendations as the chair considers appropriate.

SEC. 8. STUDIES ON POST-SEPTEMBER 11, 2001, VETERANS AND SERIOUSLY INJURED VETERANS.

(a) LONGITUDINAL STUDY ON POST-9/11 VETERANS.—

(1) IN GENERAL.—The Secretary of Veterans Affairs shall provide for the conduct of a longitudinal study on members of the Armed Forces who commenced service in the Armed Forces after September 11, 2001.

(2) GRANT OR CONTRACT.—The Secretary shall award a grant to, or enter into a contract with, an appropriate entity unaffiliated with the Department of Veterans Affairs to conduct the study required by paragraph (1).

(3) PLAN.—Not later than one year after the date of the enactment of this Act, the Secretary shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a plan for the conduct of the study required by paragraph (1).

(4) REPORTS.—Not later than October 1, 2019, and every four years thereafter, the Secretary 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 results of the study required by paragraph (1) as of the date of such report.

(b) COMPREHENSIVE STUDY ON SERIOUSLY INJURED VETERANS AND THEIR CAREGIVERS.—

(1) IN GENERAL.—The Secretary of Veterans Affairs shall provide for the conduct of a comprehensive study on the following:

(A) Veterans who have incurred a serious injury or illness, including a mental health injury.

(B) Individuals who are acting as caregivers for veterans.

(2) ELEMENTS.—The comprehensive study required by paragraph (1) shall include the following with respect to each veteran included in such study:

(A) The health of the veteran and, if applicable, the impact of the caregiver of such veteran on the health of such veteran.

(B) The employment status of the veteran and, if applicable, the impact of the caregiver of such veteran on the employment status of such veteran.

(C) The financial status and needs of the veteran.

(D) The use by the veteran of benefits available to such veteran from the Department of Veterans Affairs.

(E) Any other information that the Secretary considers appropriate.

(3) GRANT OR CONTRACT.—The Secretary shall award a grant to, or enter into a contract with, an appropriate entity unaffiliated with the Department of Veterans Affairs to conduct the study required by paragraph (1).

(4) REPORT.—Not later than two years after the date of the enactment of this Act, the Secretary 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 results of the study required by paragraph (1).

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 420—DESIGNATING THE WEEK OF OCTOBER 6 THROUGH OCTOBER 12, 2014, AS ''NATUROPATHIC MEDICINE WEEK'' TO RECOGNIZE THE VALUE OF NATUROPATHIC MEDICINE IN PROVIDING SAFE, EFFECTIVE, AND AFFORDABLE HEALTH CARE

Ms. MIKULSKI (for herself and Mr. HARKIN) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 420

Whereas, in the United States, more than 75 percent of health care costs are due to preventable chronic illnesses, including high blood pressure, which affects 88,000,000 people in the United States, and diabetes, which affects 26,000,000 people in the United States;

Whereas nearly ⅔ of adults in the United States are overweight or obese and, consequently, at risk for serious health conditions, such as high blood pressure, diabetes, cardiovascular disease, arthritis, and depression;

Whereas 70 percent of people in the United States experience physical or nonphysical symptoms of stress, and stress can contribute to the development of major illnesses, such as cardiovascular disease, depression, and diabetes;

Whereas the aforementioned chronic health conditions are among the most common, costly, and preventable health conditions;

Whereas naturopathic medicine provides noninvasive, holistic treatments that support the inherent self-healing capacity of the human body and encourage self-responsibility in health care;

Whereas naturopathic medicine focuses on patient-centered care, the prevention of chronic illnesses, and early intervention in the treatment of chronic illnesses;

Whereas naturopathic physicians attend 4-year, graduate level programs that are accredited by agencies approved by the Department of Education;

Whereas aspects of naturopathic medicine have been shown to lower the risk of major illnesses such as cardiovascular disease and diabetes;

Whereas naturopathic physicians can help address the shortage of primary care providers in the United States;

Whereas naturopathic physicians are licensed in 20 States and territories;

Whereas naturopathic physicians are trained to refer patients to conventional physicians and specialists when necessary;

Whereas the profession of naturopathic medicine is dedicated to providing health care to underserved populations; and

Whereas naturopathic medicine provides consumers in the United States with more choice in health care, in line with the increased use of a variety of integrative medical treatments: Now, therefore, be it

Resolved, That the Senate—