

113TH CONGRESS  
1ST SESSION

# H. R. 3516

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

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## IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 15, 2013

Mr. RYAN of Ohio (for himself, Mr. NUGENT, and Mr. RUIZ) introduced the following bill; which was referred to the Committee on Veterans' Affairs, and in addition to the Committee on Armed Services, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To improve health care furnished by the Department of Veterans Affairs and the Department of Defense 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 and Armed  
5 Forces Health Promotion Act of 2013”.

1 **SEC. 2. DEPARTMENT OF VETERANS AFFAIRS AND DEPART-**  
2 **MENT OF DEFENSE EXPANSION OF RE-**  
3 **SEARCH AND EDUCATION INTO INTEGRA-**  
4 **TION OF COMPLEMENTARY AND ALTER-**  
5 **NATIVE MEDICINE INTERVENTIONS.**

6 (a) DEVELOPMENT AND IMPLEMENTATION OF EX-  
7 PANSION PLAN.—Not later than 270 days after the date  
8 of the enactment of this Act, the Secretary of Veterans  
9 Affairs and the Secretary of Defense shall jointly develop  
10 and implement a plan to expand materially and substan-  
11 tially the scope of research and education on, and delivery  
12 of holistic care that includes, the integration of appro-  
13 priate complementary and alternative medicine interven-  
14 tions in the delivery of health care to veterans under chap-  
15 ter 17 of title 38, United States Code, and members of  
16 the Armed Forces at military medical treatment facilities  
17 under title 10, United States Code. Such plan shall pro-  
18 vide for—

19 (1) the conduct of research on—

20 (A) integrating proven or promising com-  
21plementary and alternative medicine interven-  
22tions into the delivery of health care to veterans  
23and members of the Armed Forces; and

24 (B) models and systems for providing ho-  
25listic care that includes complementary and al-  
26ternative medicine interventions;

1           (2) education and training for health care pro-  
2           fessionals on—

3                   (A) proven and promising complementary  
4                   and alternative medicine interventions;

5                   (B) appropriate uses of such interventions  
6                   therapeutic options; and

7                   (C) holistic integration of such interven-  
8                   tions into the delivery of health care to vet-  
9                   erans;

10           (3) carrying out the research, education, and  
11           clinical activities described in paragraphs (1) and (2)  
12           at centers of innovation at geographically dispersed  
13           medical centers operated jointly by the Secretary of  
14           Veterans Affairs and the Secretary of Defense; and

15           (4) the development of joint metrics and out-  
16           come measures to evaluate the provision (and cost  
17           effectiveness) of complementary and alternative med-  
18           icine interventions in the care of patients of both the  
19           Department of Veterans Affairs and the Department  
20           of Defense.

21           (b) CONSULTATION WITH EXPERTS.—

22                   (1) CONSULTATION REQUIRED.—For the pur-  
23                   poses described in paragraph (2), the Secretary of  
24                   Veterans Affairs and the Secretary of Defense shall  
25                   consult with the following:

1 (A) The Director of the Center on Com-  
2 plementary and Alternative Medicine at the Na-  
3 tional Institute of Health.

4 (B) The Director of the Food and Drug  
5 Administration.

6 (C) Academic centers, private research in-  
7 stitutes, and individual researchers that have  
8 extensive experience in studying complementary  
9 and alternative medicine and the integration of  
10 such interventions in the delivery of conven-  
11 tional medical care.

12 (D) Nationally recognized providers of  
13 complementary and alternative medicine.

14 (E) Such other sources of expertise as the  
15 Secretary deems appropriate.

16 (2) PURPOSE OF CONSULTATION.—The Sec-  
17 retary of Veterans Affairs and the Secretary of De-  
18 fense shall undertake the consultation described in  
19 paragraph (1)—

20 (A) in developing the plan required under  
21 subsection (a);

22 (B) to identify specific proven or promising  
23 complementary and alternative medicine inter-  
24 ventions that, on the basis of research findings  
25 or promising clinical interventions, are appro-

1           appropriate to include as covered services under sec-  
2           tion 3; and

3                   (C) to identify barriers to the effective pro-  
4           vision and integration of complementary and al-  
5           ternative medicine interventions (and means of  
6           circumventing such barriers).

7           (c) FUNDING.—None of the amounts authorized to  
8           be appropriated to carry out this section may be obligated  
9           or expended except for a joint effort of the Department  
10          of Defense and the Department of Veterans Affairs.

11 **SEC. 3. MEDICAL TREATMENT AND RESEARCH FACILITIES**  
12                   **JOINTLY OPERATED BY THE DEPARTMENT**  
13                   **OF VETERANS AFFAIRS AND THE DEPART-**  
14                   **MENT OF DEFENSE.**

15          (a) PILOT PROGRAM REQUIRED.—Commencing not  
16          later than 270 days after the date of the enactment of  
17          this Act, the Secretary of Veterans Affairs and the Sec-  
18          retary of Defense shall jointly develop and implement a  
19          plan to establish jointly-operated medical treatment and  
20          research facilities. Such facilities shall—

21                   (1) be staffed by employees of the Department  
22                  of Veterans Affairs and the Department of Defense  
23                  and members of the Armed Forces;

24                   (2) be operated by dividing the operation and  
25                  maintenance expenses between both the Department

1 of Veterans Affairs and the Department of Defense  
2 by a ratio determined in a memorandum of under-  
3 standing between the Secretaries; and

4 (3) bill to each Department the cost of certain  
5 specialty medical services, including radiology, lab-  
6 oratory, and surgery, as such services are used.

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

10 (c) LOCATIONS.—

11 (1) IN GENERAL.—The Secretaries shall carry  
12 out the pilot program by establishing not fewer than  
13 5 joint medical treatment and research facilities.

14 (2) CONSIDERATIONS.—In selecting locations  
15 for the pilot program, the Secretaries shall consider  
16 the feasibility and advisability of selecting loca-  
17 tions—

18 (A) in areas with a high concentration of  
19 veterans and members of the Armed Forces;

20 (B) that present a reasonable probability  
21 of cost savings to the taxpayer by consolidation  
22 of services and facilities currently administered  
23 separately as determined jointly by the Secre-  
24 taries; and

1 (C) where collaboration of research and  
2 treatment will be most beneficial to the common  
3 needs of the patients under the care of both De-  
4 partments, as determined jointly by the Secre-  
5 taries.

6 (d) FUNDING.—None of the amounts authorized to  
7 be appropriated to carry out this section may be obligated  
8 or expended except for a joint effort of the Department  
9 of Defense and the Department of Veterans Affairs.

10 **SEC. 4. PILOT PROGRAM ON ESTABLISHMENT OF COM-**  
11 **PLEMENTARY AND ALTERNATIVE MEDICINE**  
12 **CENTERS WITHIN DEPARTMENT OF VET-**  
13 **ERANS AFFAIRS MEDICAL CENTERS.**

14 (a) PILOT PROGRAM REQUIRED.—Commencing not  
15 later than 180 days after the date of the enactment of  
16 this Act, the Secretary of Veterans Affairs shall carry out,  
17 through the Office of Patient Centered Care and Cultural  
18 Transformation of the Department of Veterans Affairs, a  
19 pilot program to assess the feasibility and advisability of  
20 establishing complementary and alternative medicine cen-  
21 ters within Department of Veterans Affairs medical cen-  
22 ters to promote the use and integration of complementary  
23 and alternative medicine services for mental health diag-  
24 noses and pain management.

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

4 (c) LOCATIONS.—

5 (1) IN GENERAL.—The Secretary shall carry  
6 out the pilot program by establishing not fewer than  
7 10 complementary and alternative medicine centers  
8 in 10 separate Department medical centers as fol-  
9 lows:

10 (A) Three Department medical centers  
11 designated by the Secretary as polytrauma cen-  
12 ters.

13 (B) Seven Department medical centers not  
14 designated by Secretary as polytrauma centers.

15 (2) CONSIDERATIONS.—In selecting locations  
16 for the pilot program, the Secretary shall consider  
17 the feasibility and advisability of selecting locations  
18 in—

19 (A) rural areas;

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

22 (C) areas representing different geographic  
23 locations, such as census tracts established by  
24 the Bureau of the Census.

1 (d) PROVISION OF SERVICES.—Under the pilot pro-  
2 gram, the Secretary shall provide covered services to cov-  
3 ered patients through the complementary and alternative  
4 medicine centers established under subsection (c)(1).

5 (e) COVERED PATIENTS.—For purposes of the pilot  
6 program, a covered patient is any patient who is a veteran  
7 or member of the Armed Forces who has—

8 (1) a mental health condition diagnosed by a  
9 clinician of the Department of Veterans Affairs, in  
10 the case of a patient who is a veteran, or a clinician  
11 of the Department of Defense, in the case of a pa-  
12 tient who is a member of the Armed Forces; or

13 (2) a pain condition for which the veteran has  
14 received a pain management plan from a clinician of  
15 the Department of Veterans Affairs, in the case of  
16 a patient who is a veteran, or a clinician of the De-  
17 partment of Defense, in the case of a patient who  
18 is a member of the Armed Forces.

19 (f) COVERED SERVICES.—

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

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

1 (A) Covered services shall be administered  
2 by clinicians who exclusively provide services  
3 consisting of complementary or alternative med-  
4 icine.

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

9 (C) Covered services shall be made avail-  
10 able to both—

11 (i) covered patients with mental  
12 health conditions or pain conditions de-  
13 scribed in subsection (e) who have received  
14 traditional treatments from the Depart-  
15 ment for such conditions; and

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

21 (g) VOLUNTARY PARTICIPATION.—The participation  
22 of a patient in the pilot program shall be at the election  
23 of the patient and in consultation with a clinician of the  
24 Department of Veterans Affairs, in the case of a patient  
25 who is a veteran, and in consultation with a clinician of

1 the Department of Defense, in the case of a patient who  
2 is member of the Armed Forces.

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 eligible for counseling under section 1712A(a)(1)(C)  
2 of title 38, United States Code.

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

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

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

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

23 (D) Whether wellness programs described  
24 in subparagraph (C) are effective in enhancing  
25 the quality of life and well-being of veterans

1 and family members described in paragraph  
2 (1).

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

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

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

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

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

25 (d) GRANT PROPOSALS.—

1           (1) IN GENERAL.—A public or private nonprofit  
2           entity seeking the award of a grant under this sec-  
3           tion shall submit an application therefor to the Sec-  
4           retary in such form and in such manner as the Sec-  
5           retary may require.

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

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

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

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

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

22                   (B) A statement of understanding from  
23                  the entity submitting the application that, if se-  
24                  lected, such entity will be required to report to  
25                  the Secretary periodically on standardized data

1 and other performance data necessary to evalu-  
2 ate individual outcomes and to facilitate evalua-  
3 tions among entities participating in the pilot  
4 program.

5 (C) Other requirements that the Secretary  
6 may prescribe.

7 (e) GRANT USES.—

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

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

18 (f) REPORTS.—

19 (1) PERIODIC REPORTS.—

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

1 (B) REPORT ELEMENTS.—Each report re-  
2 quired by subparagraph (A) shall include the  
3 following:

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

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

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

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

20 (h) FUNDING.—There is authorized to be appro-  
21 priated to the Secretary such sums as may be necessary  
22 to carry out this section.

1 **SEC. 6. PILOT PROGRAM ON FITNESS AND NUTRITION IM-**  
2 **PROVEMENT FOR OVERWEIGHT AND OBESE**  
3 **VETERANS.**

4 (a) **PILOT PROGRAM REQUIRED.**—Commencing not  
5 later than 180 days after the date of the enactment of  
6 this Act, the Secretary of Veterans Affairs shall, through  
7 the National Center for Preventive Health, carry out a  
8 pilot program to assess the feasibility and advisability of  
9 promoting health in covered veterans, including achieving  
10 a healthy weight and reducing risks of chronic disease,  
11 through support for fitness center membership.

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

14 (1) is determined by a clinician of the Depart-  
15 ment of Veterans Affairs to be overweight or obese  
16 as of the date of the commencement of the pilot pro-  
17 gram; and

18 (2) resides in a location that is more than 15  
19 miles from a fitness center at a facility of the De-  
20 partment that would otherwise be available to the  
21 veteran for at least eight hours per day during five  
22 or more days per week.

23 (c) **DURATION OF PILOT PROGRAM.**—The pilot pro-  
24 gram shall be carried out during the three-year period be-  
25 ginning on the date of the commencement of the pilot pro-  
26 gram.

1 (d) LOCATIONS.—

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

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

9 (B) not less than five medical centers of  
10 the Department at which the Secretary shall  
11 cover half the reasonable cost of a fitness center  
12 membership for covered veterans within the  
13 catchment area of such centers; and

14 (C) not less than five medical centers of  
15 the Department at which the Secretary shall  
16 provide comprehensive medical nutrition ther-  
17 apy for covered veterans.

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

22 (A) Areas that are not in close proximity  
23 to an active duty military installation.

24 (B) Areas in different geographic locations.

25 (e) PARTICIPATION.—

1 (1) MAXIMUM NUMBER OF PARTICIPANTS.—

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

5 (2) VOLUNTARY PARTICIPATION.—The partici-  
6 pation of a covered veteran in the pilot program  
7 shall be at the election of the covered veteran in con-  
8 sultation with a clinician of the Department.

9 (f) FITNESS CENTER MEMBERSHIP PAYMENT.—

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

13 (A) The full reasonable cost of a fitness  
14 center membership for covered veterans within  
15 the catchment area of centers selected under  
16 subsection (b)(1)(A) who are participating in  
17 the pilot program.

18 (B) Half the reasonable cost of a fitness  
19 center membership for covered veterans within  
20 the catchment area of centers selected under  
21 subsection (b)(1)(B) who are participating in  
22 the pilot program.

23 (2) LIMITATION.—Payment for a fitness center  
24 membership of a covered veteran may not exceed  
25 \$50 per month of membership.

1 (g) REPORTS.—

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

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

18 (A) the findings and conclusions of the  
19 Secretary as a result of the pilot program; and

20 (B) recommendations for the continuation  
21 or expansion of the pilot program.

22 (h) FUNDING.—There is authorized to be appro-  
23 priated to the Secretary such sums as may be necessary  
24 to carry out this section.

1 **SEC. 7. PILOT PROGRAM ON TRANSFORMATION OF VET-**  
2 **ERANS SERVICES ORGANIZATIONS FACILI-**  
3 **TIES INTO VETERAN HEALTH AND WELLNESS**  
4 **CENTERS.**

5 (a) PILOT PROGRAM REQUIRED.—

6 (1) IN GENERAL.—The Secretary of Veterans  
7 Affairs shall carry out a pilot program under which  
8 the Secretary makes grants to nonprofit veterans  
9 services organizations (hereinafter in this section re-  
10 ferred to as “VSOs”) recognized by the Secretary in  
11 accordance with section 5902 of title 38, United  
12 States Code, to upgrade, through construction and  
13 repair, VSO community facilities into health and  
14 wellness centers.

15 (2) USE OF FUNDS.—The recipient of a grant  
16 under this section shall use the grant to carry out  
17 the repair of a facility owned by the recipient or to  
18 construct a facility on property owned by the recipi-  
19 ent. Such funds may not be used to purchase real  
20 estate or to carry out repair of facilities leased by  
21 the recipient or to construct facilities on property  
22 leased by the recipient. Any facility repaired or con-  
23 structed using grant funds shall be used to provide  
24 alternative medical care, or wellness programs, to  
25 veterans and family members as such term is de-

1        fined in section 1712A(h)(3) of title 38, United  
2        States Code.

3            (3) FACILITY OPERATION.—As a condition of  
4        the receipt of a grant under this section, a VSO  
5        shall agree to carry out the operation and mainte-  
6        nance of the facility that is repaired or constructed  
7        using grant funds for the three-year period begin-  
8        ning on the date of the completion of the repair or  
9        construction.

10          (b) DURATION OF PILOT PROGRAM.—The pilot pro-  
11        gram shall be carried out during the two-year period be-  
12        ginning on the date of the commencement of the pilot pro-  
13        gram.

14          (c) LOCATIONS.—In selecting the recipients of grants  
15        under this section, the Secretary shall ensure that the  
16        grant recipients use grant funds to construct or repair fa-  
17        cilities located in at least ten different geographic loca-  
18        tions. The Secretary shall give priority to locations in eco-  
19        nomically depressed areas that are not in close proximity  
20        to Department of Veterans Affairs medical centers.

21          (d) ELIGIBILITY.—To be eligible to receive a grant  
22        under this section, a VSO shall submit to the Secretary  
23        an application in such form and in such manner as the  
24        Secretary may require.

25          (e) REPORTS.—

## 1 (1) PERIODIC REPORTS.—

2 (A) IN GENERAL.—Not later than 180  
3 days after the date of the enactment of this  
4 Act, and every 180 days thereafter for the du-  
5 ration of the pilot program, the Secretary shall  
6 submit to Congress a report on the pilot pro-  
7 gram.

8 (B) REPORT ELEMENTS.—Each report re-  
9 quired by subparagraph (A) shall include the  
10 following:

11 (i) The findings and conclusions of  
12 the Secretary with respect to the pilot pro-  
13 gram during the 180-day period covered by  
14 the report.

15 (ii) An assessment of the benefits of  
16 the pilot program to veterans and either  
17 family members during the 180-day period  
18 covered by the report.

19 (2) FINAL REPORT.—Not later than 180 days  
20 after the conclusion of the pilot program, the Sec-  
21 retary shall submit to Congress a report detailing  
22 the recommendations of the Secretary as to the ad-  
23 visability of continuing or expanding the pilot pro-  
24 gram.

1 (f) FUNDING.—There is authorized to be appro-  
2 priated to the Secretary such sums as may be necessary  
3 to carry out this section.

4 **SEC. 8. DEFINITION OF COMPLEMENTARY AND ALTER-**  
5 **NATIVE MEDICINE.**

6 In this Act, the term “complementary and alternative  
7 medicine” shall—

8 (1) have the meaning given that term in regula-  
9 tions the Secretary shall prescribe for purposes of  
10 this Act, which shall, to the degree practicable, be  
11 consistent with the meaning given such term by the  
12 Secretary of Health and Human Services; and

13 (2) include integrative health care, adjunctive  
14 health care, and functional medicine.

○