

deference to the executive branch. And I know that both gentlemen from Colorado brought up the issue to us about rural areas in the country and felt that, given the way that these studies were structured, that this VA cemetery could never be built. So given that deference, the chairman was very responsive to you.

We took up an amendment by Mr. STEARNS, which both of the gentlemen from Colorado had agreed to, whereby we did not want this to displace any of the other present cemeteries in the present priority.

I respect the gentleman, and I want to work with the chairman on coming up with criteria.

Mr. LAMBORN. Mr. Speaker, I yield back the balance of my time.

Mr. FILNER. Mr. Speaker, I yield to another gentleman from Colorado (Mr. PERLMUTTER) such time as he may consume.

Mr. PERLMUTTER. Mr. Speaker, I thank the gentleman, and I thank my colleagues from Colorado, Mr. SALAZAR and Mr. LAMBORN, for bringing this legislation to the floor.

As we approach Memorial Day, let us remember those who have fallen fighting for our country. And this is one way to recognize our service men's and women's sacrifices, by establishing a new VA cemetery in El Paso County. Although I don't represent that area, it is south of where I live, this is an area of our State that needs a cemetery of this kind.

Memorial Day is usually marked by parades, speeches, and the decoration of graves; but for the people of Southern Colorado, this means traveling up to Fort Logan which is in the Denver area. With the passage of this bill, the 150,000 veterans residing in Southern Colorado will have their own VA cemetery to honor and decorate.

I urge my colleagues to vote "yes" on this bill.

Mr. UDALL of Colorado. Mr. Speaker, I rise in strong support of this legislation to establish a national cemetery for veterans in southern Colorado, and I congratulate my colleague JOHN SALAZAR for his work on this bill.

I also want to recognize the work of my former colleague Joel Hefley and my current colleague DOUG LAMBORN on this issue. Establishing a national veterans cemetery in southern Colorado has been and continues to be a goal shared by the entire Colorado delegation.

For over 8 years, it has also been a goal of the Pikes Peak Veterans Cemetery Committee. And it has been a goal of the Department of Colorado Veterans of Foreign Wars, the Colorado chapters of the American Legion, the Paralyzed Veterans of America, the Veterans of Foreign Wars, and the Association for Service Disabled Veterans. So many people have worked tirelessly to build support for this cemetery, and I hope they are pleased today that we are now one step closer to making it a reality.

This is a particularly timely bill to consider today, as we approach another Memorial Day and as we continue to send our troops to Iraq and Afghanistan. We remember the sacrifices

that our veterans have made and the sacrifices that our men and women in uniform continue to make today to protect our freedom.

And at a time when our country is divided over the war in Iraq, it's even more important that we honor the service of those who have given their lives for this country and of the many veterans still among us.

Of course, it isn't enough just to remember—we must provide our troops and veterans with the care and support they have been promised. And we must provide them with a resting place within or as close as possible to their own communities.

With a growing military retiree and veterans population in southern Colorado and particularly El Paso County—and with Denver's Fort Logan cemetery rapidly filling up its burial spaces—it makes sense to provide for the future even as we ensure that southern Colorado's veterans receive the recognition they deserve.

A National Veterans Cemetery in El Paso County will also serve as an important symbol for those in the military community who have given so much to their country. Mr. Speaker, this is an important piece of legislation, and I urge its passage.

GENERAL LEAVE

Mr. FILNER. 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. 1660, as amended.

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

There was no objection.

Mr. FILNER. I urge my colleagues to support this bill, and yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. FILNER) that the House suspend the rules and pass the bill, H.R. 1660, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

RETURNING SERVICEMEMBER VA HEALTHCARE INSURANCE ACT OF 2007

Mr. FILNER. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 612) to amend title 38, United States Code, to extend the period of eligibility for health care for combat service in the Persian Gulf War or future hostilities from two years to five years after discharge or release, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 612

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 "Returning Servicemember VA Healthcare Insurance Act of 2007".

SEC. 2. EXTENSION OF PERIOD OF ELIGIBILITY FOR HEALTH CARE FOR COMBAT SERVICE IN THE PERSIAN GULF WAR OR FUTURE HOSTILITIES.

Subparagraph (C) of section 1710(e)(3) of title 38, United States Code, is amended to read as follows:

"(C) in the case of care for a veteran described in paragraph (1)(D) who—

"(i) is discharged or released from the active military, naval, or air service after the date that is five years before the date of the enactment of the Returning Servicemember VA Healthcare Insurance Act of 2007, after a period of five years beginning on the date of such discharge or release; or

"(ii) is so discharged or released more than five years before the date of the enactment of the Returning Servicemember VA Healthcare Insurance Act of 2007 and who did not enroll in the patient enrollment system under section 1705 of this title before such date, after a period of three years beginning on the date of the enactment of such Act; and".

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from California (Mr. FILNER) and the gentleman from Indiana (Mr. BUYER) each will control 20 minutes.

The Chair recognizes the gentleman from California.

Mr. FILNER. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, not all of the returning veterans from the OEF/OIF suffer from obvious wounds. Those who suffer from an external injury are readily identified and receive immediate care for that injury. However, many of our returning veterans, and on this I include, Mr. Speaker, Guard and Reserve units who have been ordered to combat, are coming back with injuries that are not external. They are hidden wounds of the war, such as post-traumatic stress disorder, PTSD, forms of brain injury, which may not be evident without further diagnosis, which may not be evident to the soldier or to the doctor looking at him.

Unlike the physical wounds, mental wounds are not easily identified and may go undetected. PTSD is a mental health condition that is triggered by a traumatic event which causes an intense fear and/or helplessness. Some of the symptoms for this condition include reexperiencing the trauma through nightmares, obsessive thoughts, flashbacks. We know that this condition may not reveal itself for many months or maybe for years after experiencing the event.

We listened to veterans, veteran service organizations, family members, and we heard them say that their returning veterans needed more time to access the VA health care system when they came home from war.

Conditions like PTSD and traumatic brain injury are the driving force behind this bill, the Returning Servicemember VA Healthcare Insurance Act of 2007. It extends from 2 years to 5 years following discharge or release the eligibility period for veterans. And, as I said, we include Guard and Reserve units all those who served in combat during or after the Persian Gulf War are eligible to receive hospital care,

medical services, or nursing home care provided by the Secretary of Veterans Affairs. It provides for an additional 3 years of eligibility for veterans discharged more than 5 years before the enactment of this act who may not have enrolled in the VA health care system.

This system is recognized throughout the country, and indeed the world, as providing safe quality health care to our veterans. Two years was simply not enough time for returning OEF/OIF veterans to utilize this very important benefit. We are fixing that with this piece of legislation. It is a bill that will have a profound effect most immediately on our veterans returning from war. I urge my colleagues to support the bill.

Mr. Speaker, I reserve the balance of my time.

Mr. BUYER. Mr. Speaker, I yield 2 minutes to the gentlelady from Florida (Ms. GINNY BROWN-WAITE).

Ms. GINNY BROWN-WAITE of Florida. Mr. Speaker, I thank the ranking member and certainly the chairman of the Veterans Committee.

I rise today in support of H.R. 612, the Returning Servicemember VA Health Care Insurance Act. This measure provides much needed expansion to the availability of VA health care to certain American soldiers returning from combat. Currently these individuals only have 2 years in which they can access medical services at the VA. Unfortunately, conditions associated with service in a combat theater can sometimes take longer to manifest themselves. In response, the measure provides a 5-year window of health care for our veterans.

I urge my colleagues to support this important legislation. Many of the young men and women in our Armed Forces have been away from their loved ones for very long periods of time. During this time, they have endured harsh conditions and tremendous physical and mental strains. The very least that Congress can do is to give these brave individuals 3 additional years of health care. I think it is the right thing to do, and I know that both the ranking member as well as the chairman fully support this effort to extend the health care for the additional time. I think it is a good public policy.

□ 1530

Mr. FILNER. Mr. Speaker, I have no further speakers, and I reserve the balance of my time.

Mr. BUYER. Mr. Speaker, I'd like to thank the chairman for amending this legislation to address my concern that, as originally drafted, the bill did not provide equity for those veterans whose eligibility period would have expired prior to the enactment of this bill.

At my request, the bill was amended to make sure that those veterans whose eligibility period had ended prior to the enactment and did not en-

roll in the VA health care would be eligible for an additional 3 years of VA health care services. All veterans who served in combat should receive the same level of care, and I appreciate the chairman for adopting and agreeing to this amendment.

In 1993, Congress enacted Public Law 103-210 to amend title 38, United States Code, to provide additional authority for the Secretary of Veterans Affairs to provide health care for veterans of the Persian Gulf War.

The special health care authority allowed VA to treat those veterans who served in combat operations in the Persian Gulf for possible war-related illnesses, even though there was not definitive evidence that the disorders treated were related to wartime service.

Subsequent congressional hearings on Persian Gulf veterans health care highlighted the importance of early intervention in treating the kind of unexplained health problems experienced by many Persian Gulf war veterans.

In 1998, with the potential of renewed combat in the Persian Gulf, Public Law 105-368, the Veterans Programs Enhancement Act of 1998, was enacted. This law authorizes the VA to provide medical care and other medical services to combat veterans for a period of 2 years following the service separation date for veterans who served on active duty in theater of combat operations during a period of war after the Persian Gulf War, or in combat against a hostile force during a period of hostilities after November 11 of 1998. Members of the National Guard and Reserves may be eligible for this care if they meet certain requirements which essentially satisfy the definition of a "veteran."

The experience of the 1990s taught us the importance of both increasing understanding of war-related illnesses generally, and ensuring that the VA is better prepared to treat veterans of future wars and military combat.

I would also, at this moment, like to thank my colleague, Mr. SALAZAR of Colorado, who shared with me his statement that he gave honoring the life of a great American, Raymond Gerald Murphy. And I had an opportunity to read his statement that he read into the CONGRESSIONAL RECORD, and I appreciate him honoring such an American. My only regret is that I never had an opportunity to meet someone like this. And I'm sure that he touched the lives of many, many people.

And so I suppose where we are, Mr. Speaker, is that with regard to how we recognize this Medal of Honor recipient by naming the hospital after him, the Veterans' Affairs Committee has specific criteria that we are to go by. And when you look at the specific criteria, we satisfy all the criteria. He's a Medal of Honor recipient. He has letters of support from all the veterans groups in the State of New Mexico, all of the recognized organizations, I have their letters here, Mr. Speaker, I'll be more than happy to get them to you, along

with the support of the Governor, all the Members of Congress, and we should be able to get this done. There's no reason why we shouldn't.

So here we have a situation whereby the committee has specific criteria for the naming of a VA hospital. This Medal of Honor recipient clearly applies. It passed the Senate. Yet we don't have criteria, as the chairman just spoke on the last bill, with regard to the naming of a cemetery. Yet we did it just for a political reason. And so now it's difficult for me to figure out how to follow the leadership of the chairman.

We don't have criteria, but we take action on the floor. But where we do have criteria, we don't take action on the floor. So it is a puzzling moment that we have in how we are bringing these veterans bills to the floor.

Mr. Speaker, I yield back the balance of my time.

Mr. FILNER. Mr. Speaker, I want to thank the ranking member for his helpful amendment to this bill. As I said earlier, this is a very important bill to thousands and thousands of returning veterans. They have basically unfettered access to one of the best health care systems in the world without going through a lot of red tape, without going through a lot of paperwork to prove that they are eligible. They will have 5 years.

And it is most important for our Reserve and Guard units, who are not eligible for the benefit structure of the VA system. They are not eligible for most of the benefits of the GI bill. And we are trying to make an effort to bring them in under the VA benefits under what we call "total force structure."

So this bill is important to thousands of people, those that are coming back from the Marines or Army and those that are in the Guard and Reserve units. All of them now will have 5 years where these hidden injuries, brain injury, or post-traumatic stress disorder may become evident, and they may seek help. Now they will be able to do it without any of the bureaucratic entanglements. And I think this will have a remarkable impact on the lives of our Nation's veterans.

And I will tell you, as George Washington said more than 200 years ago, "The morale of our fighting troops is dependent, most of all, on how they feel they're going to be treated when they come home." When they know they will have 5 years to come to the VA, they will know that a Nation is caring for them and is responsive to their needs.

Mr. HALL of New York. Mr. Speaker, I often say that the opportunity to serve on Veterans' Affairs Committee is one of the greatest privileges I have been given in my short time in Congress. The action on the floor of the House today is another reminder of how it is truly an honor to serve on this Committee. Earlier this afternoon the House passed several pieces of legislation to improve outreach and care to our nation's veterans.

Memorial Day is the day for Americans to officially honor the heroes who have fallen in service to our country, and a day to pray for and remember the brave souls who have given the ultimate sacrifice. We are the beneficiaries of those who serve and who have served to preserve the peace and freedom we enjoy.

As a nation, we honor the bravery of those who have fought and died for our country and recognize the tremendous sacrifices they and their families have made. But to truly honor these heroes it is our duty as a grateful nation to not just spend the day remembering their service, but to provide the promised support and benefits to the soldiers and veterans who served with and followed them. These bills help provide that support.

H.R. 67, the Veterans Outreach Improvement Act, creates a grant program to allow the VA to partner with State and county veteran organizations to reach out to veterans and their families to ensure they are aware of their eligibility for benefits.

This bipartisan bill also increases accountability in spending taxpayer dollars by requiring reports on how the grants in this program have been used to improve outreach. I am proud to be a cosponsor of this bill and am pleased it has passed the House.

H.R. 612 is an extremely important piece of legislation. This bill will extend access to VA Healthcare for Iraq and Afghanistan veterans from two years to five years. This is vital to the health of our veterans returning from Iraq because of the nature of Traumatic Brain Injury and Post Traumatic Stress Disorder.

In some cases, TBI and PTSD symptoms do not emerge until several years after the injury occurred. With the current freeze on Category 8 veteran enrollment in VA healthcare, this means that some OIF/OEF will realize they suffered a brain injury while deployed but be locked out of the system.

They might not have health insurance to cover their treatment, and will not have crucial medical documents that will help them receive disability benefits.

By expanding their eligibility for 3 additional years, Congress is acting to limit the damage done by the President's Category 8 veterans enrollment freeze. I was proud to also cosponsor this legislation.

Another extremely important bill to our Iraq and Afghanistan veterans is H.R. 2199, the Traumatic Brain Injury Health Enhancement and Long Term Support Act.

TBI is the signature injury of the war in Iraq and this bill vastly improves the VA's ability to provide care for brain injury.

This bill requires the VA to establish a program to screen veterans for TBI and establish a program of long term care for acute TBI victims.

Currently, of the nearly 1,300 VA health care facilities in the United States, only 4 have specialized TBI programs. This bill allows the VA to partner with private facilities to provide treatment the VA cannot immediately provide.

It also establishes centers of research and a national database so we can better understand the causes and symptoms of TBI. Hopefully, this will allow us to better treat victims in the future. This bill contains provisions of H.R. 1944, a bill I originally cosponsored.

H.R. 1470 expands chiropractic care to all VA facilities throughout the country by 2011. During a subcommittee hearing on returning

Iraq and Afghanistan veterans, several OIF veterans suggested that back injuries will be a long term problem for this generation of veterans. This bill will help the VA better prepare for this new wave of patients.

I am proud that these bills passed the House today and that I could support their passage.

Congress has a responsibility to live up to our promises to our veterans. Today was another down payment on fulfilling these promises.

Through my role on the Veterans Affairs Committee, I pledge to continue to push for legislation that will improve services for our veterans and treat them with the respect they have worked so hard to earn.

Mr. SPACE. Mr. Speaker, I rise today in support of H.R. 612, the Returning Servicemember VA Healthcare Insurance Act.

This bill extends the eligibility period for receipt of VA hospital care, medical services, and nursing home care for veterans who served in combat during—or after—the Persian Gulf War.

Currently, the eligibility period for these VA services is two years. This bill lengthens that two year time frame to five years from a veteran's date of discharge or release from service.

As we learn more and more about what are increasingly being referred to as the signature wounds of Operation Iraqi Freedom and Operation Enduring Freedom—Traumatic Brain Injury and Post Traumatic Stress Disorder—I believe that this extension of VA care is essential to this Congress' mission to provide comprehensive care to our nation's heroes.

Often, a servicemember's battle scars run deeper than what is visible to an outsider. While many bodily injuries sustained are apparent to the naked eye, TBI, PTSD, and other conditions are not easily observed. Diagnosis of these conditions may require lengthy, detailed evaluations by specialists over the course of time. Furthermore, some psychological disorders take months or even years to develop following a servicemember's release from duty. Some chronic physical conditions also take time to peak and subsequently diagnose.

By extending eligibility to VA care to five years, we are helping to ensure that fewer physical and mental wounds go undiagnosed and untreated. We are helping to ensure that the care that veterans seek out and receive is more complete by enabling the VA to address more of servicemembers' health needs. Most importantly, we are offering another way to better care for our nation's wounded warriors who have sacrificed the best years of their lives.

I urge my colleagues to support H.R. 612 because it is an improvement upon the current system.

GENERAL LEAVE

Mr. FILNER. I would ask, Mr. Speaker, unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on H.R. 612, as amended.

The SPEAKER pro tempore (Mr. PERLMUTTER). Is there objection to the request of the gentleman from California?

There was no objection.

Mr. FILNER. Mr. Speaker, I urge my colleagues to unanimously support this

bill, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. FILNER) that the House suspend the rules and pass the bill, H.R. 612, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. FILNER. 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 question will be postponed.

CARL SANDBURG HOME NATIONAL HISTORIC SITE BOUNDARY REVISION ACT OF 2007

The SPEAKER pro tempore. Pursuant to House Resolution 429 and rule XVIII, the Chair declares the House in the Committee of the Whole House on the state of the Union for further consideration of the bill, H.R. 1100.

□ 1539

IN THE COMMITTEE OF THE WHOLE

Accordingly, the House resolved itself into the Committee of the Whole House on the state of the Union for further consideration of the bill (H.R. 1100) to revise the boundary of the Carl Sandburg Home National Historic Site in the State of North Carolina, and for other purposes, with Mr. ROSS (Acting Chairman) in the chair.

The Clerk read the title of the bill.

The Acting CHAIRMAN. When the Committee of the Whole rose earlier today, a request for a recorded vote on amendment No. 3 printed in House Report 110-165 by the gentleman from Nevada (Mr. HELLER) had been postponed.

Pursuant to clause 6 of rule XVIII, proceedings will now resume on those amendments on which further proceedings were postponed, in the following order:

Amendment No. 1 by Mr. BISHOP of Utah.

Amendment No. 3 by Mr. HELLER of Nevada.

The Chair will reduce to 5 minutes the time for the second vote in this series.

AMENDMENT NO. 1 OFFERED BY MR. BISHOP OF UTAH

The CHAIRMAN. The unfinished business is the demand for a recorded vote on the amendment offered by the gentleman from Utah (Mr. BISHOP) on which further proceedings were postponed and on which the noes prevailed by voice vote.

The Clerk will redesignate the amendment.

The Clerk redesignated the amendment.

RECORDED VOTE

The CHAIRMAN. A recorded vote has been demanded.