Rep. Cuellar’s FY19 MilCon/VA Language

1. Joint military base construction:

“Joint Military Bases.—The Committee is concerned that Joint Bases lack a full complement of training facilities such as aquatic facilities for complete education. This often results in burdening local communities to attempt to accommodate training at insufficient facilities. The Department is encouraged to prioritize construction of training facilities that will diminish impacts on surrounding communities and increase readiness.” (Page 8)

2. Telehealth for mental health in rural communities:

“Telehealth for mental health.—The Committee recognizes the strides made by the Department to reach rural communities with telehealth solutions. The Committee encourages further development and implementation of telemedicine to treat veterans with mental health issues in rural communities. Telemedicine should be used to its maximum capabilities by VA. The Committee requests VA to submit a report, no later than 90 days after enactment of this Act, providing an update on the VA plans to further expand the use of telemedicine.” (Page 30-31)

3. Law enforcement liaison:

“Law enforcement liaison.—The Committee appreciates VHA’s past efforts in working to educate the law enforcement community regarding the unique issues facing veterans, especially those returning from combat operations. Such education is invaluable in cases where veterans are determined to be an immediate threat to themselves or others. In such instances, it is imperative that the veteran’s needs be addressed in an expeditious, humane, and respectful manner. The Committee, therefore, encourages VA to implement a program that would designate a VA liaison to work with local law enforcement to address such circumstances.” (Page 31)

4. VA outreach for non-citizen veterans:

“Non-citizen veteran outreach.—The Committee is concerned about the level of awareness regarding mental health services by at-risk, non-citizen veterans. It urges VA, therefore, to conduct more aggressive outreach targeting this group of veterans to offer mental health and other early intervention services, drug and alcohol services, and mental health counseling.” (Page 31)

5. Homeless veterans along the U.S.-Mexico border:

“Homeless veterans near the U.S.-Mexico Border.—The Committee notes that there may be homeless veterans living near the U.S.-Mexico border who, historically, may not have been counted in point-in-time homeless surveys. The Committee encourages VA to work with HUD to develop strategies and recommendations for addressing U.S. veteran homelessness near the U.S.-Mexico border and to take into account these undercounted veterans when awarding HUD-VASH vouchers. VA shall report on these strategies and recommendations within 90 days of enactment of this Act.” (Page 33)

6. Providing veterans with support beyond shelter:
“Related needs of homeless veterans.—With significant help from the Committee, VA has made great strides in reducing veteran homelessness. The Committee believes veteran homelessness. The Committee believes that more could be done to address veterans’ homelessness and remains interested in the feasibility, advisability, and cost of VA conducting a pilot program that would award grants to eligible organizations to provide furniture, household items, and other assistance to formerly homeless veterans who have transitioned to permanent housing. The Committee looks forward to the report requested in House Report 115-118 on this concept and expects the deadline for the report to be met.” (Page 33)

7. Expanding tele-medicine to rural areas:
“Telehealth in rural areas.—The Committee is encouraged with recent efforts by VA with regard to investments in telehealth programs. Additionally, the Committee acknowledges the recent report submitted by VA outlining their collaboration efforts with several other Federal agencies on this issue. However, the report fails to provide an adequate explanation of the specific plan/strategy which VA will pursue to provide telehealth access to the 33 percent of veterans that reside in rural areas nationwide. The Committee remains concerned that not enough is being done to expand access to those veterans in rural areas with limited broadband internet access. The committee directs the Secretary, and the VHA Office of Rural Health, to elaborate the specificity on measures to expand capability of telehealth to these regions, and continue collaboration with the Department of Agriculture, which has dedicated programs specifically for rural broadband access, as well as continued participation with the President’s Rural Prosperity Task Force. The Committee directs the department to submit a report to the Committee, no later than 90 days after enactment of this Act.” (Page 35)

8. VA healthcare facilities working with HSIs
“Hispanic-Serving Institution (HIS) affiliations with VA health care facilities.—The Committee continues to be concerned by the lack of Hispanic-Serving Institutions (HSIs) medical school participation and collaboration with local VA hospitals in areas where HSI medical schools are located. The Committee urges the Secretary to develop a plan to expand local VA medical facilities’ participation with HIS medical schools. The Committee looks forward to the report mandated by Public Law 115-141.” (Page 42)