35 education benefits, but making those individuals eligible for more robust, comprehensive benefits equal to the Forever GI Bill.

My hope is that in the waning days of this Congress, we see fit to consider these other pieces of legislation, as well. In the meantime, however, I do support this bill, and I encourage my colleagues to support it, as well.

I extend a special thank-you to the survivors who may be listening today and those who are with us only in spirit. Their stories demonstrate bravery and courage, and they deserve every ounce of our effort in creating a VA that is welcoming and accessible, and every dollar of benefits we can muster on their behalf.

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

Mr. BOST. Mr. Speaker, I yield such time as he may consume to the gentleman from Arizona (Mr. CISCOMANI), the sponsor of this bill.

Mr. CISCOMANI. Mr. Speaker, I thank Chairman Bost for yielding me time to speak today in support of my bill, H.R. 7100, the Prioritizing Veterans' Survivors Act.

Mr. Speaker, since I was elected, I have heard from military servicemembers and veterans' surviving family members about their struggle accessing VA benefits. In my district, I organized a Veterans Advisory Council, ensuring that surviving spouses and children accessing VA benefits and services is a top priority that we have discussed time and time again. I am always looking for ways to ensure that top VA leaders hear the concerns of veterans' loved ones.

From its creation, the Office of Survivors Assistance, or OSA, was meant to serve as the principal adviser to the VA Secretary on all survivors' benefits and services, including medical care and burial benefits.

When VA began operating the OSA within the Veterans Benefits Administration, the VA deprioritized survivors policy and skirted Congress' intent when they created this office. My bill would fix this, requiring OSA to operate within the Secretary's office, thereby prioritizing advocacy and services for servicemembers' and veterans' surviving spouses and families.

I would like to highlight the comment of a member of my Veterans Advisory Council, Ms. Jane Strain, a surviving spouse and an Army veteran herself. She said: "Surviving spouses and families are family members who cared for children, moved many times during a military career, compromised their careers, and maintained home life while the servicemember deployed. They have earned and deserve attention when the spouse has passed. Placing the OSA directly under the Secretary will help to recognize the importance of this population."

I was proud to work alongside Chairman Bost to ensure survivors have a seat at the table.

Mr. Speaker, I urge my colleagues to vote in favor of this commonsense legislation.

Mr. TAKANO. Mr. Speaker, I urge all of my colleagues to join me in passing H.R. 7100, the Prioritizing Veterans' Survivors Act, and 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. 7100.

The question was taken; and (twothirds being in the affirmative) the rules were suspended and the bill was passed.

A motion to reconsider was laid on the table.

VIETNAM VETERANS LIVER FLUKE CANCER STUDY ACT

Mr. BOST. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4424) to direct the Secretary of Veterans Affairs to study and report on the prevalence of cholangiocarcinoma in veterans who served in the Vietnam theater of operations during the Vietnam era, and for other purposes, as amended.

The Clerk read the title of the bill. The text of the bill is as follows:

H.R. 4424

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 "Vietnam Veterans Liver Fluke Cancer Study Act".

SEC. 2. STUDY ON THE PREVALENCE OF CHOLANGIOCARCINOMA IN VETERANS WHO SERVED IN THE VIETNAM THEATER OF OPERATIONS DURING THE VIETNAM ERA.

(a) EPIDEMIOLOGICAL STUDY.—Not later than 120 days after the date of enactment of this Act, the Secretary of Veterans Affairs, in consultation with the Director of the Centers for Disease Control and Prevention of the Department of Health and Human Services, shall commence an epidemiological study on the prevalence of cholangiocarcinoma in covered veterans of the Vietnam era, using data from the Veterans Affairs Central Cancer Registry and the National Program of Cancer Registries. The study shall—

(1) identify the rate of incidence of cholangiocarcinoma in covered veterans of the Vietnam era and in residents of the United States, from the beginning of the Vietnam era to the date of enactment of this Act; and

(2) for each of the groups specified in paragraph (1), identify the percentage of individuals with cholangiocarcinoma by various demographic characteristics, including by age, gender, race, ethnicity, and the geographic location of the patient at the time of diagnosis.

(b) REPORT TO CONGRESS.—Not later than one year after the completion of the study under subsection (a), the Secretary shall submit to Congress a report containing—

(1) the results of the study under subsection (a): and

(2) recommendations for administrative or legislative actions required to address issues identified in the study under subsection (a).

(c) CONTINUED TRACKING OF CHOLANGIOCARCINOMA IN COVERED VETERANS OF THE VIETNAM ERA.—The Secretary shall track the prevalence of cholangiocarcinoma in covered veterans of the Vietnam era using the Veterans

Affairs Central Cancer Registry, and provide such information to Congress as required under subsection (d).

(d) FOLLOW-UP REPORTS.—The Secretary shall periodically submit to the Congress an updated report under subsection (b), as determined by the Secretary.

(e) Definitions.—In this section:

(1) The term "Secretary" means the Secretary of Veterans Affairs.

(2) The term "Vietnam era" has the meaning given such term in section 101 of title 38, United States Code.

(3) The term "covered veterans of the Vietnam era" means veterans who served in the Vietnam theater of operations during the Vietnam era.

SEC. 3. MODIFICATION OF CERTAIN HOUSING LOAN FEES.

The loan fee table in section 3729(b)(2) of title 38, United States Code, is amended by striking "November 15, 2031" each place it appears and inserting "November 29, 2031".

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.

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. 4424, as amended, introduced by my friend and fellow veteran, Mr. LALOTA from New York. Representative LALOTA's bill would require VA to conduct a study and produce a report on the frequency of bile duct cancer for veterans who served in and around the Vietnam war.

Mr. Speaker, it goes without saying that many veterans and Vietnam veterans suffered greatly in their service to their country. Thousands of Vietnam veterans still live with the invisible and visible wounds of war today.

Eating uncooked fish while deployed over 60 years ago may have added to that harm. Certain undercooked fish contain a parasite known as a liver fluke, which can cause infection and scarring that could lead to bile duct cancer.

This type of cancer is a rare form of cancer and is in the U.S. but is more common in Southeast Asia. The study in this bill would rightly require VA to determine if the bile duct cancer is a result of the Vietnam-era veterans' deployment in that region.

One of the VA's most important missions is to take care of veterans' service-connected injuries. This study would help uphold that sacred mission. This bill is also an important step in continuing to ensure our Vietnam veterans receive the respect and care they have earned.

Mr. Speaker, I thank Mr. Lalota for his vitally important work on this bill, and I urge all of my colleagues to support H.R. 4424, as amended.

Mr. Speaker, 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 express my support for H.R. 4424, the Vietnam Veterans Liver Fluke Cancer Study Act, as amended.

Liver fluke is a serious parasitic infection that is a well-recognized risk factor for the development of bile duct cancer.

H.R. 4424, as amended, would require VA, in consultation with the Centers for Disease Control and Prevention, to commence an epidemiological study on the prevalence of bile duct cancer in veterans who served in the Vietnam war versus their nonveteran U.S. resident counterparts. This legislation requires VA to submit a regular report with the results of the study broken out by age, gender, race, ethnicity, and geographic location.

I certainly understand why Vietnam war veterans would be concerned about their exposure to this disease and believe we should do everything possible to ensure veterans have access to care and treatment for diseases they may have been exposed to as a part of their service.

Mr. Speaker, while I have concerns that this effort is duplicative given VA's previous and ongoing research on this disorder, I welcome additional research and will support the bill today, and I urge my colleagues to do the same.

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

Mr. BOST. Mr. Speaker, I yield such time as he may consume to the gentleman from New York (Mr. LALOTA), the sponsor of the bill.

Mr. LALOTA. Mr. Speaker, I thank the chairman, a Marine Corps veteran, for yielding.

Mr. Speaker, there is an obvious link between liver fluke disease and our Vietnam veterans' service in that war, but the VA won't cover their care. My bill would help fix that and do right by our Vietnam veterans.

Data from multiple studies clearly demonstrate Vietnam veterans have a much greater chance of contracting, suffering from, and dying from the liver fluke parasite, yet the VA does not help veterans who are fighting liver fluke disease. That is wrong, Mr. Speaker.

The correlation between the liver fluke parasite and service in Vietnam is obvious. In 2018, the Northport VA Medical Center conducted a first-of-its-kind study using a 50-veteran sample size. The initial results of that study highlighted three things: a substantial need for greater study of this issue; two, the development of standardized treatment options; and three, broader accessibility of care for veterans at VA facilities across the country.

That study was 6 years ago and could have been justification enough for the VA to start covering affected Vietnam veterans, but the VA insisted on another study. A second study was ordered. After years of delays, supposedly due to the pandemic, a more recent study finally concluded in 2024. The 2024 study affirmed what so many Vietnam veterans have been saying for years, that there is indeed a link between the liver fluke disease and service in Vietnam.

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Specifically, the study in which Marine Corps veterans participated demonstrate that there is a 30 percent greater risk of mortality from this liver fluke disease for marines who served in the Vietnam war theater as compared to marines who served elsewhere

Mr. Speaker, you would think these findings, coupled with the 2018 findings, would be justification enough for the VA to start covering affected Vietnam veterans. Yet, after multiple in-depth studies which corroborate the link between our veterans' service in Vietnam and the rare liver fluke disease, the VA still says these studies still are not enough.

To fight the VA's ambivalence towards these Vietnam veterans, I am urging all of my colleagues to support my bipartisan legislation, H.R. 4424, the Vietnam Veterans Liver Fluke Cancer Study Act.

This act would require the VA, in conjunction with the Centers for Disease Control and Prevention, to conduct a third study to determine the prevalence of liver fluke amongst the Vietnam veteran population.

If the VA won't take action, then we will continue to force them to confront the facts until they come to the same conclusion as the rest of us.

Our Vietnam veterans are dying every day, and we do not have the luxury of time. Too much time has passed already. We went through a similar and terrible situation with our blue water Navy veterans and Agent Orange. Let us not make the same mistake with liver fluke.

I thank Chairman Bost and Ranking Member Takano for their leadership and support of this critical legislation. Together, we can make sure that our Vietnam veterans get the care, recognition, and support they so rightfully deserve.

Mr. BOST. Mr. Speaker, I have no further speakers on this particular legislation, I am ready to close, and I reserve the balance of my time.

Mr. TAKANO. Mr. Speaker, I have no further speakers, and I yield myself the balance of my time to close.

Mr. Speaker, I ask all of my colleagues to join me in passing H.R. 4424, the Vietnam Veterans Liver Fluke Cancer Study Act, as amended, and I yield back the balance of my time.

Mr. BOST. Mr. Speaker, once again, I also encourage 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. 4424, as amended.

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

A motion to reconsider was laid on the table.

VETERANS ACCESSIBILITY ADVISORY COMMITTEE ACT OF 2024

Mr. BOST. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 7342) to establish the Veterans Advisory Committee on Equal Access, and for other purposes as amended.

The Clerk read the title of the bill. The text of the bill is as follows:

H.R. 7342

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 Accessibility Advisory Committee Act of 2024".

SEC. 2. VETERANS ADVISORY COMMITTEE ON EQUAL ACCESS.

- (a) Establishment.—
- (1) IN GENERAL.—Not later than 180 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall establish within the Department of Veterans Affairs an advisory committee on matters relating to accessibility of the Department for individuals with disabilities.
- (2) DESIGNATION.—The advisory committee established by paragraph (1) shall be known as the "Veterans Advisory Committee on Equal Access" (in this section the "Advisory Committee").
 - (b) MEMBERSHIP.—
- (1) VOTING MEMBERS.—The Advisory Committee shall be composed of 15 voting members, appointed by the Secretary of Veterans Affairs. In appointing such members, the Secretary shall ensure the following:
- (A) Four are veterans with disabilities, including mobility impairment, hearing, visual, and mental or cognitive disabilities.
- (B) Four are experts on issues described in subsection (f)(1)(A) or the provisions of law set forth under subsection (f)(1)(B).
- (C) Two are employees of the Department, one from the Section 508 Office and one from the Architectural Accessibility Program, who oversee the compliance of the Department with Federal accessibility laws.
- (D) Five are representatives nominated by national veterans service organizations that advocate for veterans with physical, sensory, mental, or cognitive disabilities.
- (2) EX OFFICIO MEMBERS.—The Advisory Committee shall also include four ex officio members (or their designees):
 - (A) The Under Secretary for Health.
 - (B) The Under Secretary for Benefits.
- $\left(C\right)$ The Under Secretary for Memorial Affairs.
- (D) The chairperson of the Architectural and Transportation Barriers Compliance Board (known as the "Access Board").
 - (c) TERMS; VACANCIES.-
- (1) TERMS.—A member of the Advisory Committee shall be appointed for a term of two years. The Secretary may reappoint members to the Advisory Committee for such additional two-year terms as the Secretary determines appropriate.
- (2) VACANCIES.—The Secretary shall fill a vacancy in the Advisory Committee in the same manner as the original appointment