

Calendar No. 686

105TH CONGRESS
2^D SESSION

S. 2358

[Report No. 105-362]

A BILL

To provide for the establishment of a service-connection for illnesses associated with service in the Persian Gulf War, to extend and enhance certain health care authorities relating to such service, and for other purposes.

OCTOBER 2, 1998

Reported with amendments and an amendment to the
title

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To provide for the establishment of a service-connection for illnesses associated with service in the Persian Gulf War, to extend and enhance certain health care authorities relating to such service, and for other purposes.

IN THE SENATE OF THE UNITED STATES

JULY 27, 1998

Mr. ROCKEFELLER (for himself, Mr. BYRD, Mr. SPECTER, Mr. DASCHLE, Mr. CLELAND, Mr. CONRAD, Mrs. MURRAY, Mr. KERRY, Mr. DODD, Mr. KOHL, Ms. MIKULSKI, Mr. HUTCHINSON, Mr. FORD, Mr. THURMOND, Mr. CAMPBELL, Mr. JEFFORDS, Mrs. BOXER, Mr. FEINGOLD, Mr. WELLSTONE, Mr. DURBIN, Mr. BIDEN, Mr. BRYAN, Mr. DORGAN, Mr. ROBB, Mr. COVERDELL, and Mrs. FEINSTEIN) introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

OCTOBER 2, 1998

Reported by Mr. SPECTER, with amendments and an amendment to the title
[Omit the part struck through and insert the part printed in *italic*]

A BILL

To provide for the establishment of a service-connection for illnesses associated with service in the Persian Gulf War, to extend and enhance certain health care authorities relating to such service, and for other purposes.

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

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

4 (a) SHORT TITLE.—This Act may be cited as the
 5 “Persian Gulf War Veterans Act of 1998”.

6 (b) TABLE OF CONTENTS.—The table of contents of
 7 this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—SERVICE CONNECTION FOR *PERSIAN* GULF WAR
 ILLNESSES

Sec. 101. Presumption of service connection for illnesses associated with service
 in the Persian Gulf during the Persian Gulf War.

Sec. 102. Agreement with National Academy of Sciences.

Sec. 103. Monitoring of health status and health care of Persian Gulf War vet-
 erans.

Sec. 104. Reports on recommendations for additional scientific research.

Sec. 105. Outreach.

Sec. 106. Definitions.

TITLE II—EXTENSION AND ENHANCEMENT OF *PERSIAN* GULF
 WAR HEALTH CARE AUTHORITIES

Sec. 201. Extension of authority to provide health care for Persian Gulf War
 veterans.

Sec. 202. Extension and improvement of evaluation of health status of spouses
 and children of Persian Gulf War veterans.

TITLE III—MISCELLANEOUS

Sec. 301. Assessment of establishment of independent entity to evaluate post-
 conflict illnesses among members of the Armed Forces and
 health care provided by DoD and VA before and after deploy-
 ment of such members.

1 **TITLE I—SERVICE CONNECTION**
 2 **FOR *PERSIAN* GULF WAR ILL-**
 3 **NESSES**

4 **SEC. 101. PRESUMPTION OF SERVICE CONNECTION FOR**
 5 **ILLNESSES ASSOCIATED WITH SERVICE IN**
 6 **THE PERSIAN GULF DURING THE PERSIAN**
 7 **GULF WAR.**

8 (a) IN GENERAL.—(1) Subchapter II of chapter 11
 9 of title 38, United States Code, is amended by adding at
 10 the end the following:

11 **“§ 1118. Presumptions of service connection for ill-**
 12 **nesses associated with service in the Per-**
 13 **sian Gulf during the Persian Gulf War**

14 “(a)(1) For purposes of section 1110 of this title, and
 15 subject to section 1113 of this title, each illness, if any,
 16 described in paragraph (2) shall be considered to have
 17 been incurred in or aggravated by service referred to in
 18 that paragraph, notwithstanding that there is no record
 19 of evidence of such illness during the period of such serv-
 20 ice.

21 “(2) An illness referred to in paragraph (1) is any
 22 diagnosed or undiagnosed illness that—

23 “(A) the Secretary determines in regulations
 24 prescribed under this section to warrant a presump-
 25 tion of service connection by reason of having a posi-

1 tive association with exposure to a biological, chemi-
2 cal, or other toxic agent, environmental or wartime
3 hazard, or preventive medicine or vaccine known or
4 presumed to be associated with service in the Armed
5 Forces in the Southwest Asia theater of operations
6 during the Persian Gulf War; and

7 “(B) becomes manifest within the period, if
8 any, prescribed in such regulations in a veteran who
9 served on active duty in that theater of operations
10 during that war and by reason of such service was
11 exposed to such agent, hazard, or medicine or vac-
12 eine.

13 “(3) For purposes of this subsection, a veteran who
14 served on active duty in the Southwest Asia theater of op-
15 erations during the Persian Gulf War and has an illness
16 described in paragraph (2) shall be presumed to have been
17 exposed by reason of such service to the agent, hazard,
18 or medicine or vaccine associated with the illness in the
19 regulations prescribed under this section unless there is
20 conclusive evidence to establish that the veteran was not
21 exposed to the agent, hazard, or medicine or vaccine by
22 reason of such service.

23 “(b)(1)(A) Whenever the Secretary makes a deter-
24 mination described in subparagraph (B), the Secretary
25 shall prescribe regulations providing that a presumption

1 of service connection is warranted for the illness covered
2 by that determination for purposes of this section.

3 “(B) A determination referred to in subparagraph
4 (A) is a determination based on sound medical and sci-
5 entific evidence that a positive association exists be-
6 tween—

7 “(i) the exposure of humans or animals to a bi-
8 ological, chemical, or other toxic agent, environ-
9 mental or wartime hazard, or preventive medicine or
10 vaccine known or presumed to be associated with
11 service in the Southwest Asia theater of operations
12 during the Persian Gulf War; and

13 “(ii) the occurrence of a diagnosed or
14 undiagnosed illness in humans or animals.

15 “(2)(A) In making determinations for purposes of
16 paragraph (1), the Secretary shall take into account—

17 “(i) the reports submitted to the Secretary by
18 the National Academy of Sciences under section 102
19 of the Persian Gulf War Veterans Act of 1998; and

20 “(ii) all other sound medical and scientific in-
21 formation and analyses available to the Secretary.

22 “(B) In evaluating any report, information, or analy-
23 sis for purposes of making such determinations, the Sec-
24 retary shall take into consideration whether the results are

1 statistically significant, are capable of replication, and
2 withstand peer review.

3 “(3) An association between the occurrence of an ill-
4 ness in humans or animals and exposure to an agent, haz-
5 ard, or medicine or vaccine shall be considered to be posi-
6 tive for purposes of this subsection if the credible evidence
7 for the association is equal to or outweighs the credible
8 evidence against the association.

9 “(c)(1) Not later than 60 days after the date on
10 which the Secretary receives a report from the National
11 Academy of Sciences under section 102 of the Persian
12 Gulf War Veterans Act of 1998, the Secretary shall deter-
13 mine whether or not a presumption of service connection
14 is warranted for each illness, if any, covered by the report.

15 “(2) If the Secretary determines under this sub-
16 section that a presumption of service connection is war-
17 ranted, the Secretary shall, not later than 60 days after
18 making the determination, issue proposed regulations set-
19 ting forth the Secretary’s determination.

20 “(3)(A) If the Secretary determines under this sub-
21 section that a presumption of service connection is not
22 warranted, the Secretary shall, not later than 60 days
23 after making the determination, publish in the Federal
24 Register a notice of the determination. The notice shall

1 include an explanation of the scientific basis for the deter-
2 mination.

3 “(B) If an illness already presumed to be service con-
4 nected under this section is subject to a determination
5 under subparagraph (A), the Secretary shall, not later
6 than 60 days after publication of the notice under that
7 subparagraph, issue proposed regulations removing the
8 presumption of service connection for the illness.

9 “(4) Not later than 90 days after the date on which
10 the Secretary issues any proposed regulations under this
11 subsection, the Secretary shall issue final regulations.
12 Such regulations shall be effective on the date of issuance.

13 “(d) Whenever the presumption of service connection
14 for an illness under this section is removed under sub-
15 section (c)—

16 “(1) a veteran who was awarded compensation
17 for the illness on the basis of the presumption before
18 the effective date of the removal of the presumption
19 shall continue to be entitled to receive compensation
20 on that basis; and

21 “(2) a survivor of a veteran who was awarded
22 dependency and indemnity compensation for the
23 death of a veteran resulting from the illness on the
24 basis of the presumption before that date shall con-

1 tinue to be entitled to receive dependency and in-
2 demnity compensation on that basis.

3 “(e) Subsections (b) through (d) shall cease to be ef-
4 fective 10 years after the first day of the fiscal year in
5 which the National Academy of Sciences submits to the
6 Secretary the first report under section 102 of the Persian
7 Gulf War Veterans Act of 1998.”.

8 (2) The table of sections at the beginning of such
9 chapter is amended by inserting after the item relating
10 to section 1117 the following new item:

 “1118. Presumptions of service connection for illnesses associated with service
 in the Persian Gulf during the Persian Gulf War.”.

11 (b) CONFORMING AMENDMENTS.—Section 1113 of
12 title 38, United States Code, is amended—

13 (1) by striking out “or 1117” each place it ap-
14 pears and inserting in lieu thereof “1117, or 1118”;
15 and

16 (2) in subsection (a), by striking out “or 1116”
17 and inserting in lieu thereof “, 1116, or 1118”.

18 (c) COMPENSATION FOR UNDIAGNOSED GULF WAR
19 ILLNESSES.—Section 1117 of title 38, United States
20 Code, is amended—

21 (1) by redesignating subsections (c), (d), and
22 (e) as subsections (d), (e), and (f), respectively; and

23 (2) by inserting after subsection (b) the follow-
24 ing new subsection (c):

1 “(c)(1) Whenever the Secretary determines under
2 section 1118(c) of this title that a presumption of service
3 connection for an undiagnosed illness (or combination of
4 undiagnosed illnesses) previously established under this
5 section is no longer warranted—

6 “(A) a veteran who was awarded compensation
7 under this section for such illness (or combination of
8 illnesses) on the basis of the presumption shall con-
9 tinue to be entitled to receive compensation under
10 this section on that basis; and

11 “(B) a survivor of a veteran who was awarded
12 dependency and indemnity compensation for the
13 death of a veteran resulting from the disease on the
14 basis of the presumption before that date shall con-
15 tinue to be entitled to receive dependency and in-
16 demnity compensation on that basis.

17 “(2) This subsection shall cease to be effective 10
18 years after the first day of the fiscal year in which the
19 National Academy of Sciences submits to the Secretary
20 the first report under section 102 of the Persian Gulf War
21 Veterans Act of 1998.”.

22 **SEC. 102. AGREEMENT WITH NATIONAL ACADEMY OF**
23 **SCIENCES.**

24 (a) **PURPOSE.**—The purpose of this section is to pro-
25 vide for the National Academy of Sciences, an independent

1 nonprofit scientific organization with appropriate exper-
2 tise, to review and evaluate the available scientific evidence
3 regarding associations between illnesses and exposure to
4 toxic agents, environmental or wartime hazards, or pre-
5 ventive medicines or vaccines associated with Gulf War
6 service.

7 (b) AGREEMENT.—The Secretary of Veterans Affairs
8 shall seek to enter into an agreement with the National
9 Academy of Sciences for the Academy to perform the ac-
10 tivities covered by this section and ~~sections 103(a)(6) and~~
11 ~~104(d)~~ *section 103(a)(6)*. The Secretary shall seek to enter
12 into the agreement not later than two months after the
13 date of enactment of this Act.

14 (c) IDENTIFICATION OF AGENTS AND ILLNESSES.—
15 (1) Under the agreement under subsection (b), the Na-
16 tional Academy of Sciences shall—

17 (A) identify the biological, chemical, or other
18 toxic agents, environmental or wartime hazards, or
19 preventive medicines or vaccines to which members
20 of the Armed Forces who served in the Southwest
21 Asia theater of operations during the Persian Gulf
22 War may have been exposed by reason of such serv-
23 ice; and

1 (B) identify the illnesses (including diagnosed
2 illnesses and undiagnosed illnesses) that are mani-
3 fest in such members.

4 (2) In identifying illnesses under paragraph (1)(B),
5 the Academy shall review and summarize the relevant sci-
6 entific evidence regarding *chronic* illnesses among the
7 members described in paragraph (1)(A) and among other
8 appropriate populations of individuals, including mortal-
9 ity, symptoms, and adverse reproductive health outcomes
10 among such members and individuals.

11 (d) INITIAL CONSIDERATION OF SPECIFIC
12 AGENTS.—(1) In identifying under subsection (c) the
13 agents, hazards, or preventive medicines or vaccines to
14 which members of the Armed Forces may have been ex-
15 posed for purposes of the first report under subsection (i),
16 the National Academy of Sciences shall consider, within
17 the first six months after the date of enactment of this
18 Act, the following:

19 (A) The following organophosphorous pes-
20 ticides:

21 (i) Chlorpyrifos.

22 (ii) Diazinon.

23 (iii) Dichlorvos.

24 (iv) Malathion.

25 (B) The following carbamate pesticides:

1 (i) Proxpur.

2 (ii) Carbaryl.

3 (iii) Methomyl.

4 (C) The carbamate pyridostigmine bromide
5 used as nerve agent prophylaxis.

6 (D) The following chlorinated hydrocarbon and
7 other pesticides and repellents:

8 (i) Lindane.

9 (ii) Pyrethrins.

10 (iii) Permethrins.

11 (iv) Rodenticides (bait).

12 (v) Repellent (DEET).

13 (E) The following low-level nerve agents and
14 precursor compounds at exposure levels below those
15 which produce immediately apparent incapacitating
16 symptoms:

17 (i) Sarin.

18 (ii) Tabun.

19 (F) The following synthetic chemical com-
20 pounds:

21 (i) Mustard agents at levels below those
22 which cause immediate blistering.

23 (ii) Volatile organic compounds.

24 (iii) Hydrazine.

25 (iv) Red fuming nitric acid.

- 1 (v) Solvents.
- 2 ~~(vi) Uranium.~~
- 3 (G) The following ~~ionizing~~ *sources of* radiation:
- 4 (i) Depleted uranium.
- 5 (ii) Microwave radiation.
- 6 (iii) Radio frequency radiation.
- 7 (H) The following environmental particulates
- 8 and pollutants:
- 9 (i) Hydrogen sulfide.
- 10 (ii) Oil fire byproducts.
- 11 (iii) Diesel heater fumes.
- 12 (iv) Sand micro-particles.
- 13 (I) Diseases endemic to the region (including
- 14 the following):
- 15 (i) Leishmaniasis.
- 16 (ii) Sandfly fever.
- 17 (iii) Pathogenic escherechia coli.
- 18 (iv) Shigellosis.
- 19 (J) Time compressed administration of multiple
- 20 live, “attenuated”, and toxoid vaccines.
- 21 (2) The consideration of agents, hazards, and medi-
- 22 cines and vaccines under paragraph (1) shall not preclude
- 23 the Academy from identifying other agents, hazards, or
- 24 medicines or vaccines to which members of the Armed

1 Forces may have been exposed for purposes of any report
2 under subsection (i).

3 (3) Not later than six months after the date of enact-
4 ment of this Act, the National Academy of Science shall
5 submit to the designated congressional committees a re-
6 port specifying the agents, hazards, and medicines and
7 vaccines considered under paragraph (1).

8 (e) DETERMINATIONS OF ASSOCIATIONS BETWEEN
9 AGENTS AND ILLNESSES.—(1) For each agent, hazard,
10 or medicine or vaccine and illness identified under sub-
11 section (c), the National Academy of Sciences shall deter-
12 mine, to the extent that available scientific data permit
13 meaningful determinations—

14 (A) whether a statistical association exists be-
15 tween exposure to the agent, hazard, or medicine or
16 vaccine and the illness, taking into account the
17 strength of the scientific evidence and the appro-
18 priateness of the scientific methodology used to de-
19 tect the association;

20 (B) the increased risk of the illness among
21 human or animal populations exposed to the agent,
22 hazard, or medicine or vaccine; and

23 (C) whether a plausible biological mechanism or
24 other evidence of a causal relationship exists between

1 exposure to the agent, hazard, or medicine or vac-
2 cine and the illness.

3 (2) The Academy shall include in its reports under
4 subsection (i) a full discussion of the scientific evidence
5 and reasoning that led to its conclusions under this sub-
6 section.

7 (f) REVIEW OF POTENTIAL TREATMENT MODELS
8 FOR CERTAIN ILLNESSES.—Under the agreement under
9 subsection (b), the National Academy of Sciences shall
10 separately review, for each chronic undiagnosed illness
11 identified under subsection (c)(1)(B) and for any other
12 chronic illness that the Academy determines to warrant
13 such review, the available scientific data in order to iden-
14 tify empirically valid models of treatment for such illnesses
15 which employ successful treatment modalities for popu-
16 lations with similar symptoms.

17 (g) RECOMMENDATIONS FOR ADDITIONAL SCI-
18 ENTIFIC STUDIES.—(1) Under the agreement under sub-
19 section (b), the National Academy of Sciences shall make
20 any recommendations that it considers appropriate for ad-
21 ditional scientific studies (including studies relating to
22 treatment models) to resolve areas of continuing scientific
23 uncertainty relating to the health consequences of expo-
24 sure to toxic agents, environmental or wartime hazards,

1 or preventive medicines or vaccines associated with Gulf
2 War service.

3 (2) In making recommendations for additional stud-
4 ies, the Academy shall consider the available scientific
5 data, the value and relevance of the information that could
6 result from such studies, and the cost and feasibility of
7 carrying out such studies.

8 (h) SUBSEQUENT REVIEWS.—(1) Under the agree-
9 ment under subsection (b), the National Academy of
10 Sciences shall conduct on a periodic and ongoing basis ad-
11 ditional reviews of the evidence and data relating to its
12 activities under this section.

13 (2) As part of each review under this subsection, the
14 Academy shall—

15 (A) conduct as comprehensive a review as is
16 practicable of the evidence referred to in subsection
17 (c) and the data referred to in subsections (e), (f),
18 and (g) that became available since the last review
19 of such evidence and data under this section; and

20 (B) make determinations under the subsections
21 referred to in subparagraph (A) on the basis of the
22 results of such review and all other reviews pre-
23 viously conducted for purposes of this section.

24 (i) REPORTS.—(1) Under the agreement under sub-
25 section (b), the National Academy of Sciences shall submit

1 to the committees and officials referred to in paragraph
2 (5) periodic written reports regarding the Academy's ac-
3 tivities under the agreement.

4 (2) The first report under paragraph (1) shall be sub-
5 mitted not later than 18 months after the date of enact-
6 ment of this Act. That report shall include—

7 (A) the determinations and discussion referred
8 to in subsection (e);

9 (B) the results of the review of models of treat-
10 ment under subsection (f); and

11 (C) any recommendations of the Academy
12 under subsection (g).

13 (3) Reports shall be submitted under this subsection
14 at least once every two years, as measured from the date
15 of the report under paragraph (2).

16 (4) In any report under this subsection (other than
17 the report under paragraph (2)), the Academy may specify
18 an absence of meaningful developments in the scientific
19 or medical community with respect to the activities of the
20 Academy under this section during the 2-year period end-
21 ing on the date of such report.

22 (5) Reports under this subsection shall be submitted
23 to the following:

24 (A) The designated congressional committees.

25 (B) The Secretary of Veterans Affairs.

1 (C) The Secretary of Defense.

2 (j) SUNSET.—This section shall cease to be effective
3 10 years after the last day of the fiscal year in which the
4 National Academy of Sciences submits the first report
5 under subsection (i).

6 (k) ALTERNATIVE CONTRACT SCIENTIFIC ORGANIZA-
7 TION.—(1) If the Secretary is unable within the time pe-
8 riod set forth in subsection (b) to enter into an agreement
9 with the National Academy of Sciences for the purposes
10 of this section on terms acceptable to the Secretary, the
11 Secretary shall seek to enter into an agreement for pur-
12 poses of this section with another appropriate scientific
13 organization that is not part of the Government, operates
14 as a not-for-profit entity, and has expertise and objectivity
15 comparable to that of the National Academy of Sciences.

16 (2) If the Secretary enters into an agreement with
17 another organization under this subsection, any reference
18 in this section, sections 103 and 104, and section 1118
19 of title 38, United States Code (as added by section 101),
20 to the National Academy of Sciences shall be treated as
21 a reference to such other organization.

22 **SEC. 103. MONITORING OF HEALTH STATUS AND HEALTH**
23 **CARE OF PERSIAN GULF WAR VETERANS.**

24 (a) INFORMATION DATA BASE.—(1) The Secretary
25 of Veterans Affairs shall, in consultation with the Sec-

1 retary of Defense, develop a plan for the establishment
2 and operation of a single computerized information data
3 base for the collection, storage, and analysis of informa-
4 tion on—

5 (A) the diagnosed illnesses and undiagnosed ill-
6 nesses suffered by current and former members of
7 the Armed Forces who served in the Southwest Asia
8 theater of operations during the Persian Gulf War;
9 and

10 (B) the health care utilization patterns of such
11 members with—

12 (i) any chronic undiagnosed illnesses; and

13 (ii) any chronic illnesses for which the Na-
14 tional Academy of Sciences has identified a
15 valid model of treatment pursuant to its review
16 under section 102(f).

17 (2) The plan shall provide for the commencement of
18 the operation of the data base not later than 18 months
19 after the date of enactment of this Act.

20 (3) The Secretary shall ensure in the plan that the
21 data base provides the capability of monitoring and ana-
22 lyzing information on—

23 (A) the illnesses covered by paragraph (1)(A);

24 (B) the health care utilization patterns referred
25 to in paragraph (1)(B); and

1 (C) the changes in health status of veterans
2 covered by paragraph (1).

3 (4) In order to meet the requirement under para-
4 graph (3), the plan shall ensure that the data base in-
5 cludes the following:

6 (A) Information in the Persian Gulf War Veter-
7 ans Health Registry established under section 702 of
8 the Persian Gulf War Veterans' Health Status Act
9 (title VII of Public Law 102-585; 38 U.S.C. 527
10 note).

11 (B) Information in the Comprehensive Clinical
12 Evaluation Program for Veterans established under
13 section 734 of the National Defense Authorization
14 Act for Fiscal Years 1992 and 1993 (10 U.S.C.
15 1074 note).

16 (C) Information derived from other examina-
17 tions and treatment provided by Department of Vet-
18 erans Affairs health care facilities to veterans who
19 served in the Southwest Asia theater of operations
20 during the Persian Gulf War.

21 (D) Information derived from other examina-
22 tions and treatment provided by military health care
23 facilities to current members of the Armed Forces
24 (including members of the active components and

1 members of the reserve components) who served in
2 that theater of operations during that war.

3 (E) Such other information as the Secretary of
4 Veterans Affairs and the Secretary of Defense con-
5 sider appropriate.

6 (5) Not later than one year after the date of enact-
7 ment of this Act, the Secretary shall submit the plan de-
8 veloped under paragraph (1) to the following:

9 (A) The designated congressional committees.

10 (B) The Secretary of Veterans Affairs.

11 (C) The Secretary of Defense.

12 (D) The National Academy of Sciences.

13 (6)(A) The agreement under section 102 shall require
14 the evaluation of the plan developed under paragraph (1)
15 by the National Academy of Sciences. The Academy shall
16 complete the evaluation of the plan not later than 90 days
17 after the date of its submittal to the Academy under para-
18 graph (5).

19 (B) Upon completion of the evaluation, the Academy
20 shall submit a report on the evaluation to the committees
21 and individuals referred to in paragraph (5).

22 (7) Not later than 90 days after receipt of the report
23 under paragraph (6), the Secretary shall—

24 (A) modify the plan in light of the evaluation
25 of the Academy in the report; and

1 (B) commence implementation of the plan as so
2 modified.

3 (b) ANNUAL REPORT.—Not later than April 1 each
4 year after the year in which operation of the data base
5 under subsection (a) commences, the Secretary of Veter-
6 ans Affairs and the Secretary of Defense shall jointly sub-
7 mit to the designated congressional committees a report
8 containing—

9 (1) with respect to the data compiled under this
10 section during the preceding year—

11 (A) an analysis of the data;

12 (B) a discussion of the types, incidences,
13 and prevalence of the illnesses identified
14 through such data;

15 (C) an explanation for the incidence and
16 prevalence of such illnesses; and

17 (D) other reasonable explanations for the
18 incidence and prevalence of such illnesses; and

19 (2) with respect to the most current informa-
20 tion received under section 102(i) regarding treat-
21 ment models reviewed under section 102(f)—

22 (A) an analysis of the information;

23 (B) the results of any consultation between
24 such Secretaries regarding the implementation
25 of such treatment models in the health care sys-

1 tems of the Department of Veterans Affairs
2 and the Department of Defense; and

3 (C) in the event either such Secretary de-
4 termines not to implement such treatment mod-
5 els, an explanation for such determination.

6 **SEC. 104. REPORTS ON RECOMMENDATIONS FOR ADDI-**
7 **TIONAL SCIENTIFIC RESEARCH.**

8 (a) REPORTS.—Not later than 90 days after the date
9 on which the Secretary of Veterans Affairs receives any
10 recommendations from the National Academy of Sciences
11 for additional scientific studies under section 102(g), the
12 Secretary of Veterans Affairs, Secretary of Defense, and
13 Secretary of Health and Human Services shall jointly sub-
14 mit to the designated congressional committees a report
15 on such recommendations, including whether or not the
16 Secretaries intend to carry out any recommended studies.

17 (b) ELEMENTS.—In each report under subsection
18 (a), the Secretaries shall—

19 (1) set forth a plan for each study, if any, that
20 the Secretaries intend to carry out; or

21 (2) in case of each study that the Secretaries
22 intend not to carry out, set forth a justification for
23 the intention not to carry out such study.

1 **SEC. 105. OUTREACH.**

2 (a) OUTREACH BY SECRETARY OF VETERANS AF-
3 FAIRS.—The Secretary of Veterans Affairs shall, in con-
4 sultation with the Secretary of Defense and the Secretary
5 of Health and Human Services, carry out an ongoing pro-
6 gram to provide veterans who served in the Southwest
7 Asia theater of operations during the Persian Gulf War
8 the information described in subsection (c).

9 (b) OUTREACH BY SECRETARY OF DEFENSE.—The
10 Secretary of Defense shall, in consultation with the Sec-
11 retary of Veterans Affairs and the Secretary of Health and
12 Human Services, carry out an ongoing program to provide
13 current members of the Armed Forces (including members
14 of the active components and members of the reserve com-
15 ponents) who served in that theater of operations during
16 that war the information described in subsection (c).

17 (c) COVERED INFORMATION.—Information under
18 this subsection is information relating to—

19 (1) the health risks, if any, resulting from expo-
20 sure to toxic agents, environmental or wartime haz-
21 ards, or preventive medicines or vaccines associated
22 with Gulf War service; and

23 (2) any services or benefits available with re-
24 spect to such health risks.

25 **SEC. 106. DEFINITIONS.**

26 In this title:

1 (1) The term “toxic agent, environmental or
2 wartime hazard, or preventive medicine or vaccine
3 associated with Gulf War service” means a biological,
4 chemical, or other toxic agent, environmental or
5 wartime hazard, or preventive medicine or vaccine
6 that is known or presumed to be associated with
7 service in the Armed Forces in the Southwest Asia
8 theater of operations during the Persian Gulf War,
9 whether such association arises as a result of single,
10 repeated, or sustained exposure and whether such
11 association arises through exposure singularly or in
12 combination.

13 (2) The term “designated congressional committees” means the following:

15 (A) The Committees on Veterans’ Affairs
16 and Armed Services of the Senate.

17 (B) The Committees on Veterans’ Affairs
18 and National Security of the House of Representatives.
19

20 (3) The term “Persian Gulf War” has the
21 meaning given that term in section 101(33) of title
22 38, United States Code.

1 **TITLE II—EXTENSION AND EN-**
 2 **HANCEMENT OF *PERSIAN***
 3 **GULF WAR HEALTH CARE AU-**
 4 **THORITIES**

5 **SEC. 201. EXTENSION OF AUTHORITY TO PROVIDE HEALTH**
 6 **CARE FOR PERSIAN GULF WAR VETERANS.**

7 Section 1710(e)(3)(B) of title 38, United States
 8 Code, is amended by striking out “December 31, 1998”
 9 and inserting in lieu thereof “December 31, 2001”.

10 **SEC. 202. EXTENSION AND IMPROVEMENT OF EVALUATION**
 11 **OF HEALTH STATUS OF SPOUSES AND CHIL-**
 12 **DREN OF PERSIAN GULF WAR VETERANS.**

13 (a) **EXTENSION.**—Subsection (b) of section 107 of
 14 the Persian Gulf War Veterans’ Benefits Act (title I of
 15 Public Law 103–446; 38 U.S.C. 1117 note) is amended
 16 by striking out “ending on December 31, 1998.” and in-
 17 serting in lieu thereof “ending on the earlier of—

18 “(1) the date of the completion of expenditure
 19 of funds available for the program under subsection
 20 (c); or

21 “(2) December 31, 2001.”.

22 (b) **TERMINATION OF CERTAIN TESTING AND EVAL-**
 23 **UATION REQUIREMENTS.**—Subsection (a) of that section
 24 is amended by striking out the flush matter following
 25 paragraph (3).

1 (c) OUTREACH.—Subsection (g) of that section is
2 amended—

3 (1) by inserting “(1)” before “The Secretary”;

4 (2) by redesignating paragraphs (1) and (2) of
5 paragraph (1), as designated by paragraph (1) of
6 this subsection, as subparagraphs (A) and (B) of
7 that paragraph; and

8 (3) by adding at the end the following new
9 paragraphs:

10 “(2) In addition to the outreach activities under para-
11 graph (1), the Secretary shall also provide outreach with
12 respect to the following:

13 “(A) The existence of the program under this
14 section.

15 “(B) The purpose of the program.

16 “(C) The availability under the program of
17 medical examinations and tests, and not medical
18 treatment.

19 “(D) The findings of any published, peer-re-
20 viewed research with respect to any associations (or
21 lack thereof) between the service of veterans in the
22 Southwest Asia theater of operations and particular
23 illnesses or disorders of their spouses or children.

1 “(3) Outreach under this subsection shall be provided
2 any veteran who served as a member of the Armed Forces
3 in the Southwest Asia theater of operations and who—

4 “(A) seeks health care or services at medical fa-
5 cilities of the Department of Veterans Affairs; or

6 “(B) is or seeks to be listed in the Persian Gulf
7 War Veterans Registry.”.

8 (d) ENHANCED FLEXIBILITY IN EXAMINATIONS.—
9 That section is further amended—

10 (1) by redesignating subsections (i) and (j) as
11 subsections (k) and (l), respectively; and

12 (2) by inserting after subsection (h) the follow-
13 ing new subsection (i):

14 “(i) ENHANCED FLEXIBILITY IN EXAMINATIONS.—
15 In order to increase the number of diagnostic tests and
16 medical examinations under the program under this sec-
17 tion, the Secretary may—

18 “(1) reimburse the primary physicians of
19 spouses and children covered by that subsection for
20 the costs of conducting such tests or examinations,
21 with such rates of reimbursement not to exceed the
22 rates paid contract entities under subsection (d) for
23 conducting tests or examinations under the program;

1 “(2) conduct such tests or examinations of
2 spouses covered by that subsection in medical facili-
3 ties of the Department; and

4 “(3) in the event travel is required in order to
5 facilitate such tests or examinations by contract en-
6 tities referred to in paragraph (1), reimburse the
7 spouses and children concerned for the costs of such
8 travel and of related lodging.”.

9 (e) ENHANCED MONITORING OF PROGRAM.—That
10 section is further amended by inserting after subsection
11 (i), as amended by subsection (d) of this section, the fol-
12 lowing new subsection (j):

13 “(j) ENHANCED MONITORING OF PROGRAM.—In
14 order to enhance monitoring of the program under this
15 section, the Secretary shall provide for monthly reports to
16 the Central Office of the Department on activities with
17 respect to the program by elements of the Department and
18 contract entities under subsection (d).”.

1 **TITLE III—MISCELLANEOUS**

2 **SEC. 301. ASSESSMENT OF ESTABLISHMENT OF INDEPEND-**
3 **ENT ENTITY TO EVALUATE POST-CONFLICT**
4 **ILLNESSES AMONG MEMBERS OF THE ARMED**
5 **FORCES AND HEALTH CARE PROVIDED BY**
6 **DOD AND VA BEFORE AND AFTER DEPLOY-**
7 **MENT OF SUCH MEMBERS.**

8 (a) **AGREEMENT FOR ASSESSMENT.**—The Secretary
9 of Veterans Affairs shall seek to enter into an agreement
10 with the National Academy of Sciences, or other appro-
11 priate independent organization, under which agreement
12 the Academy shall carry out the assessment referred to
13 in subsection (b).

14 (b) **ASSESSMENT.**—(1) Under the agreement, the
15 Academy shall assess the need for and feasibility of estab-
16 lishing an independent entity to—

17 (A) evaluate and monitor interagency coordina-
18 tion on issues relating to the post-deployment health
19 concerns of members of the Armed Forces, including
20 coordination relating to outreach and risk commu-
21 nication, recordkeeping, research, utilization of new
22 technologies, international cooperation and research,
23 health surveillance, and other health-related activi-
24 ties;

1 (B) evaluate the health care (including preven-
2 tive care and responsive care) provided to members
3 of the Armed Forces both before and after their de-
4 ployment on military operations;

5 (C) monitor and direct government efforts to
6 evaluate the health of members of the Armed Forces
7 upon their return from deployment on military oper-
8 ations for purposes of ensuring the rapid identifica-
9 tion of any trends in diseases or injuries among such
10 members as a result of such operations;

11 (D) provide and direct the provision of ongoing
12 training of health care personnel of the Department
13 of Defense and the Department of Veterans Affairs
14 in the evaluation and treatment of post-deployment
15 diseases and health conditions, including nonspecific
16 and unexplained illnesses; and

17 (E) make recommendations to the Department
18 of Defense and the Department of Veterans Affairs
19 regarding improvements in the provision of health
20 care referred to in subparagraph (B), including im-
21 provements in the monitoring and treatment of
22 members referred to in that subparagraph.

23 (2) The assessment shall cover the health care pro-
24 vided by the Department of Defense and, where applica-
25 ble, by the Department of Veterans Affairs.

1 (c) REPORT.—(1) The agreement shall require the
2 Academy to submit to the committees referred to in para-
3 graph (3) a report on the results of the assessment under
4 this section not later than one year after the date of enact-
5 ment of this Act.

6 (2) The report shall include the following:

7 (A) The recommendation of the Academy as to
8 the need for and feasibility of establishing an inde-
9 pendent entity as described in subsection (b) and a
10 justification of such recommendation.

11 (B) If the Academy recommends that an entity
12 be established, the recommendations of the Academy
13 as to—

14 (i) the organizational placement of the en-
15 tity;

16 (ii) the personnel and other resources to be
17 allocated to the entity;

18 (iii) the scope and nature of the activities
19 and responsibilities of the entity; and

20 (iv) mechanisms for ensuring that any rec-
21 ommendations of the entity are carried out by
22 the Department of Defense and the Department
23 of Veterans Affairs.

24 (3) The report shall be submitted to the following:

1 (A) The Committee on Veterans' Affairs and
2 the Committee on Armed Services of the Senate.

3 (B) The Committee on Veterans' Affairs and
4 the Committee on National Security of the House of
5 Representatives.

Amend the title so as to read: "A Bill to provide for the establishment of a presumption of service-connection for illnesses associated with service in the Persian Gulf War, to extend and enhance certain health care authorities relating to such service, and for other purposes."