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### HELPING HOMELESS VETERANS ACT OF 2013

SEPTEMBER 23, 2013.—Ordered to be printed

Mr. SANDERS, from the Committee on Veterans' Affairs,  
submitted the following

### R E P O R T

[To accompany S. 287]

The Committee on Veterans' Affairs (hereinafter, "the Committee"), to which was referred the bill (S. 287), to amend title 38, United States Code (hereinafter, "U.S.C."), to expand the definition of homeless veteran for the purposes of benefits under the laws administered by the Secretary of Veterans Affairs, and for other purposes, having considered the same, reports favorably thereon with an amendment in the nature of a substitute, and an amendment to the title, and recommends that the bill, as amended, do pass.

#### INTRODUCTION

On February 12, 2013, Senator Mark Begich introduced S. 287, the proposed bill to amend title 38, U.S.C., to expand the definition of homeless veteran for purposes of benefits under the laws administered by the Secretary of Veterans Affairs and for other purposes. Senators Blumenthal, Boozman, Pryor, and Tester were original cosponsors. Senator Shaheen was later added as a cosponsor. The bill was referred to the Committee.

On April 25, 2013, Committee Chairman Bernard Sanders introduced S. 825, the proposed "Homeless Veterans Prevention Act of 2013." Ranking Member Burr was an original cosponsor. Senators Blumenthal, Murray, and Murphy were later added as cosponsors. S. 825 would amend title 38, U.S.C., to improve assistance to homeless veterans, and for other purposes. The bill was referred to the Committee.

On May 23, 2013, Senator Dean Heller introduced S. 1058, the proposed "Creating a Reliable Environment for Veterans' Dependents Act." Senator Murray was an original cosponsor. S. 1058 would authorize per diem payments under comprehensive service

programs for homeless veterans to furnish care to dependents of homeless veterans, and for other purposes. The bill was referred to the Committee.

#### COMMITTEE HEARING

On May 9, 2013, the Committee held a hearing on pending legislation, including S. 287 and S. 825. Testimony was offered by: Dr. Robert Jesse, Principal Deputy Under Secretary for Health, representing the Department of Veterans Affairs (hereinafter, "VA" or "the Department"); Rick Weidman, Executive Director for Policy & Government Affairs, Vietnam Veterans of America; and Matt Gornick, Policy Director, National Coalition for Homeless Veterans.

#### COMMITTEE MEETING

After carefully reviewing the testimony from the foregoing hearing, the Committee met in open session on July 24, 2013, to consider, among other legislation, an amended version of S. 287, consisting of provisions from S. 287, as introduced, and the legislation noted above. The Committee voted by voice vote, without objection, to report favorably S. 287, as amended, and as further amended, to the Senate.

#### SUMMARY OF S. 287 AS REPORTED

S. 287, as reported (hereinafter, "the Committee bill"), consists of 13 sections, summarized below:

Section 1 would provide a short title.

Section 2 would expand the definition of homeless veteran for purposes of benefits under the laws administered by the Secretary of Veterans Affairs.

Section 3 would improve the grant program for comprehensive service programs for homeless veterans.

Section 4 would increase per diem payments for transitional housing assistance that becomes permanent housing for homeless veterans.

Section 5 would authorize per diem payments for furnishing care to dependents of certain homeless veterans.

Section 6 would require VA to assess comprehensive service programs for homeless veterans.

Section 7 would expand VA authority to provide dental care to homeless veterans.

Section 8 would authorize partnerships with public and private entities to provide legal services to homeless veterans and veterans at risk of homelessness.

Section 9 would require requests for data to evaluate and improve services provided to veterans at risk of homelessness.

Section 10 would repeal the sunset on authority to carry out a program of referral and counseling services for veterans at risk for homelessness who are transitioning from certain institutions.

Section 11 would repeal the requirement for annual reports on assistance to homeless veterans.

Section 12 would provide extensions of authorities.

Section 13 would extend reduced pension for certain veterans covered by Medicaid plans for services furnished by nursing facilities.

## BACKGROUND AND DISCUSSION

*Sec. 2. Expansion of definition of homeless veteran for purposes of benefits under the laws administered by the Secretary of Veterans Affairs.*

Section 2 of the Committee bill, which is derived from S. 287, as introduced, would expand the definition of homeless veteran, for purposes of eligibility for benefits through VA, to include a veteran or veteran's family fleeing domestic or dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions in their current housing situation.

*Background.* Congress has authorized several initiatives in an effort to provide VA with the tools necessary to end veteran homelessness. Those who meet the definition of homeless veteran are eligible to participate in these initiatives. Section 2002(1) of title 38, U.S.C., defines "homeless veteran" as a veteran who is homeless as that term is defined in section 11302(a) of title 42, U.S.C. A homeless veteran is thus defined as a veteran who meets the criteria of lacking a fixed, regular, and adequate place to sleep at night; has a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation, including a car or park; lives in a transitional housing setting; resides in a location not meant for human habitation; will imminent-ly lose his or her housing; or has experienced persistent hous-ing instability.

The Department of Housing and Urban Development's (herein-after, "HUD") definition of homeless encompasses the aforementioned definition, but also includes an additional class of individuals, as defined by section 11302(b) of title 42, U.S.C., which is comprised of

any individual or family who is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions in the individual's or family's current housing situation, including where the health and safety of children are jeopardized, and who have no other residence and lack the resources or support networks to obtain other permanent housing.

In July 2011, a team led by Dr. Melissa E. Dichter, Research Health Scientist at VA's Center for Health Equity Research and Promotion, published a study entitled "Intimate Partner Violence Victimization Among Women Veterans and Associated Heart Health Risks." The study found almost one-third of the veteran participants had experienced intimate partner, domestic or dating violence, as compared with less than one-quarter of civilian participants. Within that sample, veterans experienced intimate partner violence at a higher rate than civilians.

*Committee Bill.* Section 2 of the Committee bill would expand the definition of homeless veteran by amending section 2002(1) of title 38, U.S.C., to include veterans and their families who may be homeless based on the circumstances defined in section 11302(b) of title 42, U.S.C. It is the intent of the Committee to bring VA's homeless definition in line with HUD's ensuring that veterans fleeing domestic or dating violence and other life-threatening situa-

tions are eligible to participate in VA's programs for homeless veterans.

*Sec. 3. Improvements to grant program for comprehensive service programs for homeless veterans.*

Section 3 of the Committee bill, which is derived from S. 825, would require VA to meet physical privacy, safety, and security needs in its Homeless Grant and Per Diem (hereinafter, "GPD") program and would authorize VA to provide capital improvement grants for repairs toward this end.

*Background.* Public Law (hereinafter, "P.L.") 102-590, the "Homeless Veterans Comprehensive Service Programs Act of 1992," established VA's GPD program. The grant program assists public and nonprofit private entities in establishing, modifying or expanding programs that provide homeless veterans with outreach, rehabilitative services, vocational counseling and training, and transitional housing assistance. The per diem program provides per diem payments, or in-kind assistance in lieu of per diem payments, to assist eligible entities that established programs after November 10, 1992, with the daily costs associated with providing supportive services and housing for homeless veterans.

Section 2011 of title 38, U.S.C., sets forth the authority, criteria, and requirements for capital grants under VA's GPD program. The law requires VA to establish criteria and requirements for grants awarded under this section. Eligible entities for these grants are restricted to public or nonprofit private entities with the capacity to administer the grant effectively. An eligible entity must also agree to meet, as well as have the capacity to meet, the applicable criteria and requirements established by VA. Currently, grants can be used to assist eligible entities with costs associated with acquiring, renovating, or altering facilities to establish new programs and service centers to furnish supportive services and housing for homeless veterans, or to procure vans to transport homeless veterans.

The law requires VA to provide to grant recipients under section 2011 of title 38, U.S.C., per diem payments for services furnished to any homeless veteran whom VA has referred to the grant recipient, or for whom VA has authorized the provision of services. Section 2012 of title 38, U.S.C., sets forth the authority, criteria, and requirements for VA's per diem program. The per diem rate is defined as the estimated daily cost of care, not in excess of the per diem rate for VA's State Home Per Diem Program.

A September 2011 report by VA's Inspector General (hereinafter, "IG"), entitled "Safety, Security, and Privacy for Female Veterans at a Chicago, IL Homeless Grant Provider Facility," found safety issues at a GPD facility that was housing both male and female veterans in close proximity without adequately addressing the unique needs of women veterans. The review found that women veterans had clinical histories that detailed instances of domestic abuse and sexual trauma, yet they were placed alongside male veterans with criminal backgrounds, and substance abuse and mental health issues in a facility that lacked adequate lighting, proper locking mechanisms on doors, and adequate surveillance.

In a March 2012 report entitled "Audit of the Homeless Providers Grant and Per Diem Program," the IG noted that "an incomplete

grant application evaluation process, a lack of safety, security, health, and welfare standards, and an inconsistent monitoring program impacted the GPD Program's effectiveness." To resolve these issues, VA is in the process of developing gender-specific safety and security standards, as well as a training program and written guidance for both homeless program staff and community providers.

According to VA, its GPD program, as described above, provides transitional housing for up to 20,000 homeless veterans annually. The Government Accountability Office (hereinafter, "GAO") found, in a December 2011 study entitled "Homeless Women Veterans: Actions Needed to Ensure Safe and Appropriate Housing," that privacy, safety, and security concerns were a barrier to homeless women veterans who might otherwise make use of the facilities. The ability to ensure the safety of all veterans in GPD housing is critical to their participation in the program.

*Committee Bill.* Section 3(a) of the Committee bill would amend section 2011(a) of title 38, U.S.C., by allowing VA to offer capital grants under the GPD program to offset a portion of the costs of facility maintenance in conjunction with physical privacy, safety, and security. It is the view of the Committee that the opportunity to apply for renovation grants, in limited amounts and for limited purposes, will help interested facilities provide safe transitional housing for homeless women veterans who may need this type of care to exit homelessness.

Section 3(b) of the Committee bill would amend section 2011(f) of title 38, U.S.C., by requiring grantees to meet the physical privacy, safety, and security needs of homeless veterans receiving services through their program. It is the view of the Committee that addressing these safety concerns will allow more homeless veterans to safely and comfortably take advantage of the GPD program to improve their quality of life.

*Sec. 4. Increased per diem payments for transitional housing assistance that becomes permanent housing for homeless veterans.*

Section 4 of the Committee bill, which is derived from S. 825, would authorize VA to award per diem grants to providers that offer veterans transitional housing units and allow homeless veterans to transition into permanent housing in the same unit.

*Background.* A veteran's ability to successfully exit transitional housing into independent living can be curtailed by the availability of low-income housing in the area. As VA continues to work toward ending homelessness among veterans, it is important to focus on ways to ease a veteran's exit from transitional housing into stable, independent housing in order to break the cycle of homelessness.

The traditional GPD model is intended to provide a homeless veteran with time-limited transitional housing assistance, focused on housing readiness, in a congregate living or individual unit setting. When the assistance ends, the goal is for the veteran to leave this setting and move into permanent housing in the community. In many communities, it is difficult for veterans who have completed this program to find stable, permanent housing that is affordable and safe. According to VA's Fiscal Year (hereinafter, "FY") 2011 Annual Report on Specialized Programs Offering Assistance to Homeless Veterans, approximately 53 percent of homeless veterans

discharged from this program in FY 2011 moved into independent housing.

Several GPD grantees partner with housing developers to create permanent housing near transitional housing sites, in order to provide continuity of services and improve housing stability once program assistance is complete. In September 2012, VA's GPD program awarded 31 grants to GPD providers who agreed to implement a new GPD model, known as transition-in-place (hereinafter, "TIP"). Under the TIP model, grantees provide time-limited transitional housing assistance, focused on maintaining stable housing, in an apartment-like setting. The goal is for the veteran to assume the responsibility of the lease instead of moving into another location when transitional housing assistance is complete. Grantees are responsible for finding additional housing to replace the units and maintain the ability to serve the number of veterans identified in the grant application.

Implementing the TIP model can lead to additional expenses that traditional GPD providers may not encounter, such as housing search specialists, additional life safety code inspections and compliance issues, increased staffing needs due to travel time to case manage veterans, and a shift in economy of scale. In March 2013, the National Coalition for Homeless Veterans published the results from a survey of GPD grantees to determine their ability to implement the TIP model. The results found that grantees perceived challenges around the physical footprint of their facilities, added expenses to implement the TIP model, and an inability to replace housing units after conversion.

*Committee Bill.* Section 4 of the Committee bill would amend section 2012(a)(2) of title 38, U.S.C., to authorize VA to offset a portion of the added cost to implement the TIP model for GPD grantees by allowing VA to provide up to 150 percent of the per diem rate for the duration of a veteran's participation in the TIP program. It is the view of the Committee that the GPD program, whether the traditional or TIP model, should focus the transitional housing assistance provided on the skills required to ensure housing stability upon program exit. All GPD grantees should receive sufficient per diem payment to provide quality services to homeless veterans. It is the intent of the Committee to incentivize GPD grantees to invest in housing stability by reducing potential barriers to the implementation of a TIP model for transitional housing.

*Sec. 5. Authorization of per diem payments for furnishing care to dependents of certain homeless veterans.*

Section 5 of the Committee bill, which is derived from S. 825 and S. 1058, would modify requirements relating to per diem payments for furnishing services to homeless veterans by authorizing such services to include care of their dependents.

*Background.* In a December 2011 study entitled "Homeless Women Veterans: Actions Needed to Ensure Safe and Appropriate Housing," GAO found the number of homeless women veterans more than doubled between FYs 2006 and 2010, and many of those veterans have minor children. GAO also found that "over 60 percent of the GPD programs that serve homeless women veterans did not house children," and those that did had restrictions such as the ages and number of children allowed. The cost of housing children

was cited as the primary reason they could not be accommodated. VA does not have the statutory authority to reimburse GPD programs for these costs, yet Committee oversight has found the prospect of having to separate from their children is often cited by veterans as a disincentive to participate in VA's homeless programs.

P.L. 112-154, the "Honoring America's Veterans and Caring for Camp Lejeune Families Act of 2012," modified VA's Special Needs Grant Program to include male homeless veterans with minor dependents as an eligible population, and to authorize VA to fund transitional housing for dependents of veterans receiving services funded by this grant. VA has historically been authorized to utilize \$5,000,000 annually to run the Special Needs Grant Program. Approximately one in five grant recipients under this program serve women or veterans with minor dependents.

In contrast, a significant number of women veterans are served by the larger GPD program, rather than the Special Needs Grant Program. According to VA, women received over 185,000 bed days of care through the GPD program in FY 2011. VA's report entitled, "Community Homelessness Assessment, Local Education and Networking Group (CHALENG) for Veterans Fiscal Year (FY) 2011: Services for Homeless Veterans Assessment and Coordination," (hereinafter, "CHALENG report") found a 75 percent increase in the number of homeless families served between FYs 2010 and 2011. One of the barriers to housing cited by survey respondents was the ability to place veteran families in emergency or transitional housing.

*Committee Bill.* Section 5 of the Committee bill would modify section 2012(a) of title 38, U.S.C., by adding a new paragraph that allows per diem payments to be used for dependents of homeless veterans. It is the view of the Committee that taking care of veterans also means taking care of their families. Fear of separation and even permanent loss of their children to the foster care system is a major deterrent to homeless veteran families who may have otherwise sought out assistance from VA, and one that must be removed. The Committee is aware that not every GPD facility can safely accommodate the children of homeless veterans, but intends that VA fund this service at facilities that can appropriately provide these services.

*Sec. 6. Requirement for Department of Veterans Affairs to assess comprehensive service programs for homeless veterans.*

Section 6 of the Committee bill, which is derived from S. 825, would require VA to assess comprehensive service programs to ensure they meet the needs of homeless veterans.

*Background.* VA's GPD program is its second largest program focused on ending homelessness among veterans. While VA's grant evaluation process evaluates clinical, environmental, and other important attributes, there seems to be little, if any, focus on the necessity of a particular type of transitional housing in a particular community. Committee oversight has found a disconnect between the type of GPD beds available and the nature of the homeless population that would be best served by the program in certain communities. For example, a community may have an excess of empty beds reserved for homeless veterans with substance abuse issues, along with a growing population of homeless single parents who

may not be appropriate candidates for housing provided by that GPD grantee.

In a December 2011 study entitled “Homeless Women Veterans: Actions Needed to Ensure Safe and Appropriate Housing,” GAO found that VA does not have information needed to plan services effectively, allocate grants to providers, and track progress toward its overall goal of ending veteran homelessness by 2015. In addition, in its March 2012 report entitled “Audit of the Homeless Providers Grant and Per Diem Program,” VA’s IG concurred with the GAO finding, by noting that the GPD program lacked mechanisms to measure bed capacity against needs associated with underserved populations and geographic areas or against funding priorities.

VA has developed a national homeless registry to better understand the characteristics and needs of homeless veterans served by the VA health care system and its grantees. The registry is intended to improve care for homeless veterans, standardize data collection across VA’s homeless veteran programs, increase coordination of care, and enhance outcomes by providing a better means to track and monitor improvement.

*Committee Bill.* Section 6 of the Committee bill, in a freestanding provision, requires VA to develop mechanisms to measure the capacity of the GPD and Special Needs Grant Program in order to determine whether existing capacity is sufficiently meeting the needs of local homeless veterans, meeting goals set forth through national level funding priorities, and able to implement the TIP model for GPD.

The Committee understands that grant awards under the GPD program are limited by the number of qualified applicants in any given area and grant cycle. However, there are several locations across the country where programs have few to no admissions or where transitional housing programs funded through the GPD program do not meet the needs of homeless veterans in the community. The Committee intends that, to the extent practicable, the capacity of the GPD program be right-sized to fit the needs of each community, based on information collected through the homeless registry, each community’s projected progress toward ending homelessness, and the mix of other services to end homelessness among veterans. Further, the Committee’s intent is that population and capacity information be used to set specific goals regarding the availability of services provided to veterans and underserved populations of homeless veterans; to evaluate progress toward reaching those goals; to inform the grant award process; and to improve referral patterns of homeless veterans to appropriate GPD grantees.

*Sec. 7. Expansion of Department of Veterans Affairs authority to provide dental care to homeless veterans.*

Section 7 of the Committee bill, which is derived from S. 825, would expand VA’s authority to provide dental care to homeless veterans.

*Background.* P.L. 107–95, the “Homeless Veterans Comprehensive Assistance Act of 2001,” (hereinafter, “P.L. 107–95”) authorized VA to develop the Homeless Veterans Dental Program (hereinafter, “HVDP”). Section 2062 of title 38, U.S.C., sets forth the authority, criteria, and requirements for obtaining a medically necessary, one-time course of outpatient dental care through this pro-

gram. Services are considered medically necessary if they are needed to successfully gain or regain employment, to alleviate pain, or for treatment of moderate, severe, or severe and complicated gingival and periodontal pathology. Allowable treatments include examinations and x-rays, oral hygiene instructions, nutritional and tobacco counseling, prophylaxis, deep cleaning, fillings, extractions, removable partial dentures, and dentures.

Eligible veterans include those who are enrolled for a minimum of 60 days in a Domiciliary Residential Rehabilitation Program; a Compensated Work Therapy-Transitional Residence; a Community Residential Care Program home, if placed by VA; a community-based treatment program funded by the Health Care for Homeless Veterans (hereinafter, "HCHV") program; or a GPD program. According to VA, over 100 of its facilities participate in the funded initiative. VA's FY 2011 CHALENG report found, of the veterans surveyed, dental care ranked as the ninth highest need among the street homeless and number one need among formerly homeless veterans who moved into permanent housing.

Historically, VA has pursued the housing-ready model of homeless rehabilitation, where a veteran participates in transitional housing while dealing with the issues that led to housing instability and is then moved into permanent housing. With the recent shift toward the housing first model, where obtaining permanent housing is the catalyst for a veteran being able to deal with issues causing housing instability, the number of veterans moving from chronic homelessness directly into permanent housing is increasing. VA continues work to ensure that, as often as practicable, the Department of Housing and Urban Development-Veterans Affairs Supportive Housing (hereinafter, "HUD-VASH") vouchers continue to be targeted toward the most vulnerable veterans. An unintended consequence of this shift is that chronically homeless veterans who are moved directly into permanent housing are made ineligible for participation in the HVDP. These veterans have been homeless for longer than others and likely have more complex dental conditions.

In some instances, organizations who provide transitional housing to veterans do not apply for VA funding, for a number of reasons. Homeless veterans, who may be referred there by VA, are not included in the population of HVDP-eligible veterans because their housing is not paid for by the Department. This creates further unintended consequences, for the sole reason that VA is not paying for their care.

*Committee Bill.* Section 7 of the Committee bill would amend section 2062(b) of title 38, U.S.C., by expanding the eligibility requirements for HVDP to include veterans who, for a period of 60 consecutive days, are receiving assistance through the HUD-VASH program. Section 7 also expands eligibility requirements to include veterans who are residing in transitional housing that is not paid for by VA, if they cannot reasonably access free dental care in their community and their housing provider verifies they have resided there for a period of 60 consecutive days. It is the intent of the Committee that veterans participating in the HUD-VASH program and in non-VA funded transitional housing also be eligible for services provided through the HVDP.

*Sec. 8. Partnerships with public and private entities to provide legal services to homeless veterans and veterans at risk of homelessness.*

Section 8 of the Committee bill, which is derived from S. 825, would authorize VA to develop partnerships with public and private entities to provide legal services to homeless veterans and veterans at risk of homelessness.

*Background.* VA's FY 2011 CHALENG report revealed that legal assistance ranked among the top four unmet needs, as identified by homeless veterans for the last 4 years. A number of legal issues can contribute to and result from homelessness, including outstanding warrants, outstanding fines, an inability to obtain identification, an inability to prevent eviction, and an inability to successfully negotiate manageable child support payments, among others.

VA offers two programs for these purposes, which combined serve about 40,000 veterans annually. The Health Care for Reentry Veterans (hereinafter, "HCRV") program prepares veterans for release from institutions by providing the information and resources they need to prepare for reentering society. It also provides follow up services to ensure that they continue to have access to the necessary medical and social resources to avoid homelessness.

The Veterans Justice Outreach (hereinafter, "VJO") program is tasked with locating and assisting veterans in the early stages of involvement with the justice system. Each VA Medical Center has at least one VJO Specialist who ensures justice-involved veterans have access to VA services, particularly mental health services, including treatment for substance abuse, as well as housing and employment assistance. VJO Specialists serve as advocates to identify instances where veterans may have broken the law due to service-connected mental illnesses that can be better addressed by treatment programs than imprisonment. These specialists also work to educate law enforcement, judges and other relevant community groups about the unique experiences and resulting challenges faced by this population. The goal is to avoid prison sentences in the first place, which will make finding gainful employment and stable housing a much easier process for these veterans.

A lack of statutory authority to provide legal services to homeless veterans has led to nearly 40 VA Medical Centers providing office space to non-VA legal providers such as law school clinics, private pro bono lawyers, and Legal Aid clinics to provide onsite services to homeless and at-risk veterans. Currently, VA's Regional Councils and local VJO Specialists facilitate partnerships with these legal service providers. According to VA, the ability to strengthen partnerships with a financial component would "significantly enhance VA's ability to address this widely unmet need among homeless and at-risk veterans."

*Committee Bill.* Section 8 of the Committee bill would modify chapter 20 of title 38, U.S.C., by adding a new section after section 2022 that authorizes VA to enter into partnerships with public and private entities to fund a portion of the legal services provided to homeless veterans and veterans at risk of homelessness. This section also requires VA to ensure, to the maximum extent possible, these partnerships are distributed evenly across the country, including in areas that are considered rural or tribal lands.

It is the intent of the Committee that VA partner with both legal service providers and housing providers who offer legal services to develop networks of pro bono legal assistance providers and for purposes related to improving outcomes of the legal assistance provided. Further, the Committee recognizes that these funds may have the most impact for communities that have already begun to help justice-involved veterans through the establishment of Veterans Treatment Courts or Pro Bono Networks of legal services for veterans. The Committee intends that VA, to the extent practicable, prioritize the award of grants for legal services to communities with an existing programmatic framework for preventing homelessness among justice-involved veterans.

Further, it is the intent of the Committee that VA consult with organizations that may be able to assist the Department with identifying organizations that are capable of partnering with VA to provide these services to homeless and at-risk veterans. In the Committee's view, consulting with the Department of Interior regarding outreach to organizations that serve Native Americans and Native Hawaiians, for the purposes of this program, would be of particular benefit to ensure these underserved populations of homeless veterans are benefiting from partners that may be overlooked.

*Sec. 9. Requests for data to evaluate and improve services provided to veterans at risk of homelessness.*

Section 9 of the Committee bill, an original provision, would require VA to periodically evaluate its programs for justice-involved veterans and request data from the Federal Bureau of Investigation, the Bureau of Prisons, and other appropriate law enforcement agencies to do so.

*Background.* Among the populations most at risk for homelessness are those veterans who have become involved in the justice system. In order to avoid homelessness, these individuals need access to counseling and other supportive services that specifically address the added difficulties they will have in finding employment and stable housing upon their release.

VA operates several programs, such as the HCRV and VJO programs, targeted at meeting the complex needs of this population. It is critical that the Department conduct periodic program evaluations to ensure that the programs remain relevant and are meeting the needs of the veterans they serve. VA currently reviews these programs on a triennial basis to determine whether they are successful or whether improvements are needed. It is critically important that the Department is able to access the data needed from other Federal agencies to determine whether these programs continue to be effective.

*Committee Bill.* Section 9 of the Committee bill would amend section 2022 of title 38, U.S.C., by adding a new subsection that would require VA to request data on recidivism and other relevant information from the Bureau of Prisons, the Federal Bureau of Investigation, and other law enforcement agencies to evaluate the effectiveness of homeless prevention programs for justice-involved veterans. Any federal agency receiving a request for data related to these programs would be compelled, within reason, to comply. The Committee believes this change will ensure VA has the data it needs to evaluate and improve upon these programs.

*Sec. 10. Repeal of sunset on authority to carry out program of referral and counseling services for veterans at risk of homelessness who are transitioning from certain institutions.*

Section 10 of the Committee bill, which is derived from S. 825, would repeal the sunset on authority to carry out programs of referral and counseling services for veterans at risk of homelessness who are transitioning from certain institutions.

*Background.* Congress has authorized several initiatives in an effort to provide VA with the tools it needs to end veteran homelessness. Referral and counseling services for veterans at risk of homelessness are an invaluable tool that has been found to effectively assist veterans facing such problems.

P.L. 107–95, the “Homeless Veterans Comprehensive Assistance Act of 2001,” created several programs to assist veterans transitioning from prison or jail, codified in section 2023 of title 38, U.S.C. The Department of Labor (hereinafter, “DOL”) uses the authority provided to operate the Incarcerated Veterans Transition Program, which provides employment services such as job training and placement assistance, job readiness and life skills support, and referrals for housing, health care and other benefits to incarcerated and transitioning veterans who are at risk of homelessness. VA uses the authority provided to operate the HCRV and VJO programs. According to VA, the VJO program serves over 30,000 justice-involved veterans annually and the HCRV program serves over 9,000 reentry veterans annually. The authority under this section is set to expire on September 30, 2013.

*Committee Bill.* Section 10 would provide VA and DOL permanent authority to carry out programs of referral and counseling services for veterans at risk for homelessness who are transitioning from certain institutions. It is the view of the Committee that these programs are necessary to help these particular veterans, who face more barriers than most to achieve housing stability.

*Sec. 11. Repeal of requirement for annual reports on assistance to homeless veterans.*

Section 11 of the Committee bill, which is derived from S. 825, would repeal the requirement for annual reports on assistance to homeless veterans.

*Background.* P.L. 107–95, the “Homeless Veterans Comprehensive Assistance Act of 2001,” required VA to submit to the Committees on Veterans’ Affairs of the Senate and House of Representatives a report on the activities conducted by the Department to assist homeless veterans during the calendar year preceding the report. Each report contained detailed data from the previous year about general, health care related, and benefits related content.

The large amount of time needed to gather the appropriate information for the reports has the unintended result of requiring VA to provide data that is outdated and unresponsive to the Committees’ needs.

*Committee Bill.* Section 11 would repeal the requirement for annual reports on assistance to homeless veterans. It is the intent of the Committee that the time and resources used to compile the annual reports can be better used by VA to complete more focused program evaluations and strategizing to improve services offered to homeless and at-risk veterans.

*Sec. 12. Extensions of authorities.*

Section 12 of the Committee bill, which is derived from S. 825, would authorize continued operation of programs to help homeless veterans.

*Background.* Congress has authorized several initiatives in an effort to provide VA with the tools it needs to address veteran homelessness. According to HUD and VA, there were 62,619 homeless veterans in January 2012. This number represents a 17 percent decrease since 2009. While the number has continued to decrease, continued support is needed to ensure that VA can eliminate homelessness among veterans.

Section 2013 of title 38, U.S.C., authorizes funding to be appropriated to VA to carry out the GPD program. \$250,000,000 is authorized to be appropriated for FY 2013, and \$150,000,000 is authorized to be appropriated for FY 2014 and each subsequent FY.

Section 2021 of title 38, U.S.C., authorizes the DOL to carry out the Homeless Veterans' Reintegration Program (hereinafter, "HVRP"), subject to the availability of appropriations. HVRP is a competitive grant program that awards funding to eligible applicants to provide employment assistance and case management to homeless veterans while linking them to supportive services available in the community. Section 2021 of title 38 authorizes up to \$50,000,000 to be appropriated for each fiscal year, beginning in FY 2002 through FY 2013.

Section 2031 of title 38, U.S.C., authorizes VA to provide outreach services, care, treatment, rehabilitative services, and certain other assistance to veterans suffering from serious mental illness. The two main health care programs administered by VA pursuant to this section are the HCHV program and the Domiciliary Care for Homeless Veterans program. The authority under this section is set to expire on December 31, 2013.

Section 2033 of title 38, U.S.C., authorizes VA, subject to the availability of appropriations, to operate a program to expand and improve its provision of benefits and services to homeless veterans. VA administers this program through its Community Resource and Referral Center (hereinafter, "CRRC") program. The authority for this program is scheduled to expire on December 31, 2013.

Section 2041 of title 38, U.S.C., authorizes VA to sell, lease, or donate property acquired through default on a direct loan or guaranty to community-based and governmental organizations in order to assist homeless veterans and their families in acquiring shelter. No agreements may be entered into after December 31, 2013.

Section 2044 of title 38, U.S.C., authorizes funds to be appropriated for supportive services for very low-income veteran families in permanent housing. VA carries out these services through its Supportive Services for Veterans Families (hereinafter, "SSVF") Program. \$300,000,000 is authorized to be appropriated for FY 2013. \$1,000,000 is authorized to be appropriated through FY 2012 to provide technical assistance grants to eligible entities to train participating grantees on planning, development, and provision of services to participating veteran families.

Section 2061 of title 38, U.S.C., authorizes appropriations for the grant program for veterans with special needs through FY 2013. \$5,000,000 is authorized to be appropriated for this program from FYs 2007 through 2013.

Section 2064 of title 38, U.S.C., authorizes appropriations for technical assistance for nonprofit and community groups applying for grant funding through VA's homeless programs. \$1,000,000 is authorized to be appropriated for this program from FYs 2007 through 2012.

Section 2066 of title 38, U.S.C., establishes within VA the Advisory Committee on Homeless Veterans (hereinafter, "ACHV"). Membership is comprised of a range of stakeholders, including formerly homeless veterans, veterans service organizations, State veterans affairs officials and experts on mental health and substance abuse. Currently, section 2066 of title 38 requires the Committee to cease to exist on December 31, 2013.

The authorities described in this section have been extended several times, most recently in 2012, pursuant to P.L. 112-154, the "Honoring America's Veterans and Caring for Camp Lejeune Families Act of 2012."

*Committee Bill.* Section 12 of the Committee bill would extend the authorities of many of VA's programs to address veteran homelessness.

Section 12(a) of the Committee bill would amend section 2013 of title 38, U.S.C., to authorize \$250,000,000 to be appropriated for the GPD program in FY 2014. It is the intent of the Committee to maintain the program's current level of funding.

Section 12(b) of the Committee bill would amend section 2021(e)(1)(F) of title 38, U.S.C., by authorizing up to \$50,000,000 to be appropriated for HVRP in FY 2014.

Section 12(c) of the Committee bill would amend section 2031(b) of title 38, U.S.C., to extend the HCHV program and the Dominicaly Care for Homeless Veterans program through December 31, 2014.

Section 12(d) of the Committee bill would amend section 2033(d) of title 38, U.S.C., to extend the CRRC program through December 31, 2014.

Section 12(e) of the Committee bill would amend section 2041(c) of title 38, U.S.C., to extend VA's authority to sell, lease, or donate property to house homeless veterans through December 31, 2014.

Section 12(f)(1) of the Committee bill would amend section 2044(e) of title 38, U.S.C., by authorizing up to \$300,000,000 to be appropriated for FY 2014 for financial assistance and supportive services through SSVF.

Section 12(f)(2) of the Committee bill would amend section 2044(e) of title 38, U.S.C., by authorizing for FY 2014 \$1,000,000 to be appropriated for technical assistance for SSVF grantees.

Section 12(g) of the Committee bill would amend section 2061(d)(1) of title 38, U.S.C., to authorize \$5,000,000 to be appropriated for FY 2014 for VA's Special Needs Grant Program.

Section 12(h) of the Committee bill would amend section 2064(b) of title 38, U.S.C., to authorize \$1,000,000 to be appropriated for technical assistance to grant applicants in FY 2014.

Section 12(i) of the Committee bill would amend section 2066(d) of title 38, U.S.C., to extend the ACHV through December 31, 2014.

*Sec. 13. Extension of reduced pension for certain veterans covered by Medicaid plans for services furnished by nursing facilities.*

Section 13 of the Committee bill would extend current law regarding pension payments received by veterans who reside in nursing facilities covered by Medicaid.

*Background.* Section 5503 of title 38, U.S.C., sets forth the criteria under which eligibility for income-based pension payments and aid and attendance allowances are affected by domiciliary or nursing home residence. In instances where a veteran, or surviving spouse, has neither a spouse nor a child, and is receiving Medicaid-covered nursing home care, the veteran or surviving spouse is eligible to receive no more than \$90 per month in VA pension or death pension payments. Under current law, this authority shall cease to exist on November 30, 2016. This authority has been extended several times, most recently pursuant to P.L. 112–260, the “Dignified Burial and Other Veterans’ Benefits Improvement Act of 2012.”

*Committee Bill.* Section 13 of the Committee bill would amend section 5503(d)(7) to extend, through March 31, 2018, current eligibility restrictions for recipients of a VA pension who receive Medicaid-covered nursing home care. It is the view of the Committee that the VA pension program should not be used to subsidize other federal benefits programs. The Committee also intends that pension recipients have available funds for incidentals and personal expenses.

#### COMMITTEE BILL COST ESTIMATE

In compliance with paragraph 11(a) of rule XXVI of the Standing Rules of the Senate, the Committee, based on information supplied by the Congressional Budget Office (hereinafter, “CBO”), estimates that enactment of the Committee bill would, relative to current law, have a discretionary cost of \$842 million over the 2014–2018 period, assuming appropriation of the estimated amounts. In addition, CBO estimates that enacting the bill would decrease net direct spending by \$294 million over the 2014–2023 period. S. 287, as amended, contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act.

The cost estimate provided by CBO, setting forth a detailed breakdown of costs, follows:

CONGRESSIONAL BUDGET OFFICE,  
Washington, DC, August 23, 2013.

Hon. BERNARD SANDERS,  
*Chairman,*  
*Committee on Veterans’ Affairs,*  
*U.S. Senate, Washington, DC.*

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for S. 287, the Helping Homeless Veterans Act of 2013.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Ann E. Futrell.

Sincerely,

DOUGLAS W. ELMENDORF,  
*Director.*

Enclosure.

**S. 287—Helping Homeless Veterans Act of 2013**

**Summary:** S. 287 would reauthorize and expand several programs for homeless veterans that are administered by the Department of Veterans Affairs (VA). CBO estimates that implementing the bill would cost \$842 million over the 2014–2018 period, assuming appropriation of the specified and estimated amounts.

In addition, CBO estimates that enacting the bill would decrease net direct spending by \$294 million over the 2014–2023 period; therefore, pay-as-you-go procedures apply to the bill. Enacting S. 287 would not affect revenues.

S. 287 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA).

**Estimated cost to the Federal Government:** The estimated budgetary impact of S. 287 is summarized in Table 1. The costs of this legislation fall within budget function 700 (veterans benefits and services).

**Basis of estimate:** For this estimate, CBO assumes the legislation will be enacted early in fiscal year 2014, that the necessary amounts will be appropriated for each year, and that outlays will follow historical spending patterns for similar and existing programs.

Table 1.—Estimated Budgetary Effects of S. 287, The Helping Homeless Veterans Act of 2013

	By fiscal year, in millions of dollars—					
	2014	2015	2016	2017	2018	2014-2018
CHANGES IN SPENDING SUBJECT TO APPROPRIATION						
Estimated Authorization Level .....	598	82	54	56	58	850
Estimated Outlays .....	493	156	75	58	58	842
CHANGES IN DIRECT SPENDING <sup>a</sup>						
Estimated Authorization Level .....	0	0	0	-198	-96	-294
Estimated Outlays .....	0	0	0	-198	-96	-294

<sup>a</sup> Enacting S. 287 would not affect direct spending beyond 2018.

*Spending subject to appropriation*

CBO estimates that implementing S. 287 would have a discretionary cost of \$842 million over the 2014–2018 period, assuming appropriation of the specified and estimated amounts (see Table 2). Most of those costs stem from extending certain authorities for programs to assist homeless veterans.

*Extension of Certain Programs for Homeless Veterans.* Section 12 would extend and modify certain programs administered by VA to assist homeless veterans. CBO estimates that implementing this section would cost \$599 million over the 2014–2018 period, assuming appropriation of the specified and estimated amounts.

*Specified Authorizations.* Section 12 would authorize the appropriation of \$457 million for fiscal year 2014 by extending for 1 year

the expired or expiring authorities for the following programs, or by increasing their existing authorization levels:

- Comprehensive Service Programs,
- Homeless Veterans Reintegration Programs,
- Financial assistance for supportive services for very low-income veteran families in permanent housing,
- Grant program for homeless veterans with special needs, and
- Technical assistance grants for nonprofit community-based groups.

Table 2.—Estimated Changes in Spending Subject to Appropriation Under S. 287

	By fiscal year, in millions of dollars—					
	2014	2015	2016	2017	2018	2014–2018
CHANGES IN SPENDING SUBJECT TO APPROPRIATION						
Extension of Certain Programs for Homeless Veterans						
Estimated Authorization Level .....	564	37	0	0	0	601
Estimated Outlays .....	463	112	22	2	0	599
Referral and Counseling Services						
Estimated Authorization Level .....	34	34	35	36	37	176
Estimated Outlays .....	30	34	35	36	37	172
Dental Care						
Estimated Authorization Level .....	*	11	18	19	20	68
Estimated Outlays .....	*	10	17	19	20	66
Legal Services for Homeless Veterans						
Estimated Authorization Level .....	*	*	1	1	1	3
Estimated Outlays .....	*	*	1	1	1	3
Definition of Homeless Veteran						
Estimated Authorization Level .....	*	*	*	*	*	1
Estimated Outlays .....	*	*	*	*	*	1
Assessment of Homeless Service Programs						
Estimated Authorization Level .....	*	*	*	*	*	1
Estimated Outlays .....	*	*	*	*	*	1
Total Changes						
Estimated Authorization Level .....	598	82	54	56	58	850
Estimated Outlays .....	493	156	75	58	58	842

Notes: Details may not add to totals because of rounding; \* = less than \$500,000.

CBO estimates that extending those authorities will cost \$455 million over the 2014–2018 period.

Other extended authorities. Section 12 would extend, for 1 year, the authority for VA to provide outreach services, medical and psychiatric examinations, and community-based residential treatment to veterans suffering from chronic mental conditions or homelessness. It also would authorize the Advisory Committee for Homeless Veterans to continue to operate through the end of calendar year 2014. The authority to provide those services is scheduled to expire on December 31, 2013. Based on spending levels for programs providing similar services, CBO estimates that extending those provisions would cost \$144 million over the 2014–2018 period.

*Referral and Counseling Services.* Section 10 would make permanent the authority for VA to provide referral and counseling services for incarcerated veterans who are at risk of homelessness. The Veterans Justice Program (VJP), which is scheduled to expire on September 30, 2013, offers outreach, referrals to VA services, and short-term case management. Based on information from VA on their anticipated costs for the VJP program if it were extended—\$30 million for 2014—and adjusting for inflation, CBO estimates

that implementing this provision would cost \$172 million over the 2014–2018 period.

*Dental Care.* Section 7 would expand the eligibility for one-time dental care to certain veterans. Under current law, veterans who receive short-term housing assistance may receive dental care to alleviate pain, as part of treatment for a more severe periodontal disease, or to aid in getting a job.

This section would provide that same out-patient dental care to certain veterans receiving longer-term housing assistance through the Department of Housing and Urban Development-VA Supportive Housing (HUD-VASH) program and transitional housing through a non-VA entity. Based on information from VA, CBO estimates about 6,000 HUD-VASH participants and veterans in transitional housing would take advantage of this benefit in 2014, growing to nearly 9,000 by 2018. At an average cost of about \$2,000 per veteran in 2014, and adjusting for medical inflation and a 1-year delayed implementation, CBO estimates that providing the dental care to additional homeless veterans would cost \$66 million over the 2014–2018 period.

*Legal Services for Homeless Veterans.* Section 8 would allow the VA to collaborate with public and private entities to provide legal assistance (in areas such as housing, family law, and criminal defense) to veterans at risk of homelessness. Based on existing participation in the Supportive Service Low Income Vets and Families program, CBO estimates that roughly 15,000 veterans would take advantage of the proposed legal assistance. Based on the stipends provided to the health professional trainees (which includes fellows, residents and students) rotating through VA, CBO determines that VA would award stipends of \$20,000 (adjusted by inflation, annually) to about 50 legal fellows to provide services to veterans. Because of the time necessary to write regulations and to develop partnerships, CBO expects that this program would not be fully implemented for several years. As a result, CBO estimates that implementing section 8 would cost \$3 million over the 2014–2018 period.

*Definition of Homeless Veteran.* Section 2 would expand the definition of a homeless veteran to include veterans who are fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or other life threatening conditions. This expansion would make veterans who are victims of such conditions eligible for services provided to homeless veterans by VA. CBO anticipates this expansion in benefits would primarily affect female veterans.

According to the Bureau of Justice Statistics (BJS), 80 percent of the victims of domestic abuse between 1994 and 2010 were female. Based on information from BJS on the incidence of domestic abuse—less than half a percent of the U.S. population in 2010—and adjusting for the number of female veterans enrolled in VA health care, CBO estimates that the current costs for homeless benefits for transitional housing and supportive services would increase slightly. In total, CBO estimates that implementing section 2 would cost about \$1 million over the 2014–2018 period.

*Assessment of Homeless Service Programs.* Section 5 would require VA to conduct, at a national and local level, an assessment of the comprehensive services provided to homeless veterans. CBO

estimates such an assessment would cost \$1 million over the 2014–2018 period.

*Direct spending*

Section 13 would extend from November 30, 2016, to March 31, 2018, the expiration date of a provision of current law that sets a \$90 per month limit on pensions paid to any veteran who does not have a spouse or child and who is receiving Medicaid benefits in a Medicaid-approved nursing home; that provision also applies to any survivor of a veteran who is receiving such coverage. Using data provided by VA, CBO estimates that about 15,000 veterans and 19,000 survivors would be affected by this provision in both fiscal year 2017 and 2018 and that the average monthly savings to VA in those years would be about \$1,800 per veteran and \$1,200 per survivor. (Those projections account for inflation, mortality rates, and new nursing home patients.) On that basis, CBO estimates that enacting the provision would reduce VA spending by about \$763 million over the 2014–2023 period.

Higher Medicaid payments to nursing homes would offset some of those savings. We estimate that those costs would total \$468 million over that same time period, resulting in a net reduction in direct spending of \$198 million in 2017 and \$96 million in 2018.

**Pay-As-You-Go Considerations:** The Statutory Pay-As-You-Go Act of 2010 establishes budget-reporting and enforcement procedures for legislation affecting direct spending or revenues. The changes in outlays that are subject to those pay-as-you-go procedures are shown in the following table.

Table 3.—CBO Estimate of Pay-As-You-Go Effects for S. 287 as ordered reported by the Senate Committee on Veterans' Affairs on July 24, 2013

	By fiscal year, in millions of dollars—												
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2013–2018	2013–2023
NET INCREASE OR DECREASE (-) IN THE DEFICIT													
Statutory Pay-As-You-Go Impact .....	0	0	0	0	-198	-96	0	0	0	0	0	-294	-294

Intergovernmental and private-sector impact: S. 287 contains no intergovernmental or private-sector mandates as defined in UMRA. As a condition of federal assistance, local governments that provide housing or housing services to eligible veterans would be required to meet the privacy, safety, and security needs of veterans receiving such services. Any costs to those governments would be incurred voluntarily.

*Estimate prepared by:* Federal Costs: Ann E. Futrell and Dwayne M. Wright; Impact on State, Local, and Tribal Governments: Lisa Ramirez-Branum; Impact on the Private Sector: Elizabeth Bass.

*Estimate approved by:* Theresa Gullo, Deputy Assistant Director for Budget Analysis.

#### REGULATORY IMPACT STATEMENT

In compliance with paragraph 11(b) of rule XXVI of the Standing Rules of the Senate, the Committee on Veterans' Affairs has made an evaluation of the regulatory impact that would be incurred in

carrying out the Committee bill. The Committee finds that the Committee bill would not entail any regulation of individuals or businesses or result in any impact on the personal privacy of any individuals and that the paperwork resulting from enactment would be minimal.

#### TABULATION OF VOTES CAST IN COMMITTEE

In compliance with paragraph 7 of rule XXVI of the Standing Rules of the Senate, the following is a tabulation of votes cast in person or by proxy by Members of the Committee on Veterans' Affairs at its July 24, 2013, meeting. Pursuant to rule I(G) of the Committee Rules, Senator Hirono offered an amendment to section 8 of S. 287, as amended, which would include as eligible partners, organizations that serve Native Hawaiians, Alaska Natives, and Native Americans, for the provision of legal services to homeless and at-risk veterans. The Committee accepted the amendment by voice vote, without dissent. The Committee voted, without dissent, to report S. 287, as amended, and as further amended, to the Senate.

#### AGENCY REPORT

On May 9, 2013, Robert L. Jesse, M.D., Ph.D., Principal Deputy Under Secretary for Health, Department of Veterans Affairs, appeared before the Committee on Veterans' Affairs and submitted testimony on, among other things, S. 287 and S. 825. In addition, on September 11, 2013, VA provided views on various bills incorporated into the Committee bill. Excerpts from both the testimony and Department views are reprinted below:

**STATEMENT OF ROBERT L. JESSE, M.D., PH.D., PRINCIPAL  
DEPUTY UNDER SECRETARY FOR HEALTH, DEPARTMENT  
OF VETERANS AFFAIRS**

Good Morning Chairman Sanders, Ranking Member Burr, and Members of the Committee. Thank you for inviting me here today to present our views on several bills that would affect Department of Veterans Affairs (VA) benefits programs and services. Joining me today is Susan Blauert, Deputy Assistant General Counsel.

We do not yet have cleared views on sections 4, 10, 11, or 12 of S. 131, S. 287, section 3 of S. 522, S. 800, S. 832, S. 845, S. 851, S. 852, or the draft bill described as "The Veterans Affairs Research Transparency Act of 2013." Also, we do not have estimated costs associated with implementing S. 131, S. 422, S. 455, or S. 825. We will forward the views and estimated costs to you as soon as they are available.

\* \* \* \* \*

**S. 825, HOMELESS VETERANS PREVENTION ACT OF 2013**

This bill would amend title 38 to improve the provision of services for homeless Veterans and their families. VA supports many of the sections of this bill, including increasing the amount of per diem payments for Veterans that are participating in the Grant and Per Diem (GPD) program through a "transition in place" grant, providing permanent authority for VA's Veteran Justice Outreach program, authorizing VA to fund entities to provide legal services to Veterans who are homeless or at risk of homelessness, and extending a number of VA's existing homeless authorities, provided that any additional resources necessary to implement these provisions are enacted. However, we do have reservations concerning the following sections.

Section 4 would amend 38 U.S.C. section 2012(a) to permit a grantee receiving per diem payments under VA's Homeless Provider GPD program to use part of these payments for the care of a dependent of a homeless Veteran who is receiving services covered by the GPD program grant. This authority would be limited to the time period during which the Veteran is receiving services under the grant.

VA supports the intent of section 4. We feel that this authority is needed to fully reach the entire homeless population. However, we are concerned that full implementation of the legislation would require additional funding to avoid diminished services for the population of homeless Veterans now being served by VA.

Section 5 would require the Secretary to assess and measure the capacity of programs receiving grants under 38 U.S.C. section 2011.

VA does not support section 5 because it would be an unnecessary and duplicative reporting requirement. VA already monitors

occupancy rates and geographic distribution of GPD grantees through a number of resources. Furthermore, section 5 would impose a new reporting requirement on GPD grantees, a burden that would be felt by community providers not just the Department.

Section 9 would extend dental benefits under 38 U.S.C. section 2062 to a Veteran enrolled in VA's health care system who is also receiving for a period of 60 consecutive days assistance under section 8(o) of the United States Housing Act of 1937 (commonly referred to as section 8 vouchers).

VA supports the intent of section 9, but must condition this support on assurance of the additional resources that would be required were this provision enacted. VA recognizes the need for dental care and supports the improvement of oral health and well-being for Veterans experiencing homelessness. Studies have shown that after dental care, Veterans report significant improvement in perceived oral health, general health, and overall self-esteem; thus, supporting the notion that dental care is an important aspect of the overall concept of homeless rehabilitation. Increasing access to dental care for HUD-VA Supportive Housing program participants is, therefore, an important step in VA's Plan to End Veteran Homelessness.

Additionally, to help clarify that subsection (c) of section 8 describes legal services provided, rather than the organizations that provide them, we recommend adding the phrase "capable of providing the legal services" after the word "organizations" in section 8(d)(1).

Mr. Chairman, this concludes my statement. Thank you for the opportunity to appear before you today. I would be pleased to respond to questions you or the other Members may have.



THE SECRETARY OF VETERANS AFFAIRS  
WASHINGTON

September 11, 2013

The Honorable Bernie Sanders  
Chairman  
Senate Committee on Veterans' Affairs  
United States Senate  
Washington, D.C. 20510

Dear Mr. Chairman:

The agenda for the Senate Committee on Veterans Affairs' May 9, 2013, legislative hearing included a number of bills that the Department of Veterans Affairs was unable to address in our testimony. We are aware of the Committee's interest in receiving our views and cost estimates for those bills. By this letter, we are providing views and cost estimates on section 4 and sections 10-12 of S. 131; S. 287; section 3 of S. 522; S. 800; sections 2-3 and 5-10 of S. 825; S. 832; S. 845; S. 851; and S. 877. We are also providing views for S. 852. In addition, we are providing cost estimates for sections 2 and 3 of S. 131; S. 422; section 2 of S. 522; and sections 6 and 7 of S. 852.

We appreciate this opportunity to comment on this legislation and look forward to working with you and the other Committee Members on these important legislative issues.

Sincerely,

Eric K. Shinseki

Enclosure

ENCLOSURE  
VA VIEWS

S. 287, EXPANSION OF THE DEFINITION OF HOMELESS VETERAN

VA supports S. 287, which would broaden the definition of "homeless Veteran" in 38 U.S.C. § 2002(1). Section 2002(1) currently defines homeless Veteran by reference to the definition of homeless person found in subsection (a) of the McKinney-Vento Homeless Assistance Act, 42 U.S.C. § 11302. The bill would amend § 2002(1) to also refer to subsection (b) of § 11302, which includes in the definition of homeless person "any individual or family who is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions in the individual's or family's current housing situation, including where the health and safety of children are jeopardized, and who have no other residence and lack the resources or support networks to obtain other permanent housing."

VA serves Veterans fleeing from domestic violence and intimate partner violence (DV/IPV) when they otherwise meet the definition of homeless and when it is clinically appropriate to do so. Even when it is not clinically appropriate to place a Veteran affected by DV/IPV in a VA homeless program, VA works closely with local community organizations to identify resources that would most effectively address the needs of the Veteran. S. 287 would more closely align the definitions of homeless used by VA and the Department of Housing and Urban Development. This would facilitate data sharing and promote comprehensive interagency program evaluation.

Although VA supports the bill, we note that it may not always be clinically appropriate to merely place a victim of DV/IPV in a VA homeless program. VA clinical experience and empirical research has shown that effective DV/IPV intervention involves collaboration among many programs and agencies. An array of services, from crisis intervention to long-term assistance, is needed to serve Veterans fleeing violent relationships. Immediate crisis intervention may include medical care and assistance with food, shelter, child care and general safety. Long-term assistance may include ongoing medical care, counseling to cope with the lasting emotional and psychological effects of DV/IPV, and services to address economic and housing stability.

In recognition of the complex needs of Veterans affected by DV/IPV, VA recently chartered a Domestic Violence Task Force. The Task Force will develop a national plan to address DV/IPV issues in depth. However, as noted, effectively addressing the problem of DV/IPV will require collaboration between many programs and local, State, and Federal agencies.

Within VA, there is a continuum of care with homeless services ranging from rapid stabilization to permanent supportive housing. VA's homeless programs may help prevent future DV/IPV by providing Veterans with alternative housing options so that they can safely exit abusive relationships. VA is committed to Veterans affected by DV/IPV, and VA programs addressing DV/IPV specifically will continue to collaborate with VA homeless programs to ensure those fleeing DV/IPV get the care and support they need.

VA is not able to provide an accurate cost estimate for S. 287 because we lack detailed data regarding the size and characteristics of this population. We do note that many VA providers have limited training related to DV/IPV, and that S. 287 would likely require additional training. This would generate additional costs and a commensurate requirement for funding.

The definition of "homeless veteran" in 38 U.S.C. 2002(1) also applies to the Homeless Veterans Reintegration Programs (HVRP) administered by the U.S. Department of Labor. VA defers to the Secretary of Labor on the application of the new definition of homelessness to the HVRP program.

\* \* \* \* \*

#### S. 825, HOMELESS VETERANS PREVENTION ACT OF 2013

S. 825 would amend title 38 to improve the provision of services for homeless Veterans and their families. In our May 9, 2013 testi-

mony, VA indicated that it supported many of the sections of S. 825 but did not provide detailed views on all sections. Outlined below are VA's views and costs on sections 2-3 and 5-10 of S. 825. VA is working to develop a cost estimate for section 4.

Section 2(a) of S. 825 would amend current law to authorize the Secretary, when awarding grants under the Grant and Per Diem (GPD) Program, to assist eligible entities not only in establishing, but also in maintaining programs to furnish services for homeless Veterans (i.e., outreach services; rehabilitative services; vocational counseling and training; and transitional housing assistance). VA supports Section 2(a). As VA works toward ending Veteran homelessness, VA does not anticipate a pressing need to create additional transitional housing beds. Consequently, rehabilitating and maintaining current GPD beds would be a more cost effective way of maintaining GPD transitional beds nationwide.

Section 2(b) would amend current law to prohibit the Secretary from making a grant under the GPD Program unless the prospective grantee agrees to maintain the physical privacy, safety and security needs of homeless Veterans receiving services though the project. VA supports Section 2(b). This new requirement would reinforce the GPD Program's inspection efforts and ensure that grantees comply with VA's ongoing efforts to meet the privacy, safety and security needs of Veterans participating in the program. As a practical matter, current GPD grantees would absorb the costs of these improvements because VA lacks authority to remodel or renovate existing GPD facilities.

VA does not anticipate that section 2(a) would lead to additional costs beyond the current authorization of appropriations (38 U.S.C. 2013). The provision would allow VA to allocate existing funds to support rehabilitating and maintaining existing GPD projects. Section 2(b) also would not result in any additional costs. If subsequent legislation provided more specific definitions of physical, privacy, safety and security, however, it is possible that VA could incur costs or costs that cannot presently be determined.

Section 3 would amend current law to increase the per diem payments for Veterans who are participating in the GPD Program through a "transition in place" (TIP) grant. The per diem payments under GPD TIP would be increased by 150 percent of the VA State Home rate. VA supports Section 3. Supporting Veterans' transition from homelessness to permanent housing is fundamental to ending homelessness among Veterans. By allowing Veterans to "transition in place" to permanent housing, the Department would provide a valuable alternative for Veterans who may not need or be interested in participating in the Housing and Urban Development—VA Supportive Housing (HUD-VASH) program.

VA estimates that section 3 would be cost neutral since the funds would come from existing appropriations to the GPD program.

As indicated in our testimony on May 9, 2013, VA supports the intent of section 4. VA has not yet completed its cost analysis for this provision, however, and will provide the completed cost estimate as soon as it is completed.

Section 5 would require VA to assess and measure the capacity of programs receiving grants under 38 U.S.C. 2011 or per diem payments under 38 U.S.C. 2012 and 2061 and to use the informa-

tion to set goals, inform funding allocation decisions, and improve the referral of homeless Veterans to programs receiving funding. VA supports the intent of section 5 but does not believe legislation is needed because VA conducts internal assessments of service programs.

VA estimates that section 5 would cost approximately \$21,000 to gather and analyze the required information, and to draft the required report.

Section 6 would repeal section 2065 of 38 U.S.C. to remove the requirement that VA report to the Senate and House of Representatives Veterans' Affairs Committees on VA's activities during the preceding calendar year related to VA's programs homeless assistance programs.

VA supports section 6. Time spent on this reporting function would be better used by VA personnel to internally assess the programs and implement changes to enhance the benefits and services provided to homeless Veterans. VA conducts ongoing data analysis of VA homeless programs and remains committed to reporting data to the Committees upon request.

Section 6 would result in a small cost savings for VA. In fiscal year 2013, VHA Homeless Programs prepared the fiscal year 2012 VA Specialized Homeless Programs Report to Congress. At that time, VHA Homeless Programs estimated that it cost approximately \$2,800 to produce the report. If Section 6 were enacted, VA expects that this would save at least \$2,800 in each subsequent FY.

Section 7 would strike section 2023(d) of 38 U.S.C. and replace it with section 2023(e). This would eliminate the September 30, 2013 end date for VA's Veteran Justice Outreach (VJO) Program and VA's Health \*Care for Reentry Veterans (HCRV) Program, programs that provide referral and counseling services for Veterans who are transitioning out of penal institutions and are at risk of homelessness. VJO's goal is to avoid the unnecessary criminalization of mental illness and extended incarceration among Veterans by ensuring that eligible Veterans involved with the criminal justice system have timely access to VA's mental health and substance use services when clinically indicated, and other VA services and benefits as appropriate. Similarly, HCRV's goals are to prevent homelessness, reduce the impact of medical, psychiatric, and substance abuse problems upon community readjustment, and decrease the likelihood of re-incarceration for Veterans leaving prison.

VA supports section 7. Making these programs permanent would recognize the crucial role these programs play in preventing and ending Veteran homelessness.

Section 7 would not result in any new costs. The provision permanently authorizes VA's Veterans Justice Programs, including VJO and HCRV, but does not require direct spending and would be subject to available appropriations.

Section 7 would also eliminate the September 30, 2013 end date for the Department of Labor's Incarcerated Veterans Transition Program. VA defers to the Secretary of Labor for his views on the extension of this program.

Section 8 would authorize the Secretary to fund entities to provide legal services to Veterans, particularly those who are homeless

or at risk of homelessness. Section 8 recognizes that the Secretary may partner with a wide variety of organizations for the provision of services. Additionally, the language authorizes VA to fund only a portion of the cost of legal services; VA may not pay for all of these services. This would require VA to properly leverage any expenditure under this authority by finding viable public or private entities capable of providing legal services.

VA supports section 8. Homeless and at-risk Veteran access to legal services remains a crucial but largely unmet need. Lack of access to legal representation for outstanding warrants or fines, child support arrearages, driver's license revocation, and other legal matters continues to contribute to Veterans' risk of becoming and remaining homeless. A demonstration project conducted by the Department of Veterans Affairs, the Department of Health and Human Services' Office of Child Support Enforcement, and the American Bar Association indicates that legal services are instrumental in assisting Veterans who have child support arrearages.

VA estimates that section 8 would cost \$750,000 in fiscal year 2014; \$3.9 million over 5 years; and \$8.2 million over 10 years.

Section 9 would extend dental benefits under 38 U.S.C. § 2062 to enrolled Veterans who are receiving, for a period of 60 consecutive days, assistance under section 8(o) of the U.S. Housing Act of 1937 (commonly referred to as section 8 vouchers). Section 9 would also amend current law to permit breaks in the continuity of assistance or care for which the Veteran is not responsible.

VA supports the intent of section 9, conditioned on the availability of additional resources that would be required if the provision is enacted. VA recognizes the need for dental care and supports the improvement of oral health and well-being for Veterans experiencing homelessness. Studies have shown that after dental care, Veterans report significant improvement in perceived oral health, general health and overall self-esteem, thus, supporting the notion that dental care is an important aspect of the overall concept of homeless rehabilitation. Increasing access to dental care for HUD-VASH program participants is, therefore, an important step in VA's Plan to End Veteran Homelessness.

VA estimates that section 9 would cost \$88.6 million in fiscal year 2014; \$148.5 million over 5 years; and \$216 million over 10 years.

Section 10 contains extensions to various existing VA authorities in U.S. Code. Section 10(a) would authorize appropriations of \$250,000,000 for fiscal year 2014 and \$150,000,000 each fiscal year thereafter for VA's GPD Program.

VA supports Section 10(a) in part. Under current law, the amount authorized to be appropriated for fiscal year 2014 will be reduced from \$250,000,000 to \$150,000,000 and then remain the same for each subsequent fiscal year. We support section 10(a) to the extent that it would retain the program's current level of authorization for fiscal year 2014. We have concerns, however, about decreasing the authorization level to \$150,000,000 for fiscal year 2015 and each subsequent year. Such a decrease would be highly problematic. At the current rate, GPD expenditures would far exceed the amount authorized to be appropriated for the program for fiscal year 2015 and thereafter. VA would require additional fund-

ing to support the existing projects at anticipated per diem and occupancy rates in fiscal year 2015 and beyond. Otherwise, VA would be forced to cut per diem payments to GPD community providers or to summarily terminate GPD projects presently serving homeless Veterans.

Section 10(b) would extend the authorization of annual appropriations of \$50,000,000 for the U.S. Department of Labor's Homeless Veterans Reintegration Programs through fiscal year 2014. We defer to the views of the Secretary of Labor on this provision.

Section 10(c) would extend VA's general treatment and rehabilitation authority (codified at 38 U.S.C. 2031(a)) for seriously mentally ill and homeless Veterans from December 31, 2013 to December 31, 2014. VA supports reauthorizing VA's Health Care for Homeless Veterans program, VA's program offering outreach services and contract therapeutic housing, but suggests that section 2031 be amended in subsection (b) by striking "2013" and inserting "2016." VA does not anticipate any additional costs associated with this section.

Section 10(d) would extend VA's operation of comprehensive service centers for homeless Veterans under section 2033 of 38 U.S.C. from December 31, 2013 to December 31, 2014. VA supports section 10(d), which would re-authorize VA's Community Resource and Referral Centers but suggests that section 2033 be amended in subsection (d) by striking "2013" and inserting "2016." VA does not anticipate any additional costs associated with this section.

Section 10(e) would extend through December 31, 2014, the Secretary's authority under section 2041 of 38 U.S.C. to sell, lease, or donate properties to nonprofit organizations that provide shelter to homeless Veterans. Under current law, the authority will expire on December 31, 2013. VA supports section 10(e) because it will help VA meet the Secretary's goal of ending Veteran homelessness by 2015. While any extension of authority under 38 U.S.C. 2041 would result in a reduction in property sales proceeds, neither a 1-year, nor a 5-year extension would result in any significant loan subsidy costs.

Section 10(f) would require VA to make available (from amounts appropriated for Medical Services) \$300,000,000 for fiscal year 2013 for its program under section 2044 of 38 U.S.C. offering financial assistance for supportive services for very low-income Veteran families in permanent housing (Supportive Services for Veterans Families, or SSVF). VA has already budgeted \$300 million for the SSVF Program in fiscal year 2014. VA supports section 10(f), which would re-authorize appropriations for the SSVF Program, VA's premier prevention and rapid re-housing program. However, VA suggests that 38 U.S.C. 2044(e)(1) be amended by adding after subparagraph (E): "(F) Such sums as may be necessary for fiscal year 2014, and thereafter." This change would provide VA with the flexibility to devote the necessary funding to operations under the SSVF Program. SSVF is an essential part of VA's plan to end Veteran homelessness, and VA may need to devote more resources to SSVF as VA concludes the Veteran homelessness initiative. There are no costs associated with this section as it provides authorization for appropriations beginning in fiscal year 2014.

VA also suggests that 38 U.S.C. 2044(e)(3) be amended to read: “From amounts appropriated to the Department for Medical Services, there shall be authorized \$1,500,000 for each fiscal year to carry out the provisions of subsection (d).” These changes would allow VA to devote more resources to technical assistance for SSVF grantees. By the beginning of fiscal year 2014, VA will have more than tripled the number of SSVF grantees from the first grant round. With this influx of grantees, VA needs a larger authorization so that VA can provide ongoing training and assistance to these grantees.

Section 10(g) would extend VA’s GPD Program for homeless Veterans with Special Needs through 2015. VA supports this measure but suggests that 38 U.S.C. 2061 be amended in subsection (d) by striking “for each of fiscal years 2007 through 2013.” VA does not anticipate any additional costs associated with this section.

Section 10(h) would extend VA’s authority under 39 U.S.C. 2064 to offer technical assistance grants for non-profit community-based groups. VA supports this measure. VA does not anticipate any additional costs associated with this section.

Section 10(i) would extend VA’s Advisory Committee on Homeless Veterans from December 31, 2013, to December 31, 2014. VA supports this measure but suggests that 38 U.S.C. 2066 be amended in subsection (d) by striking “2013 and inserting “2016.” This technical change would authorize the Advisory Committee through the end of the Veteran homelessness initiative so that the Committee can assess the successes of the initiative and identify actions that could be taken to improve other VA Programs as well as other homelessness programs across the country. VA does not anticipate any additional costs associated with this section.

\* \* \* \* \*

## CHANGES IN EXISTING LAW

In compliance with paragraph 12 of Rule XXVI of the Standing Rules of the Senate, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman).

# Title 38. Veterans' Benefits

\* \* \* \* \*

## Part II. General Benefits

\* \* \* \* \*

### Chapter 20. Benefits for Homeless Veterans

Sec.

\* \* \* \* \*

#### SUBCHAPTER III. TRAINING AND OUTREACH

2021. Homeless veterans reintegration programs.

2021A. Homeless women veterans and homeless veterans with children reintegration grant program.

2022. Coordination of outreach services for veterans at risk of homelessness.

2022A. *Partnerships with public and private entities to provide legal services to homeless veterans and veterans at risk of homelessness.*

\* \* \* \* \*

#### SUBCHAPTER VII. OTHER PROVISIONS

\* \* \* \* \*

【2065. Annual Report on Assistance to Homeless Veterans.】

\* \* \* \* \*

## Subchapter I. Purpose; Definitions; Administrative Matters

\* \* \* \* \*

### SEC. 2002. DEFINITIONS

In this chapter:

(1) The term "homeless veteran" means a veteran who is homeless (as that term is defined [in section 103(a) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11302(a))] in subsection (a) or (b) of section 103 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11302)).

\* \* \* \* \*

## Subchapter II. Comprehensive Service Programs

### **SEC. 2011. GRANTS**

(a) AUTHORITY TO MAKE GRANTS.—Subject to the availability of appropriations provided for such purpose, the Secretary shall make grants to assist eligible entities in establishing programs to furnish, and expanding [or modifying], *modifying, or maintaining existing programs for furnishing, privately, safely, and securely, the following to homeless veterans:*

\* \* \* \* \*

(f) \* \* \*

\* \* \* \* \*

(5) \* \* \*

(6) *To meet the physical privacy, safety, and security needs of homeless veterans receiving services through the project.*

\* \* \* \* \*

### **SEC. 2012. PER DIEM PAYMENTS**

(a) \* \* \*

(1) \* \* \*

(2)(A) [The rate] Except as otherwise provided in subparagraph (B), the rate for such per diem payments shall be the daily cost of care estimated by the grant recipient or eligible entity adjusted by the Secretary [under subparagraph (B)]. In no case may the rate determined under this paragraph exceed the rate authorized for State homes for domiciliary care under subsection (a)(1)(A) of section 1741 of this title, as the Secretary may increase from time to time under subsection (c) of that section.] under subparagraph (C).

(B)(i) Except as provided in clause (ii), in no case may the rate determined under this paragraph exceed the rate authorized for State homes for domiciliary care under subsection (a)(1)(A) of section 1741 of this title, as the Secretary may increase from time to time under subsection (c) of that section.

(ii) In the case of services furnished to a homeless veteran who is placed in housing that will become permanent housing for the veteran upon termination of the furnishing of such services to such veteran, the maximum rate of per diem authorized under this section is 150 percent of the rate described in clause (i).

(C) [(B)] The Secretary shall adjust the rate estimated by the grant recipient or eligible entity under subparagraph (A) to exclude other sources of income described [in subparagraph (D)] in subparagraph (E) that the grant recipient or eligible entity certifies to be correct.

(D) [(C)] Each grant recipient or eligible entity shall provide to the Secretary such information with respect to other sources of income as the Secretary may require to make the adjustment [under subparagraph (B)] under subparagraph (C).

(E) [(D)] The other sources of income referred to [in subparagraphs (B) and (C)] in subparagraphs (C) and (D) are payments to the grant recipient or eligible entity for furnishing services to homeless veterans under programs other than

under this subchapter, including payments and grants from other departments and agencies of the United States, from departments or agencies of State or local government, and from private entities or organizations.

(3) \* \* \*

*(4) Services for which a recipient of a grant under section 2011 of this title (or an entity described in paragraph (1)) may receive per diem payments under this subsection may include furnishing care for a dependent of a homeless veteran who is under the care of such homeless veteran while such homeless veteran receives services from the grant recipient (or entity).*

\* \* \* \* \*

#### SEC. 2013. AUTHORIZATION OF APPROPRIATIONS

There is authorized to be appropriated to carry out this subchapter amounts as follows:

\* \* \* \* \*

**[(4) \$250,000,000 for fiscal year 2012.**

**[(5) \$250,000,000 for fiscal year 2013.**

**[(6) \$150,000,000 for fiscal year 2014 and each subsequent fiscal year.]**

*(4) \$250,000,000 for each of fiscal years 2012 through 2014.*

*(5) \$150,000,000 for fiscal year 2015 and each subsequent fiscal year.*

\* \* \* \* \*

### Subchapter III. Training and Outreach

#### SEC. 2021. HOMELESS VETERANS REINTEGRATION PROGRAMS

\* \* \* \* \*

(e) \* \* \*

(1) \* \* \*

\* \* \* \* \*

**(F) \$50,000,000 for each of fiscal years 2007 through [2013] 2014.**

\* \* \* \* \*

#### SEC. 2022. COORDINATION OF OUTREACH SERVICES FOR VETERANS AT RISK OF HOMELESSNESS

\* \* \* \* \*

*(f) REQUESTS FOR DATA TO EVALUATE AND IMPROVE SERVICES PROVIDED TO VETERANS AT RISK OF HOMELESSNESS.—(1) The Secretary shall from time to time request from the Federal Bureau of Investigation, the Bureau of Prisons, the Bureau of Justice Statistics, and other appropriate Federal law enforcement agencies data in the possession of such agencies useful for the evaluation and improvement of the services provided to veterans at risk of homelessness under this section and section 2023 of this title.*

*(2) Such agencies shall make reasonable efforts to comply with any such request by the Secretary.*

*(g) [(f)] REPORTS.—*

\* \* \* \* \*

**SEC. 2022A. PARTNERSHIPS WITH PUBLIC AND PRIVATE ENTITIES TO PROVIDE LEGAL SERVICES TO HOMELESS VETERANS AND VETERANS AT RISK OF HOMELESSNESS**

(a) **PARTNERSHIPS AUTHORIZED.**—Subject to the availability of funds for that purpose, the Secretary may enter into partnerships with public or private entities to fund a portion of the general legal services specified in subsection (c) that are provided by such entities to homeless veterans and veterans at risk of homelessness.

(b) **LOCATIONS.**—The Secretary shall ensure that, to the extent practicable, partnerships under this section are made with entities equitably distributed across the geographic regions of the United States, including rural communities, tribal lands of the United States, Native Americans, and tribal organizations (as defined in section 3765 of title 38, United States Code).

(c) **LEGAL SERVICES.**—Legal services specified in this subsection include legal services provided by public or private entities that address the needs of homeless veterans and veterans at risk of homelessness as follows:

(1) Legal services related to housing, including eviction defense and representation in landlord-tenant cases.

(2) Legal services related to family law, including assistance in court proceedings for child support, divorce, and estate planning.

(3) Legal services related to income support, including assistance in obtaining public benefits.

(4) Legal services related to criminal defense, including defense in matters symptomatic of homelessness, such as outstanding warrants, fines, and driver's license revocation, to reduce recidivism and facilitate the overcoming of reentry obstacles in employment or housing.

(d) **CONSULTATION.**—In developing and carrying out partnerships under this section, the Secretary shall, to the extent practicable, consult with public and private entities—

(1) for assistance in identifying and contacting organizations capable of providing the legal services described in subsection (c); and

(2) to coordinate appropriate outreach relationships with such organizations.

(e) **REPORTS.**—The Secretary may require entities that have entered into partnerships under this section to submit to the Secretary periodic reports on legal services provided to homeless veterans and veterans at risk of homelessness pursuant to such partnerships.

**SEC. 2023. REFERRAL AND COUNSELING SERVICES: VETERANS AT RISK OF HOMELESSNESS WHO ARE TRANSITIONING FROM CERTAIN INSTITUTIONS**

(a) \* \* \*

[(b) **LOCATION OF PROGRAM.**—The program shall be carried out in at least 12 locations. One location shall be a penal institution under the jurisdiction of the Bureau of Prisons.]

(b) [(c)] **SCOPE OF PROGRAM.**—

(1) [To the extent practicable, the program] The program shall provide both referral and counseling services, and in the case of counseling services, shall include counseling with respect to job training and placement (including job readiness),

housing, health care, and other benefits to assist the eligible veteran in the transition from institutional living.

\* \* \* \* \*

**[(d) DURATION.]**—The authority of the Secretaries to provide referral and counseling services under the demonstration program shall cease on September 30, 2013.]

**(c) [(e)] DEFINITION.**—In this section, the term “eligible veteran” means a veteran who—

(1) \* \* \*

(2) is at risk for homelessness absent referral and counseling services [provided under the demonstration program] (as determined under guidelines established by the Secretaries).

\* \* \* \* \*

#### **Subchapter IV. Treatment and Rehabilitation for Seriously Mental Ill and Homeless Veterans**

##### **SEC. 2031. GENERAL TREATMENT**

\* \* \* \* \*

(b) The authority of the Secretary under subsection (a) expires on [December 31, 2013] December 31, 2014.

\* \* \* \* \*

##### **SEC. 2033. ADDITIONAL SERVICES AT CERTAIN LOCATIONS**

\* \* \* \* \*

(d) The program under this section shall terminate on [December 31, 2013] December 31, 2014.

\* \* \* \* \*

#### **Subchapter V. Housing Assistance**

##### **SEC. 2041. HOUSING ASSISTANCE FOR HOMELESS VETERANS**

\* \* \* \* \*

(c) The Secretary may not enter into agreements under subsection (a) after [December 31, 2013] December 31, 2014.

\* \* \* \* \*

##### **SEC. 2044. FINANCIAL ASSISTANCE FOR SUPPORTIVE SERVICES FOR VERY LOW-INCOME VETERAN FAMILIES IN PERMANENT HOUSING**

\* \* \* \* \*

(e) \* \* \*  
(1) \* \* \*

\* \* \* \* \*

(F) \$300,000,000 for fiscal year 2014.

\* \* \* \* \*

(3) There is authorized to be appropriated \$1,000,000 for each of the fiscal years 2009 through [2012] 2014 to carry out the provisions of subsection (d).

\* \* \* \* \*

## Subchapter VII. Other Provisions

### SEC. 2061. GRANT PROGRAM FOR HOMELESS VETERANS WITH SPECIAL NEEDS

\* \* \* \* \*

#### (d) FUNDING.—

(1) From amounts appropriated to the Department for “Medical Services” [for each of fiscal years 2007 through 2013, \$5,000,000 shall be available] for each of fiscal years 2007 through 2014, \$5,000,000 shall be available for each such fiscal year for the purposes of the program under this section.

(2) \* \* \*

### SEC. 2062. DENTAL CARE

(a) \* \* \*

\* \* \* \* \*

[(b) ELIGIBLE VETERANS.—Subsection (a) applies to a veteran—  
[(1) who is enrolled for care under section 1705(a) of this title; and

[(2) who, for a period of 60 consecutive days, is receiving care (directly or by contract) in any of the following settings:

[(A) A domiciliary under section 1710 of this title.

[(B) A therapeutic residence under section 2032 of this title.

[(C) Community residential care coordinated by the Secretary under section 1730 of this title.

[(D) A setting for which the Secretary provides funds for a grant and per diem provider.

[(3) For purposes of paragraph (2), in determining whether a veteran has received treatment for a period of 60 consecutive days, the Secretary may disregard breaks in the continuity of treatment for which the veteran is not responsible.]

(b) ELIGIBLE VETERANS.—(1) Subsection (a) applies to a veteran who—

(A) is enrolled for care under section 1705(a) of this title; and  
(B) for a period of 60 consecutive days, is receiving—

(i) assistance under section 8(o) of the United States Housing Act of 1937 (42 U.S.C. 1437f(o)); or

(ii) care (directly or by contract) in any of the following settings:

(I) A domiciliary under section 1710 of this title.

(II) A therapeutic residence under section 2032 of this title.

(III) Community residential care coordinated by the Secretary under section 1730 of this title.

(IV) A setting for which the Secretary provides funds for a grant and per diem provider.

(V) A setting—

(aa) in which the veteran is receiving transitional housing assistance;

(bb) for which funding is not provided for transitional housing assistance under the laws administered by the Secretary;

*(cc) for which the Secretary receives verification from the provider of care that the veteran is receiving care for a period of 60 consecutive days; and*

*(dd) from which the Secretary determines that the veteran cannot reasonably access comparable dental services at no cost and in a reasonable period of time.*

*(2) For purposes of paragraph (1), in determining whether a veteran has received assistance or care for a period of 60 consecutive days, the Secretary may disregard breaks in the continuity of assistance or care for which the veteran is not responsible.*

(c) \* \* \*

\* \* \* \* \*

#### **SEC. 2064. TECHNICAL ASSISTANCE GRANTS FOR NONPROFIT COMMUNITY-BASED GROUPS**

(a) \* \* \*

**(b) AUTHORIZATION OF APPROPRIATIONS.**—There are authorized to be appropriated \$1,000,000 for each of fiscal years 2007 through [2012] 2014 to carry out the program under this section.

#### **[SEC. 2065. ANNUAL REPORT ON ASSISTANCE TO HOMELESS VETERANS]**

**[(a) ANNUAL REPORT.]**—Not later than June 15 of each year, the Secretary shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report on the activities of the Department during the calendar year preceding the report under programs of the Department under this chapter and other programs of the Department for the provision of assistance to homeless veterans.

**[(b) GENERAL CONTENTS OF REPORT.]**—Each report under subsection (a) shall include the following:

**[(1) The number of homeless veterans provided assistance under the programs referred to in subsection (a).]**

**[(2) The cost to the Department of providing such assistance under those programs.]**

**[(3) The Secretary's evaluation of the effectiveness of the programs of the Department in providing assistance to homeless veterans, including—**

**[(A) residential work-therapy programs;**

**[(B) programs combining outreach, community-based residential treatment, and case-management; and**

**[(C) contract care programs for alcohol and drug-dependence or use disabilities.]**

**[(4) The Secretary's evaluation of the effectiveness of programs established by recipients of grants under section 2011 of this title and a description of the experience of those recipients in applying for and receiving grants from the Secretary of Housing and Urban Development to serve primarily homeless persons who are veterans.]**

**[(5) Information on the efforts of the Secretary to coordinate the delivery of housing and services to homeless veterans with other Federal departments and agencies, including—**

**[(A) the Department of Defense;**

**[(B) the Department of Health and Human Services;**

[(C) the Department of Housing and Urban Development;  
[(D) the Department of Justice;  
[(E) the Department of Labor;  
[(F) the Interagency Council on Homelessness;  
[(G) the Social Security Administration; and  
[(H) any other Federal department or agency with which the Secretary coordinates the delivery of housing and services to homeless veterans.

[(6) Any other information on those programs and on the provision of such assistance that the Secretary considers appropriate.

[(c) **HEALTH CARE CONTENTS OF REPORT.**—Each report under subsection (a) shall include, with respect to programs of the Department addressing health care needs of homeless veterans, the following:

[(1) Information about expenditures, costs, and workload under the program of the Department known as the Health Care for Homeless Veterans program (HCHV).

[(2) Information about the veterans contacted through that program.

[(3) Information about program treatment outcomes under that program.

[(4) Information about supported housing programs.

[(5) Information about the Department's grant and per diem provider program under subchapter II of this chapter.

[(6) The findings and conclusions of the assessments of the medical needs of homeless veterans conducted under section 2034(b) of this title.

[(7) Other information the Secretary considers relevant in assessing those programs.

[(d) **BENEFITS CONTENT OF REPORT.**—Each report under subsection (a) shall include, with respect to programs and activities of the Veterans Benefits Administration in processing of claims for benefits of homeless veterans during the preceding year, the following:

[(1) Information on costs, expenditures, and workload of Veterans Benefits Administration claims evaluators in processing claims for benefits of homeless veterans.

[(2) Information on the filing of claims for benefits by homeless veterans.

[(3) Information on efforts undertaken to expedite the processing of claims for benefits of homeless veterans.

[(4) Other information that the Secretary considers relevant in assessing the programs and activities.]

**SEC. 2066. ADVISORY COMMITTEE ON HOMELESS VETERANS**

\* \* \* \* \*

(d) TERMINATION.—The Committee shall cease to exist  
[December 31, 2013] December 31, 2014.

\* \* \* \* \*

**Part IV. General Administrative Provisions****Chapter 55. Minors, Incompetents, and Other Wards**

Sec.

5501. Commitment actions.

5502. Payments to and supervision of fiduciaries.

[5503. Hospitalized veterans and estates of incompetent institutionalized veterans.]

5503. *Reduced pension for certain hospitalized veterans and certain veterans receiving domiciliary, nursing home, or nursing facility care.*

\* \* \* \* \*

**[SEC. 5503. HOSPITALIZED VETERANS AND ESTATES OF INCOMPETENT INSTITUTIONALIZED VETERANS]**

**SEC. 5503. REDUCED PENSION FOR CERTAIN HOSPITALIZED VETERANS AND CERTAIN VETERANS RECEIVING DOMICILIARY, NURSING HOME, OR NURSING FACILITY CARE**

\* \* \* \* \*

(d) (1) \* \* \*

\* \* \* \* \*

(7) This subsection expires on [November 30, 2016] March 31, 2018.

\* \* \* \* \*

