

For many of these veterans, the road ahead is not as clear as it should be. Many VA centers are still building out their services, so often women are connected with community care.

However, when they move outside the VA network, problems start to pile up. Records don't transfer and systems don't update with the latest data. That means more phone calls, more waiting, more back and forth, more frustrations.

Women veterans and their families could be using this energy and time on their treatment and their journey to recovery. A cancer diagnosis shakes your sense of stability. These women need a care system that works for them, not one that makes them fight to get the care that they need.

By connecting them with dedicated coordinators at VA to guide them on their path to remission, we can help these mothers, sisters, and heroes stay in the fight. We made a commitment to these women veterans. Now we must do everything in our power to keep that promise and to save their lives.

This is a commonsense bill. It passed out of committee on voice vote, and I trust the same will happen here. I urge my colleagues to support its passage.

Mr. BOST. Mr. Speaker, I have no more speakers. I am ready to close, and I reserve the balance of my time.

Mr. TAKANO. Mr. Speaker, I once again urge my colleagues to vote "yes" on H.R. 1860, the Women Veterans Cancer Care Coordination Act of 2025, as amended. I yield back the balance of my time.

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

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Illinois (Mr. BOST) that the House suspend the rules and pass the bill, H.R. 1860, as amended.

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

A motion to reconsider was laid on the table.

#### TERRITORIAL RESPONSE AND ACCESS TO VETERANS' ESSENTIAL LIFECARE ACT

Mr. BOST. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 3400) to amend title 38, United States Code, to authorize the Secretary of Veterans Affairs to assign physicians of the Department of Veterans Affairs to temporarily serve as traveling physicians in the territories and possessions of the United States, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3400

*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 "Territorial Response and Access to Veterans' Essential Lifecare Act" or the "TRAVEL Act of 2025".*

#### SEC. 2. DEPARTMENT OF VETERANS ASSIGNMENT OF TRAVELING PHYSICIANS TO SERVE TERRITORIES AND POSSESSIONS.

*(a) IN GENERAL.—Subchapter I of chapter 74 of title 38, United States Code, is amended by adding at the end the following new section:*

##### **"§ 7415. Traveling physicians**

*"(a) IN GENERAL.—(1) The Secretary may assign a physician appointed under section 7401 or section 7431 of this title to serve as a traveling physician for a period of not more than one year at a time. A physician assigned to serve as a traveling physician under this section may be assigned to provide health care to veterans residing in American Samoa, Guam, the Commonwealth of the Northern Mariana Islands, the Commonwealth of Puerto Rico, the Virgin Islands of the United States, or any other territory or possession of the United States at Department facilities or other approved facilities located in such territory or possession.*

*"(2) The Secretary may assign multiple physicians to serve as traveling physicians under this section and may assign each such physician to serve in a specific territory or possession.*

*"(b) COORDINATION OF CARE.—In providing care under this section, traveling physicians shall coordinate with non-Department medical providers to the extent practicable and necessary to ensure high quality and coordinated care for veterans receiving hospital care and medical services.*

*"(c) PAY.—In addition to pay under section 7431 of this title, the Secretary shall provide a relocation or retention bonus to traveling physicians under this section. Such relocation or retention bonus shall be substantially similar to a relocation or retention bonus offered under section 7410(a) of this title, as the Secretary considers appropriate."*

*(b) CLERICAL AMENDMENT.—The table of sections at the beginning of such chapter is amended by inserting after the item relating to section 7414 the following new item:*

*"7415. Traveling physicians."*

*(c) TECHNICAL AND CONFORMING AMENDMENTS.—Title 38, United States Code, is further amended as follows:*

*(1) In section 7410(a)(1), by—*

*(A) by striking "retention allowances" and inserting "retention bonuses"; and*

*(B) by striking the second comma after "section 7401(1) of this title"; and*

*(2) In section 7431(e)(5)(B), by striking "retention allowances" and inserting "retention bonuses".*

#### 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, 2032".*

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Illinois (Mr. BOST) and the gentleman from California (Mr. TAKANO) each will control 20 minutes.

The Chair recognizes the gentleman from Illinois.

#### GENERAL LEAVE

Mr. BOST. 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. 3400, as amended.

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

There was no objection.

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

Mr. Speaker, I rise today in support of H.R. 3400, as amended, offered by my colleague on the Veterans' Affairs Committee Representative KING-HINDS.

This bill would give the VA Secretary the power to assign traveling physicians for up to 1 year at a time in the U.S. territories to deliver care.

The VA provides healthcare in five U.S. territories in the Pacific and Atlantic. In the Pacific, the VA has one medical center in Honolulu, Hawaii. There are three outpatient clinics in American Samoa, Guam, and the Northern Mariana Islands. In the Atlantic, the VA has one medical center in Puerto Rico. There are 10 outpatient clinics across Puerto Rico and the U.S. Virgin Islands.

Based on the most recent data we have, the VA Pacific system served 7,200 enrolled veterans. The VA Caribbean system serves 61,000 enrolled veterans. The veterans in these parts of the world are forced to spend time and money to get their hard-earned care. For example, a veteran in Guam must travel 4,000 miles for care in Honolulu. A veteran in the Virgin Islands has to fly to Puerto Rico to receive care at the VA Medical Center there. The TRAVEL Act would expand the reach of VA care by putting physicians where the veterans live.

I thank Representative KING-HINDS, my friend, for her leadership on this bill to get veterans in remote parts of the world the healthcare they have earned. I urge all of my colleagues to support H.R. 3400, as amended, and I reserve the balance of my time.

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

Mr. Speaker, I rise to speak in support of H.R. 3400, the TRAVEL Act of 2025, as amended.

The VA estimates that as of June 2023, there were at least 100,000 veterans living in U.S. territories, but it is likely that this number is even higher. However, only Puerto Rico has a VA Medical Center, and only American Samoa and Guam have outpatient clinics or CBOCs. Therefore, veterans living in the territories have limited access to VA medical care.

While eligible veterans can receive care through the VA's community care program, access to specialty care, even in the community, is extremely limited, given the lack of such services in the territories.

This legislation authorizes the VA to appoint traveling physicians to provide care to veterans residing in American Samoa, Guam, the Commonwealth of the Northern Mariana Islands, the Commonwealth of Puerto Rico, the U.S. Virgin Islands, and any other territory or possession of the United States. It will also allow the traveling VA physician to coordinate with non-department medical providers as necessary to provide care. I thank Representative KING-HINDS for introducing this bill.

Individuals from the territories generally enlist in the military at higher

per capita rates than residents of most U.S. States. However, veterans in the territories have long struggled to access the VA healthcare they have earned. This legislation could help reduce the rate at which these veterans must be referred to community providers or endure lengthy travel to access services at VA medical facilities thousands and thousands of miles away from home.

Veterans deserve access to the care and benefits they have earned, regardless of where they live. I urge my colleagues to support H.R. 3400, the TRAVEL Act.

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

Mr. BOST. Mr. Speaker, I yield such time as she may consume to the gentlewoman from the Commonwealth of the Northern Mariana Islands (Ms. KING-HINDS).

Ms. KING-HINDS. Mr. Speaker, I rise today in strong support of my bill, H.R. 3400, as amended, the Territorial Response and Access to Veterans Essential Lifecare Act, otherwise known as the TRAVEL Act of 2025.

This legislation is a vital step toward improving healthcare access to veterans residing in U.S. territories, including my district, the Northern Mariana Islands.

Our veterans have served our country with honor, but too many of them still struggle to receive even the most basic care close to home.

The TRAVEL Act directly addresses the critical shortage of specialized medical care in remote and underserved areas. It authorizes the Department of Veterans Affairs to temporarily deploy VA physicians and medical specialists to the territories. These professionals would receive travel bonuses and provide much-needed care, helping close persistent gaps in the VA service network.

When I meet with veterans back home, I often hear the same heart-breaking stories: long travel, long waits, and feeling forgotten by the very system meant to care for them. This bill is driven by those voices. Their needs, their experiences, and their dignity are at the heart of the TRAVEL Act. This bill brings care to them rather than asking them to sacrifice even more.

I extend my deep appreciation to the Veterans' Affairs Committee Chairman MIKE BOST and Ranking Member TAKANO, as well as their dedicated staff, for their work and support of this legislation. This bipartisan effort reflects a shared commitment across the aisle and across the country ensuring that no veteran is left behind, no matter where they live.

Mr. Speaker, I urge all my colleagues to support the TRAVEL Act.

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Mr. TAKANO. Mr. Speaker, once again, I urge my colleagues to vote "yes" on H.R. 3400, the TRAVEL Act.

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

Mr. BOST. Mr. Speaker, once again, I encourage all Members to support this legislation.

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

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Illinois (Mr. BOST) that the House suspend the rules and pass the bill, H.R. 3400, 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. BOST. 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.

#### HEALTH PROFESSIONALS SCHOLARSHIP PROGRAM IMPROVEMENT ACT OF 2025

Mr. BOST. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 3767) to amend title 38, United States Code, to provide for a time frame for the employment in the Department of Veterans Affairs of participants in the Health Professionals Scholarship Program, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3767

*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 "Health Professionals Scholarship Program Improvement Act of 2025" or the "HPSP Improvement Act of 2025".*

#### SEC. 2. TIME FRAME FOR EMPLOYMENT OF PARTICIPANTS IN DEPARTMENT OF VETERANS AFFAIRS HEALTH PROFESSIONALS SCHOLARSHIP PROGRAM.

*(a) IN GENERAL.—Section 7616 of title 38, United States Code, is amended by adding at the end the following new subsection:*

*"(d)(1) The Secretary shall ensure that a participant in the Scholarship Program receives a contract for employment in the full-time clinical practice of such participant's profession at a Department facility with the highest need, as determined by the Secretary, by not later than 90 days after the later of the following dates:*

*"(A) The date on which the participant completes the course in the Scholarship Program.*

*"(B) The date on which participant obtains all required licensure, certification, or credentialing necessary to practice independently in their field.*

*"(2) A contract referred to in paragraph (1) shall include a competitive salary and benefits package consistent with the employment standards of the Department."*

*(b) REPORT.—*

*(1) IN GENERAL.—Not later than 180 days after the date of the enactment of this Act, and every 180 days thereafter until the termination date specified in paragraph (2), the Secretary of Veterans Affairs shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report on the implementation of subsection (d) of section 7616 of title 38, United States Code, as added by subsection (a).*

*(2) TERMINATION DATE.—The termination date specified in this paragraph is September 30, 2027.*

#### SEC. 3. PROHIBITION ON SMOKING IN FACILITIES OF THE VETERANS HEALTH ADMINISTRATION.

*(a) PROHIBITION.—Section 1715 of title 38, United States Code, is amended to read as follows:*

#### *"§ 1715. Prohibition on smoking in facilities of the Veterans Health Administration*

*"(a) PROHIBITION.—No person (including any veteran, patient, resident, employee of the Department, contractor, or visitor) may smoke on the premises of any facility of the Veterans Health Administration.*

*"(b) DEFINITIONS.—In this section:*

*"(1) The term 'smoke' includes—*

*"(A) the use of cigarettes, cigars, pipes, and any other combustion or heating of tobacco; and*

*"(B) the use of any electronic nicotine delivery system, including electronic or e-cigarettes, vape pens, and e-cigs.*

*"(2) The term 'facility of the Veterans Health Administration' means any land or building (including any medical center, nursing home, domiciliary facility, outpatient clinic, or center that provides readjustment counseling) that is—*

*"(A) under the jurisdiction of the Department of Veterans Affairs;*

*"(B) under the control of the Veterans Health Administration; and*

*"(C) not under the control of the General Services Administration."*

*(b) CONFORMING AMENDMENTS.—*

*(1) TABLE OF SECTIONS.—The table of sections at the beginning of chapter 17 of such title is amended by striking the item relating to section 1715 and inserting the following:*

*"1715. Prohibition on smoking in facilities of the Veterans Health Administration."*

*(2) CONFORMING REPEAL.—*

*(A) IN GENERAL.—Section 526 of the Veterans Health Care Act of 1992 (Public Law 102-585; 38 U.S.C. 1715 note) is repealed.*

*(B) CLERICAL AMENDMENT.—The table of contents of such Act is amended by striking the item relating to such section.*

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Illinois (Mr. BOST) and the gentleman from California (Mr. TAKANO) each will control 20 minutes.

The Chair recognizes the gentleman from Illinois.

GENERAL LEAVE

Mr. BOST. 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. 3767, as amended.

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

There was no objection.

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

Mr. Speaker, I rise today in support of H.R. 3767, as amended, offered by my friend and colleague, Representative HAMADEH.

This bill would hold the VA to a deadline to hire participants in the Health Professionals Scholarship Program.

The scholarship was created to address chronic workforce shortages. Critical healthcare jobs, like nurses, physician assistants, and mental health providers, continue to be short-staffed and need good people in these roles.

Right now, VA pays for scholarship enrollees' education in return for several years of service to the VA.