DIVISION ____ -- MILITARY CONSTRUCTION, VETERANS AFFAIRS, AND RELATED AGENCIES APPROPRIATIONS ACT, 2020

The following is an explanation of the effects of Division [] which makes appropriations for Military Construction, Veterans Affairs, and Related Agencies for fiscal year 2020. Unless otherwise noted, references to the House Report is reference to House Report 116-63. The language set forth in House Report 116-63 should be complied with and carry the same emphasis as the language included in the joint explanatory statement, unless specifically addressed to the contrary in this joint explanatory statement. While repeating some report language for emphasis, this joint explanatory statement does not intend to negate the language referred to above unless expressly provided herein.

TITLE I

DEPARTMENT OF DEFENSE

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 reprogramming to an item specifically reduced below the threshold by the Congress is permitted, except that the DOD may seek reprogramming for appropriated increments.

The reprogramming criteria that apply to military construction projects, which is 25 percent of the funded amount or \$2,000,000, whichever is less, also apply to new housing construction projects and improvements. 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, if 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.

In addition to these guidelines, the services are directed to adhere to the guidance for military construction reprogramming actions and notifications, including the pertinent statutory authorities contained in DOD Financial Management Regulation 7000.14-R and relevant updates and policy memoranda. Further, the agreement encourages the Office of the Director of National Intelligence to use a format similar to that used by the Office of the Secretary of Defense to submit reprogramming requests.

Natural Disasters and Military Installations Resiliency. —The Committees support the military's continued focus on building lasting and resilient military installations, including methods that update hurricane-resistant building codes for bases, barracks, hospitals, and airfields. The Committees strongly support Department-wide initiatives such as revised structure planning, conservation programs and modeling new installations with the threat of sea-level rise in mind. The agreement strongly urges DOD to prioritize investing in climate-sustainable infrastructure projects because they yield positive results, such as increased resiliency and cost-savings. The agreement reiterates the direction provided in House Report 116-63 that directs DOD to detail its plans to further develop lasting and resilient military installations. The agreement also includes \$75,000,000 in planning and design funds for the Services to address these and 10 U.S.C. 2864 master plan requirements in future military construction programs.

Bid Savings.— Cost variation notices required by 10 U.S.C. 2853 continue to demonstrate the Department of Defense (DOD) continues to have bid savings on previously appropriated military construction projects. Therefore, the agreement includes rescissions to the Defense-Wide military construction account and the NATO Security Investment Program. The Secretary of Defense is directed to continue to submit 1002 reports on military construction bid savings at the end of each fiscal quarter to the Committees.

Incremental Funding.-- In general, the Committees support full funding for military construction projects if they are executable. However, it continues to be the practice of the Committees to provide incremental funding for certain large projects to enable the services to more efficiently allocate military construction dollars among projects that can be executed in the year of appropriation. Therefore, the agreement includes 16 projects that have been incrementally funded, however the full authorization of the projects was provided in the National Defense Authorization Act, Fiscal Year 2020.

Facilities Sustainment, Restoration and Modernization (FSRM).—The Department of Defense is directed to continue describing on form 1390 the backlog of FSRM requirements at installations with future construction projects. For troop housing requests, form 1391 should describe any FSRM conducted in the past two years. Likewise, future requirements for unaccompanied housing at the corresponding installation should be included. Additionally, the forms should include English equivalent measurements for projects presented in metric measurement. Rules for funding repairs of facilities under the Operation and Maintenance accounts are described below:

(1) components of the facility may be repaired by replacement. Such replacement can be up to current standards or codes;

(2) interior arrangements and restorations may be included as repair;

(3) additions and new facilities may be done concurrently with repair projects, as long as the final conjunctively funded project is a complete and usable facility; and

(4) the appropriate service secretary shall notify the appropriate committees 21 days prior to carrying out any repair project with an estimated cost in excess of \$7,500,000.

Work In Progress Or Planned (WIP) Curve.-- The Services and the Office of the Secretary of Defense (on behalf of itself and defense agencies) are directed to submit a WIP curve for each project requested in a budget submission above \$90,000,000 with the 1391 justification to the congressional defense committees. Due to the alarming amount of unawarded prior-year military construction projects, the Secretary of Defense is directed to report to the congressional defense committees quarterly, beginning in the second quarter of fiscal year 2020 and each quarter thereafter on projects that remain unawarded from the current and prior fiscal years and the reasons therefore. Finally, in order to improve transparency and consistent with data publication required under 10 U.S.C. 2851, the agreement directs the Secretary of Defense to submit reports to the congressional defense committees on a quarterly basis starting no later than the second quarter of fiscal year 2020 identifying contracts awarded in the relevant previous quarter for projects funded in this title. At minimum the reports should include: the project name and location, contract solicitation and award date, and contract award amount.

Military Construction Thresholds.—The agreement places no restriction on military construction funding levels that can be requested by the Department, whether domestic or overseas although the Secretary of the Army has issued guidance that the cost for individual military construction projects should not exceed \$100,000,000. Project scopes should not be artificially capped by cost and the agreement directs the Army to reevaluate this practice and to include incorporating area cost factor into any related guidance. In accordance with standing practice, the Department is directed to request such funds for military construction as may be necessary to meet military requirements and can be responsibly executed.

Leveraging Military Construction for Emergent Requirements.— The Committees recognize that other countries are utilizing infrastructure to enhance national interest at a higher rate of investment than the Department of Defense. Military construction is vital to current and future force readiness and can be a strategic asset to deter near-peer competitors, particularly in nations that support U.S. posture in the Indo-Asia-Pacific, such as Micronesia, the Marshall Islands, and Palau. The agreement provides an additional \$10,000,000 in Defense-Wide planning and design for emergent requirements in the Indo-Pacific Command (INDOPACOM) region that support National Defense Strategy objectives to sustain joint force military advantages and deter adversaries from aggression against our national interest. INDOPACOM is directed to provide a spend plan for these funds no later than 180 days after enactment of this Act.

Project Delivery and Process Improvements.—Because of concern with the number of projects delivered behind schedule or over budget, the agreement directs the Secretary of Defense to provide a report within 180 days of enactment of this Act on the Department's progress in adopting best industry practices and other initiatives to address and mitigate risks in the delivery of construction projects. The report should include descriptions of the specific improvements that have been assessed and the extent of their implementation, the intended results and metrics, suggested refinements to budget documents, and individual assessments by the Secretaries concerned and DOD construction agents on the extent to which they have incorporated these improvements into their military construction programs.

Construction Costs.— DOD faces increasing challenges meeting its construction requirements in remote and highly remote markets where projects are less competitive in the DOD planning, programming, and budgeting process compared to those in low costs markets, regardless of the importance of the project to the DOD mission. Therefore, no later than 270 days after enactment of this Act, the US Army Corps of Engineers (USACE) and Naval Facilities Command (NAVFAC) are directed to provide a report assessing strategies for controlling and reducing costs to military construction projects. The report shall specifically consider project costs in remote and highly remote markets, including overseas markets in the Western and Southern Pacific. The report shall also consider the costs that DOD can control through the acquisition process, including potential changes to procurement authorities that allow preference of alternative, lower-cost building materials and

techniques, such as concrete curing, provided the materials and techniques meet military specific design standards.

Natural Disaster Recovery.—Consistent with standard practice, the agreement directs DOD to adhere to all applicable laws concerning National Environmental Protection Act (NEPA) requirements prior to beginning any site preparation or construction. The agreement further directs DOD no later than 30 days after enactment of this Act to brief the congressional defense committees on any steps that have been taken or are expected to be taken related to military construction at installations recovering from natural disasters that are not in accordance with NEPA requirements.

Equivalent Standards.— The agreement encourages the Secretary of Defense, in coordination with the Secretaries of the Military Departments, to pursue the identification of equivalent host nation standards as an option to align U.S. and host country criteria and standards to improve project delivery, particularly in those countries where construction costs are escalating. Furthermore, the agreement encourages DOD construction agents and project sponsors to utilize equivalent standards as appropriate on DOD projects to the maximum extent possible.

Federal, State and Local Intelligence Collaboration.—Several states utilize National Guard Bureau (NGB) facilities for intelligence analysis and fusion centers. As previously indicated in Senate Report 115–130 and Senate Report 115–269, the Committees remain supportive of such collaborative co-location projects particularly as it relates to the NGB's Joint Force Headquarters Analysis Cells concept. The Committees urge the Department and the NGB to prioritize needed workplace replacement projects, including Sensitive Compartmented Information Facility projects to conduct State and Federal intelligence analysis, in the fiscal year 2021 and future budget submissions.

Child Development Centers (CDCs) and Quality of Life (QOL).—Adequate childcare is vitally important to servicemembers and their families, and the lack of Child Development Centers (CDCs) creates an unnecessary hardship for them. To address this shortfall, the agreement includes \$11,000,000 in each of the Services' planning and design accounts to assist them in preparing for the construction of new CDCs at the most underserved military installations. In addition, the Committees expect the direction given in House Report 116-63 to be followed.

Defense Access Roads. — Improving road safety at and around military facilities is an important part of maintaining and enhancing military readiness, and there is a concern that DOD's lack of future planning for Defense Access Roads (DAR) and transportation infrastructure needs around bases places servicemembers and their families at risk especially at Reserve bases. The agreement directs the Secretary of Defense in consultation with the Secretary of Transportation to prioritize all DAR certified roads and projects in the outyears 2021-2026. The agreement directs the Secretary of Defense to provide a list of planned DAR projects at active and reserve installations no later than 60 days after the enactment of this Act.

MILITARY CONSTRUCTION, ARMY

The agreement provides \$1,178,499,000 for "Military Construction, Army", which is \$275,000,000 below the budget request. Within this amount, the agreement provides \$136,099,000 for study, planning, design, architect and engineer services, and host nation support. The agreement also provides an additional \$11,000,000 above the request for planning and design for child development centers.

Motorpools.-- The Committees look forward to receiving the report requested in House Report 116-63 regarding the modernization needs of motorpools that support the rapid deployment of armored combat units.

Alaska Infrastructure Readiness Initiative.—The agreement recognizes that U.S. Army Pacific senior leaders proposed an Alaska Infrastructure Readiness Initiative to address identified deficiencies in infrastructure in Alaska and encourages the Army to pursue this initiative and provide biannual reports to the Committees on Appropriations of both Houses of Congress on its progress.

Range Expansion.— Recognizing the concern that the Army lacks adequate testing and range space to test new, increased range and capacity fires, and that it is currently in discussions with Yuma Proving Grounds to provide additional capability for testing, the agreement encourages the Army to continue this planning and propose necessary resources in future budgets to support this expansion.

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

The agreement provides \$2,449,632,000 for "Military Construction, Navy and Marine Corps", which is \$356,111,000 below the budget request. Within this amount, the agreement provides \$178,715,000 for study, planning, design, architect and engineer services. The agreement also provides an additional \$11,000,000 above the request for planning and design for child development centers.

Fire and Emergency Services.—There is continued concern about the current state of fire and emergency services facilities at installations across the country. Installations such as Naval Support Activity Bethesda operate fire stations built more than 70 years ago and are unable to be modified to accommodate modern vehicles and fire trucks or provide the appropriate livable quarters. Many of the stations lack the appropriate fire suppression systems therefore rendering them unusable. The Department of the Navy is directed to plan and program sufficient funding to address fire and emergency services shortfalls in its fiscal year 2021-2025 future years defense program.

Navy Pier Replacement Master Plan.—To address concerns that the Navy has not properly synchronized or prioritized pier replacement projects the agreement directs the Secretary of the Navy to provide to the congressional defense committees a report no later than 90 days after enactment of this Act on pier replacement projects in the fiscal years defense plan for 2021-2025.

Naval Shipyard Modernization.—The agreement supports the Department's Shipyard Infrastructure Optimization Plan (SIOP) submitted to Congress in February 2018. The Committees continue to believe the Navy's assessment of public shipyard dry dock capacity is particularly important, as it identifies 68 deferred maintenance availabilities under the status quo, 67 of which are restored upon making the public shipyard dry dock investments within the timeframe recommended by the plan. Accordingly, the Secretary of the Navy is urged to prioritize the timely funding of public shipyard infrastructure, and in particular dry dock and shore infrastructure necessary to support critical maintenance of surface and submarine fleets by public shipyards.

The SIOP also includes ongoing feasibility assessments on new concepts to improve shipyard maintenance efficiency. The Committees expect the Navy to continue to assess these new concepts

without delaying construction improvements at the public shipyards for which Congress has already appropriated funding. As such, the Committees are disappointed that the Navy cancelled for a second time a project requested and appropriated for that would construct a dry dock waterfront facility (P214) prior to providing a realistic plan to address urgent safety issues and meet Pacific Fleet maintenance requirements. The agreement directs the Secretary of the Navy to develop a cost estimate for its dry dock production facility (DDPF) concept, and to provide a report within 90 days of enactment of this Act on the feasibility of programming and constructing the lead DDPF at Pearl Harbor Naval Shipyard as a replacement for P214. The agreement also directs the Secretary of the Navy to include in such report the planned sustainment, restoration, and modernization measures that will be undertaken to mitigate the effect of a further delayed replacement facility.

New Platforms and Weapons Systems.—There is concern that the Department of the Navy's process to identify, plan, and budget for requirements to provide adequate shore facilities and infrastructure to support the deployment of new weapons systems is flawed and that projects requested by the Department do not include all facility and infrastructure requirements needed to support the weapons systems, leading to the need to alter the scope of the project or reprogram already scarce funds. Therefore, the agreement directs the Secretary of the Navy to provide a report within 180 days of enactment of this Act on the Department's processes and timelines for identifying the full range of infrastructure and range requirements associated with the life cycle support for major weapons systems, prior to the programming of those systems for procurement. Specifically, the report should address 1) the Department's processes and timelines associated with incorporating those requirements into the program of record, periodic reviews, and ultimately into annual budget submissions; 2) the review and evaluation of the risk associated with not funding certain requirements, to include the assessment of the costs of workarounds; 3) how, when, and to what extent organizations in the Department responsible for the management of facilities and shore infrastructure are incorporated into the process of identifying requirements and developing budget input prior to the fielding of new equipment; 4) the process to ensure that budget justification and periodic program reviews include work needed to provide adequate infrastructure, utilities, and other systems needed to support the weapons systems; and 5) any impediments in law or policy that impact the Department's ability to make decisions about infrastructure investments associated with major weapons system procurements.

MILITARY CONSTRUCTION, AIR FORCE

The agreement provides \$1,687,230,000 for "Military Construction, Air Force", which is \$492,000,000 below the budget request. Within this amount, the agreement provides \$153,148,000 for study, planning, design, architect and engineer services. The agreement also provides an additional \$11,000,000 above the request for planning and design for child development centers.

Defense Laboratory Modernization Pilot Program.—The agreement includes an additional \$111,000,000 to support three Air Force laboratories located at Edwards AFB, Eglin AFB and Nellis AFB.

Air Force Ballistic Missile Facilities.—There is concern about the Air Force's decision to defer missile alert facility (MAF) recapitalization until a Ground Based Strategic Deterrent (GBSD) design solution has matured. While it is not responsible to construct facilities that could soon be obsolete, the Air Force should more thoroughly examine whether recapitalization of MAFs is wholly incompatible with future GBSD design. The agreement urges the Air Force to invest sufficiently in the human component of the legacy weapons system and ensure adequate funding for MAF sustainment, and recapitalization, as necessary.

The agreement also recognizes the importance of the Weapons Generation Facility (WGF) modernization program but remains concerned about execution delays, cost overruns, and the impact to follow on projects, which may experience similar challenges. The agreement encourages the Air Force to continue to follow its revised plan for construction and upgrades to the WGF enterprise and to provide quarterly briefings to update the Committees on status, requirements changes, and timelines for current and future projects associated with the WGF modernization program.

Corrosion Control and Painting Facilities.— There is concern that the Air Force may not have adequate corrosion control and painting facilities to support the RQ–4 aircraft. For example, at Grand Forks Air Force Base, aircraft painting is contracted out due to a lack of facilities that can support these capabilities. Therefore, the agreement directs the Secretary of the Air Force to report within 90 days of enactment of this Act on its capacity to perform corrosion control and painting activities for the RQ–4 aircraft, the outstanding infrastructure requirements needed to support these efforts, and whether these

requirements can be met with facility sustainment, restoration, and modernization funding or military construction.

MILITARY CONSTRUCTION, DEFENSE-WIDE

(INCLUDING TRANSFER OF FUNDS)

The agreement provides \$2,362,529,000 for "Military Construction, Defense-Wide", which is \$141,661,000 below the budget request. Within this amount, the agreement provides \$298,655,000 for study, planning, design, architect and engineer services.

Energy Resilience and Conservation Investment Program (ERCIP).—The agreement provides \$232,630,000 for ERCIP, an increase of \$82,630,000 above the budget request to fund seven unfunded requirements of the program for energy resilience. Also, an additional \$13,300,000 is provided under the Defense-Wide planning and design account specifically for ERCIP. The Secretary of Defense is directed to submit to the congressional defense committees a spend plan for the additional ERCIP funds, to include the planning and design funds, no later than 30 days after enactment of this Act.

Renewable Energy Systems, Energy Conservation, and Energy Policy.—The agreement supports the Department's efforts to improve energy resilience, improve mission assurance, save energy, and reduce energy costs. DOD must continue to increase the integration of alternative energy sources, particularly through renewable sources at all military facilities and installations. The Committees expect DOD to follow all directives provided in House Report 116-63 regarding Renewable Energy Systems, Energy Conservation, and Energy Policy.

Fuel Storage Assurance.—The agreement recognizes the important role that assured access to adequate fuel has on the Joint Force's readiness and the challenges the Defense Logistics Agency will face funding fuel storage requirements from within its existing military construction account that accommodate future force structure and posture requirements, environmental regulations, and other changes affecting the Joint Force's fuel needs. No later than 180 days after enactment of this Act, the agreement directs the Secretary of Defense to provide a report assessing the feasibility of meeting future fuel storage infrastructure requirements in DOD's planning, programming, and budgeting process, using a Joint Force funding construct.

MILITARY CONSTRUCTION, ARMY NATIONAL GUARD

The agreement provides \$210,819,000 for "Military Construction, Army National Guard", which is the same as the budget request. Within this amount, the agreement provides \$20,469,000 for study, planning, design, architect and engineer services.

Readiness Center Transformation Master Plan.—The Army National Guard (ARNG) should continue to dedicate funding to implement the Readiness Center Transformation Master Plan. The Committees urge the Army and ARNG leadership to sufficiently budget for military construction so that sustained investment in Readiness Center transformation does not result in severely neglected operational facilities across the remaining infrastructure enterprise.

Regional Training Institutes.-- The Committees recognize the importance of Regional Training Institutes (RTI) across the country for the readiness of ARNG and are concerned about the lack of infrastructure to support the mission of the RTIs. For example, the RTI at Fort Hood is lacking sufficient facilities to provide the proper training to achieve optimum readiness. The Committees urge the Department of Defense to prioritize facilities for this important and vital mission of ARNG and Army Reserve.

National Guard Training Center.--The Committees recognize the importance of the National Guard Texas Training Center, which has been in development since 2010 and has had execution delays. The Committees recognize that the Texas Training Center remains a high priority and the Texas Army National Guard shall continue its efforts to establish the Center. The agreement directs the Director of the Army National Guard to provide a progress report to the congressional defense committees no later than 90 days after enactment of this Act.

MILITARY CONSTRUCTION, AIR NATIONAL GUARD

The agreement provides \$164,471,000 for "Military Construction, Air National Guard", which is \$1,500,000 below the budget request. Within this amount, the agreement provides \$17,000,000

for study, planning, design, architect and engineer services.

MQ-9 Facilities.— Some Air National Guard MQ-9 units will require new operations facilities in the coming years to be able to continue executing the MQ-9 mission. The National Guard Bureau should continue to prioritize funding for necessary construction projects in future budget requests to avoid unnecessary risk to MQ-9 operations.

MILITARY CONSTRUCTION, ARMY RESERVE

The agreement provides \$60,928,000 for "Military Construction, Army Reserve", which is the same as the budget request. Within this amount, the agreement provides \$6,000,000 for study, planning, design, architect and engineer services.

MILITARY CONSTRUCTION, NAVY RESERVE

The agreement provides \$54,955,000 for "Military Construction, Navy Reserve", which is the same as the budget request. Within this amount, the agreement provides \$4,780,000 for study, planning, design, architect and engineer services.

MILITARY CONSTRUCTION, AIR FORCE RESERVE

The agreement provides \$59,750,000 for "Military Construction, Air Force Reserve", which is the same as the budget request. Within this amount, the agreement provides \$4,604,000 for study, planning, design, architect and engineer services.

NORTH ATLANTIC TREATY ORGANIZATION SECURITY INVESTMENT PROGRAM

The agreement provides \$172,005,000 for the "North Atlantic Treaty Organization Security Investment Program", an increase of \$27,965,000 above the budget request.

DEPARTMENT OF DEFENSE BASE CLOSURE ACCOUNT

The agreement provides \$398,526,000 for the "Department of Defense Base Closure Account", which is \$120,000,000 above the budget request.

The agreement provides an additional \$60,000,000 for the Navy to accelerate environmental remediation at installations closed under previous Base Closure and Realignment rounds. Furthermore, the Navy shall provide to the Committees a spend plan for these additional funds no later than 60 days after enactment of this Act.

Perfluorooctane Sulfonate (PFOS) and Perfluorooctanoic Acid (PFOA).—The agreement provides an additional \$60,000,000 above the budget request to address PFOS and PFOA cleanup. The Secretary of Defense is directed to submit a spend plan no later than 60 days after enactment of this Act regarding the use of these additional funds.

The Committees are concerned about the extent of PFOS/PFOA contamination at U.S. military installations. While this division only covers military installations funded through the Base Realignment and Closure (BRAC) account that are affected by PFOS/PFOA, the issue is not limited to the Department of Defense and affects many communities across the Nation. The Department is directed to engage the Environmental Protection Agency as it evaluates the need for a maximum containment level, as provided by the Safe Drinking Water Act, as well as designate these chemicals as hazardous under the Comprehensive Environmental Response, Compensation, and Liability Act, and to keep the Committees apprised of new findings of PFOS/PFOA at BRAC sites.

DEPARTMENT OF DEFENSE

FAMILY HOUSING

Items of Interest

Housing Support and Management Costs.--The agreement also includes section 131 under Administrative Provisions that provides an additional \$140,800,000 above the budget request for Family Housing Support and Management Costs to increase the Services' ability to provide oversight and management, and personnel to track current and future issues that may affect military family housing. The additional funds were identified by the Services on the Unfunded Priority list submitted to Congress by the Service Secretaries.

Military Privatized Housing.—Quality military housing is a key component of military readiness and quality of life, and the health of our servicemembers and their families is of the utmost importance. Substandard living conditions negatively affect the ability to recruit and retain servicemembers to the detriment of U.S. national security interests. Among other things, House Report 116-63 directed the Services to establish and maintain procedures for ensuring appropriate response and remediation efforts to safety and health threats in military housing managed by private sector property management companies. DOD is expected to comply with all the directives included in House Report 116-63.

FAMILY HOUSING CONSTRUCTION, ARMY

The agreement provides \$141,372,000 for "Family Housing Construction, Army", which is the same as the budget request.

FAMILY HOUSING OPERATION AND MAINTENANCE, ARMY

The agreement provides \$357,907,000 for "Family Housing Operation and Maintenance, Army", which is the same as the budget request.

FAMILY HOUSING CONSTRUCTION, NAVY AND MARINE CORPS

The agreement provides \$47,661,000 for "Family Housing Construction, Navy and Marine Corps", which is the same as the budget request.

FAMILY HOUSING OPERATION AND MAINTENANCE, NAVY AND MARINE CORPS

The agreement provides \$317,870,000 for "Family Housing Operation and Maintenance, Navy and Marine Corps", which is the same as the budget request.

FAMILY HOUSING CONSTRUCTION, AIR FORCE

The agreement provides \$103,631,000 for "Family Housing Construction, Air Force", which is the same as the budget request.

FAMILY HOUSING OPERATION AND MAINTENANCE, AIR FORCE

The agreement provides \$295,016,000 for "Family Housing Operation and Maintenance, Air Force", which is the same as the budget request.

FAMILY HOUSING OPERATION AND MAINTENANCE, DEFENSE-WIDE

The agreement provides \$57,000,000 for "Family Housing Operation and Maintenance, Defense-Wide", which is the same as the budget request.

DEPARTMENT OF DEFENSE FAMILY HOUSING IMPROVEMENT FUND

The agreement provides \$3,045,000 for the "Department of Defense Family Housing Improvement Fund", which is the same as the budget request.

DEPARTMENT OF DEFENSE MILITARY UNACCOMPANIED HOUSING IMPROVEMENT FUND

The agreement provides \$500,000 for the "Department of Defense Military Unaccompanied Housing Improvement Fund", which is the same as the budget request.

ADMINISTRATIVE PROVISIONS

(Including Transfers and Rescissions of Funds)

The agreement includes section 101 limiting the use of funds under a cost-plus-a-fixed-fee contract.

The agreement includes section 102 allowing the use of construction funds in this title for hire of passenger motor vehicles.

The agreement includes section 103 allowing the use of construction funds in this title for advances to the Federal Highway Administration for the construction of access roads.

The agreement includes section 104 prohibiting construction of new bases in the United States without a specific appropriation.

The agreement includes section 105 limiting the use of funds for the purchase of land or land easements that exceed 100 percent of the value.

The agreement includes section 106 prohibiting the use of funds, except funds appropriated in this title for that purpose, for family housing.

The agreement includes section 107 limiting the use of minor construction funds to transfer or relocate activities.

The agreement includes section 108 prohibiting the procurement of steel unless American producers, fabricators, and manufacturers have been allowed to compete.

The agreement includes section 109 prohibiting the use of construction or family housing funds to pay real property taxes in any foreign nation.

The agreement includes section 110 prohibiting the use of funds to initiate a new installation overseas without prior notification.

The agreement includes section 111 establishing a preference for American architectural and engineering services for overseas projects.

The agreement includes section 112 establishing a preference for American contractors in United States territories and possessions in the Pacific and on Kwajalein Atoll and in countries bordering the Arabian Gulf.

The agreement includes section 113 requiring congressional notification of military exercises when construction costs exceed \$100,000.

The agreement includes section 114 allowing funds appropriated in prior years for new projects authorized during the current session of Congress.

The agreement includes section 115 allowing the use of expired or lapsed funds to pay the cost of supervision for any project being completed with lapsed funds.

The agreement includes section 116 allowing military construction funds to be available for five years.

The agreement includes section 117 allowing the transfer of funds from Family Housing Construction accounts to the Family Housing Improvement Program.

The agreement includes section 118 allowing transfers to the Homeowners Assistance Fund.

The agreement includes section 119 limiting the source of operation and maintenance funds for flag and general officer quarters and allowing for notification by electronic medium. The provision also requires an annual report on the expenditures of each quarters.

The agreement includes section 120 extending the availability of funds in the Ford Island Improvement Account.

The agreement includes section 121 allowing the transfer of expired funds to the Foreign Currency Fluctuations, Construction, Defense account.

The agreement includes section 122 allowing for the reprogramming of construction funds among projects and activities subject to certain criteria.

The agreement includes section 123 prohibiting the obligation or expenditure of funds provided to the Department of Defense for military construction for projects at Arlington National Cemetery.

The agreement includes section 124 providing additional construction funds for various Military Construction accounts.

The agreement includes section 125 rescinding funds from prior Appropriation Acts from various accounts.

The agreement includes section 126 defining the congressional defense committees.

The agreement includes section 127 prohibiting the use of funds in this Act to close or realign Naval Station Guantanamo Bay, Cuba. The provision is intended to prevent the closure or realignment of the installation out of the possession of the United States and maintain the Naval Station's longstanding regional security and migrant operations missions.

The agreement includes section 128 restricting funds in the Act to be used to consolidate or relocate any element of Air Force Rapid Engineer Deployable Heavy Operational Repair Squadron Engineer until certain conditions are met.

The agreement includes section 129 directing all amounts appropriated to "Military Construction, Army", "Military Construction, Navy and Marine Corps", "Military Construction, Air

Force", and "Military Construction, Defense-Wide" accounts be immediately available and allotted for the full scope of authorized projects.

The agreement includes section 130 providing additional funds for planning and design, for improving military installation resilience.

The agreement includes section 131 providing additional funds for Family Housing Support and Management Costs.

(Insert) (19a-0)

	BUDGET REQUEST	FINAL BILL
ALABAMA		
ARMY REDSTONE ARSENAL		
AIRCRAFT AND FLIGHT EQUIPMENT BUILDING	38,000	38,000
FOLEY NATIONAL GUARD READINESS CENTER	12,000	12,000
TOTAL, ALABAMA		50,000
ALASKA		
AIR FORCE		
EIELSON AFB F-35 AME STORAGE FACILITY	8,600	8,600
TOTAL, ALASKA	8,600	8,600
ARIZONA		
YUMA HANGAR 95 RENOVATION AND ADDITION		90,160
TOTAL, ARIZONA	90,160	
ARKANSAS		
AIR FORCE		
LITTLE ROCK AFB C-130H/J FUSELAGE TRAINER FACILITY	47 , 000	
TOTAL, ARKANSAS		47,000
CALIFORNIA		
CAMP PENDLETON I MEF CONSOLIDATED INFORMATION CENTER	113,869	57,000
62 AREA MESS HALL AND CONSOLIDATED WAREHOUSE	71,700	71,700
CHINA LAKE RUNWAY AND TAXIWAY EXTENSION	64,500	64,500
CORONADO NAVY V-22 HANGAR SAN DIEGO	86,830	86,830
PIER 8 REPLACEMENT (INC 2)	59,353	59,353
AMMUNITION PIER TRAVIS AFB	95,310	95,31D
ALERT FORCE COMPLEX	64,000	64,000
EDWARDS AIR FORCE BASE JOINT SIMULATION ENVIRONMENT FACILITY		43,000
KC-46A ALTER B181/B185/B187 SQUAD OPS/AMU	6,600	6,600
KC-46A REGIONAL MAINTENANCE TRAINING FACILITY	19,500	19,500
EFENSE-WIDE		
BEALE AFB HYDRANT FUEL SYSTEM REPLACEMENT CAMP PENDLETON	33,700	33,700
AMBULATORY CARE CENTER/DENTAL CLINIC REPLACEMENT	17,700	17,700
CAMP ROBERTS AUTOMATED MULTIPURPOSE MACHINE GUN RANGE		12,000
TOTAL, CALIFORNIA	645,062	631,193



SCAN COPY

(Amounts in thousands)		
	BUDGET REQUEST	FINAL BILL
COLORADO		
ARMY		
AIR FORCE	71,000	71,000
SCHRIEVER AFB CDNSOLIDATED SPACE OPERATIONS FACILITY	14B,000	60,000
TOTAL, COLORADO	219,000	
CONNECTICUT		
NAVY NEW LONDON		
	72,260	72,260
TOTAL, CONNECTICUT		
DELAWARE		
ARMY RESERVE		
NEWARK ARMY RESERVE CENTER/BMA		
 TOTAL, DELAWARE	21,000	21,000
DISTRICT OF COLUMBIA		
NAVY		
NAVAL OBSERVATORY MASTER TIME CLOCKS AND OPERATIONS FACILITY (INC 2)		75,600
TOTAL, DISTRICT OF COLUMBIA	75,600	75,600
FLORIDA		
JACKSONVILLE		
TARGETING & SURVEILLANCE SYSTEMS SUPPLY FACILITY AIR FORCE	32,420	32,420
EGLIN AFB CYBERSPACE TEST FACILITY		38,000
DEFENSE-WIDE		,
EGLIN AFB SOF COMBINED SQUADRON OPS FACILITY	16,500	16,500
HURLBURT FIELD SOF MAINTENANCE TRAINING FACILITY	18,950	18,950
SOF AMU AND WEAPONS HANGAR	72,923	72,923
SOF COMBINED SQUADRON OPERATIONS FACILITY	16,513	16,513
KEY WEST SOF WATERCRAFT MAINTENANCE FACILITY	16,000	
 TOTAL, FLORIDA	173,306	211,306
GEORGIA		
ARMY		
FORT GORDON		
CYBER INSTRUCTIONAL FACILITY (ADMIN/COMMAND) HUNTER ARMY AIRFIELD		70,000
AIRCRAFT MAINTENANCE HANGARAIR NATIONAL GUARD	62,000	62,000
SAVANNAH/HILTON HEAD IAP	24, 222	24, 225
CONSOLIDATED JOINT AIR DOMINANCE HANGAR/SHOPS	24,000	24,000
ROBINS AFB CONSOLIDATED MISSION COMPLEX, PHASE 3	43,000	43,000
TOTAL, GEORGIA	236 , 000	199,000



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	BUDGET REQUEST	FINAL BILL
HAWAII		
ARMY		
FORT SHAFTER COMMAND AND CONTROL FACILITY (INC 5)	60,000	60,000
NAVY KANEOHE BAY		
BACHELOR ENLISTED QUARTERS	134,050	134,050
MAGAZINE CONSOLIDATION, PHASE 1	53,790	53,790
JOINT BASE PEARL HARBOR-HICKAM SOF UNDERSEA OPERATIONAL TRAINING FACILITY	67,700	67,700
TOTAL, HAWAII	315,540	315,540
IDAHO		
ARMY NATIONAL GUARD		
ORCHARD TRAINING AREA RAILROAD TRACKS	29,000	29,000
TOTAL, IDAHO	29,000	
ILLINOIS		
AIR FORCE SCOTT AFB		
JOINT OPERATIONS AND MISSION PLANNING CENTER	100,000	100,000
TOTAL, ILLINOIS		
KENTUCKY		
ARMY FORT CAMPBELL		
GENERAL PURPOSE MAINTENANCE SHOP	51,000	51,D00
AUTOMATED INFANTRY PLATOON BATTLE COURSE	7,1D0	7,100
EASEMENTS	3,200	3,200
TOTAL, KENTUCKY	61,300	
LOUISIANA		
NAVY RESERVE		
NEW ORLEANS ENTRY CONTROL FACILITY UPGRADES	25 , 260	25,260
TOTAL, LOUISIANA		
MARYLAND		
AIR FORCE		
JOINT BASE ANDREWS PRESIDENTIAL AIRCRAFT RECAP COMPLEX, (INC 3)	86,000	B6,000
DEFENSE-WIDE BETHESDA NAVAL HOSPITAL MEDCEN ADDITION/ALTERATION (INC 3)	96,900	33,000
FORT DETRICK MEDICAL RESEARCH ACQUISITION BUILDING	27,846	27,846
FORT MEADE NSAW RECAPITALIZE BUILDING #3 (INC 2) ARMY NATIONAL GUARD	426,000	426,000
HAVRE DE GRACE COMBINED SUPPORT MAINTENANCE SHOP	12,000	12,000
TOTAL, MARYLAND	648,746	584,846







	BUDGET REQUEST	FINAL BILL
MASSACHUSETTS		
ARMY		
SOLDIER SYSTEMS CENTER NATICK HUMAN ENGINEERING LAB AIR FORCE	50,000	50,000
HANSCOM AFB MIT-LINCOLN LABORATORY (WEST LAB CSL/MIF) (INC 2). ARMY NATIONAL GUARO	135,000	135,000
CAMP EOWARDS AUTOMATED MULTIPURPOSE MACHINE GUN RANGE	9,700	
TOTAL, MASSACHUSETTS		
MICHIGAN		
ARMY DETROIT ARSENAL		
SUBSTATION	24,000	24,000
TOTAL, MICHIGAN	24,000	24,000
MINNESOTA		
ARMY NATIONAL GUARD		
NEW ULM NATIONAL GUARD VEHICLE MAINTENANCE SHOP	11,200	11,200
TOTAL, MINNESOTA	11,200	11,200
MISSISSIPPI		
DEFENSE-WIDE		
COLUMBUS AFB FUEL FACILITIES REPLACEMENT ARMY NATIONAL GUARD	16,800	16,800
CAMP SHELBY AUTOMATED MULTIPURPOSE MACHINE GUN RANGE	8,100	
TOTAL, MISSISSIPPI		
MISSOURI		
DEFENSE-WIDE		
FORT LEONARD WOOD HOSPITAL REPLACEMENT (INC 2)	50,000	50,000
ST LOUIS NEXT NGA WEST (N2W) COMPLEX PHASE 2, (INC 2) ARMY NATIONAL GUARD SPRINGFIELD	218,800	218,800
NATIONAL GUARD READINESS CENTER AIR NATIONAL GUARD ROSECRANS MEMORIAL AIRPORT	12,000	12,000
C-130 FLIGHT SIMULATOR FACILITY	9,500	
TOTAL, MISSOURI		







	BUDGET REQUEST	FINAL BILL
MONTANA		
AIR FORCE MALMSTROM AFB		
WEAPONS STORAGE AND MAINTENANCE FACILITY	235,000	
TOTAL, MONTANA		
NEBRASKA		
ARMY NATIONAL GUARD BELLEVUE		
NATIONAL GUARD READINESS CENTER	29,000	
TOTAL, NEBRASKA		
NEVADA		
AIR FORCE		
NELLIS AFB 365TH ISR GROUP FACILITY	57.000	57,000
F-35A MUNITIONS ASSEMBLY CONVEYOR FACILITY		8,200
JOINT SIMULATION ENVIRONMENT FACILITY		30,000
TOTAL, NEVADA	65,200	95,200
NEW HAMPSHIRE		
ARMY NATIONAL GUARD		
CONCORD NATIONAL GUARD READINESS CENTER	5,950	
TOTAL, NEW HAMPSHIRE		5,950
NEW MEXICO		
AIR FORCE		
KIRTLAND AFB COMBAT RESCUE HELICOPTER SIMULATOR (CRH) ADAL	15 500	15,500
UH-1 REPLACEMENT FACILITY	15,500 22,400	22,400
TOTAL, NEW MEXICO	37,900	37,900
NEW YORK		
ARMY		
FORT DRUM UNMANNED AERIAL VEHICLE HANGAR	23,000	23,000

23,000

23,000

TOTAL, NEW YORK.....







	BUDGET REQUEST	FINAL BILL
NORTH CAROLINA		
ARMY		
FORT BRAGG		
DINING FACILITY	12,500	12,500
NAVY		
CAMP LEJEUNE		
2ND RADIO BN COMPLEX, PHASE 2	25,650	25,650
ACV-AAV MAINTENANCE FACILITY UPGRADES	11,570	11,570
10TH MARINES HIMARS COMPLEX	35,110	35,110
II MEF OPERATIONS CENTER REPLACEMENT	122,200	60,000
2ND MARDIV/2ND MLG OPS CENTER REPLACEMENT	60,130	60,130
CHERRY POINT MARINE CORPS AIR STATION		
AIRCRAFT MAINTENANCE HANGAR	73,970	73,970
F-35 TRAINING AND SIMULATOR FACILITY	53,230	53,230
ATC TOWER AND AIRFIELD OPERATIONS	61,340	61,340
FLIGHTLINE UTILITY MODERNIZATION	51,860	51,860
NEW RIVER		
CH-53K CARGO LOADING TRAINER	11,320	11,320
EFENSE-WIDE		
FORT BRAGG		
SOF HUMAN PLATFORM-FORCE GENERATION FACILITY	43,00D	43,000
SOF ASSESSMENT AND SELECTION TRAINING COMPLEX	12,103	12,103
SOF OPERATIONS SUPPORT BUILDING	29,000	29,000
CAMP LEJEUNE		
SOF MARINE RAIDER REGIMENT HEADQUARTERS	13,400	13,400
TOTAL, NORTH CAROLINA	616,383	554,183
NORTH DAKOTA		
AIR FORCE		
MINOT AFB		
HELO/TRF OPS/AMU FACILITY	5,500	5,500
TOTAL, NORTH DAKOTA	5,500	5,500
OHIO		
AIR FORCE		
WRIGHT-PATTERSON AFB		
ADAL INTELLIGENCE PRODUCTION COMPLEX		
(NASIC) (INC 2)	120 900	120 900

ADAL INTELLIGENCE PRODUCTION COMPLEX		
(NASIC)(INC 2)	120,900	120,900
TOTAL, OHIO	120,900	120,900







	BUDGET REQUEST	FINAL BILL
OKI AHOMA		
ARMY		
FORT SILL ADV INDIVIDUAL TRAINING BARRACKS CPLX, PHASE 2 DEFENSE-WIDE TULSA IAP	73,000	73,000
FUELS STORAGE COMPLEX		18,900
TOTAL, OKLAHOMA		
PENNSYLVANIA		
ARMY		
CARLISLE BARRACKS GENERAL INSTRUCTION BUILDING ARMY NATIONAL GUARD	98,000	60,000
MOON TOWNSHIP COMBINED SUPPORT MAINTENANCE SHOP	23,000	
TOTAL, PENNSYLVANIA		
RHODE ISLAND		
DEFENSE-WIDE		
QUONSET STATE AIRPORT FUELS STORAGE COMPLEX REPLACEMENT	11,600	11,600
TOTAL, RHODE ISLAND		
SOUTH CAROLINA		
ARMY FORT JACKSON RECEPTION COMPLEX, PHASE 2 DEFENSE-WIDE	54,000	54,000
JOINT BASE CHARLESTON MEDICAL CONSOLIDATED STORAGE & DISTRIBUTION CENTER		
TOTAL, SOUTH CAROLINA	B7 , 300	87,300
SOUTH DAKOTA		
DEFENSE-WIDE		
ELLSWORTH AFB HYDRANT FUEL SYSTEM REPLACEMENT	24,800	24 , 800
TOTAL, SOUTH DAKOTA		
TEXAS		
CORPUS CHRISTI ARMY DEPOT	80.000	20.000
POWERTRAIN FACILITY (MACHINE SHOP) FORT HOOD, TEXAS	86,000	86,000
BARRACKS	32,000	32,000
JOINT BASE SAN ANTONIO		74 000
BMT RECRUIT DORMITORY 8		74,000 69,000
T-XA DAL GROUND BASED TRNG SYS (GBTS) SIM		9,300
T-XMX TRNG SYS CENTRALIZED TRAINING FACILITY	19,000	19,000
TOTAL, TEXAS	325,300	289,300







MILITARY CONSTRUCTION

(Amounts in thousands)

(Amountes in thousands)		
	BUDGET REQUEST	
UTAH		
IR FORCE		
HILL AFB	108 000	40 000
GBSD MISSION INTEGRATION FACILITY	6,500	6,500
AVY		
HILL AFB	50 500	50 500
D5 MISSILE MOTOR RECEIPT/STORAGE FACILITY (INC 2).	50,520	50,520
	165,020	
VIRGINIA		
FORT BELVOIR, VA		
SECURE OPERATIONS AND ADMIN FACILITY	60,000	60,000
JOINT BASE LANGLEY-EUSTIS ADV INDIVIDUAL TRAINING BARRACKS COMPLEX, PHASE 4	55,000	55,000
AVY	33,000	55,000
NORFOLK		
MARINER SKILLS TRAINING CENTER	79,100	79,100
PORTSMOUTH DRY DOCK FLOOD PROTECTION IMPROVEMENTS	48,930	48,930
QUANTICO		
WARGAMING CENTER	143,350	70,000
EFENSE-WIDE DAM NECK		
	12,770	12,770
DEF DISTRIBUTION DEPOT RICHMOND		
OPERATIONS CENTER, PHASE 2	98,800	98,800
JOINT EXPEDITIONARY BASE LITTLE CREEK - STORY SOF NSWG-10 OPERATIONS SUPPORT FACILITY	32,600	32,600
SOF NSWG2 JSOTF OPERATIONS TRAINING FACILITY	32,600 13,004	13,004
PENTAGON		
BACKUP GENERATOR	8,670 20,132	8,670 20,132
	20,132	
TOTAL, VIRGINIA	572,356	499,006
WASHINGTON		
WASHINGION		
JOINT BASE LEWIS-MCCHORD		
INFORMATION SYSTEMS FACILITY	46,000	46,000
AVY BREMERTON		
DRY DOCK 4 AND PIER 3 MODERNIZATION	51,010	51,010
KEYPORT		
UNDERSEA VEHICLE MAINTENANCE FACILITY	25,050	25,050
IR FORCE FAIRCHILD AFB		
CONSOLIDATED TFI BASE OPERATIONS	31,000	31,000
FENSE-WIDE		
JOINT BASE LEWIS-MCCHORD SOF 22 STS OPERATIONS FACILITY	47,700	47,700
RMY NATIONAL GUARD		47,700
RICHLAND		
NATIONAL GUARD READINESS CENTER	11,400	
TOTAL, WASHINGTON	212,160	212,160
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MILITARY CONSTRUCTION

	BUDGET REQUEST	FINAL BILL
WISCONSIN		
DEFENSE-WIDE GENERAL MITCHELL IAP		
POL FACILITIES REPLACEMENT	25,900	25,900
AIR NATIONAL GUARD		
TRUAX FIELD F-35 SIMULATOR FACILITY	14,000	14,000
FIGHTER ALERT SHELTERS	20,000	20,000
ARMY RESERVE		
FORT MCCOY	35,000	25 000
TRANSIENT TRAINING BARRACKS	25,000	
TOTAL, WISCONSIN		84,900
WYOMING		
AIR FORCE		
F.E. WARREN AFB CONSOLIDATED HELO/TRF OPS/AMU AND ALERT FACILITY	18,100	18,100
	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • •
TOTAL, WYOMING	18,100	18,100
CONUS CLASSIFIED		
DEFENSE-WIDE		
CLASSIFIED LOCATION BATTALION COMPLEX, PHASE 3	82 200	82 200
	02,200	
TOTAL, CONUS CLASSIFIED	82,200	82,200
AUSTRALIA		
AIR FORCE		
TINDAL APR-RAAF TINDAL/BULK STORAGE TANKS	59,000	59,000
APR - RAAF TINDAL/EARTH COVERED MAGAZINE	11,600	11,600
TOTAL, AUSTRALIA	70,600	70,600
BAHRAIN ISLAND		
NAVY SW ASIA		
SW ASIA ELECTRICAL SYSTEM UPGRADE	53,360	53,360
TOTAL, BAHRAIN ISLAND	53,360	53,360
CYPRUS		
AIR FORCE		
RAF AKROTIRI NEW DORMITORY FOR ONE ERS	27 000	27,000
TOTAL, CYPRUS	27,000	27,000
GERMANY		
DEFENSE-WIDE		
GEILENKIRCHEN AFB AMBULATORY CARE CENTER/DENTAL CLINIC	30 470	20 470
	30,479	30,479
TOTAL, GERMANY	30,479	30,479







	BUDGET REQUEST	FINAL BILL
GUAM		
NAVY		
JOINT REGION MARIANAS		
BACHELOR ENLISTED QUARTERS H	164,100	64,100
EOD COMPOUND FACILITIES	61,900	61,900
MACHINE GUN RANGE (INC 2)	91,287	91,287
AIR FORCE JOINT REGION MARIANAS		
MUNITIONS STORAGE IGLOOS III	65,000	65,000
DEFENSE-WIDE	03,000	65,000
JOINT REGION MARIANAS		
XRAY WHARF REFUELING FACILITY	19,200	19,200
TOTAL, GUAM	401,487	301,487
HONDURAS		
ARMY SOTD CANO AB		
	34,000	34,000
TOTAL, HONDURAS	34,000	
ITALY		
NAVY		
COMMUNICATIONS STATION	77,400	77,400
TOTAL, ITALY	77,400	77,400
JAPAN		
NAVY		
IWAKUNI	45 070	45 070
VTOL PAD - SOUTH	15,870	15,870
YOKOSUKA PIER 5 (BERTHS 2 AND 3)	174,692	100,000
AIR FORCE	174,032	100,000
YOKOTA AB		
FUEL RECEIPT AND DISTRIBUTION UPGRADE	12,400	12,400
DEFENSE-WIDE		
YOKOSUKA		
KINNICK HIGH SCHOOL (INC 2)	130,386	
YOKOTA AB		
BULK STORAGE TANKS PH1	116,305	50,000
PACIFIC EAST DISTRICT SUPERINTENDENT'S OFFICE	20,106	20,106
TOTAL, JAPAN	469,759	
JORDAN		
AIR FORCE		
AZRAQ		
AIR TRAFFIC CONTROL TOWER	24,000	
MUNITIONS STORAGE AREA	42,000	
TOTAL, JORDAN	66,000	







MILITARY CONSTRUCTION

(Amounts in thousands)

	BUDGET REQUEST	FINAL BILL
MARIANA ISLANDS		
TINIAN AIRFIELD DEVELOPMENT, PHASE 1 FUEL TANKS W/ PIPELINE/HYDRANT SYSTEM PARKING APRON	109,000 109,000 98,000	25,000 25,000
TOTAL, MARIANA ISLANDS		
PUERTO RICO		
AIR NATIONAL GUARD LUIS MUNOZ-MARIN IAP COMMUNICATIONS FACILITY CONTINGENCY RESPONSE FACILITY	12,500 37,500	
TOTAL, PUERTO RICO	50,000	
UNITED KINGDOM AIR FORCE ROYAL AIR FORCE LAKENHEATH		
F-35A PGM FACILITY	14,300	14,300
TOTAL, UNITED KINGDOM	14,300	14,300
WORLDWIDE CLASSIFIED		
	52,000	
TOTAL, WORLDWIDE CLASSIFIED	52,000	
NATO SECURITY INVESTMENT PROGRAM	144,040	172,005
BASE REALIGNMENT AND CLOSURE		
DEPARTMENT OF DEFENSE BASE CLOSURE ACCOUNT	278,526	398,526







	BUDGET REQUEST	FINAL BILL
WORLDWIDE UNSPECIFIED		
ARMY HOST NATION SUPPORT PLANNING AND DESIGN MAJOR CONSTRUCTION MINOR CONSTRUCTION	31,000 94,099 211,000 70,600	31,000 105,099 70,600
NAVY PLANNING AND DESIGN MINOR CONSTRUCTION	167,715 81,237	178,715 81,237
AIR FORCE PLANNING AND DESIGN MINOR CONSTRUCTION	142,148 79,682	153,148 79,682
DEFENSE - WIDE CONTINGENCY CONSTRUCTION ENERGY RESILIENCE AND CONSERVATION INVESTMENT DEDCEMM (FECTIO)	10,000 150,000	
PROGRAM (ERCIP) PLANNING AND DESIGN DEFENSE - WIDE ERCIP DESIGN	14,400 10,000	47,400 23,300
DEFENSE HEALTH AGENCY. DEFENSE LOGISTICS AGENCY. DEFENSE EDUCATION ACTIVITY. MISSILE DEFENSE AGENCY.	63,382 27,000 29,679 35,472	63,382 27,000 29,679 35,472
NATIONAL SECURITY AGENCY SPECIAL OPERATIONS COMMAND WASHINGTON HEADQUARTERS SERVICE	15,000 52,532 4,890	
SUBTOTAL, PLANNING AND DESIGN	252,355	298,655
UNSPECIFIED MINOR CONSTRUCTION DEFENSE - WIDE. DEFENSE LEALTH AGENCY. DEFENSE LOGISTICS AGENCY. DEFENSE LOGISTICS AGENCY. THE JOINT STAFF. MISSILE DEFENSE AGENCY. NATIONAL SECURITY AGENCY. SPECIAL OPERATIONS COMMAND. WASHINGTON HEADQUARTERS SERVICE.	3,000 10,000 16,736 8,000 11,770 10,000 3,228 31,464 4,950	
SUBTOTAL, UNSPECIFIED MINOR CONSTRUCTION	99,148	99,148
ARMY NATIONAL GUARD PLANNING AND DESIGN MINOR CONSTRUCTION	20,469 15,000	20,469 15,000
AIR NATIONAL GUARD Planning and design Minor construction	17,000 31,471	17,000 31,471
ARMY RESERVE PLANNING AND DESIGN MINOR CONSTRUCTION	6,000 8,928	6,000 8,928
NAVY RESERVE PLANNING AND DESIGN MINOR CONSTRUCTION	4,780 24,915	4,780 24,915
AIR FORCE RESERVE PLANNING AND DESIGN MINOR CONSTRUCTION	4,604 12,146	4,604 12,146





	BUDGET REQUEST	FINAL BILL
FAMILY HOUSING, ARMY		
PENNSYLVANIA TOBYHANNA ARMY DEPOT FAMILY HOUSING REPLACEMENT CONSTRUCTION (26 UNITS)	19,000	19,000
KOREA CAMP HUMPHREYS FAMILY HOUSING NEW CONSTRUCTION INC 4 (432 UNITS).	83,167	83,167
GERMANY BAUMHOLDER FAMILY HOUSING IMPROVEMENTS (68 UNITS)	29,983	29,983
PLANNING AND DESIGN		
PLANNING AND DESIGN	9,222	9,222
SUBTOTAL, CONSTRUCTION	141,372	141,372
OPERATION AND MAINTENANCE UTILITIES ACCOUNT. MANAGEMENT ACCOUNT. SERVICES ACCOUNT. FURNISHINGS ACCOUNT. MISCELLANEOUS ACCOUNT. LEASING MAINTENANCE OF REAL PROPERTY. HOUSING SUPPORT COSTS.	38,898 10,156 24,027 484 128,938 81,065	
SUBTOTAL, OPERATION AND MAINTENANCE	357,907	357,907
FAMILY HOUSING, NAVY AND MARINE CORPS		
CONSTRUCTION IMPROVEMENTS	41,798	41,798
USMC DPRI/GUAM PLANNING AND DESIGN	2,000	2,000
PLANNING AND DESIGN	3,863	3,863
SUBTOTAL, CONSTRUCTION	47,661	47,661
OPERATION AND MAINTENANCE UTILITIES ACCOUNT. MANAGEMENT ACCOUNT. SERVICES ACCOUNT. FURNISHINGS ACCOUNT. LEASING MAINTENANCE OF REAL PROPERTY. HOUSING SUPPORT COSTS.	50,122 16,647 19,009 151 64,126 82,611	63,229 50,122 16,647 19,009 151 64,126 82,611 21,975
SUBTOTAL, OPERATION AND MAINTENANCE		







BUDGET REQUEST	FINAL BILL

FAMILY HOUSING, AIR FORCE

CONSTRUCTION		
SPANGDAHLEM NEW CONSTRUCTION CONSTRUCTION IMPROVEMENTS.	53,584 46,638	53,584 46,638
PLANNING AND DESIGN	3,409	3,409
SUBTOTAL, CONSTRUCTION	103,631	103,631
OPERATION AND MAINTENANCE	10, 700	40.700
UTILITIES ACCOUNT.	42,732	42,732
MANAGEMENT ACCOUNT	56,022	56,022
SERVICES ACCOUNT	7,770	7,770
FURNISHINGS ACCOUNT	30,283	30,283
MISCELLANEOUS ACCOUNT	2,144	2,144
LEASING	15,768	15,768
MAINTENANCE OF REAL PROPERTY	117,704	117,704
HOUSING SUPPORT COSTS	22,593	22,593
SUBTOTAL, OPERATION AND MAINTENANCE	295,016	295,016
FAMILY HOUSING, DEFENSE-WIDE		
OPERATION AND MAINTENANCE		
NATIONAL SECURITY AGENCY	40	4.0
UTILITIES	13	13
FURNISHING	82	82
LEASING	12,906	12,906
MAINTENANCE OF REAL PROPERTY	32	32
UTILITIES	4,100	4,100
FURNISHINGS	645	645
LEASING.	39,222	39.222
LEASING		39,222
SUBTOTAL, OPERATION AND MAINTENANCE	57,000	57,000
DOD FAMILY HOUSING IMPROVEMENT FUND	3,045	3,045
DOD MILITARY UNACCOMPANIED HOUSING IMPROVEMENT FUND	500	500





MILITARY CONSTRUCTION

BUDGET REQUEST	FINAL BILL
	79,500
	374,529
	288,200
	155,000
	57,000
	24,800
	66,880
	75,000
	-25,000
	140,800
	-45,055
	REQUEST







TITLE II DEPARTMENT OF VETERANS AFFAIRS Items of Special Interest

Notification of Allegations.—Reports of alleged negligence or criminal behavior by VA providers that may have resulted in serious health outcomes raise extreme concerns. In multiple cases, there were warning signs of reckless or illegal behavior that were not reported or acted upon in a timely manner and may have resulted in the death of multiple veterans. Therefore, the bill maintains a provision requiring the Department to develop a plan to reduce the chances that clinical mistakes by VA employees will result in adverse events that require institutional or clinical disclosures, as VA has not adequately addressed the requirement. The agreement directs the Secretary to develop processes and procedures for staff of medical facilities to report concerns to Veterans Integrated Service Network (VISN) and Departmental leaders for awareness and action, as well as procedures for expediting any remedial or follow-up care, an impact analysis, and a communication and education plan for making staff aware of the appropriate protocols. The agreement further directs the Department to report on this effort, as well as VA's recent commitment to retrain all Veterans Health Administration leadership and personnel, to the Committees on Appropriations of both Houses of Congress within 30 days of enactment of this Act.

Blue Water Navy Veterans.—The agreement includes funds to address the personnel, support and Information Technology costs required to implement the Blue Water Navy Vietnam Veterans Act of 2019 (Public Law 116-23) by January 1, 2020. Although the administration refused to submit a formal request for these funds, the Committees appreciate VA's efforts to prepare for this increase in complex cases and to prevent increases in the disability claims backlog.

Transition from Active Duty to Civilian Life.—The Department is encouraged, in consultation with the Departments of Defense and Labor, to partner with community-built networks and non-profit programs, including faith-based programs, that provide wraparound employment and counseling services to veterans and their families, including high-risk veterans, to ensure they have a successful transition to civilian life.

Contract Oversight.—The Department's lack of transparency in the contracting process, including reported incidents of willful misrepresentation of veteran or service-disabled veteran status for the purposes of winning Federal contract set-asides, remains a concern. The agreement directs the Department, in consultation with relevant agency partners, to provide any regulatory or legislative actions that would serve as further disincentives to this fraudulent behavior. Due to concern over the lack of visibility into contractor performance, the agreement requires the Department to submit to the Committees on Appropriations and Veterans' Affairs of both Houses of Congress notification whenever the Secretary provides notice to a contracted service provider that the service provider is failing to meet contractual obligations. At a minimum, the notification should include: (1) an explanation of the reasons for providing such notice; (2) a description of the effect of such failure, including with respect to cost, schedule, and requirements; (3) a description of the actions taken by the Secretary to mitigate such failure; and, (4) a description of the actions taken by the contractor to address such failure.

Use of Authority to Convert Non-Medical Services to Contract Performance by Native Hawaiian Organizations or Indian Tribes.—Section 238 of the Energy and Water, Legislative Branch, and Military Construction and Veterans Affairs Appropriations Act, 2019 (Public Law 115–244) maintained VA's authority to convert activities or functions of VBA, VHA, and NCA to contractor performance by businesses that are at least 51 percent owned by one or more Indian tribes as defined in section 5304(e) of title 25, United States Code, or one or more Native Hawaiian Organizations as defined in section 637(a)(15) of title 15, United States Code. The agreement directs the Department 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 VA's use of this authority to date and its plan for using it in the future.

Discontinued Use of Social Security Numbers.—Section 239 of Public Law 115–244 required the Department to discontinue using Social Security account numbers to identify individuals in all information systems of the Department within 5 years for new claims and 8 years for all others. To date, the Department has not yet provided Congress with any information regarding its plan to implement this statutory requirement. The agreement directs the Department to report to the Committees on Appropriations and Veterans' Affairs of both Houses of Congress within 120 days of enactment of this Act a detailed timeline for implementation of this requirement and any budgetary requirements needed to carry it out.
Security Risk Management.—Providing welcoming access to Department facilities while maintaining the necessary security is challenging. However, the Committees are concerned that the Department's current risk management policies and police governance processes are not sufficient to ensure medical facilities are adequately protected. The Department is urged to quickly implement the recommendations in the Office of Inspector General (OIG) report entitled, "Inadequate Governance of the VA Police Program at Medical Facilities."

Debt Recoupment.—The Department has not yet developed a way to track debt incurred by an individual veteran, and how much of that debt is a result of processing delays or errors by VA. The agreement requires the Department to submit to the Committees on Appropriations of both Houses of Congress within 120 days of enactment of this Act a plan and timeline for tracking the cause of a debt incurred by a veteran. Further, the Department should consider that debt assigned to a veteran due to a delay or mistake in processing by VA or a VA employee is considered by the Committees, for purposes of tracking, to be an error by the Department.

Unobligated Balances of Expired Discretionary Funds.—The agreement directs the Secretary to submit to the Committees on Appropriations of both Houses of Congress a report no later than April 15, 2020, and quarterly thereafter, detailing all unobligated balances of expired discretionary funds by fiscal year.

VETERANS BENEFITS ADMINISTRATION COMPENSATION AND PENSIONS (INCLUDING TRANSFER OF FUNDS)

The agreement provides \$118,246,975,000 for Compensation and Pensions in advance for fiscal year 2021. Of the amount provided, not more than \$18,147,000 is to be transferred to General Operating Expenses, Veterans Benefits Administration (VBA) and Information Technology Systems for reimbursement of necessary expenses in implementing provisions of title 38. The agreement also provides \$1,439,931,000 for fiscal year 2020 in addition to the advance appropriation provided last year based on the administration's estimate of claims under the Blue Water Navy Vietnam Veterans Act.

READJUSTMENT BENEFITS

The agreement provides \$12,578,965,000 for Readjustment Benefits in advance for fiscal year 2021.

VETERANS INSURANCE AND INDEMNITIES

The agreement provides \$129,224,000 for Veterans Insurance and Indemnities in advance for fiscal year 2021. The agreement also provides \$17,620,000 for fiscal year 2020 in addition to the advance appropriation provided last year.

VETERANS HOUSING BENEFIT PROGRAM FUND

The agreement provides such sums as may be necessary for costs associated with direct and guaranteed loans for the Veterans Housing Benefit Program Fund. The agreement limits obligations for direct loans to not more than \$500,000 and provides that \$200,377,391 shall be available for administrative expenses.

VOCATIONAL REHABILITATION LOANS PROGRAM ACCOUNT

The agreement provides \$57,729 for the cost of direct loans from the Vocational Rehabilitation Loans Program Account, plus \$401,880 to be paid to the appropriation for General Operating Expenses, Veterans Benefits Administration. The agreement provides for a direct loan limitation of \$2,008,232.

NATIVE AMERICAN HOUSING LOAN PROGRAM ACCOUNT

The agreement provides \$1,186,000 for administrative expenses of the Native American Veteran Housing Loan Program Account.

GENERAL OPERATING EXPENSES, VETERANS BENEFITS ADMINISTRATION

The agreement provides \$3,125,000,000 for General Operating Expenses, Veterans Benefits Administration and, of the amount provided, not to exceed 10 percent is available for obligation until September 30, 2021. The agreement provides \$125,000,000 above the request to hire additional claims and appellate staff and to meet the requirements to implement the Blue Water Navy Vietnam Veterans Act. The agreement requires VA to report to the Committees on Appropriations of both Houses of Congress on a quarterly basis information related to claims considered under the Blue Water Navy Vietnam Veterans Act. This information should include timeliness measures as well as grant and denial rates for these claims. The agreement requires the Department to provide monthly updates on performance measures for each Regional Office.

Veterans Transportation Program.—The agreement recognizes the importance of the Veterans Transportation Program and the role it plays in improving access to care by assisting Veterans in overcoming transportation barriers when accessing VHA services.

Equitable Relief.—As described in House Report 116-63, the Secretary is directed to continue to grant or extend equitable relief to eligible veterans initially deemed eligible in instances of administrative error.

Education Benefits.—The Committees are concerned about the levels of overpayments and improper payments being paid to GI Bill beneficiaries. The agreement directs VA to work with education stakeholders to ensure that veteran educational benefits are paid in a timely and accurate manner, and that efforts to recoup any overpayments or improper payments are fair and not overly burdensome on student veterans and their families. The agreement further directs VA, in collaboration with the Departments of Defense and Education, to provide an interagency report on the development and continued implementation of the Principles of Excellence, oversight of institutions complying with the Principles, and appropriate and timely accountability measures for educational programs receiving Federal funding. Lastly, the agreement directs the Department to continue to reform the compliance survey process to allow early detection of fraudulent marketing or predatory recruiting practices among institutions of higher learning, and to codify a set of tools that is sufficiently agile enough to curtail the behavior of scamming institutions.

Education Data Collection and Sharing.—The Committees believe that both students and VA should be able to make more evidence-based decisions when it comes to veterans' education. The agreement directs the Department to work with the Departments of Education and Defense to ensure that there is a comprehensive database, or at a minimum, a set of data-sharing agreements in place between Federal entities involved in the administration of Federal resources related to veteran educational attainment. The agreement further directs the Department to provide an interagency report on the development and implementation of data-sharing agreements, and the uses and effectiveness of the data shared. The report must be completed and provided to the Committees on Appropriations of both Houses of Congress no later than 270 days after enactment of this Act.

Gulf War Veterans Claims for Service-Connected Disability Compensation.—The Department's high rates of denial of Gulf War veterans' claims for undiagnosed illnesses and chronic multi-symptom illnesses continue to be concerning. The agreement directs the Department to continue to seek ways to improve the grant rate for disability claims and to better address the needs of those veterans suffering with undiagnosed illnesses and chronic multi-symptom illnesses after their Gulf War service.

Medical Disability Exams.—Consistent with statute, the agreement directs the Department to ensure that any non-VA physician contracted to conduct medical disability examinations must have a current unrestricted license to practice as a physician, and is not barred from practicing in any State, the District of Columbia, or a Commonwealth, Territory, or possession of the United States.

Vocational Rehabilitation and Employment Service Counselor to Client Ratio.—The significant understaffing within rehabilitation programs negatively impacts veterans with a service-connected disability using these programs. The agreement encourages the Department to seek opportunities to expand staffing counselors in these critical areas in order to reach the ratio of 125 veterans to one fulltime equivalent (FTE) position, and to provide the comprehensive individualized services that these veterans have earned.

VetSuccess on Campus.—The agreement strongly encourages VA to continue to support the VetSuccess on Campus program and expand to additional schools.

Anti-Recidivism Programs.—The agreement encourages VA to look for opportunities to partner with non-profit organizations that provide programs for incarcerated veterans to reduce the likelihood of recidivism. VA should consider partnering with organizations that provide combined services to veterans to support their transition out of incarceration to being productive members of the communities to which they return. As VA pursues these partnerships, the agreement encourages the establishment of metrics to measure the partnerships' effectiveness, including reduced recidivism rates among veterans.

GI Bill Apprenticeships and On-the-Job-Training.—Apprenticeships and on-the-job training (OJT) programs are important tools in teaching veterans valuable skills and aiding veterans in securing employment after transitioning from military service. However, these programs are largely underutilized by veterans. The agreement directs VA to provide a briefing to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this Act to update the Committees on the Department's efforts to promote awareness and increased utilization of apprenticeships and OJT, including VA's plans for tracking data on program outcomes, such as employment and income information, as well as information concerning any funding needs or necessary legislative changes to ensure these programs' success.

VETERANS HEALTH ADMINISTRATION

Importance of In-House VA Care.—As VA continues to implement the John S. McCain III, Daniel K. Akaka, and Samuel R. Johnson VA Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSION) Act of 2018 (Public Law 115–182), the Committees recognize the vital role of VA's healthcare facilities in serving the unique needs of veterans. VA's medical centers, community-based outpatient centers, and other facilities provide veterans with necessary services – such as audiology, prosthetics, mental health services for post-traumatic stress disorder and traumatic brain injury, and rehabilitation services for spinal cord injuries – that are highly specialized and at which VA often has more expertise than community providers. Veterans overwhelmingly report they are satisfied with the care they receive at VA healthcare facilities. Research has also consistently shown that VA produces as good, if not better, health outcomes as the private sector. In addition, VA healthcare facilities play a critical role in our Nation's health system in training new doctors, nurses, and other medical providers; conducting lifesaving medical research; providing nationwide emergency preparedness support; and innovating many best practices in healthcare delivery. The Committees, therefore, stress the importance of VA continuing to fully fund, fully staff, and appropriately maintain its healthcare facilities, even as the VA MISSION Act is implemented. The agreement requires VA to continue to enhance the services provided in its facilities to ensure that VA healthcare continues to be of the quality and effectiveness that veterans have come to expect.

VA MISSION Act.— The agreement provides \$8,908,585,000 in fiscal year 2020 and \$11,291,827,000 in fiscal year 2021, consistent with the budget request, to implement the VA MISSION Act. The agreement fully funds the Department's request in order to provide greater access to timely and quality care for veterans, both in VA and in the community, but is interested in closely monitoring the financial impact of the access standards.

The agreement directs the Department to submit quarterly reports to the Committees on: (1) the number of veterans served by each authority for care outlined in section 1703(d) of title 38, United States Code (i.e., the Department does not offer the care, the Department does not operate a full-service medical facility in the State in which the covered veteran resides, etc.); (2) the cost of such care broken out by the authorities in section 1703(d); and (3) the timeliness of care, on average. In addition, the agreement directs the Department to submit monthly reports to the Committees on Appropriations of both Houses of Congress identifying available resources, obligations, authorizations, and anticipated funding needs. These monthly reports should include the Veterans Choice Fund balances and clearly show funds from the Veterans Choice Fund used to support new non-VA care authorizations since June 6, 2019. The reports should also include detail on the timing of authorization of care and the obligation of funds.

Allocations.—The Committees remind the Department, in accordance with the Joint Explanatory Statement accompanying Public Law 115–244, that it was directed to consult with the Committees on Appropriations and Veterans Affairs of both Houses of Congress before any future attempts are made to realign Specific Purpose funding to General Purpose funding, and that such future realignments must be proposed in an annual budget submission. No such consultation occurred, and the fiscal year 2020 budget submission did not reflect any conversion of funding. Therefore, the agreement directs that the Department not convert any Special Purpose funding to General Purpose funding in fiscal year 2020.

Joint National Intrepid Spirit Center.— The agreement directs the VA/DOD Health Executive Committee to provide a report to the Committees on Appropriations of both Houses of Congress no later than 60 days after enactment of this Act on the Departments' collaborative efforts related to traumatic brain injury (TBI) care, research and education to improve the quality of and access to TBI care, and the pros and cons of establishing a joint DOD/VA Intrepid Spirit Center that serves both the active duty and veteran populations for the mutual benefit and growth in treatment and care. The report should include an analysis of how better to serve servicemembers and veterans with TBI in areas with limited access to TBI care (i.e., rural areas), including the establishment of a joint DOD/VA Intrepid Spirit Center in such an area. The report must include an analysis of existing DOD medical facilities that partner with VA, existing warrior transition units or similar units that support active duty servicemembers who require comprehensive care, and academic institutions specializing in Polytrauma/TBI in geographic locations without an existing National Intrepid Center of Excellence or Intrepid Spirit Center. In addition, the report should propose metrics that demonstrate short-term as well as long-term (i.e., 6 to 24 months) program effectiveness, including sustainability of patient independence by geographic area, a plan to collect longitudinal data to analyze longer-term effects, and the financial requirements to establish and maintain such a Center.

Prompt Payment.—The Committees remain committed to supporting VA's efforts to ensure timely reimbursement for non-VA healthcare providers and facilities that provide necessary care for our veterans. The agreement encourages the Department to provide strong oversight and improve timely payment to non-VA providers. The agreement also urges VA to facilitate the completion of all outstanding reimbursements as promptly as possible.

Public-Private Partnerships.—The Department's research investment could be expanded to leverage non-Federal initiatives that provide the opportunity for strong co-location of VA and university biomedical scientists for translational investigation, which has high potential for precision medicine outcomes for wounded warriors and other high-risk veteran populations. The agreement notes the high concentration of VA research enterprises on the Nation's two coasts and urges the Under Secretary for Health to expedite consideration of proposals for the Department to lease space from research complexes where there is multi-disciplinary investigation related to veterans and wounded warriors,

including medicine, engineering and veterinary science. Such consideration should be timely to inform action in the fiscal year 2021 budget.

Medical Center Internet Access.—The Committees believe that having access to WiFi and the internet at VA medical facilities is important, and while many VA facilities provide internet access in certain specific locations, access is not provided to inpatient treatment rooms or waiting areas across the campus. The agreement directs the Department to assess internet coverage for veterans and guests across facilities, and to report on the current status of internet access, the cost estimates for expanding internet coverage to all appropriate locations at VA facilities, and the infrastructure and cyber security requirements to support such expansion. The report must be provided to the Committees on Appropriations of both Houses of Congress within 180 days of enactment of this Act.

Veterans Health Administration Staffing Model.—It is critical that VHA develop a staffing model to better understand and more quickly address staffing needs across the organization, particularly in critical need occupations. The agreement directs OIG to review VHA's progress in developing a comprehensive staffing model and timeline for implementation. The agreement further directs OIG to meet with the Committees within 30 days of enactment of this Act to discuss details of the planned study.

Emergency Room Claims.— The United States Court of Appeals for Veterans Claims decided in *Wolfe v. Wilkie* that VA was responsible for reimbursing veterans inappropriately denied payment for emergency care obtained outside of the VA system. The agreement directs the Department to undertake a review of post-April 8, 2016, rejected and denied emergency care claims, and to explore the feasibility of reviewing claims rejected or denied prior to that date. Further, the agreement directs the Department to examine what it can do to mitigate the financial damage done to those veterans whose unpaid emergency care claims were sent to a collection agency and now have damaged credit. Finally, the agreement directs the Department to provide a detailed plan for how it will review claims denied or rejected before that date; provide an analysis of how it came to that conclusion; and describe steps it will take to mitigate damage done to veterans' credit within 90 days of enactment of the Act. The Committees expect that the Department will implement measures to avoid similar outcomes in the future.

Reporting on VA Healthcare Facilities for Treatment of Women.—The agreement directs the Department to submit a report to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this Act, and annually thereafter, with the following information: the number of facilities in each model of delivery of care to women (by VISN and by State); the criteria used to determine which model is most appropriate for each facility; the triggers or criteria to upgrade facilities to the next higher model; plans, if any, to upgrade facilities from the lowest model (General Primary Care Clinics) to a higher model within planned Strategic Capital Investment Planning (SCIP) investments; and whether VA has a plan or goal for how many facilities should fall into each of the models of care.

MEDICAL SERVICES

The agreement provides \$56,158,015,000 in advance for fiscal year 2021 for Medical Services and makes \$1,500,000,000 of the advance available through fiscal year 2022. The agreement includes bill language requiring the Secretary to ensure that sufficient amounts are available for the acquisition of prosthetics designed specifically for female veterans. Of the amounts provided, the agreement provides that at least \$585,000,000 shall be dedicated to gender-specific care for women.

Caregivers Support

The agreement includes \$710,000,000 for VA's Caregivers Program, which VA is expected to dedicate to the Caregivers Program and not divert resources to other areas. The Department should note that notification should be provided to the Committees of any attempts to reprogram this funding.

Expansion and Support for Caregivers.— The Caregivers Program was enhanced as part of the VA MISSION Act, and the Department is expected to carry out this expansion according to the statutory timeline, and to fully staff the program, including ensuring that 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. The agreement directs VA to provide quarterly projections and monthly expenditure reports for the Caregivers Program to the Committees on Appropriations of both Houses of Congress. These reports should also highlight any changes to the implementation

schedule due to the Department's decision-making delays, as well as the timing of information technology requirements.

Additionally, the Committees are concerned by recent actions of the Department to implement policy changes that would limit eligibility of veterans and caregivers or curtail the support services provided to them. Any steps to limit eligibility are rejected by the Congress and the agreement directs the Department to submit a report detailing justification no later than 180 days prior to any changes in eligibility criteria not made as a result of public law.

The Committees recognize that many caregivers for severely wounded veterans face a reduction in outside earnings, resulting in difficulties meeting financial obligations, including student loan debt held by the caregiver. The agreement directs the Department to survey all caregivers currently in the program who seek the financial planning services required under the VA MISSION Act, in order to identify the number possessing outstanding student loan debt, and to develop a plan to monitor this issue, including providing counseling related to student loan and other debt management, under such financial planning services to caregivers required by the VA MISSION Act.

Mental Health

Mental Health and Suicide Prevention.—The agreement provides \$9,432,833,000 in discretionary funds for mental health programs, which is \$20,000,000 above the budget request, and includes \$221,765,000 for suicide prevention outreach. The Secretary is directed to make any necessary improvements to Veterans Crisis Line (VCL) operations including, but not limited to, ensuring appropriate staffing for call centers and back-up centers, providing necessary training for VCL staff, and ensuring that staff are able to appropriately and effectively respond to the needs of veterans needing assistance. The Secretary is also directed to provide the Committees on Appropriations of both Houses of Congress a report, no later than 90 days after enactment of this Act, which contains an update detailing findings on the outcomes and efficacy of the VCL from the Veterans Crisis Line Study Act of 2017.

The agreement also maintains the direction provided in House Report 116-63 for VA to implement a safety plan to address parking lot suicides and expand the Coaching Into Care program, remove barriers that impact a veteran's ability to receive mental healthcare, and implement a program to educate local law enforcement on how to deal with veterans during a mental health crisis. This report should also address the status of recommendations from the OIG following investigations of specific suicides on VA campuses.

In addition, the agreement directs the Department to provide a report no later than 60 days after enactment, and quarterly thereafter, a detailed expenditure plan for suicide outreach and treatment programs, how VA is meeting the Committees' directives, and updates on obligations to date. Furthermore, the agreement directs the Department to staff every VA Medical Center with at least one suicide prevention coordinator.

National Center for Post-Traumatic Stress Disorder.—The agreement supports the mission and work of the National Center for Post-Traumatic Stress Disorder and has provided \$40,000,000, which includes \$10,000,000 for the coordination of the VA National PTSD Brain Bank, to continue the center's advancement of the clinical care and social welfare of America's veterans, through research, education, and training in the science, diagnosis, and treatment of PTSD and stress-related disorders.

PREVENTS Initiative. —The agreement includes \$3,000,000 for VA's efforts to coordinate veteran suicide prevention efforts under the Presidential Task Force established under the PREVENTS Initiative, as directed in House Report 116-63.

Expansion of Mental Health Benefits to Guard and Reservists. —The agreement acknowledges the importance of providing mental healthcare to all warfighters, which includes Guard and Reservists. The Committees recognize that these individuals may benefit from access to mental health services provided by VA—including suicide prevention services—even if they were not activated under Federal orders. Therefore, the agreement directs the Department to provide 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 extending access to these services to all members of the National Guard and Reserves, regardless of their Federal activation status. This report shall include the costs associated with this effort, an estimate of the impact on capacity, as well as any relevant legislative language needed to accomplish this goal.

Reduce Suicide, Relapse, and Hospital Visits.—The agreement encourages VA to consider the use of cutting-edge, off-the-shelf technology and pharmacy management protocols as tools to reduce suicide, relapse and hospital visits by veterans treated for mental health issues, including PTSD and TBI.

Vets Corps.— The agreement provides up to \$2,500,000 to carry out the direction provided in House Report 116-63 regarding Vets Corps.

REACH Veteran in Crisis Initiative.—The agreement supports the Recovery Engagement and Coordination for Health—Veterans Enhanced Treatment (REACH VET) program. The Department is encouraged to work in partnership with the Department of Energy's Oak Ridge National Laboratory to update and improve predictive models and expand the use of predictive analytics for decision support and identification of veterans in need and at risk.

Prescription Practices.—The June 2019 GAO report, "VA Mental Health: VHA Improved Certain Prescribing Practices, but Needs to Strengthen Treatment Plan Oversight" (GAO–19–465) reviewed how mental health treatment decisions are made by providers in VA Medical Centers and monitored by VHA. The agreement directs the Department 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 progress towards implementing the GAO recommendations in this report.

Sleep Disorders.—Senate Report 115-269, which accompanied the FY 2019 appropriations, included a recommendation for the Department to assign a program manager for sleep disorders. The Department indicated it would make a determination upon completion of the Healthcare Analytics and Information Group's survey of existing resources and practices. The agreement directs the Department to provide an update on this review and recommendation to the Committees on Appropriations of both Houses of Congress no later than June 30, 2020.

Homeless Assistance

The agreement provides \$1,847,466,000 for homeless assistance programs, which is \$28,932,000 above the budget request. This includes \$380,000,000 for the Supportive Services for Veteran Families program; \$408,300,000 for the Housing and Urban Development-Veterans Affairs Supportive Housing (HUD-VASH) program case management; \$250,000,000 for the Grant and Per Diem Program; and \$69,107,000 for the Veterans Justice Outreach Program.

Homeless Women Veterans.—The Secretary is directed to report to the Committees on Appropriations of both Houses of Congress within 180 days of enactment of this Act on the growing number of women veterans who are homeless or unstably housed and the programs intended to serve them. The report should identify if and how the programs are failing and include a plan to address any deficiencies.

Veteran Homeless Report.—The Secretary is directed to prepare a report in consultation with DOD and the U.S. Interagency Council on Homelessness on the progress made to date to ensure servicemembers identified through the Transition Assistance Program process as lacking viable housing options receive appropriate housing-related assistance. The report shall be provided to the Committees on Appropriations of both Houses of Congress within 120 days of enactment of this Act and include: 1) data for fiscal years 2018 and 2019; 2) the number and percentage of transitioning servicemembers who are evaluated as not having a viable post-transition housing plan; 3) and of those, a) the number and percentage who receive a warm handover from DOD to VA; b) the number who received services from appropriate VA homeless program staff; and c) and are identified as experiencing homelessness.

Limited Affordable Housing.—The Secretary is directed to provide an update on the effects of limited affordable housing opportunities on the Department's homeless programs in rural communities. The report also should include recommendations on ways the Department and local housing entities can better partner to ensure access to housing for veterans in rural and high-cost urban areas and be provided to the Committees on Appropriations of both Houses of Congress within 180 days of enactment of this Act.

Supportive Services for Veteran Families (SSVF).—Although funds were appropriated, the Department's policy decisions led to fluctuations in funding to grantees and possible gaps in services being provided. The agreement provides for at least \$380,000,000 in grant awards in fiscal year 2020 and encourages the Department to plan for \$400,000,000 in fiscal year 2021 to expand to other locations to address gaps in services, as appropriate. The Secretary is directed to submit a report describing the effectiveness of the SSVF program; results of the gap analysis; and a plan to expand the program, as appropriate, to address service gaps within 90 days of enactment of this Act to the Committees on Appropriations of both Houses of Congress.

HUD-VASH.—Due to concerns the Department is not properly staffing its HUD-VASH program to meet the needs of changing homeless populations, the Secretary is directed to submit a report to the Committees on Appropriations of both Houses of Congress within 90 days of enactment of this Act. The report shall include details regarding: 1) the process by which each VA medical center fills their HUD-VASH case management positions; 2) the current ratio of HUD–VASH case managers to veterans for each VA medical center; 3) a list of all vacant specific purpose-funded positions to support the HUD–VASH program; 4) steps taken to recruit and retain case managers for this program; 5) a list of VA Medical Centers where HUD–VASH cases are being contracted out; 6) a list of the current allocations of HUD–VASH vouchers by State; 7) a list of requests for additional HUD–VASH vouchers received by the Department and the outcome of such requests; and 8) efforts currently underway to assist HUD–VASH case management in highly rural areas.

Homeless Providers Grants Per Diem (GPD) Program.—The agreement supports the Department's goal of a systemic end to veteran homelessness and agrees that service-intensive transitional housing provided through VA's GPD Program is an important tool in this effort. The agreement provides \$250,000,000, an increase of \$23,932,000 over the request, for GPD. The most appropriate mix of housing services for veterans should be determined locally through a collaborative process including local housing partners, service providers, and VA medical centers, and VA should continue to make funding available for GPD beds based on this process. 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 contingency/remediation plans that current providers serving rural or highly rural areas have for veterans that may be affected by changes in availability or the loss of GPD Program funds that would result in the loss of their access to transitional housing assistance.

Veterans Justice Outreach (VJO) Program.—The agreement provides \$5,000,000 over the budget request to support the VJO Program and its goal to prevent homelessness and avoid the unnecessary criminalization of mental illness and extended incarceration among veterans by ensuring eligible veterans encountered by police, and in jails or courts, have timely access to VA services, including mental health, substance abuse, and homeless programs.

Clinical Workforce

Healthcare Workforce.—VHA's ability to recruit and retain quality clinical and support staff remains a concern. Accordingly, the agreement directs the Department to comply with GAO's recommendations to improve staffing, recruitment, and retention strategies for clinicians.

Mental Health Staffing.—There is a growing need for mental health professionals, and VA should maintain appropriate mental health staffing levels to provide veterans timely, effective, highquality care. The agreement directs the Department to prioritize the hiring of mental health professionals and to keep the Committees on Appropriations of both Houses of Congress apprised on a quarterly basis on meeting its hiring goals, including actions taken to improve recruitment and retention across the country, and specifically in rural areas. This report should include updates to the ratio of faculty staff to outpatient mental health veterans being treated for mental health needs.

Rural Recruitment.—To improve recruitment and retention initiatives for healthcare providers in rural and highly rural areas the agreement urges the Department to conform with the recommendations contained in GAO report, GAO–181–24. The agreement directs the Department to provide a report to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this Act on the status of compliance with these recommendations.

Credentialing—The agreement strongly encourages VA to expand the Military Transition and Training Advancement Course nationally in order to facilitate the recruitment of separating military

personnel who served in the healthcare field. The agreement directs VHA to identify remaining barriers to expediting the credentialing process for qualified licensed personnel, and to report on such barriers and limitations to the Committees on Appropriations of both Houses of Congress within 180 days after enactment of this Act.

In addition, a recent GAO report found that greater focus on credentialing is needed to prevent disqualified providers from delivering patient care. The agreement urges the Secretary to implement the GAO recommendations to improve Departmental oversight over VHA facility credentialing policies. The agreement directs the Department to provide a progress report on implementation of such recommendations to the Committees on Appropriations of both Houses of Congress within 60 days after enactment of this Act.

Orthotics & Prosthetics Workforce.—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 is a concern. VHA's Orthotic and Prosthetic Residency Program provides rotation opportunities through the VA system, but 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 Iraq and Afghanistan war veterans. The agreement directs VA to work with outside industry experts to survey and examine the latest data available on the current extent of orthotics and prosthetics care provided outside of VA facilities and provide projections on requirements over the next decade based on overall population growth among veterans with orthotics and prosthetics needs. This information is to be reported to the Committees on Appropriations of both Houses of Congress within 180 days of enactment of this Act.

Physician Assistants.—VA has failed to utilize existing authorities to hire and retain Physician Assistants (PAs). As such, the agreement directs VA to accelerate the rollout of competitive pay for PAs, to develop a plan on how to better utilize the Health Professional Scholarship Program and Education Debt Reduction Program, and to develop a staffing plan on how to utilize PAs within the Department.

Medical Staff Retention.—The agreement expands upon the Medical Staff Retention reports directed in House Report 116-63. In addition, the Department is directed to submit a report to the Committees on Appropriations and Veterans' Affairs of both Houses of Congress within 90 days detailing compliance with its policy to (1) conduct reviews of each healthcare provider of the Department who transfers to another medical facility of the Department, resigns, retires, or is terminated to determine whether there are any concerns, complaints, or allegations of violations relating to the medical practice of the healthcare provider; and (2) to take appropriate action with respect to any such concern, complaint, or allegation. The Department previously informed Congress it was implementing an auditing tool to require medical facilities to certify compliance with these policies to their respective VISN leadership. The agreement requests that a summary of this auditing tool also be included in this report.

VA/DOD Clinical Practice Guidelines.—The Departments of Veterans Affairs and Defense have created VA/DOD Clinical Practice Guidelines for many conditions that affect both veterans and active duty servicemembers. Currently, VA and DOD do not have guidelines for the comorbidity of trauma (e.g., PTSD, TBI, Military Sexual Trauma) and substance use disorder or chronic pain, despite the fact that many veterans and active duty servicemembers are suffering from multiple conditions. It is crucial that frontline clinicians are informed about the most effective treatments for these conditions when they are co-occurring. The agreement strongly encourages VA and DOD to work together to create Clinical Practice Guidelines for the treatment of trauma, including PTSD, TBI, and Military Sexual Trauma, that is comorbid with substance use disorder or chronic pain.

Rural Healthcare

Office of Rural Health.—The agreement notes that veterans residing in rural and remote areas face unique barriers to receiving high-quality mental health, primary healthcare, and specialty care services. While enhanced community care programs offer veterans increased flexibility to obtain care close to home, often this same gap in services exists in the private market in rural and remote communities. Over the past 10 years, the Office of Rural Health (ORH) and its Rural Health Initiative has played a critical role in assisting VA in its efforts to increase access to care. Therefore, the agreement provides \$300,000,000 for ORH and the Rural Health Initiative.

The agreement supports Rural Health Resource Centers, operated by ORH, and encourages the Department to increase the number of these centers. Any expansion should also emphasize increasing access to healthcare for women veterans, treating traumatic brain injuries, and recruiting and retaining healthcare providers to serve rural and remote areas.

The agreement also encourages continued operation of a nurse advice line at all VA medical centers, including facilities serving rural areas and highly rural areas, as a way to reach a large percentage of veteran enrollees. The agreement further supports the continuation of the efforts of the Department's Community Clergy Training to Support Rural Veterans Mental Health Initiative. The Department is urged to increase the financial resources made available in order to increase accessibility of this initiative to rural communities.

The Department is reminded of the directions regarding rural transportation included in House Report 116-63.

Rural Health Continuity of Care.—The Committees note the Access Received Closer to Home (ARCH) pilot program was highly successful in some areas in providing healthcare services to veterans who live in the rural and highly rural States in which it operated, and that veterans who received medical care through the ARCH pilot program were "completely satisfied" with their care and cited significantly shortened travel and wait times to receive care. As the Department transitions to a new community care program established by the VA MISSION Act, the agreement encourages the Secretary to sustain continuity of care for rural veterans through provider agreements, based on previous models such as the ARCH program, to ensure veterans do not experience a lapse in existing healthcare access during the transition to the new community care program and any resulting integrated networks. The Committees continue to support enabling the Department to enter into provider agreements with non-VA long-term care providers, including skilled nursing facilities.

Home-Based Primary Care.—The agreement supports the collaboration between VA and the Indian Health Service (IHS) and collaboration by Federal agencies with Tribes to expand access to care for Native veterans, including the recent expansion of evidence-based home-based primary care (HBPC) programs at 14 VA medical centers. This expansion is designed to reach new populations of American

Indian veterans living in rural reservation communities, which are served by medical facilities operated directly by IHS or by Tribes and Tribal organizations with funding provided by IHS. The agreement urges the Secretary to increase funding within ORH to expand HBPC programs to additional American Indian reservations and to other rural areas, and to continue to improve planning coordination with other Federal healthcare organizations. Planning efforts should take into account conducting a population-based needs assessment and allowing sufficient time to develop trusting relationships with Native veterans, Tribal health and social service personnel, IHS and Tribal community health representatives, and Tribal communities. Planning efforts should also consider availability of IHS and Tribal resources for patients, as well as identify potential opportunities for co-management to prevent unintended duplication of effort, over-prescribing of medications, and other inefficiencies.

Gender-Specific Care for Women

Gender-Specific Care for Women.—The agreement provides \$585,000,000 for gender-specific care for women, which is \$38,486,000 over the budget request. The agreement directs VA to continue redesigning its women's healthcare delivery system and facilities to ensure women receive equitable, timely, and high-quality healthcare. The agreement further directs VA to prioritize hiring women primary care providers and psychologists for women clinics, employees for women-specific services, and women peer support specialists. The agreement directs women's health program managers to be full-time jobs and not to be tasked with supplemental responsibilities outside their specified job descriptions. The agreement supports the expansion of the Women's Health Mini-Residency program.

Opioid Safety Initiatives and Substance Use Disorder Care

To continue to build upon opioid reduction efforts and safety initiatives, the agreement includes \$402,000,000 for Opioid Prevention and Treatment programs at VA. This includes \$345,946,000 for prevention and treatment programs, and \$56,054,000 to continue implementation of the Comprehensive Addiction and Recovery Act of 2016 (Public Law 114–198).

Office of Patient Advocacy—The Committees believe that the Jason Simcakoski Memorial and Promise Act's (Title IX, Public Law 114–198) establishment of the Office of Patient Advocacy will ensure that patient advocates put the interests of the veterans they serve first, not the interests of the facility. Accordingly, within 90 days of enactment, the agreement directs the Department to provide a report to the Committees on Appropriations and Veterans' Affairs of both Houses of Congress on its progress implementing the relevant sections of Public Law 114–198, including progress on all six recommendations from GAO's April 2018 report (GAO–18–356), and the specific training and instructions Patient Advocates are given to escalate a concern outside of a VA facility when they believe a VA facility is not acting in the best interest of the veteran.

Improvement of Opioid Safety Initiative.—The Committees support VA's Opioid Safety Initiative (OSI) and encourage continued implementation at all VA medical facilities, as directed under the Jason Simcakoski Memorial and Promise Act. The Committees acknowledge overall improvements in opioid safety at VA and believe that it is imperative that all VA providers who prescribe opioids continue to consistently use the Opioid Therapy Risk Report tool under the OSI. In May 2018, GAO submitted report GAO–18–380 to Congress detailing the Department's progress made towards improving opioid safety, and VA set a target date of April 2019 to satisfy and closeout the five recommendations. The agreement directs the Department to submit a report to the Committees on Appropriations and Veterans' Affairs of both Houses of Congress detailing the actions to address each finding and recommendation made by this report within 90 days of enactment of this Act. Additionally, this should include a report on efforts to ensure that VA medical centers have established an additional control procedure, in accordance with GAO recommendations to improve oversight of the controlled substance inspection program.

Furthermore, to ensure that VA physicians have equal opportunity to prescribe effective, lower risk, safer Schedule III (CIII) opioids before prescribing highly potent and addictive Schedule II opioids, the agreement recommends that the Pharmacy Benefits Management Services consider clarifying guidance related to dispensing CIII opioids.

Community Care Opioid Safety.—The Committees recognize that VA has made important progress increasing opioid safety and reducing overprescribing within the VA healthcare system. However, the Department still needs to make comparable progress implementing opioid safety reforms in VA community care programs. The July 2017 OIG report (VA OIG 17–01846–316) on opioid prescribing in VA community care programs provides further evidence that veterans receiving opioid therapy from community care providers are at significant risk, due to lack of consistent tracking and

limited awareness of VA opioid therapy and safe prescribing protocols. The agreement directs the Department to provide a report to the Committees on Appropriations and Veterans' Affairs of both Houses of Congress on implementation of all OIG recommendations and statutory requirements within the VA MISSION Act within 90 days after enactment of this Act.

VA participation in State Prescription Drug Monitoring Programs, as required in the VA Prescription Data Accountability Act of 2017 (Public Law 115–144), is a critical component to an effort to ensure a patient's prescription history is available to all prescribers. No later than February 1, 2021, the agreement directs VA to submit a report to the Committees on Appropriations of both Houses of Congress identifying progress toward full participation in State Prescription Drug Monitoring Programs during calendar year 2020, broken out by VISN and Medical Facility. The agreement also encourages VA, to the maximum extent permitted by law, to share prescription drug information with other Federal medical facilities that may serve veterans, including DOD medical facilities and Indian Health Service facilities.

Complementary and Integrative Health.—Expanding access to comprehensive pain management and complementary and integrative health (CIH) services is vital to improving the delivery of highquality care for veterans. The agreement urges robust implementation of VA's plan to expand the scope of research, education, delivery, and integration of CIH into the healthcare services provided to veterans, and as required under section 932 of the Jason Simcakoski Memorial and Promise Act, VA must continue to prioritize implementation of the pilot program at VA medical centers, including polytrauma rehabilitation centers, to assess the feasibility and advisability of delivery using wellness-based programs to complement pain management and related healthcare services. The Department is encouraged to continue to expand access to CIH services as part of the VA's Whole Health System approach.

Substance Use Disorder Care.—The Committees support VA's ongoing efforts to reduce wait times for substance use disorder (SUD) treatment by balancing nationwide care within the Residential Rehabilitation Treatment Programs (RRTP). However, the Committees are aware that the median wait time between screening and admission for non-priority SUD RRTP care remained unacceptably high. The agreement urges the Department to improve efforts to address the uneven and limited distribution of inpatient addiction crisis detoxification beds that employ a medical/psychosocial approach, a supply of Medication Assisted Treatment including availability of appointments for veteran access to buprenorphine, alternative co-adjuvant therapies to reduce anxiety, and mobile tools aimed at concurrent recovery and relapse prevention. The agreement urges the Department to expand existing successful model behavioral-health programs in partnership with community providers in high-demand treatment areas with proven, veteran-specific, evidence-based, one-stop-shop (integrated), SUD treatment that go beyond basic "shelter care." These public-private partnerships should encompass the full continuum of care for veterans suffering from SUD (detoxification/recovery, sober housing), and those at risk of suicide due to SUD. Additionally, the agreement directs the Department to provide a report to the Committees on Appropriations of both Houses of Congress, within 90 days of enactment of this Act, that shall include average wait times for priority, routine and residential SUD care; the results of efforts to balance RRTP availability; projected RRTP wait times for fiscal years 2020 and 2021; and plans to scale successful evidence-based, integrated SUD care model programs.

Overmedication of Veterans.—In fiscal year 2018, the Congress provided \$500,000 for VA to enter into an agreement with the National Academies of Sciences, Engineering, and Medicine (NASEM) to conduct an assessment of the potential overmedication of veterans during fiscal years 2010 to 2017 that led to suicides, deaths, mental disorders, and combat-related traumas. Though the Committees are frustrated that, rather than conducting a study, the Department used the full amount of funding to contract for a study design, NASEM provided a credible study design report entitled, *An Approach to Evaluate the Effects of Concomitant Prescribing of Opioids and Benzodiazepines on Veterans Deaths and Suicides*. As such, the agreement directs the Department to work in close consultation and coordination with NASEM to implement the study design to evaluate and understand the effects of opioids and benzodiazepine on veteran suicides. The agreement directs the Department to brief the Committees on Appropriations of both Houses of Congress no later than 60 days after enactment of this Act on the proposed study design to be implemented, and to provide periodic updates thereafter.

Whole Health

Whole Health.—The agreement provides \$63,600,000 for the Whole Health initiative, which is \$10,000,000 above the budget request. The agreement directs VA to expand its use of interactive patient care and to ensure coordination and standardization of the field implementation of the Whole Health

initiative. The agreement provides up to \$5,000,000 for creative arts therapies. The agreement further directs the Department to submit complete and detailed accounting of the Whole Health program in the fiscal year 2021 budget request.

Alternative Therapies.—The agreement directs VA to study the feasibility and advisability of making yoga, meditation, creative arts therapy, chiropractic care, and acupuncture also accessible as treatment for mental health conditions, including suicide risk, to veterans at all Department facilities, either in person, or through telehealth.

Other Items of Interest

Central Alabama Veterans Health Care System (CAVHCS).—The Department is directed to address the deficiencies at CAVHCS, as identified in House Report 116-63.

Pressure Ulcer Prevention and Transparency.—Although the Department issued a policy directive on the prevention and management of pressure injuries, and is exploring non-invasive innovative biometric sensor technologies that have produced promising results in the early detection of pressure ulcers, more can be done. The agreement directs the Department to address pressure ulcer prevention and transparency, as identified in House Report 116-63, though the agreement does not specify funds for the pilot. The agreement directs the Under Secretary for Health to complete the directed assessment within 120 days of enactment of this Act. In addition, the agreement encourages the Department to consider incorporating into its directive the steps included in the peer-reviewed Standardized Pressure Injury Prevention Protocols.

Access for Veterans in the Commonwealth of the Northern Mariana Islands, American Samoa, Guam, and Freely Associated States.—The Committees remain concerned about the challenges for veterans residing in the Freely Associated States (FAS) to access the quality healthcare they have earned through their military service. Given the significant time, resources, and high costs for travel for some veterans, including airfare, transportation, and lodging, many FAS veterans are never able to access VA health services. The agreement urges the Department to enhance access to care for these veterans. The Committees are seeking to understand potential obstacles in data collection to account for the number of veterans residing in the FAS, and how VA can improve data collection from the outlying areas to help inform the development of proposals to ensure that health needs of these veterans are met. The agreement directs the Department to conduct a survey related to barriers veterans may face in utilizing VA services and other benefits when living in outlying and remote areas, and to provide a report to the Committees on Appropriations of both Houses of Congress on the findings of this survey, an assessment of options for improving access to VA healthcare for FAS veterans, as well as the outreach efforts taken to inform FAS and remotely located veterans about enrollment in the Foreign Medical Program. This report is directed to be provided within 270 days of enactment of this Act.

Furthermore, the agreement directs the Department to increase access to VA care for veterans living in remote and underserved areas of the FAS by increasing the number of full-time, dedicated, VA medical and mental health providers in these areas, as well as to work with Federal and non-Federal partners, including the Departments of Defense, Interior, and Health and Human Services, community healthcare facilities and educational institutions to leverage shared resources and improve access for delivery of care through technology and collaboration.

Artificial Intelligence and Machine Learning.—The Department is reminded of the report requested in House Report 116-63.

Orthotics and Prosthetics.—The Department is expected to ensure veterans continue to receive the prosthetics services that best meet their needs in the final Orthotics and Prosthetics regulation.

Veterans Exposed to Open Burn Pits and Airborne Hazards.—In order to provide full and effective medical care, it is essential for the Department to better understand the impacts that exposure during service has had on the health of veterans. Therefore, the agreement supports language included in House Report 116-63, including \$5,000,000 to carry out responsibilities and activities of the Airborne Hazards and Burn Pits Center of Excellence.

Community Wellness Programs.—VA has not yet implemented the VSO Wellness pilot program, authorized in Section 252 of the Consolidated Appropriations Act, 2018 (Public Law 115–141). It is concerning that the Department is still in the process of establishing this program and may not be

prepared to launch until fiscal year 2021. The agreement directs the Department to expeditiously implement the program, and further directs the Department to provide quarterly status updates to the Committees on Appropriations of both Houses of Congress.

Intimate Partner Violence Program.—The agreement supports VA's efforts to expand its Intimate Partner Violence Program to all sites within the next 2 years, and its plans to screen all veterans for Intimate Partner Violence and provide the appropriate resources. The agreement directs VA to fully resource this program at \$20,300,000, as requested, in fiscal year 2020 and include it as a program of interest with budget detail in the justifications accompanying the fiscal year 2021 budget submission.

Adaptive Sports.—The agreement includes \$24,309,000 for National Veterans Sports Programs, including \$16,000,000 for adaptive sports programs. Veterans have shown marked improvements in mental and physical health from participating in adaptive sports and recreational therapy and veterans have expressed the need for these activities to be included in the healthcare services VA offers. The Committees also recognize that adaptive sports and recreational therapy provide a low-cost alternative to other healthcare services that produce similar health outcomes. The Department is directed to make recreational and lifelong sports, such as open-ocean swimming, surfing, outrigger canoeing, hunting, and fishing eligible for grants.

Equine Therapy.—The agreement recommends the Department use \$1,500,000 of funds for the adaptive sports program for equine therapy. Moreover, the Department should utilize funding to conduct a comprehensive program evaluation to ensure the continued effectiveness of equine therapy in addressing the mental health needs of veterans that participate in these programs, including through the systematic assessment and tracking of mental health issues and symptoms, and the measurement of key outcomes, such as functional improvement in veterans' different life domains.

Beneficiary Travel.—The allocation of beneficiary travel to VISNs where unconventional modes of travel, such as air, are the primary means for veterans to visit a VA hospital remains a concern. Beneficiary travel is often expected to be paid out of pocket by the veteran, and then reimbursed by the Department at some later date, even for those veterans whose care is determined to be necessary by VA. This is an above average burden for veterans who live in rural and highly remote areas where veterans

travel long distances to appointments using atypical means of transportation, such as by air, and must pay to stay overnight in area hotels. The agreement urges the Department to staff each facility with at least one full-time employee to manage beneficiary travel, in order to speed reimbursements to veterans, and also to identify ways in which VA might be able to cover more of these veterans' costs up front.

DOD and VA Prescription Purchasing.—The agreement encourages VA to work with DOD on the feasibility of aligning their structures, statutory parameters, and regulatory guidance in order to increase buying power and reduce the cost of the prescription buying program, and to report findings to the Committees on Appropriations of both Houses of Congress.

Canadian Forces Base Gagetown.—Many National Guard veterans engaged in training activities at Canadian Forces Base (CFB) Gagetown in the 1950s and 1960s. The Committees are also aware that Veterans Affairs Canada approved one-time, lump sum payments to eligible veterans exposed to Agent Orange and other defoliants who served at CFB Gagetown; and that veterans who served there between June 20 and June 24, 1964, are currently eligible for an Agent Orange Registry Health Exam from the Veterans Health Administration. The agreement urges the Department to establish and maintain a health registry for American veterans who were stationed or underwent training at CFB Gagetown and who have subsequently experienced health problems which may be attributed to Agent Orange or other defoliants. The agreement further urges the Department to commission an independent study tasked with investigating the linkage between service at CFB Gagetown and the development of health problems and disease associated with exposure to Agent Orange.

Emergency Ambulance Reimbursement.—VA has made efforts to improve claims reimbursement processes for emergency ambulance service providers, however, continued problems with emergency ambulance transportation services result in lengthy claims payment delays or unwarranted financial burdens on veterans. The agreement urges the Department to take any necessary actions to process such claims using the "prudent layperson" standard for claims of emergency ambulance transportation of veterans to non-VA facilities. The agreement further directs the Department to provide a brief to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this Act to update the Committees on the Department's efforts to streamline reimbursement of claims by emergency ambulance service providers. This brief should include an assessment by VA of the impacts

of permitting conditional payments to ambulance service providers while seeking reimbursement from third-party payers where such payers have not made payment within 120 days of the date on which emergency ambulance services are provided, similar to Medicare program practices.

Pilot Programs for Agritherapy.—The agreement provides \$5,000,000 to continue a pilot program to train veterans in agricultural vocations, while also tending to behavioral and mental health needs with behavioral healthcare services and treatments by licensed providers at no fewer than three locations.

Lovell Federal Health Care Center.—The Captain James A. Lovell Federal Health Care Center Demonstration Project, established in 2010 under the National Defense Authorization Act for Fiscal Year 2010 (Public Law 111–84), is an innovative collaboration between VA and DOD. The Lovell Federal Health Care Center has significant potential to improve access, quality, and cost-effectiveness of healthcare delivery to veterans, servicemembers, and their families; and already serves as a valuable site demonstrating comprehensive cooperation and interoperability between VA and DOD. The important work of this integration effort must continue as the two Departments continue to roll out their respective electronic health record programs.

Alaska Federal Health Care Partnerships.—The Alaska VA Healthcare System leadership is investigating whether a partnership with DOD, the Coast Guard, and Tribal healthcare delivery could improve access and quality of care to all Federal healthcare beneficiaries in Alaska with substantial cost savings. The agreement encourages VA to consult with its Federal and Tribal counterparts, and with other stakeholders, including VA employee groups and community providers, with respect to the benefits which might accrue from adoption of this model, and to report periodically to the Committees on Appropriations of both Houses of Congress on the progress of these discussions.

Support for Vet Centers in Rural Communities.—Vet Centers across the country provide a broad range of counseling, outreach, and referral services to eligible veterans, active duty servicemembers, and their families, to include individuals with problematic discharges. The Committees believe Vet Centers are critical in rural communities, and the agreement encourages the Department to fully staff these resources.

Readjustment Counseling.— The Department's Vet Centers and Mobile Vet Centers provide important readjustment counseling services. The Department also partners with organizations that provide outdoor experiences for veterans as part of a continuum of care to support veterans in developing a community of support to treat combat-related injuries, including those related to behavioral health. The agreement directs the Department to submit a report to the Committees on Appropriations of both Houses of Congress no later than 120 days after enactment of this Act to highlight best practices of Vet Centers, including partnerships to provide outdoor experiences, and to include a plan to disseminate the findings, as well as incorporate into criteria for additional sites. The report should address whether successful programs should be replicated in other areas.

Telehealth Services.—The agreement includes an additional \$30,000,000 to increase telehealth capacity in rural and highly rural areas. The agreement directs VA to develop a plan to improve veteran and provider satisfaction, increase awareness of the telehealth program, and enhance adoption of telehealth by veterans and providers. The Department's plan should include actions that will be taken to make telehealth more accessible to patients in highly rural areas and be provided to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this Act.

Call Routing.—The Committees are still receiving reports that veterans calling their communitybased outpatient clinics (CBOC) to make an appointment are sometimes automatically routed to central call centers at VA medical centers with no follow-up by the local CBOCs after the initial call. The fiscal year 2019 Conference Report included a reporting requirement for VA to explain its guidance on call routing of the scheduling of appointments. The report that was submitted to the Committees failed to explain VA guidance and was rather useless for addressing this issue. Therefore, the agreement directs VA to provide a report that explains the Department's guidance on call routing of the scheduling of appointments. The agreement further directs VA to provide the Committees with an update on its call modernization efforts referenced in the March 20, 2019, Congressional Tracking Report on Call Routing. This report shall be submitted to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this Act.

Long-Term Care

Long-Term Care.—The agreement provides \$9,781,721,000, as requested by the Department for long-term care. This includes \$6,471,460,000 for institutional care and \$3,310,261,000 for non-institutional care. The Committees are aware of the aging veteran population and support long-term care that focuses on facilitating veteran independence, enhancing quality of life, and supporting the family members of veterans. As such, the agreement supports the Department's efforts to broaden veterans' options regarding non-institutional long-term care support and services, and to accommodate veterans' preferences in receiving home-based services, as well as community-based care, residential settings, nursing homes, and other services. The Committees acknowledge that the veteran population faces unique health risks and that each veteran requires an individualized approach to care, and VA is encouraged to continue cooperation with community, State, and Federal partners to expand and grow these programs.

Hospice Care.—As Vietnam-era veterans age, many of them are facing unique end-of-life challenges related to their combat experience that standard hospice care and palliative services are not fully equipped to address. Public Law 115–244 urged VA to undertake a pilot program to develop techniques, best practices, and support mechanisms to improve end-of-life care for combat veterans and Vietnam-era veterans. Due to the lack of meaningful advancement toward addressing the unique needs of Vietnam veterans, the agreement directs VA to carry out this pilot program and to engage non-profit hospice and palliative care providers with Vietnam veteran-centric programs in implementing the pilot program. The Committees are aware that organizations such as the non-profit, National Partnership for Hospice Innovation, are developing programs designed to meet the specific end-of-life care needs for Vietnam-era veterans and strongly reiterates that such an approach could be beneficial to Iraq, Afghanistan, and Syria combat veterans in the future. The agreement directs the Department to submit a report on this effort to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this Act.

Domiciliary Care Claims for Veterans with Early-Stage Dementia.—Changes in VA's processing and treatment of domiciliary care claims has led to some veterans with early-stage dementia who were earlier ruled eligible for VA domiciliary care to now be deemed ineligible. The Department has taken efforts to provide limited equitable relief for current veteran patients previously deemed

eligible for domiciliary care. VA is directed to provide a report to the Committees on Appropriations of both Houses of Congress no later than 90 days after enactment of this Act on the Department's plan to address care for all impacted veterans with early-stage dementia.

MEDICAL COMMUNITY CARE

The agreement provides \$17,131,179,000 in advance fiscal year 2021 funding for Medical Community Care, with \$2,000,000,000 available until September 30, 2022. The agreement provides an additional \$4,521,400,000 above the fiscal year 2020 advance appropriation for the Medical Community Care account, of which \$615,000,000 shall be from unobligated balances from the Veterans Choice Fund.

MEDICAL SUPPORT AND COMPLIANCE

The agreement provides \$7,914,191,000 in advance for fiscal year 2021 for Medical Support and Compliance and makes \$150,000,000 of the advance funding available through fiscal year 2022. The agreement provides an additional \$98,800,000 above the fiscal year 2020 advance appropriation for the Medical Support and Compliance account.

MEDICAL FACILITIES

The agreement provides \$6,433,265,000 in advance for fiscal year 2021 for Medical Facilities. Of the advance funding, \$250,000,000 is made available through fiscal year 2022.

The agreement provides \$10,000,000 for women's health and mental health non-recurring maintenance (NRM) projects. Within the mental health NRM projects, the agreement directs VA to prioritize construction to increase the number of beds available for overnight mental health treatment for veterans. The agreement further directs the Department to submit an expenditure plan detailing the planned use of funds, and to report on specific measures it takes to track and prioritize the physical and cultural transformation within VA facilities to better serve women veterans.

Community-Based Outpatient Clinic in Bakersfield, California.—The latest delay in building a clinic in Bakersfield, resulting from the cancellation of Lease No. 36C10F18L3394 due to errors made by the Department, is extremely concerning. On November 20, 2019, the Secretary provided a revised timeline to build the new clinic, but future protests may result in additional delays. The agreement directs the Secretary to expeditiously execute the proposed timeline, including beginning site work as soon as possible in 2020 and to provide monthly reports to the Committees on Appropriations of both Houses of Congress detailing the Department's assessment on maintaining the timeline provided on November 20th, until the new clinic in Bakersfield is activated.

Use of Smart Technologies.—The Department is encouraged to work with industry leaders on the use of smart technologies to improve VA facilities.

War Related Illness and Injury Study Centers (WRIISC).—In lieu of the direction provided in House Report 116-63, the Committees direct VA to conduct a feasibility study to establish a WRIISC focused on gender-based differences in the development, diagnosis, and treatment of exposure-related diseases.

VHA Infrastructure Planning and Facility Assessments.—As VA implements the VA MISSION Act and begins to make decisions related to community capacity and the appropriate size of VA's footprint, the agreement maintains that strong VHA facilities are critical to a high-performing integrated health network for veterans. Unfortunately, despite significant investments from Congress in recent years to address major and minor construction and non-recurring maintenance, the Department's execution of these funds to upgrade or expand treatment facilities for veterans has not moved as quickly as intended. The agreement urges VA to look for ways to be timelier in its execution of dollars and more flexible in efforts to meet the evolving healthcare needs of veterans. The agreement directs the Department to provide to the Committees on Appropriations of both Houses of Congress a report on the biggest impediments to executing construction and leasing projects in a more efficient and effective manner within 90 days of enactment of this Act. The report should also include an update on the market assessment being conducted pursuant to the VA MISSION Act.

Energy Savings.—The agreement encourages VA to use energy-related Energy Savings Performance Contracting and Utility Energy Service Contracting in concert with appropriated funds to leverage more investment from the private sector for any VA renovation project for which energy systems are involved.

Rate of Return on Alternative Energy Investments.—The Committees are concerned about VA's procurement of alternative energy and the potential for the technology to be obsolete before full return on investment is achieved. Therefore, the agreement encourages the Secretary to assure that any new alternative energy project has a return on investment less than or equal to 10 years.

MEDICAL AND PROSTHETIC RESEARCH

The agreement provides \$800,000,000 for Medical and Prosthetic Research, available until September 30, 2021. Bill language is included to ensure that the Secretary allocates adequate funding for prosthetic research specifically for female veterans and for toxic exposures.

The Committees remain highly supportive of this program and recognize its importance both in improving healthcare services to veterans and recruiting and retaining high quality medical professionals in the Veterans Health Administration. The agreement 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.

Neural-Enabled Prosthetics.—The Committees understand the uniqueness of limb trauma injuries sustained by servicemembers in combat and support additional research in this area. In lieu of the directive in House Report 116-63, the agreement directs VA to continue its efforts to fund and conduct research that will design and develop technology to offset the effects of limb amputation, orthopedic injury and disease, neuropathic pain, and other neurodegenerative diseases by partnering with colleges and universities that specialize in these fields and provide a report on the opportunities to expand this field of inquiry within 180 days of enactment of this Act.

Cancer Moonshot.—The agreement supports the Department's efforts to utilize advances in genomic science to provide targeted treatment to veterans. The Department has identified prostate cancer, triple-negative breast cancer, and colorectal cancer as areas of priority. Due to the prevalence of various skin cancers among servicemembers, the agreement directs that skin cancer be included as well.

Enewetak Atoll Registry Research.—Thousands of veterans served on the Enewetak Atoll to clean up the island following its use for nuclear weapons testing. There are many instances of veterans who conducted the cleanup suffering serious health problems, such as brittle bones, cancers, and birth defects in their children. The agreement urges the Department to study whether there is a connection between certain illnesses and the potential exposure of individuals to radiation related to service at Enewetak Atoll between January 1, 1977, and December 31, 1980.

Rare Cancer Research.—The agreement encourages the Department to support research to evaluate the health status of servicemembers from their time of deployment to Iraq and Afghanistan over many years to determine their incidence of chronic diseases including cancers that tend not to show up for decades. Furthermore, the Department is encouraged to establish a collaboration with the Department of Defense to examine the impact of rare cancers on those who serve and fund research in delivering treatments for rare cancers that take a platform-agnostic approach to developing new therapeutics.

Gulf War Illness Studies.—The agreement recommends that the Department continue to conduct epidemiological studies regarding the prevalence of Gulf War illness, morbidity, and mortality in Persian Gulf War veterans and the development of effective treatments, preventions, and cures. The agreement urges the Department to publish disease-specific mortality data related specifically to Persian Gulf War veterans and encourages the Department to utilize the term, "Gulf War illness". The agreement urges the Secretary to consider revising and updating the Clinical Practice Guideline for Chronic Multi-symptom Illness consistent with the July 2011 Veterans Health Initiative, "Caring for Gulf War veterans," and to focus on recent Gulf War illness treatment research findings and ongoing Gulf War illness treatment research direction. Furthermore, the agreement encourages VA to strengthen the training of primary, specialty, and mental healthcare providers on Gulf War illness.

VA/Department of Energy Computing Collaboration.—The agreement supports ongoing research between VA and the Department of Energy's National Laboratories.

Suicide Prevention.—VA is strongly encouraged to work with DOD's Military Health System to place high priority on the deployment of novel and innovative technologies to prevent suicides and report in the fiscal year 2021 budget request on outcomes of the effort.

Longitudinal Study of Diagnostic Tools or Biomarkers for Brain Conditions.—The agreement encourages the Department to devise a longitudinal study to identify and validate two non-survey diagnostic tools or biomarkers for brain health conditions including TBI and PTSD for clinical use at VA medical facilities by 2023, in coordination with the National Research Action Plan. Additionally, the agreement encourages VA to consider the full range of brain health conditions, and to seek the consultation of non-profit and non-governmental research organizations currently engaged in research for servicemember and veteran brain health conditions for research collaboration, identification, and validation. Reports on research shall be made publicly available and submitted to the Committees on Appropriations of both Houses of Congress no later than 60 days after completion.

Rapid Cerebral Therapeutic Hypothermia.—The agreement encourages the Department to determine whether VA clinicians and physicians have the necessary equipment to rapidly administer cerebral therapeutic hypothermia.

NATIONAL CEMETERY ADMINISTRATION

The agreement provides \$329,000,000 for the National Cemetery Administration (NCA). Of the amount provided, not to exceed 10 percent is available until September 30, 2021.

Committal Service Shelters.—The agreement directs the Department to review the feasibility and appropriateness of expanding committal shelters at State veteran cemeteries to be able to accommodate at least 60 people in comfort with a platform and sound system for conducting services, private bathrooms, and temperature control. The agreement further directs the Department to provide a report to

the Committees on Appropriations of both Houses of Congress on the findings of this review, including the cost associated with making these changes, within 180 days of enactment of this Act.

National Memorial Cemetery of the Pacific.—Currently, the Pacific Region of the National Cemetery Administration performs more annual interments than any other region, but has the fewest number of national cemeteries. In order to provide appropriate burial space to veterans in the Pacific, the agreement directs the Department to conduct a feasibility review for the creation of a new national cemetery in the Pacific region, and to report the findings to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this Act.

> DEPARTMENTAL ADMINISTRATION GENERAL ADMINISTRATION (INCLUDING TRANSFER OF FUNDS)

The agreement provides \$355,911,000 for General Administration. Of the amount provided, not to exceed 10 percent is available for obligation until September 30, 2021. The agreement continues to include bill language permitting the transfer of funds from this account to General Operating Expenses, Veterans Benefits Administration.

Pro-Bono Legal Services.—The Committees support the Department's work with law schools to assist veterans, which helps both the students and veterans.

Lobbying Congress.—The agreement reminds the Department that lobbying Congress in support of legislation imagined by VA, and not at the request for technical assistance from Congress, is not an appropriate use of taxpayer resources. Further, the agreement directs the Department to make all centraloffice based employees of the Office of Public Affairs receive training on the Hatch Act and its application to ensure official Department resources are being used in a nonpartisan manner.

Office	(\$ in thousands of
	dollars)
Office of the Secretary	\$14,715
Office of General Counsel	112,209
Office of Management	63,992
Office of Human Resources	69,813
Office of Enterprise Integration	28,416
Office of Operations, Security and Preparedness	26,037
Office of Public and Intergovernmental Affairs	12,663
Office of Congressional and Legislative Affairs	5,900
Office of Acquisition, Logistics, and Construction	0
Veterans Experience Office	0
Office of Accountability and Whistleblower Protection	22,166
Total, General Administration	355,911

The agreement provides funding for General Administration in the amounts specified below:

The Secretary may alter these allocations if the Committees have been notified and written approval is provided.

Veterans Experience Office.—The agreement provides that the Office continue to be funded through reimbursable agreements.

BOARD OF VETERANS APPEALS

The agreement provides \$182,000,000 for the Board of Veterans Appeals, of which not to exceed 10 percent shall remain available until September 30, 2021.

Appeals Process.—The agreement directs the Board to develop a plan to address the backlog of hearing requests, which includes expanded remote access for rural veterans, and to identify any necessary information technology solutions. The agreement directs the Board to provide this plan to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this Act.
INFORMATION TECHNOLOGY SYSTEMS (INCLUDING TRANSFER OF FUNDS)

The agreement provides \$4,371,615,000 for the Information Technology Systems account. This amount includes funding for systems supporting implementation of the Blue Water Navy Vietnam Veterans Act and other anticipated needs. The agreement includes \$1,204,238,000 for staff salaries and expenses, \$2,739,597,000 for operation and maintenance of existing programs, and \$427,780,000 for program development.

The agreement makes not to exceed 3 percent of pay and associated costs funding available until the end of fiscal year 2021; not to exceed 5 percent of operations and maintenance funding available until the end of fiscal year 2021 and all IT systems development funding available until the end of fiscal year 2021.

The agreement continues language permitting funding to be transferred among the three IT subaccounts, subject to approval from the Committees.

The agreement continues language providing that funding may be transferred among development projects or to new projects subject to the Committees' approval.

The agreement continues language indicating that no development project may be increased or decreased by more than \$1,000,000 prior to receiving approval of the Committees or a period of 30 days has elapsed.

VA is dealing with an aging IT infrastructure and antiquated systems that have contributed to issues affecting veterans, their families, and third parties with whom VA has agreements. Additionally, the Department continues to identify significant IT costs to support new and critical initiatives, and to comply with requirements that have been passed into law. The agreement provides an increase above the President's request for IT and therefore assumes that the Department will, within the allocation, be able to secure an appropriate IT system for the Office of Accountability and Whistleblower Protection to facilitate tracking and reporting on data as required by law, and be able to certify the system necessary to

expand the Caregivers Program. Due to the number of outdated legacy systems, the agreement encourages the Department to consider decommissioning systems that are no longer in use and requires the Department to provide notification to the Committees on Appropriations of both Houses of Congress when such action is taken. The agreement directs the Department to include in future budget submissions an Information Technology Decommissioning Report that outlines what legacy systems will be decommissioned during the fiscal year.

Website Accessibility.—The agreement encourages the Department to review its information technology systems to ensure compliance with the law (29 U.S.C. 794), encompassing the Department's websites, including files attached to those websites, web-based applications and kiosks at medical facilities. No later than 180 days after enactment of this Act, the agreement directs the Department to report to the Committees on Appropriations of both Houses of Congress on the findings of the review, as well as a plan to become compliant with 29 U.S.C. 794.

This table is intended to serve as the Department's approved list of development projects; any requested changes are subject to reprogramming requirements.

1	Clinical Applications	Amount
A	My HealtheVet	\$10,580
В	Healthcare Administration Systems	9,559
С	Health Data Interoperability	8,901
D	Registries	3,870
	Subtotal, Clinical Applications	32,910
2	Health Management Platform	
A	Community Care	42,868
В	Patient Record System	9,789
С	Digital Health Platform	9,620
D	Purchased Care	7,060
E	Telehealth	5,830
F	Pharmacy	5,523
	Subtotal, Health Management Platform	80,690

Information Technology Development Projects (\$ in thousands)

3	Benefits Systems	
A	Veterans Customer Experience	62,569
В	Benefits Systems	41,933
С	Education Benefits	17,070
D	Veterans Benefits Management	33,417
E	C&P Claims	4,267
F	Benefits Appeals	4,067
	Subtotal Benefits Systems	163,323
4	Memorial Affairs	
A	Memorials Automation	13,877
	Subtotal, Memorial Affairs	13,877
5	Other IT Systems	
A	Financial and Acquisition Management Modernization	57,695
В	Supply Chain Management	36,785
С	Innovations	6,000
	Subtotal, Other IT Systems	100,480
6	Cyber Security	
A	Cyber Security	16,600
	Subtotal, Cyber Security	16,600
7	Information/Infrastructure Management	
A	Data Integration and Management	19,900
	Subtotal, Information/Infrastructure Management	19,900
	Total IT Development	427,780

VETERANS ELECTRONIC HEALTH RECORD

The agreement provides \$1,500,000,000 for Veterans Electronic Health Record for activities related to the development and rollout of VA's Electronic Health Record Modernization (EHRM) initiative, the associated contractual costs, and the salaries and expenses of employees hired under titles 5 and 38, United States Code.

EHRM Initiative.—The agreement includes a substantial increase of \$393,000,000 for the EHRM initiative to provide benefits to veterans and better management tools for the Department. While the Committees remain supportive of the EHRM initiative, as with any acquisition of this size and

magnitude, there are implementation concerns, including maintaining budget, scope, implementation and deployment schedules, security, reporting, and interoperability. As such, the agreement directs the Secretary to continue to provide quarterly reporting of obligations, expenditures, and deployment implementation by facility. Moreover, the agreement directs the Department to continue quarterly briefings on performance milestones, costs, and changes to implementation and management plans. The bill maintains a provision that prohibits obligation of funds inconsistent with deployment schedules provided to the Committees on Appropriations. Henceforth, the Secretary is directed to provide an accurate, up-to-date deployment schedule at each quarterly briefing. The Secretary is not provided transfer authority, as requested, and is directed to continue using this account as the sole source of funding within the Department for EHRM. Further, the agreement continues to direct the Secretary to manage EHRM at the headquarters level in the Office of the Deputy Secretary.

Government Accountability Office (GAO) Review.—The agreement continues the fiscal year 2019 directive to GAO to conduct quarterly performance reviews of EHRM deployment and to report to the Committees on Appropriations each quarter.

VA/DOD Interoperability.—The need for a fully functional, adaptable and interoperable electronic health record system cannot be understated, especially as VA shifts its model of care to include the expanded use of community providers. However, the Department and DOD do not appear to be placing sufficient priority and urgency on this matter. As such, VA and DOD are directed to expeditiously utilize the joint Federal Electronic Health Record Modernization Program Office to establish clear and agreed-upon metrics and goals for interoperability, as well as timeframes for meeting these goals. The Federal Electronic Health Record Modernization Program Office is directed to incorporate metrics, goals, and timeframes in the joint office's charter and to provide the charter to the Committees on Appropriations of both Houses of Congress within 30 days of enactment of this Act. The Secretary is directed to provide updates from the joint office, including any plans to alter its charter or processes, in the quarterly reports and briefings provided to the Committees on Appropriations.

OFFICE OF INSPECTOR GENERAL

The agreement provides \$210,000,000 for the Office of Inspector General, which is \$3,000,000 above the request. Of the amount provided, not to exceed 10 percent is available for obligation until September 30, 2021. The additional funds are provided to ensure robust oversight regarding implementation of the VA MISSION Act and the Electronic Health Record Modernization initiative.

The Inspector General is strongly encouraged to undertake and complete investigations in a timely manner and share information with the Department, the Department of Justice, and other entities as appropriate.

Washington DC Veterans Affairs Medical Center.—The agreement urges the Inspector General to dedicate all necessary resources to provide rigorous oversight of the Washington DC Veterans Affairs Medical Center, a facility that has been plagued with management problems.

CONSTRUCTION, MAJOR PROJECTS

The agreement provides \$1,235,200,000 for Construction, Major Projects. The agreement makes this funding available for five years, except that \$198,600,000 is made available until expended, of which \$35,000,000 shall be available for seismic improvement projects.

Challenges in Executing Construction Projects.—The Committees are concerned by VA's inability to execute appropriated construction dollars in a timely manner. Based on its annual Strategic Capital Investment Planning process, VA's capital needs over the next 10 years may require resources up to \$72,000,000,000 to address. However, VA has been challenged to execute even a small fraction of that amount in a given fiscal year. Therefore, the agreement directs VA to provide within 240 days of enactment of this Act a written report outlining VA's short- and long-term plans to expand and strengthen its internal and contract capacity to execute its construction budget across major, minor, nonrecurring maintenance, and leasing projects efficiently and effectively. This report should provide a holistic, VA-wide strategic plan incorporating the needs of VHA, the Office of Acquisition, Logistics & Construction, the Office of Management, and other relevant VA administrations/offices, to address the

issue, including long-term staffing needs, the cost of any temporary spaces, any legislative and organizational changes, and requirements to improve and streamline. The report should also look at the accuracy of cost estimates used for planning construction and leasing projects, the impact of underestimating costs on project timeframes, and any actions that can be taken to improve the accuracy of estimates of future projects to ensure timely execution.

Communities Helping Invest through Property and Improvements Needed for Veterans Pilot.— The agreement encourages the Department to utilize the authority granted by the Communities Helping Invest through Property and Improvements Needed for Veterans Act of 2016 (Public Law 114–294) to fulfill the Congressional intent and initiate additional projects. Additionally, the Committees believe that the Department should prioritize projects that result in a public-private partnership between VA and a non-Federal entity. In doing so, the agreement strongly encourages the Department to look at projects that would avoid VA duplicating services, and rather address gaps in necessary services for veterans.

The agreement funds the following items as requested in the budget submission:

Location	Description	Amount
Veterans Health		
Administration (VHA):		
New York, NY	Manhattan VAMC Flood Recovery	\$150,000
Bay Pines, FL	Inpatient/Outpatient Improvements	30,000
San Juan, PR	Seismic Corrections – Building #1	30,000
San Diego, CA	SCI & Seismic Corrections	20,000
	Correct Seismic Deficiencies & Expand	
Reno, NV	Clinical Services Building	10,000
Louisville, KY	New Medical Facility	410,000
West Los Angeles, CA	Build New Critical Care Center	25,000
Alameda, CA	Outpatient Clinic & National Cemetery	26,000
Advance Planning and		
Design Fund	Various Stations	72,000
Asbestos	Various Stations	12,000
Construction and Facilities		
Management Staff	Various Stations	88,700
Judgment Fund	Various Stations	25,000

Construction, Major Projects (\$ in thousands)

Non-Dept. Fed. Entity		9 M 2 # 4 20 m
Project Management Support	Various Stations	120,000
Seismic Corrections	Various Stations	35,000
Subotal, VHA		1,053,700
National Cemetery		
Administration (NCA):		
Bayamon, PR	Replacement Cemetery (Morovis)	10,000
	Gravesite Expansion & Cemetery	
Riverside, CA	Improvements	3,000
Elmira, NY	Western New York Cemetery	10,000
Houston, TX	Gravesite Expansion	34,000
Bourne, MA	Massachusetts Phase 4 Expansion	32,000
Dallas, TX	Dallas National Cemetery Expansion	28,000
Advance Planning and		
Design Fund		35,000
NCA Land Acquisition		20,000
Subtotal, NCA		172,000
General Admin	Staff Offices Advance Planning Fund	9,500
Major Construction , Total		1,235,200

CONSTRUCTION, MINOR PROJECTS

The agreement provides \$398,800,000 for Construction, Minor Projects. The agreement makes this funding available for five years.

The agreement encourages the Department to prioritize construction for expanding genderspecific care for women and mental health programs. 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

The agreement provides \$90,000,000 for Grants for Construction of State Extended Care Facilities, to remain available until expended.

GRANTS FOR CONSTRUCTION OF VETERANS CEMETERIES

The agreement provides \$45,000,000 for Grants for Construction of Veterans Cemeteries, to remain available until expended.

ADMINISTRATIVE PROVISIONS (INCLUDING TRANSFERS AND RESCISSIONS OF FUNDS)

The agreement includes section 201 allowing for the transfer of funds among the three mandatory accounts.

The agreement includes section 202 allowing for the transfer of funds among the four medical accounts.

The agreement includes section 203 allowing salaries and expenses funds to be used for the hire of passenger vehicles, lease of facilities or land, and purchase of uniforms.

The agreement includes section 204 restricting the accounts that may be used for the acquisition of land or the construction of any new hospital or home.

The agreement includes section 205 limiting the use of funds in the Medical Services account only for entitled beneficiaries unless reimbursement is made to the Department.

The agreement includes section 206 allowing for the use of certain mandatory appropriations accounts for payment of prior year accrued obligations for those accounts.

The agreement includes section 207 allowing the use of appropriations available in this title to pay prior year obligations.

The agreement includes section 208 allowing the Department to use surplus earnings from the National Service Life Insurance Fund, the Veterans' Special Life Insurance Fund, and the United States Government Life Insurance Fund to administer these programs.

The agreement includes section 209 allowing the Department to cover the administrative expenses of enhanced-use leases and provides authority to obligate these reimbursements in the year in which the proceeds are received.

The agreement includes section 210 limiting the amount of reimbursement the Office of Resolution Management, the Office of Employment Discrimination Complaint Adjudication, and the Office of Diversity and Inclusion can charge other offices of the Department for services provided.

The agreement includes section 211 requiring the Department to collect third-party payer information for persons treated for a non-service-connected disability.

The agreement includes section 212 allowing for the use of enhanced-use leasing revenues for Construction, Major Projects and Construction, Minor Projects.

The agreement includes section 213 outlining authorized uses for Medical Services funds.

The agreement includes section 214 allowing for funds deposited into the Medical Care Collections Fund to be transferred to the Medical Services and Medical Community Care accounts.

The agreement includes section 215 which allows Alaskan veterans to use medical facilities of the Indian Health Service or tribal organizations.

The agreement includes section 216 permitting the transfer of funds from the Department of Veterans Affairs Capital Asset Fund to the Construction, Major Projects and Construction, Minor Projects accounts and makes those funds available until expended.

The agreement includes section 217 requiring the Secretary to submit financial status quarterly reports for each of the Administrations in the Department. The specific data requested is similar to that requested in the fiscal year 2017 conference report.

The agreement includes section 218 requiring the Department to notify and receive approval from the Committees of any proposed transfer of funding to or from the Information Technology Systems account and limits the aggregate annual increase in the account to no more than 10 percent of the funding appropriated to the account in this Act.

The agreement includes section 219 providing up to \$314,409,000 of specified fiscal year 2020 funds for transfer to the Joint DOD-VA Medical Facility Demonstration Fund.

The agreement includes section 220 which permits up to \$322,931,000 of specified fiscal year 2021 medical care funding provided in advance to be transferred to the Joint DOD-VA Medical Facility Demonstration Fund.

The agreement includes section 221 which authorizes transfers from the Medical Care Collections Fund to the Joint DOD-VA Medical Facility Demonstration Fund.

The agreement includes section 222 which transfers at least \$15,000,000 from VA medical accounts to the DOD-VA Health Care Sharing Incentive Fund.

The agreement includes section 223 prohibiting funds from being used to replace the current system by which VISNs select and contract for diabetes monitoring supplies and equipment.

The agreement includes section 224 requiring that the Department notify the Committees of bid savings in a major construction project of at least \$5,000,000, or 5 percent, whichever is less, 14 days prior to the obligation of the bid savings and describe their anticipated use.

The agreement includes section 225 which prohibits VA from increasing the scope of work for a major construction project above the scope specified in the original budget request unless the Secretary receives approval from the Committees.

The agreement includes section 226 requiring a quarterly report from each VBA regional office on pending disability claims, both initial and supplemental; error rates; the number of claims processing personnel; corrective actions taken; training programs; and review team audit results. It also requires a quarterly report on the number of appeals pending at the Veterans Benefits Administration and the Board of Veterans Appeals.

The agreement includes section 227 requiring VA to notify the Committees 15 days prior to any staff office relocations within VA of 25 or more full-time-equivalent staff.

The agreement includes section 228 requiring the Secretary to report to the Committees each quarter about any single national outreach and awareness marketing campaign exceeding \$1,000,000.

The agreement includes section 229 permitting the transfer to the Medical Services account of fiscal year discretionary 2020 funds appropriated in this Act or available from advance fiscal year 2020 funds already appropriated, except for funds appropriated to General Operating Expenses, VBA, to address possible unmet, high priority needs in Medical Services, upon approval of the Committees.

The agreement includes section 230 permitting the transfer of funding between the General Operating Expenses, Veterans Benefits Administration account and the Board of Veterans Appeals account upon approval of the Committees.

The agreement includes section 231 prohibiting the Secretary from reprogramming funds in excess of \$7,000,000 among major construction projects or programs unless the reprogramming is approved by the Committees.

The agreement includes section 232 mandating certain professional standards for the veterans crisis hotline and requiring a study to assess its effectiveness.

The agreement includes section 233 restricting funds from being used to close medical facilities in the absence of a national realignment strategy.

The agreement includes section 234 prohibiting the use of funds, from the period October 1, 2018 through January 1, 2024, in contravention of VHA's May 10, 2017 guidelines on breast cancer screening.

The agreement includes section 235 addressing the use of funding for assisted reproductive technology treatment and adoption reimbursement.

The agreement includes section 236 prohibiting any funds from being used in a manner that is inconsistent with statutory limitations on outsourcing.

The agreement includes section 237 pertaining to exceptions for Indian- or Native Hawaiianowned businesses contracting with VA.

The agreement includes section 238 directing the elimination over a series of years of the use of social security numbers in VA programs.

The agreement includes section 239 referencing the provision in the 2017 Appropriations Act pertaining to certification of marriage and family therapists.

The agreement includes section 240, which prohibits funds from being used to transfer funding from the Filipino Veterans Equity Compensation Fund to any other VA account.

The agreement includes section 241 permitting funding to be used in fiscal years 2020 and 2021 to carry out and expand the child care pilot program authorized by section 205 of Public Law 111-163.

The agreement includes section 242 prohibiting VA from using funds to enter into an agreement to resolve a dispute or claim with an individual that would restrict the individual from speaking to

members of Congress or their staff on any topic, except those required to be kept secret in the interest of national defense or the conduct of foreign affairs.

The agreement includes section 243 referencing language in the 2017 Appropriations Act requiring certain data to be included in budget justifications for major construction projects.

The agreement includes section 244 prohibiting the use of funds to deny the Inspector General timely access to information, unless a provision of law expressly refers to the Inspector General and expressly limits such access.

The agreement includes section 245 referencing language in the 2017 Appropriations Act regarding the verification of service for coastwise merchant seamen.

The agreement includes section 246 requiring the ratio of veterans to full-time employment equivalents in any rehabilitation program not to exceed 125 veterans to one full-time employment equivalent.

The agreement includes section 247 prohibiting funding from being used in a manner that would increase wait times for veterans at medical facilities.

The agreement includes section 248 prohibiting the use of funds in fiscal year 2020 to convert any program which received specific purpose funds in fiscal year 2019 to a general purpose-funded program without the approval of the Committees on Appropriations of both Houses of Congress at least 30 days prior to any such action.

The agreement includes section 249 addressing animal research at the Department of Veterans Affairs.

The agreement includes section 250 prohibiting the closure of the CBOC in Bainbridge, New York until the Secretary submits a completed market area assessment to the Committees on Appropriations of both Houses of Congress.

The agreement includes section 251 directing VA to submit a plan to reduce the chances that clinical mistakes by VA employees will result in adverse events that require institutional or clinical disclosures.

The agreement includes section 252 requiring the Department to update the Planning and Activating CBOC handbook every five years and provide guidance and training to employees on each update of the handbook.

The agreement includes section 253 rescinding funds.

The agreement includes section 254 extending the VSO wellness pilot program authorized in section 252 of the Consolidated Appropriations Act, 2018 (P.L. 155–141) until 2022.

The agreement includes section 255 rescinding unobligated emergency supplemental funds.

The agreement includes section 256 to allow fiscal year 2020 and 2021 "Medical Community Care" funds to be used to cover obligations that otherwise would be paid by the Veterans Choice Fund, if necessary.

The agreement includes section 257 clarifying fiscal year 2020 "Medical Services" funds should not be used for aid to State homes.

TITLE III

RELATED AGENCIES AMERICAN BATTLE MONUMENTS COMMISSION SALARIES AND EXPENSES

The agreement provides \$84,100,000 for Salaries and Expenses of the American Battle Monuments Commission (ABMC), an increase of \$9,000,000 above the budget request to support ABMC's unfunded requirements for high-priority projects and address the maintenance backlog at existing monuments and cemeteries. The additional funds are provided to accelerate the Commission's five-year plan, not only to maintain the cemeteries and monuments honoring America's war dead, but also to preserve and communicate these veterans' stories of courage and sacrifice.

American Battle Monuments Commission.— On October 22, 2018, ABMC submitted a plan to spend \$28,900,000 in additional funding that Congress appropriated in fiscal year 2019 to support ABMC's unfunded cemetery requirements. ABMC's plan includes \$20,400,000 for the Honolulu interpretive center at the National Memorial Cemetery of the Pacific, known as the "Punchbowl." The National Cemetery Administration (NCA) has identified a site for the interpretive center adjacent to its administrative facility that will serve ABMC's interpretive mission without affecting burial space inside the cemetery. ABMC is directed, in conjunction with NCA, to execute the funding appropriated for projects identified in its October 2018 spend plan to Congress and to complete the proposed siting and construction feasibility evaluation at the administrative facility-adjacent location to ensure the interpretive center remains in balance with the long-term mission and legacy of the Punchbowl.

FOREIGN CURRENCY FLUCTUATIONS ACCOUNT

The agreement provides such sums as necessary for the Foreign Currency Fluctuations Account.

UNITED STATES COURT OF APPEALS FOR VETERANS CLAIMS SALARIES AND EXPENSES

The agreement provides \$35,400,000 for Salaries and Expenses for the United States Court of Appeals for Veterans Claims.

DEPARTMENT OF DEFENSE--CIVIL CEMETERIAL EXPENSES, ARMY SALARIES AND EXPENSES

The agreement provides \$80,800,000 for Cemeterial Expenses, Army - Salaries and Expenses. This amount is equal to the fiscal year 2019 enacted level and \$10,000,000 above the budget request. Within that amount, up to \$15,000,000 in funding is available until September 30, 2022.

The budget request for Arlington National Cemetery's operating account has been held artificially flat for a number of years, and this action is having a deleterious effect on the Cemetery's performance and ability to meet its mission. It is unacceptable that the Cemetery's budget requests are continually inadequate to maintain the current level of services. The Cemetery cannot be underresourced, and accordingly, the bill provides an additional \$10,000,000 to correct this deficiency.

This agreement reflects unwavering support for the Cemetery and the successful completion of the Cemetery's truly unique and honored mission. Accordingly, the Secretary of the Army is again directed to include this increase in the Cemetery's baseline budget and ensure future budget requests provide ample resources for the Cemetery, including funding to complete the planned Southern Expansion and ensure that the life of our Nation's most prestigious cemetery is extended into the 2050 timeframe.

ARMED FORCES RETIREMENT HOME TRUST FUND

The agreement provides a total of \$75,300,000 for the Armed Forces Retirement Home (AFRH), an increase of \$11,000,000 above the fiscal year 2019 enacted level and the budget request. The increase is intended to support high-priority capital projects.

AFRH–W Development.—The Committees recognize the critical role of AFRH in providing residences and related services for certain retired and former members of the Armed Forces and support AFRH's efforts to lease 80 acres of underutilized land on its Washington, D.C., campus. AFRH is

directed to submit quarterly reports to the Committees on Appropriations of both Houses of Congress outlining the redevelopment progress against the AFRH-W Master Plan, including the status of the lease negotiations and the financial transparency of the development project.

ADMINISTRATIVE PROVISION

The agreement includes section 301 allowing Arlington National Cemetery to deposit and use funds derived from concessions.

TITLE IV

OVERSEAS CONTINGENCY OPERATIONS

DEPARTMENT OF DEFENSE

The agreement includes title IV, Overseas Contingency Operations, for military construction projects related to the Global War on Terrorism and the European Deterrence/Reassurance Initiative.

MILITARY CONSTRUCTION, ARMY

The agreement includes \$111,968,000 for "Military Construction, Army", for planning and design and construction in support of Overseas Contingency Operations and the European Deterrence/Reassurance Initiative.

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

The agreement includes \$94,570,000 for "Military Construction, Navy and Marine Corps", for planning and design and construction in support of Overseas Contingency Operations and the European Deterrence/Reassurance Initiative.

MILITARY CONSTRUCTION, AIR FORCE

The agreement includes \$391,988,000 for "Military Construction, Air Force", for planning and design and construction in support of Overseas Contingency Operations and the European Deterrence/Reassurance Initiative.

MILITARY CONSTRUCTION, DEFENSE-WIDE

The agreement includes \$46,000,000 for "Military Construction, Defense-Wide", for planning and design and construction in support of Overseas Contingency Operations and the European Deterrence/Reassurance Initiative.

ADMINISTRATIVE PROVISION

The agreement includes section 401 which requires the Department of Defense to provide a future year defense program for European Deterrence/Reassurance Initiative to the congressional defense committees.

Insert 76a-b

OVERSEAS CONTINGENCY OPERATIONS (AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	FINAL BILL
GERMANY		
DEFENSE-WIDE		
GEMERSHEIM		
EDI: LOGISTICS DISTRIBUTION CENTER ANNEX	46,000	
TOTAL, GERMANY	46,000	
GUANTANAMO BAY, CUBA		
GUANTANAMO BAY NAVAL STATION		
	11,800	
OCO: HIGH VALUE DETENTION FACILITY	88,500	
	22,000	22,000
TOTAL, CUBA	122,300	33,800
ICELAND		
AIR FORCE KEFLAVIK		
	18,000	18,000
EDI: BEDDOWN SITE PREPARATION	7,000	7,000
EDI: EXPAND PARKING APRON	32,000	
TOTAL, ICELAND	57,000	57,000
JORDAN		
AIR FORCE		
AZRAQ AIR TRAFFIC CONTROL TOWER		24,000
MUNITIONS STORAGE AREA.		42,000
TOTAL, JORDAN		66,000
SPAIN		
NAVY		
ROTA EDI: IN-TRANSIT MUNITIONS FACILITY	9,960	9,960
EDI: JOINT MOBILITY CENTER.	46,840	46,840
EDI: SMALL CRAFT BERTHING FACILITY	12,770	12,770
AIR FORCE MORON		
EDI: HOT CARGO PAD	8,500	8.500
-		
TOTAL, SPAIN	78,070	78,070





OVERSEAS CONTINGENCY OPERATIONS (AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	FINAL BILL
WORLDWIDE UNSPECIFIED		
EDI: BULK FUEL STORAGE.	36,000	36,000
EDI: INFORMATION SYSTEMS FACILITY	6,200	6,200
UNSPECIFIED WORLDWIDE CONSTRUCTION		
ARMY		
MAJOR CONSTRUCTION (EMERGENCY)	9,20D,000	
	0,200,000	
AIR FORCE		
EDI: ECAOS DABS/FEV EMEDS STORAGE	107,000	107,000
EDI: HOT CARGO PAD	29,000	29,000
EDI: MUNITIONS STORAGE AREA	39,000	39,000
PLANNING AND DESIGN		
ARMY	19,498	30.748
NAVY	25,000	25,000
AIRFORCE	61,438	72,688
MINOR CONSTRUCTION		
ARMY	5,220	5,220
AIRFORCE	12,800	12,800
NOTE: Eucling for contain Military Construction		

NOTE: Funding for certain Military Construction projects in Jordan was requested in Title I and provided in Title IV OCO NOTE: Emergency Disaster Relief Funding is provided under Title V





TITLE V NATURAL DISASTER RELIEF DEPARTMENT OF DEFENSE

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

The agreement includes \$3,477,000,000 for "Navy and Marine Corps" for military construction and planning and design for damages related to Hurricanes Florence and Michael, flooding and earthquakes in fiscal year 2019.

MILITARY CONSTRUCTION, AIR FORCE

The agreement includes \$2,605,200,000 for "Air Force" for military construction and planning and design for damages related to Hurricanes Florence and Michael, flooding and earthquakes in fiscal year 2019.

MILITARY CONSTRUCTION, DEFENSE-WIDE

The agreement includes \$77,175,000 for "Defense-Wide" for military construction and planning and design for damages related to Hurricanes Florence and Michael, flooding and earthquakes in fiscal year 2019.

MILITARY CONSTRUCTION, ARMY NATIONAL GUARD

The agreement includes \$66,000,000 for "Army National Guard" for military construction and planning and design for damages related to Hurricanes Florence and Michael, and flooding, tornadoes and earthquakes in fiscal year 2019.

MILITARY CONSTRUCTION, ARMY RESERVE

The agreement includes \$3,300,000 for "Army Reserve" military construction and planning and design for damages related to Hurricanes Florence and Michael, flooding and earthquakes in fiscal year 2019.

ADMINISTRATIVE PROVISION

The agreement includes section 501 that notwithstanding any other provision of law, funds made available in this title shall only be used for the purposes as described under this heading.

TITLE VI

GENERAL PROVISIONS

The agreement includes section 601 prohibiting the obligation of funds in this Act beyond the current fiscal year unless expressly so provided.

The agreement includes section 602 prohibiting the use of the funds in this Act for programs, projects, or activities not in compliance with Federal law relating to risk assessment, the protection of private property rights, or unfunded mandates.

The agreement includes section 603 encouraging all Departments to expand their use of "E-Commerce."

The agreement includes section 604 specifying the congressional *committees that are to* receive all reports and notifications.

The agreement includes section 605 prohibiting the transfer of funds to any instrumentality of the United States Government without authority from an appropriations Act.

The agreement includes section 606 prohibiting the use of funds for a project or program named for a serving Member, Delegate, or Resident Commissioner of the United States House of Representatives.

The agreement includes section 607 requiring all reports submitted to Congress to be posted on official web sites of the submitting agency.

The agreement includes section 608 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.

The agreement includes section 609 prohibiting the use of funds for the payment of first-class air travel by an employee of the executive branch.

The agreement includes section 610 prohibiting the use of funds in this Act for any contract where the contractor has not complied with E-Verify requirements.

The agreement includes section 611 prohibiting the use of funds in this Act by the Department of Defense or the Department of Veterans Affairs for the purchase or lease of a new vehicle except in accordance with Presidential Memorandum – Federal Fleet Performance, dated May 24, 2011.

The agreement includes section 612 that any reference to "this Act" contained in this division shall only apply to this division.

The agreement includes section 613 prohibiting these funds to be used to close facilities under 2687 U.S.C., title 10.

The agreement includes section 614 prohibiting the use of funds in this Act for the renovation, expansion, or construction of any facility in the continental United States for the purpose of housing any individual who has been detained at the United States Naval Station, Guantanamo Bay, Cuba.

Insert 80a-80n

(Amounts in thousands)

FY 2019 Enacted	FY 2020 Request	Final Bill	Final Bill vs Enacted	Final Bill vs Request

TITLE I - DEPARTMENT OF DEFENSE

Military Construction, Army	1,021,766	1,453,499	1,178,499	+156,731	-275,000
Military Construction, Navy and Marine Corps	2,118,619	2,805,743	2,449,632	+331,013	-358,111
Military Construction, Air Force	1,440,323	2,179,230	1,687,230	+246,907	-492,000
Military Construction, Defense-Wide	2,550,728	2,504,190	2,362,529	-188,199	-141,661
intricary construction, bereinse-wide	2,000,720	2,004,100	2,002,020		
Total, Active components	7,131,436	6,942,682	7,677,890	+546,452	-1,264,772
Military Construction, Army National Guard	190,122	210,819	210,619	+20,697	
Military Construction, Air National Guard	129,126	165,971	164,471	+35,345	-1,500
Military Construction, Army Reserve	64,919	60,928	60,928	-3,991	
Military Construction, Navy Reserve	43,065	54,955	54,955	+11,890	
Military Construction, Air Force Reserve	38,063	59,750	59,750	+21,667	
Total, Reserve components	465, 295	552,423	550,923	+85,628	-1,500
North Atlantic Treaty Organization Security Investment					
Program	171,064	144,040	172,005	+941	+27,965
Department of Defense Base Closure Account	342,000	278,528	398,526	+56,526	+120,000
Total, Military Construction	8,109,797	9,917,651	8,799,344	+689,547	-1,116,307
Family Housing Construction, Army	330,660	141,372	141,372	- 189 , 288	
Family Housing Operation and Maintenance, Army	376,509	357,907	357,907	-18,602	
Family Housing Construction, Navy and Marine Corps	104,581	47,681	47,661	-56,920	
Family Housing Operation and Maintenance, Navy and					
Marine Corps	314,536	317,670	317,870	+3,334	
Family Housing Construction, Air Force	78,446	103,831	103,631	+25,185	
Family Housing Operation and Maintenance, Air Force	317,274	295,016	295,016	- 22 , 256	

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(Amounts in thousands)						
	FY 2019 Enacted	FY 2020 Request	Final Bill	Final Bill vs Enacted	Final Bill vs Request	
Family Housing Operation and Maintenance, Defense-Wide Department of Defense Family Housing Improvement Fund. DoD Military Unaccompanied Housing Improvement Fund	58,373 1,653 600	57,000 3,045 500	57,000 3,045 500	-1,373 +1,392 -100		
Total, Family Housing	1,582,632	1,324,002	1,324,002	-258,630		
Administrative Provisions Military Construction, Army (Sec. 124) Military Construction, Navy and Marine Corps (Sec.	94,100		79,500	- 14 , 600	+79,500	
124)	196,850		374,529	+177,679	+374,529	
Military Construction, Air Force (Sec. 124)	118,450		288,200	+169,750	+266,200	
Military Construction, Army National Guard (Sec. 124).	22,000		155,000	+133,000	+155,000	
Military Construction, Air National Guard (Sec. 124)	54,000		57,000	+3,000	+57,000	
Military Construction, Air Force Reserve (Sec. 124)	84,800		24,800	-60,000	+24,800	
Military Construction, Defense-Wide (Sec. 124)			66,6 8 0	+66,880	+66,880	
Military Construction - Military Installation Resilience (Sec. 130) NATO Security Investment Program (rescission)			75,000	+75,000	+75,000	
(Sec. 125) Military Construction, Defense-Wide (Sec. 125)		•••	-25,000	- 25 , 000	- 25 , 000	
(rescission)	~~~		-45,055	-45,055	- 45 , 055	
Total, Administrative Provisions	570,200	••••	1,191,654	+621,454	+1,191,654	

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(Amounts in thousands)						
	FY 2019 Enacted		Final Bill	Final Bill vs Enacted	Final Bill vs Request	
	***********	286H227222233			42328===######	
Total, title I, Department of Defense Appropriations Rescissions		11,241,653 (11,241,653) 		+1,052,371 (+1,122,428) (-70,055)	+73,347 (+143,402) (-70,055)	
TITLE II - DEPARTMENT OF VETERANS AFFAIRS						
Veterans Benefits Administration						
Compensation and pensions: Advance from prior year appropriations Budget year request		109,017,152	109,017,152 1,439,931	+13,248,690 -1,554,435	+1,439,931	
Subtotal (available this fiscal year)	98,762,828	109,017,152	110,457,083	+11,894,255	+1,439,931	
Advance appropriations	109,017,152	116,801,316	118,246,975	+9,229,B23	+1,445,659	
Readjustment benefits: Advance from prior year appropriations Budget year request		14,065,282 	14,065,282	+2,233,107		
Subtotal (available this fiscal year)	11,832,175	14,065,282	14,065,282	+2,233,107		
Advance appropriations	14,065,282	12,578,965	12,578,965	-1,466,317		

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(Amounts in thousands)					
	FY 2019 Enacted	FY 2020 Request	Final Bill	Final Bill vs Enacted	Final Bill vs Request
Veterans insurance and indemnities:					
Advance from prior year appropriations	109,090	111.340	111.340	+2.250	
Budget year request		17,620	17,620	+17,620	
Subtotal (availeble this fiscal year)	109,090	128,960	128,960	+19,870	
Advance appropriations	111,340	129,224	129,224	+17,884	
Veterans housing benefit program fund:					
(Limitation on direct loans)	(500)	(500)	(500)		
Administrative expenses	200,612	200, 377	200,377	- 235	
Vocational rehabilitation loans program account	39	58	58	· +19	
(Limitation on direct loans)	(2,037)	(2,008)	(2,008)	(-29)	
Administrative expenses	396	402	402	+6	
Native American veteran housing loan program account	1,163	1,163	1,186	+23	+23
General operating expenses, VBA	2,956,318	3,000,000	3,125,000	+166,684	+125,000
					+125,000
Total, Veterans Benefits Administration		132,729,125	135,739,738	+6,393,072	+3,010,613
Appropriations		(3,219,620)	(4,784,574)	(-1,368,318)	(+1,564,954)
Advance appropriations	(123,193,774)	(129,509,505)	(130,955,164)	(+7,761,390)	(+1,445,659)
Advances from prior year appropriations	(107,709,727)	(123,193,774)	(123,193,774)	(+15,484,047)	

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(Amounts in thousands)

FY 2019	FY 2020	Final Bill	Final Bill	Final Bill
Enacted	Request		vs Enacted	vs Request
•••••••••••••••••••••••••••••••••••••••				

Veterans Health Administration

Medical services:					
Advance from prior year appropriations	49,161,165	51,411,165	51,411,165	+2,250,000	
VHA Medical Services	750,000			-750,000	
Subtotal, available this fiscal year	40 011 165	E4 444 40E	E4 444 405		
Subcocal, available cills liscal year	49,911,165	51,411,165	51,411,165	+1,500,000	
Advance appropriations	51,411,165	56,158,015	56,158,015	+4,746,850	
	01,411,100	50,150,015	50,150,015	74,740,030	
Medical community care:					
Advance from prior year appropriations	6,384,704	10,758,399	10,758,399	+2,373,895	
Budget year requestBudget year request	1,000,000	4,521,400	4,521,400	+3,521,400	
Veterans Choice Fund (by transfer)			(615,000)	(+615,000)	(+615,000)
Subtotal, available this fiscal year	9,384,704	15,279,799	15,279,799	+5,895,095	
Advance appropriations	10,758,399	17,131,179	17,131,179	+6,372,780	
	10,100,000	17,151,175	17,131,178	+0,3/2,/00	
Medical support and compliance:					
Advance from prior year appropriations	7,239,156	7,239,156	7,239,156		
Budget year request		98,800	98,B00	+98,800	
Subtotal, available this fiscal year	7,239,156	7,337,956	7,337,956	+98,800	
Advance appropriations	7,239,156	7,914,191	7,914,191	+675,035	

(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Final Bill	Final Bill vs Enacted	Final Bill vs Request
Medical facilities:	5 044 000	0 444 000	0 444 000	.007 500	
Advance from prior year appropriations Budget year request	5,914,288 90,180	6,141,880	8,141,880	+227,592 -90,180	
Subtotal, available this fiscal year	6,004,468	8,141,680	6,141,880	+137,412	
Advance appropriations	6,141,880	8,433,265	6,433,265	+291,385	
Medical and prosthetic research	779,000	762,000	800,000	+21,000	+38,000
Medical care cost recovery collections:					
Offsetting collections	-3,590,000	-3,729,000	-3,729,000	-139,000	
Appropriations (indefinite)	3,590,000	3,729,000	3,729,000	+139,000	
Subtotal					
DoD-VA Joint Medical Funds (transfer out)					
(Sec. 219)	(-301,578)	(-314,409)	(-314,409)	(-12,831)	
DoD-VA Joint Medical Funds (by transfer) (Sec. 219) MCCF to Medical Community Care (transfer out) (Sec.	(301,578)	(314,409)	(314,409)	(+12,831)	
214) MCCF to Medical Community Care (by transfer) (Sec.		(-448,000)	(-446,000)	(-446,000)	
214) DoD-VA Health Care Sharing Incentive Funds (transfer		(446,000)	(446,000)	(+446,000)	'
out) (Sec. 222) DoD-VA Health Care Sharing Incentive Fund (by	(-15,000)	(-15,000)	(-15,000)		
transfer) (Sec. 222)	(15,000)	(15,000)	(15,000)		

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(Amounts in thousands)					
	FY 2019 Enacted	FY 2020 Raquast	Final Bill	Final Bill vs Enacted	Final Bill vs Request
Total, Veterans Health Administration Appropriations Advance appropriations	78,169,780 (2,619,180) (75,550,800) (318,578) (-316,578) (70,699,313)	93,018,850 (5,382,200) (87,636,650) (775,409) (-775,409) (75,550,800)	93,058,850 (5,420,200) (87,636,850) (1,390,409) (-775,409) (75,50,000)	+14,887,070 (+2,801,020) (+12,086,050) (+1,073,831) (-458,831)	+38,000 (+38,000) (+615,000)
National Cemetery Administration National Cametery Administration	315,836	329,000	(75,550,600) 329,000	(+4,851,287) +13,164	
Departmental Administration General administration. Board of Veterans Appeals. Information technology systems. Veterans Electronic Health Record. Office of Inspector General. Construction, major projects. Grants for construction of State extended care facilities.	355,897 174,748 4,103,000 1,107,000 192,000 1,127,486 649,514 150,000	389,200 182,000 4,343,000 207,000 1,235,200 398,800 90,000	355,911 182,000 4,371,615 1,500,000 210,000 1,235,200 398,800 90,000	+14 +7,252 +268,615 +393,000 +18,000 +107,714 -250,714 -60,000	- 13, 289 +28, 615 - 103, 000 + 3, 000
Grants for the construction of veterans cemeteries Totel, Departmental Administration Administrative Provisions	45,000 7,904,845	45,000 8,473,200	45,000 8,386,526	+483,881	-84,674

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(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Final Bill	Final Bill vs Enacted	Final Bill vs Request
Nadial Constant and Carolina (association) (Carologia	-211,000		-10.000	+201.000	-10,000
Medical Support and Compliance (rescission) (Sec. 253) DOD-VA Health Care Sharing Incentive Fund	-211,000		-10,000	+201,000	-10,000
(rescission) (Sec. 253)			-15,949	-15,949	-15,949
Veterans Electronic Health Record (rescission) (Sec.					
253)			-70,000	-70,000	-70,000
Medical and Prosthetic Research (rescission) (Sec. 253)			-50,000	- 50, 000	- 50 , 000
			1		
Board of Veterans Appeals (rescission) (Sec. 253) National Cemetery Administration (recission) (Sec.			-8,000	-8,000	-6,000
253)			-1.000	-1.000	-1.000
Medical Services (rescission) (Sec. 253)			-350,000	-350,000	-350,000
Infrastructure Initiative (Sec. 243)	2,000,000			-2,000,000	
Total, Administrative Provisions	1,789,000		-504,949	-2,293,949	-504,949
Total, title II, Department of Veterans Affairs.	217,525,927	234,550,175	237,009,165	+19,483,238	+2,458,990
Appropriations	(18, 992, 553)	(17, 404, 020)	(18, 922, 300)	(-70,253)	(+1,518,280)
Rescissions	(-211,000)		(-504,949)	(-293,949)	(-504,949)
Advance Appropriations	(=,,		(,,	(====;=:=)	()
Mandatory	(123,193,774)	(129,509,505)	(130,955,164)	(+7,761,390)	(+1,445,659)
Discretionary		(67,636,650)	(87,636,650)	(+12,086,050)	(,
Discretionary	(10,000,000)	(01,000,000)	(01,000,000)	(112,000,000)	
(By transfer)	(316,578)	(775,409)	(1,390,409)	(+1,073,831)	(+615,000)
(Transfer out)		(-775,409)	(-775,409)	(-458,831)	(0.0,000)
(Limitation on direct loans)		(2,50B)	(2,508)	(-400,001)	
((21001)	(2,000)	(2,000)	(20)	

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(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request		Final Bill vs Enacted	Final Bill vs Request
Advances from prior year appropriations:					
Mandatory	(107,709,727)	(123,193,774)	(123,193,774)	(+15,484,047)	
Discretionary	(70,699,313)	(75,550,600)	(75,550,600)	(+4,851,287)	
Discretionary	91,337,787	105,023,050	104,596,450	+13,258,683	- 426 , 600
Advances from prior year less FY 2021 advances	-4,851,287	-12,088,050	-12,086,050	-7,234,763	
Net discretionary	86,486,500	92,937,000	92,510,400	+8,023,900	- 426 , 600
Mandatory	126,168,140	129,527,125	132,412,715	+6,224,575	+2,885,590
Advances from prior year less FY 2021 advances	-15,484,047	-6,315,731	-7,761,390	+7,722,657	-1,445,659
Net mandatory	110,704,093	123,211,394	124,651,325	+13,947,232	+1,439,931
Total, mandatory and discretionary	197,190,593	216,148,394	217,181,725	+19,971,132	+1,013,331





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(/	Amounts in thous	ands)			
	FY 2019 Enacted	FY 2020 Request	Final Bill	Final Bill vs Enacted	Final Bill vs Request
TITLE III - RELATED AGENCIES					
American Battle Monuments Commission					
Salaries and expenses U.S. Court of Appeals for Veterans Claims	104,000	75,100	64,100	-19,900	+9,000
Salaries and expenses	34,955	35,400	35,400	+445	
Department of Oefense - Civil					
Cemeterial Expenses, Army					
Salaries and expenses Construction	80,800 33,600	70,800	80,800	-33,600	+10,000
- Total, Cemeterial Expenses, Army	114,400	70,800	80,800	-33,600	+10,000
Armed Forces Retirement Home - Trust Fund					
Operation and maintenance Capital program Payment from General Fund Total, Armed Forces Retirement Home	41,300 1,000 22,000 64,300	41,300 1,000 22,000 64,300	41,300 12,000 22,000 75,300	+11,000	+11,000
Total, title III, Related Agencies	317,655	245,600	275,600	-42,055	+30,000

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(Amounts in thousands)

FY 2019	FY 2020	Final Bill	Final 8ill	Final Bill
Enacted	Request		vs Enacted	vs Request

TITLE IV - OVERSEAS CONTINGENCY OPERATIONS

Overseas Contingency Operations

Military Construction, Army		122,300	33,800	+33,800	-88,500
Military Construction, Air Force			66,000	+66,000	+66,000
Military Construction, Defense-Wide	60,000			-60,000	
Subtotal, Overseas Contingency Operations	60,000	122,300	99,800	+39,800	-22,500
Europeen Deterrence / Reassurance Initiative					
Military Construction, Army	192,250	66,918	78,168	-114,082	+11.250
Military Construction, Navy and Marine Corps	227,320	94,570	94,570	-132,750	
Military Construction, Air Force	414,600	314,738	325,986	-68,812	+11.250
Military Construction, Defense-Wide	27,050	46,000	46,000	+18,950	
Subtotal, European Deterrence / Reassurance				************	
Initiative	861,420	522,226	544,726	-316,694	+22,500
Total, Overseas Contingency Operations	921 , 420	644,526	644,526	- 276 , 894	
Administrative Provision					
Military Construction, Army (including transfer					







	(Amounts in thousands)				
	FY 2019 Enacted	FY 2020 Request	Final Bill	Final Bill vs Enacted	Final Bill vs Request
Total, title IV, Overseas Contingency Operations (and emergencies)	921 , 420	9,644,526	644,526	- 276 , 894	-9,200,000
TITLE V - NATURAL DISASTER RELIEF					
Military Construction, Navy and Marine Corps					
(emergency)			3,477,000	+3,477,000	+3,477,000
Military Construction, Air Force (emergency)			2,605,200	+2,605,200	+2,605,200
Military Construction, Defense-Wide (emergency)			77,175	+77,175	+77,175
Military Construction, Army National Guard (emergency)			66,000	+66,000	+66,000
Military Construction, Army Reserve (emergency)		•••	3,300	+3,300	+3,300
	322022222222222	***********		************	
Total title V. Natural Disector Dalief					
Total, title V, Natural Disaster Relief (emergencies)			6,226,675	+6,226,675	+6,228,675
(cmeigencies)			=================	==========================	

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(Amounts	in	thousands)	
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	FY 2019 Enacted	 Final Bill	Final Bill vs Enacted	Final Bill vs Request
OTHER APPROPRIATIONS ADDITIONAL SUPPLEMENTAL APPROPRIATIONS FOR DISASTER RELIEF ACT, 2019				
Military Construction, Navy and Marine Corps (emergency)	600,000	 	-600,000	
Military Construction, Air Force (emergency)	1,000,000			
		 	-1,000,000	~
Military Construction, Army National Guard (emergency)	42,400	 	-42,400	
VHA Medical Facilities (emergency)	3,000	 	-3,000	
Total, Additional Supplemental Appropriations for Disaster Relief Act, 2019	1,645,400	 	-1,645,400	





(Amounts in thousands)					
	FY 2019 Enacted	FY 2020 Request	Final Bill	Final Bill vs Enacted	Final Bill vs Request
Grand total Appropriations Emergency appropriations Rescissions Advance appropriations Overseas contingency operations	(1,645,400) (-211,D00) (198,744,374)	255,861,954 (28,891,273) (9,200,000) (217,146,155) (644,526)	255,472,966 (30,582,955) (6,228,675) (-575,004) (218,591,814) (644,526)	+24,799,935 (+1,010,118) (+4,563,275) (-364,004) (+19,847,440) (-276,894)	-408,988 (+1,691,882) (-2,971,325) (-575,004) (+1,445,859)
Advances from prior year appropriations	(178,409,040)	(198,744,374)	(196,744,374)	(+20,335,334)	
(By transfer) (Transfer out) (Limitation on direct loans)	(316,576) (-316,578) (2,537)	(775,409) (-775,409) (2,508)	(1,390,409) (-775,409) (2,508)	(+1,073,831) (-458,831) (-29)	(+815,000)
Funds derived from Veterans Choice Funds		•••	-615,000	-615,000	-615,000



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