

DISABLED VETERANS HOME IMPROVEMENT AND
STRUCTURAL ALTERATION GRANT INCREASE ACT OF
2009

JULY 23, 2009.—Committed to the Committee of the Whole House on the State of
the Union and ordered to be printed

Mr. FILNER, from the Committee on Veterans' Affairs,
submitted the following

R E P O R T

[To accompany H.R. 1293]

[Including cost estimate of the Congressional Budget Office]

The Committee on Veterans' Affairs, to whom was referred the bill (H.R. 1293) to amend title 38, United States Code, to provide for an increase in the amount payable by the Secretary of Veterans Affairs to veterans for improvements and structural alterations furnished as part of home health services, having considered the same, report favorably thereon without amendment and recommend that the bill do pass.

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PURPOSE AND SUMMARY

H.R. 1293 was introduced by Representative Steve Buyer of Indiana, the Ranking Member of the Committee on Veterans' Affairs, on March 4, 2009. H.R. 1293, the Disabled Veterans Home Improvement and Structural Alteration Grant Increase Act of 2009, would increase the amount the U.S. Department of Veterans Affairs (VA) is authorized to pay under the Home Improvements and Structural Alterations (HISA) program from \$4,100 to \$6,800 for veterans with service-connected disabilities and from \$1,200 to \$2,000 for veterans with non-service-connected disabilities. The increase would become effective in the case of a veteran who first applied for a HISA grant on, or after, the date of enactment. H.R. 1293 would also clarify that a veteran who received the maximum amount of reimbursement under the law before enactment would not be entitled to additional monetary benefits.

BACKGROUND AND NEED FOR LEGISLATION

HISA grants are furnished through the Veterans Health Administration of the VA as part of home health services for the purpose of providing access to or within the home for the continuation of treatment for the veterans' disability. The benefit is paid from the Medical Services appropriation account and is available to both veterans with service-connected and non-service-connected disabilities. Typically, HISA grants are used for such things as widening doors; putting in handrails or special lighting; making kitchens, bathrooms, windows, or electrical outlets and switches more accessible; and, building ramps or improving entrance paths and driveways.

The HISA grant is distinct from the Specially Adapted Housing (SAH) program and Special Home Adaptation (SHA) grants which are administered through the Veterans Benefits Administration of the VA and available to veterans with service-connected disabilities. A service-disabled veteran may receive both a HISA grant and either an SAH or SHA grant.

The HISA program was first authorized in 1973 by Public Law 93-82 (87 Stat. 179). The program was created out of concern that veterans could not be discharged from hospitals because their homes were not able to accommodate their disabilities. An amendment to clarify the projects that could receive HISA grants was enacted in 1976 by Public Law 94-581 (90 Stat. 2842). The law also created a distinction between the lifetime grant ceiling for service-connected and non-service-connected veterans in the amount of \$2,500 and \$600, respectively.

In 1992, Public Law 102-405 (106 Stat. 1984) increased the lifetime benefit limit from \$2,500 to \$4,100 for service-connected veterans and from \$600 to \$1,200 for non-service-connected veterans.

The HISA grant ceiling has not been raised in 17 years, yet the cost of home modifications have increased over the same period. In addition, there is a new generation of veterans from Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) returning home.

A June 12, 2008, joint Department of Defense (DoD) and VA Inspectors General review of the care transition process for injured OEF/OIF servicemembers found that continuity of care was hindered by the inability of an injured active duty servicemember to

obtain a HISA grant prior to discharge. Responding to this need, Public Law 110-289 (122 Stat. 2654), was enacted to allow VA to provide such grants to eligible servicemembers prior to their discharge from military service.

VA is seeing an increasing number of service-connected veterans using the HISA grant with a marked 19.6 percent increase from fiscal year 2007 to fiscal year 2008. VA expects that the trend will continue to grow at an average increase of 1.4 percent per year.

Increasing the HISA grant amount would help veterans with a wide range of disabilities make much needed home alterations to use essential living areas, such as kitchens, bathrooms and bedrooms.

H.R. 1293 would increase the maximum amount of the grants to \$6,800 for service-connected veterans and \$2,000 for non-service-connected veterans. The proposed increase reflects three percent for each year since 1992 to account for inflation and would provide a reasonable amount for the type of home modifications intended in this title.

HEARINGS

On June 18, 2009, the Subcommittee on Health held a legislative hearing on several bills introduced during the 111th Congress, including H.R. 1293. The following witnesses testified: The Honorable Harry Mitchell of Arizona; The Honorable Phil Hare of Illinois; The Honorable Deborah L. Halvorson of Illinois; The Honorable Jerry McNerney of California; The Honorable Thomas S.P. Perriello of Virginia; The Honorable Harry Teague of New Mexico; and, Fred Cowell, Senior Health Policy Analyst, Paralyzed Veterans of America. Those submitting statements for the record included: The Honorable Steve Buyer of Indiana; The Honorable Jerry Moran of Kansas; Joy J. Ilem, Deputy National Legislative Director, Disabled American Veterans; Joseph L. Wilson, Deputy Director, Veterans Affairs and Rehabilitation Commission, The American Legion; Chris Needham, Senior Legislative Associate, Veterans of Foreign Wars of the United States; Bernard Edelman, Deputy Director for Policy and Government Affairs, Vietnam Veterans of America; the American Academy of Physician Assistants; the National Association of Veterans' Research and Education Foundation; the Wounded Warrior Project; Barbara Cohoon, Ph.D., RN, Government Relations Deputy Director, National Military Family Association; and, Robert A. Petzel, M.D., Acting Principal Deputy Under Secretary for Health, Veterans Health Administration, U.S. Department of Veterans Affairs.

The VA and the Disabled American Veterans, Veterans of Foreign Wars, Vietnam Veterans of America, Paralyzed Veterans of America, and the National Military Family Association, testified in support of H.R. 1293

SUBCOMMITTEE CONSIDERATION

On July 9, 2009, the Subcommittee on Health met in open mark-up session and ordered favorably forwarded to the full Committee H.R. 1293 by voice vote.

COMMITTEE CONSIDERATION

On July 15, 2009, the full Committee met in an open markup session, a quorum being present, and ordered H.R. 1293 reported favorably to the House of Representatives, by voice vote.

COMMITTEE VOTES

Clause 3(b) of rule XIII of the Rules of the House of Representatives requires the Committee to list the record votes on the motion to report the legislation and amendments thereto. There were no record votes taken on amendments or in connection with ordering H.R. 1293 reported to the House. A motion by Mr. Buyer of Indiana to order H.R. 1293 reported favorably to the House of Representatives was agreed to by voice vote.

COMMITTEE OVERSIGHT FINDINGS

In compliance with clause 3(c)(1) of rule XIII and clause (2)(b)(1) of rule X of the Rules of the House of Representatives, the Committee's oversight findings and recommendations are reflected in the descriptive portions of this report.

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

In accordance with clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the Committee's performance goals and objectives are reflected in the descriptive portions of this report.

NEW BUDGET AUTHORITY, ENTITLEMENT AUTHORITY, AND TAX EXPENDITURES

In compliance with clause 3(c)(2) of rule XIII of the Rules of the House of Representatives, the Committee adopts as its own the estimate of new budget authority, entitlement authority, or tax expenditures or revenues contained in the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974.

EARMARKS AND TAX AND TARIFF BENEFITS

H.R. 1293 does not contain any congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9(d), 9(e), or 9(f) of rule XXI of the Rules of the House of Representatives.

COMMITTEE COST ESTIMATE

The Committee adopts as its own the cost estimate on H.R. 1293 prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974.

CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

Pursuant to clause 3(c)(3) of rule XIII of the Rules of the House of Representatives, the following is the cost estimate for H.R. 1293 provided by the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974:

U.S. CONGRESS,
 CONGRESSIONAL BUDGET OFFICE,
 Washington, DC, July 22, 2009.

Hon. BOB FILNER,
 Chairman, Committee on Veterans' Affairs,
 House of Representatives, Washington, DC.

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 1293, the Disabled Veterans Home Improvement and Structural Alteration Grant Increase Act of 2009.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Sunita D'Monte.

Sincerely,

DOUGLAS W. ELMENDORF.

Enclosure.

H.R. 1293—Disabled Veterans Home Improvement and Structural Alteration Grant Increase Act of 2009

H.R. 1293 would increase the maximum grant amounts awarded to certain disabled veterans. Those grants are used to improve access to homes and to essential sanitary facilities. CBO estimates that implementing the bill would cost \$20 million over the 2010–2014 period, assuming appropriation of the necessary amounts. Enacting the bill would not affect direct spending or revenues.

Under current law, the Department of Veterans Affairs (VA) may award a maximum of \$4,100 to veterans with service-connected disabilities and \$1,200 to veterans with nonservice-connected disabilities. The bill would increase those maximum allowable amounts to \$6,800 and \$2,000, respectively. Based on data from VA on the number and dollar amounts of grants awarded over the 2003–2008 period, CBO estimates that under the bill almost 2,000 veterans with service-connected disabilities would receive an additional \$1,900 each year and almost 700 veterans with nonservice-connected disabilities would receive an additional \$760 each year, for an annual cost of \$4 million.

H.R. 1293 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act and would not affect the budgets of state, local, or tribal governments.

The CBO staff contact for this estimate is Sunita D'Monte. The estimate was approved by Theresa Gullo, Deputy Assistant Director for Budget Analysis.

FEDERAL MANDATES STATEMENT

The Committee adopts as its own the estimate of Federal mandates regarding H.R. 1293 prepared by the Director of the Congressional Budget Office pursuant to section 423 of the Unfunded Mandates Reform Act.

ADVISORY COMMITTEE STATEMENT

No advisory committees within the meaning of section 5(b) of the Federal Advisory Committee Act would be created by H.R. 1293.

CONSTITUTIONAL AUTHORITY STATEMENT

Pursuant to clause 3(d)(1) of rule XIII of the Rules of the House of Representatives, the Committee finds that the Constitutional authority for H.R. 1293 is provided by Article I, section 8 of the Constitution of the United States.

APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that the legislation does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section 102(b)(3) of the Congressional Accountability Act.

SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

Section 1. Short title

This section cites the Act as the “Disabled Veterans Home Improvement and Structural Alteration Grant Increase Act of 2009.”

Section 2. Increase in amount available to disabled veterans for improvements and structural alterations furnished as part of home health services

This section provides an increase in the amount available to disabled veterans for improvements and structural alterations furnished as part of home health services. The grant amount is increased from \$4,100 to \$6,800 for service-connected veterans, and is increased from \$1,200 to \$2,000 for non-service-connected veterans. This provision is effective for veterans who apply for benefits on or after the date of the enactment of this Act.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

TITLE 38, UNITED STATES CODE

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PART II—GENERAL BENEFITS

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**CHAPTER 17—HOSPITAL, NURSING HOME,
DOMICILIARY, AND MEDICAL CARE**

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**SUBCHAPTER II—HOSPITAL, NURSING HOME, OR
DOMICILIARY CARE AND MEDICAL TREATMENT**

* * * * *

§ 1717. Home health services; invalid lifts and other devices

(a)(1) * * *

(2) Improvements and structural alterations may be furnished as part of such home health services only as necessary to assure the continuation of treatment for the veteran's disability or to provide access to the home or to essential lavatory and sanitary facilities. The cost of such improvements and structural alterations (or the amount of reimbursement therefor) under this subsection may not exceed—

(A) \leq \$4,100 \$6,800 in the case of medical services furnished under section 1710(a)(1) of this title, or for a disability described in section 1710(a)(2)(C) of this title; or

(B) \leq \$1,200 \$2,000 in the case of medical services furnished under any other provision of section 1710(a) of this title.

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