

118TH CONGRESS
1ST SESSION

S. _____

To amend title 38, United States Code, to improve certain programs of the Department of Veterans Affairs for home and community based services for veterans, and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. MORAN introduced the following bill; which was read twice and referred to the Committee on _____

A BILL

To amend title 38, United States Code, to improve certain programs of the Department of Veterans Affairs for home and community based services for veterans, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

4 (a) SHORT TITLE.—This Act may be cited as the
5 “Elizabeth Dole Home and Community Based Services for
6 Veterans and Caregivers Act of 2023” or the “Elizabeth
7 Dole Home Care Act”.

1 (b) TABLE OF CONTENTS.—The table of contents for
2 this Act is as follows:

Sec. 1. Short title; table of contents.

Sec. 2. Definitions.

Sec. 3. Increase of expenditure cap for noninstitutional care alternatives to nursing home care.

Sec. 4. Coordination with Program of All-Inclusive Care for the Elderly.

Sec. 5. Home and community based services: programs.

Sec. 6. Coordination with assistance and support services for caregivers.

Sec. 7. Development of centralized website for program information.

Sec. 8. Improvements relating to Home Maker and Home Health Aide program.

Sec. 9. Reviews and other improvements relating to home and community based services.

3 **SEC. 2. DEFINITIONS.**

4 In this Act:

5 (1) CAREGIVER; FAMILY CAREGIVER.—The
6 terms “caregiver” and “family caregiver” have the
7 meanings given those terms under section 1720K(g)
8 of title 38, United States Code (as added by section
9 5(a)(1)).

10 (2) COVERED PROGRAM.—The term “covered
11 program”—

12 (A) means any program of the Department
13 for home and community based services; and

14 (B) includes the programs specified in sec-
15 tion 1720K of title 38, United States Code (as
16 added by section 5(a)(1)).

17 (3) DEPARTMENT.—The term “Department”
18 means the Department of Veterans Affairs.

1 (4) HOME AND COMMUNITY BASED SERV-
2 ICES.—The term “home and community based serv-
3 ices”—

4 (A) means the services referred to in sec-
5 tion 1701(6)(E) of title 38, United States Code;
6 and

7 (B) includes services furnished under a
8 program specified in section 1720K of such title
9 (as added by section 5(a)(1)).

10 (5) HOME BASED PRIMARY CARE PROGRAM;
11 HOME MAKER AND HOME HEALTH AIDE PROGRAM;
12 VETERAN DIRECTED CARE PROGRAM.—The terms
13 “Home Based Primary Care program”, “Home
14 Maker and Home Health Aide program”, and “Vet-
15 eran Directed Care program” mean the programs of
16 the Department specified in subsections (d), (c), and
17 (b) of such section 1720K, respectively.

18 (6) HOME HEALTH AGENCY; HOME HEALTH
19 AIDE; NATIVE AMERICAN VETERAN, TRIBAL HEALTH
20 PROGRAM; URBAN INDIAN ORGANIZATION.—The
21 terms “home health agency”, “home health aide”,
22 “Native American veteran”, “tribal health pro-
23 gram”, and “Urban Indian organization” have the
24 meanings given those terms in subsection (g) of such
25 section 1720K.

1 (7) SECRETARY.—The term “Secretary” means
2 the Secretary of Veterans Affairs.

3 (8) VETERANS SERVICE ORGANIZATION.—The
4 term “veterans service organization” means any or-
5 ganization recognized by the Secretary under section
6 5902 of title 38, United States Code.

7 **SEC. 3. INCREASE OF EXPENDITURE CAP FOR NONINSTITU-**
8 **TIONAL CARE ALTERNATIVES TO NURSING**
9 **HOME CARE.**

10 (a) INCREASE OF EXPENDITURE CAP.—Section
11 1720C(d) of title 38, United States Code, is amended—

12 (1) by striking “The total cost” and inserting
13 “(1) Except as provided in paragraph (2), the total
14 cost”;

15 (2) in paragraph (1), as designated by para-
16 graph (1), by striking “65 percent of”; and

17 (3) by adding at the end the following new
18 paragraph:

19 “(2) The total cost of providing services or in-kind
20 assistance in the case of any veteran for any fiscal year
21 under the program may exceed the cost that would other-
22 wise have been incurred as specified in paragraph (1) if
23 the Secretary determines such higher total cost is in the
24 best interest of the veteran.”.

1 (b) APPLICABILITY.—The amendments made by sub-
2 section (a) shall apply with respect to any fiscal year be-
3 ginning on or after the date of the enactment of this Act.

4 **SEC. 4. COORDINATION WITH PROGRAM OF ALL-INCLUSIVE**
5 **CARE FOR THE ELDERLY.**

6 Section 1720C of title 38, United States Code, as
7 amended by section 3, is further amended by adding at
8 the end the following new subsection:

9 “(f) In furnishing services to a veteran under the pro-
10 gram conducted pursuant to subsection (a), if a medical
11 center of the Department through which such program is
12 administered is located in a geographic area in which serv-
13 ices are available to the veteran under a PACE program
14 (as such term is defined in sections 1894(a)(2) and
15 1934(a)(2) of the Social Security Act (42 U.S.C.
16 1395eee(a)(2); 1396u–4(a)(2))), the Secretary shall estab-
17 lish a partnership with the PACE program operating in
18 that area for the furnishing of such services.”.

19 **SEC. 5. HOME AND COMMUNITY BASED SERVICES: PRO-**
20 **GRAMS.**

21 (a) PROGRAMS.—

22 (1) IN GENERAL.—Subchapter II of chapter 17
23 of title 38, United States Code, is amended by in-
24 serting after section 1720J the following new sec-
25 tion:

1 **“§ 1720K. Home and community based services: pro-**
2 **grams**

3 “(a) IN GENERAL.—In furnishing noninstitutional al-
4 ternatives to nursing home care under the authority of
5 section 1720C of this title (or any other authority under
6 this chapter or other provision of law administered by the
7 Secretary of Veterans Affairs), the Secretary shall carry
8 out each of the programs specified in this section in ac-
9 cordance with such relevant authorities except as other-
10 wise provided in this section.

11 “(b) VETERAN DIRECTED CARE PROGRAM.—(1) The
12 Secretary of Veterans Affairs, in collaboration with the
13 Secretary of Health and Human Services, shall carry out
14 a program to be known as the ‘Veteran Directed Care pro-
15 gram’ under which the Secretary of Veterans Affairs may
16 enter into agreements with the providers described in
17 paragraph (2) to provide to eligible veterans funds to ob-
18 tain such in-home care services and related items as may
19 be determined appropriate by the Secretary of Veterans
20 Affairs and selected by the veteran, including through the
21 veteran hiring individuals to provide such services and
22 items or directly purchasing such services and items.

23 “(2) The providers described in this paragraph are
24 the following:

25 “(A) An Aging and Disability Resource Center,
26 an area agency on aging, or a State agency.

1 “(B) A center for independent living.

2 “(3) In carrying out the Veteran Directed Care pro-
3 gram, the Secretary of Veterans Affairs shall—

4 “(A) administer such program through each
5 medical center of the Department of Veterans Af-
6 fairs;

7 “(B) ensure the availability of such program in
8 American Samoa, Guam, the Commonwealth of the
9 Northern Mariana Islands, the Commonwealth of
10 Puerto Rico, the Virgin Islands of the United States,
11 and any other territory or possession of the United
12 States; and

13 “(C) ensure the availability of such program for
14 eligible veterans who are Native American veterans
15 receiving care and services furnished by the Indian
16 Health Service, a tribal health program, an Urban
17 Indian organization, or (in the case of a Native Ha-
18 waiian veteran) a Native Hawaiian health care sys-
19 tem.

20 “(4) If a veteran participating in the Veteran Di-
21 rected Care program is catastrophically disabled, the vet-
22 eran may continue to use funds under the program during
23 a period of hospitalization in the same manner that the
24 veteran would be authorized to use such funds under the
25 program if the veteran were not hospitalized.

1 “(c) HOME MAKER AND HOME HEALTH AIDE PRO-
2 GRAM.—(1) The Secretary shall carry out a program to
3 be known as the ‘Home Maker and Home Health Aide
4 program’ under which the Secretary may enter into agree-
5 ments with home health agencies to provide to eligible vet-
6 erans such home health aide services as may be deter-
7 mined appropriate by the Secretary.

8 “(2) In carrying out the Home Maker and Home
9 Health Aide program, the Secretary shall ensure the avail-
10 ability of such program—

11 “(A) in the locations specified in subparagraph
12 (B) of subsection (b)(3); and

13 “(B) for the veteran populations specified in
14 subparagraph (C) of such subsection.

15 “(d) HOME BASED PRIMARY CARE PROGRAM.—The
16 Secretary shall carry out a program to be known as the
17 ‘Home Based Primary Care program’ under which the
18 Secretary may furnish to eligible veterans in-home health
19 care, the provision of which is overseen by a physician of
20 the Department.

21 “(e) PURCHASED SKILLED HOME CARE PROGRAM.—
22 The Secretary shall carry out a program to be known as
23 the ‘Purchased Skilled Home Care program’ under which
24 the Secretary may furnish to eligible veterans such in-

1 home care services as may be determined appropriate and
2 selected by the Secretary for the veteran.

3 “(f) CAREGIVER SUPPORT.—(1) With respect to a
4 resident caregiver of a veteran participating in a program
5 under this section who is a family caregiver, the Secretary
6 shall—

7 “(A) if the veteran meets the requirements of
8 a covered veteran under section 1720G(b) of this
9 title, provide to such caregiver the option of enroll-
10 ing in the program of general caregiver support serv-
11 ices under such section;

12 “(B) subject to paragraph (2), provide to such
13 caregiver not fewer than 14 days of covered respite
14 care each year; and

15 “(C) conduct on an annual basis (and, to the
16 extent practicable, in connection with in-person serv-
17 ices provided under the program in which the vet-
18 eran is participating), a wellness check of such care-
19 giver.

20 “(2) The Secretary shall provide not fewer than 30
21 days of covered respite care each year to any resident care-
22 giver who provides services funded under the Veteran Di-
23 rected Care program under subsection (b).

24 “(3) Covered respite care provided to a resident care-
25 giver of a veteran under paragraph (1) or (2), as the case

1 may be, may exceed 14 days annually or 30 days annually,
2 respectively, if an extension is requested by the resident
3 caregiver or veteran and determined medically appropriate
4 by the Secretary.

5 “(g) DEFINITIONS.—In this section:

6 “(1) The terms ‘Aging and Disability Resource
7 Center’, ‘area agency on aging’, and ‘State agency’
8 have the meanings given those terms in section 102
9 of the Older Americans Act of 1965 (42 U.S.C.
10 3002).

11 “(2) The terms ‘caregiver’ and ‘family care-
12 giver’, with respect to a veteran, have the meanings
13 given those terms, respectively, under subsection (d)
14 of section 1720G of this title with respect to an eli-
15 gible veteran under subsection (a) of such section or
16 a covered veteran under subsection (b) of such sec-
17 tion, as the case may be.

18 “(3) The term ‘center for independent living’
19 has the meaning given that term in section 702 of
20 the Rehabilitation Act of 1973 (29 U.S.C. 796a).

21 “(4) The term ‘covered respite care’ means,
22 with respect to a caregiver of a veteran, respite care
23 that—

1 “(A) includes 24-hour per day care of the
2 veteran commensurate with the care provided
3 by the caregiver;

4 “(B) is medically and age-appropriate; and

5 “(C) includes in-home care services.

6 “(5) The term ‘eligible veteran’ means any vet-
7 eran—

8 “(A) for whom the Secretary determines
9 participation in a specific program under this
10 section is medically necessary to promote, pre-
11 serve, or restore the health of the veteran; and

12 “(B) who absent such participation would
13 be at increased risk for hospitalization, place-
14 ment in a nursing home, or emergency room
15 care.

16 “(6) The term ‘home health agency’ has the
17 meaning given that term in section 1861(o) of the
18 Social Security Act (42 U.S.C. 1395x(o)).

19 “(7) The term ‘home health aide’ means an in-
20 dividual employed by a home health agency to pro-
21 vide in-home care services.

22 “(8) The term ‘in-home care service’ means any
23 service, including a personal care service, provided to
24 enable the recipient of such service to live at home.

1 “(9) The term ‘Native American veteran’ has
2 the meaning given that term in section 3765 of this
3 title.

4 “(10) The terms ‘Native Hawaiian’ and ‘Native
5 Hawaiian health care system’ have the meanings
6 given those terms in section 12 of the Native Hawai-
7 ian Health Care Improvement Act (42 U.S.C.
8 11711).

9 “(11) The term ‘resident caregiver’ means a
10 caregiver or a family caregiver of a veteran who re-
11 sides with the veteran.

12 “(12) The terms ‘tribal health program’ and
13 ‘Urban Indian organization’ have the meanings
14 given those terms in section 4 of the Indian Health
15 Care Improvement Act (25 U.S.C. 1603).”.

16 (2) CLERICAL AMENDMENT.—The table of sec-
17 tions at the beginning of such subchapter is amend-
18 ed by inserting after the item relating to section
19 1720J the following new item:

“1720K. Home and community based services: programs.”.

20 (b) DEADLINE FOR IMPROVED ADMINISTRATION.—
21 The Secretary shall ensure that the Veteran Directed Care
22 program and the Home Maker and Home Health Aide
23 program are administered through each medical center of
24 the Department in accordance with section 1720K of title
25 38, United States Code (as added by subsection (a)(1)),

1 by not later than two years after the date of the enactment
2 of this Act.

3 (c) ADMINISTRATION OF VETERAN DIRECTED CARE
4 PROGRAM.—

5 (1) PROCEDURES.—The Secretary shall estab-
6 lish procedures to identify staffing needs for the
7 Program and define the roles and responsibilities of
8 personnel of the Program at the national, Veterans
9 Integrated Service Network, and facility levels, in-
10 cluding responsibilities for engagement with veterans
11 participating in the Program, veterans interested in
12 the Program, and providers described in section
13 1720K(b)(2), as added by subsection (a)(1).

14 (2) STAFFING MODEL.—

15 (A) IN GENERAL.—The Secretary shall es-
16 tablish a staffing model for the administration
17 of the Program at each medical center of the
18 Department.

19 (B) STAFFING RATIO.—The Secretary
20 shall establish a staffing ratio for administra-
21 tion of the Program at each facility of the De-
22 partment at which the Program is carried out,
23 which shall include a specified number of full-
24 time equivalent employees, with no collateral

1 duties, per number of veterans served by the
2 Program.

3 (3) FUNDING FOR PROGRAM.—

4 (A) IN GENERAL.—The Secretary shall de-
5 velop methods for tracking and reporting de-
6 mand by veterans for and use by veterans of
7 services under the Program to inform yearly
8 cost estimates for the Program.

9 (B) DEDICATED FUNDING.—The Secretary
10 shall ensure each medical center of the Depart-
11 ment receives dedicated funding for administra-
12 tion and staffing of the Program, tailored to de-
13 mand for and use of the Program at such med-
14 ical center.

15 (C) SEPARATE FUNDING.—Funding pro-
16 vided to carry out the Program shall be sepa-
17 rate from any other funding for the purchased
18 long term services and supports programs of
19 the Department.

20 (4) PROGRAM DEFINED.—In this subsection,
21 the term “Program” means the Veteran Directed
22 Care program.

1 **SEC. 6. COORDINATION WITH ASSISTANCE AND SUPPORT**
2 **SERVICES FOR CAREGIVERS.**

3 (a) COORDINATION WITH PROGRAM OF COMPREHEN-
4 SIVE ASSISTANCE FOR FAMILY CAREGIVERS.—

5 (1) COORDINATION.—Section 1720G(a) of title
6 38, United States Code, is amended by adding at
7 the end the following new paragraph:

8 “(14)(A) In the case of a veteran or caregiver who
9 seeks services under this subsection and is denied such
10 services, or a veteran or the family caregiver of a veteran
11 who is discharged from the program under this subsection,
12 the Secretary shall—

13 “(i) if the veteran meets the requirements of a
14 covered veteran under subsection (b), provide to
15 such caregiver the option of enrolling in the program
16 of general caregiver support services under such sub-
17 section;

18 “(ii) assess the veteran or caregiver for partici-
19 pation in any other available program of the Depart-
20 ment for home and community based services (in-
21 cluding the programs specified in section 1720K of
22 this title) for which the veteran or caregiver may be
23 eligible and, with respect to the veteran, store (and
24 make accessible to the veteran) the results of such
25 assessment in the electronic medical record of the
26 veteran; and

1 “(iii) provide to the veteran or caregiver written
2 information on any such program identified pursu-
3 ant to the assessment under clause (ii), including in-
4 formation about facilities, eligibility requirements,
5 and relevant contact information for each such pro-
6 gram.

7 “(B) For each veteran or family caregiver who is dis-
8 charged from the program under this subsection, a care-
9 giver support coordinator shall provide for a smooth and
10 personalized transition from such program to an appro-
11 priate program of the Department for home and commu-
12 nity based services (including the programs specified in
13 section 1720K of this title), including by integrating care-
14 giver support across programs.”.

15 (2) APPLICABILITY.—The amendment made by
16 paragraph (1) shall apply with respect to denials
17 and discharges described in paragraph (14) of such
18 section, as added by paragraph (1), occurring on or
19 after the date of the enactment of this Act.

20 (b) TECHNICAL AND CONFORMING AMENDMENTS.—
21 Section 1720G(d) of such title is amended—

22 (1) by striking “or a covered veteran” each
23 place it appears and inserting “, a veteran denied or
24 discharged as specified in paragraph (14) of such
25 subsection, or a covered veteran”; and

1 (2) by striking “under subsection (a), means”
2 each place it appears and inserting “under sub-
3 section (a) or a veteran denied or discharged as
4 specified in paragraph (14) of such subsection,
5 means”.

6 (c) **REVIEW RELATING TO CAREGIVER CONTACT.**—
7 The Secretary shall conduct a review of the capacity of
8 the Department to establish a streamlined system for con-
9 tacting all caregivers enrolled in the program of general
10 caregiver support services under section 1720G(b) of title
11 38, United States Code, to provide to such caregivers pro-
12 gram updates and alerts relating to emerging services for
13 which such caregivers may be eligible.

14 **SEC. 7. DEVELOPMENT OF CENTRALIZED WEBSITE FOR**
15 **PROGRAM INFORMATION.**

16 (a) **CENTRALIZED WEBSITE.**—The Secretary shall
17 develop and maintain a centralized and publicly accessible
18 internet website of the Department as a clearinghouse for
19 information and resources relating to covered programs.

20 (b) **CONTENTS.**—The website under subsection (a)
21 shall contain the following:

22 (1) A description of each covered program.

23 (2) An informational assessment tool that en-
24 ables users to—

1 (A) assess the eligibility of a veteran, or a
2 caregiver of a veteran, for any covered program;
3 and

4 (B) receive information, as a result of such
5 assessment, on any covered program for which
6 the veteran or caregiver (as the case may be)
7 may be eligible.

8 (3) A list of required procedures for the direc-
9 tors of medical facilities of the Department to follow
10 in determining the eligibility and suitability of vet-
11 erans for participation in a covered program, includ-
12 ing procedures applicable to instances in which the
13 resource constraints of a facility (or of a community
14 in which a facility is located) may result in the in-
15 ability to address the health needs of a veteran
16 under a covered program in a timely manner.

17 (c) UPDATES.—The Secretary shall ensure the
18 website under subsection (a) is updated on a periodic
19 basis.

20 **SEC. 8. IMPROVEMENTS RELATING TO HOME MAKER AND**
21 **HOME HEALTH AIDE PROGRAM.**

22 (a) PILOT PROGRAM FOR COMMUNITIES WITH
23 SHORTAGE OF HOME HEALTH AIDES.—

24 (1) PROGRAM.—The Secretary shall carry out a
25 pilot program under which the Secretary shall pro-

1 vide home maker and home health aide services to
2 veterans who reside in communities with a shortage
3 of home health aides.

4 (2) LOCATIONS.—The Secretary shall select 10
5 geographic locations in which the Secretary deter-
6 mines there is a shortage of home health aides at
7 which to carry out the pilot program under para-
8 graph (1).

9 (3) NURSING ASSISTANTS.—

10 (A) IN GENERAL.—In carrying out the
11 pilot program under paragraph (1), the Sec-
12 retary may hire nursing assistants as new em-
13 ployees of the Department, or reassign nursing
14 assistants who are existing employees of the
15 Department, to provide to veterans in-home
16 care services (including basic tasks authorized
17 by the State certification of the nursing assist-
18 ant) under the pilot program, in lieu of or in
19 addition to the provision of such services
20 through non-Department home health aides.

21 (B) RELATIONSHIP TO HOME BASED PRI-
22 MARY CARE PROGRAM.—Nursing assistants
23 hired or reassigned under subparagraph (A)
24 may provide services to a veteran under the
25 pilot program under paragraph (1) while serv-

1 ing as part of a health care team for the vet-
2 eran under the Home Based Primary Care pro-
3 gram.

4 (4) DURATION.—The pilot program under para-
5 graph (1) shall be for a duration of three years.

6 (5) REPORT TO CONGRESS.—Not later than one
7 year after the date on which the Secretary deter-
8 mines the pilot program under paragraph (1) has
9 terminated, the Secretary shall submit to the Com-
10 mittee on Veterans' Affairs of the Senate and the
11 Committee on Veterans' Affairs of the House of
12 Representatives a report on the result of the pilot
13 program.

14 (b) REPORT ON USE OF FUNDS.—Not later than one
15 year after the date of the enactment of this Act, the Sec-
16 retary shall submit to the Committee on Veterans' Affairs
17 of the Senate and the Committee on Veterans' Affairs of
18 the House of Representatives a report containing, with re-
19 spect to the period beginning in fiscal year 2011 and end-
20 ing in fiscal year 2022, the following:

21 (1) An identification of the amount of funds
22 that were included in a budget of the Department
23 during such period for the provision of in-home care
24 to veterans under the Home Maker and Home
25 Health Aide program in effect during such period

1 but were not expended for the provision of such
2 care, disaggregated by medical center of the Depart-
3 ment for which such unexpended funds were budg-
4 eted.

5 (2) An identification of the number of veterans
6 for whom, during such period, the hours during
7 which a home health aide was authorized to provide
8 services to the veteran under such program were re-
9 duced for a reason other than a change in the health
10 care needs of the veteran, and a detailed description
11 of the reasons why any such reductions may have oc-
12 curred.

13 (c) UPDATED GUIDANCE ON PROGRAM.—

14 (1) IN GENERAL.—Not later than one year
15 after the date of the enactment of this Act, the Sec-
16 retary shall issue updated guidance for the Home
17 Maker and Home Health Aide program.

18 (2) MATTERS TO INCLUDE.—Guidance updated
19 under paragraph (1) shall include the following:

20 (A) A process for the transition of veterans
21 from the Home Maker and Home Health Aide
22 program to other covered programs.

23 (B) A requirement for the directors of the
24 medical facilities of the Department to complete
25 such process whenever a veteran with care

1 needs has been denied services from home
2 health agencies under the Home Maker and
3 Home Health Aide program as a result of the
4 clinical needs or behavioral issues of the vet-
5 eran.

6 **SEC. 9. REVIEWS AND OTHER IMPROVEMENTS RELATING**
7 **TO HOME AND COMMUNITY BASED SERVICES.**

8 (a) OFFICE OF GERIATRIC AND EXTENDED CARE.—

9 (1) REVIEW OF PROGRAMS.—The Under Sec-
10 retary for Health of the Department shall conduct
11 a review of each program administered through the
12 Office of Geriatric and Extended Care of the De-
13 partment, or successor office, to—

14 (A) ensure consistency in program man-
15 agement;

16 (B) eliminate service gaps at the medical
17 center level; and

18 (C) ensure the availability of, and the ac-
19 cess by veterans to, home and community based
20 services.

21 (2) ASSESSMENT OF STAFFING NEEDS.—The
22 Secretary shall conduct an assessment of the staff-
23 ing needs of the Office of Geriatric and Extended
24 Care of the Department, or successor office.

1 (3) GOALS FOR GEOGRAPHIC ALIGNMENT OF
2 CARE.—

3 (A) ESTABLISHMENT OF GOALS.—The Di-
4 rector of the Office of Geriatric and Extended
5 Care, or successor office, shall establish quan-
6 titative goals to enable aging or disabled vet-
7 erans who are not located near medical centers
8 of the Department to access extended care serv-
9 ices (including by improving access to home and
10 community based services for such veterans).

11 (B) IMPLEMENTATION TIMELINE.—Each
12 goal established under subparagraph (A) shall
13 include a timeline for the implementation of the
14 goal at each medical center of the Department.

15 (4) GOALS FOR IN-HOME SPECIALTY CARE.—
16 The Director of the Office of Geriatric and Extended
17 Care, or successor office, shall establish quantitative
18 goals to address the specialty care needs of veterans
19 through in-home care, including by ensuring the
20 education of home health aides and caregivers of vet-
21 erans in the following areas:

22 (A) Dementia care.

23 (B) Care for spinal cord injuries and dis-
24 eases.

25 (C) Ventilator care.

1 (D) Other speciality care areas as deter-
2 mined by the Secretary.

3 (5) REPORT TO CONGRESS.—Not later than one
4 year after the date of the enactment of this Act, the
5 Secretary shall submit to the Committee on Vet-
6 erans' Affairs of the Senate and the Committee on
7 Veterans' Affairs of the House of Representatives a
8 report containing the findings of the review under
9 paragraph (1), the results of the assessment under
10 paragraph (2), and the goals established under para-
11 graphs (3) and (4).

12 (b) REVIEW OF INCENTIVES AND EFFORTS RELAT-
13 ING TO HOME AND COMMUNITY BASED SERVICES.—

14 (1) REVIEW.—The Secretary shall conduct a re-
15 view of the following:

16 (A) The financial and organizational incen-
17 tives for the directors of medical centers of the
18 Department to establish or expand covered pro-
19 grams at such medical centers.

20 (B) Any incentives for such directors to
21 provide to veterans home and community based
22 services in lieu of institutional care.

23 (C) The efforts taken by the Secretary to
24 enhance spending of the Department for ex-
25 tended care by shifting the balance of such

1 spending from institutional care to home and
2 community based services.

3 (D) The plan of the Under Secretary for
4 Health of the Department to accelerate efforts
5 to enhance spending as specified in subpara-
6 graph (C), to match the progress of similar ef-
7 forts taken by the Administrator of the Centers
8 for Medicare & Medicaid Services with respect
9 to spending of the Centers for Medicare & Med-
10 icaid Services for extended care.

11 (2) REPORT TO CONGRESS.—Not later than one
12 year after the date of the enactment of this Act, the
13 Secretary shall submit to the Committee on Vet-
14 erans' Affairs of the Senate and the Committee on
15 Veterans' Affairs of the House of Representatives a
16 report on the findings of the review under paragraph
17 (1).

18 (c) REVIEW OF RESPITE CARE SERVICES.—Not later
19 than two years after the date of the enactment of this Act,
20 the Secretary shall conduct a review of the use, avail-
21 ability, and effectiveness of the respite care services fur-
22 nished by the Secretary under chapter 17 of title 38,
23 United States Code.

24 (d) COLLABORATION TO IMPROVE HOME AND COM-
25 MUNITY BASED SERVICES.—

1 (1) FEEDBACK AND RECOMMENDATIONS ON
2 CAREGIVER SUPPORT.—

3 (A) FEEDBACK AND RECOMMENDA-
4 TIONS.—The Secretary shall solicit from the en-
5 tities described in subparagraph (B) feedback
6 and recommendations regarding opportunities
7 for the Secretary to enhance home and commu-
8 nity based services for veterans and caregivers
9 of veterans, including through the potential pro-
10 vision by the entity of care and respite services
11 to veterans and caregivers who may not be eli-
12 gible for any program under section 1720G of
13 title 38, United States Code, or section 1720K
14 of such title (as added by section 5(a)(1)), but
15 have a need for assistance.

16 (B) COVERED ENTITIES.—The entities de-
17 scribed in this subparagraph are veterans serv-
18 ice organizations and nonprofit organizations
19 with a focus on caregiver support (as deter-
20 mined by the Secretary).

21 (2) COLLABORATION FOR NATIVE AMERICAN
22 VETERANS.—The Secretary shall collaborate with
23 the Director of the Indian Health Service and rep-
24 resentatives from tribal health programs and Urban
25 Indian organizations to ensure the availability of

1 home and community based services for Native
2 American veterans, including Native American vet-
3 erans receiving health care and medical services
4 under multiple health care systems.