

HR 8247

Veterans COMPACT Act of 2020

Congress: 116 (2019–2021, Ended)

Chamber: House

Policy Area: Armed Forces and National Security

Introduced: Sep 14, 2020

Current Status: Became Public Law No: 116-214.

Latest Action: Became Public Law No: 116-214. (Dec 5, 2020)

Law: 116-214 (Enacted Dec 5, 2020)

Official Text: <https://www.congress.gov/bill/116th-congress/house-bill/8247>

Sponsor

Name: Rep. Takano, Mark [D-CA-41]

Party: Democratic • **State:** CA • **Chamber:** House

Cosponsors

No cosponsors are listed for this bill.

Committee Activity

Committee	Chamber	Activity	Date
Veterans' Affairs Committee	House	Markup by	Sep 17, 2020

Subjects & Policy Tags

Policy Area:

Armed Forces and National Security

Related Bills

Bill	Relationship	Last Action
116 HR 7747	Related bill	Oct 6, 2020: Referred to the Subcommittee on Health.
116 S 2864	Related bill	Jul 1, 2020: Held at the desk.
116 HR 5324	Related bill	Mar 10, 2020: Subcommittee Hearings Held.
116 HR 4154	Related bill	Aug 22, 2019: Referred to the Subcommittee on Health.

Veterans Comprehensive Prevention, Access to Care, and Treatment Act of 2020 or the Veterans COMPACT Act of 2020

This bill implements programs, policies, and reports related to Department of Veterans Affairs (VA) transition assistance, suicide care, mental health education and treatment, health care, and women veteran care.

(Sec. 101) This section requires the VA to carry out a two-year pilot program on information sharing between the VA and designated persons regarding the assistance and benefits available to veterans.

(Sec. 102) The VA must annually report (for a period of five years) on its Solid Start program, which is an outreach program for those in their first year of separation from the military. The report must exclude any personally identifiable information regarding a veteran.

(Sec. 201) The VA must furnish or pay for emergent suicide care, including transportation costs, at a VA or non-VA facility for certain veterans. The bill requires the VA to ensure certain notification procedures occur in relation to veterans receiving emergent suicide care.

The VA must determine the eligibility of individuals receiving emergent suicide care for other VA programs and benefits. Additionally, the VA must make referrals, as appropriate, for care following the period of emergent suicide care.

(Sec. 202) The VA must establish a four-year education program for the education and training of caregivers and family members of veterans with mental health disorders.

(Sec. 203) This section requires the VA to establish the Task Force on Outdoor Recreation for Veterans to report on and make recommendations regarding the use of public lands or other outdoor spaces for medical treatment and therapy for veterans.

(Sec. 204) The VA must seek to contact covered veterans to encourage them to receive comprehensive physical, mental health, eye, and audiological examinations. A covered veteran is a veteran who is enrolled in the VA health care system and has not received health care furnished or paid for by the VA in the past two years.

Under the bill, if a covered veteran elects to receive more than one of the comprehensive examinations at a VA health care facility, the VA shall seek to furnish all such examinations on the same day. A covered veteran may also receive an examination from another specified health care provider.

The bill provides that the VA may pay for a rural covered veteran to travel to a health care facility to receive a comprehensive examination.

The VA shall seek to enter into agreements with nonprofit organizations to provide shuttle service to rural covered veterans for such examinations.

(Sec. 205) The VA must provide its police officers with annual training on the prevention of suicide among the population it serves. Each police force of a VA facility must develop a plan to enter into partnerships with local community mental health organizations and experts, local community veterans organizations, local community criminal justice organizations and experts, and local police departments.

(Sec. 301) The VA must complete an analysis and report on its programs that provide assistance to women veterans who are homeless or precariously housed to identify the areas in which such programs are failing to meet the needs of such women.

(Sec. 302) The VA must annually report on the use of VA health care by women veterans.

Actions Timeline

- **Dec 5, 2020:** Signed by President.
- **Dec 5, 2020:** Became Public Law No: 116-214.
- **Nov 24, 2020:** Presented to President.
- **Nov 12, 2020:** Message on Senate action sent to the House.
- **Nov 10, 2020:** Passed/agreed to in Senate: Passed Senate without amendment by Unanimous Consent.(consideration: CR S6655)
- **Nov 10, 2020:** Passed Senate without amendment by Unanimous Consent. (consideration: CR S6655)
- **Sep 24, 2020:** Received in the Senate, read twice.
- **Sep 23, 2020:** Mr. Takano moved to suspend the rules and pass the bill, as amended.
- **Sep 23, 2020:** Considered under suspension of the rules. (consideration: CR H4763-4770)
- **Sep 23, 2020:** DEBATE - The House proceeded with forty minutes of debate on H.R. 8247.
- **Sep 23, 2020:** Passed/agreed to in House: On motion to suspend the rules and pass the bill, as amended Agreed to by voice vote.(text: CR H4763-4767)
- **Sep 23, 2020:** On motion to suspend the rules and pass the bill, as amended Agreed to by voice vote. (text: CR H4763-4767)
- **Sep 23, 2020:** Motion to reconsider laid on the table Agreed to without objection.
- **Sep 17, 2020:** Subcommittee Consideration and Mark-up Session Held.
- **Sep 17, 2020:** Ordered to be Reported (Amended) by Voice Vote.
- **Sep 17, 2020:** Committee Consideration and Mark-up Session Held.
- **Sep 15, 2020:** Referred to the Subcommittee on Health.
- **Sep 14, 2020:** Introduced in House
- **Sep 14, 2020:** Referred to the House Committee on Veterans' Affairs.