

the gentleman from Tennessee (Mr. ROE) that the House suspend the rules and pass the bill, H.R. 1545.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill was passed.

A motion to reconsider was laid on the table.

IMPROVING THE TREATMENT OF MEDICAL EVIDENCE PROVIDED BY NON-DEPARTMENT OF VETERANS AFFAIRS MEDICAL PROFESSIONALS

Mr. ROE of Tennessee. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1725) to amend title 38, United States Code, to improve the treatment of medical evidence provided by non-Department of Veterans Affairs medical professionals in support of claims for disability compensation under the laws administered by the Secretary of Veterans Affairs, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1725

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

SECTION 1. REPORT ON PROGRESS OF DEPARTMENT OF VETERANS AFFAIRS ACCEPTABLE CLINICAL EVIDENCE INITIATIVE.

(a) *IN GENERAL.*—Not later than 180 days 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 progress of the Acceptable Clinical Evidence initiative of the Department of Veterans Affairs in reducing the necessity for in-person disability examinations and other efforts to comply with the provisions of section 5125 of title 38, United States Code.

(b) *CONTENTS OF REPORT.*—The report required by subsection (a) shall include the following:

(1) *The number of claims eligible for the Acceptable Clinical Evidence initiative during the period beginning on the date of the commencement of the initiative and ending on the date of the submittal of the report, disaggregated by fiscal year.*

(2) *The total number of claims eligible for the Acceptable Clinical Evidence initiative that required a medical examiner of the Department to supplement the evidence with information obtained during a telephone interview with a claimant.*

(3) *Information on any other initiatives or efforts of the Department to further encourage the use of private medical evidence and reliance upon reports of a medical examination administered by a private physician if the report is sufficiently complete to be adequate for the purposes of adjudicating a claim.*

(4) *The anticipated impact on the timeline and accuracy of a decision on a claim for benefits under chapter 11 or 15 of title 38, United States Code, if the Secretary were prohibited from requesting a medical examination in the case of a claim in support of which a claimant submits medical evidence and a medical opinion provided by a private physician that is competent, credible, probative, and otherwise adequate for the purpose of making a decision on that claim.*

(5) *Recommendations on how the Department can measure, track, and prevent the ordering of unnecessary medical examinations when the*

provision by a claimant of a medical examination administered by a private physician in support of a claim for benefits under chapter 11 or 15 of title 38, United States Code, is adequate for the purpose of making a decision on that claim.

SEC. 2. ANNUAL REPORT ON SUBMITTAL OF PRIVATE MEDICAL EVIDENCE IN SUPPORT OF CLAIMS FOR DEPARTMENT OF VETERANS AFFAIRS BENEFITS.

Not later than March 1 of fiscal years 2018 through 2024, the Secretary of Veterans Affairs shall submit to Congress a report that includes, for the calendar year preceding the year in which the report is submitted, the following for each regional office of the Department of Veterans Affairs:

(1) *The number of times a veteran who submitted private medical evidence in support of a claim for compensation or pension under the laws administered by the Secretary was scheduled for an examination performed by Department personnel because the private medical evidence submitted was determined to be unacceptable.*

(2) *The most common reasons why private medical evidence submitted in support of claims for benefits under the laws administered by the Secretary was determined to be unacceptable.*

(3) *The types of disabilities for which claims for benefits under the laws administered by the Secretary were mostly commonly denied when private medical evidence was submitted.*

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Tennessee (Mr. ROE) and the gentleman from Minnesota (Mr. WALZ) each will control 20 minutes.

The Chair recognizes the gentleman from Tennessee.

GENERAL LEAVE

Mr. ROE of Tennessee. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and to insert extraneous material in the RECORD on H.R. 1725, as amended.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Tennessee?

There was no objection.

Mr. ROE of Tennessee. Mr. Speaker, I yield myself such time as I may consume.

H.R. 1725, as amended, was introduced by my good friend Mr. WALZ, the ranking member of the Committee on Veterans' Affairs.

This bill addresses a very serious issue. When a veteran files a claim for disability benefits, VA may need a medical opinion regarding whether the injury or illness is service connected and, if it is, the extent of the veteran's disability. The problem is that the VA often schedules a medical disability examination when one might not be needed.

Many times, a veteran will submit medical evidence from a private doctor with enough information for VA to decide the claim, but we hear about cases where VA still requires a VA examination. Ordering unnecessary disability examinations is a waste of time and resources. It takes doctors away from taking care of their patients and conducting other disability examinations.

H.R. 1725, as amended, would require VA to provide reports to Congress about its use of private medical evi-

dence. This information will be used to help us find ways to make the disability examination more efficient for veterans.

I urge my colleagues to support H.R. 1725, as amended.

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

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

Mr. Speaker, I rise in support of this piece of legislation.

I want to thank the chairman personally for bringing this forward and for being very eloquent in his words on what this does. It is appropriate that it is part of this block of legislation dealing with appeals reform also.

I thank the folks who have worked on this for years: Mr. DENHAM, Mr. LANGEVIN, Ms. MCSALLY, Mr. JOHNSON, Mr. COSTELLO, Ms. KUSTER, Mr. HIGGINS of New York, and Ms. SHEA-PORTER.

As originally introduced, this bill sought to change a current requirement stipulating that initial physical examinations of those seeking to file disability claims must be conducted by the VA. It was to allow veterans to see a local doctor.

Again, as the chairman so clearly pointed out, it was to relieve some of the pressure on the VA, while recognizing we have quality, ethically trustworthy physicians in the private sector who can deliver some of these services. The idea was that requiring the VA to accept private medical evidence from a qualified physician would ease the benefit process in rural communities, expedite diagnosis of disabilities, and reduce the wait times and the backlogs.

This is a problem that we have been working on for many years. We introduced similar language in 2013, 2014, and 2015.

I would like to thank all my fellow members, both on and off the committee, and those who are no longer in Congress for working toward this. I am especially thankful to Chairman BOST and Ms. ESTY for having worked with me to tighten the scope of this bill to address the cost that the Congressional Budget Office scored it to.

As it is now, the bill requires an annual report on how veterans obtain private medical evidence in support of their claim, how often it is rejected, and why. It is my hope that this data will help build our case for mandating that the VA accept all credible private medical evidence. We cannot let the perfect be the enemy of the good and need to get started gathering this data as soon as possible.

As we also work to improve the appeals process today, making it more convenient for veterans to get and submit medical evidence, this component will be important. By continuing our work on this issue, veterans will be able to complete their claims faster; start receiving the benefits that they have earned faster; and make sure that the stress you heard about with 20 years of waiting, much of that time

seeing private physicians and gathering evidence to support the very claim that is being denied, this piece of legislation should make sense with that.

Again, Mr. Speaker, I thank everyone involved with this. I urge my colleagues to support this piece of legislation, H.R. 1725.

Mr. Speaker, I yield back the balance of my time.

Mr. ROE of Tennessee. Mr. Speaker, I wholeheartedly endorse this bill.

Mr. WALZ, Sergeant Major Walz, speaks with great passion about it. He has the Mayo Clinic in his district. I can't imagine an evaluation at the Mayo Clinic by physicians there wouldn't be adequate for the VA.

I wholeheartedly support this bill, H.R. 1725, as amended. I urge all Members to also support it.

I yield back the balance of my time. The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Tennessee (Mr. ROE) that the House suspend the rules and pass the bill, H.R. 1725, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

The title of the bill was amended so as to read: "A bill to direct the Secretary of Veterans Affairs to submit certain reports relating to medical evidence submitted in support of claims for benefits under the laws administered by the Secretary."

A motion to reconsider was laid on the table.

VETERANS' COMPENSATION COST-OF-LIVING ADJUSTMENT ACT OF 2017

Mr. ROE of Tennessee. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1329) to increase, effective as of December 1, 2017, the rates of compensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation for the survivors of certain disabled veterans, to amend title 38, United States Code, to improve the United States Court of Appeals for Veterans Claims, to improve the processing of claims by the Secretary of Veterans Affairs, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1329

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' Compensation Cost-of-Living Adjustment Act of 2017".

SEC. 2. INCREASE IN RATES OF DISABILITY COMPENSATION AND DEPENDENCY AND INDEMNITY COMPENSATION.

(a) *RATE ADJUSTMENT.—Effective on December 1, 2017, the Secretary of Veterans Affairs shall increase, in accordance with subsection (c), the dollar amounts in effect on November 30,*

2017, for the payment of disability compensation and dependency and indemnity compensation under the provisions specified in subsection (b).

(b) *AMOUNTS TO BE INCREASED.—The dollar amounts to be increased pursuant to subsection (a) are the following:*

(1) *WARTIME DISABILITY COMPENSATION.—Each of the dollar amounts under section 1114 of title 38, United States Code.*

(2) *ADDITIONAL COMPENSATION FOR DEPENDENTS.—Each of the dollar amounts under section 1115(1) of such title.*

(3) *CLOTHING ALLOWANCE.—The dollar amount under section 1162 of such title.*

(4) *DEPENDENCY AND INDEMNITY COMPENSATION TO SURVIVING SPOUSE.—Each of the dollar amounts under subsections (a) through (d) of section 1311 of such title.*

(5) *DEPENDENCY AND INDEMNITY COMPENSATION TO CHILDREN.—Each of the dollar amounts under sections 1313(a) and 1314 of such title.*

(c) *DETERMINATION OF INCREASE.—Each dollar amount described in subsection (b) shall be increased by the same percentage as the percentage by which benefit amounts payable under title II of the Social Security Act (42 U.S.C. 401 et seq.) are increased effective December 1, 2017, as a result of a determination under section 215(i) of such Act (42 U.S.C. 415(i)).*

(d) *SPECIAL RULE.—The Secretary of Veterans Affairs may adjust administratively, consistent with the increases made under subsection (a), the rates of disability compensation payable to persons under section 10 of Public Law 85-857 (72 Stat. 1263) who have not received compensation under chapter 11 of title 38, United States Code.*

SEC. 3. PUBLICATION OF ADJUSTED RATES.

The Secretary of Veterans Affairs shall publish in the Federal Register the amounts specified in section 2(b), as increased under that section, not later than the date on which the matters specified in section 215(i)(2)(D) of the Social Security Act (42 U.S.C. 415(i)(2)(D)) are required to be published by reason of a determination made under section 215(i) of such Act during fiscal year 2018.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Tennessee (Mr. ROE) and the gentleman from Minnesota (Mr. WALZ) each will control 20 minutes.

The Chair recognizes the gentleman from Tennessee.

GENERAL LEAVE

Mr. ROE of Tennessee. Mr. Speaker, I ask that all Members have 5 legislative days within which to revise and extend their remarks and to insert extraneous material in the RECORD on H.R. 1329, as amended.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Tennessee?

There was no objection.

Mr. ROE of Tennessee. Mr. Speaker, I yield myself such time as I may consume.

H.R. 1329, as amended, is one of the most important bills the House will take up this year. This bill will help ensure that the benefits paid to veterans who are disabled as a result of their military service do not lose value because of inflation. H.R. 1329, as amended, authorizes a cost-of-living increase for veterans and their families next year as long as Social Security recipients receive an increase.

We pass this bill every year, and it has always enjoyed wide, bipartisan support. This year's bill was introduced by the Subcommittee on Disability As-

sistance and Memorial Affairs Chairman BOST and Ranking Member ESTY.

I urge my colleagues to support H.R. 1329, as amended, and help disabled veterans and their families keep up with the rate of inflation.

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

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

I rise to support H.R. 1329, as amended. The Veterans' Compensation Cost-of-Living Adjustment Act provides a 1-year cost-of-living adjustment for the rate of compensation for veterans with service-connected disabilities as well as the rates of dependency and indemnity compensation for survivors.

As most of us know, this adjustment is tied directly to the rates of increase in Social Security benefits. Disability payments are vital to the economic well-being of most veterans, and that support should never be eroded by inflation. This bill ensures that does not happen.

I thank Chairman ROE for bringing the bill to us in a totally bipartisan process, and the Subcommittee on Disability Assistance and Memorial Affairs, as always.

The names of Chairman BOST and Ranking Member ESTY have been brought up a lot today. It says something about it. They are tackling issues that have lasted years. They are bringing up important issues that are going to impact the well-being of veterans. You heard them both say it. They did so in a bipartisan manner that I think serves the reputation of this House well. We sorely need more true bipartisan problem solving like this.

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

Mr. ROE of Tennessee. Mr. Speaker, I yield 2 minutes to the gentleman from Illinois (Mr. BOST), the chairman of the Subcommittee on Disability Assistance and Memorial Affairs, Chairman BOST.

Mr. BOST. Mr. Speaker, I rise today in support of H.R. 1329, the Veterans' Compensation Cost-of-Living Adjustment Act of 2017. This bill should be a top priority for all of us this year. H.R. 1329 should ensure that the veterans receive a cost-of-living increase next year if Social Security recipients get one.

We all know that the price keeps going up and that if veterans' benefits don't keep pace, veterans and their families may have a hard time paying for basic necessities like food, shelter, and clothing. This bill is extremely important to our Nation's veterans. I ask all Members to support it.

I want to thank the ranking member of the Subcommittee on Disability Assistance and Memorial Affairs, Ms. ESTY, for her support of this legislation. I urge my colleagues, all, also to support H.R. 1329.

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

Mr. ROE of Tennessee. Mr. Speaker, I yield 2 minutes to the gentleman from