

Act (Public Law 118-49), I am pleased to appoint the following Member to serve as a Commissioner to the FISA Reform Commission:

The Honorable James A. Himes of Connecticut

I am also pleased to appoint the following individuals to serve as Commissioners to the FISA Reform Commission:

Ms. Sharon Bradford Franklin of Bethesda, Maryland

Mr. Glenn Steven Gerstell of Washington, District of Columbia

Thank you for your attention to this matter.

Sincerely,

HAKEEM JEFFRIES,
Democratic Leader.

COMMUNICATION FROM THE DEMOCRATIC LEADER

The SPEAKER pro tempore laid before the House the following communication from the Honorable HAKEEM JEFFRIES, Democratic Leader:

MAY 5, 2025.

Hon. MIKE JOHNSON,
Speaker, House of Representatives,
Washington, DC.

DEAR MR. SPEAKER: Pursuant to Section 214(a) of the Help America Vote Act of 2002 (52 U.S.C. 20944), I hereby reappoint Mr. Brian Michael Lemek of Potomac, Maryland to the U.S. Election Assistance Commission Board of Advisors.

Thank you for your attention to his appointment.

Sincerely,

HAKEEM JEFFRIES,
House Democratic Leader.

APPOINTMENT OF INDIVIDUAL TO ELECTION ASSISTANCE COMMISSION BOARD OF ADVISORS

The SPEAKER pro tempore. The Chair announces the Speaker's appointment, pursuant to section 214(a) of the Help America Vote Act of 2002 (52 U.S.C. 20944), and the order of the House of January 3, 2025, of the following individual on the part of the House to the Election Assistance Commission Board of Advisors:

Mr. Donald F. McGahn II, Potomac, Maryland

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess subject to the call of the Chair.

Accordingly (at 2 o'clock and 11 minutes p.m.), the House stood in recess.

□ 1440

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. VALADAO) at 2 o'clock and 40 minutes p.m.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair

will postpone further proceedings today on motions to suspend the rules on which a recorded vote or the yeas and nays are ordered, or votes objected to under clause 6 of rule XX.

The House will resume proceedings on postponed questions at a later time.

ACES ACT

Mr. BERGMAN. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 530) to provide for a study by the National Academies of Sciences, Engineering, and Medicine on the prevalence and mortality of cancer among individuals who served as Active Duty aircrew in the Armed Forces, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 530

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 "ACES Act".

SEC. 2. NATIONAL ACADEMIES STUDY ON PREVALENCE AND MORTALITY OF CANCER AMONG INDIVIDUALS WHO SERVED AS ACTIVE DUTY AIRCREW IN THE ARMED FORCES.

(a) AGREEMENT.—

(1) IN GENERAL.—Not later than 30 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall seek to enter into an agreement with the National Academies of Sciences, Engineering, and Medicine (in this section referred to as the "National Academies"), under which the National Academies shall conduct a study on the prevalence and mortality of cancers among covered individuals.

(2) DEADLINE.—

(A) DATE.—The Secretary shall finalize the agreement under paragraph (1) by not later than 60 days after the date on which the Secretary enters negotiations with the National Academies with respect to such agreement.

(B) REPORT; BRIEFINGS.—If the Secretary fails to satisfy the requirement under subparagraph (A), the Secretary shall—

(i) submit to the Committees on Veterans' Affairs of the House of Representatives and the Senate a report that includes—

(I) an explanation of the reasons the Secretary failed to satisfy such requirement; and

(II) an estimate of the date on which the Secretary will finalize the agreement under paragraph (1); and

(ii) not less frequently than once every 60 days after the date on which the Secretary failed to satisfy such requirement, provide to the Committees on Veterans' Affairs of the House of Representatives and the Senate a briefing on the progress of the Secretary toward finalizing such agreement.

(b) STUDY.—The study required under subsection (a) shall—

(1) identify exposures associated with military occupations of covered individuals, including relating to chemicals, compounds, agents, and other phenomena;

(2) review the literature to determine associations between exposures referred to in paragraph (1) and the incidence or prevalence of overall cancer morbidity, overall cancer mortality, and increased incidence or prevalence of—

- (A) brain cancer;
- (B) colon and rectal cancers;
- (C) kidney cancer;
- (D) lung cancer;

- (E) melanoma skin cancer;
- (F) non-Hodgkin lymphoma;
- (G) pancreatic cancer;
- (H) prostate cancer;
- (I) testicular cancer;
- (J) thyroid cancer;
- (K) urinary bladder cancer; and

(L) other cancers as determined appropriate by the Secretary of Veterans Affairs, in consultation with the National Academies; and

(3) determine, to the extent possible, the prevalence of and mortality from the cancers specified in paragraph (2) among covered individuals by using available sources of data, which may include—

(A) health care and other administrative databases of the Department of Veterans Affairs, the Department of Defense, and the individual Services, respectively;

(B) the national death index maintained by the National Center for Health Statistics of the Centers for Disease Control and Prevention; and

(C) the study conducted under section 750 of the William M. (Mac) Thornberry National Defense Authorization Act for Fiscal Year 2021 (Public Law 116-283; 134 Stat. 3716).

(c) REPORT.—At the conclusion of the study required under subsection (a), the National Academies shall submit to the Secretary and to the Committees on Veterans' Affairs of the House of Representatives and the Senate a report containing the results of the study described in subsection (b).

(d) COVERED INDIVIDUAL DEFINED.—In this section, the term "covered individual" means an individual who served on active duty in the Army, Navy, Air Force, or Marine Corps as an aircrew member of a fixed-wing aircraft, including as a pilot, navigator, weapons systems operator, aircraft system operator, or any other crew member who regularly flew in a fixed-wing aircraft.

SEC. 3. EXTENSION OF CERTAIN LIMITS ON PAYMENTS OF PENSION.

Section 5503(d)(7) of title 38, United States Code, is amended by striking "November 30, 2031" and inserting "December 31, 2031".

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Michigan (Mr. BERGMAN) and the gentleman from Kentucky (Mr. MCGARVEY) each will control 20 minutes.

The Chair recognizes the gentleman from Michigan.

GENERAL LEAVE

Mr. BERGMAN. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks on H.R. 530, as amended.

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

There was no objection.

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

Mr. Speaker, I rise today in support of H.R. 530, as amended. The bill was introduced by my friend and fellow veteran, Representative PFLUGER. This bill would ensure there is trusted medical research available to pave the way for toxic-exposed military pilots and air crew to assess their VA disability compensation benefits.

As someone who served as a helicopter pilot in Vietnam, I am troubled by how many times I have heard from my fellow aviators that military pilots

and air crewmen appear to be diagnosed with cancer at much higher rates than civilians.

Colonel Andrew Shurtleff, who testified before the House Veterans' Affairs Committee in March, is one of those veterans. He served our country as an Air Force fighter pilot, and he started fighting stage IV cancer in 2019 when he was just 41 years old. My prayers are with him as he continues to battle cancer, and I wish him the very best.

Military pilots and air crewmen across the service branches, like Colonel Shurtleff, are exposed to chemicals and toxic fumes in confined spaces every time they fly a mission. However, there is not enough medical research available for VA to simply presume that their cancers are related to those exposures. That makes it much harder for them to access their earned VA benefits. Each one of those veterans has to prove to the VA that chemicals and toxins caused their cancer.

Many have had to fight the VA system for years before they received any disability compensation, and many others never received their earned benefits before they passed away.

H.R. 530, as amended, would ensure that the National Academies of Sciences, Engineering, and Medicine conducts a study on whether the cancers suffered by military pilots and their air crew are related to their chemical and toxic exposures.

The VA needs robust medical research to streamline military air crew veterans' access to disability compensation, and VA needs it fast, for today and tomorrow's veterans. My friend from Texas' bill would ensure that research gets done and that our military pilots and air crewmen get the answers they deserve.

Mr. Speaker, I urge all my colleagues to support H.R. 530, as amended, and I reserve the balance of my time.

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

Mr. Speaker, I rise to express my support for H.R. 530, the ACES Act, as amended, a bill that would task the National Academies of Sciences, Engineering, and Medicine with studying the frequency and mortality of cancer among individuals who served as air crew in the Armed Forces.

I can't help but think of some of the giants of aviation our country has had: Admiral James Stockdale, Chuck Yeager, John McCain, the groundbreaking Women Airforce Service Pilots or WASPs of World War II, the Tuskegee Airmen, astronauts, including the crew of Apollo 11. As a nation, we have been lucky that people of this caliber have stepped up and stepped into the cockpit.

□ 1445

Mr. Speaker, these veterans are some of the best our Nation has to offer. They are expertly trained to maintain, fly, and fight in their airframes. Aviators get the mission done, and they

get it done no matter what. They do it under pressure, under fire, and under hostile conditions in the wind and the rain. They sometimes even land on a boat in the middle of the ocean in the dead of night with no lights. For 365 days a year, they are out there, keeping us safe. Military aviators do it all, and they do it better than anyone else.

Unfortunately, there is a concerning trend among veteran aviators and aircrews. They are seeing troubling rates of cancer. Initial studies have shown increased rates of melanoma and pancreatic, prostate, brain, and thyroid cancers. The aircrew community also shows alarming diagnoses of non-Hodgkin lymphoma.

We have both a legal and moral obligation to take care of our veterans. Unfortunately, these veteran aviators are not getting the recognition they need and deserve from the VA. Often, these folks are forced to use their network of fellow veterans to share tips and tricks to get their care. They move through this new medical world with the gut feeling that they all could not be ill without their military occupation playing some role. This is unacceptable.

We need data to help bridge the gap between anecdote and evidence for aviator cancers so pilots and aircrews can get the care and the benefits they deserve.

That is what this bill hopes to achieve, and I strongly support it.

Mr. Speaker, I thank the gentleman from Texas for bringing the bill and for his service, and I encourage all of my colleagues to get behind this effort. While this is one affected community, we cannot forget the countless other veterans and families also fighting for their toxic exposures to be seen and addressed.

I am thinking especially about my constituents who were stationed at Camp Lejeune or the intercontinental ballistic missile, ICBM, community, who suffer from cancer rates above nationwide averages; those who were exposed to radiation while working at the Nevada Test and Training Range; and veterans exposed to fuels in their water and molds in their walls while they lived in on-base housing during their service.

These are all veterans who continue to carry hidden wounds from service that often don't show up until years after they take off the uniform.

As we learn of these communities with toxic exposure and illness beyond the battle, we need to make sure that we have adequate systems in place to take care of them. This means a fully staffed and funded Department of Veterans Affairs. This means mental health professionals are in place to assist these veterans through traumatic and life-changing diagnoses. This means updated infrastructure in place to care for these veterans. For those who succumb to their diagnoses, this means a fully functioning VA to provide end-of-life care with dignity and

compassion. Lastly, it means a VA to deliver for those survivors left behind, those who carry on through the pain and grief.

Mr. Speaker, I thank all of those who have worked tirelessly to bring this issue to the attention of Congress. The ACES Act is definitely a step in the right direction. It is not a fix-all, but it will give affected veterans a fighting chance. In the near future, I hope we can do the same for so many other worthwhile populations, as well.

Mr. Speaker, I support this legislation, and I ask my colleagues to do the same. I reserve the balance of my time.

Mr. BERGMAN. Mr. Speaker, I yield such time as he may consume to the gentleman from Texas (Mr. PFLUGER), my esteemed colleague, an Air Force pilot, and truly a person who understands and cares about the subject matter of this bill.

Mr. PFLUGER. Mr. Speaker, I rise today not just as a Congressman but as a servicemember and friend to advocate on behalf of veterans and servicemembers fighting a second battle that they never signed up to fight. This is in support of H.R. 530, my legislation called the ACES Act, the Aviator Cancers Examination Study Act.

Mr. Speaker, I thank the gentleman from Michigan (Mr. BERGMAN) for being willing to give his life and serving in the military as a helicopter pilot. I thank Chairman BOST, the ranking member, and the majority leader, Mr. SCALISE.

Military aviators and crewmembers are tragically and unfortunately being diagnosed with various forms of cancer at alarming rates. According to a 2021 Air Force study and subsequent Department of Defense research, our aviators have a 29 percent greater probability of testicular cancer, a 24 percent higher probability of melanoma, and a 23 percent higher risk of prostate cancer compared with the normal civilian population.

Those aren't the only forms. These aren't just statistics. These are real lives, real families, and real sacrifices. When brave men and women volunteer to defend our Nation from the cockpit, they shouldn't face a second battle against cancer without our full support. This is why my legislation is so important.

The ACES Act directs the Department of Veterans Affairs to partner with the National Academy of Sciences to conduct a comprehensive study on cancer prevalence among military aviators and identify the agents, chemicals, compounds, and mechanisms in military aviation environments that may be causing these elevated rates of cancer.

By identifying specific risk factors unique to aviation environments, we can develop targeted screening protocols for early detection when treatment is most effective. This means faster access to benefits and treatment for those diagnosed without the burden of proving their cancer resulted from

their service. If every aviator receives specialized cancer screenings based on their specific exposure risks, countless lives would be saved.

To put this study's profound impact into perspective, picture this. A melanoma caught early, treated, and cured sends a mom back to her family. Prostate cancer found before it spreads allows a doctor ample time to set up a proper and more likely successful treatment plan. A testicular tumor found and removed in a routine screening designed for pilots, versus in an emergency room situation, gives the dad a chance to eat around the table with his family for years to come.

This is what the ACES Act makes possible. As an Air Force fighter pilot myself for 20-plus years, I fought alongside the best the Nation has to offer. I have also stood in hospital rooms watching far too many of my brothers and sisters fight their toughest battles not in the air but in hospital rooms against cancer.

Today, I am honored to be joined by a group of extraordinary heroes from our Air Force and Navy, Americans who have raised their hands in support of our Nation and volunteered to serve as pilots. These patriots, who defended our skies, are now fighting for their lives. The ACES Act is for them.

It is for the families of those fighting, who spend countless hours at the hospitals and treatment centers and surrender everything to care for their loved ones and keep hope alive.

It is for those who we have already lost, whose names we will always remember, and who I will always remember in my heart.

It is for my friend, Colonel Andy "Pablo" Shurtleff, an F-22 fighter pilot, a brother in arms, who at this very moment is fighting for his life against cancer. In March, Colonel Shurtleff testified before the Subcommittee on Disability Assistance and Memorial Affairs, sharing how a promising career was cut short after a sudden diagnosis. He explained that an earlier understanding of what causes cancer among pilots could have led to an earlier diagnosis for him, one that could have very well been instrumental in his treatment.

The ACES Act has the support of over 20 veteran organizations, cancer advocacy groups, and medical experts because they recognize what is at stake.

This isn't a partisan issue. It is about fulfilling a promise that our country made to those who were willing to serve. It is a promise that when someone serves our Nation, we will serve them in return.

Every day we wait means more aviators receiving life-altering diagnoses without understanding why, more families devastated by uncertainties, and more veterans fighting for the care they deserve. It is time to acknowledge the true cost of aviation service.

The ACES Act is not just a bill. It is a lifeline for those who have already

given so much for our freedom. It is a moral obligation. It is a message to every pilot who has ever put on that flight suit to protect our skies that we see them and hear them and that we are here to also do the right thing.

Mr. Speaker, when I signed up to run for Congress, this issue was on my heart. When I signed up as a member of the Air Force, I didn't know that this was a potential issue. There are groups out there like the River Rats, led by so many amazing pilots, men and women who were ready to give their lives, who are now trying to do the right thing. Mr. Vince "Aztec" Alcazar is one of those people who has really led on this issue.

I know that my colleague from Michigan, the ranking member, and I know lots of people who were in a situation and are in that situation now, and the ACES Act is that lifeline.

Mr. Speaker, once we pass this on the House floor today, I urge my colleagues in the Senate to do the right thing and to act this week. Let's send H.R. 530 to the President's desk this week and have it signed into law. Let's do something that many Americans think isn't possible, and that is act with speed inside the U.S. Congress. Let's keep our mark up and do the right thing and send this to the Senate, get it passed, and get it to the President's desk.

Mr. Speaker, I thank the chairman of the House Veterans' Affairs Committee, Mr. BOST, and the majority leader, Mr. STEVE SCALISE, for acting with speed, acting aggressively, and keeping the mark up. I urge my colleagues to support this legislation.

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

Mr. BERGMAN. Mr. Speaker, once again, I encourage all Members to support this legislation, and I yield back the balance of my time.

Mr. MCGARVEY. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, I thank Mr. PFLUGER for bringing this bill to the floor, for his service to our country before coming to Congress, and for acting on behalf of all of our aviators who have taken off the uniform and are now fighting a different battle.

Mr. Speaker, this bill is important for everyone who has ever climbed into or out of a cockpit in our United States military to keep us free. It will benefit every veteran. I am excited for the veterans in Louisville, Kentucky, where we have a lot of former aviators as the home of UPS' world hub. This will help everyone, including those people in Louisville, Kentucky.

Mr. Speaker, I urge my colleagues to support this bill that is not only happening quickly but, I will also note, is happening with bipartisan support. I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Michigan (Mr. BERGMAN) that the House suspend the rules and pass the bill, H.R. 530, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. BERGMAN. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this motion will be postponed.

VETERAN FRAUD

REIMBURSEMENT ACT OF 2025

Mr. BERGMAN. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1912) to amend title 38, United States Code, to improve the repayment by the Secretary of Veterans Affairs of benefits misused by a fiduciary, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1912

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 "Veteran Fraud Reimbursement Act of 2025".

SEC. 2. IMPROVEMENT TO REPAYMENT BY SECRETARY OF VETERANS AFFAIRS OF CERTAIN MISUSED BENEFITS.

Section 6107 of title 38, United States Code, is amended to read as follows:

"§ 6107. Reissuance of benefits

"(a) REISSUANCE OF MISUSED BENEFITS.—(1) In any case in which a fiduciary misuses all or part of an individual's benefit paid to such fiduciary, the Secretary shall pay to the beneficiary or the beneficiary's successor fiduciary an amount equal to the amount of such benefit so misused.

"(2) In any case in which the Secretary reissues a benefit payment (in whole or in part) under paragraph (1), the Secretary shall make a good faith effort to obtain recoupment from the fiduciary to whom the payment was originally made.

"(3) In any case in which the Secretary obtains recoupment from a fiduciary who has misused benefits, the Secretary shall promptly remit payment of the recouped amounts to the beneficiary or the beneficiary's successor fiduciary, as the case may be, to the extent that such amounts have not been paid under paragraph (1).

"(b) REISSUANCE OF AMOUNTS IN THE CASE OF A DECEASED BENEFICIARY.—(1) If a beneficiary described in subsection (a)(1) predeceases a payment under such subsection, the Secretary shall pay such amount, subject to paragraph (2), to an individual or entity in accordance with section 5121 of this title.

"(2) The Secretary may not make a payment under this subsection to a fiduciary who misused benefits of the beneficiary.

"(c) LIMITATION ON TOTAL AMOUNT PAID.—The total of the amounts paid to a beneficiary or the beneficiary's successor fiduciary under this section may not exceed the total benefit amount misused by the fiduciary with respect to that beneficiary.

"(d) OVERSIGHT OF NEGLIGENCE.—(1) The Secretary shall establish methods and timing with respect to determining whether an instance of misuse by a fiduciary, of all or part of an individual's benefit paid to such fiduciary, is the result of negligence by the Secretary.

"(2) The Secretary may not withhold the reissuing of a benefit payment under subsection (a)(1) by reason of a pending determination under paragraph (1).