

their needs, and (4) require periodic evaluation of the Department's efforts to address the needs of eligible dependents. Given the concerns that spurred me to author H.R. 336, I am most appreciative that aspects of my legislation involving the expanded and clarified term of eligible dependent and the specific means by which the Department can meet their informational needs are identified in Section 204 of H.R. 801.

I would, however, have preferred to also see included the cooperative effort text of H.R. 336 which speaks to the importance of encouraging all elements within the Department to work with private and public sector entities—most notably veterans service organizations and veterans widows organizations—to inform surviving spouses and dependents of deceased veterans regarding their eligibility. I would also have liked to see language speaking to the need to have staff at the local level available to assist these individuals with filing a claim, reconstructing incomplete records, and bridging language barriers included. These represent follow-up efforts designed to ensure that individuals fully understand and properly utilize the information they receive.

In closing, I believe there are shortcomings in current outreach efforts conducted by the Department, and thus I support the related improving language contained in H.R. 801. I am pleased that members of the Committee have paid attention to the need to bolster the Department's outreach efforts and hope that H.R. 801 will be expeditiously signed into law.

Mr. BUYER. Mr. Speaker, I would like to thank you and Ranking Member EVANS for agreeing to "Fast-Track" H.R. 801, the Veterans Opportunities Act.

I am especially pleased because I represent a district that is rural, with a large agricultural base.

As such, I fully support the Veterans Opportunities Act, because it finally addresses the issue of "means testing" veterans' agricultural possessions.

In my district, many farmers are land rich, but lack liquid assets to readily pay for health care services at the Department of Veterans Affairs.

H.R. 801 will greatly assist in remedying this problem, and allow them the opportunity to access the VA Health Care system without being penalized.

In addition, I am pleased that this bill finally addresses the issue of allowing veterans to use their GI Bill education benefits for certain private technology entities.

This expansion of benefits will allow veterans to receive benefits for various certification type courses that have previously not been recognized.

As a result, veterans can now pursue non-traditional educational programs that usually require intense study and certification.

This will ultimately level the playing field for veterans by allowing to compete in the high-tech environment.

Lastly, this bill will increase the burial benefits for both service-connected and non-service-connected veterans.

This is truly important!

World War II veterans are dying at a rate of a thousand a day.

Many of these World War II veterans are living on fixed incomes, and the high costs of burying these veterans places a financial burden on their surviving spouses and families.

Mr. Speaker, this bill and its provisions are long overdue.

Again, I thank the Chairman and the Ranking Member for giving this bill such quick consideration early in the 107th Congress.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I rise in strong support of H.R. 801, The Veterans Opportunity Act. The bill provides for essential benefits related to retirement privileges that our veterans desperately need. I am pleased that the legislation has swiftly come before the House for consideration.

H.R. 801 expands and increases payout amounts for several Veterans Affairs Department (VA) death and retirement benefits and extends coverage under the Service Members' Group Life Insurance program to dependent spouses and children.

The bill reflects a strong consensus in America that our veterans simply need to be taken care of. The legislation increases from \$2,000 to \$3,400 the maximum allowable annual ROTC award for benefits under the Montgomery GI bill; expands the VA's work-study program for veterans who are students; includes certain private technology entities as education institutions; allows a disabled spouse or surviving spouse of a severely disabled service-connected veteran to receive special restorative training; permits a veteran to use VA educational assistance benefits for a certificate program offered by an institution of higher learning by way of independent study; and provides for other needed necessities.

The measure contains other much-needed reforms. For instance, the bill expands the Service Members' Group Life Insurance (SGLI) program to include spouses and children. Upon termination of the SGLI, the policy could be converted to a private life insurance policy. Finally, the bill makes such changes retroactive to October 1, 2000, for service members killed in the line of duty.

Mr. Speaker, I urge my colleagues to support this important measure for our veterans.

The SPEAKER pro tempore (Mr. BASS). The question is on the motion offered by the gentleman from New Jersey (Mr. SMITH) that the House suspend the rules and pass the bill, H.R. 801, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds of those present have voted in the affirmative.

Mr. SMITH of New Jersey. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

GENERAL LEAVE

Mr. SMITH of New Jersey. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on H.R. 801, as amended.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New Jersey?

There was no objection.

VETERANS HOSPITAL EMERGENCY REPAIR ACT

Mr. SMITH of New Jersey. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 811) to authorize the Secretary of Veterans Affairs to carry out construction projects for the purpose of improving, renovating, and updating patient care facilities at Department of Veterans Affairs medical centers, as amended.

The Clerk read as follows:

H.R. 811

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Veterans Hospital Emergency Repair Act".

SEC. 2. AUTHORIZATION OF MAJOR MEDICAL FACILITY PROJECTS FOR PATIENT CARE IMPROVEMENTS.

(a) *IN GENERAL.*—(1) *The Secretary of Veterans Affairs is authorized to carry out major medical facility projects in accordance with this section, using funds appropriated for fiscal year 2002 or fiscal year 2003 pursuant to section 3. The cost of any such project may not exceed \$25,000,000, except that up to two projects per year may be carried out at a cost not to exceed \$30,000,000 for the purpose stated in subsection (c)(1).*

(2) *Projects carried out under this section are not subject to section 8104(a)(2) of title 38, United States Code.*

(b) *TYPE OF PROJECTS.*—*A project carried out under subsection (a) may be carried out only at a Department of Veterans Affairs medical center and only for the purpose of—*

- (1) *improving a patient care facility;*
- (2) *replacing a patient care facility;*
- (3) *renovating a patient care facility;*
- (4) *updating a patient care facility to contemporary standards; or*
- (5) *improving, replacing, or renovating a research facility or updating such a facility to contemporary standards.*

(c) *PURPOSE OF PROJECTS.*—*In selecting medical centers for projects under subsection (a), the Secretary shall select projects to improve, replace, renovate, or update facilities to achieve one or more of the following:*

- (1) *Seismic protection improvements related to patient safety (or, in the case of a research facility, patient or employee safety).*
- (2) *Fire safety improvements.*
- (3) *Improvements to utility systems and ancillary patient care facilities (including such systems and facilities that may be exclusively associated with research facilities).*
- (4) *Improved accommodation for persons with disabilities, including barrier-free access.*
- (5) *Improvements at patient care facilities to specialized programs of the Department, including the following:*
 - (A) *Blind rehabilitation centers.*
 - (B) *Inpatient and residential programs for seriously mentally ill veterans, including mental illness research, education, and clinical centers.*
 - (C) *Residential and rehabilitation programs for veterans with substance-use disorders.*
 - (D) *Physical medicine and rehabilitation activities.*
 - (E) *Long-term care, including geriatric research, education, and clinical centers, adult day care centers, and nursing home care facilities.*
 - (F) *Amputation care, including facilities for prosthetics, orthotics programs, and sensory aids.*
 - (G) *Spinal cord injury centers.*
 - (H) *Traumatic brain injury programs.*