



H.R. 840 – Veterans’ Access to Child Care Act (Brownley, D-CA)

FLOOR SCHEDULE: Expected to be considered on February 8, 2019 under a structured [rule](#).

The rule provided that upon passage of the rule, [H.Res. 86](#) would be automatically adopted by the House without separate consideration. H.Res. 86, Providing amounts for the expenses of the Select Committee on the Climate Crisis and the Select Committee on the Modernization of Congress, would allocate funding from FY 2019 Legislative Branch Appropriations for these two Select Committees to be available through March 31, 2019. These Select Committees were created in the Democrats’ House Rules Package for the 116th Congress ([H.Res. 6](#)). The Select Committee on the Climate Crisis would receive \$70,000 and the Select Committee on the Modernization of Congress would receive \$50,000.

TOPLINE SUMMARY: [H.R. 840](#) would expand nationwide and make permanent a pilot program to mandate the Department of Veterans Affairs (VA) provide veterans access to private or public child care assistance during time periods when said veteran must travel to receive certain health care services at VA facilities.

COST:

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

A [cost estimate](#) for H.R. 95 - the Veterans’ Access to Child Care Act, passed by the House in the 115th Congress, which contained the same provisions mandating child care assistance, estimated that implementing those provisions would cost \$96 million over the 2017 – 2022 period. H.R. 840 does not contain the pay-fors from H.R. 95 that would have reduced direct spending by \$635 million over the 2017 - 2027 period.

CONSERVATIVE CONCERNS:

Some conservatives may be concerned that the bill would cost nearly \$200 million over the next ten years to implement, and the bill does not contain any offsets. A previous version of this bill, [H.R. 95](#), passed by the House in 115th Congress, included pay-fors that were stripped out of H.R. 840.

Some conservatives may be concerned that the cost of this program would stress available VA resources that provide other important services to our nation’s veterans.

- **Expand the Size and Scope of the Federal Government?** Yes, the bill expands and makes permanent a pilot program providing child care assistance to certain eligible veterans.

- **Encroach into State or Local Authority?** No.
- **Delegate Any Legislative Authority to the Executive Branch?** Some conservatives may be concerned that the bill gives substantial discretion to the Secretary to define the terms and scope of the new benefit.
- **Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits?** No.

DETAILED SUMMARY AND ANALYSIS:

Congress first authorized the VA Child Care Pilot Program through the Caregivers and Veterans Omnibus Health Services Act of 2010, to provide free child care assistance during time periods in which eligible veterans are seeking certain care at a small number of VA sites across the United States, including in Takoma, Washington; Buffalo, New York; and Northport, New York. VA's authority to carry out the pilot program was set to expire on December 31, 2017, but the authorization was extended through Fiscal Year 2020 under [S. 3479](#) which signed into law on September 29, 2018 during the 115th Congress.

H.R. 840 would expand these authorities nationwide and make the pilot program permanent. Specifically, it would require the Department of Veterans Affairs (VA) to provide child care assistance during any time period when a veteran, who is the primary caretaker of at least one child, must travel to and from a VA facility to receive regular mental health services, intensive mental health care services, or any other intensive health care services for which the Secretary determines that access to child care assistance would improve veterans' access to health care.

Such child care assistance may take the form of (1) a stipend for the full cost of child care offered by a licensed child care center, which must be modeled after the [VA's Child Care Subsidy Program](#) to the extent practicable; (2) direct provision of child care at an on-site VA facility; (3) direct payment to a private child care agency; (4) collaboration with a facility or program of another federal department or agency; or (5) any other form of assistance the Secretary considers appropriate. Some conservatives may be concerned that the bill gives substantial discretion to the Secretary to define the terms and scope of the new benefit.

AMENDMENTS:

1. [Brindisi](#) (D-NY) – This amendment would clarify that veterans who receive covered health care services at VA community-based outpatient clinics are eligible for child care assistance.
2. [Radewagen](#) (R-AS) – This amendment would clarify the conditions on which a veteran may receive childcare to be made available only while such veterans “actively participates” in their health care services. This means engaging in transit to and from their appointments, attending appointments, and such other activities as the Secretary determines appropriate.
3. [Rose](#) (D-NY) – This amendment would include substance or drug abuse counseling in the definition for covered health care services.
4. [Bergman](#) (R-MI) – This amendment would clarify that the Secretary of Veterans Affairs may not use funds made available for child case assistance to construct any new child care facility.
5. [Lee](#) (D-NV) – This amendment would expand the bill's definition of “facility of the Department” to include [Vet Centers](#) as defined in [38 U.S.C. 1712A](#).

6. [Barr](#) (R-KY) – This amendment would require a study from the VA on the effects of the child care assistance program on access to covered health care services, as well as on compliance with treatment protocols.
7. [Cisneros](#) (D-CA) – This amendment would require a study from the VA to determine how the VA could provide childcare assistance for veterans who receive covered health care services from non-Department facilities.
8. [Cisneros](#) (D-CA) – This amendment would include intensive health care services related to physical therapy for a service-connected disability within the definition of “covered health care services.”
9. [Davis](#) (R-IL), – This amendment allow more than one person to be considered the primary caretaker.
10. [Sablan](#) (D-MP) – This amendment would clarify that veterans who receive telemental health services furnished by the Department as opposed to in-person mental health services would be eligible for child care assistance authorized under the bill.
11. [Cloud](#) (R-TX) – This amendment would require the VA to conduct an annual report to be submitted to Congress on: 1) the average amount of time required by the Department to provide a payment for child care assistance; 2) the average cost of child care assistance; 3) the extent to which the Department has a backlog of unprocessed claims for child care assistance; 4) the number of Department employees who worked on the processing claims for child care assistance; 5) the average amount of time required by such an employee to process such a claim; 6) the number of improper or duplicative payments of child care assistance made; and 7) the recommendations of the Secretary for improving the processing of claims for child care assistance.
12. [Allred](#) (D-TX) – This amendment would require the Secretary to provide public notification on VA.gov to ensure veterans are aware of the expanded, cost-free child care services within this Act, and to perform outreach to inform eligible veterans.
13. [Moore](#) (D-WI) – This amendment would require annual reports on participation in this program and biennial reports on any other child care related barriers that remain for veterans seeking care at VA medical facilities.
14. [Kuster](#) (D-NH) – This amendment would require the Secretary to establish criteria for furnishing child care assistance to eligible veterans designed to ensure reasonable access to such assistance for veterans that experience unusual or excessive access burdens, such as excessive driving distance, geographic challenges, and other environmental factors. It would also correct a technical error to the Rules Committee print.
15. [Delgado](#) (D-NY) – This amendment would add extended day programs to the child care services that can receive stipends. According to the amendment sponsor, “extended day programs are before and after school programs held at educational institutions for students whose parents have obligations prior to school hours and/or obligations that extend beyond school hours.”

16. [Delgado](#) (D-NY) – This amendment would include in the definition of covered health care services, Emergency Mental Health Care Services.
17. [Golden](#) (D-ME) – This amendment would expand the scope of services under which a veteran would qualify for free child care to include health care services provided as part of readjustment counseling.
18. [Golden](#) (D-ME) – This amendment would direct the Secretary of the VA to submit a report to Congress regarding the accessibility and effectiveness of the program for eligible individuals who reside in rural and highly rural areas.
19. [Sherrill](#) (D-NJ) – This amendment would state that child care centers may not provide child care under the bill if they employ an individual who has been convicted of a sex crime, an offense involving a child victim, a violent crime, a drug felony, or other offense the Secretary deems appropriate. It would also state that nothing in the amendment would lower more restrictive existing federal, state, or local standards of hiring and screening at child care centers within this Act.
20. [Sherrill](#) (D-NJ) – This amendment would add Military Sexual Trauma counseling and care services in the definition of ‘covered health care services.’
21. [Slotkin](#) (D-MI) – This amendment would provide authority for the Secretary of Veterans Affairs to consult with the Secretary of Defense in implementing the bill.

COMMITTEE ACTION:

H.R. 840 was introduced on January 29, 2019 and was referred to the House Committee on Veterans’ Affairs.

During the 115th Congress similar legislation, [H.R. 95](#), passed the House by voice vote.

ADMINISTRATION POSITION:

A Statement of Administration Policy is not available.

CONSTITUTIONAL AUTHORITY:

According to the sponsor: “Congress has the power to enact this legislation pursuant to the following: Article I, Section 8.” No specific enumerating clause was identified.

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