

to be notified when a veteran in their care has filed an MST claim, has an examination related to the MST claim, or been notified of a decision or a determination. This notification can be especially helpful when a claim has been denied or the decision is lower than the veteran feels is warranted.

We must ensure that survivors of sexual assault and sexual harassment in the military are treated respectfully and receive proper care at all stages of the process, including mental healthcare services.

It is especially critical in light of the August 2021 VA Office of Inspector General report which showed that claims were still being inappropriately denied. Thus, “veteran survivors of military sexual trauma remain at risk of not receiving the VA benefits to which they are entitled and experiencing additional distress when claims are improperly handled or denied.”

That is why I introduced the MST Claims Coordinator Act, to improve communication and coordination in the claims process between the Veterans Benefits Administration and the Veterans Health Administration.

As a 20-year Navy veteran, I am proud to have worked with my colleagues in a bipartisan fashion to introduce this legislation, and I urge my colleagues to support its final passage.

Mr. BOST. Mr. Speaker, I encourage my colleagues to support this bill, and I yield back the balance of my time.

Mr. TAKANO. Mr. Speaker, I truly appreciate the diligent work of Chairwoman LURIA. I ask all of my colleagues to join me in passing her legislation, H.R. 7335, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. TAKANO) that the House suspend the rules and pass the bill, H.R. 7335.

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. HICE of Georgia. Mr. Speaker, on that I demand the yeas and nays.

The SPEAKER pro tempore. Pursuant to section 3(s) of House Resolution 8, the yeas and nays are ordered.

Pursuant to clause 8 of rule XX, further proceedings on this motion are postponed.

DIGNITY FOR MST SURVIVORS ACT

Mr. TAKANO. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 6961) to amend title 38, United States Code, to improve hearings before the Board of Veterans' Appeals regarding claims involving military sexual trauma, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 6961

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

SECTION 1. REQUIREMENT FOR TRAINING ON CLAIMS INVOLVING MILITARY SEXUAL TRAUMA PRIOR TO ASSIGNMENT OF CERTAIN PROCEEDINGS.

(a) REQUIREMENT.—Section 7102 of title 38, United States Code, is amended by adding at the end the following new subsection:

“(c)(1) The Secretary shall ensure that there is offered to each member of the Board an annual training on military sexual trauma and proceedings that concern a claim for compensation based on military sexual trauma experienced by a veteran.

“(2) A proceeding that concerns a claim specified in paragraph (1) may not be assigned to an individual member of the Board or to a panel of members unless the individual member, or each member of the panel, as the case may be, has completed the annual training most recently offered to that member pursuant to such paragraph.

“(3) In this subsection, the term ‘military sexual trauma’ has the meaning given that term in section 1166(c) of this title.”

(b) FIRST TRAINING.—The Secretary of Veterans Affairs shall ensure that each member of the Board of Veterans' Appeals is offered the first annual training under section 7102(c) of title 38, United States Code, as amended by subsection (a), by not later than 180 days after the date of the enactment of this Act.

(c) APPLICABILITY.—The limitation under section 7102(c)(2) of title 38, United States Code, as added by subsection (a), shall apply with respect to the assignment of proceedings on or after the date that is 180 days after the date of the enactment of this Act.

SEC. 2. REVIEW OF LANGUAGE AND PRACTICES USED IN CONNECTION WITH CLAIMS INVOLVING MILITARY SEXUAL TRAUMA.

(a) BOARD OF VETERANS' APPEALS.—

(1) IN GENERAL.—Section 7112 of title 38, United States Code, is amended—

(A) by inserting “(a) REMANDED CLAIMS.—” before “The Secretary”; and

(B) by adding at the end the following new subsections:

“(b) CLAIMS INVOLVING MILITARY SEXUAL TRAUMA.—The Board shall promptly determine whether a notice of disagreement filed with the Board is a covered case.

“(c) DEFINITIONS.—In this section:

“(1) The term ‘covered case’ means a case—

“(A) that concerns a claim for compensation based on military sexual trauma; and

“(B) for which the appellant has requested a hearing in the notice of disagreement filed with the Board pursuant to section 7105 of this title.

“(2) The term ‘military sexual trauma’ has the meaning given that term in section 1166 of this title.”

(2) CLERICAL AMENDMENTS.—

(A) SECTION HEADING.—The heading of such section is amended by striking “**remanded**” and inserting “**certain**”.

(B) TABLE OF SECTIONS.—The table of sections at the beginning of chapter 71 of such title is amended by striking the item relating to section 7112 and inserting the following:

“7112. Expedited treatment of certain claims.”

(b) AUDIT AND MODIFICATION OF DENIAL LETTERS.—

(1) REQUIREMENT.—The Secretary of Veterans Affairs shall conduct an audit of the language used in letters sent to individuals to explain the decision by the Secretary to deny covered claims. Not later than 180 days after the date of the enactment of this Act, the Secretary shall modify the letters to ensure that—

(A) the letters use trauma-informed language; and

(B) veterans are not re-traumatized through insensitive language.

(2) CONSULTATION.—The Secretary shall carry out paragraph (1) in consultation with veterans service organizations and other stakeholders as the Secretary determines appropriate.

(c) EXAMINATIONS.—The Secretary shall establish protocols for Department of Veterans Affairs medical providers and contract medical providers to ensure that the medical providers conduct examinations regarding covered claims using trauma-informed practices.

(d) DEFINITIONS.—In this section:

(1) The term “compensation” has the meaning given that term in section 101 of title 38, United States Code.

(2) The term “contract medical provider” means a medical provider who contracts with the Department of Veterans Affairs to provide a medical examination or a medical opinion when such an examination or opinion is necessary to make a decision on a claim under the laws administered by the Secretary of Veterans Affairs.

(3) The term “covered claim” means a claim for compensation based on military sexual trauma experienced by a veteran.

(4) The term “military sexual trauma” has the meaning given that term in section 1166 of title 38, United States Code.

(5) The term “trauma-informed” means, with respect to language or practices, using language or carrying out practices in a manner that—

(A) is based on a knowledge of the awareness of the prevalence and impact of trauma on the physical, emotional, and mental health of an individual, the behaviors of the individual, and the engagement by the individual to services;

(B) is aimed at ensuring environments and services are welcoming and engaging to the individual who receives such services and the staff who provide such services; and

(C) ensures that the language or practices do not retraumatize the individual.

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

The Chair recognizes the gentleman from California.

GENERAL LEAVE

Mr. TAKANO. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on H.R. 6961, as amended.

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

There was no objection.

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

Mr. Speaker, I rise in strong support of H.R. 6961, as amended, the Dignity for MST Survivors Act, introduced by Representative MRVAN.

The importance of caring for veterans who have experienced military sexual trauma cannot be overstated. By virtue of the bill's name, Representative MRVAN seeks to ensure that MST survivors are given the respect and honor they deserve.

Words have meaning and power, and how we discuss MST can be retraumatizing for survivors. Careful thought must be given to the way in which the VA communicates with veterans who have MST claims. This bill takes great

care to address the language included in claims denial letters so veterans are not retraumatized when receiving what may be troubling news. This legislation requires the VA to consult with stakeholders to identify the appropriate language to include in these letters.

Additionally, the Board of Veterans' Appeals does significant work, including the processing of appeals for MST. Given the extremely sensitive nature of these claims, board members must be adequately trained to review these cases. Therefore, this legislation includes an annual training element and requires that if board members do not meet this annual training requirement, they will not be assigned MST cases.

As has been noted in other MST-related bills, the training and development of contract medical providers is essential to conducting MST compensation exams.

This bill will require these medical providers to use the most up-to-date, trauma-informed protocols while working with veterans seeking MST claims.

While it is my understanding that most MST claim exams are being outsourced to contract providers, I appreciate the changes to the introduced text that will require the same training for contract providers and in-house VA providers.

As such, I supported the amendment by Ranking Member BOST to clarify this issue during committee consideration.

Mr. Speaker, I urge my colleagues to support this vital legislation, and I reserve the balance of my time.

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

Mr. Speaker, I rise today in support of H.R. 6961, the Dignity for MST Survivors Act, which was introduced by Congressman MRVAN, the chairman of the Subcommittee on Technology Modernization.

All veterans should receive an accurate decision the first time they file a claim, especially if the claim is related to MST. If the VA must deny that claim, this should be communicated in a compassionate manner.

Moreover, the VA disability examiners should be sensitive to the needs of our veterans who are undergoing an exam for a condition related to MST.

This bill would make several improvements to the MST claims process, including enhancing training on MST for adjudicators at the Board of Veterans' Appeals; improving decision notices for claims related to MST; and, requiring the VA to establish standards to ensure that disability examiners perform exams related to MST using trauma-informed practices.

Mr. Speaker, I urge my colleagues to support this bill, and I reserve the balance of my time.

Mr. TAKANO. Mr. Speaker, I yield 3 minutes to the gentleman from Indiana (Mr. MRVAN), my good friend and author of this legislation, who serves as the chairman of the Subcommittee on Technology Modernization on the Veterans' Affairs Committee.

Mr. MRVAN. Mr. Speaker, I am proud to rise in support of the Dignity for MST Survivors Act, legislation I was proud to introduce and collaborate with Chairman TAKANO, Chairwoman LURIA, and my other colleagues to address longstanding issues regarding the treatment of survivors of military sexual trauma.

I also thank the Veterans of Foreign Wars, the Paralyzed Veterans of America, The American Legion, and the Wounded Warrior Project for their endorsements of this legislation.

The Dignity for MST Survivors Act seeks to support and affirm veterans who experienced sexual trauma during their military service as they navigate the Board of Veterans' Appeals claims appeal process.

According to the data collected by the Department of Veterans Affairs, an unconscionable 1 in 3 of our brave women veterans and 1 in 50 male veterans report having experienced sexual assault or sexual harassment.

Such traumatic events often have lasting impacts on these individuals' physical and mental health, placing MST survivors at heightened risk for depression, post-traumatic stress disorder, and other debilitating conditions.

Despite these clear treatment needs, many MST survivors face significant difficulty in accessing healthcare and disability benefits from the VA.

In August 2021, an investigation released by the VA's Office of the Inspector General found that an astounding 57 percent of denied MST claims were improperly processed by the VA, in part due to claims processors' lack of MST training.

Multiple veterans service organizations report that the BVA has proven similarly ill-equipped to deal with appeals of denied MST claims and that the current claims appeal process has the unfortunate potential to retraumatize MST survivors.

While the VA has taken steps in the right direction, more must be done to improve the claims appeal experience, show compassion, and safeguard the dignity of MST survivors.

I urge my colleagues to support this legislation in order to ensure MST survivors are not retraumatized at any point in their effort to obtain the world-class healthcare and disability benefits to which they are entitled.

Mr. BOST. Mr. Speaker, I encourage my colleagues to support this bill, and I yield back the balance of my time.

Mr. TAKANO. Mr. Speaker, I urge all of my colleagues to join me in passing H.R. 6961, as amended, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. TAKANO) that the House suspend the rules and pass the bill, H.R. 6961, 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. HICE of Georgia. Mr. Speaker, on that I demand the yeas and nays.

The SPEAKER pro tempore. Pursuant to section 3(s) of House Resolution 8, the yeas and nays are ordered.

Pursuant to clause 8 of rule XX, further proceedings on this motion are postponed.

INDEPENDENT REVIEW OF ASSESSMENTS BY THE SECRETARY OF VETERANS AFFAIRS OF MENTAL AND PHYSICAL CONDITIONS LINKED TO MILITARY SEXUAL TRAUMA FOR PURPOSES OF AWARDED DISABILITY COMPENSATION

Mr. TAKANO. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 6064) to direct the Secretary of Veterans Affairs to seek to enter into an agreement with the National Academies of Sciences, Engineering, and Medicine for a review of examinations, furnished by the Secretary, to individuals who submit claims to the Secretary for compensation under chapter 11 of title 38, United States Code, for mental and physical conditions linked to military sexual trauma.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 6064

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

SECTION 1. INDEPENDENT REVIEW OF ASSESSMENTS BY THE SECRETARY OF VETERANS AFFAIRS OF MENTAL AND PHYSICAL CONDITIONS LINKED TO MILITARY SEXUAL TRAUMA FOR PURPOSES OF AWARDED DISABILITY COMPENSATION.

(a) AGREEMENT.—Not later than 90 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 Act referred to as the "National Academies") to perform the services covered by this section.

(b) COMPREHENSIVE REVIEW.—Under an agreement between the Secretary and the National Academies under this section, the National Academies shall conduct a comprehensive review of examinations, furnished by the Secretary to individuals who submit claims to the Secretary for compensation under chapter 11 of title 38, United States Code, for mental and physical conditions linked to military sexual trauma (in this Act referred to as "MST"), for the purpose of assessing the impairments of such individuals arising from MST. The review carried out pursuant to paragraph (1) shall include the following elements:

(1) A determination of the adequacy of tools and protocols used by the Secretary to provide examinations described in this subsection, including—

(A) the Disability Benefits Questionnaires;

(B) the Department's schedule of rating disabilities;

(C) consideration of whether certain conditions linked to MST should require referral for both a mental health examination and a physical health examination; and

(D) the necessity of internal pelvic examinations to diagnose certain conditions linked to MST, and whether alternatives to such examinations could be considered if a veteran objects to or cannot complete such examination.