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CONTACT: Noelani Bonifacio, 202-226-9719

FLOOR SCHEDULE:
Expected to be considered June 13, 2018, under suspension of the rules, which requires a 2/3 majority for passage.

TOPLINE SUMMARY:
H.R. 5294 would clarify that the Appalachian Regional Commission may enter into contracts and provide grants to individuals and entities in the Appalachian region for projects to address drug abuse, including opioid abuse.

COST:
The Congressional Budget Office (CBO) estimates that implementing H.R. 5294 would have no budgetary effects.

CONSERVATIVE CONCERNS:
The RSC Budget would eliminate the regional commissions, because “Not only is the federal government out of money, but also it is ill-equipped to adequately prioritize local infrastructure and development projects. These activities are also more appropriately carried out by state and local governments.”

- Expand the Size and Scope of the Federal Government? The bill would not increase the authorization for the program, and according to CBO, these projects are already being carried out by the Appalachian Regional Commission.
- Encroach into State or Local Authority? Some conservatives may believe these projects would be more appropriately funded at the state or local level.
- Delegate Any Legislative Authority to the Executive Branch? No.
- Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits? No.

DETAILED SUMMARY AND ANALYSIS:
H.R. 5294 would clarify that the Appalachian Regional Commission may provide technical assistance to, make grants to, enter into contracts with, or provide amounts to individuals and entities in the Appalachian region for projects to address drug abuse, including opioid abuse. The bill specifically allows activities to facilitate the sharing of best practices, initiate programs to reduce harm to the workforce and economic growth, attract healthcare services and workers, and develop infrastructure.

The bill would prevent more than 50 percent of the cost of the activity from being provided using funds appropriated under this section, unless the county is designated ‘distressed’ under 40 U.S.C. 14526, in which case 80 percent may be provided, or designated ‘at-risk’ under 40 U.S.C. 14526, in which case 70 percent may be provided. A current list of counties that have been designated as ‘distressed’ may be found here.
Grants may be provided in combination with other federal grants and other sources. The bill would allow grants to be used to increase the federal share under other programs, as the Appalachian Regional Commission determines appropriate.

**COMMITTEE ACTION:**
H.R. 5294 was introduced on March 15, 2018, and referred to the House Committee on Transportation and Infrastructure. The bill was marked up on April 12, 2018, and reported by voice vote.

**ADMINISTRATION POSITION:**
No Statement of Administration Policy is available at this time.

**CONSTITUTIONAL AUTHORITY:**
According to the bill’s sponsor: “Congress has the power to enact this legislation pursuant to the following: Article I, Section 8 of the United States Constitution, specifically Clause 1 (relating to providing for the common defense and general welfare of the United States) and Clause 18 (relating to the power to make all laws necessary and proper for carrying out the powers vested in Congress) and Article I, Section 10, Clause 3 (relating to interstate compacts).”

FLOOR SCHEDULE:
June 13, 2018 under a suspension of the rules, which requires a 2/3 majority for passage.

TOPLINE SUMMARY:
H.R. 5752 would increase the authority of the Food and Drug Administration (FDA) to seize and destroy certain imported drugs.

COST:
The Congressional Budget Office (CBO) estimates that “enacting H.R. 5752 would generate an insignificant net increase in revenues over the 2019-2028 period.” The bill also “would increase authorization levels, but CBO has not completed estimates of amounts. All authorizations would be subject to future appropriation action.”

CONSERVATIVE CONCERNS:
- Expand the Size and Scope of the Federal Government? The bill would increase the power of the FDA to seize and destroy imported drugs.
- Encroach into State or Local Authority? No.
- Delegate Any Legislative Authority to the Executive Branch? No.
- Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits? No.

DETAILED SUMMARY AND ANALYSIS:

According to CRS, “Under current law, FDA, in collaboration with the Customs and Border Protection Agency, is authorized to inspect, detain, and refuse entry to imported drugs, devices, food, and other products under its jurisdiction. Recently, FDA Commissioner Gottlieb and others have highlighted challenges associated with diverted opioids or illegal drugs that enter the United States through international mail facilities, including issues with inspecting the high volume of items entering these facilities and procedural difficulties in determining whether a particular product violates the FD&C Act before it may be refused entry or destroyed.”

H.R. 5752 would expand the definition of what is considered a drug under the FDA’s authority to detain, refuse, and destroy drugs to include articles that contain an active ingredient in an approved drug, contain an active ingredient that is under clinical investigation, or contain a substance that has a chemical structure that is substantially similar to such an active ingredient.

The bill would allow the FDA to refuse importation of “articles of concern” that would include an article that contains a drug or substance for which in the previous 24 months the Secretary of Health and Human Services has initiated the process to schedule it under the Controlled Substances Act.

The bill would modify the procedures regarding articles seized by the FDA due to being adulterated or misbranded.
The bill would provide for the disbarment of individuals importing controlled substances under certain circumstances.

**COMMITTEE ACTION:**
H.R. 5752 was introduced on May 10, 2018, and referred to the Energy and Commerce Committee. The Committee marked up and reported the bill on May 17, 2018, by a voice vote.

**ADMINISTRATION POSITION:**
No Statement of Administration Policy is available at this time.

**CONSTITUTIONAL AUTHORITY:**
“Congress has the power to enact this legislation pursuant to the following: Article I, Section 8, Clause 3--``The Congress shall have Power . . . To regulate Commerce with foreign Nations, and among the several States, and with the Indian Tribes’.”

CONTACT: Jennifer Weinhart, 202-226-0706

FLOOR SCHEDULE:
Scheduled for consideration on June 13, 2018 under a suspension of the rules which requires 2/3 majority for final passage.

TOPLINE SUMMARY:
H.R. 4655 would prohibit the importation or transportation of “child sex dolls,” including any anatomically correct doll, mannequin, or robot resembling a minor for use in sexual acts.

COST:
A Congressional Budget Office (CBO) estimate is not yet available.

Rule 28(a)(1) of the Rules of the Republican Conference prohibits measures from being scheduled for consideration under suspension of the rules without an accompanying cost estimate. Rule 28(b) provides that the cost estimate requirement may be waived by a majority of the Elected Leadership.

CONSERVATIVE CONCERNS:
- Expand the Size and Scope of the Federal Government? The bill would prohibit the importation or transportation of “child sex dolls.”
- Encroach into State or Local Authority? no
- Delegate Any Legislative Authority to the Executive Branch? No.
- Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits? No.

DETAILED SUMMARY AND ANALYSIS:
This bill would prohibit the importation or transportation of “child sex dolls,” including any anatomically correct doll, mannequin, or robot resembling a minor for use in sexual acts.

Under the bill, offenders could be fined or imprisoned for up to five years for the first offense, and imprisoned for up to ten years for subsequent offenses.

These dolls, primarily manufactured in Hong Kong, China, and Japan, could be imported into the United States, are sometimes purchased by those found to also be in possession of child pornography, according to UK police.

COMMITTEE ACTION:
H.R. 4655 was introduced on December 14, 2017, and was referred to the House Committee on the Judiciary. The Committee took no further action on the bill.

ADMINISTRATION POSITION:
A Statement of Administration Policy is not available.

CONSTITUTIONAL AUTHORITY:
“Congress has the power to enact this legislation pursuant to the following: Article I, Section 8, Clause 3 and/or Article I, Section 8, Clause 18.”

CONTACT: Jennifer Weinhart, 202-226-0706

FLOOR SCHEDULE:
Scheduled for consideration on June 13, 2018, under a suspension of the rules which requires 2/3 majority for final passage.

TOPLINE SUMMARY:
H.R. 6029 would reauthorize and extend the Comprehensive Opioid Abuse Program (COAP) through 2023.

COST:
A Congressional Budget Office (CBO) estimate is not yet available, however, this legislation would authorize $330 million each fiscal year through 2023.

Rule 28(a)(1) of the Rules of the Republican Conference prohibits measures from being scheduled for consideration under suspension of the rules without an accompanying cost estimate. Rule 28(b) provides that the cost estimate requirement may be waived by a majority of the Elected Leadership.

CONSERVATIVE CONCERNS:
Some conservatives may be concerned that the bill would authorize increased appropriations without offsetting reductions, in violation of the Majority Leader’s Cut-Go for Discretionary Authorizations Floor Protocol.

- Expand the Size and Scope of the Federal Government? Yes, the bill would authorize $330 million through 2023, extending a program that was authorized at $103 million through 2021.
- Encroach into State or Local Authority? Some conservatives may believe these activities would be more appropriately handled by state and local governments, or by civil society.
- Delegate Any Legislative Authority to the Executive Branch? No.
- Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits? No.

DETAILED SUMMARY AND ANALYSIS:
The Comprehensive Opioid Abuse Program (COAP) was authorized through the Comprehensive Addiction and Recovery Act of 2016, to provide grants and assistance to state and local governments in combatting the opioid epidemic. Eligible applicants include first responder partnerships, technology-assisted treatment projects, system-level diversion projects, statewide planning, coordination, and implementation projects, Harold Rogers Prescription Drug Monitoring Program (PDMP) Implementation and Enhancement Projects, and Public Safety, Behavioral Health, and Public Health Information-sharing Partnerships. This program was originally authorized at $103 million per fiscal year through 2021.
This legislation would reauthorize the program through 2023 in the amount of $330 million per fiscal year. This funding level was already appropriated through H.R. 1625, the Consolidated Appropriations Act.

**COMMITTEE ACTION:**
H.R. 6029 was introduced on June 7, 2018, and was referred to the House Committee on the Judiciary.

**ADMINISTRATION POSITION:**
A Statement of Administration Policy is not available.

**CONSTITUTIONAL AUTHORITY:**
“Congress has the power to enact this legislation pursuant to the following: Article I, Section 8, Clause 1: The Congress shall have Power To lay and collect Taxes, Duties, Imposts and Excises, to pay the Debts and provide for the common Defense and general Welfare of the United States; but all Duties, Imposts and Excises shall be uniform throughout the United States. And, Article I, Section 8, Clause 18: To make all Laws which shall be necessary and proper for carrying into Execution the foregoing Powers, and all other Powers vested by this Constitution in the Government of the United States, or in any Department or Officer thereof.”

CONTACT: Noelani Bonifacio, 202-226-9719

FLOOR SCHEDULE:
Expected to be considered June 13, 2018, under suspension of the rules, which requires a 2/3 majority for passage.

TOPLINE SUMMARY:
H.R. 5889 would require the secretary of Health and Human Services to disseminate information, resources, and technical assistance to early childhood education providers on ways to properly recognize children who are impacted by drug abuse-related trauma and how to appropriately respond.

COST:
A Congressional Budget Office (CBO) cost estimate is not available at this time.

Rule 28(a)(1) of the Rules of the Republican Conference prohibit measures from being scheduled for consideration under suspension of the rules without an accompanying cost estimate. Rule 28(b) provides that the cost estimate requirement may be waived by a majority of the Elected Leadership.

CONSERVATIVE CONCERNS:
- Expand the Size and Scope of the Federal Government? No.
- Encroach into State or Local Authority? Some conservatives may believe these activities would be more appropriately funded at the state or local level, or by civil society.
- Delegate Any Legislative Authority to the Executive Branch? No.
- Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits? No.

DETAILED SUMMARY AND ANALYSIS:
H.R. 5889 would require the secretary of Health and Human Services to disseminate information, resources, and technical assistance to early childhood education providers on ways to properly recognize children who are impacted by drug abuse-related trauma and how to appropriately respond.

The goals of the resources provided must be to educate early childhood education providers on identifying early signs and risk factors, suggest communication tools and practices for trauma-informed care, provide options to responding to children, and promoting whole-family and multi-generational approaches to prevent separation.

COMMITTEE ACTION:
H.R. 5889 was introduced on May 21, 2018, and referred to the House Committee on Education and the Workforce. No further action has been taken on the bill.

ADMINISTRATION POSITION:
No Statement of Administration Policy is available at this time.

**CONSTITUTIONAL AUTHORITY:**
According to the bill’s sponsor: “Congress has the power to enact this legislation pursuant to the following: Article I, section 8 of the Constitution of the United States.” No specific enumerating clause was cited.
H.R. 5890 – Assisting States’ Implementation of Plans of Safe Care Act (Rep. Garrett, R-VA)

CONTACT: Noelani Bonifacio, 202-226-9719

FLOOR SCHEDULE:
Expected to be considered June 13, 2018, under suspension of the rules, which requires a 2/3 majority for passage.

TOPLINE SUMMARY:
H.R. 5890 would require the Secretary of Health and Human Services to provide written guidance and technical assistance to support states in implementing parts of 42 U.S.C. 5106a of the Child Abuse Prevention and Treatment Act, which provides grants to states for child abuse or neglect prevention and treatment.

COST:
A Congressional Budget Office (CBO) cost estimate is not available at this time.

Rule 28(a)(1) of the Rules of the Republican Conference prohibit measures from being scheduled for consideration under suspension of the rules without an accompanying cost estimate. Rule 28(b) provides that the cost estimate requirement may be waived by a majority of the Elected Leadership.

CONSERVATIVE CONCERNS:
Expand the Size and Scope of the Federal Government? The bill would require HHS to provide guidance and technical assistance.
- Encroach into State or Local Authority? Some conservatives may believe these activities would be more appropriately funded at the state or local level.
- Delegate Any Legislative Authority to the Executive Branch? No.
- Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits? No.

DETAILED SUMMARY AND ANALYSIS:
H.R. 5890 would require the Secretary of Health and Human Services to provide written guidance and technical assistance to support states in implementing parts of 42 U.S.C. 5106a of the Child Abuse Prevention and Treatment Act, which provides grants to states for child abuse or neglect prevention and treatment.

The bill requires the guidance to: (1) enhance understanding of requirements and flexibilities; (2) address challenges with developing and implementing plans of safe care; (3) disseminate best practices related to developing and implementing plans of safe care; (4) support collaboration between health care providers, social service agents, public health agencies and the child welfare system, (5) prevent separation and support reunification of families; (6) recommend treatment approaches for serving infants, pregnant women, and post-partum women whose infants may be affected by substance use (7) support state efforts to develop technology systems; (8) help states improve the long term safety and well-being of young children and families.

The bill does not amend requirements of the Child Abuse Prevention and Treatment Act.
COMMITTEE ACTION:
H.R. 5890 was introduced on May 21, 2018, and referred to the House Committee on Education and the Workforce. No further action has been taken on the bill.

ADMINISTRATION POSITION:
No Statement of Administration Policy is available at this time.

CONSTITUTIONAL AUTHORITY:
According to the bill’s sponsor: “Congress has the power to enact this legislation pursuant to the following: Article I, section 8 of the Constitution of the United States.” No specific enumerating clause was cited.
H.R. 5891 – Improving the Federal Response to Families Impacted by Substance Use Disorder Act (Rep. Grothman, R-WI)

CONTACT: Noelani Bonifacio, 202-226-9719

FLOOR SCHEDULE:
Expected to be considered June 13, 2018, under suspension of the rules, which requires a 2/3 majority for passage.

TOPLINE SUMMARY:
H.R. 5891 would establish an Interagency Task Force to Improve the Federal Response to Families Impacted by Substance Use Disorders.

COST:
A Congressional Budget Office (CBO) cost estimate is not available at this time.

Rule 28(a)(1) of the Rules of the Republican Conference prohibit measures from being scheduled for consideration under suspension of the rules without an accompanying cost estimate. Rule 28(b) provides that the cost estimate requirement may be waived by a majority of the Elected Leadership.

CONSERVATIVE CONCERNS:
Expand the Size and Scope of the Federal Government? The bill would establish an Interagency Task Force to Improve the Federal Response to Families Impacted by Substance Use Disorders.
- Encroach into State or Local Authority? Some conservatives may believe these activities would be more appropriately funded at the state or local level.
- Delegate Any Legislative Authority to the Executive Branch? No.
- Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits? No.

DETAILED SUMMARY AND ANALYSIS:
H.R. 5891 would establish an Interagency Task Force to Improve the Federal Response to Families Impacted by Substance Use Disorders to identify and recommend ways for federal agencies to coordinate substance abuse disorder and opioid crisis responses.

The task force would be comprised of 12 federal officials from each of the following departments:
- Secretary of Health and Human Services: two members
- Secretary of Education: two members
- Secretary of Agriculture: two members
- Secretary of Labor: two members
- The additional four federal officials/members of the taskforce and the chairperson are to be appointed by the Secretary of Health and Human Services

The taskforce members may not receive pay, allowances or benefits as a result of their service on the taskforce.
The duties of the taskforce are to: (1) solicit input from stakeholders to inform the taskforce’s activities; (2) develop a collaboration strategy for the federal response to substance abuse disorders; (3) evaluate and recommend partnerships, professional development or best practices based on that strategy; and, (4) consider evidence-based best practices related to identifying and supporting families at risk of substance abuse exposure.

The bill prevents the application of the Federal Advisory Committee Act to the task force.

The bill requires the taskforce to prepare a detailed action plan and report to Congress. The taskforce must also submit a report to governors describing opportunities for partnerships. The reports must be made available online and must be released within 9 months of enactment. The taskforce will terminate 30 days after the reports have been disseminated.

Administrative expenses are to be paid out of the existing Department of Health and Human Services appropriations.

**COMMITTEE ACTION:**
H.R. 5891 was introduced on May 21, 2018, and referred to the House Committee on Education and the Workforce. No further action has been taken on the bill.

**ADMINISTRATION POSITION:**
No Statement of Administration Policy is available at this time.

**CONSTITUTIONAL AUTHORITY:**
According to the bill’s sponsor: “Congress has the power to enact this legislation pursuant to the following: Article I, section 8 of the Constitution of the United States.” No specific enumerating clause was cited.
H.R. 5892 – To establish an Advisory Committee on Opioids and the Workplace to advise the Secretary of Labor on actions the Department of Labor can take to address the impact of opioid abuse on the workplace. (Rep. Lewis, R-MN)

CONTACT: Noelani Bonifacio, 202-226-9719

FLOOR SCHEDULE:
Expected to be considered June 13, 2018, under suspension of the rules, which requires a 2/3 majority for passage.

TOPLINE SUMMARY:
H.R. 5892 would require the Secretary of Labor to establish an Advisory Committee on Opioids and the Workplace to advise the secretary on actions the Department of Labor can take to provide informational resources and best practices on how to address the impact of opioid abuse on the workplace and support workers suffering from opioid abuse.

COST:
A Congressional Budget Office (CBO) cost estimate is not available at this time.

Rule 28(a)(1) of the Rules of the Republican Conference prohibit measures from being scheduled for consideration under suspension of the rules without an accompanying cost estimate. Rule 28(b) provides that the cost estimate requirement may be waived by a majority of the Elected Leadership.

CONSERVATIVE CONCERNS:
Expand the Size and Scope of the Federal Government? The bill would establish an Advisory Committee on Opioids and the Workplace.
- Encroach into State or Local Authority? Some conservatives may believe these activities would be more appropriately funded at the state or local level.
- Delegate Any Legislative Authority to the Executive Branch? No.
- Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits? No.

DETAILED SUMMARY AND ANALYSIS:
H.R. 5892 would require the Secretary of Labor to establish an Advisory Committee on Opioids and the Workplace to advise the secretary on actions the Department of Labor can take to provide informational resources and best practices on how to address the impact of opioid abuse on the workplace and support workers suffering from opioid abuse.

The advisory committee would be comprised of 19 individuals:
- Employer representatives: four members
- Worker representatives: four members (two must be appointed by labor organizations)
- Representatives of health benefits, employee assistance, and workers’ compensation plans, and workplace health and safety professionals: three members
• Treatment and recovery experts: 8 members. 1 member may be a state or local government agency representative

The secretary would appoint the chairperson and members of the committee would serve for three years. Members of the committee must serve without compensation.

The committee would advise the secretary on actions the department can take to provide informational resources and best practices on how to address the impact of opioid abuse on the workplace and support workers suffering from opioid abuse. In doing so, the committee must take into account: (1) evidence-based policies and best-practices regarding opioid abuse; (2) the effect of opioid abuse on workplace safety; (3) the impact of opioid abuse on productivity and absenteeism; (4) the extent to which alternative pain management treatments should be covered by employer health plans; (5) the legal requirements the protection of employee privacy and nondiscrimination; (6) interactions of opioids with other substance abuse disorders; (7) additional benefits or available resources to employees abusing opioids that promote worker retention or reentry; (8) initiatives that promote early identification of opioid abuse; (9) workplace policies that reduce stigmatization; and, (10) legal requirements of the Mental Health Parity and Addiction Equity Act and other laws related to health coverage of substance abuse and mental health services and medications.

The bill requires the committee to submit a report to the secretary and appropriate congressional committees before the committee's termination.

The bill prevents the application of the Federal Advisory Committee Act to the committee.

The bill does not authorize any funds to be appropriated; expenses are to be paid with funds appropriated to department management within the Department of Labor.

The bill appoints three ex officio, non-voting member appointed by the secretary from agencies within the Department of Health and Human Services.

The committee would terminate three years after enactment.

COMMITTEE ACTION:
H.R. 5892 was introduced on May 21, 2018, and referred to the House Committee on Education and the Workforce. No further action has been taken on the bill.

ADMINISTRATION POSITION:
No Statement of Administration Policy is available at this time.

CONSTITUTIONAL AUTHORITY:
According to the bill's sponsor: “Congress has the power to enact this legislation pursuant to the following: Article I, section 8 of the Constitution of the United States.” No specific enumerating clause was cited.

CONTACT: Noelani Bonifacio, 202-226-9719

FLOOR SCHEDULE:
Expected to be considered June 13, 2018, under suspension of the rules, which requires a 2/3 majority for passage.

TOPLINE SUMMARY:
The House Amendment to S. 1091 would establish Advisory Council to Support Grandparents Raising Grandchildren.

COST:
The Congressional Budget Office (CBO) estimates that implementing S. 1091 as reported by the Senate Committee on Health, Education, Labor, and Pensions, would cost $2 million over the 2018-2022 period, subject to availability of appropriated funds.

A CBO report for the House Amendment to S. 1091 is not available at this time.

CONSERVATIVE CONCERNS:
- Encroach into State or Local Authority? Some conservatives may believe these activities would be more appropriately funded at the state or local level, or by civil society.
- Delegate Any Legislative Authority to the Executive Branch? No.
- Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits? No.

DETAILED SUMMARY AND ANALYSIS:
The House Amendment to S. 1091 would establish an Advisory Council to Support Grandparents Raising Grandchildren. The advisory council would be comprised of the following members, or their designee:

- The Secretary of Health and Human Services
- The Secretary of Education
- The Administrator of the Administration for Community Living
- The Director of the Centers of Disease Control and Prevention
- The Assistant Secretary for Substance Abuse and Mental Health Services Administration
- The Assistant Secretary for the Administration for Children and Families
- A grandparent raising a grandchild
- An older relative caregiver of children
- The head of other federal departments or agencies, as identified by the Secretary of Health and Human Services as appropriate

The lead agency would be the Department of Health and Human Services.
The advisory council would be required to disseminate to the public information, resources and best practices available to help grandparent and older relatives meet the needs of children in their care, and maintain their own health and well-being.

The bill would require the advisory council to consider the needs of those affected by the opioid crisis.

The bill would require the advisory council to submit a report to the appropriate committees, state agencies, and to the public, online. The advisory council must submit a follow-up report within two years of submitting the first report.

The bill would require the advisory council to establish a process to receive public input.

The bill prevents the application of the Federal Advisory Committee Act to the committee.

No funds are authorized to carry out the bill, and the council shall terminate three years after enactment.

**COMMITTEE ACTION:**
S. 1091 was introduced in the Senate on May 10, 2018. The bill passed the Senate by unanimous consent on March 22, 2018, and sent to the House, where it was referred to the House Committees on Education and the Workforce, and Energy and Commerce. No further action has been taken on the bill.

**ADMINISTRATION POSITION:**
No Statement of Administration Policy is available at this time.

**CONSTITUTIONAL AUTHORITY:**
Constitutional authority statements are not required for bills that originate in the Senate.
H.R. 2147 - Veterans Treatment Court Improvement Act of 2018 (Rep. Coffman, R-CO)

CONTACT: Gavin Proffitt, 202-226-2076

FLOOR SCHEDULE:
Expected to be considered June 13, 2018 under a suspension of the rules, which requires a 2/3 majority for passage.

TOPLINE SUMMARY:
H.R. 2147 would codify the Department of Veterans Affairs (VA) plan to hire at least 50 Veterans Justice Outreach (VJO) Specialists, place each one at an eligible VA medical center, and ensure that each serves as part of a justice team in a veterans treatment court or other veteran-focused court.

COST:
The Congressional Budget Office (CBO) estimates that enacting H.R. 2147 would result in no additional costs. Additionally, this legislation would require the VA and the Government Accountability Office (GAO) to submit reports to the Congress on the program. CBO estimates that four full-time employees at an average compensation of $130,000 would work on the GAO report. As a result, CBO estimates that implementing the bill’s reporting requirements would cost $1 million over the 2019-2023 period, assuming availability of appropriated amounts.

CONSERVATIVE CONCERNS:
- Expand the Size and Scope of the Federal Government? This bill would codify the VA’s current plan of hiring 50 additional specialists for the VJO program.
- Encroach into State or Local Authority? No.
- Delegate Any Legislative Authority to the Executive Branch? No.
- Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits? No.

DETAILED SUMMARY AND ANALYSIS:
This legislation aims to avoid unnecessary criminalization of mental illness and extended incarceration among veterans by ensuring that eligible, justice-involved veterans have timely access to VA services. This program would provide support services to veterans involved in the criminal justice system.

H.R. 2147 would require the Department of Veterans Affairs (VA) to hire at least 50 Veterans Justice Outreach (VJO) Specialists, place each one at an eligible VA medical center, and ensure that each serves as part of a justice team in a veterans treatment court or other veteran-focused court. The bill would require the Secretary to ensure that each VJO specialist otherwise meets the VA hiring guidelines.

According to CBO, "VA reports that currently it is working to hire at least 50 additional specialists for the VJO program," and that the bill would codify the VA’s current plan.

The bill would establish criteria for an eligible VA medical center, including working within a local criminal justice system for justice-involved veterans, maintaining an affiliation with one or more
veterans treatments courts or other veterans-focused courts, and either routinely provides VJO specialists to serve as part of a justice team in a veterans treatment court or establishes a plan to do so. The bill would require that placement of VJO specialists be prioritized for VA medical centers that have or intend to have an affiliation with a veterans treatment court.

Additionally, this legislation would require the VA and GAO to submit reports to Congress on the VJO program.

**OUTSIDE GROUP SUPPORT:**
- Wounded Warrior Project

**COMMITTEE ACTION:**
This bill was introduced by Representative Coffman on April 26, 2017, and was referred to the House Committee on Veterans’ Affairs. The Committee marked up and reported the bill on May 8, 2018, by voice vote.

**ADMINISTRATION POSITION:**
No Statement of Administration Policy is available at this time.

**CONSTITUTIONAL AUTHORITY:**
“Congress has the power to enact this legislation pursuant to the following: Clause 1 of Section 8 of Article 1 of the United States Constitution: the power to ‘provide for the common Defense and general Welfare of the United States.’”
H.R. 4635 - To direct the Secretary of Veterans Affairs to increase the number of peer-to-peer counselors providing counseling for women veterans (Rep. Coffman, R-CO)

CONTACT: Gavin Proffitt, 202-226-2076

FLOOR SCHEDULE:
Expected to be considered June 13, 2018 under a suspension of the rules, which requires a 2/3 majority for passage.

TOPLINE SUMMARY:
H.R. 4635 would direct the Secretary of Veterans Affairs to increase the number of peer-to-peer counselors providing counseling for women veterans.

COST:
The Congressional Budget Office estimates that this bill would cost less than $500,000 over the 2019-2023 period. The spending would be subject to the availability of appropriated funds.

CONSERVATIVE CONCERNS:
- **Expand the Size and Scope of the Federal Government?** This legislation would direct the Secretary of Veterans Affairs to place an emphasis on appointing and training volunteer peer-to-peer counselors specifically for women veterans.
- **Encroach into State or Local Authority?** No.
- **Delegate Any Legislative Authority to the Executive Branch?** No.
- **Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits?** No.

DETAILED SUMMARY AND ANALYSIS:

According to CBO, "Under current law, VA operates the Peer Support Counseling Program where veterans voluntarily provide support to fellow veterans on issues related to mental health care and readjustment."

H.R. 4635 would require the Department of Veterans Affairs (VA) to attempt to recruit women as peer counselors.

Specifically, this legislation would direct VA to place an emphasis on appointing and training volunteer peer counselors for women veterans who suffered sexual trauma while in the Armed Forces, experience post-traumatic stress disorder, are homeless or at risk of becoming homeless, or are otherwise at increased risk of suicide.

The bill would require the Secretary to conduct outreach to inform women veterans about the program and the assistance available. Further, the Secretary shall coordinate with community
organizations, State and local governments, education institutions, local businesses and organizations that provide legal assistance in order to carry out this program.

The bill would specify that no additional funds are authorized to be appropriated by the bill and that the VA shall carry out the requirements of the bill using funds otherwise made available to the Secretary.

Additionally, the Secretary would be required to submit a report to the Congress providing an assessment of the program.

OUTSIDE GROUP SUPPORT:
- Wounded Warrior Project

COMMITTEE ACTION:
This bill was introduced by Representative Coffman on December 13, 2017, and was referred to the House Committee on Veterans' Affairs. The Committee marked up and reported the bill on May 8, 2018, by voice vote.

ADMINISTRATION POSITION:
No Statement of Administration Policy is available at this time.

CONSTITUTIONAL AUTHORITY:
“Congress has the power to enact this legislation pursuant to the following: Clause 1 of Section 8 of Article 1 of the United States Constitution: the power to 'provide for the common Defense and general Welfare of the United States.'”

NOTE: RSC Legislative Bulletins are for informational purposes only and should not be taken as statements of support or opposition from the Republican Study Committee.

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