The Take Care of America's Veterans Act

The *Take Care of America's Veterans Act* would expand access to Department of Veterans Affairs (VA) health care, benefits and support for veterans, servicemembers, survivors, caregivers and military families. This comprehensive bill would be fully paid for by using elements of pending updates, that were proposed in 2022, that would update VA's Schedule for Rating Disabilities for sleep apnea and tinnitus to include updated medical terminology, incorporate medical advances and provide disability compensation to veterans with service-connected disabilities using modernized criteria consistent with current medical best practices. VA testified in January 2026 that these rules will be finalized by September 30, 2026. Rather than letting these changes go into effect later this year, this legislation codifies these updates so that a portion of the savings will be redirected and used to cover the costs of delivering meaningful improvements to America's military and veteran communities while maintaining fiscal responsibility to America's taxpayers.

This legislation includes comprehensive bipartisan, bicameral bills. Notably, it includes the *Major Richard Star Act,* the *Veterans ACCESS Act* and the *Love Lives On Act*, along with several other priorities of the Senate Veterans' Affairs Committee.

Legislation included in the *Taking Care of America's Veterans Act* is based on:

1. **S. 275/H.R. 740 – the Veterans ACCESS Act (Sen. Moran/Rep. Bost): 13 Senate Cosponsors & 77 House Cosponsors**
   - Would expand access to and oversight of mental health and addiction treatment programs for at-risk veterans, strengthen and protect VA's community care programs, and improve VA's workforce and infrastructure authorities.

2. **S. 1032/H.R. 2102 – the Major Richard Star Act (Sen. Blumenthal/Rep. Bilirakis): 79 Senate Cosponsors & 317 House Cosponsors**
   - Would allow medically retired veterans with combat-related disabilities to receive military retirement pay concurrently with VA disability compensation.

3. **S. 410 – the Love Lives On Act (Sen. Moran/Rep. Hudson): 58 Senate Cosponsors & 168 House Cosponsors**
   - Would allow surviving spouses to retain certain benefits from VA and the Department of Defense (DOD) if they remarry before age 55. Those benefits include Dependency and Indemnity Compensation (DIC) benefits from VA and Survivor Benefit Plan (SBP) and certain Tricare benefits from DOD.

4. **S. 506/H.R. 668 – the Coordinating Care for Senior Veterans and Wounded Warriors Act (Sen. Moran/Rep. Ciscomani): 1 Senate Cosponsor & 6 House Cosponsors**
   - Would establish a pilot program to help coordinate, navigate and manage care for veterans enrolled in both Medicare and the VA health care system.

5. **S. 1139/H.R. 1969 – the HOPE for the Brave Act (Sen. Moran/Rep. Miller-Meeks):**
   - Would reauthorize and improve the Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program through Fiscal Year 2029.

6. **S.4400 – the Optimizing the VA Workforce for Veterans Act of 2025 (Sen. Moran): 1 Senate Cosponsor**
   - Would require VA to develop, maintain and provide Congress with a strategic plan that aligns staffing levels with current and projected demand for VA services; to notify Congress and impacted employees at least 60 days before conducting a reduction in force; and require VA to provide additional details to Congress about ongoing organizational restructuring of the department.

7. **S. 6988 – the VITAL Act of 2025 (Sen. Moran): 3 Senate Cosponsors**
   - Would streamline VA construction and infrastructure management processes by improving physical infrastructure of facilities, strengthening capital assets and upgrading management operations.

8. **S. 3466 – the HONOR Act (Sen. Blumenthal): 12 Senate Cosponsors**
   - Would make a number of changes to VA's direct and community health care programs.

9. **S. 800/H.R. 8115 – the Precision Brain Health Research Act (Sen. Moran/Rep. Miller-Meeks): 3 Senate Cosponsors**
   - Would require VA to research and study the effects of repetitive low level blast exposures, where benchmarks must be reported to Congress, to develop further legislation for veterans who suffer from the effects of these repetitive blast exposures.

10. **S. 879/H.R. 2148 – the Veteran Caregiver Reeducation, Reemployment, and Retirement Act (Sen. Moran/Rep. Morelle): 3 Senate Cosponsors & 8 House Cosponsors**
    - Would expand support for former family caregivers participating in VA's Program of Comprehensive Assistance for Family Caregivers by extending health care coverage, providing bereavement and workforce transition assistance, and improving retirement planning and financial stability resources.

11. **S. 3988/H.R. 6835 – the Veterans Spinal Trauma Access to New Devices (STAND) Act (Sen. Moran/Rep. Bergman): 16 House Cosponsors**
    - Would require annual preventive health evaluations for veterans with spinal cord injuries or disorders.

12. **S. 3647 – the Disabled Veterans Dignity Act (Sen. Moran):**
    - Would codify VA's bowel and bladder care program for eligible veterans with spinal cord injuries or disorders.

13. **S. 1318/H.R. 2701 – the Fallen Servicemembers Religious Heritage Restoration Act (Sen. Moran/Rep. Wasserman Schultz): 20 Senate Cosponsors**
    - Would allow the American Battle Monuments Commission (ABMC) to identify American–Jewish servicemembers buried overseas under grave markers that misrepresent their religious identities and contact their surviving family members to correct those errors.

14. **S. 3119/H.R. 3726 – the Fisher House Availability Act (Sen. Moran/Rep. Miller-Meeks): 1 Senate Cosponsor & 3 House Cosponsors**

- Would expand eligibility for temporary lodging at VA Fisher Houses to members of the armed services, and their family members, who are receiving medical care or treatment at a VA or non-VA facility, regardless of duty status.

15. **S. 1533/H.R. 3951 – the Veterans' Disability Exam Modernization and License Portability Act (Sen. Moran/Rep. Cicomani): 1 Senate Cosponsor**
    - Would expand and extend VA's program to allow contract physicians to conduct veterans' disability examinations to improve access to compensation and pension exams and improve efficiency in the claims process.

16. **S. 3436/H.R. 6652 – the Caring for Veterans and Strengthening National Security Act (Sen. Moran/Del. King-Hinds): 9 Senate Cosponsors**
    - Would require VA to expand telehealth, mail-order pharmacy and travel reimbursement services to veterans living in the Freely Associated States, including the Marshall Islands, Micronesia, and Palau.

17. **H.R. 3482 – the Veterans Community Care Scheduling Improvement Act (Sen. Moran/Rep Barrett):**
    - Would require VA to implement a centralized electronic IT system to streamline, view and sort healthcare appointments for veterans seeing community providers.

18. **H.R. 6047 – the Sharri Briley and Eric Edmundson Veterans Benefits Expansion Act (Rep. Barrett): 14 House Cosponsors**
    - Would increase DIC benefits for surviving spouses.

19. **S. 749/H.R. 1658 – the Justice for ALS Veterans Act (Sen. Murkowski/Rep. Fitzpatrick): 12 Senate Cosponsors & 27 House Cosponsors**
    - Would extend certain DIC benefits to surviving spouses of veterans who have passed away from amyotrophic lateral sclerosis (ALS), regardless of how long the veteran had ALS as a service-connection before death. Currently, to receive this additional benefit, the veteran must be receiving benefits at a totally disabling rating for at least 8 continuous years, despite the average life expectancy of an individual after being diagnosed with ALS being just two to five years.

20. **S. 3993 – the Reducing Arbitrary Barriers to Apprenticeship Act of 2026 (Sen. Sheehy): 5 Senate Cosponsors**
    - Would modernize GI Bill apprenticeship and on-the-job training benefits by increasing housing support to the 100% level of the applicable monthly housing allowance and removing administrative barriers that disadvantage veterans pursuing skilled trades rather than traditional college degrees.

21. **S. 787 – the VetPAC Act (Sen. Cassidy): 2 Senate Cosponsors**
    - Would establish an independent commission of medical experts – modeled after MACPAC and MedPAC – to report to Congress and recommend how to improve the VA healthcare system.

22. **S. 3303 – the LINC VA Act (Sen. Sullivan): 1 Senate Cosponsor**
    - Would establish a pilot program to improve connection to, and coordination of, community-based services for veterans and collect information on social determinants of health to better address veterans' needs.

23. **S. 831 – the REP VA Act (Sen. Sullivan): 1 Senate Cosponsor**

- Would require VA to use a single recognizable phone number when calling veterans and establish call centers in every U.S. time zone to improve communication and appointment scheduling.

24. **S. 827 – the Supporting Rural Veterans Access to Healthcare Services Act (Sen. Cramer): 4 Senate Cosponsors**

    Would expand entities eligible to receive highly rural transportation grants from VA to include Indian tribes, Tribal organizations, Native Hawaiian organizations and county Veterans Service Organizations (VSOs) and allow for additional grant funding for certain grantees.

25. **S. 1868 – the Critical Access to Veterans Care Act (Sen. Cramer): 2 Senate Cosponsors**
    - Would expand veterans' access to care in rural states by expanding VA's partnerships with critical access hospitals.

26. **S. 2264 – the AVERT Crisis Act (Sen. Blumenthal): 2 Senate Cosponsors**
    - Would improve VA's emergency response and crisis intervention systems for veterans by improving coordination, expanding crisis resources, and strengthening rapid-response mental health and suicide prevention services.

27. **S. 610 – the Ensuring VetSuccess on Campus Act (Sen. Blumenthal): 1 Senate Consponsor**
    - Would require VA to expand the VetSuccess on Campus program to guarantee that at least one dedicated vocational rehabilitation counselor is placed in every state and U.S. territory to help transitioning service members and veterans achieve their educational and career goals.

28. **S. 1320 – the Servicewomen and Veterans Menopause Research Act (Sen. Murray): 10 Senate Cosponsors**
    - Would require VA to evaluate existing data, ongoing research and treatment gaps regarding perimenopause, menopause and mid-life health among current and former female servicemembers, and to develop a strategic plan for improving care and knowledge in these areas.

29. **S. 607 – the Improving Veteran Access to Care Act (Sen. Hassan): 3 Senate Cosponsors**
    - Would require VA to establish an integrated project team and implement a comprehensive plan to modernize health care appointment scheduling, including by expanding online self-scheduling tools, improving telephone support and coordinating with the VA's Electronic Health Record Modernization Program.

30. **S. 3033 – the Improving Access to Care for Rural Veterans Act (Sen. Duckworth): 1 Senate Cosponsor**
    - Would establish a pilot program to improve the partnership between VA medical facilities and hospitals and clinics in rural areas.

31. **S. 3758 – the End Veterans Overdose Act (Sen. Shaheen): 1 Senate Cosponsor**

    Would direct VA to establish a pilot program to provide opioid overdose rescue medications (such as naloxone) to veterans at no charge, with priority given to high-risk areas.

32. **S. 1441/H.R. 2605 – the Service Dogs Assisting Veterans Act (Sen. Tillis/Rep Luttrell): 26 Senate Cosponsors & 76 House Cosponsors**
    - Would create a VA pilot program to award competitive grants to help nonprofit organizations provide trained service dogs to eligible veterans with disabilities, including post-traumatic stress disorder (PTSD), traumatic brain injuries and mobility impairments.

33. **S. 4137/H.R. 2283 – the RECOVER Act (Sen. Blackburn/Rep. Bost): 4 House Cosponsors**
    - Would create a pilot program to help nonprofit outpatient mental health facilities provide culturally competent, evidence-based mental health care for veterans.

34. **S. 1726/H.R. 1364 – the ASSIST Act (Sen. Tuberville/Rep. Barrett): 8 Senate Cosponsors & 7 House Cosponsors**
    - Would authorize funding for medically necessary automobile adaptations (such as ramps, lifts, lowered floors and adapted seating) for veterans with disabilities and extend certain pension limitations for institutionalized veterans.

35. **S. 972/H.R. 1872 – the Fairness in Veterans' Education Act (Sen. Banks/Rep. Jackson): 2 Senate Cosponsors & 1 House Cosponsor**
    - Would update VA education repayment rules to make certain that servicemembers and veterans who paid into their Montgomery GI Bill (MGIB) receive a refund of their contributions when they later use the Post-9/11 GI Bill.

36. **S. 1116/H.R. 647/S. 1127/H.R. 1344 – the Ensuring Veterans' Final Resting Place Act and the Dennis and Lois Krisfalusy Act (Sen. Banks/Rep. Yakym/Sen. Fetterman/Rep. Reschenthaler): 2 Senate Cosponsors & 17 House Cosponsors (S. 1116), 3 Senate Cosponsors & 9 House Cosponsors (S. 1127)**
    - Would allow VA to inter the remains of veterans who already had an urn or commemorative plaque furnished in the same grave site as an eligible spouse, and would expand eligibility of VA furnished headstones and markers to individuals who died before November 11, 1998.

37. **S. 3138/H.R. 1971 – the Veterans SPORT Act (Sen. Banks/Rep. Miller-Meeks): 5 Senate Cosponsors & 1 House Cosponsor**
    - Would require VA to expand prosthetic coverage to include adaptive devices for sports and recreational activities for eligible veterans.

38. **S. 2101/H.R. 3481 – the Delivering Digitally to Our Veterans Act (Sen. Banks/Rep. Barrett): 1 Senate Cosponsor & 4 House Cosponsors**
    - Would require VA to expand electronic communication options for veterans' education assistance benefits to improve access, efficiency and service delivery.

39. **S. 1311/H.R. 1039 – the Clear Communication for Veterans Claims Act (Sen. Banks/Rep. Barrett): 9 House Cosponsors**
    - Would require VA to improve and standardize the clarity of its disability claims correspondence to veterans, including making notices easier to understand and ensuring consistent explanations of decisions and required next steps.

40. **S. 4304/H.R. 3400 – the TRAVEL Act (Sen. Sheehy/Del. King-Hinds): 1 Senate Cosponsor & 12 House Cosponsors**
    - Would authorize VA to assign a physician to serve as a traveling physician for no more than one year to provide health care to veterans at VA facilities in American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the U.S. Virgin Islands and any other territory or possession of the United States.

41. **S. 702/H.R. 2426 – the Veterans Mental Health and Addiction Therapy Quality of Care Act (Sen. Cornyn/Rep. Fallon): 8 Senate Cosponsors & 12 House Cosponsors**

- Would direct VA to establish quality standards and oversight for mental health and substance use disorder treatments to improve consistency, accountability and outcomes in care provided to veterans.

42. **S. 2397/H.R. 6522 – the CARING for Our Veterans Health Act (Sen. Ricketts/Rep. Hamadeh): 2 Senate Cosponsors & 1 House Cosponsor**
    - Would improve the rate and timeliness of medical documentation return by community providers by requiring VA to establish clear requirements, timelines, performance measures and training.

43. **S. 1245/H.R. 2576 – the SAVES Act (Sen. Blumenthal/Rep. Pingree): 13 Senate Cosponsors & 12 House Cosponsors**
    - Would expand VA health care, counseling and disability benefits for survivors of military sexual trauma (MST) while improving the training of claims processors who are adjudicating MST claims and improving the quality of MST decisions for service-connection.

44. **S. 2061/H.R. 6005 – the Molly R. Loomis Research for Descendants of Toxic Exposed Veterans Act (Sen. Blumenthal): 9 Senate Cosponsors**
    - Would require VA to establish a contract with the Agency for Toxic Substances and Disease Registry (ATSDR) to conduct a literature review on the health effects of descendants of servicemembers, report the findings and establish a health monitoring program to assist and identify potential patterns related to birth defects among descendants of toxic-exposed veterans.

45. **S. 3938/H.R. 1845 – the TAP Promotion Act (Sen. King/Rep. Van Orden): 30 Senate Cosponsors & 56 House Cosponsors**
    - Would require DOD to permit accredited representatives from VSOs to participate directly in Transition Assistance Program (TAP) classes, allowing them to help transitioning service members file expedited Benefits Delivery at Discharge (BDD) claims before leaving military service and provide other assistance as needed.

46. **S. 778/H.R. 1646 – the Lactation Spaces for Veteran Moms Act (Sen. Rosen/Rep. Underwood): 1 Senate Cosponsor & 1 House Cosponsor**
    - Would require VA to make certain that every VA medical center contains a private, hygienic and wheelchair-accessible lactation space—other than a bathroom—for the use of veteran mothers.

47. **S. 1657/H.R. 2137 – the Review Every Veterans Claims Act (Sen. Banks/Rep. Luttrell): 1 Senate Cosponsor & 9 House Cosponsors**
    - Would prohibit VA from automatically denying a veteran's benefits claim solely because they failed to appear for a scheduled medical examination, instead requiring VA to review the existing evidence in the application, and allow the Board of Veterans Appeals to aggregate appeals and enhance judge training.

48. **S. 1308/H.R. 1458 – the Vets Opportunity Act (Sen. Tillis/ Rep. Ciscomani): 10 Senate Cosponsors & 10 House Cosponsors**
    - Would modernize the GI Bill by expanding benefit eligibility to include accredited independent-study, technical and hybrid trade-training programs that offer regular interaction between students and instructors.

49. **H.R. 1336 – the Veterans National Traumatic Brain Injury Treatment Act (Rep. Murphy): 15 House Cosponsors**

- Would direct the Government Accountability Office (GAO) and VA to provide updated reports to Congress on research related to the use of hyperbaric oxygen therapy (HBOT) to treat traumatic brain injury (TBI) and PTSD.

50. H.R. 1286 – the Simplifying Forms for Veterans Claims Act (Rep. Bresnehan): 18 House Cosponsors

- Would require VA to assess and improve benefit application forms, ensuring they are clearer and better organized for veterans and their survivors.

51. H.R. 1107 – the Protecting Veteran Access to Telemedicine Services Act of 2025 (Rep. Womack): 28 House Cosponsors

- Would authorize, for 5 years, certain VA providers to prescribe controlled substances through telehealth, including across state lines, without first conducting an in-person exam if certain safeguards are met. Initiation of opioid therapy would not be allowed, and VA would be required to submit annual reports to Congress. Copayments for certain limited supplies of medication would be waived.

52. H.R. 1972 – the START Act (Rep. Miller-Meeks)

- Would require that the authorization for a veteran's referral for community care to begin on the day that the veteran has their first appointment with a community provider.

53. H.R. 3753 – the Expanding Access for Online Veteran Students Act (Rep. Ciscomani): 14 House Cosponsors

Would allow student veterans who are attending school during the summer semester and are enrolled strictly in online courses to receive the full Post-9/11 GI Bill monthly housing stipend instead of the current half-rate allowance.

54. H.R. 785 – the Representing Our Seniors at VA Act (Rep. Kiggans): 18 House Cosponsors

- Would expand the membership of VA's Geriatrics and Gerontology Advisory Committee by requiring a representative from the National Association of State Veterans Homes who holds a professional license in nursing home administration.

55. H.R. 6444 – the Blast Overpressure Research and Mitigation Taskforce (Rep. Jackson): 21 House Cosponsors

- Would direct VA, through the VA-DOD Joint Executive Committee, to establish a task force to coordinate research, improve health care treatments and streamline benefits for servicemembers suffering from blast-related injuries like TBI and PTSD.

56. H.R. 3387 – the ETS Act (Rep. Van Orden):

- Would make various improvements to TAP by requiring more in-depth financial literacy counseling and other resources to help servicemembers successfully transition from active duty to civilian life.

57. H.R. 7683 – the VA Fiscal Management and Modernization Act (Rep. Bergman):

- Would establish a dedicated budget information office to provide Congress with accurate, timely updates on VA's finances, led by an Under Secretary for Management and Chief Financial Officer.

58. H.R. 7083 – the Cruise Act (Rep. Barrett): 1 House Cosponsors

- Would require VA to centralize all payments and develop a comprehensive plan to modernize the Adaptive Automobile Equipment (AAE) program, which provides vehicles and modifications for disabled veterans.

59. **H.R. 6549 – the VA Contracting and Procurement Act (Rep. Bergman):**
    - Would places stricter congressional oversight on VA by barring the Department from entering into any major contract exceeding $50 million without specific authorization from Congress.

60. **H.R. 6599 – the Leasing and Infrastructure Act of 2025 (Rep. Smith):**
    - Would grant VA independent authority to enter into long-term leases for major medical facilities without General Services Administration approval, while establishing a dedicated fund to finance and streamline the procurement process.

61. **H.R. 3854 – the Modernizing All Veterans and Survivors (Rep. Valadao)**
    - Would require VA to deploy advanced automation and digital tools to more efficiently process pension, education and survivor benefits while cutting down on cross-departmental payment errors.

62. **H.R. 6993 – the BEACON Act of 2026 (Rep. Bergman): 13 House Cosponsors**
    - Would direct VA to establish a grant program to funds research into innovative neurorehabilitation treatments for veterans with TBI and improve clinician training, partnerships and outreach to veterans and their families to improve awareness of treatments and best practices.