

(2) A determination of what credentials and training are necessary for a health care specialist or provider to perform such examinations related to physical conditions linked to MST, for men and for women, including—

- (A) sexual dysfunction;
- (B) pelvic pain;
- (C) pelvic dysfunction;
- (D) musculoskeletal disabilities; and
- (E) cardiovascular conditions (including stroke).

(3) A determination of what credentials and training are necessary for a health care specialist or provider to perform such examinations related to mental health conditions linked to MST, for men and for women.

(4) An assessment of the quality of MST training for individuals who perform such examinations, including recommendations for improvements to such training.

(c) REPORTS.—

(1) REPORT OF THE NATIONAL ACADEMIES.—Not later than 540 days after the date on which the Secretary enters into an agreement under subsection (a), the National Academies shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report on the comprehensive review conducted under subsection (b). Such report shall include the following elements:

(A) The findings of the National Academies under subsection (b).

(B) Recommendations of the National Academies regarding legislative or administrative action to improve of the adjudication of claims described in subsection (b).

(2) REPORT OF THE SECRETARY.—Not later than 90 days after submission of the report under paragraph (1), the Secretary shall submit to the Committees on Veterans' Affairs of the House of Representatives and the Senate a report on the plans of the Secretary to carry out any action based on the findings and recommendations of the National Academies.

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. 6064.

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. 6064, introduced by Representative NEHLS.

Given the unfortunate prevalence of military sexual trauma among veterans and the broad and long-lasting impacts it can have on a survivor, it makes sense to have a neutral research party assess the adequacy of compensation examinations conducted by VA examiners to ensure we are fully addressing the needs of our veterans who have experienced military sexual trauma.

The sensitive nature of MST evaluations requires competent and compassionate care. Having a better understanding of the academic preparation and credentialing of medical and men-

tal health practitioners will allow the VA to adjust and amend existing policy to provide more appropriate compensation examinations.

The National Academies of Science provides independent and objective research that informs public policy. To that end, an empirical review of the practitioner training associated with MST compensation examinations will strengthen stakeholder confidence in the overall process, improve customer service, and enhance claim decisions to benefit veterans who experienced MST.

Mr. Speaker, I thank Ranking Member NEHLS for offering this legislation. I urge my colleagues to support it, 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. 6064, and I thank Congressman NEHLS, Congresswoman LURIA, and the leaders of the Subcommittee on Disability Assistance and Memorial Affairs, for introducing this bill.

This bill would require the VA to partner with the National Academies to conduct an independent review of the VA's delivery of benefits for claims related to MST.

The National Academies would also provide recommendations that the VA could implement to improve the disability claims process for MST survivors.

□ 1300

For decades, the National Academies has led research into the VA disability benefits process, including reports on the health effects of toxic exposures and VA's handling of traumatic brain injury claims.

This study is needed to help Congress and VA better understand what changes need to be made in this process to ensure that veterans receive quality, timely, and compassionate consideration of their disability claims.

For too long, we have heard that the MST claims process can be insensitive. This is unacceptable, and VA must do better.

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

Mr. TAKANO. Mr. Speaker, I ask all of my colleagues to join me in passing H.R. 6064, and I yield back the balance of my time.

The SPEAKER pro tempore (Mr. PARNETT). 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. 6064.

The question was taken.

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

VA PEER SUPPORT ENHANCEMENT FOR MST SURVIVORS ACT

Mr. TAKANO. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 2724) to amend title 38, United States Code, to direct the Secretary of Veterans Affairs to provide for peer support specialists for claimants who are survivors of military sexual trauma, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 2724

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

SECTION 1. IMPROVEMENTS TO THE PROCESSING OF CLAIMS BY VETERANS FOR COMPENSATION FOR CERTAIN MENTAL HEALTH CONDITIONS BASED ON MILITARY SEXUAL TRAUMA.

(a) IN GENERAL.—Section 1166 of title 38, United States Code, is amended—

(1) by striking “or air service” both places it appears and inserting “air, or space service”;

(2) in subsection (a)—

(A) in the heading, by striking “IN GENERAL” and inserting “PROCESSING”;

(B) by inserting “(1)” before “The Secretary”; and

(C) by adding at the end the following new paragraphs:

“(2) A peer support specialist of the Department—

“(A) shall not be responsible for providing any assistance to a veteran regarding a claim described in paragraph (1), other than counseling services, guidance, and support, pursuant to duties determined by the Under Secretary for Health; and

“(B) shall not participate in the adjudication of such a claim.”;

(3) by redesignating subsections (b) and (c) as subsections (c) and (d), respectively;

(4) by inserting, after subsection (a), the following new subsection (b):

“(b) REFERRALS TO MST COORDINATORS.—The Secretary shall include, in forms for claims described in subsection (a), an option for a veteran to elect to be referred to a military sexual trauma coordinator of the Veterans Health Administration at the facility of the Department nearest to the residence of such veteran.”; and

(5) in subsection (c), as redesignated—

(A) by inserting “(1)” before “The Secretary”; and

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

“(2) The Secretary shall ensure that peer support specialists of the Department receive annual training on how to provide peer support regarding military sexual trauma.

“(3) The Secretary shall provide annual training, regarding the processing of claims described in subsection (a), to the following individuals:

“(A) Military sexual trauma coordinators of the Veterans Health Administration.

“(B) Peer support specialists of the Department.”;

(b) CLERICAL AMENDMENTS.—

(1) SECTION HEADING.—The heading of such section is amended by striking “Specialized teams to evaluate claims” and inserting “Claims”.

(2) TABLE OF SECTIONS.—The table of sections at the beginning of chapter 11 of such title is amended by striking the item relating to section 1166 and inserting the following:

“1166. Claims involving military sexual trauma.”.

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 to insert extraneous material on H.R. 2724, 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. 2724, as amended, the VA Peer Support Enhancement for MST Survivors Act, introduced by the gentleman from New York (Mr. DELGADO).

VA has provided peer support specialists for recently discharged veterans transitioning to civilian life, veterans with mental health or substance abuse issues, and caregivers of veterans.

Peer support programs have proven successful for these communities and may prove to be a beneficial tool during the claims process for survivors of military sexual trauma. Victim advocacy can serve as a bridge between survivors and the Veterans Benefits Administration adjudicators processing their cases.

Within the MST context, a highly trained peer support specialist can serve as an advocate who can provide counsel, assistance, and coordination to navigate a process that may be stress-inducing and anxiety-provoking.

If the MST claimant chooses to utilize the services of a peer support specialist, the MST claims experience may go more smoothly and potentially reduce the emotional strain on an inherently difficult process.

This bill was amended in committee with thoughtful input from Ranking Member BOST, who sought to clarify that the role of the peer support specialist in assisting an MST claimant is to act as a shepherd for the MST claimant rather than a surrogate who speaks on behalf of a claimant during proceedings. As such, a peer support specialist can provide guidance, support, and counseling and help claimants navigate a difficult and potentially re-traumatizing process.

Mr. Speaker, I urge my colleagues to support this important 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. 2724, the VA Peer Support Enhancement for MST Survivors Act, which is sponsored by the gentleman from New York (Mr. DELGADO).

Veterans who file disability claims based on MST report that the process can be difficult and emotional. Peer support specialists can help these vet-

erans through this stressful time. Peer support specialists provide critical help to veterans.

Unfortunately, many veterans who file a claim for conditions based on MST may not be aware of, or eligible for, VHA peer support services. This bill would better ensure that these claimants are eligible for peer support services or are connected with an MST coordinator at VHA.

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

Mr. TAKANO. Mr. Speaker, I ask all of my colleagues to join me in passing H.R. 2724, as amended, and maybe, hopefully, the gentleman from Montana will allow this to go on a voice vote. I thought I would just mention that. 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. 2724, 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. ROSENDALE. 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.

VETERANS RAPID RETRAINING ASSISTANCE PROGRAM RESTORATION AND RECOVERY ACT OF 2022

Mr. TAKANO. Mr. Speaker, I move to suspend the rules and pass the bill (S. 4089) to restore entitlement to educational assistance under Veterans Rapid Retraining Program in cases of a closure of an educational institution or a disapproval of a program of education, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

S. 4089

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 Rapid Retraining Assistance Program Restoration and Recovery Act of 2022”.

SEC. 2. RESTORATION OF ENTITLEMENT UNDER VETERANS RAPID RETRAINING ASSISTANCE PROGRAM.

(a) IN GENERAL.—Section 8006 of the American Rescue Plan Act of 2021 (Public Law 117–2), as amended by the Training in High-demand Roles to Improve Veteran Employment Act (Public Law 117–16), is further amended—

(1) by redesignating subsection (n) as subsection (o); and

(2) by inserting after subsection (m), the following new subsection (n):

“(n) EFFECTS OF CLOSURE OF AN EDUCATIONAL INSTITUTION OR DISAPPROVAL OF A PROGRAM OF EDUCATION.—

“(1) IN GENERAL.—Any payment of retraining assistance under subsection (d)(1) shall

not be charged against any entitlement to retraining assistance described in subsection (a) if the Secretary determines that an individual was unable to complete a course or program of education as a result of—

“(A) the closure of an educational institution; or

“(B) the disapproval of a program of education by the State approving agency or the Secretary when acting in the role of the State approving agency.

“(2) PERIOD NOT CHARGED.—The period for which, by reason of this subsection, retraining assistance is not charged shall be equal to the full amount of retraining assistance provided for enrollment in the program of education.

“(3) HALT OF PAYMENTS TO CERTAIN EDUCATIONAL INSTITUTIONS.—In the event of a closure or disapproval, as described in paragraph (1), the educational institution shall not receive any further payments under subsection (d).

“(4) RECOVERY OF FUNDS.—In the event of a closure or disapproval, as described in paragraph (1), any payment already made under subsection (d) to the educational institution shall be considered an overpayment and constitute a liability of such institution to the United States.”.

(b) CONFORMING AMENDMENT.—In subsection (b)(3) of such section, strike the period and insert “, except for an individual described in subsection (n).”.

(c) EFFECTIVE DATE.—The amendments made by this section shall apply as if included in the American Rescue Plan Act of 2021 (Public Law 117–2).

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 to insert extraneous material on S. 4089.

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 support of S. 4089, the Veterans Rapid Retraining Assistance Program Restoration and Recovery Act.

This legislation was introduced by Senator DURBIN and passed by unanimous consent in the Senate. I also thank the gentleman from Illinois (Mr. DANNY K. DAVIS) for introducing this legislation in the House.

Mr. Speaker, during the most difficult period of the COVID–19 pandemic, Congress and President Biden worked together to pass the American Rescue Plan into law, one of the most significant investments in American workers and the American economy since the New Deal.

The Veteran Rapid Retraining Assistance Program, which was included in the American Rescue Plan, created a new program to retrain and employ unemployed veterans.

Since passage, over 5,000 veterans have used this program, many to great