

113TH CONGRESS
1ST SESSION

S. 852

To improve health care furnished by the Department of Veterans Affairs by increasing access to complementary and alternative medicine and other approaches to wellness and preventive care, and for other purposes.

IN THE SENATE OF THE UNITED STATES

APRIL 25, 2013

Mr. SANDERS introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

A BILL

To improve health care furnished by the Department of Veterans Affairs by increasing access to complementary and alternative medicine and other approaches to wellness and preventive care, 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.**

4 This Act may be cited as the “Veterans’ Health Pro-
5 motion Act of 2013”.

1 **SEC. 2. DESIGNATION AND OPERATION OF CENTERS OF IN-**
 2 **NOVATION FOR COMPLEMENTARY AND AL-**
 3 **TERNATIVE MEDICINE IN HEALTH CARE RE-**
 4 **SEARCH, EDUCATION, AND CLINICAL ACTIVI-**
 5 **TIES.**

6 (a) DESIGNATION AND OPERATION OF CENTERS OF
 7 INNOVATION.—Subchapter II of chapter 73 of title 38,
 8 United States Code, is amended by adding at the end the
 9 following new section:

10 **“§ 7330B. Centers of innovation for complementary**
 11 **and alternative medicine in health care**
 12 **research, education, and clinical activi-**
 13 **ties**

14 “(a) DESIGNATION AND OPERATION.—The Sec-
 15 retary, acting through the Director of the Office of Patient
 16 Centered Care for Cultural Transformation, shall des-
 17 ignate and operate at least one center of innovation for
 18 complementary and alternative medicine in health re-
 19 search, education, and clinical activities in each Veterans
 20 Integrated Service Networks.

21 “(b) FUNCTIONS.—The functions of the centers of in-
 22 novation designated and operated under subsection (a) are
 23 as follows:

24 “(1) To conduct research on the furnishing of
 25 complementary and alternative medicine in health
 26 care.

1 “(2) To develop specific models to be used by
2 the Department in furnishing services to veterans
3 consisting of complementary and alternative medi-
4 cine.

5 “(3) To provide education and training for
6 health care professionals of the Department on—

7 “(A) the furnishing of services consisting
8 of complementary and alternative medicine to
9 veterans; or

10 “(B) providing referrals to veterans for the
11 receipt of such services.

12 “(4) To develop and implement innovative clin-
13 ical activities and systems of care for the Depart-
14 ment for the furnishing of services consisting of
15 complementary and alternative medicine to veterans.

16 “(c) GEOGRAPHIC DISPERSION.—The Secretary shall
17 ensure that the centers designated and operated under
18 this section are located at health care facilities that are
19 geographically dispersed throughout the United States.

20 “(d) FUNDING.—(1) There is authorized to be appro-
21 priated to the Secretary such sums as may be necessary
22 for the support of the research and education activities
23 of the centers operated under this section.

24 “(2) Activities of clinical and scientific investigation
25 at each center operated under this section—

1 “(A) shall be eligible to compete for the award
2 of funding from funds appropriated for the Medical
3 and Prosthetics Research Account; and

4 “(B) shall receive priority in the award of fund-
5 ing from such account to the extent that funds are
6 awarded to projects for research on the care of rural
7 veterans.

8 “(e) COMPLIMENTARY AND ALTERNATIVE MEDICINE
9 DEFINED.—In this section, the term ‘complimentary and
10 alternative medicine’ shall have the meaning given that
11 term in regulations the Secretary shall prescribe for pur-
12 poses of this section, which shall, to the degree practicable,
13 be consistent with the meaning given such term by the
14 Secretary of Health and Human Services.”.

15 (b) CLERICAL AMENDMENT.—The table of sections
16 at the beginning of chapter 73 of such title is amended
17 by inserting after the item relating to section 7330A the
18 following new item:

“7330B. Centers of Innovation for complementary and alternative medicine in
health care research, education, and clinical activities.”.

19 **SEC. 3. PILOT PROGRAM ON ESTABLISHMENT OF COM-**
20 **PLEMENTARY AND ALTERNATIVE MEDICINE**
21 **CENTERS WITHIN DEPARTMENT OF VET-**
22 **ERANS AFFAIRS MEDICAL CENTERS.**

23 (a) PILOT PROGRAM REQUIRED.—Commencing not
24 later than 180 days after the date of the enactment of

1 this Act, the Secretary of Veterans Affairs shall carry out,
2 through the Office of Patient Centered Care and Cultural
3 Transformation of the Department of Veterans Affairs, a
4 pilot program to assess the feasibility and advisability of
5 establishing complementary and alternative medicine cen-
6 ters within Department medical centers to promote the
7 use and integration of complementary and alternative
8 medicine services for mental health diagnoses and pain
9 management.

10 (b) DURATION OF PROGRAM.—The pilot program
11 shall be carried out during the three-year period beginning
12 on the date of the commencement of the pilot program.

13 (c) LOCATIONS.—

14 (1) IN GENERAL.—The Secretary shall carry
15 out the pilot program by establishing not fewer than
16 15 complementary and alternative medicine centers
17 in 15 separate Department medical centers as fol-
18 lows:

19 (A) Five Department medical centers des-
20 ignated by the Secretary as polytrauma centers.

21 (B) Ten Department medical centers not
22 designated by Secretary as polytrauma centers.

23 (2) CONSIDERATIONS.—In selecting locations
24 for the pilot program, the Secretary shall consider

1 the feasibility and advisability of selecting locations
2 in—

3 (A) rural areas;

4 (B) areas that are not in close proximity to
5 an active duty military installation; and

6 (C) areas representing different geographic
7 locations, such as census tracts established by
8 the Bureau of the Census.

9 (d) PROVISION OF SERVICES.—Under the pilot pro-
10 gram, the Secretary shall provide covered services to cov-
11 ered veterans through the complementary and alternative
12 medicine centers established under subsection (c)(1).

13 (e) COVERED VETERANS.—For purposes of the pilot
14 program, a covered veteran is any veteran who has—

15 (1) a mental health condition diagnosed by a
16 clinician of the Department; or

17 (2) a pain condition for which the veteran has
18 received a pain management plan from a clinician of
19 the Department.

20 (f) COVERED SERVICES.—

21 (1) IN GENERAL.—For purposes of the pilot
22 program, covered services are services consisting of
23 complementary or alternative medicine.

1 (2) ADMINISTRATION OF SERVICES.—Covered
2 services shall be administered under the pilot pro-
3 gram as follows:

4 (A) Covered services shall be administered
5 by clinicians who exclusively provide services
6 consisting of complementary or alternative med-
7 icine.

8 (B) Covered services shall be included as
9 part of the Patient Aligned Care Teams initia-
10 tive of the Office of Patient Care Services, Pri-
11 mary Care Program Office.

12 (C) Covered services shall be made avail-
13 able to both—

14 (i) covered veterans with mental
15 health conditions or pain conditions de-
16 scribed in subsection (e) who have received
17 traditional treatments from the Depart-
18 ment for such conditions; and

19 (ii) covered veterans with mental
20 health conditions or pain conditions de-
21 scribed in subsection (e) who have not re-
22 ceived traditional treatments from the De-
23 partment for such conditions.

24 (g) VOLUNTARY PARTICIPATION.—The participation
25 of a veteran in the pilot program shall be at the election

1 of the veteran and in consultation with a clinician of the
2 Department.

3 (h) REPORTS TO CONGRESS.—

4 (1) QUARTERLY REPORTS.—Not later than 90
5 days after the date of the commencement of the pilot
6 program and not less frequently than once every 90
7 days thereafter for the duration of the pilot pro-
8 gram, the Secretary shall submit to the Committee
9 on Veterans' Affairs of the Senate and the Com-
10 mittee on Veterans' Affairs of the House of Rep-
11 resentatives a report on the efforts of the Secretary
12 to carry out the pilot program, including a descrip-
13 tion of the outreach conducted by the Secretary to
14 veterans and community organizations to inform
15 such organizations about the pilot program.

16 (2) FINAL REPORT.—

17 (A) IN GENERAL.—Not later than 180
18 days after the completion of the pilot program,
19 the Secretary shall submit to the Committee on
20 Veterans' Affairs of the Senate and the Com-
21 mittee on Veterans' Affairs of the House of
22 Representatives a report on the pilot program.

23 (B) CONTENTS.—The report submitted
24 under subparagraph (A) shall include the fol-
25 lowing:

1 (i) The findings and conclusions of
2 the Secretary with respect to the pilot pro-
3 gram, including with respect to the utiliza-
4 tion and efficacy of the complementary and
5 alternative medicine centers established
6 under the pilot program.

7 (ii) Such recommendations for the
8 continuation or expansion of the pilot pro-
9 gram as the Secretary considers appro-
10 priate.

11 **SEC. 4. PILOT PROGRAM ON USE OF WELLNESS PROGRAMS**
12 **AS COMPLEMENTARY APPROACH TO MENTAL**
13 **HEALTH CARE FOR VETERANS AND FAMILY**
14 **MEMBERS OF VETERANS.**

15 (a) PILOT PROGRAM REQUIRED.—

16 (1) IN GENERAL.—The Secretary of Veterans
17 Affairs shall carry out a pilot program through the
18 award of grants to public or private nonprofit enti-
19 ties to assess the feasibility and advisability of using
20 wellness programs to complement the provision of
21 mental health care to veterans and family members
22 eligible for counseling under section 1712A(a)(1)(C)
23 of title 38, United States Code.

1 (2) MATTERS TO BE ADDRESSED.—The pilot
2 program shall be carried out so as to assess the fol-
3 lowing:

4 (A) Means of improving coordination be-
5 tween Federal, State, local, and community pro-
6 viders of health care in the provision of mental
7 health care to veterans and family members de-
8 scribed in paragraph (1).

9 (B) Means of enhancing outreach, and co-
10 ordination of outreach, by and among providers
11 of health care referred to in subparagraph (A)
12 on the mental health care services available to
13 veterans and family members described in para-
14 graph (1).

15 (C) Means of using wellness programs of
16 providers of health care referred to in subpara-
17 graph (A) as complements to the provision by
18 the Department of Veterans Affairs of mental
19 health care to veterans and family members de-
20 scribed in paragraph (1).

21 (D) Whether wellness programs described
22 in subparagraph (C) are effective in enhancing
23 the quality of life and well-being of veterans
24 and family members described in paragraph
25 (1).

1 (E) Whether wellness programs described
2 in subparagraph (C) are effective in increasing
3 the adherence of veterans described in para-
4 graph (1) to the primary mental health services
5 provided such veterans by the Department.

6 (F) Whether wellness programs described
7 in subparagraph (C) have an impact on the
8 sense of wellbeing of veterans described in para-
9 graph (1) who receive primary mental health
10 services from the Department.

11 (G) Whether wellness programs described
12 in subparagraph (C) are effective in encour-
13 aging veterans receiving health care from the
14 Department to adopt a more healthy lifestyle.

15 (b) DURATION.—The Secretary shall carry out the
16 pilot program for a period of three years beginning on the
17 date that is 90 days after the date of the enactment of
18 this Act.

19 (c) LOCATIONS.—The Secretary shall carry out the
20 pilot program at facilities of the Department providing
21 mental health care services to veterans and family mem-
22 bers described in subsection (a)(1).

23 (d) GRANT PROPOSALS.—

24 (1) IN GENERAL.—A public or private nonprofit
25 entity seeking the award of a grant under this sec-

1 tion shall submit an application therefor to the Sec-
2 retary in such form and in such manner as the Sec-
3 retary may require.

4 (2) APPLICATION CONTENTS.—Each application
5 submitted under paragraph (1) shall include the fol-
6 lowing:

7 (A) A plan to coordinate activities under
8 the pilot program, to the extent possible, with
9 the Federal, State, and local providers of serv-
10 ices for veterans to enhance the following:

11 (i) Awareness by veterans of benefits
12 and health care services provided by the
13 Department.

14 (ii) Outreach efforts to increase the
15 use by veterans of services provided by the
16 Department.

17 (iii) Educational efforts to inform vet-
18 erans of the benefits of a healthy and ac-
19 tive lifestyle.

20 (B) A statement of understanding from
21 the entity submitting the application that, if se-
22 lected, such entity will be required to report to
23 the Secretary periodically on standardized data
24 and other performance data necessary to evalu-
25 ate individual outcomes and to facilitate evalua-

1 tions among entities participating in the pilot
2 program.

3 (C) Other requirements that the Secretary
4 may prescribe.

5 (e) GRANT USES.—

6 (1) IN GENERAL.—A public or private nonprofit
7 entity awarded a grant under this section shall use
8 the award for purposes prescribed by the Secretary.

9 (2) ELIGIBLE VETERANS AND FAMILY.—In car-
10 rying out the purposes prescribed by the Secretary
11 in paragraph (1), a public or private nonprofit entity
12 awarded a grant under this section shall use the
13 award to furnish services only to individuals speci-
14 fied in section 1712A(a)(1)(C) of title 38, United
15 States Code.

16 (f) REPORTS.—

17 (1) PERIODIC REPORTS.—

18 (A) IN GENERAL.—Not later than 180
19 days after the date of the enactment of this
20 Act, and every 180 days thereafter, the Sec-
21 retary shall submit to Congress a report on the
22 pilot program.

23 (B) REPORT ELEMENTS.—Each report re-
24 quired by subparagraph (A) shall include the
25 following:

1 (i) The findings and conclusions of
2 the Secretary with respect to the pilot pro-
3 gram during the 180-day period preceding
4 the report.

5 (ii) An assessment of the benefits of
6 the pilot program to veterans and their
7 family members during the 180-day period
8 preceding the report.

9 (2) FINAL REPORT.—Not later than 180 days
10 after the end of the pilot program, the Secretary
11 shall submit to Congress a report detailing the rec-
12 ommendations of the Secretary as to the advisability
13 of continuing or expanding the pilot program.

14 (g) WELLNESS DEFINED.—In this section, the term
15 “wellness” shall have the meaning given that term in regu-
16 lations prescribed by the Secretary.

17 **SEC. 5. PILOT PROGRAM ON HEALTH PROMOTION FOR**
18 **OVERWEIGHT AND OBESE VETERANS**
19 **THROUGH SUPPORT OF FITNESS CENTER**
20 **MEMBERSHIP.**

21 (a) PILOT PROGRAM REQUIRED.—Commencing not
22 later than 180 days after the date of the enactment of
23 this Act, the Secretary of Veterans Affairs shall, through
24 the National Center for Preventive Health, carry out a
25 pilot program to assess the feasibility and advisability of

1 promoting health in covered veterans, including achieving
2 a healthy weight and reducing risks of chronic disease,
3 through support for fitness center membership.

4 (b) COVERED VETERANS.—For purposes of this sec-
5 tion, a covered veteran is any veteran who—

6 (1) is determined by a clinician of the Depart-
7 ment of Veterans Affairs to be overweight or obese
8 as of the date of the commencement of the pilot pro-
9 gram; and

10 (2) resides in a location that is more than 15
11 minutes driving distance from a fitness center at a
12 facility of the Department that would otherwise be
13 available to the veteran for at least eight hours per
14 day during five or more days per week.

15 (c) DURATION OF PILOT PROGRAM.—The pilot pro-
16 gram shall be carried out during the two-year period be-
17 ginning on the date of the commencement of the pilot pro-
18 gram.

19 (d) LOCATIONS.—

20 (1) IN GENERAL.—In carrying out the pilot
21 program, the Secretary shall select—

22 (A) not less than five medical centers of
23 the Department at which the Secretary shall
24 cover the full reasonable cost of a fitness center

1 membership for covered veterans within the
2 catchment area of such centers; and

3 (B) not less than five medical centers of
4 the Department at which the Secretary shall
5 cover half the reasonable cost of a fitness center
6 membership for covered veterans within the
7 catchment area of such centers.

8 (2) CONSIDERATIONS.—In selecting locations
9 for the pilot program, the Secretary shall consider
10 the feasibility and advisability of selecting locations
11 in the following areas:

12 (A) Rural areas.

13 (B) Areas that are not in close proximity
14 to an active duty military installation.

15 (C) Areas in different geographic locations.

16 (e) PARTICIPATION.—

17 (1) MAXIMUM NUMBER OF PARTICIPANTS.—

18 The number of covered veterans who may participate
19 in the pilot program at a location selected under
20 subsection (d) may not exceed 100.

21 (2) VOLUNTARY PARTICIPATION.—The partici-
22 pation of a covered veteran in the pilot program
23 shall be at the election of the covered veteran in con-
24 sultation with a clinician of the Department.

25 (f) MEMBERSHIP PAYMENT.—

1 (1) IN GENERAL.—Except as provided in para-
2 graph (2), in carrying out the pilot program, the
3 Secretary shall pay the following:

4 (A) The full reasonable cost of a fitness
5 center membership for covered veterans within
6 the catchment area of centers selected under
7 subsection (b)(1)(A) who are participating in
8 the pilot program.

9 (B) Half the reasonable cost of a fitness
10 center membership for covered veterans within
11 the catchment area of centers selected under
12 subsection (b)(1)(B) who are participating in
13 the pilot program.

14 (2) LIMITATION.—Payment for a fitness center
15 membership of a covered veteran may not exceed
16 \$50 per month of membership.

17 (g) REPORTS.—

18 (1) PERIODIC REPORTS.—Not later than 90
19 days after the date of the commencement of the pilot
20 program and not less frequently than once every 90
21 days thereafter, the Secretary shall submit to the
22 Committee on Veterans' Affairs of the Senate and
23 the Committee on Veterans' Affairs of the House of
24 Representatives a report on activities carried out to

1 implement the pilot program, including outreach ac-
2 tivities to veterans and community organizations.

3 (2) FINAL REPORT.—Not later than 180 days
4 after the date of the completion of the pilot pro-
5 gram, the Secretary shall submit to the Committee
6 on Veterans' Affairs of the Senate and the Com-
7 mittee on Veterans' Affairs of the House of Rep-
8 resentatives a report on the pilot program detail-
9 ing—

10 (A) the findings and conclusions of the
11 Secretary as a result of the pilot program; and

12 (B) recommendations for the continuation
13 or expansion of the pilot program.

14 **SEC. 6. PILOT PROGRAM ON HEALTH PROMOTION FOR**
15 **VETERANS THROUGH ESTABLISHMENT OF**
16 **DEPARTMENT OF VETERANS AFFAIRS FIT-**
17 **NESS FACILITIES.**

18 (a) PILOT PROGRAM REQUIRED.—Commencing not
19 later than 180 days after the date of the enactment of
20 this Act, the Secretary of Veterans Affairs shall carry out
21 a pilot program to assess the feasibility and advisability
22 of promoting health in covered veterans, including achiev-
23 ing a healthy weight, through establishment of Depart-
24 ment of Veterans Affairs fitness facilities.

1 (b) COVERED VETERANS.—For purposes of this sec-
2 tion, a covered veteran is any veteran who is enrolled in
3 the system of annual patient enrollment established and
4 operated by the Secretary under section 1705 of title 38,
5 United States Code.

6 (c) DURATION OF PILOT PROGRAM.—The pilot pro-
7 gram shall be carried out during the three-year period be-
8 ginning on the date of the commencement of the pilot pro-
9 gram.

10 (d) LOCATIONS.—

11 (1) IN GENERAL.—The Secretary shall carry
12 out the pilot program by establishing fitness facili-
13 ties in Department facilities as follows:

14 (A) In not fewer than five Department of
15 Veterans Affairs medical centers selected by the
16 Secretary for purposes of the pilot program.

17 (B) In not fewer than five outpatient clin-
18 ics of the Department selected by the Secretary
19 for purposes of the pilot program.

20 (2) CONSIDERATIONS.—In selecting locations
21 for the pilot program, the Secretary shall consider
22 the feasibility and advisability of selecting locations
23 in the following areas:

24 (A) Rural areas.

1 (B) Areas that are not in close proximity
2 to an active duty military installation.

3 (C) Areas in different geographic locations.

4 (e) LIMITATION ON EXPENSES.—In establishing and
5 supporting a fitness facility in a facility of the Department
6 under the pilot program, the Secretary may expend
7 amounts as follows:

8 (1) For establishment and support of a fitness
9 facility in a Department of Veterans Affairs medical
10 center, not more than \$60,000.

11 (2) For establishment and support of a fitness
12 facility in an outpatient clinic of the Department,
13 not more than \$40,000.

14 (f) RENOVATIONS AND PURCHASES.—Subject to sub-
15 section (e), the Secretary may, in carrying out the pilot
16 program, make such renovations to physical facilities of
17 the Department and purchase such fitness equipment and
18 supplies as the Secretary considers appropriate for pur-
19 poses of the pilot program.

20 (g) PROHIBITION ON ASSESSMENT OF USER FEES.—
21 The Secretary may not assess a fee upon a covered veteran
22 for use of a fitness facility established under the pilot pro-
23 gram.

1 (h) VOLUNTARY PARTICIPATION.—The participation
2 of a covered veteran in the pilot program shall be at the
3 election of the covered veteran.

4 (i) REPORTS.—

5 (1) PERIODIC REPORTS.—Not later than 90
6 days after the date of the commencement of the pilot
7 program and not less frequently than once every 90
8 days thereafter, the Secretary shall submit to the
9 Committee on Veterans' Affairs of the Senate and
10 the Committee on Veterans' Affairs of the House of
11 Representatives a report on activities carried out to
12 implement the pilot program, including outreach ac-
13 tivities to veterans and community organizations.

14 (2) FINAL REPORT.—Not later than 180 days
15 after the date of the completion of the pilot pro-
16 gram, the Secretary shall submit to the Committee
17 on Veterans' Affairs of the Senate and the Com-
18 mittee on Veterans' Affairs of the House of Rep-
19 resentatives a report on the pilot program detail-
20 ing—

21 (A) the findings and conclusions of the
22 Secretary as a result of the pilot program; and

23 (B) recommendations for the continuation
24 or expansion of the pilot program.

1 **SEC. 7. STUDY OF BARRIERS ENCOUNTERED BY VETERANS**
2 **IN RECEIVING COMPLEMENTARY AND ALTER-**
3 **NATIVE MEDICINE FROM DEPARTMENT OF**
4 **VETERANS AFFAIRS.**

5 (a) **STUDY REQUIRED.**—The Secretary of Veterans
6 Affairs shall conduct a comprehensive study of the bar-
7 riers encountered by veterans in receiving complementary
8 and alternative medicine from the Department of Veterans
9 Affairs. In conducting the study, the Secretary shall—

10 (1) survey veterans who seek or receive hospital
11 care or medical services furnished by the Depart-
12 ment, as well as veterans who do not seek or receive
13 such care or services;

14 (2) administer the survey to a representative
15 sample of veterans from each Veterans Integrated
16 Service Network; and

17 (3) ensure that the sample of veterans surveyed
18 is of sufficient size for the study results to be statis-
19 tically significant.

20 (b) **ELEMENTS OF STUDY.**—In conducting the study
21 required by subsection (a), the Secretary shall study the
22 following:

23 (1) The perceived barriers associated with ob-
24 taining complementary and alternative medicine
25 services from the Department.

1 (2) The satisfaction of veterans with com-
2 plementary and alternative medicine in primary care.

3 (3) The degree to which veterans are aware of
4 eligibility requirements for, and the scope of services
5 available under, complementary and alternative med-
6 icine furnished by the Department.

7 (4) The effectiveness of outreach to veterans on
8 the availability of complementary and alternative
9 medicine for veterans.

10 (5) Such other barriers as the Secretary con-
11 siders appropriate.

12 (c) DISCHARGE BY CONTRACT.—The Secretary shall
13 enter into a contract with a qualified independent entity
14 or organization to carry out the study required by this
15 section.

16 (d) MANDATORY REVIEW OF DATA BY CERTAIN DE-
17 PARTMENT DIVISIONS.—

18 (1) IN GENERAL.—The Secretary shall ensure
19 that the head of each division of the Department
20 specified in paragraph (2) reviews the results of the
21 study conducted under this section. The head of
22 each such division shall submit findings with respect
23 to the study to the Under Secretary for Health and
24 to other pertinent program offices within the De-

1 partment with responsibilities relating to health care
2 services for veterans.

3 (2) SPECIFIED DIVISIONS.—The divisions of the
4 Department specified in this paragraph are the fol-
5 lowing:

6 (A) The centers for innovation established
7 under section 7330B of title 38, United States
8 Code, as added by section 2.

9 (B) The Health Services Research and De-
10 velopment Service Scientific Merit Review
11 Board.

12 (e) REPORTS.—

13 (1) REPORT ON IMPLEMENTATION.—Not later
14 than 180 days after the date of the enactment of
15 this Act, the Secretary shall submit to Congress a
16 report on the status of the implementation of this
17 section.

18 (2) REPORT ON STUDY.—

19 (A) IN GENERAL.—Not later than 45 days
20 after the date of the completion of the study,
21 the Secretary shall submit to Congress a report
22 on the study required by subsection (a).

23 (B) CONTENTS.—The report required by
24 subparagraph (A) shall include the following:

1 (i) Recommendations for such admin-
2 istrative and legislative proposals and ac-
3 tions as the Secretary considers appro-
4 priate.

5 (ii) The findings of the head of each
6 division of the Department specified under
7 subsection (d)(2) and of the Under Sec-
8 retary for Health.

9 (f) AUTHORIZATION OF APPROPRIATIONS.—There is
10 authorized to be appropriated to the Secretary \$2,000,000
11 to carry out this section.

12 **SEC. 8. COMPLIMENTARY AND ALTERNATIVE MEDICINE**
13 **DEFINED.**

14 In this Act, the term “complimentary and alternative
15 medicine” shall have the meaning given such term under
16 section 7330B of title 38, United States Code, as added
17 by section 2.

○