SENATE

Report 114–237

MILITARY CONSTRUCTION, VETERANS AFFAIRS, AND RELATED AGENCIES APPROPRIATION BILL, 2017

APRIL 18, 2016.—Ordered to be printed

Mr. KIRK, from the Committee on Appropriations, submitted the following

REPORT

[To accompany S. 2806]

The Committee on Appropriation reports the bill (S. 2806) making appropriations for military construction, the Department of Veterans Affairs, and related agencies for the fiscal year ending September 30, 2017, and for other purposes, reports favorably thereon and recommends that the bill do pass.

Amounts in new budget authority

· ·	
Total of bill as reported to the Senate	\$190,096,633,000
Amount of 2016 appropriations	
Amount of 2017 budget estimate	189,937,038,000
Bill as recommended to Senate compared to—	
2016 appropriations	-88,153,103,000
2017 budget estimate	$+159,\!595,\!000$

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BACKGROUND

PURPOSE OF THE BILL

The Military Construction, Veterans Affairs, and Related Agencies appropriations bill provides necessary funding for the planning, design, construction, alteration, and improvement of military facilities worldwide. It also finances the cost of military family housing and the U.S. share of the NATO Security Investment Program. In addition, the bill provides funding, including environmental remediation, for base closures and realignments authorized by law. The bill provides resources to the Department of Veterans Affairs for veterans benefits and healthcare and funding for U.S. cemeteries and battlefield monuments both in the United States and abroad, including the American Battle Monuments Commission and Arlington National Cemetery. Additionally, the bill funds the U.S. Court of Appeals for Veterans Claims and the Armed Forces Retirement Homes.

COMMITTEE RECOMMENDATION

The Committee recommends new budget authority totaling \$190,096,633,000 for fiscal year 2017 military construction, family housing, base closure, veterans healthcare and benefits, including fiscal year 2018 advance appropriations for veterans medical care and appropriated mandatories, and related agencies. This includes \$103,952,601,000 in mandatory funding and \$86,144,032,000 in discretionary funding. The table at the end of the report displays the Committee recommendation in comparison with the current fiscal year and the President's fiscal year 2017 request.

APPROPRIATIONS FOR FISCAL YEAR 2017

	Budget request	Senate recommendation
New budget authority	\$189,937,038,000 63,271,000,000	\$190,096,633,000 63,271,000,000
mandatories	102,515,876,000 66,385,032,000 103,935,996,000	102,515,876,000 - 66,385,032,000 - 103,935,996,000
Total appropriations for fiscal year 2017	185,402,886,000	185,562,481,000

OVERVIEW AND SUMMARY OF BILL

The Military Construction, Veterans Affairs, and Related Agencies appropriations bill funds an array of programs that are vital to America's military personnel and their families, and to the Nations' veterans. For U.S. military forces and their families worldwide, the bill funds critical infrastructure, ranging from mission es-

sential operational and training facilities to key quality-of-life facilities, including barracks, family housing, child care centers, schools and hospitals.

For America's 21.7 million veterans, the bill provides the necessary funding for veterans benefits and healthcare, from prescription drugs and clinical services to the construction of hospitals and

other medical facilities throughout the Nation.

The bill also funds veterans cemeteries in the United States and provides funding for four independent agencies—the American Battle Monuments Commission, the U.S. Court of Appeals for Veterans Claims, Arlington National Cemetery, and the Armed Forces Re-

tirement Homes.

Printing Efficiency.—The Committee is concerned about the millions of taxpayer dollars spent on wasteful printing practices each year and the lack of clear printing policies within each Agency. While progress has been made to better utilize the cloud and digitize records, little progress has been made to reform in-house printing practices. The Committee directs each Agency to work with Office of Management and Budget to reduce printing and reproduction by 34 percent and report to the Committee within 60 days after enactment of this act on what steps have been taken to reduce printing volume and costs. The report should specifically identify how much money each Agency will be saving.

TITLE I

MILITARY CONSTRUCTION

ITEMS OF SPECIAL INTEREST

HEARINGS

The Subcommittee on Military Construction, Veterans Affairs, and Related Agencies held one hearing related to the fiscal year 2017 military construction budget request. Witnesses included representatives of the Army, Navy, Marine Corps, Air Force, and the Office of the Secretary of Defense.

SUMMARY OF COMMITTEE RECOMMENDATIONS

The fiscal year 2017 budget request for military construction and family housing totals \$7,444,056,000. The Committee recommends \$7,930,000,000, which is \$485,944,000 above the President's budget request. This includes \$172,449,000 requested by the President in a separate Overseas Contingency Operations title.

REPROGRAMMING GUIDELINES

The following reprogramming guidelines apply for all military construction and family housing projects. A project or account (including the sub-elements of an account) which has been specifically reduced by the Congress in acting on the budget request is considered to be a congressional interest item and as such, prior approval is required. Accordingly, no reprogrammings to an item specifically reduced below the threshold by the Congress are permitted.

The reprogramming criteria that apply to military construction projects (25 percent of the funded amount or \$2,000,000, whichever is less) continue to apply to new housing construction projects and to improvements over \$2,000,000. To provide the services the flexibility to proceed with construction contracts without disruption or delay, the costs associated with environmental hazard remediation such as asbestos removal, radon abatement, lead-based paint removal or abatement, and any other legislated environmental hazard remediation may be excluded, provided that such remediation requirements could not be reasonably anticipated at the time of the budget submission. This exclusion applies to projects authorized in this budget year, as well as projects authorized in prior years for which construction has not been completed.

Furthermore, in instances where prior approval of a reprogramming request for a project or account has been received from the Committee, the adjusted amount approved becomes the new base for any future increase or decrease via below-threshold reprogrammings (provided that the project or account is not a congressional interest item as defined above).

In addition to these guidelines, the services are directed to adhere to the guidance for military construction reprogrammings and notifications, including the pertinent statutory authorities contained in Department of Defense [DOD] Financial Management Regulation 7000.14-R and relevant updates and policy memoranda.

REAL PROPERTY MAINTENANCE

The Committee recommends a continuation of the following general rules for repairing a facility under "Operation and Maintenance" account funding:

-Components of the facility may be repaired by replacement, and such replacement may be up to current standards or code.

—Interior arrangements and restorations may be included as repair, but additions, new facilities, and functional conversions must be performed as military construction projects.

Such projects may be done concurrent with repair projects, as long as the final conjunctively funded project is a complete and

usable facility.

-The appropriate Service Secretary shall submit a 21-day notification prior to carrying out any repair project with an esti-

mated cost in excess of \$7,500,000.

The Department is directed to continue to report on the real property maintenance backlog at all installations for which there is a requested construction project in future budget requests. This information is to be provided on the form 1390. In addition, for all troop housing requests, the form 1391 is to continue to show all real property maintenance conducted in the past 2 years and all future requirements for unaccompanied housing at that installation.

INCREMENTAL FUNDING

In general, the Committee supports full funding for military construction projects. However, it continues to be the practice of the Committee to provide incremental funding for certain large projects, despite administration policy to the contrary, to enable the services to more efficiently allocate military construction dollars among projects that can be executed in the year of appropriation.

MISSILE DEFENSE

The Committee remains committed to rapidly implementing the European Phased Adaptive Approach [EPAA]. Construction of the first Aegis Ashore missile defense site in Deveselu, Romania is complete and the site is operational. The Committee fully funded construction of the second site at Redzikowo, Poland in fiscal year 2016, and expects the Missile Defense Agency to pursue an aggressive construction schedule to bring this critical asset online. Additionally, the Committee fully funds the request for the first phase of the Long Range Discrimination Radar at Clear, Alaska. This radar will dramatically improve our ability to effectively target ballistic missile threats to the homeland coming from the Pacific. As the missile threat continues to evolve, the Committee remains strongly supportive of the expeditionary deployment of a Terminal High Altitude Area Defense battery on Guam. The Committee encourages the Department to consider making this deployment permanent and requesting appropriate military construction projects in support of this critical mission.

OTHER MATTERS

Asia-Pacific Realignment and Infrastructure.—The Committee remains interested in infrastructure requirements driven by force structure changes in the Pacific Command [PACOM] Area of Responsibility. The relocation of Marines from Okinawa, recapitalization of bases on Guam, rotational deployments in Australia, and the movement of forces in Korea are initiatives that require significant military construction. In light of these investments and the developing threat, the Committee remains supportive of a strong U.S. strategic presence, including missile defense capabilities, throughout the region.

Recent Chinese land reclamation projects in the South China Sea, apparently military in nature, are indicative of the need for properly located, forward deployed U.S. forces in the region. The Committee is closely monitoring developments in the South China Sea and is encouraged by progress with the Enhanced Defense Cooperation Agreement with the Philippines, which will expand access for U.S. forces at five locations throughout the country. The Committee expects to be kept fully apprised of military construction requirements resulting from this and other enhanced partnerships in the region, including projects utilizing foreign financing

and cost-sharing agreements.

The Committee remains concerned about the status of the Futenma Replacement Facility [FRF] in Okinawa. Continuous local protests, current and anticipated lawsuits, local government opposition, and repeated delays in construction paint a very bleak picture for the future of this project. In testimony before the Senate Armed Services Committee on February 23, 2016, PACOM Commander Admiral Harry Harris noted that these factors have already led to a 2 year delay in completion of the project, which will not be complete until 2025 under the best of circumstances. The Committee continues to urge the Department to consider potential alternatives to the FRF that already exist on Okinawa, including facilities at Marine Corps Air Station Futenma and Kadena Air Base.

The FRF delays combined with severely constrained military construction budget requests leaves the Committee concerned that the overall relocation of Marines under the Defense Policy Review Initiative will be delayed as a result. At the Committee's request, the Government Accountability Office [GAO] is conducting a comprehensive review of force realignment and posture in the Pacific. The Committee expects the Department to take GAO's findings

into consideration as it builds its future budgets.

Energy Policy.—The Department of Defense [DOD] is the largest consumer of energy in the Federal Government, accounting for nearly 80 percent of the Government's total energy consumption. The Committee commends the Department for its efforts to improve the energy efficiency of its facilities and installations, reduce its energy consumption, and invest in renewable energy projects and energy security. The Committee continues to support the Department's efforts to incorporate green building technologies into new facility construction and into the renovation of existing build-

ings, including leading-edge technologies that can minimize lifecycle costs. The DOD and the services should engage with government, industry, and academia to identify and utilize innovative technologies to reduce long-term energy costs, limit the constraints of energy and water resources on military mission capabilities and readiness, and meet congressional and DOD mandated goals for renewable energy generation and energy and water efficiency. Military installations in Hawaii are among those at the forefront of the military's efforts to address these issues, including the development of net-zero energy military housing and installation facilities, upgrades and retrofits for improved energy and water efficiency, and microgrid demonstrations. The Committee supports the Department's investments in microgrid energy security and encourages the Department to continue to explore ways to mitigate the risk to mission critical assets and promote energy independence at military installations through the Energy Conservation Investment

Program [ECIP]. Al Udeid Air Base Mold Contamination.—The Committee is concerned about reports that airmen serving at Al Udeid Air Base in Qatar were living in dangerously contaminated barracks. On social media and later in the press, reports detailed collapsing ceilings, contaminated water, and toxic black mold found throughout the facility. The Committee has raised concerns in the past about low levels of funding for facility sustainment, restoration and modernization, and if the black mold issues at Al Udeid were a result of a lack of funding for maintenance, that is unacceptable. Also, the Committee is aware that the Department of Defense Inspector General released a report in September, 2014 [DODIG-2014-121] that identified 1,057 deficiencies and code violations "that could affect the health, safety, and well-being of warfighters and their families" stationed in Japan. Included among the deficiencies were elevated levels of radon and excessive mold growth. In light of the Inspector General report and the reports from Al Udeid, the Committee directs the Department to submit a report not later than 180 days after enactment of this act detailing global military housing locations with mold contamination, mitigation strategies implemented or expected to be in place, and any new construction standards designed to prevent mold contamination.

Water Conservation on Military Installations.—The Committee recognizes that the Department of Defense [DOD] has the opportunity to play a key role in advancing our Nation's water security by implementing water conservation, reuse, and recharge practices on military installations. This should include efforts to incorporate water conservation technologies into new infrastructure design, as well as to update existing infrastructure to make it more water ef-

ficient.

The Committee also recognizes that many technologies that increase water efficiency do not result in competitive returns on investment. Therefore, the Department is encouraged to implement water conservation projects that are not solely contingent on cost savings performance, but also take into account reduced water use. To assess the current status of water demand and potential water conservation opportunities across U.S. military installations, the Secretary of Defense is directed to report to the Committees on Ap-

propriations of both Houses of Congress within 180 days of enactment of this act the following: (1) the current water usage on military installations; (2) the vulnerability of each military installation to water scarcity; and, (3) the water conservation potential according to (a) reduced water use and (b) cost savings if current water conservation technologies and efficient design were implemented at

military installations.

Energy Conservation and Investment Program.—On January 29, 2016 the U.S. Government Accountability Office [GAO] released a report (GAO-16-162) regarding the DOD's Energy Conservation Investment Program (ECIP). GAO recommended that DOD improve reporting on both expected and actual savings of selected projects as well as update guidance on selecting projects to receive program funding. Currently, ECIP is focused primarily on energy conservation projects that yield returns on investment. Recognizing that energy resiliency should also be a strategic aim of the program, the Committee urges the Department to consider ECIP project selection criteria that also prioritizes installations' energy resiliency and security.

Defense Workplace Facilities Improvements.—The Committee is concerned that continued constraints on the Defense budget in the face of increasing operational requirements is taking a serious toll on the Department's aging and structurally deficient workplace facilities inventory. According to recent facility condition assessment data, roughly one in four Defense facilities are rated as being in poor or failing condition. In testimony presented to the Committee on April 7, 2016, Mr. Pete Potochney, performing the duties of Assistant Secretary of Defense for Energy, Installations and Environment, noted that, "Our limited MilCon budget for fiscal year 2017 leaves limited room for projects that would improve aging workplaces, and therefore, could adversely impact routine operations

and the quality of life for our personnel."

A prime example of deteriorating infrastructure that is adversely impacting Defense Department personnel is the parking garage at the National Maritime Intelligence Center [NMIC] in Suitland, MD, which has been certified as unsafe and structurally deficient by professional engineers. The garage, which serves a workforce of approximately 3,700 personnel, is no longer fully operational due to structural concerns despite the fact that \$12,000,000 has already been spent on repairs in an effort to maintain the facility. A Navycommissioned engineering analysis has validated that the repairs are only a stopgap measure because of the severity of the structural flaws, but due to competition for scarce military construction dollars, an urgently needed replacement project has been repeatedly delayed and is currently not projected to be programmed for funding until fiscal year 2019. As the engineering analysis noted, "The longer it takes to replace the parking structure the more severe the impact to NMIC operations.

In recognition of the fact that aging and structurally deficient workplace and support facility infrastructure has a significant impact on personnel safety and operational readiness, the Committee urges the Department and the services to prioritize needed workplace replacement projects, including the NMIC parking structure,

in the fiscal year 2018 and future budget submissions.

Coastal Erosion.—Senate Report 114–67 accompanying the fiscal year 2016 Military Construction, Veterans Affairs and Related Agencies appropriations bill included language directing the Department of Defense [DOD] to include an assessment of coastal erosion and potential flooding risks in the siting of proposed military construction projects. In a July 23, 2015, report to Congress regarding the security implications of climate-related risks, the Department noted that is has directed a global screening level assessment to determine installation vulnerabilities to climate-related security risks with the goal of identifying serious vulnerabilities and developing necessary adaptation strategies. The Committee directs the Secretary of Defense to report to the congressional defense committees not later than 120 days after enactment of this act, describing the results or the status of the vulnerability assessment, the adaptation strategies developed for vulnerable installations, and the estimated costs associated with implementing these strategies.

Utilization of the Alaska Workforce in Military Construction.— The Committee encourages the Department of Defense and the Armed Services to conduct proactive outreach to contractors located in Alaska and experienced in Arctic construction techniques and constraints in the execution of the military construction program for Alaska provided in this bill. The Committee urges the Department to conduct such outreach as near to the construction location as possible to maximize local participation. The Committee further encourages the Department to coordinate its outreach with the Alaska Department of Labor and Workforce Development, local colleges and universities, vocational and technical training providers and other organizations involved in Alaska workforce development to ensure that an experienced workforce is available for the execu-

tion of these critical national security projects.

Military Construction Funding Initiatives.—The bill includes funding for military construction initiatives to address important unfunded priorities included in the Department of Defense's unfunded priority lists provided to Congress. The Committee notes that in recent years the military construction budget requests have been at historically low levels. Amounts budgeted for facility sustainment, restoration, and modernization are similarly low. The infrastructure initiatives in unfunded priority lists would ordinarily appear as part of the annual budget request, but were not included as the military construction budget remains severely constrained.

For this reason, the Committee includes an additional \$40,500,000 for the Army, \$143,000,000 for the Navy and Marine Corps, \$195,465,000 for the Air Force, \$64,364,000 for Defense-Wide, \$16,500,000 for the Army National Guard, \$34,200,000 for the Army Reserve, and \$14,400,000 for Family Housing Construction, Army. All additional funding is reserved for projects that were included in the unfunded priority lists submitted to Congress.

Rescissions.—The Committee recommends an administrative provision rescinding prior year unobligated funds due primarily to

project bid savings and the slow execution of projects.

Overseas Contingency Operations.—The Committee does not include funds requested by the President designated as Overseas Contingency Operations in title IV. Instead, the Committee fully

funds these requested projects in the base military construction accounts in title I.

MILITARY CONSTRUCTION OVERVIEW

Appropriations, 2016	\$6,916,539,000
Budget estimate, 2017	6,124,204,000
Committee recommendation	6.294.542.000

MILITARY CONSTRUCTION ACCOUNTS—PROGRAM DESCRIPTION

The military construction appropriation provides for acquisition, construction, installation, and equipment of temporary or permanent public works, military installations, facilities, and real property for the Department of Defense. This appropriation also provides for facilities required as well as funds for infrastructure projects and programs required to support bases and installations around the world.

MILITARY CONSTRUCTION, ARMY

Appropriations, 2016	\$663,245,000
Budget estimate, 2017	503,459,000
Committee recommendation	532,359,000

COMMITTEE RECOMMENDATION

The Committee recommends \$532,359,000 for the Army for fiscal year 2017. This amount is \$130,886,000 below the fiscal year 2016 enacted level and \$28,900,000 above the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

Defense Laboratory Enterprise Facilities and Infrastructure.—The Committee notes that DOD investments in Defense laboratories has been lacking, resulting in negative impacts on the ability of the military to develop new acquisition programs or perform cutting-edge research. At the same time, the Nation's near-peer competitors are making significant new investments in their research and development capabilities as part of the effort to close the technology gap with the U.S. military. Of additional concern, aging lab infrastructure also creates a disincentive to attracting new employees as DOD tries to rebuild its technical workforce.

One of the tools that Congress has provided to incentivize DOD lab investment is the establishment of a higher threshold for unspecified minor military construction [UMMC] for laboratories to enable the services to keep up with a threat that evolves faster than the normal planning process. However, the Committee is concerned that the services are not programming sufficient UMMC to take full advantage of the laboratory revitalization initiative. For example, in fiscal year 2016, the Army, which operates an extensive network of DOD labs, did not allocate any minor military construction funding for necessary laboratory revitalization projects, and the request for UMMC in the Army has remained flat at \$25,000,000. Therefore, the Committee recommends an additional \$10,000,000 to supplement unspecified minor construction, and the Army is encouraged to pursue opportunities to use the additional funding for lab revitalization.

Major Range and Test Facility Bases.—The Committee is concerned about the lack of investment and sustainment of Major Range and Test Facility Bases. In the past 5 years, only seven military construction projects have been requested in direct support of test and evaluation missions at these bases nationwide. For example, White Sands Missile Range, which is the Nation's largest overland testing facility, has not received a military construction project in support of test and evaluation missions in over a decade. As a result, support for critical testing on missile systems such as the Standard Missile-2, Patriot Missile system, Joint Air to Surface Standoff Missile, Cruise Missile, and others may be adversely impacted. The lack of military construction investment at these test and evaluation facilities places future technology development at risk and threatens the ability to counter emerging threats. Therefore, the Committee directs the Defense Department to submit a report within 90 days after enactment of this act outlining its plan to address military construction requirements at Major Range and Test facilities.

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

Appropriations, 2016	\$1,669,239,000
Budget estimate, 2017	1,027,763,000
Committee recommendation	1,087,572,000

COMMITTEE RECOMMENDATION

The Committee recommends \$1,087,572,000 for Navy and Marine Corps military construction for fiscal year 2017. This amount is \$581,667,000 below the fiscal year 2016 enacted level and \$59,809,000 above the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

MILITARY CONSTRUCTION, AIR FORCE

Appropriations, 2016	\$1,389,185,000
Budget estimate, 2017	1,481,058,000
Committee recommendation	1,579,798,000

COMMITTEE RECOMMENDATION

The Committee recommends \$1,579,798,000 for the Air Force in fiscal year 2017. This amount is \$190,613,000 above the fiscal year 2016 enacted level and \$98,740,000 above the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

Air Force Ballistic Missile Facilities.—The Committee is aware that ground-based intercontinental ballistic missile [ICBM] facilities at Malmstrom Air Force Base [AFB], Montana; Minot AFB, North Dakota; and F. E. Warren AFB, Wyoming, are aging and in urgent need of replacement. The Air Force has developed a funding roadmap to replace the Weapons Storage Facilities [WSFs] at each of the bases, beginning with the construction of a prototype facility at F. E. Warren AFB, which was funded in fiscal year 2016. A replacement WSF at Malmstrom, programmed for fiscal year 2019, will be based on the F. E. Warren prototype. A replacement facility

for Minot AFB is also planned but is not programmed for funding

in the current Future Years Defense Program [FYDP].

Given the failing condition of the weapons storage facilities due to decades of wear-and-tear and a lack of sufficient maintenance and sustainment funding, the Committee urges the Air Force to prioritize replacement of not only the WSFs but also other aging facilities at these installations, which are the only Air Force bases in the Nation to have Minuteman-III ICBM launch capability, and to accelerate funding of both the Malmstrom and Minot WSFs within the current FYDP. As an Air Force analysis of the WSFs at Malmstrom earlier this year documented, continued deferral of replacing these facilities carries risks far beyond bricks-and-mortar deterioration, including the following impacts on operating costs and operational readiness:

—Day-to-day operations, maintenance and labor costs have increased 280 percent over the past 5 years while engineers have

executed patchwork repairs on existing infrastructure.

—An additional 3,000 man-hours of human surveillance is required annually due to security system inadequacies.

—Recent flooding and fire suppression issues cancelled training and certification operations for 6 months resulting in 4,000 lost man-hours.

—Munitions experts are required to work extra shifts, which likely contributed to a drop in retention from 75 percent to 20 percent in the last 5 years.

As the Air Force analysis confirms, military construction is a key component of readiness. Failure to invest in needed military construction projects does not just impact the cost of trying to maintain a deteriorating facility, which in itself is substantial, but it also impacts training, readiness and retention of personnel—the very areas that the Department of Defense is focused on reinforcing in a time of severe budget constraints. Nowhere is this more important than in the Nation's nuclear deterrence efforts. As Secretary of the Air Force Deborah Lee James noted in testimony presented to the Senate Defense Appropriations Subcommittee on the fiscal year 2017 Air Force budget request, "There is no mission more crit-

ical than maintaining our Nation's nuclear capability."

It is clear from the analysis of the weapons storage facilities at Malmstrom AFB that adequate infrastructure is a key component of maintaining nuclear capability. Unfortunately, WSFs are not the only example of crumbling infrastructure at the Air Force ballistic missile fields. The Missile Alert Facilities at Malmstrom, which house the ICBM mission support personnel, are also in an advanced state of disrepair. Like the MSFs, the Missile Alert Facilities date to the early 1960s. The power, communications and air supply systems for the Launch Control Center are housed in unhardened rooms. The underground utilities have deteriorated to the point that they require extensive maintenance but remain subject to frequent water and sewage disruptions. According to officials at Malmstrom, the primary Missile Alert Facility structures are often infested with rodents, rattlesnakes and mold due to gaps between the foundation and wall structures as a result of the facilities settling. Of extreme concern to the Committee is that a military construction project for the first phase of construction to re-

place the Missile Alert Facilities at Malmstrom, which was programmed for fiscal year 2019 in the fiscal year 2016 Air Force FYDP, was eliminated from the fiscal year 2017–2021 FYDP due

to budget constraints.

Strategic nuclear deterrence capabilities cannot be sustained with third-rate support infrastructure. To assess the impact of indefinitely deferring replacement of the Missile Alert Facilities at Malmstrom and other ballistic missile bases, the Committee directs the Secretary of the Air Force to undertake an analysis of the cost of maintaining the existing Missile Alert Facilities at these bases including: (a) an assessment of day-to-day operations, maintenance and labor cost increases over the past 5 years; (b) annual personnel hours and costs required to maintain human security surveillance; (c) lost training and certification man-hours due to safety hazards: (d) estimated impact of increased workloads and substandard working conditions on personnel retention over the past 5 years; and (e) other factors impacting operational costs and readiness. The Secretary is directed to provide a report to the Committees on Appropriations of both Houses of Congress within 90 days of enactment of this act on the findings of the analysis and a projected cost and timeline for replacing the Weapons Alert Facilities at each of these

Air Force Facility Security Requirements.—The Committee is concerned with the Department's funding recommendation for the Air Force's unspecified minor construction account. An additional \$10,000,000 is provided to assist installations in the continental U.S. with significant facility entry and exit point concerns. Priority should be given to installations with access control points that

present safety, security and traffic hazards.

Software Sustainment Infrastructure.—The Committee notes the growing demand for software sustainment resulting from the deployment of new, technologically advanced weapons systems. For example, the F-35 has more than 8 million lines of code, roughly four times as many as the F-22. As a result, the existing software sustainment infrastructure is under increasing stress. The Committee encourages the Air Force to prioritize the capitalization of its software sustainment infrastructure and to utilize all its au-

thorities to ensure mission critical software needs are met.

Physical Fitness Centers.—Physical fitness is a core requirement of military readiness, and the Committee commends the Air Force for programming the construction of multiple physical fitness centers over the fiscal year 2017 Future Years Defense Program [FYDP]. However, the Air Force program is still small, with only eight physical fitness centers programmed over the FYDP, and all but one—a fiscal year 2021 project for the Niagara Falls, NY, Air Reserve Station—are active Air Force projects. Physical fitness is equally important to members of the Air Guard and Air Force Reserve, who regularly train and serve alongside active duty airmen and women. Access to physical fitness centers such as the one proposed for the Niagara Falls Air Reserve Station will increase the readiness of Guard and reserve personnel to ensure they are adequately trained at the highest readiness level to be ready to deploy. The Committee therefore urges the Air Force to prioritize construction of the Niagara Falls facility within the FYDP and to program

additional Guard and reserve physical fitness facilities in the fiscal year 2018 FYDP.

KC-46 Strategic Basing.-The Committee supports the Air Force's long-term effort to recapitalize the United States' aging Air Force aerial refueling tanker fleet and has supported the beddown of the KC-46A with appropriations for Military Construction at the KC-46A Formal Training Unit, Main Operating Base 1, Main Operating Base 2, and Main Operating Base 3. The Committee is aware that the Air Force is currently developing a list of candidate installations through the strategic basing process for KC-46A Main Operating Base 4. The Committee is also aware that through this process, the Air Force is considering a possible reduction in the number of Primary Assigned Aircraft from 36 to 24 for this location. As the Air Force has proposed Main Operating Base 4 as the second and final Active Component KC-46A Main Operating Base in the continental United States, a reduction of a full squadron of Primary Assigned Aircraft in this laydown could have significant long-term impacts for the operations, training, and readiness of the KC-46A fleet. The KC-46A represents the future of the Air Force's aerial refueling capability which is an integral component of all air operations for the Air Force and the other services. Understanding the gravity of this decision, the Committee directs the Secretary of the Air Force to submit a report within 60 days of enactment of this act detailing the operational planning factors, operational risk, manpower efficiencies, maintenance efficiencies, and implications for National Guard and Reserve end strength.

MILITARY CONSTRUCTION, DEFENSE-WIDE

(INCLUDING TRANSFER OF FUNDS)

Appropriations, 2016	\$2,242,867,000
Budget estimate, 2017	2,056,091,000
Committee recommendation	2,038,980,000

COMMITTEE RECOMMENDATION

The Committee recommends \$2,038,980,000 for projects considered within the Defense-Wide account in fiscal year 2017. This amount is \$203,887,000 below the fiscal year 2016 enacted level and \$17,111,000 below the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

Medical Military Construction.—The Committee provides funding for eight projects to renovate or build new medical treatment facilities within the Department of Defense. Medical military construction budget submissions remain at historically low levels, forcing necessary projects to be deferred in the Future Years Defense Program [FYDP]. For example, the General Leonard Wood Army Community Hospital [GLWACH] replacement originally planned for fiscal year 2016 is once again deferred, now planned for fiscal year 2021. The Committee notes the Surgeon General of the United States Army testified before the Senate Appropriations Subcommittee on Defense on March 9, 2016, that this hospital replacement project remains the Army's top medical military construction priority. The existing hospital last underwent a major renovation

nearly 40 years ago. The Committee recognizes that the GLWACH serves a large population with few alternatives military health system providers in the surrounding area. Due to the quality of life importance of this and other medical facilities like it, the Committee strongly encourages the Department to prioritize and restore medical military construction projects within the FYDP submitted for fiscal year 2018. In addition, the Committee encourages the Department to continue collaborating with the Department of Veterans Affairs to pursue Joint DOD/VA medical facility projects.

MILITARY CONSTRUCTION, ARMY NATIONAL GUARD

Appropriations, 2016	\$197,237,000
Budget estimate, 2017	232,930,000
Committee recommendation	232,930,000

COMMITTEE RECOMMENDATION

The Committee recommends \$232,930,000 for Military Construction, Army National Guard for fiscal year 2017. This amount is \$35,693,000 above the fiscal year 2016 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

Army National Guard Readiness Center Transformation Plan.— Army National Guard Readiness Centers are integral to the Guard's mission. They provide critical operational training and administrative space, sensitive equipment storage, family and community support, and a base from which to stage emergency responses. However, the Army National Guard's 2014 Readiness Center Transformation Master Plan's findings report that the inventory's condition is deteriorating, and facilities have obsolete space configurations, insufficient emergency communication infrastructure, and deficient storage space. The report also outlined the staggering cost to address these failing facilities and the consequences of allowing them to continue to deteriorate. The Committee is concerned by the current state of the portfolio, and supports increased investments in National Guard Readiness Centers in accordance with the Readiness Center Transformation Master Plan so that they can better meet the needs of the Army Guard. Therefore, the Committee encourages the Department to prioritize investment in Readiness Center facilities with low readiness ratings, and to examine where efficiencies and cost-sharing can be achieved by co-locating Readiness Centers with other public facilities. The Committee further directs the Army to provide a report no later than 120 days after enactment of this Act on a plan to implement, as a first step, the National Guard's "Affordable Readiness" Transformation Plan, including an annual investment estimate based on the proposed 15-year implementation timeline.

MILITARY CONSTRUCTION, AIR NATIONAL GUARD

Appropriations, 2016	\$138,738,000
Budget estimate, 2017	143,957,000
Committee recommendation	143,957,000

COMMITTEE RECOMMENDATION

The Committee recommends \$143,957,000 for Military Construction, Air National Guard for fiscal year 2017. This amount is \$5,219,000 above the fiscal year 2016 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

MILITARY CONSTRUCTION, ARMY RESERVE

Appropriations, 2016	\$113,595,000
Budget estimate, 2017	68,230,000
Committee recommendation	68,230,000

COMMITTEE RECOMMENDATION

The Committee recommends \$68,230,000 for Military Construction, Army Reserve for fiscal year 2017. This amount is \$45,365,000 below the fiscal year 2016 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

MILITARY CONSTRUCTION, NAVY RESERVE

Appropriations, 2016	\$36,078,000
Budget estimate, 2017	38,597,000
Committee recommendation	38,597,000

COMMITTEE RECOMMENDATION

The Committee recommends \$38,597,000 for Military Construction, Navy Reserve for fiscal year 2017. This amount is \$2,519,000 above the fiscal year 2016 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

MILITARY CONSTRUCTION, AIR FORCE RESERVE

Appropriations, 2016	\$65,021,000
Budget estimate, 2017	188,950,000
Committee recommendation	188,950,000

COMMITTEE RECOMMENDATION

The Committee recommends \$188,950,000 for Military Construction, Air Force Reserve for fiscal year 2017. This amount is \$123,929,000 above the fiscal year 2016 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

NORTH ATLANTIC TREATY ORGANIZATION

SECURITY INVESTMENT PROGRAM

Appropriations, 2016	\$135,000,000
Budget estimate, 2017	177,932,000
Committee recommendation	177.932.000

PROGRAM DESCRIPTION

The North Atlantic Treaty Organization [NATO] appropriation provides for the U.S. cost share of the NATO Security Investment

Program for the acquisition and construction of military facilities and installations (including international military headquarters) and for related expenses for the collective defense of the NATO Treaty area.

COMMITTEE RECOMMENDATION

The Committee recommends \$177,932,000 for the North Atlantic Treaty Organization Security Investment Program [NSIP] for fiscal year 2017 as requested. This amount is \$42,932,000 above the fiscal year 2016 enacted level and equal to the budget request.

DEPARTMENT OF DEFENSE BASE CLOSURE ACCOUNT

Appropriations, 2016	\$266,334,000
Budget estimate, 2017	205,237,000
Committee recommendation	205,237,000

PROGRAM DESCRIPTION

Section 2711 of the National Defense Authorization Act for Fiscal Year 2014 (Public Law 112–239) consolidated the Base Closure Account 1990 and the Base Closure Account 2005 into a single Department of Defense Base Closure Account. The Base Closure Account provides for cleanup and disposal of property consistent with the four closure rounds required by the base closure acts of 1988 and 1990, and with the 2005 closure round required by the Defense Base Closure and Realignment Act of 1990 (10 U.S.C. 2687 note).

COMMITTEE RECOMMENDATION

The Committee recommends a total of \$205,237,000 for the Department of Defense Base Closure Account for fiscal year 2017. This amount is \$61,097,000 below the fiscal year 2016 enacted level and equal to the budget request. Funds provided for fiscal year 2017 are for environmental cleanup and ongoing operations and maintenance.

FAMILY HOUSING OVERVIEW

Appropriations, 2016	\$1,404,281,000
Budget estimate, 2017	1,319,852,000
Committee recommendation	1,319,852,000

FAMILY HOUSING ACCOUNTS—PROGRAM DESCRIPTION

The Family Housing appropriation provides funds for military family housing construction activities, operation and maintenance, the Family Housing Improvement Fund, and the Homeowners Assistance Program. Construction accounts provide funding for new construction, improvements and the Federal Government share of housing privatization. Operation and maintenance accounts fund costs associated with the maintenance and leasing of military family housing, including utilities, services, management, and furnishings.

COMMITTEE RECOMMENDATION

The Committee recommends \$1,319,852,000 for Family Housing Construction, Operations and Maintenance, and the Department's

family housing improvement fund for fiscal year 2017. This amount is \$84,429,000 below the fiscal year 2016 enacted level and equal to the budget request.

FAMILY HOUSING OPERATION AND MAINTENANCE, ARMY

Appropriations, 2016	\$375,611,000
Budget estimate, 2017	325,995,000
Committee recommendation	325,995,000

COMMITTEE RECOMMENDATION

The Committee recommends \$325,995,000 for family housing operation and maintenance, Army for fiscal year 2017. This amount is \$49,616,000 below the fiscal year 2016 enacted level and equal to the budget request.

Family Housing Operation and Maintenance, Navy and Marine Corps

Appropriations, 2016	\$353,036,000
Budget estimate, 2017	300,915,000
Committee recommendation	300.915.000

COMMITTEE RECOMMENDATION

The Committee recommends \$300,915,000 for family housing operation and maintenance, Navy and Marine Corps, in fiscal year 2017. This amount is \$52,121,000 below the fiscal year 2016 enacted level and equal to the budget request.

FAMILY HOUSING OPERATION AND MAINTENANCE, AIR FORCE

Appropriations, 2016	\$331,232,000
Budget estimate, 2017	274,429,000
Committee recommendation	274,429,000

COMMITTEE RECOMMENDATION

The Committee recommends \$274,429,000 for family housing operation and maintenance, Air Force, in fiscal year 2017. This amount is \$56,803,000 below the fiscal year 2016 enacted level and equal to the budget request.

FAMILY HOUSING OPERATION AND MAINTENANCE, DEFENSE-WIDE

Appropriations, 2016	\$58,668,000
Budget estimate, 2017	59,157,000
Committee recommendation	59,157,000

COMMITTEE RECOMMENDATION

The Committee recommends \$59,157,000 for family housing operation and maintenance, Defense-Wide, for fiscal year 2017. This amount is \$489,000 above the fiscal year 2016 enacted level and equal to the budget request.

DEPARTMENT OF DEFENSE FAMILY HOUSING IMPROVEMENT FUND

Appropriations, 2016	
Budget estimate, 2017	\$3,258,000
Committee recommendation	3,258,000

PROGRAM DESCRIPTION

The Family Housing Improvement Fund appropriation provides for the Department of Defense to undertake housing initiatives and to provide an alternative means of acquiring and improving military family housing and supporting facilities. This account provides seed money for housing privatization initiatives.

COMMITTEE RECOMMENDATION

The Committee recommends \$3,258,000 for the Family Housing Improvement Fund in fiscal year 2017. This amount is equal to the budget request.

Family Housing Construction, Army

Appropriations, 2016	\$108,695,000
Budget estimate, 2017	200,735,000
Committee recommendation	200,735,000

COMMITTEE RECOMMENDATION

The Committee recommends \$200,735,000 for Army Family Housing Construction in fiscal year 2017. This amount is \$92,040,000 above the fiscal year 2016 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

Family Housing Construction, Navy and Marine Corps

Appropriations, 2016	\$16,541,000
Budget estimate, 2017	94,011,000
Committee recommendation	94,011,000

COMMITTEE RECOMMENDATION

The Committee recommends \$94,011,000 for Family Housing Construction, Navy and Marine Corps. This amount is \$77,470,000 above the fiscal year 2016 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

Family Housing Construction, Air Force

Appropriations, 2016	\$160,498,000
Budget estimate, 2017	61,352,000
Committee recommendation	61,352,000

COMMITTEE RECOMMENDATION

The Committee recommends \$61,352,000 for Family Housing Construction, Air Force, in fiscal year 2017. This amount is \$99,146,000 below the fiscal year 2016 enacted level and equal to the budget request. Further detail of the Committee's recommendation is provided in the State table at the end of this report.

Administrative Provisions

SEC. 101. The Committee includes a provision that restricts payments under a cost-plus-a-fixed-fee contract for work, except in

cases of contracts for environmental restoration at base closure

Sec. 102. The Committee includes a provision that permits the use of funds for the hire of passenger motor vehicles.

SEC. 103. The Committee includes a provision that permits the use of funds for defense access roads.

SEC. 104. The Committee includes a provision that prohibits construction of new bases inside the continental United States for which specific appropriations have not been made.

SEC. 105. The Committee includes a provision that limits the use

of funds for purchase of land or land easements. SEC. 106. The Committee includes a provision that prohibits the use of funds to acquire land, prepare a site, or install utilities for any family housing except housing for which funds have been made

Sec. 107. The Committee includes a provision that limits the use of minor construction funds to transfer or relocate activities among installations.

SEC. 108. The Committee includes a provision that prohibits the procurement of steel unless American producers, fabricators, and manufacturers have been allowed to compete.

SEC. 109. The Committee includes a provision that prohibits pay-

ments of real property taxes in foreign nations.

SEC. 110. The Committee includes a provision that prohibits construction of new bases overseas without prior notification.

SEC. 111. The Committee includes a provision that establishes a threshold for American preference of \$500,000 relating to architect and engineering services for overseas projects.

SEC. 112. The Committee includes a provision that establishes preference for American contractors for military construction in the United States territories and possessions in the Pacific, and on Kwajalein Atoll, or in countries bordering the Arabian Gulf.

SEC. 113. The Committee includes a provision that requires notification of military exercises involving construction in excess of

\$100,000.

Sec. 115. The Committee includes a provision that permits funds appropriated in prior years to be available for construction authorized during the current session of Congress.

SEC. 116. The Committee includes a provision that permits the

use of expired or lapsed funds to pay the cost of supervision for any

project being completed with lapsed funds.

SEC. 117. The Committee includes a provision that permits obligation of funds from more than 1 fiscal year to execute a construction project, provided that the total obligation for such project is consistent with the total amount appropriated for the project.

SEC. 118. The Committee includes a provision that permits the transfer of funds from Family Housing Construction accounts to the DOD Family Housing Improvement Fund and from Military Construction accounts to the DOD Military Unaccompanied Housing Improvement Fund.

Sec. 119. The Committee includes a provision that provides

transfer authority to the Homeowners Assistance Fund.

SEC. 120. The Committee includes a provision that requires all acts making appropriations for military construction be the sole

funding source of all operation and maintenance for family housing, including flag and general officer quarters, and limits the repair on flag and general officer quarters to \$35,000 per unit per year without prior notification to the congressional defense committees.

SEC. 121. The Committee includes a provision that provides authority to expend funds from the "Ford Island Improvement" ac-

count.

SEC. 122. The Committee includes a provision that allows the transfer of expired funds to the Foreign Currency Fluctuation, Con-

struction, Defense Account.

SEC. 123. The Committee includes a provision that allows the reprogramming of military construction and family housing construction funds among projects and activities within the account in which they are funded.

SEC. 124. The Committee includes a provision that prohibits the use of funds in this title for planning and design and construction of projects at Arlington National Cemetery.

Sec. 125. The Committee includes a provision providing additional funds for unfunded military construction priorities.

SEC. 126. The Committee includes a provision rescinding unobligated balances from various military construction accounts.

SEC. 127. The Committee includes a provision regarding the consolidation or relocation of a U.S. Air Force RED HORSE Squadron outside of the United States.

Sec. 128. The Committee includes a provision prohibiting the use of funds in this title to close or realign Naval Station Guantanamo Bay, Cuba. The provision is intended to prevent the closure or transfer of the installation out of the possession of the United States, and maintain the Naval Station's long-standing regional security and migrant operations missions.

TITLE II

DEPARTMENT OF VETERANS AFFAIRS

ITEMS OF SPECIAL INTEREST

HEARINGS

The Subcommittee on Military Construction, Veterans Affairs, and Related Agencies held two hearings related to the fiscal year 2017 and 2018 Department of Veterans Affairs [VA] budget request. The subcommittee heard testimony from the Honorable David J. Shulkin, Under Secretary for Health, Mr. Danny G. I. Pummill, Acting Under Secretary for Benefits, and the Honorable Robert A. McDonald, Secretary of the Department of Veterans Affairs.

SUMMARY OF COMMITTEE RECOMMENDATIONS

The Committee recommendation includes \$177,391,336,000 for the Department of Veterans Affairs for fiscal year 2017, including \$102,532,481,000 in mandatory spending and \$74,858,855,000 in discretionary spending. The Committee also recommends \$66,385,032,000 in advance appropriations for veterans medical care for fiscal year 2018 and \$103,935,996,000 in advance appropriations for appropriated mandatories for fiscal year 2018.

DEPARTMENT OVERVIEW

The Veterans Administration was established on July 21, 1930, as an independent agency by Executive Order 5398, in accordance with the Act of July 3, 1930 (46 Stat. 1016). This act authorized the President to consolidate and coordinate Federal agencies specially created for or concerned with the administration of laws providing benefits to veterans, including the Veterans' Bureau, the Bureau of Pensions, and the National Home for Disabled Volunteer Soldiers. On March 15, 1989, the Veterans Administration was elevated to Cabinet-level status as the Department of Veterans Affairs.

VA's mission is to serve America's veterans and their families as their principal advocate in ensuring they receive the care, support, and recognition they have earned in service to the Nation. As of September 30, 2015, there were an estimated 21.7 million living veterans, with 21.6 million of them residing in the United States and Puerto Rico. There were an estimated 26.1 million dependents (spouses and dependent children) of living veterans in the United States and Puerto Rico, and there were 594,000 survivors of deceased veterans receiving VA survivor benefits in the United States and Puerto Rico. Thus, approximately 48.3 million people, or 14.8 percent of the total estimated resident population of the United

States and Puerto Rico, were recipients or potential recipients of veterans benefits from the Federal Government. VA's operating units include the Veterans Benefits Administration, Veterans Health Administration, National Cemetery Administration, and

staff support offices.

The Veterans Benefits Administration [VBA] provides an integrated program of nonmedical veterans benefits. VBA administers a broad range of benefits to veterans and other eligible beneficiaries through 56 regional offices and a records processing center in St. Louis, Missouri. The benefits provided include: compensation for service-connected disabilities; pensions for wartime, needy, and totally disabled veterans; vocational rehabilitation assistance; educational and training assistance; home buying assistance; estate protection services for veterans under legal disability; information and assistance through personalized contacts; and six life insurance programs.

The Veterans Health Administration [VHA] develops, maintains, and operates a national healthcare delivery system for eligible veterans; carries out a program of education and training of healthcare personnel; conducts medical research and development; and furnishes health services to members of the Armed Forces during periods of war or national emergency. A system of 167 medical centers, 1,018 community-based outpatient clinics, 300 vet centers, and 135 community living centers is maintained to meet the VA's

medical mission.

The National Cemetery Administration [NCA] provides for the interment of the remains of eligible deceased servicemembers and discharged veterans in any national cemetery with available grave space; permanently maintains these graves; provides headstones and markers for the graves of eligible persons in national and private cemeteries; administers the grant program for aid to States in establishing, expanding, or improving State veterans cemeteries; and provides certificates to families of deceased veterans recognizing their contributions and service to the Nation. In 2017, cemetery activities will encompass 133 national cemeteries, one national veterans' burial ground, and 33 soldiers' lots and monument sites.

Staff support offices include the Office of Inspector General, Boards of Contract Appeals and Veterans Appeals, and General Administration offices, which support the Secretary, Deputy Secretary, Under Secretary for Benefits, Under Secretary for Health, Under Secretary for Memorial Affairs, and General Counsel.

Whistleblower Protection.—The Committee remains concerned about unacceptable retaliation against whistleblowers within the Department across the Nation. The Department has made many promises to foster a culture of openness by encouraging VA employees to report cases of wrongdoing, yet the Committee continues to hear reports that once reporting cases of wrongdoing, the whistleblowers become subjects of retaliation. For example, on February 25, 2016, the Office of Special Counsel revealed OIG's actions regarding complaints filed by whistleblowers in Illinois and Louisiana were "incomplete" and "inadequate," and on September 17, 2015, OSC also reported to the President documented instances of whistleblower retaliation in Pennsylvania, Delaware, Missouri, Maryland, and Puerto Rico. The Committee finds such actions rep-

rehensible, and the Committee continues to direct the Department to send a clear and unequivocal message throughout the VA system that retaliation against whistleblowers will not stand, and those in leadership who condone or ignore such retaliation will be held accountable. The Committee will continue to advocate on behalf of those employees who receive unfair retribution for reporting wrongdoing at VA facilities and will bring to the Department's attention every instance of whistleblower retaliation brought to its attention.

As such, the Committee directs VA to create a formal process for whistleblowers to file complaints within VA that begins a paper trail for management to be held accountable for ignoring or mistreating whistleblowers. Specifically, the Department is directed to establish a Central Whistleblower Office that is not connected with VA General Counsel's office to investigate all whistleblower complaints at VA. This office will specialize in investigating whistleblower complaints, with all resources being allocated to protecting

the rights on VA whistleblowers.

Further, the Secretary shall carry out specified adverse actions against a supervisor who commits a prohibited personnel action relating to a whistleblower complaint. A supervisor who commits a prohibited personnel action shall not be paid any award or bonus for a 1 year period, and any award or bonus paid during that period shall be recouped. Retaliation includes, but is not limited to, taking a prohibited personnel action against a whistleblower for (1) filing a complaint, (2) providing information or participating as a witness in a whistleblower complaint investigation, (3) refusing to perform an action that is unlawful, and/or (4) engaging in protected communications that are related to the employee's duties. The Committee directs the Department to produce an annual report to Congress on how many whistleblower complaints were filed with VA, the location at which the alleged misconduct occurred, and the outcome of VA's investigation, including the length of time needed to reach a resolution, and a list of any personnel disciplinary ac-

For purposes of testifying in an official capacity in front of either House of Congress, a Committee of either House of Congress, or a joint or select Committee of Congress regarding whistleblower complaints, an employee of the Department should be considered as performing an official duty, and as such, the Department shall provide travel expenses, including per diem in lieu of subsistence, to

any such VA employée.

The Committee is also concerned there is no proper mechanism at the Department to inform employees of their rights under the law with regards to reporting wrongdoing and whistleblower protection. The Committee is aware there is no whistleblower protection training for employees mandated within the Department, and there is not an official handbook or orientation outlining and explaining employee rights and responsibilities in this area, to include management and their role and responsibilities either when reporting wrongdoing themselves or supervising someone who has blown the whistle on misconduct, waste, fraud, or poor patient care. Therefore, the Department is directed to ensure all employees are educated on: their rights from retaliation, existing whistle-blower protections, and resources available to them, to include the

VA Office of the Inspector General [OIG], Office of Special Counsel, and the Merit System Protection Board and the location of such resources on the OIG Web site. The Department is directed to implement education for all employees on these issues through employee orientation, employee manuals, and periodic briefings. Additionally, employees must be educated on exemptions from privacy laws, specifically that healthcare providers are exempted from the Health Insurance Portability and Accountability Act [HIPAA] privacy rules when disclosing to OIG allegations of problems with patient care. Further, any VA employee who discloses HIPAA and Privacy Act information to OIG for purposes of providing such information for an OIG investigation is not in violation of these laws. The law shall be clearly communicated by the investigator prior to any investigative interview with a VA employee. Currently, the law is not clearly stated on the OIG Web site nor regularly communicated to VA employees. It is critical all employees understand their protections under the law and are encouraged to report misconduct, waste, fraud, and poor patient care so those engaging in wrongdoing may be held accountable. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this act detailing how VA is complying with the directives listed above.

Electronic Health Record.—Achieving interoperability between the health records of the Department of Veterans Affairs and the Department of Defense remains one of the highest priorities of the Committee. The Committee believes from a servicemember's initial military entrance physical to their final interaction with VA, a seamless health record should follow the individual. VA's current VistA Evolution program and DOD's acquisition of an electronic health record are two separate and distinct programs, yet the Departments have a mandate from Congress to ensure the records are able to transmit computable data that can be used by clinicians on either side. The Committee also notes the increased utilization of medical care in the community by enrolled veterans makes it incumbent upon the Department to ensure medical information from outside VA can be easily brought into the VA's health record system. The Committee continues to expect the electronic health record [EHR] will be developed with an open architecture to best

leverage the innovation of the private sector.

Although the Committee was under the impression the decision to evolve VistA was final, in 2015, VA began a business case analysis to review the options available to the Department regarding purchasing a commercial-off-the-shelf product. The business case is also reviewing the current plan to evolve VistA. While the Committee supports this prudent decision to proceed forward with all available information, the Department is directed to make a decision about the future of the EHR as soon as possible. The development of other Information systems technology programs hinge on the decision regarding the EHR platform, including the replacement of the legacy scheduling system, and the Committee expects a decision from the Chief Information Officer of the Department no later than the end of the summer 2016.

In fiscal years 2013, 2014, 2015, and 2016, Congress required the Department to provide information on the cost, timeline, perform-

ance benchmarks, and interoperability capacity of VistA Evolution before releasing 75 percent of the funds appropriated. Even though the future of VistA is uncertain, the Committee maintains in this act its oversight authority by placing similar constraints on the obligation or expenditure of funding for the development of VistA Evolution until certain conditions are met. As the decision over the EHR progresses this year, the Committee will inform VA of any changes to this constraint. Further explanation of the Committee's intent is included in the appropriate section of the report.

Disability Claims Backlog.—The Committee commends the Department on its efforts to reduce the disability claims backlog and increase the accuracy of claims decisions, yet the processing of disability claims remains a major concern of the Committee. The Committee is committed to ensuring the Department maintains its goal of processing all claims over 125 days with 98 percent accuracy.

The Committee has not only fully funded the request for claims processing in recent years, but has provided increases above the budget requests for hiring and training claims processors, bolstering the migration to electronic claims processing systems, and addressing the increasing backlog of appeals at the Board of Veterans Appeals. As a result of these funding levels and the specific measures intended to bring the backlog down included in the fiscal year 2014 and 2015 Military Construction and Veterans Affairs and Related Agencies appropriations bill and report, VBA has made significant and notable progress in reducing the number of backlogged claims from a high of 611,000 in March 2013 to fewer than 77,483 as of April 2, 2016.

The Committee is also committed to ensuring there is not a recurrence of any sizeable backlog or a reduction in accuracy. To that end, the Committee will continue to host reoccurring meeting of the disability claims interagency working group that began in May 2013. This group includes the Under Secretary of Benefits and representatives from the Department of Defense, the Social Security Administration, and the Internal Revenue Service. The Committee will continue to assert its oversight ability by monitoring these agencies as they work to better expedite the flow of interagency information needed to process claims in a timely manner. The Committee will continue to require the Department provide monthly updates on performance measures for each Regional Office.

The Committee will continue to monitor VBA as it is making the shift from crisis-mode to maintenance-mode in the area of claims processing. Given the goal of ending the backlog at the end of 2016 was not met, the Committee directs VBA to continue working towards that goal. The Department must consider processing all claims within 125 days with 98 percent accuracy a mandate of VBA, and the Department should fund and staff this agency accordingly. The Committee is also focused on the next assumed issue for disability claims: the backlog at the appellate level.

The fiscal year 2017 justification accompanying the budget request states appeals received by the Board of Veterans Appeals are projected to increase 57 percent, from 66,778 in 2014 to 105,012 by the end of 2016. The Committee notes the Department is aware the appeals process needs reform and resources, and to that end, the Department is directed to submit a report no later than 180 days

after enactment of this act on the actions VBA is taking to reduce the backlog of appeals and streamline the appeals process.

VETERANS BENEFITS ADMINISTRATION

Appropriations, 2016	\$94.129.886.000
Advance Appropriations, 2017	
Budget estimate, 2017	
Committee recommendation, 2017	3,073,209,000
Budget estimate, advance appropriations, 2018	
Committee recommendation, advance appropriations, 2018	103,935,996,000

 $^{^{*}\}mbox{The Committee}$ notes the totals above reflect the shift of GOE, VBA from Departmental Administration to the Veterans Benefits Administration.

ADMINISTRATION OVERVIEW

The Veterans Benefits Administration [VBA] is responsible for the payment of compensation and pension benefits to eligible service-connected disabled veterans, as well as education benefits and housing loan guarantees.

COMMITTEE RECOMMENDATION

In fiscal year 2016, the Committee provided \$102,515,876,000 in advance for the Veterans Benefits Administration for fiscal year 2017. This included \$86,083,128,000 for Compensation and pensions; \$16,340,828,000 for Readjustment benefits; and \$91,920,000 for Veterans insurance and indemnities. For fiscal year 2017, the Committee recommends an additional \$16,605,000 for Veterans insurance and indemnities. Additionally, the Committee recommendation includes \$198,856,000 for the Veterans Housing Benefit Program Fund administrative expenses; \$36,000 for the Vocational Rehabilitation Loans Program account, with \$389,000 for administrative expenses; \$1,163,000 for the Native American Veteran Housing Loan Program account; \$2,856,160,000 for General Operating Expenses, Veterans Benefits Administration account; and an advance appropriation of \$103,935,996,000 for fiscal year 2018.

The Committee also notes the move of the General Operating Expenses, Veterans Benefits Administration account from Departmental Administration to the Veterans Benefits Administration with the fiscal year 2017 recommendation. This move puts GOE,VBA back under its appropriate section within the act, and the Committee instructs the Department to place GOE,VBA in this location with the fiscal year 2018 request.

COMPENSATION AND PENSIONS

(INCLUDING TRANSFER OF FUNDS)

Appropriations, 2016	\$76,865,545,000
Advance Appropriations, 2017	86,083,128,000
Budget estimate, 2017	
Committee recommendation, 2017	86,083,128,000
Budget estimate, advance appropriations, 2018	90,119,449,000
Committee recommendation, advance appropriations, 2018	90.119.449.000

PROGRAM DESCRIPTION

Compensation is payable to living veterans who have suffered impairment of earning power from service-connected disabilities. The amount of compensation is based upon the impact of disabilities on a veteran's earning capacity. Death compensation or dependency and indemnity compensation is payable to the surviving spouses and dependents of veterans whose deaths occur while on active duty or result from service-connected disabilities. A clothing allowance may also be provided for service-connected veterans who use a prosthetic or orthopedic device. In fiscal year 2017, the Department estimates it will obligate \$79,677,123,000 for payments to 4,427,225 veterans, 405,014 survivors, and 1,140 dependents receiving special benefits.

Pensions are an income security benefit payable to needy wartime veterans who are precluded from gainful employment due to nonservice-connected disabilities which render them permanently and totally disabled. Public Law 107–103, the Veterans Education and Benefits Expansion Act of 2001, restored the automatic presumption of permanent and total nonservice connected disability for purposes of awarding a pension to veterans age 65 and older, subject to the income limitations that apply to all pensioners. Death pensions are payable to needy surviving spouses and children of deceased wartime veterans. The rate payable for both disability and death pensions is determined on the basis of the annual income of the veteran or their survivors. In fiscal year 2017, the Department estimates that the Pensions program will provide benefits to 297,093 veterans and 209,606 survivors totaling \$6,087,586,000.

The Compensation and Pensions program funds certain burial benefits on behalf of eligible deceased veterans. These benefits provide the purchase and transportation costs for headstones and markers, graveliners, and pre-placed crypts; and provide partial reimbursement for privately purchased outer burial receptacles. In fiscal year 2017, the Department estimates the Compensation and Pensions program will obligate \$225,525,000 providing burial benefits. This funding will provide 45,065 burial allowances, 23,138 burial plot allowances, 24,810 service-connected death awards, 497,644 burial flags, 368,059 headstones or markers, 44,063 graveliners or reimbursement for privately purchased outer burial receptacles, and 635 caskets and urns for the internment of the remains of veterans without next of kin.

COMMITTEE RECOMMENDATION

In fiscal year 2016, the Committee provided an advance appropriation of \$86,083,128,000 for fiscal year 2017. The Committee recommendation includes an advance appropriation of \$90,119,449,000 for Compensation and pensions for fiscal year 2018. This is \$4,036,321,000 above the fiscal 2017 request and equal to the fiscal year 2018 budget request.

READJUSTMENT BENEFITS

Appropriations, 2016	\$14,313,357,000
Advance Appropriations, 2017	16,340,828,000
Budget estimate, 2017	16,340,828,000
Committee recommendation, 2017	16,340,828,000
Budget estimate, advance appropriations, 2018	13,708,648,000
Committee recommendation, advance appropriations, 2018	13,708,648,000

PROGRAM DESCRIPTION

The Readjustment benefits appropriation finances the education and training of veterans and servicemembers under chapters 30, 31, 32, 33, 34, 35, 36, 37, 39, 41, 42 and 43 of title 38, United States Code. These benefits include the All-Volunteer Force Educational Assistance Program (Montgomery GI bill) and the Post 9/11 Educational Assistance Program. Basic benefits are funded through appropriations made to the readjustment benefits appropriation and by transfers from the Department of Defense. This account also finances vocational rehabilitation, specially adapted housing grants, specially adapted automobile grants for certain disabled veterans, and educational assistance allowances for eligible dependents of those veterans who died from service-connected causes or who have a total permanent service-connected disability, as well as dependents of servicemembers who were captured or missing in action.

COMMITTEE RECOMMENDATION

In fiscal year 2016, the Committee provided an advance appropriation of \$16,340,828,000 for Readjustment benefits fiscal year 2017. The Committee recommendation includes an advance appropriation of \$13,708,648,000 for Readjustment benefits for fiscal year 2018. This is \$2,632,180,000 below the fiscal year 2017 request and equal to the fiscal year 2018 budget request.

VETERANS INSURANCE AND INDEMNITIES

Appropriations, 2016	\$77,160,000
Advance Appropriations, 2017	91.920.000
Budget estimate, 2017	16.605.000
Duaget estimate, 2017	-,,
Committee recommendation, 2017	16,605,000
Budget estimate, advance appropriations, 2018	107,899,000
Committee recommendation, advance appropriations, 2018	107.899.000

PROGRAM DESCRIPTION

The Veterans insurance and indemnities appropriation consists of the former appropriations for military and naval insurance, applicable to World War I veterans; National Service Life Insurance, applicable to certain World War II veterans; servicemen's indemnities, applicable to Korean conflict veterans; and veterans mortgage life insurance to individuals who have received a grant for specially adapted housing.

COMMITTEE RECOMMENDATION

In fiscal year 2016, the Committee provided an advance appropriation of \$91,920,000 for Veterans insurance and indemnities for fiscal year 2017. The Committee recommendation includes an advance appropriation of \$107,899,000 for Veterans insurance and indemnities for fiscal year 2018. This is \$15,979,000 above the fiscal year 2017 advanced request and equal to the fiscal year 2018 budget request.

VETERANS HOUSING BENEFIT PROGRAM FUND

	Program account	Administrative expenses
Appropriations, 2016		\$164,558,000 198,856,000 198,856,000

PROGRAM DESCRIPTION

The Veterans housing benefit program fund provides for all costs associated with VA's direct and guaranteed housing loan programs, with the exception of the Native American veteran housing loan program.

VA loan guaranties are made to servicemembers, veterans, reservists, and unremarried surviving spouses for the purchase of homes, condominiums, and manufactured homes, and for refinancing loans. VA guarantees part of the total loan, permitting the purchaser to obtain a mortgage with a competitive interest rate, even without a downpayment, if the lender agrees. VA requires a downpayment be made for a manufactured home. With a VA guaranty, the lender is protected against loss up to the amount of the guaranty if the borrower fails to repay the loan.

COMMITTEE RECOMMENDATION

The Committee recommends such sums as may be necessary for funding subsidy payments, and \$198,856,000 for administrative expenses for fiscal year 2017. Bill language limits gross obligations for direct loans for specially adapted housing to \$500,000.

VOCATIONAL REHABILITATION LOANS PROGRAM ACCOUNT

	Program account	Administrative expenses
Appropriations, 2016	\$31,000 36,000 36,000	\$367,000 389,000 389,000

PROGRAM DESCRIPTION

The Vocational Rehabilitation Loans Program account covers the cost of direct loans for vocational rehabilitation of eligible veterans and, in addition, includes administrative expenses necessary to carry out the direct loan program. Loans of up to \$2,517,000 (based on the indexed chapter 31 subsistence allowance rate) are currently available to service-connected disabled veterans enrolled in vocational rehabilitation programs, as provided under 38 U.S.C. chapter 31, when the veteran is temporarily in need of additional assistance. Repayment is made in monthly installments, without interest, through deductions from future payments of compensation, pension, subsistence allowance, educational assistance allowance, or retirement pay. Virtually all loans are repaid in full and most in less than one year.

COMMITTEE RECOMMENDATION

The Committee recommends \$36,000 for program costs and \$389,000 for administrative expenses for the Vocational Rehabilitation Loans Program account. The administrative expenses may be paid to the General Operating Expenses, Veterans Benefits Administration account. Bill language is included limiting program direct loans to \$2,517,000. It is estimated VA will make 2,618 loans in fiscal year 2017, with an average amount of \$962.

NATIVE AMERICAN VETERAN HOUSING LOAN PROGRAM ACCOUNT

Appropriations, 2016	\$1,134,000
Budget estimate, 2017	1,163,000
Committee recommendation	1,163,000

PROGRAM DESCRIPTION

The Native American veteran housing loan program is authorized by 38 U.S.C. chapter 37, section 3761 to provide direct loans to Native American veterans living on trust lands. The loans are available to purchase, construct, or improve homes to be occupied as veteran residences or to refinance a loan previously made under this program in order to lower the interest rate. The principal amount of a loan under this authority generally may not exceed \$417,000 however, in some locations this limit may be higher depending on median area home prices. Veterans pay a funding fee of 1.25 percent of the loan amount, although veterans with a service-connected disability are exempt from paying the fee. Before a direct loan can be made, the veteran's tribal organization must sign a memorandum of understanding with VA regarding the terms and conditions of the loan. The Native American Veteran Housing Loan Program began as a pilot program in 1993 and was made permanent by Public Law 109–233, the Veterans Housing Opportunity and Benefits Act of 2006.

COMMITTEE RECOMMENDATION

The Committee recommends \$1,163,000 for administrative expenses associated with this program. This is \$29,000 below the fiscal year 2016 enacted level and equal to the budget request.

GENERAL OPERATING EXPENSES, VETERANS BENEFITS ADMINISTRATION

Appropriations, 2016	\$2,707,734,000
Budget estimate, 2017	2,826,160,000
Committee recommendation	2.856.160.000

PROGRAM DESCRIPTION

The General Operating Expenses, Veterans Benefits Administration account provides funding for the Veterans Benefits Administration to administer entitlement programs such as service-connected disability compensation, education benefits, and vocational rehabilitation services.

COMMITTEE RECOMMENDATION

The Committee recommends \$2,856,160,000 for the General Operating Expenses, Veterans Benefits Administration account, which is \$148,426,000 above the fiscal year 2016 enacted level and \$30,000,000 above the budget request. The Committee has included bill language to make available through September 30, 2018, up to 5 percent of the General Operating Expenses, Veterans Benefits Administration account.

Disability Claims Processing.—The Committee remains concerned over the growing backlog of disability claims at all stages of the appeals process. The fiscal year 2017 justification accompanying the Department's budget submission notes the number of cases received by the Board of Veterans [BVA] appeals increased 57 percent, from 66,778 in 2014 to 105,012 in 2016. Each year since 1996, the volume of appeals received by VBA equated to 9 to 15 percent of the total claims completed in those years. The Board notes that it expects the backlog to increase dramatically over the coming years without additional resources and legislative reform. The Committee has repeatedly expressed its concern over the backlog and provided additional resources beyond the President's request to help address the issue. To date, funding has largely been directed at increasing capacity at Board of Veterans Appeals, including hiring an additional 242 full-time employees since 2015.

The Committee recommends the Department consider a more comprehensive approach to increasing capacity in the appeals process, specifically hiring additional BVA Members as well as Decision Review Officers. Since 2011, the Board of Veterans Appeals has added more than 250 new staff; however, the number of Board Members has increased only slightly from 60 to 64. Given the dramatic increase in workload, additional Board Members may be necessary. In addition, despite pending appeals exceeding several years, some Regional Offices employ two or fewer Decision Review Officers. To begin to fully address the rapidly expanding backlog of appeals claims, VA should consider increasing its capacity at all stages of the appeals process.

VBA Staffing Levels.—The Committee remains concerned about the Department's staffing and production model and directs VA to conduct an assessment of the VBA staffing and production models, including its resource allocation model. This assessment shall include discussion on efforts by the VBA Office of Strategic Planning to develop a workforce capacity model and a discussion of how the National Work Queue initiative will impact staffing throughout VBA. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act detailing its findings.

Women Veteran Participation Rates.—The Committee directs the Department to include an analysis of trends and satisfaction rates among women veterans participating in the Vocational Rehabilitation and Employment program in the annual report to Congress to ensure these services are adapting to the changing demographics of veterans and the needs of women veterans with disabilities.

Gulf War Veterans Claims for Service-Connected Disability Compensation.—The Committee is concerned by the Department's rates

of denial of Gulf War veterans' claims for undiagnosed illnesses and chronic multi-symptom illnesses. The Department is directed to provide the Committees on Appropriations of both Houses of Congress with a finalized Disability Benefits Questionnaire [DBQ] within 180 days of the enactment of this act for each of these types of claims for which a DBQ does not currently exist. The Committee urges the Department to make permanent the period for filing Gulf War presumptive claims under 38 CFR 3.317. While the Committee commends VA on its efforts to revise the Compensation and Pension manual for "Service Connection for Certain Disabilities Associated with Gulf War Service," concern remains that VA claims adjudicators are not consistently following these changes.

Work-Study Program.—The VA work-study program allows veterans and eligible dependents who are in school to be paid for working up to 20 hours a week on a job that is directly related to Department activities. These activities could be part-time work at a local VA hospital, benefits office, Vet Center, or at the school handling VA-related work. The program not only helps the student cover school-related expenses, it also gives them work experience that can help bolster their resume as they search for employment after graduation. The Committee supports this program and is very concerned about recent reports of delays in the VA processing of work-study participants pay. The Committee is aware that in some locations it is taking as long as 40 days for the pay to be processed. This is unacceptable, and the Department is directed to report to the Committees on Appropriations of both Houses of Congress within 60 days on steps it is taking to better monitor the time it takes to process pay for work-study participants and to address any identified delays in the process.

VETERANS HEALTH ADMINISTRATION

Appropriations, 2016	\$61,767,227,000
Advance appropriations, 2017	63,271,000,000
Budget estimate, 2017	2,391,359,000
Committee recommendation, 2017	2,249,459,000
Budget estimate, advance appropriations, 2018	66,385,032,000
Committee recommendation, advance appropriations, 2018	66.385.032.000

ADMINISTRATION OVERVIEW

The Veterans Health Administration [VHA] is home to the United States' largest integrated healthcare system consisting of 167 medical centers, 1,018 community-based outpatient clinic, 300

vet centers, and 135 community living centers.

The Department of Veterans Affairs Medical Care Collections Fund [MCCF] was established by the Balanced Budget Act of 1997 (Public Law 105-33). In fiscal year 2004, Public Law 108-199 allowed the Department to deposit first-party and pharmaceutical co-payments, third-party insurance payments and enhanced-use collections, long-term care co-payments, Compensated Work Therapy Program collections, Compensation and Pension Living Expenses Program collections, and Parking Program fees into the MCCF.

The Parking Program provides funds for the construction, alteration, and acquisition (by purchase or lease) of parking garages at VA medical facilities authorized by 38 U.S.C. 8109. The Secretary

is required under certain circumstances to establish and collect fees for the use of such garages and parking facilities. Receipts from the parking fees are to be deposited into the MCCF and are used for medical services activities.

COMMITTEE RECOMMENDATION

In fiscal year 2016, the Committee provided \$63,271,000,000 in advance appropriations for VA's medical care accounts for fiscal year 2017. This included \$51,673,000,000 for Medical services, \$6,524,000,000 for Medical support and compliance, and \$5,074,000,000 for Medical facilities. The Committee also includes an Administrative Provision allowing the Department to carry forward into fiscal year 2017 certain amounts provided as an advance for fiscal year 2016. For fiscal year 2017, the Committee recommends an additional \$1,078,993,000 for Medical services. Additionally, the Committee recommendation includes \$663,366,000 for Medical and prosthetic research. Medical care collections are expected to be \$2,637,000. The Committee recommendation also includes an advance appropriation of \$63,499,914,000 for veterans medical care for fiscal year 2018.

medical care for fiscal year 2018.

Vet Centers.—The Committee recommendation includes the full budget request for readjustment counseling at Vet Centers. Vet Centers are community-based counseling centers that provide a wide range of social and psychological services. These services include: professional readjustment counseling to veterans and active duty servicemembers, counseling for the victims of military sexual trauma, bereavement counseling for families who experience an active duty death, substance abuse assessments and referrals, VBA benefit information and referrals to Regional Offices, and employment counseling. Certain services also extend to the family members as a means to assist in the readjustment for veterans and active duty servicemembers. The Department is directed to continue to build the necessary readjustment counseling capacity across the country in order to address the continued growth in workload.

Female Veterans.—The Committee continues to believe that VA must be poised to address the changing demographic of today's and tomorrow's veterans in order to fulfill its mission. Toward this end, the Committee recommendation includes \$535,400,000 for genderspecific healthcare. This is \$20,000,000 over the budget estimate for fiscal year 2017. The Committee also encourages the Department to consider a mobile healthcare pilot program to provide gender specific services, awareness of benefits, and outreach to women veterans utilizing mobile healthcare infrastructure. This innovative model is designed to fill the current gap in VA gender-specific services as VA works to expand infrastructure and hire the needed staff for specialty care. Additionally, the Committee is concerned with the Department's research, testing, development, and treatment capabilities with regards to women veterans and their specific prosthetic needs; including medically prescribed prosthetic and sensory aids, medical devices, assistive aids, repairs, and services which maximize independence and enhance quality of life. The Committee urges an aggressive and targeted women veterans' prosthetic program. In order to ensure proper care and to better meet the needs of women veterans, the Department is directed to

prioritize the acquisition of gender specific prosthetics with the funds appropriated to ensure every eligible woman veteran receives high-quality comprehensive care including specific treatment and long-term services. Furthermore, the Committee directs VA to meet all of its commitments to treat and provide continuum care for women veterans of Operation Enduring Freedom [OEF], Operating Iraqi Freedom [OIF], and Operation New Dawn [OND] and servicemembers in 2016 and 2017. The Department is directed to submit the specific funding amounts allocated for women veterans prosthetics in fiscal year 2017 to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act.

Domiciliary Program.—The Committee notes recent reports of safety gaps in the VA domiciliary program. Therefore, the Committee directs the Department to address security concerns and assess whether the current program can meet the needs of veterans who are at heightened risk for overdose or suicide. The Department's assessment should include alternatives to the domiciliary program if it finds the current program cannot meet the needs of these veterans.

Capacity Need.—In order for the Committee to better understand capacity needs across the Veterans Health Administration, particularly for those critical services that have no private or community sector alternatives, the Department is directed to submit a report annually to the Committees on Appropriations of both Houses of Congress on bedding and staffing capacities in mental health, amputations, spinal cord injury, and blinded rehabilitation. The first report shall be delivered to the Committees no later than 1 year after enactment of this act.

Education Debt Reduction Program.—The Department is directed provide a breakdown of spending by VA in connection with the education debt reduction program of the Department under subchapter VII of chapter 76 of title 38, United States Code. The breakout shall include the following elements: (1) the amount spent by the Department in debt reduction payments during the three year period preceding the submittal of the report disaggregated by the medical profession of the individual receiving the payments; (2) a description of how the Department prioritizes such spending by medical profession, including an assessment of whether such priority reflects the five occupations identified in the most recent determination by VA OIG as having the largest staffing shortages in VHA; and (3) a description of the actions taken by the Secretary to increase the effectiveness of such spending for purposes of recruitment of healthcare providers to the Department, including efforts to more consistently include eligibility for the education debt reduction program in vacancy announcements of positions for healthcare providers at VA.

Promotion of Federal Burn Pits Registry.—The Committee directs the Department to work with State Governors and State veterans affairs agencies to promote and educate State officials about the Federal Airborne Hazards and Open Burn Pit Registry. The Committee is concerned that efforts by the States have led to confusion among veterans about which registry is the official registry of the U.S. Department of Veterans Affairs. The Committee urges the De-

partment to increase outreach to veterans and State governments to communicate the existence and purpose of the Airborne Hazards and Open Burn Pit Registry.

MEDICAL SERVICES

(INCLUDING TRANSFER OF FUNDS)

Appropriations, 2016	\$49,972,360,000
Advance appropriations, 2017	51,673,000,000
Budget estimate, 2017	1,078,993,000
Committee recommendation, 2017	1,078,993,000
Budget estimate, advance appropriations, 2018	44,886,554,000
Committee recommendations, advance appropriations, 2018	44,886,554,000

PROGRAM DESCRIPTION

The Medical Services account provides for medical services for eligible enrolled veterans and other beneficiaries in VA healthcare facilities, including VA medical centers and VA outpatient clinics.

COMMITTEE RECOMMENDATION

In fiscal year 2016, the Committee provided an advance appropriation of \$51,673,000,000 for fiscal year 2017. The recommendation for fiscal year 2017 includes an additional \$1,078,993,000 as included in the budget request. In addition, VA has the authority to retain co-payments and third-party collections, estimated to total \$2,637,000,000 in fiscal year 2017.

The Committee recommendation also includes an advance appropriation of \$44,886,554,000 for Medical services for fiscal year 2018. This is \$6,786,446,000 below the level for fiscal year 2017

and equal to the fiscal year 2018 budget request.

Stroke Telemedicine.—Stroke is a leading cause of serious, long-term disability and dementia in the U.S. More than half of veterans are over age 65 putting them at an increased risk of stroke. Fast care is critical in treating stroke. Research shows for every 15 minute reduction in the time from symptom onset to treatment, 5.1 percent more patients are able to return home. The Committee is aware stroke telemedicine, or telestroke, has proven to be tremendously beneficial in improving access to high quality stroke care in rural and neurologically-underserved areas and in reducing disability and the need for long-term care following a stroke. The Committee urges the Department to consider the significant potential benefits of implementing a telestroke program for both veterans and their families as well as to the VA healthcare system and taxpayers. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this act detailing the status of its plans to implement telestroke within VA medical centers that do not currently have around-the-clock neurological expertise available to veterans who suffer a stroke.

Manipulation of Appointment Scheduling.—In the wake of the high-profile scandal involving manipulation of veterans' healthcare appointment scheduling, which served to artificially suppress excessive wait times for veterans to receive health services, the Committee remains concerned about VA's handling of allegations made by whistleblowers that VA officials manipulated scheduling proc-

esses, in violation of the Department's own directive. In fact, when reviewing a summary of an investigation into allegations of scheduling protocol violations conducted by the VA OIG, the Office of Special Counsel [OSC] found the "focus and tone of the OIG investigations appear to be intended to discredit the whistleblowers by focusing on the word 'secret' rather than reviewing the access to care issues identified by the whistleblowers and in the OSC referrals." Moreover, while OIG has uncovered indications of access to care challenges at several VA facilities, according to OSC, OIG did not analyze the wait-time information or provide recommendations for improvement. In the case of the Edward J. Hines, Jr. VA Medical Center in Chicago, IL, OSC found whistleblower allegations regarding improper scheduling protocols that created the false appearance of acceptable wait times while masking significant delays in veterans' access to care have never been sufficiently investigated. As a result, by OIG's own admission, scheduling protocol violations occurred at VA facilities in at least seven States (Arkansas, California, Delaware, Illinois, New York, Texas, and Vermont). As such, the Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act detailing the administrative actions taken in response to substantiated claims of scheduling protocol violations by VA employees, including specific employee disciplinary actions, as well as a description of corrective actions VA has implemented or plans to implement, to ensure veterans receive quality, timely access to health services.

Compliance with Reviews of Healthcare Providers.—The Committee is concerned VHA employees accused of wrongdoing are routinely transferred to other VA facilities or leave the Department while accusations of misconduct against them remain unresolved. In the case of the VA Illiana Health System in Danville, IL, as recently as April 2015, a physician whose medical license had previously been suspended, and against whom criminal charges were later filed, was hired as a result of insufficient screening processes at VA. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act on the compliance by the Department with its policy to conduct a review of each VA healthcare provider who transfers to another medical facility within VHA or leaves the Department to determine whether there are any concerns, complaints, or allegations of violations relating to the medical practice of the healthcare provider in order to combat the trend within VA of simply transferring poor performing providers to other facilities where they may continue to jeopardize patient

health.

Curing Hepatitis C Within the Veteran Population.—Last year, the Committee included language in the act that funds the treatment of Hepatitis C within the VA system at no less than \$1.5 billion in fiscal year 2017. Given the fluidity of drug availability and drug pricing, the Committee directs VA to keep it apprised of changes in this area, including changes related to funding needs. The Committee directs VA to continue funding the treatment of Hepatitis C aggressively with the objective of treating and curing as many veterans as possible in the shortest amount of time. The

Department is directed to continue its quarterly updates to the Committees on Appropriations of both Houses of Congress detailing the expenditures and obligations of funding Hepatitis C treatment, the number of veterans treated, the number of veterans deemed cured, and the projection of spending, new starts for drug treatment, and number of veterans who will be cured in the next quarter.

Service Dogs for Veterans.—The Committee is concerned by the significant delays with VA research efforts associated with service dogs, and the resulting impact on VA policy decisions with respect to the placement of service dogs for psychological injuries, including PTSD. The Committee authorized VA to provide service dogs for veterans with mental illnesses in Section 229 of the 2010 Military Construction, Veterans Affairs & Related Agencies Appropriations Act (Public Law 111–117). However, VA maintains it will not support the provision of service dogs for psychological injuries until the VA research study is complete and provides scientific evidence of the benefits of such placement. With the high suicide rate among veterans and almost daily reports from veterans that service dogs are saving their lives, it is concerning VA continues to indicate its research results are still years away, and there will be no revision of its policy with respect to service dogs for psychological illnesses. To help in the research effort, VA is encouraged to create a VA-Department of Defense working group to collaborate on the use of service dogs for psychological injuries, align related research efforts, identify best practices, and develop a strategy and process to provide service dogs to veterans who need them. This working group may include representatives from the VA Office of Prosthetics and Sensory Aids, VA Mental Health Services, the VA Office of Patient Centered Care and Cultural Transformation, Walter Reed National Military Medical Center, the Uniformed Services University of the Health Sciences, and Assistance Dog International service dog organizations with significant experience in working with and placing service dogs with veterans.

VEO Reimbursements.—Within the General Administration account, the budget request includes an appropriation of \$72,600,000 for the Veterans Experience Office [VEO]. VEO is a cornerstone element of the Secretary's reform initiatives. VEO's mission is "building trusted, lifelong relationships with Veterans, their families, and supporters." VEO was established in 2016 as part of the MyVA Taskforce and was funded through reimbursements from VA's three administrations and various staff offices. Fiscal Year 2017 is the first year appropriated funds were requested directly for VEO. In fiscal year 2016, the Medical Care accounts provided an estimate of \$68,700,000 to fund VEO through a reimbursable arrangement (other accounts provided \$7,600,000, for a total of \$76,300,000 for VEO). Typically, when an office or function moves from reimbursable authority to budget authority through a direct appropriation, the funding is reduced in the offices providing the reimbursable funding. This avoids double budgeting for the same office or function. VA's 2017 budget justifications do not show where a \$72,600,000 reduction was taken to offset the direct appropriation to VEO. The Committee considered reducing VA's request by \$72,600,000 to correct for this double budgeting. Instead, the

Committee has taken and reapplied these resources to high priority programs funded in the Medical Services account, as follows:

Program	Requested	Additional	Total
Womens Veterans (gender specific health care) Caregivers Homelessness: Grand & Per Diem Program [GPD] Homelessness: Supportive Services for Veterans and Families Veterans Crisis Line	\$515,000,000 725,000,000 216,068,000 300,000,000 38.645,000	\$20,000,000 10,000,000 10,000,000 20,000,000 8,700,000	\$535,000,000 735,000,000 226,068,000 320,000,000 47.345,000
		68,700,000	

Therapeutic Benefits of Farming.—The Committee notes over 800,000 servicemembers will transition out of the military in the next decade and a half, and the Department has a responsibility to provide healthcare, educational benefits, and transition assistance as servicemembers transition into civilian life. The Committee recognizes 40 percent of the Nation's farms are operated and owned by farmers over the age of 65, and there will be a demand for 1 million new farmers over the next 15 years. The Committee encourages the Department to provide opportunities for veterans and transitioning servicemembers in vocational agriculture programs to fill this growing gap. In addition, veterans face obstacles accessing behavioral healthcare in rural and highly rural areas. The Committee encourages the Department to assess the therapeutic benefits of farming and agricultural work to treat the behavioral health conditions of veterans and the ability to partner with programs that provide training in agriculture. The Committee urges the Department to coordinate with the Department of Agriculture and the Department of Defense in identifying and promoting vocational programs that provide the following: educational or vocational training in agriculture related fields, behavioral health services on site through licensed providers, and a pathway to employment in agriculture related fields.

Agritherapy.—An increasing number of States now have programs that assist veterans in starting farms, and many veterans turning to farming also suffer from Post-Traumatic Stress Disorder [PTSD]. The benefits of agritherapy have been reported in the news media; however, no research has yet been conducted to confirm the benefits of agritherapy to those suffering from PTSD. Therefore, the Department is urged to consider agritherapy for inclusion among VA's Complementary and Alternative Medicine therapies. The Department is urged to establish a pilot study through the National Center for PTSD no later than 180 days after enactment of this act to determine if research supports the benefits of agritherapy as it relates to PTSD.

Access to Care in Alaska.—The Committee continues to be concerned about the access of Alaska veterans to the full spectrum of medical and surgical services available to veterans living in the 48 contiguous States. The Committee has championed VA's efforts to provide care to Alaska veterans residing in rural and roadless areas of the State through partnerships with the Alaska Native Healthcare System. It has also criticized VA's practice of requiring veterans travel thousands of miles outside of Alaska to receive care VA could not provide in its Alaska facilities even when the care

was available in the veteran's community or elsewhere in the State of Alaska. In response, the Alaska VA Healthcare System developed a model system of integrated care partnering for the first time with the Alaska Native Healthcare System and Community Health Centers to fill coverage gaps in urban Alaska and rural Alaska. It also implemented the "Care Closer to Home Program" to ensure Alaska veterans requiring medical specialty and surgical services not available directly from VA could receive those services from community providers in the State of Alaska. This system seems to have broken down following enactment of the Veterans Access Choice and Accountability Act [VACAA]. Implementation of VACAA in Alaska was flawed from the start and remains severely problematic. VACAA did not prohibit VA from continuing to operate the system of integrated care that existed in Alaska prior to its enactment. The Committee remains committed to ensuring Alaska's veterans enjoy their earned healthcare benefits on a par with veterans residing in the 48 contiguous States. It continues to believe no veteran should be required to travel to a VA facility outside of Alaska for care that can be purchased by VA from a community provider in Alaska. The Committee urges VA to execute funds made available under this act for the delivery of healthcare services in Alaska in accordance with these principles.

Staffing of the Alaska VA Healthcare System.—For the past 2 years, the Committee has called attention to VA's failure to address a longstanding physician vacancy in the Wasilla Community Based Outpatient Clinic. That physician vacancy still exists. Over the past year the Committee has become aware of reports that inaccurate information about relocation benefits may be driving providers who are willing to relocate to abandon their interest in serving VA. The Department is directed to investigate the failure to meet its recruiting objectives for the Alaska VA Healthcare System, to include an assessment of whether misinformation about compensation and benefits has resulted in the loss of qualified candidates, and report back to the Committee on its plans to remedy this issue. The Department is further directed to inform the Committees on Appropriations of both Houses of Congress 90 days in advance of a decision by the Alaska VA Healthcare System to discontinue utilizing VA staff providers to deliver any of its medical or surgical services.

Access Received Closer to Home.—Funding for the Rural Health Initiative includes support for the Access Received Closer to Home program [ARCH]. The Committee notes ARCH has been highly successful in providing healthcare services to veterans who live in the rural and highly rural States in which it operates. Current VISN analysis demonstrates that more than 90 percent of veterans who received medical care through ARCH were "completely satisfied" with their care and cited significantly shortened travel and wait times to receive care. Given ARCH's proven track record, the Committee supports the extension of this program to sustain continuity of care for veterans served by ARCH until VAs community care programs are consolidated.

Anchorage VA Outpatient Clinic.—The Anchorage VA Outpatient Clinic and Regional Office Building opened in May 2010 at an expense of \$76,000,000. In May 2015, VA acknowledged it was re-

quired to shutter two operating rooms in the facility due to dust and ventilation issues. These operating rooms remained shuttered as VA has shifted procedures to the Joint Venture Hospital on Joint Base Elmendorf Richardson. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this act detailing its reasons for not placing the operating rooms back in service, including the advantages and disadvantages of moving surgical services to the Joint Venture Hospital, and whether VA intends to repair the operating room in fiscal year 2017 or subse-

quent years.

Natural Resource Conservation Management.—The Committee includes language giving the Department the authority to administer financial assistance grants and enter into cooperative agreements in fiscal year 2017. The Committee is aware there are a number of non-profit, local, and State-based organizations capable of providing veterans with job training and employment opportunities in the area of natural resource conservation management. The Committee is further aware there has been broad support to end veterans homelessness and encourages VA to utilize the authority provided in this section in a way that combines job training and employment opportunities with the Department's continued commitment to mitigate homelessness among at-risk veterans. Before entering into any agreement, the Department is directed to create metrics for the program to ensure success can be clearly demonstrated and provide a report to the Committees of jurisdiction of

both Houses of Congress detailing this program. Nursing Handbook.—The Committee is aware the VHA Nursing Handbook is under review at OMB as part of a VHA proposed rule. The Committee understands this proposed rule will directly conflict with the anesthesia team-based care language as set forth in the current VHA Anesthesia Service Handbook. The Committee strongly encourages VHA to carefully and thoughtfully seek additional input from internal and external stakeholders prior to any VHA final rule that would seek to dismantle team-based anesthesia care. The Committee believes all possible outreach efforts should be used to communicate the changes contained in the proposed rule, gather public comment, and collaborate with Congress, affected stakeholders, VA physician and nursing staffs, and external organiza-tions. The VA should also consider the benefits to veterans of having more VA healthcare staff able to provide services at the full scope of their training and how this will affect veterans, particularly in rural communities. The Committee also requests VHA ensure any VHA handbooks and policies adopted by rule not conflict with other handbooks and policies already in place within VHA.

DOD/VA Joint Formulary.—The Committee remains committed to ensuring VA has the resources it needs to support transitioning veterans as they leave military service. The Committee notes the Department's statutorily-required report, due July 1, 2016, regarding ongoing efforts to develop a strategic joint uniform formulary between the Department of Defense and VA, with particular focus on medications to treat psychiatric conditions, sleep disorders, and pain management. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress

no later than 180 days after enactment of this act assessing costs and savings associated with such a strategic joint uniform for-

mulary.

Orthotics and Prosthetics Workforce.—The Committee is concerned about the sustainability of the orthotics and prosthetics workforce treating veterans, particularly given an aging workforce with imminent retirements as well as a lack of availability of advanced degree programs necessary to train new professionals. Reports indicate up to 20 percent of the 7,100 clinicians nationwide are either past retirement age or within 5 years of retiring. The Committee recognizes the contributions made by the VHA's Orthotic and Prosthetic Residency Program to provide rotation opportunities through the VA system but acknowledges this program alone is inadequate to ensure a sustainable workforce for the future, especially in light of the skill set necessary to provide the increasingly complex, state-of-the-art orthotics and prosthetics care for OEF/OIF veterans. The Department is directed to explore cost effective opportunities to grow the workforce pipeline in order to ensure the future orthotic and prosthetic workforce required by the Nation's new generation of veterans. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act detailing the findings.

Home and Community Based Services.—The Committee supports the Department's efforts to broaden veterans' options regarding long-term care support and services. As the Department realigns these programs under the medical community care account, the Committee encourages VA to continue to prioritize veterans' preferences in receiving home based services. The Committee notes the positive results of pilot programs such as the Veterans Independence Program, a veterans-directed Home and Community Based Services [HCBS] grant program originally created as a pilot administered jointly by VA and the Department of Health and Human Services [HHS]. The Committee encourages enhanced cooperation with HHS to expand and grow these programs. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act on the cost avoidance associated with various non-institutional care programs. The report should include information on the demand for HCBS among the veteran population, the number of veterans currently being served by each program under HCBS, and the Department's plans to expand the size and scope of HCBS. Given the success of current HCBS pilot programs, the Department should include a cost analysis of growing the existing pilot programs prior to national expansion to leverage coordination with HHS, in addition to detail regarding the Department's efforts to coordinate with HHS on HCBS in future years. Given that mandatory eligibility for certain types of care is associated with disability levels adjudicated by VBA, this report should also include recommendations for modernizing the claims process for veterans requiring long-term care.

Veteran Suicide.—According to data compiled by VA in 2015, veterans experience a suicide rate 50 percent higher than the general population, and female veterans commit suicide at a rate 6 times

that of their civilian counterparts. The Committee notes 20 percent of veterans with PTSD have a substance abuse disorder, and substance abuse is proven to lead to increased suicidal tendencies. The Committee encourages the prioritization of funding for substance abuse counseling based treatment for veterans in order to decrease suicide rates among veterans suffering from PTSD. The Committee remains concerned about the alarming prevalence of suicide among rural veterans as they are more likely than urban veterans to commit suicide. The Committee urges VA to prioritize suicide prevention within rural communities and increase the availability of mental health resources available within States with great geographic barriers. The Department is directed to conduct a new study on the prevalence of suicide among veterans, which shall include an assessment of the data provided by each State and an identification of which States should increase or improve data reporting to the Department and submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act detailing its findings.

Veterans Crisis Line.—One tool VA has to combat high suicide rates and help those who are considering suicide is the Veterans Crisis Line [VCL], a 24-hour, toll-free hotline that veterans across the United States can call to connect to a responder trained in crisis management. VCL is invaluable, but it is not without shortcomings. An OIG investigation was initiated in 2015 after complaints that phone calls to the center were routed to voicemails and left unanswered. The OIG published its final report February 11, 2016, which substantiated the allegation that some calls were not answered in an appropriate amount of time. One potential reason for these unanswered calls was inadequate staffing levels. The Committee is aware changes were implemented to VCL before publication of the OIG report, including hiring a new director of the facility and improving tracking of quality assurance indicators. The Committee notes plans are underway to move VCL to a new stateof-the-art facility, and VA hopes to hire 100 additional employees at the call center, plus an additional 40 employees for quality assurance purposes. To ensure veterans receive the care they need and deserve, especially in times of crisis, the Committee provides \$8,700,000 above the budget request for VCL so the Department can hire, train, and staff the call center to an appropriate level and

ensure its facilities and technologies remain up-to-date.

Infectious Disease Screening.—The Committee remains concerned about the high rates of HIV/AIDS and viral hepatitis among veterans. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act detailing its efforts to improve HIV/AIDS and hepatitis screening rates in traditional and non-traditional settings and the utilization of innovative strategies like

point-of-care testing and public health outreach.

Functional Gastrointestinal Disorders and Gulf War Illness.— The Committee continues to monitor the Department's plan to address Gulf War Illness and encourages the Department to include research on early intervention for functional gastrointestinal disorders related to Gulf War Illness in veterans and military personnel.

Opioid Safety Initiative Update.—The Committee fully supports VA's efforts to reduce the misuse and abuse of prescription opioids and notes the progress being made by individual facilities, including the Tomah VA Medical Center in Wisconsin, where VA's dangerous opioid prescription practices led to the tragic death of Marine veteran Jason Simcakoski in 2014. But more must be done to address VA's prescription drug abuse epidemic and to improve appropriate pain care for veterans who have a higher risk of opioid-related overdose than the general population. As such, the Department is directed to continue to comply with the instructions included under the paragraph titled Opioid Safety Initiative in last year's Committee report and includes a number of provisions in this year's bill, including the elimination of copayments for opioid antagonists like naloxone and related education.

Furthermore, to ensure transparency and accountability, the Department is directed to make public the findings of the Office of Accountability Review's investigation of accusations of widespread retaliation against whistleblowers and the culture of fear at the Tomah VA Medical Center as well as the outside clinical review, which is being done in follow-up to VA's initial review of the incidents at the facility. The Committee is disappointed with the pace of these reviews and expects VA to make the findings public with-

out further delay.

Medication-Assisted Opioid Dependence Treatment.—The Committee is pleased the Department has established and is implementing the VA Opioid Safety Initiative and the results it is producing in reducing the dependence of veterans on prescription opioids. However, the Committee is concerned VA is not utilizing the full spectrum of treatment options for dealing with opioid addiction recommended by the Substance Abuse and Mental Health Services Administration [SAMHSA]. The Committee encourages VA to expand the use of medication-assisted treatment and other clinically appropriate services to achieve and maintain abstinence from all opioids and heroin and prioritize treatment regimens that are less susceptible to diversion for illicit purposes.

Participation in Prescription Drug Monitoring Programs.—Abuse of prescription opioids is a critical issue that affects all demographics in the United States, including veterans. As such, the Committee believes it is critical to the health and wellbeing of America's veterans for VA to report necessary information to Staterun prescription drug monitoring programs [PDMPs] about the prescribing of controlled substances. Full participation by VA in Staterun PDMPs will ensure VA providers have the tools they need to better identify patients at-risk of accidentally or intentionally mis-

use prescription drugs.

Caregivers.—The Committee notes the robust usage of the post-9/11 Caregiver program with its more than 23,000 approved applications, as well as the consistent reviews by caregiver families noting the program's stipend, respite care, formal training, and support structure are critical components to its success. Given the demonstrated success of the program, the Committee encourages VA to ensure the caregiver coordinators at each medical center are fully resourced and, to the maximum extent possible, assigned designated caregiver duties as their chief and only responsibility. To

that end, the Committee provides \$10,000,000 above the budget request for fiscal year 2017, bringing the total amount available to \$734,628,000. The funding will support stipends paid directly to family caregivers of post-9/11 veterans seriously injured in the line of duty, as well as the national caregiver support line and increased support for caregiver support coordinators. In addition, the Committee encourages VA to examine expansion of the program beyond the post-9/11 population. The Committee also encourages VA to work with the Department of Defense in order to develop and share best practices. The Committee recognizes many caregivers for severely wounded veterans are working dramatically reduced hours outside the home or have left the workforce completely leading to financial hardship. This reduction in outside earnings results in difficulties meeting financial obligations including student loan debt held by the caregiver. VA is directed to survey all caregivers currently in the program to identify the number possessing outstanding student loan debt, develop a plan to monitor this issue, including future data collection and regular reports, and submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act detailing the report survey findings and details of the plan.

Vehicle Transportation Drivers.—The Committee is concerned with the Department's prioritization of effort to recruit vehicle transportation drivers for purposes of transporting veterans to and from medical appointments. The Committee notes veterans in large States with geographic barriers and veterans living in rural tribal communities have decreased access to public transportation. VA should prioritize funding for recruitment of vehicle transportation drivers for veterans in rural and tribal areas in order to ensure po-

sitions are not left vacant.

Community Care Provider Payment.—The Committee remains committed to helping VA in its efforts to ensure timely reimbursement for non-VA care providers and care facilities who participate in providing necessary care for our veterans. The Committee is encouraged VA announced the elimination of burdensome administrative requirements to facilitate timely payments for medical care and to use additional contracted resources, when necessary, to ac-

complish this goal.

Homeless Veterans.—According to data collected during the annual Point in Time Count, there were 48,000 homeless veterans on a single night in January 2015, a decline of more than 26,360 veterans since 2010. This includes a nearly 50 percent drop in the number of unsheltered veterans sleeping on the street. While the Point in Time Count is a snapshot of homelessness on a specific date and provides a measure of progress on the overall direction of homelessness, it does not reflect the effort and number of veterans prevented from becoming homeless or veterans who have found permanent housing. As a direct result of VA's homeless programs, more than 365,000 veterans and their family members have been permanently housed, rapidly rehoused, or prevented from falling into homelessness. In 2015, through the Supportive Services for Veteran Families [SSVF] program alone, more than 36,000 veterans and their family members were prevented from becoming homeless, including 6,555 children. The Committee strongly sup-

ports VA's homeless prevention programs; two of the most effective are the SSVF program and the Grant and Per Diem program. These two unique programs support community-based organizations to provide critical services and transitional housing for veterans and their families. These programs provide important lifelines to veterans in need and their families. Therefore, the Committee recommendation includes increases for both of these pro-

grams above the request.

Office of Rural Health.—The Committee recommendation includes the full budget request of \$250,000,000 for the Office Rural Health [ORH] and the Rural Health Initiative. When established by the Committee in 2009, the intent of the Rural Health Initiative was to give the VA flexibility to develop unique and innovative programs to help close gaps in services which face veterans who reside in rural and highly rural areas. Through collaborations with other VA program offices, Federal partners, State partners, and rural communities, ORH works to optimize the use of available and emerging technologies, establish new access points to care, and employ strategies to increase healthcare options for all rural veterans. Currently, ORH identifies and implements initiatives that support rural clinics and rural home-based primary care, address barriers to access and quality of healthcare delivery in rural areas, develop workforce recruitment and retention initiatives, and accelerate and expand telehealth. ORH also operates Rural Health Resource Centers and works with Federal and non-Federal community partners to share resources and expand access to care for rural veterans. The Committee commends this effort and encourages ORH to establish relationships with institutions of higher education in rural States in order to develop best practices in the delivery of healthcare in rural areas.

Homeless Veterans in Rural Areas.—Concern remains about the Department's efforts to combat homelessness among rural veterans. The Committee directs VA to identify ways to obtain more accurate data on homeless and at-risk veterans in rural areas, especially by determining whether changes to the universal homeless screening clinical reminder would result in more accurate identification of these veterans, and report actions VA is taking to reduce

homelessness among the rural veteran population.

Rural Veterans Health.—The Committee notes persistent issues for VA health facilities in rural areas to recruit and retain health providers in the face of national provider shortages and a highly competitive environment. The Committee encourages the Department to consider the expanded use of doctors of osteopathic medicine [DOs] and physician assistants [PAs] through physical facilities and expanded access to telehealth services to address the rural health provider gap. The Department is directed to review and report to Congress a plan to improve recruitment and retention initiatives for healthcare providers in rural and highly rural areas, including expansion of the Locality Pay System, implementing recruitment and retention tools targeting the Education Debt Reduction Program and the Employee Incentive Scholarship Program for medical doctors, DOs, and PAs. Furthermore, the Committee is concerned about lack of mental healthcare providers, counselors, and caseworkers in rural areas. The criteria used by the Depart-

ment in establishing the priority of hiring and placement of mental healthcare providers, counselors, and caseworkers should take into consideration the higher rate of facility-use in rural States due to lower numbers of facilities and the increased amount of outreach

they must do with geographical barriers.

Fee Basis Claims System.—The Committee recognizes the critical importance of veterans and their community care providers having access to the accurate and timely processing of veterans and vendor claims for medical services. The Committee is aware the current Fee Basis Claims System [FBCS] has processed more than 72 million claims to date, and industry standard modernization upgrades, including centralization of claims processing and auto-adjudication, could enable an even more efficient processing of claims. The Committee is concerned this system is scheduled to cease operation on November 30, 2016, with no other system scheduled to come on line to continue processing claims. The Committee directs the Department, if it plans to continue the use of FBCS, to upgrade the system to provide the latest software advancements to facilitate the submission of electronic claims, the auto adjudication of claims, and a centralized claims intake capability for veterans and their providers. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 30 days after enactment of this act detailing the status of this system, the potential of a gap in service, and the plans to upgrade the system.

Medical School Affiliations with VA Health Care Facilities.—For many years, the Committee has encouraged improved collaboration between VA healthcare facilities and historically black health professions schools. The Committee acknowledges the progress made but recognizes almost all improvements have been with smaller community-based outpatient clinics, not larger, urban VA hospitals. The Committee encourages the Department to convene national and VISN VA health leaders and leaders of the historically black health professions schools to discuss and address minority collaboration concerns. The Department is directed to report to the Committees on Appropriations of both Houses of Congress no later than 180 after enactment of this act on the relationship VA has with historically black health professions schools and its plan to convene national and VISN VA health leaders and leaders of the histori-

cally black health professions schools. Partnerships with Academic Medical Institutions.—Last year, the Committee included report language encouraging the Department to seek out public-private partnerships, particularly with research universities, those with and without medical schools, to expand its efforts related to suicide prevention, post-traumatic stress disorder, traumatic brain injury, and substance abuse disorders. The Committee continues to believe the Department should make broader use of existing partnering authority to collaborate with academic institutions, and further encourages VA to enter into partnerships with accredited medical schools and teaching hospitals for the mutually beneficial coordination, use, or exchange of health-care resources with the goal of improving access to and quality of the hospital care and medical services furnished by the Department.

Encouraging Public-Private Partnerships.—The Committee is aware of private-sector solutions that can effectively and efficiently leverage innovations in healthcare delivery, information technology, and data interoperability capabilities to eliminate existing silos and better coordinate and integrate health services for our Nation's veterans across care settings. These solutions hold particular potential to improve care for veterans residing in rural areas and veterans served by community providers under the Choice program. The Committee directs VA to implement publicprivate pilot projects within one or more VISNs to adopt a delivery model that fosters a culture of patient-centered care and utilizes a collaborative, integrated team approach to focus on care planning and coordination; patient education, management, and self-compliance; service integration and data sharing; monitoring protocols; performance metrics and trend analysis; predictive analytics; and systems improvement. The pilots should employ effective models of care that hold the promise of improving patient outcomes and reducing costs by avoiding re-hospitalizations and by enabling clinicians to: (1) use data to develop personalized care plans for medical and behavioral health services, reduce missed visits, avoid delayed services and long waits, and identify medical trends; (2) access systems that standardize clinical workflow and provide real-time transparency for care management; and (3) monitor patients outside of the clinical care setting. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act evaluating the effectiveness of the pilots and providing an assessment regarding the potential for broader adoption of the solutions within VA's healthcare programs.

Agent Orange Registry.—VA maintains an Agent Orange Registry for veterans who served in Vietnam. The Committee is aware, however, of a number of instances where U.S. veterans may have been exposed to chemicals including Agent Orange during training activities and missions outside of Vietnam. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act on the feasibility of establishing a registry of U.S. veterans who served or trained outside of Vietnam and have subsequently experienced health issues, which may have resulted from

exposure to these chemicals.

Sleep Disorders.—The Committee recommends the Department assign a program manager for sleep disorders, including sleep apnea, which affects at least 200,000 veterans of the Persian Gulf War and Operations Iraqi Freedom and Enduring Freedom.

Magnetic EEG/EKG-guided Resonance Therapy.—The Committee understands Magnetic EEG/EKG-guided Resonance Therapy [MERT] has successfully treated veterans with Post Traumatic Stress Disorder [PTSD], Traumatic Brain Injuries [TBI], chronic pain, and opiate addiction. Recent non-significant risk and non-invasive clinical trials and pilot studies have produced promising results in the evolution of MERT treatment. The Committee encourages VA to undertake MERT pilot programs at up to five VA facilities of its determining to create access to MERT in treating

larger populations of veterans suffering from PTSD/TBI, chronic

pain, and addiction.

Healthcare Providers.—The Committee encourages VA to establish relationships with the appropriate personnel divisions dealing with departing military personnel at the Department of Defense and Department of Homeland Security (for the U.S. Coast Guard), as well as establish a formal system for receiving advanced notice of separating members of the Armed Forces who served in the healthcare field in order to actively recruit such individuals directly into the VA workforce. Additionally, the Committee directs VHA to conduct an internal audit of its procedures for the re-credentialing of providers when transferring within the VHA system and to institute such policies and procedures to ensure the speedy and timely

transfer of licensed personnel between facilities.

Prosthetic Digital Health Technology.—Advanced, proven lower limb prosthetic digital health technology can provide real-world data documenting activity and function for veterans with lower limb prostheses. Accurate activity data which documents how veterans function with their prosthetic devices offers new opportunities to improve outcomes, increase activity, and improve the quality of life for veterans who have lost limbs. To better understand the degree to which this technology is utilized by VA, the VA's Prosthetics and Sensory Aids Service is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act detailing where within VHA this technology is available, the number of veterans utilizing this technology, and any plans for increasing the availability of this technology, as well as making this outcomes-based data collection standard throughout VHA.

Continuous Health Monitoring Technology.—Increased accuracy and reliability in patient health monitoring can improve VHA patient outcomes, prevent required return visits, and reduce costs. Continuous monitoring technology provides constant feedback to doctors, nurses, and health professionals on patient status. This allows professionals to make treatment decisions based on comprehensive data and assists in detecting patient crises quicker, including crises that may not have been detected altogether. In order to ensure the entire VHA is benefitting from the outcomes achieved at VHA facilities and civilian facilities where continuous monitoring technology is deployed, the Committee urges VA to expeditiously proceed with research surrounding continuous monitoring technologies. The Department is directed to report back to the Committee on any recommendation for fuller deployment within VHA, including a proposed timeline for adoption of proven continuous monitoring technologies.

Three Dimensional Printing and Prosthetics.—Additive manufacturing, also known as three dimensional printing, continues to revolutionize the development of new procedures and therapies for patients suffering from a variety of ailments requiring surgery or replacement of lost limbs. In addition to prosthetics, three dimensional printing may aid burn victims, veterans requiring coronary surgery, and others in need of hearing restoration. Three dimensional printing is also a cost effective solution which increases precision and can allow VA to tailor its manufacturing for veterans.

The Committee encourages the Department to expand additive manufacturing capabilities to Veterans Affairs Medical Centers which lack access to tradition manufacturing capabilities in order to provide veterans with a cost effective option for treatment of a multitude of medical problems. Furthermore, VA is encouraged to conduct such research, including medical trials, into three dimensional printing of prosthetics for veterans, as well as emerging re-

search to print organs such as livers, kidneys, and lungs.

Post-Traumatic Stress Disorder Consultation Program.—The Committee recommendation includes the full budget estimate of \$19,107,000 for the National Center for Post-Traumatic Stress Disorder [NCPTSD] and its mission. The Committee supports the NCPTSD's Consultation Program's dissemination of expert, evidence-based resources to private providers. With the expansion of community-based provider options under the Veterans Access, Choice, and Accountability Act, the Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this act assessing the program's performance in terms of consultations both within the Department and with community-based providers, including recommendations for additional policy, resource, or staff changes that can be made in order to increase the scale of the program.

Mental Health.—The Committee is concerned by the continued high rate of suicide and the growing mental health needs among veterans. In particular, the results of the VA Inspector General report Veterans Crisis Line Caller Response and Quality Assurance Concerns, Canandaigua, NY (14–03540–123) and the Comptroller General report VA Mental Health: Clearer Guidance on Access Policies and Wait-Time Data Needed [GAO-16-24) are deeply troubling. The Committee directs the Department to implement the recommendations of the Comptroller General and the Inspector General not later than 180 days after the enactment of this act. The Committee recognizes the Department's efforts to significantly expand mental health treatment capacity. In light of projected future growth in demand for mental health services among veterans and nationwide mental health provider shortages, the Committee urges VHA to consider the expanded use of nurse practitioners, physician assistants, marriage and family therapists, mental health counselors, and peer specialists to close gaps in service and reduce wait times. The Committee is aware the Department of Defense [DOD] is currently developing a designation system for non-Department mental healthcare providers that demonstrate, through training or past experience, knowledge and understanding of military culture and of evidence-based mental health treatments. DOD will also establish and update a publicly available list of providers so-designated. The Committee notes the potential for shared benefits of such a system to veterans seeking non-VA care in their communities. Therefore, the Department is directed to coordinate with DOD to ensure access to and awareness of the provider list described above for veterans. The Committee also encourages the Department to consider establishing a veteran's workforce training program in which veterans with PTSD or service-related mental

health conditions learn how to train service dogs for use by vet-

erans with physical disabilities.

Certified Surgical Assistants.—The Committee has become aware of data suggesting that wider utilization of full-time Certified Surgical Assistants [CSA] at VHA Medical centers could reduce surgical operation procedure durations thereby reducing costs and recovery times and making possible shorter post-operation hospital stays, fewer complications, and fewer post-operation admissions. The Committee urges VA to review the use of CSAs in surgery where surgical assistants are called for to determine whether routine use of CSAs in surgery can achieve significant savings

throughout the VA healthcare system.

Health Professional Scholarship Program.—The Health Professional Scholarship Program (HPSP) provides scholarships to students receiving education or training in a direct or indirect healthcare services discipline. Awards are offered on a competitive basis and are exempt from Federal taxation. In exchange for the award, scholarship program participants agree to a service obligation in a VA health care facility. The Committee continues to support this program and is concerned VA is limiting HPSP awards to only nursing students in fiscal year 2016. The Committee believes strongly that ample resources exist within the Department to ensure hard to fill specialties are not excluded from participation. Aside from the Committee providing additional funding above what was requested in previous years, including over \$1,200,000,000 more than the requested level for Medical services in fiscal year 2016, Congress also gave the Department increased tools to close gaps in care and build a strong professional healthcare workforce through the Veterans Access, Choice, and Accountability Act of 2014. In spite of this, the Committee continues to hear VA is not utilizing these tools in the most judicious and efficient manner. The Department is directed to report to the Committees on Appropriations of both Houses of Congress no later than October 30, 2016, each profession eligible to receive HPSP scholarship and any limitation VA is placing on awards. In addition, VHA is also directed to submit to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this act a strategic plan which identifies difficult to recruit occupations and outlines specific actions being taken to address those shortages.

Medical Facilities Realignment.—Concern remains that VA medical care realignments are being approached in an ad hoc manner by each individual VISN rather than on a comprehensive basis by VA Central Office. Moreover, such an approach may lead to inequitable and inefficient distribution of medical resources throughout the Nation. Before VA makes any decision to relocate, close, or diminish services at an existing facility, or proceeds with any such realignment already underway, consideration must be given to the impact such action would have on veterans, especially tribal veterans or veterans in rural or highly rural areas, PTSD programs, and other Residential Rehabilitation Treatment Programs [RRTP]. VA must adhere to a clear and transparent process that engages all parties from the onset and is consistent with a national realignment strategy. In title II of division I of the Consolidated and Further Continuing Appropriations Act, 2015 (Public Law 113–235),

the Committees suspended the proposed realignment of services in VISN 23 until a report was transmitted to the Committees. To date that report has not been received. The Department is again directed to comply with the request for the report and meanwhile suspend the proposed realignment of services in VISN 23 until such time as the Department transmits to the Committee the re-

port as outlined in Public Law 113–235.

Medical Consults.—The Committee remains very concerned about confirmed reports of large numbers of open consults across the country. To date, the Committee is aware of at least one specific review underway by OIG regarding consults and the length these consults have remained opened. The Committee is aware that over the past year VA has instituted a number of quality controls to ensure referrals are handled in a timely manner and that there is better visibility both at the local level and at the national level to ensure consults are monitored appropriately. To ensure better accountability and transparency, the Department is directed to report to the Committees on Appropriations of both Houses of Congress no later than 30 days after enactment of this act on specific quality controls that have been implemented and new practices that have made this process less cumbersome for healthcare providers and ensures there are no delays in the delivery of care to veterans.

Mileage Reimbursement.—The Beneficiary Travel program provides eligible veterans and other beneficiaries mileage reimbursement, common carrier (plane, train, bus, taxi, light rail etc.), or when medically indicated, "special mode" (ambulance, wheelchair van) transport for travel to and from VA healthcare, or VA authorized non-VA healthcare for which the veteran is eligible. The Committee understands VA has switched the reimbursement payment to an electronic funds transfer [EFT] and no longer provides reimbursement through check or cash. While the Committee understands EFT can be more efficient and may help streamline the process, there is concern about the length of time it is taking for the transfer to occur. The Department is directed to take additional steps to ensure veterans are reimbursed in a timelier manner.

Choice Program.—The Committee directs the Department to carry out a survey of VA and private sector medical providers to assess the experiences of such providers in using the Choice Program, particularly in rural areas. At a minimum, the survey should address barriers and obstacles faced by providers in using the Choice Program, barriers and obstacles faced by veterans in using the Choice Program, whether Department staff is sufficiently trained and proficient in administering the Choice Program, the role and effectiveness of the third-party administrators, and appropriate recommendations for improvement. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act detailing the findings of the survey.

Therapeutic Listening Devices.—Therapeutic listening devices could vastly improve patient outcomes for veterans with PTSD or Traumatic Brain Injury, as well as relieve symptoms that are integral to a veteran's recovery. The Committee encourages the Department to consider returning to its pre-fiscal year 2013 policy of pro-

viding handheld therapeutic listening devices to assist veterans suffering from mental health related problems or Traumatic Brain Injury.

MEDICAL COMMUNITY CARE

Budget estimate, 2017	\$7,246,181,000
Committee recommendation, 2017	
Budget estimate, advance appropriations, 2018	9,409,118,000
Committee recommendation, advance appropriations, 2018	9.409.118.000

PROGRAM DESCRIPTION

The Medical Community Care account provides for medical services for eligible enrolled veterans and other beneficiaries that is purchased from and provided by non-Department of Veterans Affairs facilities and providers, including contract hospitals, State homes, and outpatient services.

COMMITTEE RECOMMENDATION

For fiscal year 2017, the Committee provides \$7,246,181,000 for the Medical Community Care appropriation. The amount is as requested in the President's budget. The Committee recommendation includes an advance appropriation of \$9,409,118,000 for Medical community care in fiscal year 2018. This is equal to the budget request. The recommendation creates the new Medical Community Care account as required by the Surface Transportation and Veterans Health Care Choice Improvement Act of 2015 (Public Law 114–41). This new account will provide the Committee with better oversight of how non-VA care funding is budgeted and executed.

MEDICAL SUPPORT AND COMPLIANCE

Appropriations, 2016	\$6,144,000,000
Advance appropriations, 2017	6,524,000,000
Budget estimate, 2017	
Committee recommendation, 2017	
Budget estimate, advance appropriation, 2018	
Committee recommendation, advance appropriation, 2018	6,654,480,000

PROGRAM DESCRIPTION

The Medical Support and Compliance account provides funds for management, security, and administrative expenses within the VA healthcare system, in addition to providing costs associated with the operation of VA medical centers and clinics, VISN offices, and the VHA Central Office in Washington, DC. This appropriation also covers Chief of Staff and Facility Director operations, quality of care oversight, legal services, billing and coding activities, procurement, financial management, security, and human resource management.

The President's 2017 and 2018 submission for Medical support and compliance is based on an actuarial analysis founded on the current and projected veteran population, enrollment projections of demand, and case mix changes associated with current veteran patients.

COMMITTEE RECOMMENDATION

In fiscal year 2016, the Committee provided an advance appropriation of \$6,524,000,000 for fiscal year 2017 for the Medical Support and Compliance account. The Committee recommendation includes an advance appropriation of \$6,654,480,000 for Medical sup-

port and compliance for fiscal year 2018.

VHA Security.—In each of the past two fiscal years, the VA's Office of Security and Law Enforcement has been directed to provide to the Committee a physical security assessment of VA hospitals nationwide, to include recommendations for strengthening security and safety protocols across VHA facilities. The Committee understands an assessment of this magnitude may take time, but encourages the Department to move as expeditiously as possible with the review. In the meantime, the Committee encourages VHA after consulting with local VA police chiefs to utilize at least \$1,000,000 to acquire intelligent policing solutions or other technology that is readily available to enhance safety across the system.

MEDICAL FACILITIES

Appropriations, 2016	\$5,020,132,000
Advance appropriations, 2017	5,074,000,000
Budget estimate, 2017	649,000,000
Committee recommendation, 2017	495,100,000
Budget estimate, advance appropriation, 2018	5,434,880,000
Committee recommendation, advance appropriation, 2018	

PROGRAM DESCRIPTION

The Medical Facilities account provides funds for the operation and maintenance of the VA healthcare system's vast capital infrastructure. This appropriation provides for costs associated with utilities, engineering, capital planning, leases, laundry, groundskeeping, housekeeping, facility repair, and property disposition and acquisition.

COMMITTEE RECOMMENDATION

In fiscal year 2016, the Committee provided an advance appropriation of \$5,074,000,000 for fiscal year 2017 for the Medical Facilities account. The Committee recommendation for fiscal year 2017 includes an additional \$495,100,000 and an advance appropriation of \$5,434,880,000 for Medical facilities for fiscal year 2018.

MEDICAL AND PROSTHETIC RESEARCH

Appropriations, 2016	\$630,735,000
Budget estimate, 2017	663,366,000
Committee recommendation	675,366,000

PROGRAM DESCRIPTION

The Medical and Prosthetic Research account provides funds for medical, rehabilitative, and health services research. Medical research supports basic and clinical studies that advance knowledge leading to improvements in the prevention, diagnosis, and treatment of diseases and disabilities. Rehabilitation research focuses on rehabilitation engineering problems in the fields of prosthetics, orthotics, adaptive equipment for vehicles, sensory aids and related

areas. Health services research focuses on improving the effectiveness and economy of the delivery of health services.

COMMITTEE RECOMMENDATION

The Committee recommends \$675,366,000 for the Medical and Prosthetic Research account. This is \$44,631,000 above the fiscal year 2016 enacted level and \$12,000,000 above the budget request.

The Committee remains highly supportive of this program, and recognizes its importance both in improving healthcare services to veterans and recruiting and retaining high quality medical profes-

sionals in the Veterans Health Administration.

Through the Department's research and development program, VA has implemented a comprehensive research agenda to develop new treatments and tools for clinicians to ease the physical and psychological pain of men and women returning from war zones, to improve access to VA healthcare services, and to accelerate discoveries and applications, especially for neurotrauma, sensory loss, amputation, polytrauma, and related prosthetic needs. The Committee encourages VA to continue its research into developing novel approaches to restoring veterans with amputation, central nervous system injuries, loss of sight or hearing, or other physical and cognitive impairments to full and productive lives.

Toxic Exposures.—The Committee wants to ensure VA is actively researching the residual impact to veterans of Agent Orange and other toxic exposures such as oil well fires and burn pits. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act detailing ongoing activities and future plans for research into residual exposure to Agent Orange and

other toxins.

National Academy of Medicine Study on Toxic Exposures.—Veterans have expressed growing concern that toxic exposure during their military service is related to adverse health conditions in their children and grandchildren. According to the National Academy of Medicine [NAM], scientific data and research is extremely limited to determine what exposures may cause harm to future generations. The report, "Veterans and Agent Orange: Update 2014", recommended VA pursue further laboratory research to identify toxins and dioxins that may cause epigenetic modifications and invest in epidemiologic protocols that address the challenges of connecting adverse conditions in the children of members of the military with toxic exposure. The Committee directs the Department to contract with NAM on an assessment that will include a review of the scientific literature regarding toxicological and epidemiological research on descendants of individuals with toxic exposure; an assessment of areas requiring further scientific study relating to the descendants of veterans with toxic exposure; an assessment of the scope and methodology required to conduct adequate scientific research relating to the descendants of individuals with toxic exposure; will establish categories and provide definitions for categories that assess the evidence that a particular health condition is related to toxic exposure; an analysis of the feasibility, value and relevance, and need for access to additional information held by a Federal agency of conducting further scientific

research; and identification of a research entity or entities with expertise and ability to conduct the relevant scientific research.

National Academy of Sciences Study on Gulf War Illness.—The Committee recommends the Department continue to conduct and publish epidemiological studies regarding the prevalence of Gulf War illness and disease-specific morbidity and mortality in Gulf War veterans and the development of effective treatments, preventions, and cures. The Department is directed, within 60 days of the enactment of this act, to contract with the National Academy of Sciences [NAS] for a study with the NAS collecting new data to determine the prevalence of "diagnosed neurological diseases, including multiple sclerosis, Parkinson's disease, and brain cancers," in Gulf War veterans, as directed by Public Law 110-389, section 804 and advised in the IOM's 2015 report on the study's design. The Committee is concerned by VA's ever-evolving terminology for the signature adverse health outcome of the Persian Gulf War as recognized by the Institute of Medicine [IOM]-Gulf War illness-and encourages the Department to utilize the term, "Gulf War illness," as IOM has recommended. The Committee urges the Secretary to consider revising and updating the Clinical Practice Guideline for Chronic Multisymptom Illness [CMI] consistent with the July 2011 Veterans Health Initiative, "Caring for Gulf War Veterans," that it, "cannot be reliably ascribed to any known psychiatric disorder," and to focus on recent Gulf War illness treatment research findings and ongoing Gulf War illness treatment research direction. Furthermore, the Committee encourages VA to strengthen the training of primary, specialty, and mental healthcare providers on the Gulf War illness case definitions recommended by the IOM. The role of the Research Advisory Committee on Gulf War Veterans' Illnesses [RAC] was intended to provide a meaningful consultative role in helping shape the Persian Gulf War research agenda, strengthen the process by which the government sets its Persian Gulf War research agenda, and lend credibility to future research activities. However, concern has been raised that this role has been degraded and compromised. The RAC charter no longer requires it to assess the effectiveness of Federal Gulf War research, no longer contains a requirement for its own staff, and its purview is presently limited solely to research conducted by the Department. Determinations by the RAC and IOM that Gulf War illness is physiological and not psychological should be the basis in determining the type of medical practitioners and scientific researchers needed to create a wellqualified membership. The Committee notes the RAC has provided no new recommendations since September 2014 and encourages the RAC renew its efforts in studying Gulf War Illness. Finally, the Committee urges the Department to restore regular reporting throughout the year of healthcare and benefits utilization by Gulf War and post-9/11 veterans, to publish these reports on the Department's Web site, and to consider for adoption the "Recommenda-tions for New VA Gulf War-Era Data Report," adopted by the RAC on February 1, 2012.

Research Reports.—The Committee is aware VA publicly reports all of its completed and ongoing VA funded research projects through the NIH Research Portfolio Online Reporting Tools [RePORT]. However, funding information for each project is not

provided on the site by VA. The Committee directs VA to report the total cost of each ongoing project and going forward, provide funding information for any new projects, in addition to the information which is already publicly reported. Additionally, the Committee directs VA to prominently place a description and a link to the NIH RePORT Web site on the VA Office Research and Development main Web page so that any veteran may access this information easily.

Burn Pits.—The Committee recommends VA continue conducting medical trials, using available treatments for pulmonary, cardiovascular, and other diseases and conditions related to the exposure to open air burn pits. The Department is directed to provide an update to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this act on the status and progress of such medical trials. Furthermore, where appropriate, VA is encouraged to work with private and public institutions which have already begun to research the chronic impacts of exposure to burn pits in order to develop treatments for veterans exposed to burn pits. The Department is directed to submit a report to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this act regarding the feasibility of entering into cooperative agreements with institutions engaged in the aforementioned research and whether additional authorities and funding are needed to pursue such research.

MEDICAL CARE COST RECOVERY COLLECTIONS

MEDICAL CARE COLLECTION FUND

Appropriations, 2016	\$2,445,000,000
Budget estimate, 2017	2,637,000,000
Committee recommendation	2,637,000,000

MEDICAL CARE COLLECTION FUND—REVENUES APPLIED

Appropriations, 2016	-\$2,445,000,000
Budget estimate, 2017	-2,637,000,000
Committee recommendation	-2.637.000.000

PROGRAM DESCRIPTION

The Medical Care Collection Fund [MCCF] was established by the Balanced Budget Act of 1997 (Public Law 105–33). In fiscal year 2004, Public Law 108–199 allowed the Department of Veterans Affairs to deposit first-party and pharmacy co-payments; third-party insurance payments and enhanced-use collections; long-term care co-payments; Compensated Work Therapy Program collections; and Parking Program fees into the MCCF. The Secretary of Veterans Affairs has the authority to transfer funds from the MCCF to the Medical Services account.

COMMITTEE RECOMMENDATION

The Committee recommendation includes the authority to retain co-payments and third-party collections, estimated to total \$2,637,000,000 in fiscal year 2017.

NATIONAL CEMETERY ADMINISTRATION

Appropriations, 2016	\$271,220,000
Budget estimate, 2017	286,193,000
Committee recommendation	286,193,000

ADMINISTRATION OVERVIEW

The National Cemetery Administration [NCA] was established in accordance with Public Law 93–94, the National Cemeteries Act of 1973. It has a four-fold mission: to provide for the interment in any national cemetery of the remains of eligible deceased servicemembers and discharged veterans, together with their spouses and certain dependents, and permanently maintain their graves; to provide headstones for, and to mark graves of, eligible persons in national, State, and private cemeteries; to administer the grant program for aid to States in establishing, expanding, or improving State veterans cemeteries; and to administer the Presidential Memorial Certificate Program.

COMMITTEE RECOMMENDATION

The Committee recommends \$286,193,000 for the National Cemetery Administration. This is an increase of \$14,973,000 above the fiscal year 2016 enacted level and equal to the budget request.

The Committee has included bill language to make available through September 30, 2018, up to 10 percent of the National Cemetery Administration appropriation.

DEPARTMENTAL ADMINISTRATION

Appropriations, 2016	\$6,532,672,000
Budget estimate, 2017	6,037,599,000
Committee recommendation	6,047,599,000

 * The Committee notes the totals above reflect the shift of GOE, VBA from Departmental Administration to the Veterans Benefits Administration.

ADMINISTRATION OVERVIEW

Departmental Administration provides for the administration of veterans benefits through the Veterans Benefits Administration [VBA], the executive direction of the Department, several top level supporting offices, the Board of Contract Appeals, and the Board of Veterans Appeals.

COMMITTEE RECOMMENDATION

The Committee recommends \$6,047,599,000 for Departmental Administration. The amount is composed of \$417,959,000 for General administration; \$156,096,000 for the Board of Veterans Appeals; \$4,278,259,000 for Information technology systems; \$160,106,000 for the Office of the Inspector General; \$528,110,000 for Construction, major projects; \$372,069,000 for Construction, minor projects; \$90,000,000 for Grants for construction of State extended care facilities; and \$45,000,000 for Grants for the construction of State veterans cemeteries.

The Committee also notes the move of the General Operating Expenses, Veterans Benefits Administration account from Departmental Administration to the Veterans Benefits Administration

with the fiscal year 2017 recommendation. This move puts GOE,VBA back under its appropriate section within the act, and the Committee instructs the Department to place GOE,VBA in this location with the fiscal year 2018 request.

GENERAL ADMINISTRATION

(INCLUDING TRANSFER OF FUNDS)

Appropriations, 2016	\$336,659,000
Budget estimate, 2017	417,959,000
Committee recommendation	417,959,000

PROGRAM DESCRIPTION

The General Administration account provides funding for the Office of the Secretary, six assistant secretaries, and three independent staff offices.

COMMITTEE RECOMMENDATION

The Committee recommends \$417,959,000 for General Administration. This amount is \$81,300,000 above the fiscal year 2016 enacted level and equal to the budget request. The Committee has included bill language to make available through September 30, 2018, up to 5 percent of the General Administration appropriation.

The Committee recommends \$9,208,000 for the Office of Government Relations, to include \$3,246,000 for functions previously conducted by the Office of Intergovernmental Affairs and \$5,962,000 for functions previously conducted by the Office of Congressional and Legislative Affairs [OCLA], and \$10,593,000 is for the Office of the Secretary, to include \$7,348,000 for the immediate Office of the Secretary to support not more than 45 FTE. The recommendation fully supports and provides the requested amounts in fiscal year 2017 for the Center for Faith-Based and Neighborhood Partnerships, the Center for Minority Veterans, the Center for Women Veterans, and the Office of Survivors Assistance. In addition, the recommendation includes \$3,532,000 in reimbursable authority for the Office of the Secretary to be used solely for the Office of Employment Discrimination Complaint Adjudication.

The Committee notes approximately 40 percent of the VA's VISN director positions remain unfilled as of the writing of this report. Within available balances for OCLA and for the immediate Office of the Secretary, including any prior-year carryover available to their respective offices, the Committee directs \$1,500,000 be transferred to VHA and be used exclusively to accelerate the hiring of these positions. These amounts shall supplement and not supplant any amounts previously dedicated for this purpose in the fiscal

year 2017 budget request for VHA.

The Committee's concern remains high regarding the number of vacancies within VHA. The Secretary is directed to develop and implement succession planning policies to address the prevalence of vacancies in positions in VHA of more than 180 days, including the development of an enterprise position management system to more effectively identify, track, and resolve such vacancies and submit a report to the Committees on Appropriations of both Houses of Con-

gress no later than 180 days after enactment of this act detailing its findings.

BOARD OF VETERANS APPEALS

Appropriations, 2016	\$109,884,000
Budget estimate, 2017	156,096,000
Committee recommendation	156,096,000

PROGRAM DESCRIPTION

As set forth in section 7101(a) of title 38 United States Code, the Board of Veterans Appeals is responsible for making final decisions on claims for veterans benefits presented to the Board for appellate review. The vast majority of the Board's workload derives from benefit claims initiated by the Veterans Benefits Administration's Regional Offices. The appellate process has multiple steps, most of which occur at the local Regional Office level. If a veteran is not satisfied with the Regional Office determination, he or she may appeal to the Board for a final agency decision. The Board adjudicates appeals covering all areas of veterans benefits, including: service connection, increased disability ratings, total disability ratings, pensions, insurance benefits, educational benefits, home loan guaranties, vocational rehabilitation, waivers of indebtedness, fee basis medical care, and dependency and indemnity compensation.

COMMITTEE RECOMMENDATION

The Committee recommends \$156,096,000 for the Board of Veterans Appeals, which is \$46,212,000 above fiscal year 2016 enacted level and equal to the budget request. The Committee has included bill language to make available through September 30, 2018, up to 10 percent of the Board of Veterans Appeals appropriation.

INFORMATION TECHNOLOGY SYSTEMS

Appropriations, 2016	\$4,133,363,000
Budget estimate, 2017	4,278,259,000
Committee recommendation	4,278,259,000

PROGRAM DESCRIPTION

The Information Technology [IT] Systems appropriation, along with reimbursements, funds the costs of all IT staff salaries and expenses, the operations and maintenance of all existing information technology systems, and the development of new projects and programs designed to improve the delivery of service to veterans. This appropriation also funds the costs associated with the Office of Information and Technology which oversees the functions highlighted above.

COMMITTEE RECOMMENDATION

The Committee recommends \$4,278,259,000 for the Information Technology Systems account. This amount is \$144,896,000 above the fiscal year 2016 enacted level and equal to the budget request. The Committee recommendation includes \$1,272,548,000 for staff salaries and expenses, \$2,534,442,000 for operation and maintenance of existing programs, and \$471,269,000 for program development.

The Committee has appropriated the Information Technology Systems account as three subaccounts. This funding structure enhances the Committee's ability to ensure funds are executed in a manner consistent with the Department's budget submission. The Committee has provided sufficient flexibility within the subaccounts by way of authorized carryover amounts and reprogramming authority to give the Office of Information Technology as much flexibility as possible to accomplish its mission and goals, while ensuring proper accountability and oversight. The Committee will continue to work with the Department to ensure the IT projects currently underway, as well as the projects planned for the future, have the resources needed for success.

The Committee has included bill language restricting the obligation of development funds until the Secretary of Veterans Affairs or the Chief Information Officer submits to the Committees on Appropriations of both Houses of Congress a certification of the amounts, in parts or in full, that will be obligated and expended for each development project. Further, the Office of Information Technology is directed to provide an IT expenditure report, by project, to the Committees on Appropriations of both Houses of Congress on a monthly basis.

The chart below reflects the Administration's budget request for development projects and includes the Committee recommendation for each. This chart will serve as the Department's approved list of development projects, and all requested changes are subject to the reprogramming guidelines as outlined in the accompanying act.

INFORMATION TECHNOLOGY DEVELOPMENT PROJECTS

[In thousands of dollars]

Project	Fiscal year 2017 budget request	Committee recommendation
Electronic Health Record [EHR] Interoperability and VLER Health VistA Evolution Veterans Benefits Management System [VBMS] Virtual Lifetime Electronic Record [VLER] Veterans Customer Experience VHA Research IT Support Development Other IT Systems Development	17,322 63,339 85,288 17,857 73,624 15,066 198,773	17,322 63,339 85,288 17,857 73,624 15,066 198,773
Total Development	471,269	471,269

Electronic Health Records.—As mentioned previously in the report, the Committee remains concerned about the development of VA's electronic health record [EHR] and believes it necessary to monitor VA's progress, including its obligations and expenditures, as it pursues its EHR program. The Committee again includes language in the act limiting obligation or expenditure of information technology development funding for the EHR program to 25 percent of funds provided until the Department:

(1) certifies in writing to the Committees on Appropriations of both Houses of Congress that VA has met the requirements contained in the National Defense Authorization Act of Fiscal Year 2014 (Public Law 113–66) which require that electronic health record systems of DOD and VA have reached interoperability, comply with national standards and architectural requirements identi-

fied by the DOD/VA Interagency Program Office in collaboration with the Office of National Coordinator for Health Information

Technology;

(2) submits to the Committees on Appropriations of both Houses of Congress the VistA Evolution Business Case and supporting documents regarding continuation of VistA Evolution or alternatives to VistA Evolution, including an analysis of necessary or desired capabilities, technical and security requirements, the plan for mod-

ernizing the platform framework, and all associated costs;

(3) submits to the Committees on Appropriations of both Houses of Congress, and such Committees approve, the following: a report that describes a strategic plan for VistA Evolution, or any successor program, and the associated implementation plan including metrics and timelines; a master schedule and lifecycle cost estimate for VistA Evolution or any successor; and an implementation plan for the transition from the Project Management Accountability System to a new project delivery framework, the Veteran-focused Integration Process, that includes the methodology by which projects will be tracked, progress measured, and deliverables evaluated;

(4) submits to the Committees on Appropriations of both Houses of Congress a report outlining the strategic plan to reach interoperability with private sector healthcare providers, the timeline for reaching "meaningful use" as defined by the Office of National Coordinator for Health Information Technology for each data domain covered under the VistA Evolution program, and the extent to which the Department leverages the State Health Information Exchanges to share health data with private sector providers; and

(5) submits to the Committees on Appropriations of both Houses of Congress, and such Committees approve, the following: a report that describes the extent to which VistA Evolution, or any successor program, maximizes the use of commercially available software used by DOD and the private sector, requires an open architecture that leverages best practices and rapidly adapts to technologies produced by the private sector, enhances full interoperability between VA and DOD and between VA and the private sector, and ensures the security of personally identifiable information of veterans and beneficiaries.

Additionally, the Department is directed to continue to provide quarterly briefings to the Committees on Appropriations of both Houses of Congress regarding schedule, milestones, and obligations. The DOD/VA Interagency Program Office is directed to continue to provide briefings to the Committees on a quarterly basis regarding standards development and how those standards are being incorporated by both Departments. In an effort to ensure government-wide accountability, the Committee also directs VA, in coordination with DOD, to provide the Federal Chief Information Officer of the United States with monthly updates on progress made by the two Departments to reach interoperability and modernize their respective electronic health records.

Cybersecurity.—The Committee recommends the full budget request of \$370,067,000 for the VA's information security program. This amount includes \$125,000,000 for VA's Cybersecurity Strategy Implementation program. In fiscal year 2017, the Department will execute an enterprise-wide cybersecurity strategy, which will define

a comprehensive set of actions, processes, and emerging security technologies that will further enhance the cybersecurity of VA's information and assets and improve the resilience of VA networks. This effort is aligned with the Federal Government-wide cybersecurity strategy efforts and was developed to identify and address critical cybersecurity gaps and emerging priorities, with specific recommendations to address those gaps and priorities. The Committee supports the Department's efforts to strengthen IT security and directs VA to provide quarterly briefings to the Committee on these efforts.

OFFICE OF INSPECTOR GENERAL

Appropriations, 2016	\$136,766,000
Budget estimate, 2017	160,106,000
Committee recommendation	160,106,000

PROGRAM DESCRIPTION

The Office of Inspector General [OIG] was established by the Inspector General Act of 1978 and is responsible for the audit, investigation, and inspection of all Department of Veterans Affairs programs and operations.

COMMITTEE RECOMMENDATION

The Committee recommends \$160,106,000 for the Office of Inspector General. This is \$23,340,000 above the fiscal year 2016 enacted level and equal to the budget request. The Committee has included bill language to make available through September 30, 2018, up to 10 percent of the Office of the Inspector General appropriation.

Transparency and Communication.—The Committee recognizes the critical role OIG plays in overseeing the fulfillment of the Department's mission to care for our Nation's veterans. Public Law 114-113, the Consolidated Appropriations Act, 2016, included language intended to increase OIG's transparency and communication with Congress. The Committee is concerned by OIG's interpretation of that language, which at times has been overly technical and inconsistent with the spirit of the law. The Committee strongly believes OIG must make its work products available to Congress, and in fact, OIG's default position should be to share all work with Congress, unless otherwise explicitly prohibited by law. While redaction of information protected by law should be applied, it should not preclude the sharing of the work in which such protected information is located. Specifically, not later than 3 days after any report or audit (or portion of any report of audit) is submitted in final form to the Secretary, OIG should post that report or audit (or portion of that report or audit) on the OIG Web site excluding the public disclosure of information prohibited from disclosure by law. As OIG executes its oversight responsibility, it should make considerable efforts to increase its transparency, accountability, and collaboration with key stakeholders including Congress, other Federal agencies, and the veteran community.

CONSTRUCTION, MAJOR PROJECTS

Appropriations, 2016	\$1,243,800,000
Budget estimate, 2017	528,110,000
Committee recommendation	528,110,000

PROGRAM DESCRIPTION

The Construction, Major Projects account provides for constructing, altering, extending, and improving any of the facilities (including parking projects) under the jurisdiction or for the use of VA, including planning, architectural and engineering services, needs assessment, and site acquisition where the estimated cost of a project is more than the amount set forth in 38 U.S.C. 8104(a)(3)(A). Proceeds realized from Enhanced Use Lease activities may be deposited into the Construction, Major Projects and Construction, Minor Projects accounts.

COMMITTEE RECOMMENDATION

The Committee recommends an appropriation of \$528,110,000 for the construction of major projects. This is \$715,690,000 below the fiscal year 2016 enacted level and equal the budget request.

fiscal year 2016 enacted level and equal the budget request.

The following table reflects the President's budget request for major construction projects and the corresponding Committee recommendations.

MAJOR CONSTRUCTION PROJECTS

[In thousands of dollars]

Location and description	Fiscal year 2017 budget request	Committee recommendation
Veterans Health Administration [VHA]:		
Long Beach, California: Seismic Corrections—Mental Health and Community Living Center	30,200	30,200
Reno, Nevada: Upgrade B1 Seismic, Life Safety, Utility Correction and Expand Clin-	,	,
ical Services	192,420 65.000	192,420 65,000
Major Construction Staff: Various Locations	24.000	24.000
Claims Analysis: Various Locations	5.000	5,000
Hazardous Waste: Various Locations	10,000	10,000
Judgement Fund	9,000	9,000
Non-Departmental Federal Entity Project Management Support	49,490	49,490
Total, VHA	385,110	385,110
National Cemetery Administration [NCA]:		
Elmira, New York: New York National Cemetery—Western New York	36,000	36,000
Las Animas, Colorado: New National Cemetery—Southern Colorado	36,000	36,000
Jacksonville, Florida: Gravesite Expansion	24,000	24,000
South Florida: Gravesite Expansion	31,000	31,000
Advance Planning and Design Fund	10,000	10,000
Total, NCA	137,000	137,000
General Administration—Staff Offices, Advance Planning Fund	6,000	6,000
Total Construction, Major Projects	528,110	528,110

VA/Army Corps of Engineers.—The Committee directs the Department of Veterans Affairs and the U.S. Army Corps of Engineers to ensure there are no unnecessary delays in completing

major Veterans Heath Administration [VHA] construction projects. The Committee is particularly concerned about delays affecting VHA projects to retrofit or replace seismically deficient buildings, which put veterans, Federal employees, and the public at significant risk. The Department in conjunction with the Corps is directed to provide quarterly updates to the Committee on all major VHA construction projects managed by the Corps.

CONSTRUCTION, MINOR PROJECTS

Appropriations, 2016	\$406,200,000
Budget estimate, 2017	372,069,000
Committee recommendation	372,069,000

PROGRAM DESCRIPTION

The Construction, Minor Projects account provides for constructing, altering, extending, and improving any of the facilities (including parking) under the jurisdiction or for the use of VA, including planning, assessment of needs, architectural and engineering services, and site acquisition, where the estimated cost of a project is equal to or less than \$10,000,000. Public Law 106–117, the Veterans Millennium Health Care and Benefits Act of 1999, gave VA authority to make capital contributions from minor construction in enhanced-use leases. Proceeds realized from enhanced-use lease activities may be deposited into the Construction, Major Projects and Construction, Minor Projects accounts.

COMMITTEE RECOMMENDATION

The Committee recommends \$372,069,000 for minor construction. This is \$34,131,000 below the fiscal year 2016 enacted level and equal to the budget request.

The recommendation includes \$285,000 for the Veterans Health Administration, \$56,890 for the National Cemetery Administration, and \$20,000 for the Veterans Benefits Administration. The Department is directed to provide an expenditure plan to the Committees on Appropriations of both Houses of Congress no later than 30 days after enactment of this act for the amount appropriated for minor construction.

GRANTS FOR CONSTRUCTION OF STATE EXTENDED CARE FACILITIES

Appropriations, 2016	\$120,000,000
Budget estimate, 2017	80,000,000
Committee recommendation	90,000,000

PROGRAM DESCRIPTION

This account is used to provide grants to assist States in acquiring or constructing State home facilities for furnishing domiciliary or nursing home care to veterans, and to expand, remodel, or alter existing buildings for furnishing domiciliary, nursing home, or hospital care to veterans in State homes. The grant may not exceed 65 percent of the total cost of the project. Public Law 102–585 granted permanent authority for this program, and Public Law 106–117 provided greater specificity in directing VA to prescribe regulations for the number of beds for which grant assistance may be furnished. This program has been a successful partnership be-

tween States and VA in meeting the long-term care needs of elderly veterans for decades.

COMMITTEE RECOMMENDATION

The Committee recommends \$90,000,000 for Grants for construction of State extended care facilities. This is \$10,000,000 above the budget request.

Funding Prioritization.—The Committee is concerned about the prioritization of funding for new State veterans homes. The criteria used by the Department when making funding decisions for new facilities should take into account the profound geographical barriers facing large rural States.

In addition, it should also consider the unique needs of geographically small States and should reflect that many do not have alternative facilities to care for veterans while their projects are pending.

GRANTS FOR CONSTRUCTION OF VETERANS CEMETERIES

Appropriations, 2016	\$46,000,000
Budget estimate, 2017	45,000,000
Committee recommendation	45,000,000

PROGRAM DESCRIPTION

Public Law 105–368 amended title 38 U.S.C. 2408 and established authority to provide aid to States for establishment, expansion, and improvement of State veterans cemeteries, which are operated and permanently maintained by the States. This statutory change increased the maximum Federal share from 50 percent to 100 percent in order to fund construction costs and initial equipment expenses when the cemetery is established. States remain responsible for providing the land and for paying all costs related to operation and maintenance of the cemeteries, including the costs for subsequent equipment purchases.

COMMITTEE RECOMMENDATION

The Committee recommends \$45,000,000 for Grants for construction of State veterans cemeteries. This is equal to the budget request.

Administrative Provisions

(INCLUDING TRANSFERS AND RESCISSIONS OF FUNDS)

SEC. 201. The Committee includes a provision which outlines transfer authority and responsibilities for the Veterans Benefits Administration.

SEC. 202. The Committee includes a provision which outlines transfer authority and responsibilities for the Veterans Health Administration.

SEC. 203. The Committee includes a provision which outlines the use of funds appropriated for salaries and expenses.

SEC. 204. The Committee includes a provision mandating that only construction funds may be used for land procurement or the construction of any new hospital or home.

Sec. 205. The Committee includes a provision allowing for reimbursements to the Medical Services account.

SEC. 206. The Committee includes a provision allowing for payments of prior year obligations.

SEC. 207. The Committee includes a provision which allows for the use of funds for prior year obligations.

SEC. 208. The Committee includes a provision which allows for payments from the National Service Life Insurance Fund.

Sec. 209. The Committee includes a provision which outlines the use of funds from enhanced-use lease proceeds.

SEC. 210. The Committee includes a provision which provides for funds for the Office of Resolution Management and the Office of Employment Discrimination Complaint Adjudication.

SEC. 211. The Committee includes a provision restricting funds from being used to close certain medical facilities in the absence of a national realignment strategy.

SEC. 212. The Committee includes a provision which requires disclosure of third-party reimbursement information.

SEC. 213. The Committee includes a provision which allows for the transfer of revenue derived from enhanced-use leases into the construction accounts.

SEC. 214. The Committee includes a provision which outlines authorized uses for medical services funds.

SEC. 215. The Committee includes a provision which allows funds in the Medical Care Collection Fund to be transferred into the Medical Services and Medical Community Care accounts.

SEC. 216. The Committee includes a provision which allows eligible veterans in the State of Alaska to obtain medical care services.

SEC. 217. The Committee includes a provision which allows for the transfer of funds into the construction accounts.

SEC. 218. The Committee includes a provision rescinding funds from Medical services to enable the establishment of the Medical Community Care account.

SEC. 219. The Committee includes a provision requiring the Secretary of Veterans Affairs to submit quarterly financial reports on the Veterans Health Administration.

SEC. 220. The Committee includes a provision outlining transfer authority for the Information Technology Systems account.

SEC. 221. The Committee includes a provision prohibiting any funds to be used to contract out any functions performed by more than 10 employees without a fair competition process.

SEC. 222. The Committee includes a provision allowing for the transfer of funds from certain accounts to the Joint Department of Defense/Department of Veterans Affairs Medical Facility Demonstration Fund, as authorized by Public Law 111–84.

SEC. 223. The Committee includes a provision allowing for the transfer of funds from certain advance appropriation accounts to the Joint Department of Defense/Department of Veterans Affairs Medical Facility Demonstration Fund, as authorized by Public Law 111–84.

SEC. 224. The Committee includes a provision allowing for the transfer of certain funds deposited in the Medical Care Collections Fund to the Joint Department of Defense/Department of Veterans

Affairs Medical Facility Demonstration Fund, as authorized by Public Law 111–84.

SEC. 225. The Committee includes a provision directing a minimum of \$15,000,000 be transferred from Medical Services, Medical Support and Compliance, and Medical Facilities to the Department of Defense/Department of Veterans Affairs Health Care Sharing Incentive Fund, as authorized by section 8111 of title 38, United States Code.

SEC. 226. The Committee includes a provision prohibiting the Department from replacing the current system by which diabetes monitoring equipment and supplies are contracted.

SEC. 227. The Committee includes a provision requiring notifica-

tion of all bid savings for major construction projects.

Sec. 228. The Committee includes a provision restricting scope increases for major construction projects above that specified in the original project justification.

SEC. 229. The Committee includes a provision requiring the Department to submit reports relating to the Veterans Benefits Ad-

ministration on claims processing at Regional Offices.

SEC. 230. The Committee includes a provision limiting the funding from the Medical Support and Compliance account for the VistA Evolution and electronic health record interoperability

Sec. 231. The Committee includes a provision requiring VA to notify the Committee 15 days prior to any organizational changes

within VA of 25 or more FTE.

SEC. 232. The Committee includes a provision permitting the transfer of funds between GOE, VBA and BVA.

SEC. 233. The Committee includes a provision rescinding unobligated balances from the DOD-VA Health Care Sharing Incentive

Sec. 234. The Committee includes a provision prohibiting the reprogramming of funds in excess of \$5,000,000 among major construction projects or programs.

Sec. 235. The Committee includes a provision prohibitions the transfer of funds from the Filipino Veterans Equity Compensation

Fund to any other VA account.

SEC. 236. The Committee includes a provision providing for the

extension of a purchased care program.

SEC. 237. The Committee includes a provision regarding copayments for opioid antagonists and education on the use of opioid antagonists.

Sec. 238. The Committee includes a provision regarding access to Office of Inspector General reports.

Sec. 239. The Committee includes a provision allowing for grants to train and employ at-risk veterans.

Sec. 240. The Committee includes a provision regarding a study on toxic exposure.

SEC. 241. The Committee includes a provision regarding a childcare program.

SEC. 242. The Committee includes a provision requiring the re-

porting to State prescription drug monitoring programs.

Sec. 243. The Committee includes a provision regarding the hiring of medical providers.

SEC. 244. The Committee includes a provision regarding the re-

porting of information to State medical boards.

SEC. 245. The Committee includes a provision granting the Secretary transfer authority between any discretionary appropriations accounts and limiting the total transfer to 2 percent of the total discretionary appropriations made available to the Department in this act.

SEC. 246. The Committee includes a provision protecting whistleblowers from retaliation.

SEC. 247. The Committee includes a provision on fertility treatment and counseling for service-connected disabled veterans.

SEC. 248. The Committee includes a provision prohibiting the Appraisal Value Offer Program or the Home Marketing Incentive Program with a waiver.

SEC. 249. The Committee includes a provision prohibiting the use of funds to interfere with the ability of veterans to participate in State-approved medicinal marijuana programs or deny services to such veterans.

SEC. 250. The Committee includes a provision on coastwise merchant seamen.

TITLE III

RELATED AGENCIES

AMERICAN BATTLE MONUMENTS COMMISSION

OVERVIEW

The American Battle Monuments Commission was established by Congress in 1923 and is responsible for the following: designing, constructing, operating, and maintaining permanent American cemeteries in foreign countries; establishing and maintaining U.S. military memorials, monuments, and markers where American Armed Forces have served overseas since April 6, 1917, the date of the United States entry into World War I, and within the United States when directed by public law; and controlling the design and construction of permanent U.S. military monuments and markers by other U.S. citizens and organizations, both public and private, and encouraging their maintenance. ABMC administers, operates, and maintains 25 permanent American military cemeteries, 27 Federal memorial, monuments, and markers, and 8 non-Federal memorials located in 15 foreign countries, the U.S. Commonwealth of the Northern Mariana Islands, the British Dependency of Gibraltar, and the United States of America.

SALARIES AND EXPENSES

Appropriations, 2016	\$105,100,000
Budget estimate, 2017	75,100,000
Committee recommendation	75,100,000

COMMITTEE RECOMMENDATION

The Committee recommends \$75,100,000 for the Salaries and Expenses account. This amount is \$32,000,000 below the fiscal year 2016 enacted level and equal to the budget request.

FOREIGN CURRENCY FLUCTUATIONS

Appropriations, 2016	\$2,000,000
Budget estimate, 2017	
Committee recommendation	

COMMITTEE RECOMMENDATION

The Committee includes in the accompanying act, as proposed by the administration, such sums as necessary for the Foreign Currency Fluctuations account. Funding the account in this manner allows the Commission to maintain cemeteries regardless of the volatility of foreign currency fluctuations.

UNITED STATES COURT OF APPEALS FOR VETERANS CLAIMS

OVERVIEW

The United States Court of Appeals for Veterans Claims was established by the Veterans' Judicial Review Act of 1988. The Court is an independent judicial tribunal with exclusive jurisdiction to review decisions of the Board of Veterans Appeals. It has the authority to decide all relevant questions of law; interpret constitutional, statutory, and regulatory provisions; and determine the meaning or applicability of the terms of an action by the Secretary of Veterans Affairs. It is authorized to compel action by the Secretary. It is authorized to hold unconstitutional or otherwise unlawful and set aside decisions, findings, conclusions, rules, and regulations issued or adopted by the Secretary of Veterans Affairs, the Board of Veterans Appeals, or the Chairman of the Board that are found to be arbitrary or capricious. The Court's principal office location is Washington, DC; however, it is a national court, empowered to sit anywhere in the United States.

SALARIES AND EXPENSES

Appropriations, 2016	\$32,141,000
Budget estimate, 2017	30,945,100
Committee recommendation	30,945,100

COMMITTEE RECOMMENDATION

The Committee recommends \$30,945,100 for the U.S. Court of Appeals for Veterans Claims. This amount is \$1,195,900 below the fiscal year 2016 enacted level and equal to the budget request.

DEPARTMENT OF DEFENSE—CIVIL

CEMETERIAL EXPENSES, ARMY

OVERVIEW

The Secretary of the Army is responsible for the administration, operation, and maintenance of Arlington National Cemetery and the Soldiers' and Airmen's Home National Cemetery. In addition to its principal function as a national cemetery, Arlington is the site of approximately 3,000 nonfuneral ceremonies each year and has approximately four million visitors annually.

SALARIES AND EXPENSES

Appropriations, 2016	\$79,516,000
Budget estimate, 2017	70,800,000
Committee recommendation	70,800,000

COMMITTEE RECOMMENDATION

The Committee recommends \$70,800,000 for Salaries and expenses. This amount is \$8,716,000 below the fiscal year 2016 enacted level and equal to the budget request.

Land Exchange.—The Committee recognizes the future burial capacity of Arlington National Cemetery would be dramatically increased through a land exchange in the area of the former Navy Annex site with Arlington County and the Commonwealth of Vir-

ginia. The Committee strongly supports this effort and understands the Secretary of the Army is working with Arlington County and the Virginia Department of Transportation to finalize the land exchange agreement. The closure and relocation of current State and local roadways in this area would facilitate such an exchange. The Committee urges the Secretary of the Army to continue to work closely with the Virginia Department of Transportation and Arlington County to finalize details of the proposed land exchange so that the cemetery expansion plans, including the relocation of utilities, can move forward as expeditiously as possible.

ARMED FORCES RETIREMENT HOME

TRUST FUND

OVERVIEW

Appropriations, 2016	\$64,300,000
Budget estimate, 2017	64,300,000
Committee recommendation	64,300,000

COMMITTEE RECOMMENDATION

The Committee recommends authority to expend \$64,300,000 from the Armed Forces Retirement Home [AFRH] Trust Fund to operate and maintain the Armed Forces Retirement Home—Washington, DC, and the Armed Forces Retirement Home—Gulfport,

Mississippi.

Trust Fund Solvency.—The Committee is concerned by the continued reliance on the General Fund, which the Committee views as an emergency measure, to supplement the AFRH Trust Fund. The Committee understands AFRH and the Department of Defense have undertaken an in-depth study to develop mid-term and long-term plans to improve Trust Fund solvency; however, the Committee is troubled that the study's statement of work seems to be focused on cuts to core AFRH operations as a means of achieving solvency within the Trust Fund. The Committee reminds the executive branch that reductions in appropriations to AFRH, which support certain former members of our Nation's Armed Forces, is the sole prerogative of the legislative branch and directs AFRH and the Department of Defense to submit by September 30, 2016, a proposal that ensures the long-term sustainability of the Trust Fund by replenishing the Trust Fund's revenues, not by cutting core AFRH operations.

The Committee is disappointed the Department of Defense did not include with the budget request a combination of legislative proposals and administrative actions that can be taken under current law in order to achieve Trust Fund solvency in spite of clear Committee direction to do so in the Explanatory Statement accompanying H.R. 2029, the Consolidated Appropriations Act, 2016. Instead, the Department of Defense proposed a complicated transfer from operation and maintenance for Defense-wide activities, which is nothing more than a thinly disguised appropriation from the General Fund. Both legislative and administrative actions are necessary to improve Trust Fund solvency, eliminate AFRH's reliance on the General Fund, and maintain the high-quality services provided to AFRH residents. The Committee again directs the Depart-

ment of Defense, working with AFRH, to take appropriate administrative action and to develop and submit proposed authorizing language with the fiscal year 2018 budget request in order to fully address the issue of Trust Fund solvency.

Administrative Provisions

SEC. 301. The Committee includes a provision allowing the relocation of a federally owned water main.

SEC. 302. The Committee includes a provision making available funds as authorized by 10 U.S.C. 4727.

TITLE IV

GENERAL PROVISIONS

SEC. 401. The Committee includes a provision that prohibits the obligation of funds beyond the current fiscal year unless expressly

so provided.

Sec. 402. The Committee includes a provision that prohibits the use of funds for programs, projects, or activities not in compliance with Federal law relating to risk assessment, the protection of private property rights, or unfunded mandates.

SEC. 403. The Committee includes a provision that encourages

the expansion of E-commerce technologies and procedures.

SEC. 404. The Committee includes a provision that specifies the congressional committees that are to receive all reports and notifications.

SEC. 405. The Committee includes a provision that limits funds from being transferred from this appropriations measure to any instrumentality of the United States Government without authority from an appropriations act.

SEC. 406. The Committee includes a provision regarding the post-

ing of congressional reports on agency Web sites.

SEC. 407. The Committee includes a provision prohibiting the use of funds to establish or maintain a computer network unless such network blocks the viewing, downloading, and exchanging of pornography, except for law enforcement investigation, prosecution, or adjudication activities.

Sec. 408. The Committee includes a provision prohibiting the use of funds for the payment of first-class travel by an employee of the executive branch.

SEC. 409. The Committee includes a provision limiting the construction of facilities for the purposes of housing individuals detained at Guantánamo Bay, Cuba.

PROGRAM, PROJECT, AND ACTIVITY

In fiscal year 2017, for purposes of the Balanced Budget and Emergency Deficit Control Act of 1985 (Public Law 99-177) or the Balanced Budget and Emergency Deficit Control Reaffirmation Act of 1987 (Public Law 100–119), the following information provides the definition of the term "program, project, and activity" for departments, agencies and programs under the jurisdiction of the Military Construction and Veterans Affairs, and Related Agencies subcommittee. The term "program, project, and activity" shall include the most specific level of budget items identified in the Military Construction, Veterans Affairs, and Related Agencies Appropriations Act, 2017, the House and Senate Committee reports, and the conference report and accompanying joint explanatory statement of managers of the committee of conference.

If a sequestration order is necessary, in implementing the Presidential order, departments, and agencies shall apply any percentage reduction required for fiscal year 2017 pursuant to the provisions of Public Law 99–177 or Public Law 100–119 to all items specified in the justifications submitted to the Committees on Appropriations of the Senate and House of Representatives in support of the fiscal year 2017 budget estimates, as amended, for such departments and agencies, as modified by congressional action, and in addition, for the Department of Defense, Military Construction, the definition shall include specific construction locations as identi-

fied in the explanatory notes.

COMPLIANCE WITH PARAGRAPH 7, RULE XVI, OF THE STANDING RULES OF THE SENATE

Paragraph 7 of rule XVI requires that Committee reports accompanying general appropriations bills identify each recommended amendment which proposes an item of appropriation which is not made to carry out the provisions of an existing law, a treaty stipulation, or an act or resolution previously passed by the Senate during that session.

The Committee recommends funding for the following programs which currently lack authorization:

Title I: Department of Defense

Military Construction, Army Military Construction, Navy and Marine Corps

Military Construction, Air Force

Military Construction, Defense-Wide

Military Construction, Army National Guard

Military Construction, Air National Guard

Military Construction, Army Reserve

Military Construction, Navy Reserve

Military Construction, Air Force Reserve

North Atlantic Treaty Organization Security Investment Program

Department of Defense Base Closure Account

Family Housing Operation and Maintenance, Army

Family Housing Operation and Maintenance, Navy and Marine

Family Housing Operation and Maintenance, Air Force

Family Housing Operation and Maintenance, Defense-Wide

Department of Defense Family Housing Improvement Fund

Family Housing Construction, Army

Family Housing Construction, Navy and Marine Corps

Family Housing Construction, Air Force

Title II: Department of Veterans Affairs

Veterans Benefits Administration Veterans Health Administration National Cemetery Administration Departmental Administration

Title III: Related Agencies

American Battle Monuments Commission U.S. Court of Appeals for Veterans Claims Cemeterial Expenses, Army Armed Forces Retirement Home

COMPLIANCE WITH PARAGRAPH 7(c), RULE XXVI OF THE STANDING RULES OF THE SENATE

Pursuant to paragraph 7(c) of rule XXVI, on April 14, 2016, the Committee ordered favorably reported a bill (S. 2806) making appropriations for military construction, the Department of Veterans Affairs, and related agencies for the fiscal year ending September 30, 2017, and for other purposes, provided, that the bill be subject to amendment and that the bill be consistent with its budget allocation, by a recorded vote of 30–0, a quorum being present. The vote was as follows:

Yeas Nays

Chairman Cochran

Mr. McConnell

Mr. Shelby

Mr. Alexander

Ms. Collins

Ms. Murkowski

Mr. Graham

Mr. Kirk

Mr. Blunt

Mr. Moran

Mr. Hoeven

Mr. Boozman

Mrs. Capito

Mr. Cassidy

Mr. Lankford

Mr. Daines

Ms. Mikulski

Mr. Leahy

Mrs. Murray

Mrs. Feinstein

Mr. Durbin

Mr. Reed

Mr. Tester

Mr. Udall

Mrs. Shaheen

Mr. Merkley Mr. Coons

Mr. Schatz

Ms. Baldwin

Mr. Murphy

COMPLIANCE WITH PARAGRAPH 12, RULE XXVI OF THE STANDING RULES OF THE SENATE

Paragraph 12 of rule XXVI requires that Committee reports on a bill or joint resolution repealing or amending any statute or part of any statute include "(a) the text of the statute or part thereof which is proposed to be repealed; and (b) a comparative print of that part of the bill or joint resolution making the amendment and of the statute or part thereof proposed to be amended, showing by stricken-through type and italics, parallel columns, or other appropriate typographical devices the omissions and insertions which would be made by the bill or joint resolution if enacted in the form

recommended by the committee."

In compliance with this rule, changes in existing law proposed to be made by the bill are shown as follows: existing law to be omitted is enclosed in black brackets; new matter is printed in italic; and existing law in which no change is proposed is shown in roman.

TITLE 38—VETERANS' BENEFITS

PART I—GENERAL PROVISIONS

CHAPTER 3—DEPARTMENT OF VETERANS AFFAIRS

§312. Inspector General

(a) * * *

(c)(1) Whenever the Inspector General, in carrying out the duties and responsibilities established under the Inspector General Act of 1978 (5 U.S.C. App.), issues a work product [that makes a recommendation or otherwise suggests corrective action,] the Inspector General shall-

CHAPTER 7—EMPLOYEES

SUBCHAPTER I—GENERAL EMPLOYEE MATTERS

701. Placement of employees in military installations.

- 713. Senior executives: removal based on performance or misconduct.
- 715. Congressional testimony by employees: treatment as official duty.

SUBCHAPTER II—WHISTLEBLOWER COMPLAINTS

- 731. Whistleblower complaint defined.732. Treatment of whistleblower complaints.
- 733. Adverse actions against supervisory employees who commit prohibited personnel actions relating to whistleblower complaints.
- 734. Evaluation criteria of supervisors and treatment of bonuses. 735. Training regarding whistleblower complaints.
- 736. Reports to Congress.

Subchapter I—General Employee Matters

§ 701. Placement of employees in military installations

§713. Senior executives: removal based on performance or misconduct

(a) IN GENERAL.— (g) Definitions.— (1)* * *(3)* * * (A)* * *

(B) with respect to an individual appointed under section 7306(a) or section 7401(1) of this title, an administrative or executive position.

§ 715. Congressional testimony by employees: treatment as official duty

(a) Congressional Testimony.—An employee of the Department is performing official duty during the period with respect to which the employee is testifying in an official capacity in front of either chamber of Congress, a committee of either chamber of Congress, or a joint or select committee of Congress.

(b) Travel Expenses.—The Secretary shall provide travel expenses, including per diem in lieu of subsistence, in accordance with applicable provisions under subchapter I of chapter 57 of title 5, to any employee of the Department of Veterans Affairs performing official duty described under subsection (a).

Subchapter II—Whistleblower Complaints

§ 731. Whistleblower complaint defined

In this subchapter, the term "whistleblower complaint" means a complaint by an employee of the Department disclosing, or assisting another employee to disclose, a potential violation of any law, rule, or regulation, or gross mismanagement, gross waste of funds, abuse of authority, or substantial and specific danger to public health and safety.

§ 732. Treatment of whistleblower complaints

(a) FILING.—(1) In addition to any other method established by law in which an employee may file a whistleblower complaint, an employee of the Department may file a whistleblower complaint in accordance with subsection (g) with a supervisor of the employee.

(2) Except as provided by subsection (d)(1), in making a whis-

tleblower complaint under paragraph (1), an employee shall file the initial complaint with the immediate supervisor of the employee.

(b) NOTIFICATION.—(1)(A) Not later than four business days after the date on which a supervisor receives a whistleblower complaint by an employee under this section, the supervisor shall notify, in writing, the employee of whether the supervisor determines that there is a reasonable likelihood that the complaint discloses a violation of any law, rule, or regulation, or gross mismanagement, gross waste of funds, abuse of authority, or substantial and specific danger to public health and safety.

(B) The supervisor shall retain written documentation regarding the whistleblower complaint and shall submit to the next-level supervisor and the central whistleblower office described in sub-

section (h) a written report on the complaint.

(2)(A) On a monthly basis, the supervisor shall submit to the appropriate director or other official who is superior to the supervisor a written report that includes the number of whistleblower complaints received by the supervisor under this section during the month covered by the report, the disposition of such complaints, and any actions taken because of such complaints pursuant to subsection

(B) In the case in which such a director or official carries out this paragraph, the director or official shall submit such monthly report to the supervisor of the director or official and to the central

whistleblower office described in subsection (h).

(c) Positive Determination.—If a supervisor makes a positive determination under subsection (b)(1) regarding a whistleblower complaint of an employee, the supervisor shall include in the notification to the employee under such subsection the specific actions that the supervisor will take to address the complaint.

(d) Filing Complaint With Next-Level Supervisors.—(1) If any circumstance described in paragraph (3) is met, an employee may file a whistleblower complaint in accordance with subsection (g) with the next-level supervisor who shall treat such complaint in

accordance with this section

(2) An employee may file a whistleblower complaint with the Secretary if the employee has filed the whistleblower complaint to each level of supervisors between the employee and the Secretary in accordance with paragraph (1).

(3) A circumstance described in this paragraph is any of the fol-

lowing circumstances:

(A) A supervisor does not make a timely determination under subsection (b)(1) regarding a whistleblower complaint.

(B) The employee who made a whistleblower complaint determines that the supervisor did not adequately address the complaint pursuant to subsection (c).

(C) The immediate supervisor of the employee is the basis

of the whistleblower complaint.

(e) Transfer of Employee Who Files Whistleblower Complaint.—If a supervisor makes a positive determination under subsection (b)(1) regarding a whistleblower complaint filed by an employee, the Secretary shall—

(1) inform the employee of the ability to volunteer for a

transfer in accordance with section 3352 of title 5; and

(2) give preference to the employee for such a transfer in accordance with such section.

(f) PROHIBITION ON EXEMPTION.—The Secretary may not exempt any employee of the Department from being covered by this section.

(g) WHISTLEBLOWER COMPLAINT FORM.—(1) A whistleblower complaint filed by an employee under subsection (a) or (d) shall consist of the form described in paragraph (2) and any supporting materials or documentation the employee determines necessary.

(2) The form described in this paragraph is a form developed by the Secretary, in consultation with the Special Counsel, that includes the following:

cludes the following:

(A) An explanation of the purpose of the whistleblower complaint form.

(B) Instructions for filing a whistleblower complaint as described in this section.

- (C) An explanation that filing a whistleblower complaint under this section does not preclude the employee from any other method established by law in which an employee may file a whistleblower complaint.
- (D) A statement directing the employee to information accessible on the Internet website of the Department as described in section 735(d).
 - (E) Fields for the employee to provide—
 - (i) the date that the form is submitted;

(ii) the name of the employee;

(iii) the contact information of the employee;

(iv) a summary of the whistleblower complaint (including the option to append supporting documents pursuant to paragraph (1)); and

(v) proposed solutions to the complaint.

- (F) Any other information or fields that the Secretary determines appropriate.
- (3) The Secretary, in consultation with the Special Counsel, shall develop the form described in paragraph (2) by not later than 60 days after the date of the enactment of this section.

(h) Central Whistleblower Office.—(1) The Secretary shall

ensure that the central whistleblower office—

- (A) is not an element of the Office of the General Counsel;
- (B) is not headed by an official who reports to the General Counsel;
- (C) does not provide, or receive from, the General Counsel any information regarding a whistleblower complaint except pursuant to an action regarding the complaint before an administrative body or court; and

(D) does not provide advice to the General Counsel.

(2) The central whistleblower office shall be responsible for investigating all whistleblower complaints of the Department, regard-

less of whether such complaints are made by or against an employee who is not a member of the Senior Executive Service.

(3) The Secretary shall ensure that the central whistleblower office maintains a toll-free hotline to anonymously receive whistleblower complaints.

(4) The Secretary shall ensure that the central whistleblower office has such staff and resources as the Secretary considers necessary to carry out the functions of the central whistleblower office.

(5) In this subsection, the term 'central whistleblower office' means the Office of Accountability Review or a successor office that is established or designated by the Secretary to investigate whistleblower complaints filed under this section or any other method established by law.

§ 733. Adverse actions against supervisory employees who commit prohibited personnel actions relating to whistleblower complaints

- (a) In General.—(1) In accordance with paragraph (2), the Secretary shall carry out the following adverse actions against supervisory employees (as defined in section 7103(a) of title 5) whom the Secretary, an administrative judge, the Merit Systems Protection Board, the Office of Special Counsel, an adjudicating body provided under a union contract, a Federal judge, or the Inspector General of the Department determines committed a prohibited personnel action described in subsection (c):
 - (A) With respect to the first offense, an adverse action that is not less than a 12-day suspension and not more than removal.
 - (B) With respect to the second offense, removal.

(2)(A) An employee against whom an adverse action under

paragraph (1) is proposed is entitled to written notice.

(B)(i) An employee who is notified under subparagraph (A) of being the subject of a proposed adverse action under paragraph (1) is entitled to 14 days following such notification to answer and furnish evidence in support of the answer.

(ii) If the employee does not furnish any such evidence as described in clause (i) or if the Secretary determines that such evidence is not sufficient to reverse the determination to propose the adverse action, the Secretary shall carry out the adverse action following such 14-day period.

(C) Paragraphs (1) and (2) of subsection (b) of section 7513 of title 5, subsection (c) of such section, paragraphs (1) and (2) of subsection (b) of section 7543 of such title, and subsection (c) of such section shall not apply with respect to an adverse action carried out

under paragraph (1).

(b) LIMITATION ON OTHER ADVERSE ACTIONS.—With respect to a prohibited personnel action described in subsection (c), if the Secretary carries out an adverse action against a supervisory employee, the Secretary may carry out an additional adverse action under this section based on the same prohibited personnel action if the total severity of the adverse actions do not exceed the level specified in subsection (a).

- (c) Prohibited Personnel Action Described.—A prohibited personnel action described in this subsection is any of the following actions:
 - (1) Taking or failing to take a personnel action in violation of section 2302 of title 5 against an employee relating to the employee—

(A) filing a whistleblower complaint in accordance

with section 732 of this title;

(B) filing a whistleblower complaint with the Inspector General of the Department, the Special Counsel, or Con-

gress;

(C) providing information or participating as a witness in an investigation of a whistleblower complaint in accordance with section 732 or with the Inspector General of the Department, the Special Counsel, or Congress;

(D) participating in an audit or investigation by the

Comptroller General of the United States;

(E) refusing to perform an action that is unlawful or prohibited by the Department; or

(F) engaging in communications that are related to the

duties of the position or are otherwise protected.

(2) Preventing or restricting an employee from making an action described in any of subparagraphs (A) through (F) of paragraph (1).

(3) Conducting a negative peer review or opening a retaliatory investigation because of an activity of an employee that is

protected by section 2302 of title 5.

(4) Requesting a contractor to carry out an action that is prohibited by section 4705(b) or section 4712(a)(1) of title 41, as the case may be.

§ 734. Evaluation criteria of supervisors and treatment of bonuses

(a) EVALUATION CRITERIA.—(1) In evaluating the performance of supervisors of the Department, the Secretary shall include the criteria described in paragraph (2).

(2) The criteria described in this subsection are the following:
(A) Whether the supervisor treats whistleblower complaints

in accordance with section 732 of this title.

(B) Whether the appropriate deciding official, performance review board, or performance review committee determines that the supervisor was found to have committed a prohibited personnel action described in section 733(b) of this title by an administrative judge, the Merit Systems Protection Board, the Office of Special Counsel, an adjudicating body provided under a union contract, a Federal judge, or, in the case of a settlement of a whistleblower complaint (regardless of whether any fault was assigned under such settlement), the Secretary.

(b) BONUSES.—(1) The Secretary may not pay to a supervisor described in subsection (a)(2)(B) an award or bonus under this title or title 5, including under chapter 45 or 53 of such title, during the one-year period beginning on the date on which the determination

was made under such subsection.

- (2) Notwithstanding any other provision of law, the Secretary shall issue an order directing a supervisor described in subsection (a)(2)(B) to repay the amount of any award or bonus paid under this title or title 5, including under chapter 45 or 53 of such title, if—
 - (A) such award or bonus was paid for performance during a period in which the supervisor committed a prohibited personnel action as determined pursuant to such subsection (a)(2)(B):
 - (B) the Secretary determines such repayment appropriate pursuant to regulations prescribed by the Secretary to carry out this section; and
 - (C) the supervisor is afforded notice and an opportunity for a hearing before making such repayment.

§ 735. Training regarding whistleblower complaints

- (a) Training.—Not less frequently than once each year, the Secretary, in coordination with the Whistleblower Protection Ombudsman designated under section 3(d)(1)(C) of the Inspector General Act of 1978 (5 U.S.C. App.), shall provide to each employee of the Department training regarding whistleblower complaints, including—
 - (1) an explanation of each method established by law in which an employee may file a whistleblower complaint;
 - (2) an explanation of prohibited personnel actions described by section 733(c) of this title;
 - (3) with respect to supervisors, how to treat whistleblower complaints in accordance with section 732 of this title;
 - (4) the right of the employee to petition Congress regarding a whistleblower complaint in accordance with section 7211 of title 5;
 - (5) an explanation that the employee may not be prosecuted or reprised against for disclosing information to Congress, the Inspector General, or another investigatory agency in instances where such disclosure is permitted by law, including under sections 5701, 5705, and 7732 of this title, under section 552a of title 5 (commonly referred to as the Privacy Act), under chapter 93 of title 18, and pursuant to regulations promulgated under section 264(c) of the Health Insurance Portability and Accountability Act of 1996 (Public Law 104–191);
 - (6) an explanation of the language that is required to be included in all nondisclosure policies, forms, and agreements pursuant to section 115(a)(1) of the Whistleblower Protection Enhancement Act of 2012 (5 U.S.C. 2302 note); and
 - (7) the right of contractors to be protected from reprisal for the disclosure of certain information under section 4705 or 4712 of title 41.
- (b) Manner Training Is Provided.—The Secretary shall ensure that training provided under subsection (a) is provided in person.
- (c) Certification.—Not less frequently than once each year, the Secretary shall provide training on merit system protection in a manner that the Special Counsel certifies as being satisfactory.

(d) Publication.—(1) The Secretary shall publish on the Internet website of the Department, and display prominently at each facility of the Department, the rights of an employee to file a whistleblower complaint, including the information described in paragraphs (1) through (7) of subsection (a).

(2) The Secretary shall publish on the Internet website of the Department, the whistleblower complaint form described in section

732(g)(2).

§ 736. Reports to Congress

(a) Annual Reports.—Not less frequently than once each year, the Secretary shall submit to the appropriate committees of Congress a report that includes-

(1) with respect to whistleblower complaints filed under sec-

tion 732 of this title during the year covered by the report—

(A) the number of such complaints filed;

(B) the disposition of such complaints; and

(C) the ways in which the Secretary addressed such complaints in which a positive determination was made by a supervisor under subsection (b)(1) of such section;

(2) the number of whistleblower complaints filed during the year covered by the report that are not included under para-

graph (1), including-

(A) the method in which such complaints were filed;

(B) the disposition of such complaints; and

(C) the ways in which the Secretary addressed such complaints; and

(3) with respect to disclosures made by a contractor under section 4705 or 4712 of title 41—

(A) the number of complaints relating to such disclosures that were investigated by the Inspector General of the Department of Veterans Affairs during the year covered by the report;

(B) the disposition of such complaints; and

(C) the ways in which the Secretary addressed such

complaints.

- (b) Notice of Office of Special Counsel Determina-TIONS.—Not later than 30 days after the date on which the Secretary receives from the Special Counsel information relating to a whistleblower complaint pursuant to section 1213 of title 5, the Secretary shall notify the appropriate committees of Congress of such information, including the determination made by the Special Counsel.
- (c) Appropriate Committees of Congress.—In this section, the term 'appropriate committees of Congress' means-
 - (1) the Committee on Veterans' Affairs and the Committee on Homeland Security and Governmental Affairs of the Senate;
 - (2) the Committee on Veterans' Affairs and the Committee on Oversight and Government Reform of the House of Representatives.

PART II—GENERAL BENEFITS

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

Subchapter II—Hospital, Nursing Home, or Domiciliary Care and Medical Treatment

§ 1710. Eligibility for hospital, nursing home, and domiciliary care

(a)(1) *	* *					
*	*	*	*	*	*	*
(g)(1) *	* *					
*	*	*	*	*	*	*

- (3) This subsection does not apply [with respect to home health services] with respect to the following:
 - (A) Home health services under section 1717 of this title to the extent that such services are for improvements and structural alterations.
 - (B) Education on the use of opioid antagonists to reverse the effects of overdoses of specific medications or substances.

Subchapter III—Miscellaneous Provisions Relating to Hospital and Nursing Home Care and Medical Treatment of Veterans

§ 1722A. Copayment for medications

- (a)(1) * * * (3) Paragraph (1) does not apply— (A)* * *
- (C) to a veteran whose annual income (as determined under section 1503 of this title) does not exceed the maximum annual rate of pension which would be payable to such veteran if such veteran were eligible for pension under section 1521 of this title.
- (4) Paragraph (1) does not apply to opioid antagonists furnished under this chapter to a veteran who is at high risk for overdose of a specific medication or substance in order to reverse the effect of such an overdose.

PART IV—GENERAL ADMINISTRATIVE PROVISIONS

Chapter 57—Records and Investigations

Subchapter I—Records

§ 5701. Confidential nature of claims

(a) * * * * * * * * * * * (l) Under regulations the Secretary shall prescribe, the Secretary [may] shall disclose information about a veteran or the dependent of a veteran to a State controlled substance monitoring program, including a program approved by the Secretary of Health and Human Services under section 3990 of the Public Health Service Act (42 U.S.C. 280g–3), to the extent necessary to prevent misuse and diversion of prescription medicines.

VETERANS' MENTAL HEALTH AND OTHER CARE IMPROVEMENTS ACT OF 2008, PUBLIC LAW 110–387

TITLE IV

HEALTH CARE MATTERS

SEC. 403. PILOT PROGRAM OF ENHANCED CONTRACT CARE AUTHORITY FOR HEALTH CARE NEEDS OF VETERANS IN HIGHLY RURAL AREAS.

- (a) PILOT PROGRAM REQUIRED.—
 - (1) IN GENERAL.—* * *

* * * * * * * *

- [(3) TERMINATION.—A veteran may receive health services under the pilot program only during the three-year period beginning on the date of the commencement of the pilot program under paragraph (2).]
- (3) DURATION.—A veteran may receive health services under this section during the period beginning on the date specified in paragraph (2) and ending on September 30, 2018.

CONSOLIDATED APPROPRIATIONS ACT, 2016, PUBLIC LAW 114–113

DIVISION J—MILITARY CONSTRUCTION AND VETERANS AFFAIRS, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016

* * * * *

TITLE II

DEPARTMENT OF VETERANS AFFAIRS

* * * * * *

(INCLUDING TRANSFER OF FUNDS)

SEC. 223. Of the amounts appropriated to the Department of Veterans Affairs which become available on October 1, 2016, for "Medical Services", "Medical Support and Compliance", and "Medical Facilities", up to \$265,675,000, plus reimbursements, may be transferred to the Joint Department of Defense-Department of Veterans Affairs Medical Facility Demonstration Fund, established by section 1704 of the National Defense Authorization Act for Fiscal Year 2010 (Public Law 111–84; 123 Stat. 3571) and may be used

for operation of the facilities designated as combined Federal medical facilities as described by section 706 of the Duncan Hunter National Defense Authorization Act for Fiscal Year 2009 (Public Law 110–417; 122 Stat. 4500): *Provided*, That additional funds may be transferred from accounts designated in this section to the Joint Department of Defense-Department of Veterans Affairs Medical Facility Demonstration Fund upon written notification by the Secretary of Veterans Affairs to the Committees on Appropriations of both Houses of Congress.] Repealed.

BUDGETARY IMPACT OF BILL

PREPARED IN CONSULTATION WITH THE CONGRESSIONAL BUDGET OFFICE PURSUANT TO SEC. 308(a), PUBLIC LAW 93-344, AS AMENDED

[In millions of dollars]

	Budget authority		Outl	Outlays	
	Committee allocation	Amount in bill	Committee allocation	Amount in bill	
Comparison of amounts in the bill with the subcommittee allocation for 2017: Subcommittee on Military Construction and Veterans Affairs, and Related Agencies: Mandatory Discretionary Security Nonsecurity Projections of outlays associated with the recommenda-	101,868 83,030 7,930 75,100	101,868 83,030 7,930 75,100	101,470 83,151 NA NA	¹ 101,470 ¹ 83,141 NA NA	
tion: 2017 2018 2019 2020 2021 and future years Financial assistance to State and local governments for				² 109,898 5,246 3,686 2,260 1,469	
2017	NA	201	NA NA	² 37	

 $^{^{1}\,\}mathrm{Includes}$ outlays from prior-year budget authority. $^{2}\,\mathrm{Excludes}$ outlays from prior-year budget authority.

NA: Not applicable.

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Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
ALASKA			
ARMY:			
FORT WAINWRIGHT:			
UNMANNED AERIAL VEHICLE HANGAR	47,000	47,000	
IR FORCE:			
CLEAR AFS:			
FIRE STATION	20,000	20,000	
EIELSON AFB:	00.100	00.100	
F-35A ADAL FIELD TRAINING DETACHMENT FAC	22,100	22,100	
F-35A AIRCRAFT WEATHER SHELTER (SQD 2)	82,300	82,300	
F-35A AIRCRAFT WEATHER SHELTERS (SQD 1) F-35A EARTH COVERED MAGAZINES	79,500	79,500 11,300	l
F-35A HANGAR/PROPULSION MX/DISPATCH	11,300 44,900	44,900	
F-35A HANGAR/SQUAD OPS/AMU SQ #2	42,700	42,700	
F-35A MISSILE MAINTENANCE FACILITY	12,800	12,800	
JOINT BASE ELMENDORF—RICHARDSON:	12,000	12,000	
ADD/ALTER AWACS ALERT HANGAR	29,000	29,000	
EFENSE-WIDE:		·	
CLEAR AFS:			
LONG RANGE DISCRIM RADAR SYS COMPLEX PH1	155,000	155,000	
FORT GREELY:	0.500	0.500	
MISSILE DEFENSE COMPLEX SWITCHGEAR FACILITY	9,560	9,560	
JOINT BASE ELMENDORF—RICHARDSON:	4.000	4 000	
CONSTRUCT TRUCK OFFLOAD FACILITY	4,900	4,900	
TOTAL, ALASKA	561,060	561,060	
,	001,000	001,000	
ARIZONA			
VAVY:			
YUMA:	40.055	40.055	
VMX-22 MAINTENANCE HANGAR	48,355	48,355	
LUKE AFB:			
F-35A SQUAD OPS/AIRCRAFT MAINT UNIT #5	20,000	20,000	
EFENSE-WIDE:	20,000	20,000	
FORT HUACHUCA:			
JITC BUILDING 52110 RENOVATION	4,493	4,493	
TOTAL, ARIZONA	72,848	72,848	
CALIFORNIA			
RMY:			
CONCORD:			
ACCESS CONTROL POINT	12,600	12,600	
IAVY:	12,000	12,000	
CORONADO:			
COASTAL CAMPUS ENTRY CONTROL POINT	13,044	13,044	
COASTAL CAMPUS UTILITIES INFRASTRUCTURE	81,104	81,104	
GRACE HOPPER DATA CENTER POWER UPGRADES	10,353	10,353	
LEMOORE:			
F-35C ENGINE REPAIR FACILITY	26,723	26,723	
SAN DIEGO:	0.100	2.100	
ENERGY SECURITY HOSPITAL MICROGRID	6,183	6,183	
SEAL BEACH:	01 007	01.007	
MISSILE MAGAZINES	21,007	21,007	
EDWARDS AIR FORCE BASE:			
FLIGHTLINE FIRE STATION	24,000	24,000	
DEFENSE-WIDE:	24,000	24,000	
CORONADO:			
SOF HUMAN PERFORMANCE TRAINING CENTER	15,578	15,578	l

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Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
SOF SEAL TEAM OPS FACILITY	47,290	47,290	
SOF SEAL TEAM OPS FACILITY	47,290	47,290	
SOF SPECIAL RECON TEAM ONE OPERATIONS FAC	20,949	20,949	
SOF TRAINING DETACHMENT ONE OPS FACILITY	44,305	44,305	
TRAVIS AFB REPLACE HYDRANT FUEL SYSTEM	26,500	26,500	
ARMY RESERVE:			
FORT HUNTER LIGGETT:	01 500	01 500	
EMERGENCY SERVICES CENTER	21,500	21,500	
IILITARY CONSTRUCTION, AIR FORCE RESERVETRANSIENT TRAINING BARRACKS	19,000	19,000	
TRANSIENT TRAINING DARRACKS	19,000	19,000	
TOTAL, CALIFORNIA	437,426	437,426	
'	, ,	, ,	
COLORADO			
ARMY:			
FORT CARSON:			
AUTOMATED INFANTRY PLATOON BATTLE COURSE	8,100	8,100	
UNMANNED AERIAL VEHICLE HANGAR	5,000	5,000	
NR FORCE:			
BUCKLEY AIR FORCE BASE:	12 500	12 500	
SMALL ARMS RANGE COMPLEX	13,500	13,500	
TOTAL, COLORADO	26,600	26,600	
	20,000	20,000	
CONNECTICUT			
AIR NATIONAL GUARD:			
Bradley IAP:			
CONSTRUCT SMALL AIR TERMINAL	6,300	6,300	
TOTAL, CONNECTICUT	6,300	6,300	
DELAWARE			
AIR FORCE:			
DOVER AFB:			
AIRCRAFT MAINTENANCE HANGAR	39,000	39,000	
DEFENSE-WIDE:	00,000	03,000	
DOVER AFB:			
WELCH ES/DOVER MS REPLACEMENT	44,115	44,115	
	,	,	
TOTAL, DELAWARE	83,115	83,115	
FLORIDA			
VAVY:			
EGLIN AFB:	20.400	20.400	
WMD FIELD TRAINING FACILITIES	20,489	20,489	
EGLIN AFB:			
ADVANCED MUNITIONS TECHNOLOGY COMPLEX	75,000	75,000	
FLIGHTLINE FIRE STATION	13,600	13,600	
PATRICK AFB	10,000	10,000	
FIRE/CRASH RESCUE STATION	13,500	13,500	
DEFENSE-WIDE:	.,,,,,	.,	
PATRICK AFB:			
REPLACE FUEL TANKS	10,100	10,100	
AIR NATIONAL GUARD:			
JACKSONVILLE IAP:			
REPLACE FIRE CRASH/RESCUE STATION	9,000	9,000	
TOTAL FLORIDA	141 000	141 000	
TOTAL, FLORIDA	141,689	141,689	I

Installation and project	Budget estimate	Committee recommendation	Committee recommendatio compared to budget estimat
GEORGIA			8
ARMY: FORT GORDON: CYBER PROTECTION TEAM OPS FACILITY	90,000	90,000	
FORT STEWART AUTOMATED QUALIFICATION/TRAINING RANGE	14,800	14,800	
MOODY AFB: PERSONNEL RECOVERY 4-BAY HANGAR/HELO MX UNIT	30,900	30,900	
Defense-Wide: Fort Benning: Sof Tactical Unmanned Aerial Vehicle Hangar	4,820	4,820	
FORT GORDON MEDICAL CLINIC REPLACEMENT	25,000	25,000	
TOTAL, GEORGIA	165,520	165,520	
HAWAII			
ARMY: FORT SHAFTER:			
COMMAND AND CONTROL FACILITY, INCR 2 NAVY: BARKING SANDS:	40,000	40,000	
UPGRADE POWER PLANT & ELECTRICAL DISTRIB SYS	43,384	43,384	
REGIMENTAL CONSOLIDATED COMM/ELEC FACILITY ARMY NATIONAL GUARD: HILO:	72,565	72,565	
COMBINED SUPPORT MAINTENANCE SHOP	31,000	31,000	
Joint Base Pearl Harbor—Hickam: F—22 Composite Repair Facility	11,000	11,000	
TOTAL, HAWAIIIOWA	197,949	197,949	
ARMY NATIONAL GUARD:			
DAVENPORT: NATIONAL GUARD READINESS CENTERAIR NATIONAL GUARD:	23,000	23,000	
SIOUX GATEWAY AIRPORT: CONSTRUCT CONSOLIDATED SUPPORT FUNCTIONS	12,600	12,600	
TOTAL, IOWA	35,600	35,600	
KANSAS			
AIR FORCE:			
MCCONNELL AFB:			
AIR TRAFFIC CONTROL TOWERKG—46A ADAL TAXIWAY DELTA	11,200 5,600	11,200 5,600	
KC-46A ALTER FLIGHT SIMULATOR BLDGS ARMY NATIONAL GUARD:	3,000	3,000	
FORT LEAVENWORTH: NATIONAL GUARD READINESS CENTER	29,000	29,000	
TOTAL, KANSAS	48,800	48,800	

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
LOUISIANA			
AIR FORCE:			
BARKSDALE AFB: CONSOLIDATED COMMUNICATION FACILITY	21,000	21,000	
NEW ORLEANS: JOINT RESERVE INTELLIGENCE CENTER	11,207	11,207	
TOTAL, LOUISIANA	32,207	32,207	
MAINE			
NAVY:			
KITTERY: UNACCOMPANIED HOUSING UTILITY IMPROVEMENTS FOR NUCLEAR PLATFORMS DEFENSE-WIDE:	17,773 30,119	17,773 30,119	
KITTERY: MEDICAL/DENTAL CLINIC REPLACEMENT	27,100	27,100	
TOTAL, MAINE	74,992	74.992	
MARYLAND	,	,	
NAVY:			
PATUXENT RIVER: CBARS RDT&E HANGAR	40,576	40,576	
AIR FORCE: JOINT BASE ANDREWS: 21 POINTS ENCLOSED FIRING RANGEPAR RELOCATE JADOC SATELLITE SITE	13,000 3,500	13,000 3,500	
BETHESDA NAVAL HOSPITAL: MEDCEN ADDITION/ALTERATION INCR 1FORT MEADE	50,000	50,000	
ACCESS CONTROL FACILITY NSAW CAMPUS FEEDERS PHASE 3 NSAW RECAPITALIZE BUILDING #2 INCR 2	21,000 17,000 195,000	21,000 17,000 195,000	
TOTAL, MARYLAND	340,076	340,076	
AIR FORCE: HANSCOM AFB: SYSTEM MANAGEMENT ENGINEERING FACILITY	20,000	20,000	
TOTAL, MASSACHUSETTS	20,000	20,000	
MINNESOTA	20,000	20,000	
AIR NATIONAL GUARD:			
DULUTH IAP: LOAD CREW TRAINING/WEAPON SHOPS	7,600	7,600	
TOTAL, MINNESOTA	7,600	7,600	
MISSOURI	.,,500	.,500	
DEFENSE-WIDE:			
ST LOUIS: LAND ACQUISITION—NEXT NGA WEST (N2W) CAMPUS	801	801	

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Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
MONTANA			
AIR FORCE:			
MALMSTROM AFB: MISSILE MAINTENANCE FACILITY	14,600	14,600	
TOTAL, MONTANA	14,600	14,600	
NEVADA			
NAVY:			
FALLON: AIR WING SIMULATOR FACILITY	13,523	13,523	
AIR WING SIMULATOR TAGILITY	13,323	15,525	
NELLIS AFB: F-35A POL FILL STAND ADDITION	10,600	10,600	
TOTAL, NEVADA	24,123	24,123	
NEW HAMPSHIRE			
ARMY NATIONAL GUARD:			
HOOKSETT: NATIONAL GUARD VEHICLE MAINTENANCE SHOP	11,000	11,000	
ROCHESTER NATIONAL GUARD VEHICLE MAINTENANCE SHOP	8,900	8,900	
AIR NATIONAL GUARD:	2,222	-,	
PEASE INTERNATIONAL TRADE PORT: KC-46A INSTALL FUSELAGE TRAINER BLDG 251	1,500	1,500	
TOTAL, NEW HAMPSHIRE	21,400	21,400	
NEW MEXICO			
AIR FORCE:			
CANNON AFB: NORTH FITNESS CENTER	21,000	21,000	
HOLLOMAN AFB	,		
HAZARDOUS CARGO PAD AND TAXIWAYKIRTLAND AFB	10,600	10,600	
COMBAT RESCUE HELICOPTER (CRH) SIMULATOR	7,300	7,300	
TOTAL, NEW MEXICO	38,900	38,900	
NEW YORK	,	,	
NAVY RESERVE:			
BROOKLYN:	1.004	1.004	
ELECTRIC FEEDER DUCTBANKSYRACUSE	1,964	1,964	
MARINE CORPS RESERVE CENTER	13,229	13,229	
TOTAL, NEW YORK	15,193	15,193	
NORTH CAROLINA			
NAVY:			
CAMP LEJEUNE: RANGE FACILITIES SAFETY IMPROVEMENTS	18,482	18,482	
CHERRY POINT MARINE CORPS AIR STATION CENTRAL HEAT-	,	,	
ING PLANT CONVERSION	12,515	12,515	
CAMP LEJEUNE:			
DENTAL CLINIC REPLACEMENTFORT BRAGG SOF COMBAT MEDIC TRAINING FACILITY	31,000 10,905	31,000 10.905	
SOF PARACHUTE RIGGING FACILITY	21,420	21,420	

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Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
SOF SPECIAL TACTICS FACILITY (PH3)	30,670 23,598	30,670 23,598	
CHARLOTTE/DOUGLAS IAP: C-17 CORROSION CONTROL/FUEL CELL HANGAR C-17 TYPE III HYDRANT REFUELING SYSTEM AIR FORCE RESERVE:	29,600 21,000	29,600 21,000	
SEYMOUR JOHNSON AFB: KC-46A ADAL BLDG FOR AGE/FUSELAGE TRAININGKC-46A ADAL SQUADRON OPERATIONS FACILITIESKC-46A TWO BAY CORROSION/FUEL CELL HANGAR	5,700 2,250 90,000	5,700 2,250 90,000	
TOTAL, NORTH CAROLINA	297,140	297,140	
ОНЮ			
AIR FORCE: WRIGHT-PATTERSON AFB: RELOCATED ENTRY CONTROL FACILITY 26A	12,600	12,600	
TOTAL, OHIO	12,600	12,600	
OKLAHOMA			
AIR FORCE: ALTUS AFB:	11 000	11 000	
KC-46A FTU/FTC SIMULATOR FACILITY PH 2 TINKER AFB:	11,600	11,600	
KC—46A DEPOT SYSTEM INTEGRATION LABORATORY ARMY NATIONAL GUARD: ARDMORE	17,000	17,000	
NATIONAL GUARD READINESS CENTER	22,000	22,000	
TOTAL, OKLAHOMA	50,600	50,600	
PENNSYLVANIA			
ARMY NATIONAL GUARD: YORK:			
NATIONAL GUARD READINESS CENTER	9,300	9,300	
C-17 ADAL FUEL HYDRANT SYSTEM C-17 CONST/OVERLAYTAXIWAY AND APRON C-17 CONSTRUCT TWO BAY CORROSION/FUEL HANGAR	22,800 8,200 54,000	22,800 8,200 54,000	
TOTAL, PENNSYLVANIA	94,300	94,300	
RHODE ISLAND	54,500	34,300	
ARMY NATIONAL GUARD:			
EAST GREENWICH: NATIONAL GUARD/RESERVE CENTER BUILDING (JFHQ)	20,000	20,000	
TOTAL, RHODE ISLAND	20,000	20,000	
SOUTH CAROLINA		·	
NAVY:			
BEAUFORT: AIRCRAFT MAINTENANCE HANGARPARRIS ISLAND:	83,490	83,490	
RECRUIT RECONDITIONING CENTER & BARRACKS DEFENSE-WIDE:	29,882	29,882	
JOINT BASE CHARLESTON: CONSTRUCT HYDRANT FUEL SYSTEM	17,000	17,000	

${\tt MILITARY\ CONSTRUCTION\ PROJECT\ LISTING\ BY\ LOCATION} \\ --{\tt Continued}$

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
AIR NATIONAL GUARD:			
MCENTIRE ANGS: REPLACE OPERATIONS AND TRAINING FACILITY	8,400	8,400	
TOTAL, SOUTH CAROLINA	138,772	138,772	
TEXAS			
RMY:			
FORT HOOD: AUTOMATED INFANTRY PLATOON BATTLE COURSE	7,600	7,600	
IR FORCE: JOINT BASE SAN ANTONIO:			
BMT RECRUIT DORMITORY 6	67,300	67,300	
EFENSE-WIDE:			
RED RIVER ARMY DEPOT: CONSTRUCT WAREHOUSE & OPEN STORAGE	44,700	44,700	
MEDICAL/DENTAL CLINIC REPLACEMENTIR NATIONAL GUARD:	91,910	91,910	
ELLINGTON FIELD: CONSOLIDATE CREW READINESS FACILITY	4,500	4,500	
IAVY RESERVE: GALVESTON:			
RESERVE CENTER ANNEX	8,414	8,414	
TOTAL, TEXAS	224,424	224,424	
UTAH			
RMY:			
CAMP WILLIAMS:	7 400	7 400	
LIVE FIRE EXERCISE SHOOTHOUSE	7,400	7,400	
649 MUNS MUNITIONS STORAGE MAGAZINES	6,600	6,600	
649 MUNS PRECISION GUIDED MISSILE MX FACILITY	8,700	8,700	
649 MUNS STAMP/MAINT & INSPECTION FACILITY COMPOSITE AIRCRAFT ANTENNA CALIBRATION FAC	12,000	12,000 7,100	
F-35A MUNITIONS MAINTENANCE COMPLEX	7,100 10,100	10,100	
RMY NATIONAL GUARD:	.,	.,	
CAMP WILLIAMS: NATIONAL GUARD READINESS CENTER	37,000	37,000	
TOTAL, UTAH	88,900	88,900	
VERMONT			
IR NATIONAL GUARD:			
BURLINGTON IAP: F-35 BEDDOWN 4-BAY FLIGHT SIMULATOR	4,500	4,500	
TOTAL, VERMONT	4,500	4,500	
VIRGINIA	4,500	4,500	
·			
IRMY: FORT BELVOIR:			
SECURE ADMIN/OPERATIONS FACILITY, INCR 2	64,000	64,000	
NIR FORCE: JOINT BASE LANGLEY-EUSTIS:			
AIR FORCE TARGETING CENTER	45,000	45,000	
FUEL SYSTEM MAINTENANCE DOCK	14,200	.,	

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Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
DEFENSE-WIDE:			
PENTAGON:			
PENTAGON METRO ENTRANCE FACILITY	12,111		- 12,111
UPGRADE IT FACILITIES INFRASTRUCTURE—RRMC	8,105	8,105	
ARMY RESERVE:			
DUBLIN: ORGANIZATIONAL MAINTENANCE SHOP/AMSA	6,000	6,000	
UNGANIZATIONAL WANTENANGE SHOL/AWSA		0,000	
TOTAL, VIRGINIA	149,416	137,305	- 12,11
WASHINGTON			
NAVY:			
BANGOR:			
SERVICE PIER ELECTRICAL UPGRADES	18,939	18,939	
SUBMARINE REFIT MAINT SUPPORT FACILITY	21,476	21,476	
BREMERTON:	6.704	C 704	
NUCLEAR REPAIR FACILITY	6,704	6,704	
EA-18G MAINTENANCE HANGAR	45,501	45,501	
TRITON MISSION CONTROL FACILITY	30,475	30,475	
AIR FORCE:	00,	00,.70	
FAIRCHILD AFB:			
PIPELINE DORM, USAF SERE SCHOOL (150 RM)	27,000	27,000	
TOTAL, WASHINGTON	150,095	150,095	
WISCONSIN	100,000	100,000	
ARMY RESERVE:			
FORT MCCOY: AT/MOB DINING FACILITY	11 400	11 400	
AI/MOD DINING FACILITY	11,400	11,400	
TOTAL, WISCONSIN	11,400	11,400	
WYOMING			
AIR FORCE:			
F. E. WARREN AFB:			
MISSILE TRANSFER FACILITY BLDG 4331	5,550	5,550	
ARMY NATIONAL GUARD:		,,,,,,,	
LARAMIE:			
NATIONAL GUARD READINESS CENTER	21,000	21,000	
TOTAL, WYOMING	26,550	26,550	
AUSTRALIA			
AIR FORCE:			
DARWIN:			
APR—AIRCRAFT MX SUPPORT FACILITY	1,800	1,800	
APR—EXPAND PARKING APRON	28,600	28,600	
TOTAL AUGTRALIA	20.400	20.400	
TOTAL, AUSTRALIA	30,400	30,400	
BULGARIA			
AIR FORCE:			
GRAF IGNATIEVO:			
SQUADRON OPERATIONS/OPERATION ALERT FACILITY		3,800	+ 3,80
FIGHTER RAMP EXTENSION		7,000	+7,00
UPGRADE MUNITIONS STORAGE		2,600	+ 2,60
TOTAL, BULGARIA		13,400	+ 13,40
,		,.50	,

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Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
CUBA			
ARMY:			
GUANTANAMO BAY: MASS MIGRATION COMPLEX	33,000	33,000	
TOTAL OUDA	00.000	20.000	
TOTAL, CUBA	33,000	33,000	
DIEGO GARCIA			
DEFENSE-WIDE:			
DIEGO GARCIA: IMPROVE WHARF REFUELING CAPABILITY	30,000	30,000	
TOTAL, DIEGO GARCIA	30,000	30,000	
DJIBOUTI	,	,	
NAVY: CAMP LEMONNIER: MEDICAL/DENTAL FACILITY		37,409	+ 37,409
AIR FORCE:			
CHABELLEY AIRFIELD: ACCESS ROAD		3,600	+ 3,600
PARKING APRON AND TAXIWAY		6,900	+ 6,900
TOTAL DIPOLITI		47.000	
TOTAL, DJIBOUTI		47,909	+ 47,909
ESTONIA			
AIR FORCE:			
AMARI AB: BULK FUEL STORAGE		6,500	+ 6,500
DOLK FOLE STORAGE		0,300	+ 0,300
TOTAL, ESTONIA		6,500	+ 6,500
GERMANY			
ARMY:			
EAST CAMP GRAFENWOEHR:			
TRAINING SUPPORT CENTERGARMISCH:	22,000	22,000	
DINING FACILITY	9,600	9,600	
WIESBADEN ARMY AIRFIELD:	0,000	5,555	
CONTROLLED HUMIDITY WAREHOUSE	16,500	16,500	
HAZARDOUS MATERIAL STORAGE BUILDINGAIR FORCE:	2,700	2,700	
RAMSTEIN AB:			
37 AS SQUADRON OPERATIONS/AIRCRAFT MAINT UNIT	13,437	13,437	
SPANGDAHLEM AB: EIC—SITE DEVELOPMENT AND INFRASTRUCTURE	43,465	43,465	
HIGH CAPACITY TRIM PAD AND HUSH HOUSE	45,405	1,000	+ 1,000
F/A-22 LOW OBSERVABLE/COMPOSITE REPAIR FACILITY F/A-22 UPGRADE INFRASTRUCTURE/COMMUNICATIONS/UTILI-		12,000	+ 12,000
TIES UPGRADE HARDENED AIRCRAFT SHELTERS FOR F/A–22		1,600	+ 1,600 + 2,700
UPGRADE MANUTION STORAGE DOORS		2,700 1,400	+ 2,700
DEFENSE-WIDE:		1,.50	. 1,100
KAISERLAUTERN AB:	45.001	45.001	
SEMBACH ELEMENTARY/MIDDLE SCHOOL REPLACEMENT RHINE ORDNANCE BARRACKS:	45,221	45,221	
MEDICAL CENTER REPLACEMENT INCR 6	58,063	58,063	
TOTAL CEDMANY	210,986	229,686	: 10 700
TOTAL, GERMANY	1 210,986	1 229,080	+ 18,700

${\tt MILITARY\ CONSTRUCTION\ PROJECT\ LISTING\ BY\ LOCATION} \\ --{\tt Continued}$

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
GUAM			
NAVY:			
JOINT REGION MARIANAS:			
HARDENING OF GUAM POL INFRASTRUCTURE	26,975	26,975	
POWER UPGRADE—HARMON	62,210	62,210	
AIR FORCE:	,	,	
JOINT REGION MARIANAS:			
APR—MUNITIONS STORAGE IGLOOS, PH 2	35,300	35,300	
APR—SATCOM C4I FACILITY	14,200	14,200	
BLOCK 40 MAINTENANCE HANGAR	31,158	31,158	
TOTAL CUAN	100.040	100.040	
TOTAL, GUAM	169,843	169,843	
ICELAND			
NAVY:			
KEFLAVIK:			
P-8A AIRCRAFT RINSE FACILITY		5,000	+ 5,00
P-8A HANGAR UPGRADE		14,600	+ 14,60
			-
TOTAL, ICELAND		19,600	+ 19,60
JAPAN			
NAVY:			
NAVT: KADENA AB:			
AIRCRAFT MAINTENANCE COMPLEX	26,489	26,489	
SASEBO:	20,403	20,403	
SHORE POWER (JULIET PIER)	16,420	16,420	
AIR FORCE:	10,120	10,120	
KADENA AB:			
APR—REPLACE MUNITIONS STRUCTURES	19,815	19,815	
YOKOTA AB:	,	,	
C-130J CORROSION CONTROL HANGAR	23,777	23,777	
CONSTRUCT COMBAT ARMS TRAINING & MAINT FAC	8,243	8,243	
DEFENSE-WIDE:			
IWAKUNI:			
CONSTRUCT TRUCK OFFLOAD & LOADING FACILITIES	6,664	6,664	
KADENA AB:	04.010	04.010	
KADENA ELEMENTARY SCHOOL REPLACEMENT	84,918	84,918	
MEDICAL MATERIEL WAREHOUSESOF MAINTENANCE HANGAR	20,881 42,823	20,881 42,823	
SOF SIMULATOR FACILITY (MC-130)	12,602	12,602	
YOKOTA AB:	12,002	12,002	
AIRFIELD APRON	41,294	41,294	
HANGAR/AMU	39,466	39,466	
OPERATIONS AND WAREHOUSE FACILITIES	26,710	26,710	
SIMULATOR FACILITY	6,261	6,261	
TOTAL, JAPAN	376,363	376,363	
KWAJALEIN			
DEFENSE-WIDE:			
KWAJALEIN ATOLL:			
REPLACE FUEL STORAGE TANKS	85,500	85,500	
THE SECTION OF THE SE	55,550	55,550	
TOTAL, KWAJALEIN	85,500	85,500	

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MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued

	13]		
Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
LITHUANIA			
AIR FORCE:			
SIAULIAI: MUNITIONS STORAGE		3,000	+ 3,000
TOTAL, LITHUANIA		3,000	+ 3,000
MARIANA ISLANDS			
AIR FORCE: UNSPECIFIED LOCATION:			
APR—LAND ACQUISITION	9,000	9,000	
TOTAL, MARIANA ISLANDS	9,000	9,000	
POLAND	3,000	3,000	
AIR FORCE:			
LASK AIR BASE:			
SQUADRON OPERATIONS FACILITY POWIDZ:		4,100	+ 4,100
SQUADRON OPERATIONS FACILITY		4,100	+ 4,100
TOTAL, POLAND		8,200	1 0 201
ROMANIA		0,200	+ 8,200
AIR FORCE:			
CAMP TURZII:			
MUNITIONS STORAGE AREASQUADRON OPERATIONS FACILITY		3,000	+ 3,000
TWO-BAY HANGAR		3,400 6,100	+ 3,400 + 6,100
EXTEND PARKING APRONS		6,000	+ 6,000
TOTAL, ROMANIA		18,500	+ 18,50
SPAIN			·
NAVY:			
ROTA:			
COMMUNICATION STATION	23,607	23,607	
TOTAL, SPAIN	23,607	23,607	
TURKEY			
AIR FORCE:			
INCIRLIK AB: AIRFIELD FIRE/CRASH RESCUE STATION	13,449	13,449	
TOTAL, TURKEY	13,449	13,449	
UNITED ARAB EMIRATES			
AIR FORCE: AL DHAFRA:			
LARGE AIRCRAFT MAINTENANCE HANGAR	35,400	35,400	
TOTAL, UNITED ARAB EMIRATES	35,400	35,400	
UNITED KINGDOM	00,100	00,100	
AIR FORCE:			
CROUGHTON RAF:			
JIAC CONSOLIDATION—PH 3 MAIN GATE COMPLEX	53,082 16,500	53,082 16,500	

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MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued
[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
DEFENSE-WIDE:			
CROUGHTON RAF:			
CROUGHTON ELEM/MIDDLE/HIGH SCHOOL REPLACEMENT	71,424	71,424	
ROYAL AIR FORCE LAKENHEATH: CONSTRUCT HYDRANT FUEL SYSTEM	13,500	13,500	
SONOTION TOLE STOLEM	10,000	10,000	
TOTAL, UNITED KINGDOM	154,506	154,506	
WAKE ISLAND			
DEFENSE-WIDE:			
WAKE ISLAND:			
TEST SUPPORT FACILITY	11,670	11,670	
TOTAL, WAKE ISLAND	11,670	11,670	
,	11,070	11,070	
VARIOUS WORLDWIDE LOCATIONS			
NAVY:			
TRITON FORWARD OPERATING BASE HANGAR	41,380	41,380	
NATO SECURITY INVESTMENT PROGRAM	177,932	177,932	
WORLDWIDE UNSPECIFIED			
ARMY:			
HOST NATION SUPPORT	18,000	18,000	
MINOR CONSTRUCTIONPLANNING AND DESIGN	25,000	35,000	+ 10,000
VAVY:	80,159	99,059	+ 18,900
PLANNING AND DESIGN	88,230	91,030	+ 2,800
MINOR CONSTRUCTION	29,790	29,790	
AIR FORCE:			
PLANNING AND DESIGN	84,862	94,802	+ 9,940
PLANNING AND DESIGN—ANDREWS AFB	18,720 40,000	18,720 40,000	
MINOR CONSTRUCTION	30,000	40,000	+ 10,000
DEFENSE-WIDE:	00,000	,	1 20,000
CONTINGENCY CONSTRUCTION	10,000		- 10,000
ENERGY CONSERVATION INVESTMENT PROGRAM	150,000	150,000	
PLANNING AND DESIGN: DEFENSE WIDE	23,450	23,450	
DEPARTMENT OF DEFENSE DEPENDENT EDUCATION	23,430	23,430	
DEFENSE LOGISTICS AGENCY	27,660	27,660	
MDA			
NATIONAL GEOSPATIAL INTELLIGENCE AGENCY	71,647	71,647	
NATIONAL SECURITY AGENCY	24,000	24,000	
SPECIAL OPERATIONS COMMAND	27,653	27,653 3,427	
WASHINGTON HEADQUARTERS SERVICE	3,427	3,427	
SUBTOTAL, PLANNING AND DESIGN	201,422	201,422	
UNSPECIFIED MINOR CONSTRUCTION:			
DEFENSE-WIDE	3,000	3,000	İ
DEPARTMENT OF DEFENSE DEPENDENT EDUCTION	3,000	3,000	
DEFENSE HEALTH AGENCY	8,500	8,500	
JOINT CHIEFS OF STAFF	8,631	13,631	+ 5,000
MISSILE DEFENSE AGENCY	2,414 3,913	2,414 3,913	
SPECIAL OPERATIONS COMMAND	5,913 5,994	5,913	
	5,551	3,331	
SUBTOTAL, UNSPECIFIED MINOR CONSTRUCTION	35,452	40,452	+ 5,000
ARMY NATIONAL GUARD:			
PLANNING AND DESIGN	8,729	8,729	
MINOR CONSTRUCTION	12,001	12,001	l

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MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued
[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
AIR NATIONAL GUARD:			
PLANNING AND DESIGN	10,462	10,462	
MINOR CONSTRUCTION	17,495	17,495	
ARMY RESERVE:	27,100	27,100	
PLANNING AND DESIGN	7,500	7,500	
MINOR CONSTRUCTION	2,830	2,830	
VAVY RESERVE:	2,000	2,000	
PLANNING AND DESIGN	3,783	3,783	
MINOR CONSTRUCTION	-,	-,	
AIR FORCE RESERVE:			
PLANNING AND DESIGN	4,500	4,500	
MINOR CONSTRUCTION	1,500	1,500	
	_,	=,	
FAMILY HOUSING, ARMY			
(OREA:			
CAMP WALKER (DAEGU):			
FAMILY HOUSING NEW CONSTRUCTION (90 UNITS)	54,554	54,554	
CAMP HUMPHRIES:	54,554	04,004	
FAMILY HOUSING NEW CONSTRUCTION (216 UNITS)	143,563	143,563	
PLANNING AND DESIGN	,	2,618	
LANNING AND DESIGN	2,618	2,010	
SUBTOTAL, CONSTRUCTION	200,735	200,735	
SUBTUTAL, CUNSTRUCTION	200,733	200,733	
PERATION AND MAINTENANCE:			
UTILITIES ACCOUNT	55,428	55,428	
SERVICES ACCOUNT	7,993	7,993	
MANAGEMENT ACCOUNT	40,344	40,344	
MISCELLANEOUS ACCOUNT	400	400	
FURNISHINGS ACCOUNT	10,178	10,178	
LEASING	131,761	131,761	
MAINTENANCE OF REAL PROPERTY	60,745	60,745	
PRIVATIZATION SUPPORT COSTS	19,146	19,146	
THITME SOLVE ON COOLS	10,110	10,110	
SUBTOTAL, OPERATION AND MAINTENANCE	325,995	325,995	
·	020,000	020,000	
FAMILY HOUSING, NAVY AND MARINE CORPS			
GUAM:			
NSA ANDERSON:			
REPLACEMENT HOUSING PHASE I	78,815	78,815	
APAN:	. 0,010	, 0,010	
IWAKUNI:			
CONSTRUCTION IMPROVEMENTS (36 UNITS)	11,047	11,047	
PLANNING AND DESIGN	4,149	4,149	
LANNING AND DESIGN	4,143	4,143	
SUBTOTAL, CONSTRUCTION	94,011	94,011	
SUBTUTAL, CONSTRUCTION	34,011	34,011	
DPERATION AND MAINTENANCE:			
UTILITIES ACCOUNT	56,685	56,685	
SERVICES ACCOUNT	12,855	12,855	
MANAGEMENT ACCOUNT	51,291	51,291	
MISCELLANEOUS ACCOUNT	364	364	
FURNISHINGS ACCOUNT	17,457	17,457	
LEASING	54,689	54,689	
MAINTENANCE OF REAL PROPERTY	81,254	81,254	
PRIVATIZATION SUPPORT COSTS	26,320	26,320	
	20,020	25,520	
	300,915	300,915	
SUBTOTAL, OPERATION AND MAINTENANCE	300,010	300,010	
SUBTOTAL, OPERATION AND MAINTENANCE			l .
SUBTOTAL, OPERATION AND MAINTENANCEFAMILY HOUSING, AIR FORCE			
FAMILY HOUSING, AIR FORCE			

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MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued
[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
KADENA:			
CONSTRUCTION IMPROVEMENTS (KADENA HEIGHTS)	4,179	4,179	
SPAIN:			
MORON AB:	400	400	
CONSTRUCTION IMPROVEMENTS (UNITS 650 AND 658) PLANNING AND DESIGN	498 4,368	498 4,368	
LANNING AND DESIGN	4,300	4,300	
SUBTOTAL, CONSTRUCTION	61,352	61,352	
OPERATION AND MAINTENANCE:			
UTILITIES ACCOUNT	37,241	37,241	
MANAGEMENT ACCOUNT	42,919	42,919	
SERVICES ACCOUNT	13,026	13,026	
FURNISHINGS ACCOUNT	31,690	31,690	
MISCELLANEOUS ACCOUNT	1,745	1,745	
LEASING	20,530	20,530	
MAINTENANCE	85,469	85,469	
PRIVATIZATION SUPPORT COSTS	41,809	41,809	
SUBTOTAL, OPERATION AND MAINTENANCE	274,429	274,429	
FAMILY HOUSING, DEFENSE-WIDE			
OPERATION AND MAINTENANCE:			
NATIONAL SECURITY AGENCY:			
UTILITIES	367	367	
FURNISHING	399	399	
LEASING	11,044	11.044	
MAINTENANCE OF REAL PROPERTY	800	800	
DEFENSE INTELLIGENCE AGENCY:			
UTILITIES	4,100	4.100	
FURNISHINGS	500	500	
LEASING	40,984	40,984	
DEFENSE LOGISTICS AGENCY:	,	,	
UTILITIES	174	174	
FURNISHINGS	20	20	
SERVICES	32	32	
MANAGEMENT	388	388	
MAINTENANCE OF REAL PROPERTY	349	349	
SUBTOTAL, OPERATION AND MAINTENANCE	59,157	59,157	
DOD FAMILY HOUSING IMPROVEMENT FUND	3,258	3,258	
DEPARTMENT OF DEFENSE BASE CLOSURE ACCOUNT	205,237	205,237	
MILITARY CONSTRUCTION, ARMY	200,207	200,207	
MILITARY CONSTRUCTION, NAVY AND MARINE CORPS			
MILITARY CONSTRUCTION, AIR FORCE			
MILITARY CONSTRUCTION, ARMY NATIONAL GUARD			
MILITARY CONSTRUCTION, AIR NATIONAL GUARD			
MILITARY CONSTRUCTION, ARMY RESERVE			
MILITARY CONSTRUCTION, AIR FORCE RESERVE			
MILITARY CONSTRUCTION, ARMY (SEC. 125)		40,500	+ 40,50
MILITARY CONSTRUCTION, NAVY AND MARINE CORPS (SEC. 125)		143,000	+ 143,00
MILITARY CONSTRUCTION, AIR FORCE (SECTION 125.)		195,465	+ 195,46
MILITARY CONSTRUCTION, DEFENSE-WIDE (SEC. 125)		64,364	+ 64,36
MILITARY CONSTRUCTION, ARMY NATIONAL GUARD (SEC. 125)		16,500	+ 16,50
MILITARY CONSTRUCTION, AIR NATIONAL GUARD (SEC. 125)		11,000	+ 11,00
		30,000	+ 30,00
		, 55,550	
MILITARY CONSTRUCTION, ARMY RESERVE (SEC.125)			
		14,400	+ 14,40

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MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued
[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
RESCISSIONS FROM PRIOR YEAR UNOBLIGATED BALANCES			
ARMY			
NAVY AND MARINE CORPS			
AIR FORCE			
DEFENSE-WIDEAIR NATIONAL GUARD			
42 USC 3374 (SEC. 135)			
MILITARY CONSTRUCTION, ARMY (SEC. 126) (RESCISSION)		-30,000	- 30,000
SCISSION)		— 22,340	— 22,340
MILITARY CONSTRUCTION, DEFENSE-WIDE (SEC. 126) (RESCISSION)		- 132,283	- 132,283
NATO SIP (SEC. 126) (RESCISSION)		- 15,000	- 15,000
		,	
SUBTOTAL		- 199,623	- 199,623
RECAP			
ARMY	503,459	532,359	+ 28,900
RESCISSION		- 30,000	- 30,000
NAVY AND MARINE CORPS	1,027,763	1,087,572	+ 59,809
RESCISSION			
AIR FORCE	1,481,058	1,579,798	+ 98,740
RESCISSION		- 22,340	- 22,340
DEFENSE-WIDE	2,056,091	2,038,980	- 17,111
RESCISSIONARMY NATIONAL GUARD	232,930	- 132,283 232,930	- 132,283
RESCISSION	232,930	232,930	
AIR NATIONAL GUARD	143,957	143,957	
RESCISSION			
ARMY RESERVE	68,230	68,230	
RESCISSION			
NAVY RESERVE	38,597	38,597	
RESCISSION	188,950	188,950	
RESCISSION	100,550	100,330	
NATO SECURITY INVESTMENT PROGRAM	177,932	177.932	
RESCISSION		-15,000	- 15,000
DOD FAMILY HOUSING IMPROVEMENT FUND	3,258	3,258	
RESCISSION			
HOMEOWNERS ASSISTANCE PROGRAM			
RESCISSION	F00 700	F0C 720	
FAMILY HOUSING, ARMY	526,730 (200,735)	526,730 (200,735)	
OPERATION AND MAINTENANCE	(325,995)	(325,995)	
RESCISSION	(323,333)	(323,333)	
FAMILY HOUSING, NAVY AND MARINE CORPS	394,926	394.926	
CONSTRUCTION	(94,011)	(94,011)	
OPERATION AND MAINTENANCE	(300,915)	(300,915)	
RESCISSIONFAMILY HOUSING, AIR FORCE	335,781	335,781	
CONSTRUCTION	(61,352)	(61,352)	
OPERATION AND MAINTENANCE	(274,429)	(274,429)	
RESCISSION	(274,423)	(274,423)	
FAMILY HOUSING, DEFENSE-WIDE CONSTRUCTION	59,157	59,157	
OPERATION AND MAINTENANCE	(59,157)	(59,157)	
RESCISSION			
DEPARTMENT OF DEFENSE BASE CLOSURE ACCOUNT	205,237	205,237	
RESCISSION			
42 USC 3374 (Sec. 135)	l	l	

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MILITARY CONSTRUCTION PROJECT LISTING BY LOCATION—Continued
[In thousands of dollars]

Installation and project	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
MILITARY CONSTRUCTION		515,229	+ 515,229
GRAND TOTAL	7,444,056	7,930,000	+ 485,944

OVERSEAS CONTINGENCY OPERATIONS

[iii tilousalius of uoliais	0]		
	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
OVERSEAS CONTINGENCY OPERATIONS			
WORLDWIDE UNSPECIFIED			
NAVY:			
PLANNING AND DESIGN	1,000		-1,000
AIR FORCE: PLANNING AND DESIGN	940		— 940
DJIBOUTI			
NAVY:			
CAMP LEMONIER:			
MEDICAL/DENTAL FACILITY	37,409		- 37,409
AIR FORCE:			
CHABELLEY AIRFIELD: ACCESS ROAD	3,600		- 3,600
PARKING APRON AND TAXIWAY	6,900		- 6,900
TOTAL, OVERSEAS CONTINGENCY OPERATIONS	49,849		- 49,849
NAVY	38,409		- 38,409
AIR FORCE	11,440		- 11,440
EUROPEAN REASSURANCE INITIATIVE			
BULGARIA			
AIR FORCE: GRAF IGNATIEVO: SQUADRON OPERATIONS/OPERATION ALERT FACILITY FIGHTER RAMP EXTENSION UPGRADE MUNITIONS STORAGE	3,800 7,000 2,600		- 3,800 - 7,000 - 2,600
ESTONIA			
AIR FORCE: AMARI AB: BULK FUEL STORAGE	6,500		- 6,500
GERMANY			
AIR FORCE: SPANGDAHLEM AB: HIGH CAPACITY TRIM PAD AND HUSH HOUSE F/A-22 LOW OBSERVABLE/COMPOSITE REPAIR FACILITY F/A-22 UPGRADE INFRASTRUCTURE/COMMUNICATIONS/UTILITIES UPGRADE HARDENED AIRCRAFT SHELTERS FOR F/A-22	1,000 12,000 1,600 2,700		-1,000 -12,000 -1,600 -2,700
UPGRADE MUNITION STORAGE DOORS	1,400		- 1,400
ICELAND			
NAVY: KEFLAVIK:			
P-8A AIRCRAFT RINSE FACILITYP-8A HANGAR UPGRADE	5,000 14,600		- 5,000 - 14,600
LITHUANIA			
AIR FORCE: SIAULIAI: MUNITIONS STORAGE	3,000		- 3,000
POLAND	•		
AIR FORCE:			
LASK AIR BASE: SQUADRON OPERATIONS FACILITY	4,100		- 4,100

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OVERSEAS CONTINGENCY OPERATIONS—Continued

	Budget estimate	Committee recommendation	Committee recommendation compared to budget estimate
POWIDZ: SQUADRON OPERATIONS FACILITY	4,100		-4,100
AIR FORCE: CAMP TURZII: MUNITIONS STORAGE AREA	3,000 3,400 6,100 6,000		- 3,000 - 3,400 - 6,100 - 6,000
ARMY: PLANNING AND DESIGN	18,900 1,800		- 18,900 - 1,800
UNSPECIFIED MINOR CONSTRUCTION: THE JOINT STAFF	5,000		– 5,000
TOTAL, EUROPEAN REASSURANCE INITIATIVE ARMY NAVY AIR FORCE DEFENSE-WIDE	113,600 18,900 21,400 68,300 5,000		- 113,600 - 18,900 - 21,400 - 68,300 - 5,000
COUNTER-TERRORISM SUPPORT WORLDWIDE UNSPECIFIED			
AIR FORCE: PLANNING AND DESIGN	9,000		- 9,000
TOTAL, COUNTER-TERRORISM SUPPORTAIR FORCE	9,000 9,000		- 9,000 - 9,000
TOTAL, FY2017 OVERSEAS CONTINGENCY OPERATIONS	172,449 18,900 59,809 88,740 5,000		- 172,449 - 18,900 - 59,809 - 88,740 - 5,000

NOTE.—Funding for these projects was requested in Title IV. The bill provides the requested level of funding for these projects in Title I.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2016 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 2017

[In thousands of dollars]

and discovery	2016	400	Committee	Senate Committee recommendation compared with (+ or -)	recommendation (+ or -)
IIGH	appropriation	budget estimate	recommendation	2016 appropriation	Budget estimate
TITLE I—DEPARTMENT OF DEFENSE					
Military construction, Army	663,245	503,459	532,359	- 130,886	+ 28,900
Military construction, Navy and Marine Corps	1,669,239	1,02/,/63	1,08/,5/2	- 581,667 + 190,613	+ 59,809 + 98,740
Military construction, Defense-Wide	2,242,867	2,056,091	2,038,980	-203,887	-17,111
Total, Active components	5,964,536	5,068,371	5,238,709	-725,827	+ 170,338
Military construction, Army National Guard	197,237	232,930	232,930	+ 35,693	
Military construction, Army Reserve	113,595	68,230	68,230	- 45,365	
Military construction, Navy Keserve Military construction, Air Force Reserve	36,078 65,021	38,59/ 188,950	38,59/ 188,950	+ 2,519 + 123,929	
Total, Reserve components	550,669	672,664	672,664	+ 121,995	
North Atlantic Treaty Organization Security Investment Program (NSIP)	135,000 266,334	177,932 205,237	177,932 205,237	+ 42,932 - 61,097	
Total, Military construction	6,916,539	6,124,204	6,294,542	- 621,997	+ 170,338
	375,611	325,995	325,995	- 49,616	
ramily nousing operation and maintenance, way and marifie Lorps	331,232	300,915 274,429	300,915 274,429	- 52, 121 - 56,803	
Family housing operation and maintenance, Defense-Wide	58,668	59,157 3,258	59,157 3,258	+ 489 + 3,258	
Total, Family Housing operation and maintenance	1,118,547	963,754	963,754	- 154,793	
Family housing construction, Army	108,695	200,735	200,735	+ 92,040	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2016 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2017—Continued
[In thousands of dollars]

hom	2016	Dudget setimate	Committee	Senate Committee recommendation compared with (+ or -)	recommendation (+ or -)
IIAII	appropriation	punget estimate	recommendation	2016 appropriation	Budget estimate
Rescissions	(-371,820)		(-199,623)	(+172,197)	(-199,623)
TITLE II—DEPARTMENT OF VETERANS AFFAIRS					
Veterans Benefits Administration					
Compensation and pensions: Advance from nrior year		(86.083.128)	(86 083 128)	(+ 86 083 128)	
Current year request	76,865,545	(00,000,120)	(00,000,120)	- 76,865,545 - 76,865,545	
Subtotal, current year	76,865,545	86,083,128	86,083,128	+ 9,217,583	
Advance appropriation, fiscal year 2018	86,083,128	90,119,449	90,119,449	+ 4,036,321	
Readjustment benefits. Advance from prior year	1/1 313 357	(16,340,828)	(16,340,828)	(+16,340,828)	
Current year reduced	14,010,001			14,010,007	
Subtotal	14,313,357	16,340,828	16,340,828	+ 2,027,471	
Advance appropriation, fiscal year 2018	16,340,828	13,708,648	13,708,648	-2,632,180	
Veterans insurance and indemnities: Advance from prior year	77,160	(91,920) 16,605	(91,920) 16,605	(+91,920) - 60,555	
Subtotal	77,160	108,525	108,525	+ 31,365	
Advance appropriation, fiscal year 2018	91,920	107,899	107,899	+ 15,979	
Veterans housing benefit program fund: (Limitation on direct loans) Administrative expenses Vocational rehabilitation loans program account	(500) 164,558 31	(500) 198,856 36	(500) 198,856 36	+ 34,298	

(Limitation on direct loans) Administrative expenses. Native American veteran housing loan program account General operating expenses, VBA	(2,952) 367 1,134 2,707,734	(2,517) 389 1,163 2,826,160	(2,517) 389 1,163 2,856,160	(-435) + 22 + 29 + 148,426	+ 30,000
Total, Veterans Benefits Administration Appropriations Advance appropriations, fiscal year 2018 Advances from prior year appropriations	196,645,762 (94,129,886) (102,515,876)	106,979,205 (3,043,209) (103,935,996) (102,515,876)	107,009,205 (3,073,209) (103,935,996) (102,515,876)	-89,636,557 (-91,056,677) (+1,420,120) (+102,515,876)	+ 30,000 (+ 30,000)
Veterans Health Administration					
Medical services: Advance from prior year	(47,603,202) 2,369,158	(51,673,000) 1,078,993	(51,673,000) 1,078,993	(+4,069,798) -1,290,165	
Subtotal	49,972,360	52,751,993	52,751,993	+ 2,779,633	
Advance appropriation, fiscal year 2018	51,673,000	44,886,554	44,886,554	-6,786,446	
Medical community care: Advance from prior year		(7,246,181)	7,246,181	+ 7,246,181	+ 7,246,181 (-7,246,181)
Subtotal		7,246,181	7,246,181	+ 7,246,181	
Advance appropriation, fiscal year 2018		9,409,118	9,409,118	+9,409,118	
Medical support and compliance: Advance from prior year	(6,144,000)	(6,524,000)	(6,524,000)	(+380,000)	
Subtotal	6,144,000	6,524,000	6,524,000	+ 380,000	
Advance appropriation, fiscal year 2018	6,524,000	6,654,480	6,654,480	+130,480	
Medical facilities: Advance from prior year	(4,915,000) 105,132	(5,074,000) 649,000	(5,074,000) 495,100	(+159,000) +389,968	-153,900
Subtotal	5,020,132	5,723,000	5,569,100	+ 548,968	-153,900
Advance appropriation, fiscal year 2018	5,074,000	5,434,880	5,434,880	+ 360,880	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2016 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 2017—Continued

	2016	d de la companya de l	Committee	Senate Committee recommendation compared with $(+ ext{ or } -)$	recommendation $(+ \text{ or } -)$
IEBII	appropriation	anger estimate	recommendation	2016 appropriation	Budget estimate
Medical and prosthetic research	630,735	993,366	675,366	+ 44,631	+ 12,000
Medical care cost recovery collections: Offsetting collections Appropriations (indefinite)	-2,445,000 2,445,000	-2,637,000 $2,637,000$	-2,637,000 $2,637,000$	$-192,000 \\ +192,000$	
Subtotal					
DOD-VA Joint Medical Funds (by transfer)	(286,000)	(274,731) (15,000)	(274,731) (15,000)	(-11,269)	
Total, Veterans Health Administration Appropriations (By transfer) Advance appropriations, fiscal year 2018 Advances from prior year appropriations	66,376,025 (3,105,025) (301,000) (63,271,000) (58,662,202)	68,776,391 (2,391,359) (7,535,912) (66,385,032) (63,271,000)	75,880,672 (9,495,640) (289,731) (66,385,032) (63,271,000)	+ 9,504,647 (+ 6,390,615) (- 11,269) (+ 3,114,032) (+ 4,608,798)	+ 7,104,281 (+ 7,104,281) (- 7,246,181)
National Cemetery Administration National Cemetery Administration Departmental Administration	271,220	286,193	286,193	+ 14,973	
General administration Board of Veterans Appeals Information rechnology systems Construction, major projects Construction, minor projects Grants for construction of State extended care facilities Grants for the construction of veterans cemeteries	336,659 109,884 4,133,363 136,766 1,243,800 406,200 120,000 46,000	417,959 156,096 4,278,259 160,106 528,110 372,069 80,000 45,000	417,959 156,096 4,278,259 160,106 528,110 372,069 90,000 45,000	+ 81,300 + 46,212 + 144,896 + 23,340 - 715,690 - 34,131 - 30,000 - 1,000	+ 10,000

Total, Departmental Administration	6,532,672	6,037,599	6,047,599	- 485,073	+ 10,000
Administrative Provisions Section 226 (FY16) Medical services (Reccission) Medical facilities (Rescission) Medical facilities	1,400,000 -1,400,000 -1,00,000 -100,000 250,000 -250,000			- 1,400,000 + 1,400,000 - 100,000 + 100,000 - 250,000 + 250,000	
Transfer authority to Medical Services JIF (Sec. 233) (rescission) Medical Services (Sec. 218) (rescission)	-30,000		- 52,000 - 7,246,181	- 22,000 - 7,246,181	-52,000 $-7,246,181$
Total. Administrative Provisions	. — 30,000		- 7,298,181	-7,268,181	-7,298,181
Total, title II Appropriations Rescissions (By transfer) TITLE III—RELATED AGENCIES	269,795,679 (105,788,803) (-1,780,000) (301,000)	182,079,388 (11,758,360) (7,535,912)	181,925,488 (18,902,641) (-7,298,181) (289,731)	- 87,870,191 (- 86,886,162) (- 5,518,181) (- 11,269)	- 153,900 (+7,144,281) (-7,246,181)
American Battle Monuments Commission Salaries and expenses Foreign currency fluctuations account	105,100	75,100	75,100	-30,000 -2,000	
Total, American Battle Monuments Commission	107,100	75,100	75,100	- 32,000	
U.S. Court of Appeals for Veterans Claims Salaries and expenses	32,141	30,945	30,945	- 1,196	
Cemeterial Expenses, Army Salaries and expenses	79,516	70,800	70,800	-8,716	
Operation and maintenance	43,300	63,300	41,300	-2,000	-22,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2016 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2017—Continued
[In thousands of dollars]

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recommendation	Budget estimate	+ 22,000				-38,409 $-11,440$	- 49,849	- 18,900 - 21,400 - 68,300 - 5,000	- 113,600	-9,000 -172,449	
Senate Committee recommendation	2016 appropriation	+ 2,000		- 41,912							- 88,153,103
	Committee recommendation	1,000	64,300	241,145							190,096,633
	Budget estimate	1,000	64,300	241,145		38,409 11,440	49,849	18,900 21,400 68,300 5,000	113,600	9,000	189,937,038
	2016 appropriation	1,000	64,300	283,057							278.249.736
	ltem	Capital program Payment from General Fund	Total, Armed Forces Retirement Home	Total, title III	TITLE IV—OVERSEAS CONTINGENCY OPERATIONS Overseas Contingency Operations	Navy	Subtotal	European Reassurance Initiative Army Navy Air Force Defense-Wide	Subtotal Counter Terrorism Support	Air Force	Grand total

Rescissions	(-2,151,820)		(-7,497,804)	(-5,345,984)	(-7,497,804)
Advance appropriations, fiscal year 2018	(165,786,876)	(170,321,028)	(170,321,028)	(+4,534,152)	
Overseas contingency operations		(172,449)			(-172,449)
Advances from prior year appropriations	(58,662,202)	(165,786,876)	(165,786,876)	(+107,124,674)	
(By transfer)	(301,000)	(7,535,912)	(289,731)	(-11,269)	(-7,246,181)
(Limitation on direct loans)	(3,452)	(3,017)	(3,017)	(-435)	

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