

.....
(Original Signature of Member)

119TH CONGRESS
1ST SESSION

H. R. _____

To direct the Secretary of Veterans Affairs to establish a Blast Overpressure Task Force.

IN THE HOUSE OF REPRESENTATIVES

Mr. JACKSON of Texas introduced the following bill; which was referred to the Committee on _____

A BILL

To direct the Secretary of Veterans Affairs to establish a Blast Overpressure Task Force.

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 “Blast Overpressure
5 Research and Mitigation Task Force Act”.

1 **SEC. 2. ESTABLISHMENT OF THE BLAST OVERPRESSURE**
2 **TASK FORCE OF THE DEPARTMENT OF VET-**
3 **ERANS AFFAIRS.**

4 (a) ESTABLISHMENT.—Not later than 180 days after
5 the date of the enactment of this Act, the Secretary of
6 Veterans Affairs shall establish, through the Department
7 of Veterans Affairs-Department of Defense Joint Execu-
8 tive Committee under section 320 of title 38, United
9 States Code, the Blast Overpressure Task Force of the
10 Department of Veterans Affairs (in this section referred
11 to as the “Task Force”).

12 (b) DUTIES.—The duties of the Task Force are the
13 following:

14 (1) To improve how the Secretary of Veterans
15 Affairs, in consultation with the Secretary of De-
16 fense, provides health care and other benefits to vet-
17 erans or members of the Armed Forces diagnosed
18 with traumatic brain injury, post-traumatic stress
19 disorder, or other symptoms, from blast overpressure
20 or blast exposure.

21 (2) To align research agendas and acquisition
22 strategies of the Department regarding such health
23 care.

24 (3) To establish physiological and cognitive per-
25 formance baselines for such veterans and members.

1 (4) To prioritize translational research regard-
2 ing such veterans and members, including research
3 regarding—

4 (A) sleep therapy;

5 (B) blast-related gut health;

6 (C) mobile diagnostics;

7 (D) vestibular dysfunction and balance im-
8 pairment;

9 (E) autonomic nervous system
10 dysregulation;

11 (F) cumulative mild traumatic brain in-
12 jury;

13 (G) neuroinflammation and glial activation;
14 and

15 (H) any other issue determined appro-
16 priate by the Secretary.

17 (5) To monitor sensory decline (including with
18 regards to vision, hearing, and vestibular function)
19 and stress-related impairments among such veterans
20 and members.

21 (6) To support continuity of such care by inte-
22 grating mobile and longitudinal diagnostic tools.

23 (c) REPORTS.—The Task Force shall issue annual re-
24 ports to the Committees on Veterans' Affairs and on
25 Armed Services of the Senate and House of Representa-

1 tives. Each such report shall include the following ele-
2 ments:

3 (1) Details of research initiatives, coordination
4 outcomes, and clinical advancements of the Task
5 Force.

6 (2) Recommendations of the Task Force re-
7 garding—

8 (A) how claims processors of the Depart-
9 ment of Veterans Affairs should evaluate evi-
10 dence that links such conditions to active mili-
11 tary, naval, air, or space service; and

12 (B) best practices regarding the evaluation
13 of neurological injuries in examinations for ben-
14 efits under chapters 11 or 15 of title 38, United
15 States Code.

16 (d) SUNSET.—The Task Force shall terminate on
17 September 30, 2029.