beginning on the date of the enactment of this Act [Apr. 7, 1986], the Director—

''(A) shall, on such day, submit to the appropriate committees of the Congress a report describing the reasons why the Director has not approved such a protocol; and

''(B) shall, each 60 days thereafter until such a protocol is approved, submit to such committees an updated report on the report required by clause (A).

''(d) OTA MONITORING OF COMPLIANCE.—(1) In order to ensure compliance with the protocol approved under subsection (b)(1), the Director shall monitor the conduct of the study under subsection (a).

''(2)(A) The Director shall submit to the appropriate committees of the Congress, at each of the times specified in subparagraph (B), a report on the Director's monitoring of the conduct of the study pursuant to paragraph (1).

''(B) A report shall be submitted under subparagraph (A)—

''(i) before the end of the 6-month period beginning on the date on which the Director approves the protocol referred to in paragraph (1);

''(ii) before the end of the 12-month period beginning on such date; and

''(iii) annually thereafter until the study is completed or terminated.

''(e) DURATION OF STUDY.—The study conducted pursuant to subsection (a) shall be continued for as long after the date on which the first report is submitted under subsection (f)(1) as the Administrator determines that there is a reasonable possibility of developing, through such study, significant new information on the health effects described in subsection (a)(1).

''(f) REPORTS.—(1) Not later than 24 months after the date of the approval of the protocol pursuant to subsection (b)(1) and annually thereafter, the Administrator shall submit to the appropriate committees of the Congress a report containing—

''(A) a description of the results obtained, before the date of such report, under the study conducted pursuant to subsection (a); and

''(B) any administrative actions or recommended legislation, or both, and any additional comments which the Administrator considers appropriate in light of such results.

''(2) Not later than 90 days after the date on which each report required by paragraph (1) is submitted, the Administrator shall publish in the Federal Register, for public review and comment, a description of any action that the Administrator plans or proposes to take with respect to programs administered by the Veterans' Administration based on—

''(A) the results described in such report;

''(B) the comments and recommendations received on that report; and

''(C) any other available pertinent information.

Each such description shall include a justification or rationale for the planned or proposed action.

''(g) DEFINITIONS.—For the purposes of this section:

''(1) The term 'gender-specific health effects' includes—

''(A) effects on female reproductive capacity and reproductive organs;

''(B) effects on reproductive outcomes;

''(C) effects on female-specific organs and tissues; and

''(D) other effects unique to the physiology of females.

''(2) The term 'Vietnam era' has the meaning given such term in section 101(29) of title 38, United States Code.''

AGENT ORANGE STUDY; REPORT TO CONGRESSIONAL COMMITTEES

Pub. L. 96–151, title III, § 307, Dec. 20, 1979, 93 Stat. 1097, as amended by Pub. L. 97–72, title IV, § 401, Nov. 3, 1981, 95 Stat. 1061; Pub. L. 98–542, § 8(a), Oct. 24, 1984, 98 Stat. 2731, directed that a protocol be designed for an epidemiological study of the long-term health effects of Agent Orange on Armed Forces personnel who served in Vietnam, and that reports be submitted to Congress describing results with comments and recommendations.

§ 1117. Compensation for disabilities occurring in Persian Gulf War veterans

(a)(1) The Secretary may pay compensation under this subchapter to a Persian Gulf veteran with a qualifying chronic disability that became manifest—

(A) during service on active duty in the Armed Forces in the Southwest Asia theater of operations during the Persian Gulf War; or

(B) to a degree of 10 percent or more during the presumptive period prescribed under subsection (b).

(2) For purposes of this subsection, the term ''qualifying chronic disability'' means a chronic disability resulting from any of the following (or any combination of any of the following):

(A) An undiagnosed illness.

(B) A medically unexplained chronic multisymptom illness (such as chronic fatigue syndrome, fibromyalgia, and irritable bowel syndrome) that is defined by a cluster of signs or symptoms.

(C) Any diagnosed illness that the Secretary determines in regulations prescribed under subsection (d) warrants a presumption of service-connection.

(b) The Secretary shall prescribe by regulation the period of time following service in the Southwest Asia theater of operations during the Persian Gulf War that the Secretary determines is appropriate for presumption of service connection for purposes of this section. The Secretary's determination of such period of time shall be made following a review of any available credible medical or scientific evidence and the historical treatment afforded disabilities for which manifestation periods have been established and shall take into account other pertinent circumstances regarding the experiences of veterans of the Persian Gulf War.

(c)(1) Whenever the Secretary determines under section 1118(c) of this title that a presumption of service connection previously established under this section is no longer warranted—

(A) a veteran who was awarded compensation under this section on the basis of the presumption shall continue to be entitled to receive compensation under this section on that basis; and

(B) a survivor of a veteran who was awarded dependency and indemnity compensation for the death of a veteran resulting from the disease on the basis of the presumption before that date shall continue to be entitled to receive dependency and indemnity compensation on that basis.

(2) This subsection shall cease to be effective on September 30, 2011.

(d)(1) The Secretary shall prescribe regulations to carry out this section.

(2) Those regulations shall include the following:

(A) A description of the period and geographical area or areas of military service in connection with which compensation under this section may be paid.

(B) A description of the illnesses for which compensation under this section may be paid.

(C) A description of any relevant medical characteristic (such as a latency period) associated with each such illness.

(e) A disability for which compensation under this subchapter is payable shall be considered to be service connected for purposes of all other laws of the United States.

(f) For purposes of this section, the term ''Persian Gulf veteran'' means a veteran who served on active duty in the Armed Forces in the Southwest Asia theater of operations during the Persian Gulf War.

(g) For purposes of this section, signs or symptoms that may be a manifestation of an undiagnosed illness or a chronic multisymptom illness include the following:

(1) Fatigue.

(2) Unexplained rashes or other dermatological signs or symptoms.

(3) Headache.

(4) Muscle pain.

(5) Joint pain.

(6) Neurological signs and symptoms.

(7) Neuropsychological signs or symptoms.

(8) Signs or symptoms involving the upper or lower respiratory system.

(9) Sleep disturbances.

(10) Gastrointestinal signs or symptoms.

(11) Cardiovascular signs or symptoms.

(12) Abnormal weight loss.

(13) Menstrual disorders.

(h)(1) If the Secretary determines with respect to a medical research project sponsored by the Department that it is necessary for the conduct of the project that Persian Gulf veterans in receipt of compensation under this section or section 1118 of this title participate in the project without the possibility of loss of service connection under either such section, the Secretary shall provide that service connection granted under either such section for disability of a veteran who participated in the research project may not be terminated. Except as provided in paragraph (2), notwithstanding any other provision of law any grant of service-connection protected under this subsection shall remain service-connected for purposes of all provisions of law under this title.

(2) Paragraph (1) does not apply in a case in which—

(A) the original award of compensation or service connection was based on fraud; or

(B) it is clearly shown from military records that the person concerned did not have the requisite service or character of discharge.

(3) The Secretary shall publish in the Federal Register a list of medical research projects sponsored by the Department for which service connection granted under this section or section 1118 of this title may not be terminated pursuant to paragraph (1).

(Added Pub. L. 103–446, title I, § 106(a)(1), Nov. 2, 1994, 108 Stat. 4650; amended Pub. L. 105–277, div. C, title XVI, § 1602(c), Oct. 21, 1998, 112 Stat. 2681–744; Pub. L. 107–103, title II, §§ 202(a), (b)(1), (d)(1), 203(a), Dec. 27, 2001, 115 Stat. 988, 989; Pub. L. 109–233, title V, § 503(1), June 15, 2006, 120 Stat. 415.)

AMENDMENTS

2006—Subsec. (h)(1). Pub. L. 109–233 substituted ''notwithstanding'' for ''nothwithstanding''.

2001—Subsec. (a). Pub. L. 107–103, § 202(a)(1), amended subsec. (a) generally. Prior to amendment, subsec. (a) read as follows: ''The Secretary may pay compensation under this subchapter to any Persian Gulf veteran suffering from a chronic disability resulting from an undiagnosed illness (or combination of undiagnosed illnesses) that—

''(1) became manifest during service on active duty in the Armed Forces in the Southwest Asia theater of operations during the Persian Gulf War; or

''(2) became manifest to a degree of 10 percent or more within the presumptive period prescribed under subsection (b).''

Subsec. (c)(1). Pub. L. 107–103, § 202(a)(2)(A), struck out ''for an undiagnosed illness (or combination of undiagnosed illnesses)'' after ''service connection'' in introductory provisions.

Subsec. (c)(1)(A). Pub. L. 107–103, § 202(a)(2)(B), struck out ''for such illness (or combination of illnesses)'' after ''awarded compensation under this section''.

Subsec. (c)(2). Pub. L. 107–103, § 202(d)(1), substituted ''on September 30, 2011'' for ''10 years after the first day of the fiscal year in which the National Academy of Sciences submits to the Secretary the first report under section 1603 of the Persian Gulf War Veterans Act of 1998''.

Subsec. (g). Pub. L. 107–103, § 202(b)(1), added subsec. (g).

Subsec. (h). Pub. L. 107–103, § 203(a), added subsec. (h).

1998—Subsecs. (c) to (f). Pub. L. 105–277 added subsec. (c) and redesignated former subsecs. (c) to (e) as (d) to (f), respectively.

EFFECTIVE DATE OF 2001 AMENDMENT

Pub. L. 107–103, title II, § 202(c), Dec. 27, 2001, 115 Stat. 989, provided that: ''The amendments made by subsections (a) and (b) [amending this section and section 1118 of this title] shall take effect on March 1, 2002.''

Pub. L. 107–103, title II, § 203(b), Dec. 27, 2001, 115 Stat. 990, provided that: ''The authority provided by subsection (h) of section 1117 of title 38, United States Code, as added by subsection (a), may be used by the Secretary of Veterans Affairs with respect to any medical research project of the Department of Veterans Affairs, whether commenced before, on, or after the date of the enactment of this Act [Dec. 27, 2001].''

REGULATIONS

Pub. L. 103–446, title I, § 106(d), Nov. 2, 1994, 108 Stat. 4651, provided that: ''If the Secretary states in the report under subsection (c) [set out below] that the Secretary intends to pay compensation as provided in section 1117 of title 38, United States Code, as added by subsection (a), the Secretary shall, not later than 30 days after the date on which such report is submitted, publish in the Federal Register proposed regulations under subsections (b) and (c) of that section.''

AGREEMENT WITH NATIONAL ACADEMY OF SCIENCES REGARDING EVALUATION OF HEALTH CONSEQUENCES OF SERVICE IN SOUTHWEST ASIA DURING THE PERSIAN GULF WAR

Pub. L. 105–368, title I, § 101, Nov. 11, 1998, 112 Stat. 3317, as amended by Pub. L. 111–275, title VIII, § 806(b)(1), (2), Oct. 13, 2010, 124 Stat. 2891, provided that:

''(a) PURPOSE.—The purpose of this section is to provide for the National Academy of Sciences, an independent nonprofit scientific organization with appropriate expertise which is not a part of the Federal Government, to review and evaluate the available scientific evidence regarding associations between illness and service in the Persian Gulf War.

''(b) AGREEMENT.—(1) The Secretary of Veterans Affairs shall seek to enter into an agreement with the National Academy of Sciences for the Academy to perform the activities covered by this section. The Sec-

retary shall seek to enter into the agreement not later than 2 months after the date of the enactment of this Act [Nov. 11, 1998].

''(2)(A) If the Secretary is unable within the time period set forth in paragraph (1) to enter into an agreement with the Academy for the purposes of this section on terms acceptable to the Secretary, the Secretary shall seek to enter into an agreement for purposes of this section with another appropriate scientific organization that is not part of the Federal Government, operates as a not-for-profit entity, and has expertise and objectivity comparable to that of the Academy.

''(B) If the Secretary enters into an agreement with another organization under this paragraph, any reference in this section to the National Academy of Sciences shall be treated as a reference to such other organization.

''(c) REVIEW OF SCIENTIFIC EVIDENCE.—(1) Under the agreement under subsection (b), the National Academy of Sciences shall conduct a comprehensive review and evaluation of the available scientific and medical information regarding the health status of veterans who served in the Armed Forces in the Southwest Asia theater of operations during the Persian Gulf War or, after September 11, 2001, in another Post-9/11 Global Theater of Operations and the health consequences of exposures to risk factors during such service. In conducting such review and evaluation, the Academy shall—

''(A) identify the biological, chemical, or other toxic agents, environmental or wartime hazards, or preventive medicines or vaccines (including the agents specified in subsection (d)(1)) to which members of the Armed Forces who may have been exposed by reason of service in the Southwest Asia theater of operations during the Persian Gulf War or, after September 11, 2001, in another Post-9/11 Global Theater of Operations;

''(B) identify the illnesses associated with the agents, hazards, or medicines or vaccines identified under subparagraph (A); and

''(C) identify the illnesses (including diagnosed illnesses and undiagnosed illnesses) for which there is scientific evidence of a higher prevalence among populations of Gulf War veterans when compared with other appropriate populations of individuals.

''(2) In identifying illnesses under subparagraphs (B) and (C) of paragraph (1), the Academy shall review and summarize the relevant scientific evidence regarding illnesses, including symptoms, adverse reproductive health outcomes, and mortality, among the members described in paragraph (1)(A) and among other appropriate populations of individuals.

''(3) In conducting the review and evaluation under paragraph (1), the Academy shall, for each illness identified under subparagraph (B) or (C) of that paragraph, assess the latency period, if any, between service or exposure to any potential risk factor (including an agent, hazard, or medicine or vaccine identified under subparagraph (A) of that paragraph) and the manifestation of such illness.

''(d) SPECIFIED AGENTS.—(1) In identifying under subsection (c)(1)(A) the agents, hazards, or preventive medicines or vaccines to which members of the Armed Forces may have been exposed, the National Academy of Sciences shall consider the following:

''(A) The following organophosphorous pesticides:

''(i) Chlorpyrifos.

''(ii) Diazinon.

''(iii) Dichlorvos.

''(iv) Malathion.

''(B) The following carbamate pesticides:

''(i) Proxpur.

''(ii) Carbaryl.

''(iii) Methomyl.

''(C) The carbamate pyridostigmine bromide used as nerve agent prophylaxis.

''(D) The following chlorinated hydrocarbons and other pesticides and repellents:

''(i) Lindane.

''(ii) Pyrethrins.

''(iii) Permethrins.

''(iv) Rodenticides (bait).

''(v) Repellent (DEET).

''(E) The following low-level nerve agents and precursor compounds at exposure levels below those which produce immediately apparent incapacitating symptoms:

''(i) Sarin.

''(ii) Tabun.

''(F) The following synthetic chemical compounds:

''(i) Mustard agents at levels below those which cause immediate blistering.

''(ii) Volatile organic compounds.

''(iii) Hydrazine.

''(iv) Red fuming nitric acid.

''(v) Solvents.

''(G) The following sources of radiation:

''(i) Depleted uranium.

''(ii) Microwave radiation.

''(iii) Radio frequency radiation.

''(H) The following environmental particulates and pollutants:

''(i) Hydrogen sulfide.

''(ii) Oil fire byproducts.

''(iii) Diesel heater fumes.

''(iv) Sand micro-particles.

''(I) Diseases endemic to the region (including the following):

''(i) Leishmaniasis.

''(ii) Sandfly fever.

''(iii) Pathogenic escherichia coli.

''(iv) Shigellosis.

''(J) Time compressed administration of multiple live, 'attenuated', and toxoid vaccines.

''(2) The consideration of agents, hazards, and medicines and vaccines under paragraph (1) shall not preclude the Academy from identifying other agents, hazards, or medicines or vaccines to which members of the Armed Forces may have been exposed for purposes of any report under subsection (h).

''(3) Not later than 6 months after entry into the agreement under subsection (b), the Academy shall submit to the Committees on Veterans' Affairs of the Senate and the House of Representatives a report specifying the agents, hazards, and medicines and vaccines considered under paragraph (1).

''(e) SCIENTIFIC DETERMINATIONS CONCERNING ILLNESSES.—(1) For each illness identified under subparagraph (B) or (C) of subsection (c)(1), the National Academy of Sciences shall determine (to the extent available scientific evidence permits) whether there is scientific evidence of an association of that illness with service in the Armed Forces in the Southwest Asia theater of operations during the Persian Gulf War or, after September 11, 2001, in another Post-9/11 Global Theater of Operations or exposure during such service to one or more agents, hazards, or medicines or vaccines. In making those determinations, the Academy shall consider—

''(A) the strength of scientific evidence, the replicability of results, the statistical significance of results, and the appropriateness of the scientific methods used to detect the association;

''(B) in any case where there is evidence of an apparent association, whether there is reasonable confidence that that apparent association is not due to chance, bias, or confounding;

''(C) the increased risk of the illness among human or animal populations exposed to the agents, hazards, or medicines or vaccines;

''(D) whether a plausible biological mechanism or other evidence of a causal relationship exists between exposure to the agents, hazards, or medicines or vaccines and the illnesses;

''(E) in any case where information about exposure levels is available, whether the evidence indicates that the levels of exposure of the studied populations were of the same magnitude as the estimated likely exposures of veterans described in subsection (c)(1); and

''(F) whether there is an increased risk of illness among veterans described in subsection (c)(1) in comparison with appropriate peer groups.

''(2) The Academy shall include in its reports under subsection (h) a full discussion of the scientific evidence and reasoning that led to its conclusions under this subsection.

''(f) RECOMMENDATIONS FOR ADDITIONAL SCIENTIFIC STUDIES.—(1) Under the agreement under subsection (b), the National Academy of Sciences shall make any recommendations that it considers appropriate for additional scientific studies (including studies relating to treatment models) to resolve areas of continuing scientific uncertainty relating to the health consequences of service described in subsection (c)(1)(A) or exposure to toxic agents, environmental or wartime hazards, or preventive medicines or vaccines associated with such service.

''(2) In making recommendations for additional studies, the Academy shall consider the available scientific data, the value and relevance of the information that could result from such studies, and the cost and feasibility of carrying out such studies.

''(g) SUBSEQUENT REVIEWS.—(1) Under the agreement under subsection (b), the National Academy of Sciences shall conduct on a periodic and ongoing basis additional reviews of the evidence and data relating to its activities under this section.

''(2) As part of each review under this subsection, the Academy shall—

''(A) conduct as comprehensive a review as is practicable of the information referred to in subsection (c), the evidence referred to in subsection (e), and the data referred to in subsection (f) that became available since the last review of such information, evidence, and data under this section; and

''(B) make determinations under the subsections referred to in subparagraph (A) on the basis of the results of such review and all other reviews previously conducted for purposes of this section.

''(h) REPORTS BY ACADEMY.—(1) Under the agreement under subsection (b), the National Academy of Sciences shall submit to the Committees on Veterans' Affairs of the Senate and the House of Representatives and the Secretary of Veterans Affairs periodic written reports regarding the Academy's activities under the agreement.

''(2) The first report under paragraph (1) shall be submitted not later than 2 years after entry into the agreement under subsection (b). That report shall include—

''(A) the determinations and discussion referred to in subsection (e); and

''(B) any recommendations of the Academy under subsection (f).

''(3) Reports shall be submitted under this subsection at least once every 2 years, as measured from the date of the report under paragraph (2).

''(4) In any report under this subsection (other than the report under paragraph (2)), the Academy may specify an absence of meaningful developments in the scientific or medical community with respect to the activities of the Academy under this section during the 2-year period ending on the date of such report.

''(5) In each report under this subsection submitted after the date of the enactment of this paragraph [Oct. 13, 2010], any determinations, discussions, and recommendations as described in paragraph (2) shall be submitted separately as follows:

''(A) For the Southwest Asia theater of operations for the period of the Persian Gulf War ending on September 11, 2001.

''(B) For the Post-9/11 Global Theaters of Operations for the period of the Persian Gulf War beginning on September 11, 2001.

''(i) REPORTS BY SECRETARY.—(1) The Secretary shall review each report from the Academy under subsection (h). As part of such review, the Secretary shall seek comments on, and evaluation of, the Academy's report from the heads of other affected departments and agencies of the United States.

''(2) Based upon a review under paragraph (1), the Secretary shall submit to the Committees on Veterans' Affairs of the Senate and the House of Representatives a report on the available scientific and medical information regarding the health consequences of service described in subsection (c)(1)(A) and of exposures to risk factors during such service. The Secretary shall include in the report the Secretary's recommendations as to whether there is sufficient evidence to warrant a presumption of service-connection for the occurrence of a specified condition in veterans described in subsection (c)(1)(A). In determining whether to make such a recommendation, the Secretary shall consider the matters specified in subparagraphs (A) through (F) of subsection (e)(1).

''(3) The report under this subsection shall be submitted not later than 120 days after the date on which the Secretary receives the report from the Academy.

''(4) In each report under this subsection submitted after the date of the enactment of this paragraph [Oct. 13, 2010], any recommendations as described in paragraph (2) shall be submitted separately as follows:

''(A) For the Southwest Asia theater of operations for the period of the Persian Gulf War ending on September 11, 2001.

''(B) For the Post-9/11 Global Theaters of Operations for the period of the Persian Gulf War beginning on September 11, 2001.

''(j) SUNSET.—This section shall cease to be effective on October 1, 2018.

''(k) DEFINITION.—In this section:

''(1) The term 'Persian Gulf War' has the meaning given that term in section 101(33) of title 38, United States Code.

''(2) The term 'Post-9/11 Global Theater of Operations' means Afghanistan, Iraq, and any other theater of operations for which the Global War on Terrorism Expeditionary Medal is awarded for service.

''(3) The term 'toxic agent, environmental or wartime hazard, or preventive medicine or vaccine', with respect to service described in subsection (c)(1)(A), means a biological, chemical, or other toxic agent, environmental or wartime hazard, or preventive medicine or vaccine that is known or presumed to be associated with service described in such subsection (c)(1)(A), whether such association arises as a result of single, repeated, or sustained exposure and whether such association arises through exposure singularly or in combination.''

IMPROVING EFFECTIVENESS OF CARE OF PERSIAN GULF WAR VETERANS

Pub. L. 105–368, title I, § 105, Nov. 11, 1998, 112 Stat. 3324, provided that:

''(a) ASSESSMENT BY NATIONAL ACADEMY OF SCIENCES.—Not later than April 1, 1999, the Secretary of Veterans Affairs shall enter into a contract with the National Academy of Sciences to review the available scientific data in order to—

''(1) assess whether a methodology could be used by the Department of Veterans Affairs for determining the efficacy of treatments furnished to, and health outcomes (including functional status) of, Persian Gulf War veterans who have been treated for illnesses which may be associated with their service in the Persian Gulf War; and

''(2) identify, to the extent feasible, with respect to each undiagnosed illness prevalent among such veterans and for any other chronic illness that the Academy determines to warrant such review, empirically valid models of treatment for such illness which employ successful treatment modalities for populations with similar symptoms.

''(b) ACTION ON REPORT.—(1) After receiving the final report of the National Academy of Sciences under subsection (a), the Secretary shall, if a reasonable and scientifically feasible methodology is identified by the Academy, develop an appropriate mechanism to monitor and study the effectiveness of treatments furnished to, and health outcomes of, Persian Gulf War veterans

who suffer from diagnosed and undiagnosed illnesses which may be associated with their service in the Persian Gulf War.

''(2) The Secretary shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report on the implementation of paragraph (1).

''(3) The Secretary shall carry out paragraphs (1) and (2) not later than 180 days after receiving the final report of the National Academy of Sciences under subsection (a).''

AGREEMENT WITH NATIONAL ACADEMY OF SCIENCES REGARDING TOXIC DRUGS AND ILLNESSES ASSOCIATED WITH GULF WAR

Pub. L. 105–277, div. C, title XVI, §§1603–1605, Oct. 21, 1998, 112 Stat. 2681–745 to 2681–748, as amended by Pub. L. 107–103, title II, §202(d)(2), Dec. 27, 2001, 115 Stat. 989; Pub. L. 111–275, title VIII, §806(a), (b)(3), Oct. 13, 2010, 124 Stat. 2890, 2893, provided that:

''SEC. 1603. AGREEMENT WITH NATIONAL ACADEMY OF SCIENCES.

''(a) PURPOSE.—The purpose of this section is to provide for the National Academy of Sciences, an independent nonprofit scientific organization with appropriate expertise, to review and evaluate the available scientific evidence regarding associations between illnesses and exposure to toxic agents, environmental or wartime hazards, or preventive medicines or vaccines associated with Gulf War service.

''(b) AGREEMENT.—The Secretary of Veterans Affairs shall seek to enter into an agreement with the National Academy of Sciences for the Academy to perform the activities covered by this section. The Secretary shall seek to enter into the agreement not later than two months after the date of enactment of this Act [Oct. 21, 1998].

''(c) IDENTIFICATION OF AGENTS AND ILLNESSES.—(1) Under the agreement under subsection (b), the National Academy of Sciences shall—

''(A) identify the biological, chemical, or other toxic agents, environmental or wartime hazards, or preventive medicines or vaccines to which members of the Armed Forces who may have been exposed by reason of service in the Southwest Asia theater of operations during the Persian Gulf War or, after September 11, 2001, in another Post-9/11 Global Theater of Operations; and

''(B) identify the illnesses (including diagnosed illnesses and undiagnosed illnesses) that are manifest in such members.

''(2) In identifying illnesses under paragraph (1)(B), the Academy shall review and summarize the relevant scientific evidence regarding illnesses among the members described in paragraph (1)(A) and among other appropriate populations of individuals, including mortality, symptoms, and adverse reproductive health outcomes among such members and individuals.

''(d) INITIAL CONSIDERATION OF SPECIFIC AGENTS.—(1) In identifying under subsection (c) the agents, hazards, or preventive medicines or vaccines to which members of the Armed Forces may have been exposed for purposes of the first report under subsection (i), the National Academy of Sciences shall consider, within the first six months after the date of enactment of this Act [Oct. 21, 1998], the following:

''(A) The following organophosphorous pesticides:

''(i) Chlorpyrifos.

''(ii) Diazinon.

''(iii) Dichlorvos.

''(iv) Malathion.

''(B) The following carbamate pesticides:

''(i) Proxpur.

''(ii) Carbaryl.

''(iii) Methomyl.

''(C) The carbamate pyridostigmine bromide used as nerve agent prophylaxis.

''(D) The following chlorinated hydrocarbon and other pesticides and repellents:

''(i) Lindane.

''(ii) Pyrethrins.

''(iii) Permethrins.

''(iv) Rodenticides (bait).

''(v) Repellent (DEET).

''(E) The following low-level nerve agents and precursor compounds at exposure levels below those which produce immediately apparent incapacitating symptoms:

''(i) Sarin.

''(ii) Tabun.

''(F) The following synthetic chemical compounds:

''(i) Mustard agents at levels below those which cause immediate blistering.

''(ii) Volatile organic compounds.

''(iii) Hydrazine.

''(iv) Red fuming nitric acid.

''(v) Solvents.

''(vi) Uranium.

''(G) The following ionizing radiation:

''(i) Depleted uranium.

''(ii) Microwave radiation.

''(iii) Radio frequency radiation.

''(H) The following environmental particulates and pollutants:

''(i) Hydrogen sulfide.

''(ii) Oil fire byproducts.

''(iii) Diesel heater fumes.

''(iv) Sand micro-particles.

''(I) Diseases endemic to the region (including the following):

''(i) Leishmaniasis.

''(ii) Sandfly fever.

''(iii) Pathogenic escherechia coli.

''(iv) Shigellosis.

''(J) Time compressed administration of multiple live, 'attenuated', and toxoid vaccines.

''(2) The consideration of agents, hazards, and medicines and vaccines under paragraph (1) shall not preclude the Academy from identifying other agents, hazards, or medicines or vaccines to which members of the Armed Forces may have been exposed for purposes of any report under subsection (i).

''(3) Not later than six months after the date of enactment of this Act [Oct. 21, 1998], the Academy shall submit to the designated congressional committees a report specifying the agents, hazards, and medicines and vaccines considered under paragraph (1).

''(e) DETERMINATIONS OF ASSOCIATIONS BETWEEN AGENTS AND ILLNESSES.—(1) For each agent, hazard, or medicine or vaccine and illness identified under subsection (c), the National Academy of Sciences shall determine, to the extent that available scientific data permit meaningful determinations—

''(A) whether a statistical association exists between exposure to the agent, hazard, or medicine or vaccine and the illness, taking into account the strength of the scientific evidence and the appropriateness of the scientific methodology used to detect the association;

''(B) the increased risk of the illness among human or animal populations exposed to the agent, hazard, or medicine or vaccine; and

''(C) whether a plausible biological mechanism or other evidence of a causal relationship exists between exposure to the agent, hazard, or medicine or vaccine and the illness.

''(2) The Academy shall include in its reports under subsection (i) a full discussion of the scientific evidence and reasoning that led to its conclusions under this subsection.

''(f) REVIEW OF POTENTIAL TREATMENT MODELS FOR CERTAIN ILLNESSES.—Under the agreement under subsection (b), the National Academy of Sciences shall separately review, for each chronic undiagnosed illness identified under subsection (c)(1)(B) and for any other chronic illness that the Academy determines to warrant such review, the available scientific data in order to identify empirically valid models of treatment for such illnesses which employ successful treatment modalities for populations with similar symptoms.

''(g) RECOMMENDATIONS FOR ADDITIONAL SCIENTIFIC STUDIES.—(1) Under the agreement under subsection (b), the National Academy of Sciences shall make any recommendations that it considers appropriate for additional scientific studies (including studies relating to treatment models) to resolve areas of continuing scientific uncertainty relating to the health consequences of exposure to toxic agents, environmental or wartime hazards, or preventive medicines or vaccines associated with service described in subsection (c)(1)(A).

''(2) In making recommendations for additional studies, the Academy shall consider the available scientific data, the value and relevance of the information that could result from such studies, and the cost and feasibility of carrying out such studies.

''(h) SUBSEQUENT REVIEWS.—(1) Under the agreement under subsection (b), the National Academy of Sciences shall conduct on a periodic and ongoing basis additional reviews of the evidence and data relating to its activities under this section.

''(2) As part of each review under this subsection, the Academy shall—

''(A) conduct as comprehensive a review as is practicable of the evidence referred to in subsection (c) and the data referred to in subsections (e), (f), and (g) that became available since the last review of such evidence and data under this section; and

''(B) make determinations under the subsections referred to in subparagraph (A) on the basis of the results of such review and all other reviews previously conducted for purposes of this section.

''(i) REPORTS.—(1) Under the agreement under subsection (b), the National Academy of Sciences shall submit to the committees and officials referred to in paragraph (6) periodic written reports regarding the Academy's activities under the agreement.

''(2) The first report under paragraph (1) shall be submitted not later than 18 months after the date of enactment of this Act [Oct. 21, 1998]. That report shall include—

''(A) the determinations and discussion referred to in subsection (e);

''(B) the results of the review of models of treatment under subsection (f); and

''(C) any recommendations of the Academy under subsection (g).

''(3) Reports shall be submitted under this subsection at least once every two years, as measured from the date of the report under paragraph (2).

''(4) In any report under this subsection (other than the report under paragraph (2)), the Academy may specify an absence of meaningful developments in the scientific or medical community with respect to the activities of the Academy under this section during the 2-year period ending on the date of such report.

''(5) In each report under this subsection submitted after the date of the enactment of this paragraph [Oct. 13, 2010], any determinations, results, and recommendations as described in paragraph (2) shall be submitted separately as follows:

''(A) For the Southwest Asia theater of operations for the period of the Persian Gulf War ending on September 11, 2001.

''(B) For the Post-9/11 Global Theaters of Operations for the period of the Persian Gulf War beginning on September 11, 2001.

''(6) Reports under this subsection shall be submitted to the following:

''(A) The designated congressional committees.

''(B) The Secretary of Veterans Affairs.

''(C) The Secretary of Defense.

''(j) SUNSET.—This section shall cease to be effective on October 1, 2015.

''(k) ALTERNATIVE CONTRACT SCIENTIFIC ORGANIZATION.—(1) If the Secretary is unable within the time period set forth in subsection (b) to enter into an agreement with the National Academy of Sciences for the purposes of this section on terms acceptable to the Secretary, the Secretary shall seek to enter into an agreement for purposes of this section with another appropriate scientific organization that is not part of the Government, operates as a not-for-profit entity, and has expertise and objectivity comparable to that of the National Academy of Sciences.

''(2) If the Secretary enters into an agreement with another organization under this subsection, any reference in this section and section 1118 of title 38, United States Code (as added by section 1602(a)), to the National Academy of Sciences shall be treated as a reference to such other organization.

''(*l*) DEFINITIONS.—In this section:

''(1) The term 'Persian Gulf War' has the meaning given that term in section 101(33) of title 38, United States Code.

''(2) The term 'Post-9/11 Global Theater of Operations' means Afghanistan, Iraq, and any other theater of operations for which the Global War on Terrorism Expeditionary Medal is awarded for service.

''[SEC. 1604. Repealed. Pub. L. 111–275, title VIII, § 806(b)(3), Oct. 13, 2010, 124 Stat. 2893.]

''SEC. 1605. DEFINITIONS.

''In this title [enacting section 1118 of this title, amending this section and section 1113 of this title, and enacting this note and provisions set out as a note under section 101 of this title]:

''(1) The term 'toxic agent, environmental or wartime hazard, or preventive medicine or vaccine associated with Gulf War service' means a biological, chemical, or other toxic agent, environmental or wartime hazard, or preventive medicine or vaccine that is known or presumed to be associated with service in the Armed Forces in the Southwest Asia theater of operations during the Persian Gulf War, whether such association arises as a result of single, repeated, or sustained exposure and whether such association arises through exposure singularly or in combination.

''(2) The term 'designated congressional committees' means the following:

''(A) The Committees on Veterans' Affairs and Armed Services of the Senate.

''(B) The Committees on Veterans' Affairs and National Security [now Armed Services] of the House of Representatives.

''(3) The term 'Persian Gulf War' has the meaning given that term in section 101(33) of title 38, United States Code.''

PERSIAN GULF WAR VETERANS' BENEFITS

Sections 102 to 105, 107, 109, and 110 of title I of Pub. L. 103–446, as amended by Pub. L. 104–262, title III, § 352(a), Oct. 9, 1996, 110 Stat. 3210; Pub. L. 105–368, title I, § 107, Nov. 11, 1998, 112 Stat. 3325; Pub. L. 106–117, title II, § 205(b), (c), Nov. 30, 1999, 113 Stat. 1563, provided that:

''SEC. 102. FINDINGS.

''The Congress makes the following findings:

''(1) During the Persian Gulf War, members of the Armed Forces were exposed to numerous potentially toxic substances, including fumes and smoke from military operations, oil well fires, diesel exhaust, paints, pesticides, depleted uranium, infectious agents, investigational drugs and vaccines, and indigenous diseases, and were also given multiple immunizations. It is not known whether these servicemembers were exposed to chemical or biological warfare agents. However, threats of enemy use of chemical and biological warfare heightened the psychological stress associated with the military operation.

''(2) Significant numbers of veterans of the Persian Gulf War are suffering from illnesses, or are exhibiting symptoms of illness, that cannot now be diagnosed or clearly defined. As a result, many of these conditions or illnesses are not considered to be service connected under current law for purposes of benefits administered by the Department of Veterans Affairs.

''(3) The National Institutes of Health Technology Assessment Workshop on the Persian Gulf Experience

and Health, held in April 1994, concluded that the complex biological, chemical, physical, and psychological environment of the Southwest Asia theater of operations produced complex adverse health effects in Persian Gulf War veterans and that no single disease entity or syndrome is apparent. Rather, it may be that the illnesses suffered by those veterans result from multiple illnesses with overlapping symptoms and causes that have yet to be defined.

''(4) That workshop concluded that the information concerning the range and intensity of exposure to toxic substances by military personnel in the Southwest Asia theater of operations is very limited and that such information was collected only after a considerable delay.

''(5) In response to concerns regarding the healthcare needs of Persian Gulf War veterans, particularly those who suffer from illnesses or conditions for which no diagnosis has been made, the Congress, in Public Law 102–585 [see Short Title of 1992 Amendments note under section 101 of this title], directed the establishment of a Persian Gulf War Veterans Health Registry, authorized health examinations for veterans of the Persian Gulf War, and provided for the National Academy of Sciences to conduct a comprehensive review and assessment of information regarding the health consequences of military service in the Persian Gulf theater of operations and to develop recommendations on avenues for research regarding such health consequences. In Public Law 103–210 [see Tables for classification], the Congress authorized the Department of Veterans Affairs to provide health care services on a priority basis to Persian Gulf War veterans. The Congress also provided in Public Law 103–160 (the National Defense Authorization Act for Fiscal Year 1994) [see Tables for classification] for the establishment of a specialized environmental medical facility for the conduct of research into the possible health effects of exposure to low levels of hazardous chemicals, especially among Persian Gulf veterans, and for research into the possible health effects of battlefield exposure in such veterans to depleted uranium.

''(6) In response to concerns about the lack of objective research on Gulf War illnesses, Congress included research provisions in the National Defense Authorization Act for Fiscal Year 1995 [Pub. L. 103–337, see Tables for classification], which was passed by the House and Senate in September 1994. This legislation requires the Secretary of Defense to provide research grants to non-Federal researchers to support three types of studies of the Gulf War syndrome. The first type of study will be an epidemiological study or studies of the incidence, prevalence, and nature of the illness and symptoms and the risk factors associated with symptoms or illnesses. This will include illnesses among spouses and birth defects and illnesses among offspring born before and after the Gulf War. The second group of studies shall be conducted to determine the health consequences of the use of pyridostigmine bromide as a pretreatment antidote enhancer during the Persian Gulf War, alone or in combination with exposure to pesticides, environmental toxins, and other hazardous substances. The final group of studies shall include clinical research and other studies on the causes, possible transmission, and treatment of Gulf War syndrome, and will include studies of veterans and their spouses and children.

''(7) Further research and studies must be undertaken to determine the underlying causes of the illnesses suffered by Persian Gulf War veterans and, pending the outcome of such research, veterans who are seriously ill as the result of such illnesses should be given the benefit of the doubt and be provided compensation benefits to offset the impairment in earnings capacities they may be experiencing.

''SEC. 103. PURPOSES.

''The purposes of this title [see Short Title of 1994 Amendments note under section 101 of this title] are—

''(1) to provide compensation to Persian Gulf War veterans who suffer disabilities resulting from illnesses that cannot now be diagnosed or defined, and for which other causes cannot be identified;

''(2) to require the Secretary of Veterans Affairs to develop at the earliest possible date case assessment strategies and definitions or diagnoses of such illnesses;

''(3) to promote greater outreach to Persian Gulf War veterans and their families to inform them of ongoing research activities, as well as the services and benefits to which they are currently entitled; and

''(4) to ensure that research activities and accompanying surveys of Persian Gulf War veterans are appropriately funded and undertaken by the Department of Veterans Affairs.

''SEC. 104. DEVELOPMENT OF MEDICAL EVALUATION PROTOCOL.

''(a) UNIFORM MEDICAL EVALUATION PROTOCOL.—(1) The Secretary of Veterans Affairs shall develop and implement a uniform and comprehensive medical evaluation protocol that will ensure appropriate medical assessment, diagnosis, and treatment of Persian Gulf War veterans who are suffering from illnesses the origins of which are (as of the date of the enactment of this Act [Nov. 2, 1994]) unknown and that may be attributable to service in the Southwest Asia theater of operations during the Persian Gulf War. The protocol shall include an evaluation of complaints relating to illnesses involving the reproductive system.

''(2) If such a protocol is not implemented before the end of the 120-day period beginning on the date of the enactment of this Act [Nov. 2, 1994], the Secretary shall, before the end of such period, submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report as to why such a protocol has not yet been developed.

''(3)(A) The Secretary shall ensure that the evaluation under the protocol developed under this section is available at all Department medical centers that have the capability of providing the medical assessment, diagnosis, and treatment required under the protocol.

''(B) The Secretary may enter into contracts with non-Department medical facilities for the provision of the evaluation under the protocol.

''(C) In the case of a veteran whose residence is distant from a medical center described in subparagraph (A), the Secretary may provide the evaluation through a Department medical center described in that subparagraph and, in such a case, may provide the veteran the travel and incidental expenses therefor pursuant to the provisions of section 111 of title 38, United States Code.

''(4)(A) If the Secretary is unable to diagnose the symptoms or illness of a veteran provided an evaluation, or if the symptoms or illness of a veteran do not respond to treatment provided by the Secretary, the Secretary may use the authority in section 1703 of title 38, United States Code, in order to provide for the veteran to receive diagnostic tests or treatment at a non-Department medical facility that may have the capability of diagnosing or treating the symptoms or illness of the veteran. The Secretary may provide the veteran the travel and incidental expenses therefor pursuant to the provisions of section 111 of title 38, United States Code.

''(B) The Secretary shall request from each non-Department medical facility that examines or treats a veteran under this paragraph such information relating to the diagnosis or treatment as the Secretary considers appropriate.

''(5) In each year after the implementation of the protocol, the Secretary shall enter into an agreement with the National Academy of Sciences under which agreement appropriate experts shall review the adequacy of the protocol and its implementation by the Department of Veterans Affairs.

''(b) RELATIONSHIP TO OTHER COMPREHENSIVE CLINICAL EVALUATION PROTOCOLS.—The Secretary, in consulta-

tion with the Secretary of Defense, shall ensure that the information collected through the protocol described in this section is collected and maintained in a manner that permits the effective and efficient cross-reference of that information with information collected and maintained through the comprehensive clinical protocols of the Department of Defense for Persian Gulf War veterans.

''(c) CASE DEFINITIONS AND DIAGNOSES.—The Secretary shall develop case definitions or diagnoses for illnesses associated with the service described in subsection (a)(1). The Secretary shall develop such definitions or diagnoses at the earliest possible date.

''SEC. 105. OUTREACH TO PERSIAN GULF VETERANS.

''(a) IN GENERAL.—The Secretary of Veterans Affairs shall implement a comprehensive outreach program to inform Persian Gulf War veterans and their families of the medical care and other benefits that may be provided by the Department of Veterans Affairs and the Department of Defense arising from service in the Persian Gulf War.

''(b) NEWSLETTER.—(1) The outreach program shall include a newsletter which shall be updated and distributed at least semi-annually and shall be distributed to the veterans listed on the Persian Gulf War Veterans Health Registry. The newsletter shall include summaries of the status and findings of Government sponsored research on illnesses of Persian Gulf War veterans and their families, as well as on benefits available to such individuals through the Department of Veterans Affairs. The newsletter shall be prepared in consultation with veterans service organizations.

''(2) The requirement under this subsection for the distribution of the newsletter shall terminate on December 31, 2003.

''(c) TOLL-FREE NUMBER.—The outreach program shall include establishment of a toll-free telephone number to provide Persian Gulf War veterans and their families information on the Persian Gulf War Veterans Health Registry, health care and other benefits provided by the Department of Veterans Affairs, and such other information as the Secretary considers appropriate. Such toll-free telephone number shall be established not later than 90 days after the date of the enactment of this Act [Nov. 2, 1994].

''SEC. 107. EVALUATION OF HEALTH STATUS OF SPOUSES AND CHILDREN OF PERSIAN GULF WAR VETERANS.

''(a) EVALUATION PROGRAM.—Subject to subsection (c), the Secretary of Veterans Affairs shall conduct a program to evaluate the health status of spouses and children of Persian Gulf War veterans. Under the program, the Secretary shall provide for the conduct of diagnostic testing and appropriate medical examinations of any individual—

''(1) who is the spouse or child of a veteran who—

''(A) is listed in the Persian Gulf War Veterans Registry established under section 702 of Public Law 102–585 [set out in a note under section 527 of this title]; and

''(B) is suffering from an illness or disorder;

''(2) who is apparently suffering from, or may have suffered from, an illness or disorder (including a birth defect, miscarriage, or stillbirth) which cannot be disassociated from the veteran's service in the Southwest Asia theater of operations; and

''(3) who, in the case of a spouse, has granted the Secretary permission to include in the Registry relevant medical data (including a medical history and the results of diagnostic testing and medical examinations) and such other information as the Secretary considers relevant and appropriate with respect to such individual.

''(b) DURATION OF PROGRAM.—The program shall be carried out during the period beginning on November 1, 1994, and ending on December 31, 2003.

''(c) FUNDING LIMITATION.—The amount spent for the program under subsection (a) may not exceed $2,000,000.

''(d) CONTRACTING.—The Secretary may provide for the conduct of testing and examinations under subsection (a) through appropriate contract arrangements, including fee arrangements described in section 1703 of title 38, United States Code.

''(e) STANDARD PROTOCOLS AND GUIDELINES.—The Secretary shall seek to ensure uniform development of medical data through the development of standard protocols and guidelines for such testing and examinations. If such protocols and guidelines have not been adopted before the end of the 120-day period beginning on the date of the enactment of this Act [Nov. 2, 1994], the Secretary shall, before the end of such period, submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report as to why such protocols and guidelines have not yet been developed.

''(f) ENTRY OF RESULTS IN REGISTRY.—The results of diagnostic tests, medical histories, and medical examinations conducted under subsection (a) shall be entered into the Persian Gulf War Veterans Health Registry.

''(g) OUTREACH.—The Secretary shall conduct such outreach activities as the Secretary determines necessary for the purposes of the program. In conducting such outreach activities, the Secretary shall advise that medical treatment is not available under the program.

''(h) USE OUTSIDE DEPARTMENT OF STANDARD PROTOCOLS AND GUIDELINES.—The Secretary shall—

''(1) make the standard protocols and guidelines developed under this section available to any entity which requests a copy of such protocols and guidelines; and

''(2) enter into the registry the results of any examination of the spouse or child of a veteran who served in the Persian Gulf theater which a licensed physician certifies was conducted using those standard protocols and guidelines.

''(i) REPORT TO CONGRESS.—Not later than July 31, 1999, the Secretary shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report on activities with respect to the program, including the provision of services under subsection (d).

''(j) DEFINITIONS.—For purposes of this section, the terms 'child' and 'spouse' have the meanings given those terms in paragraphs (4) and (31), respectively, of section 101 of title 38, United States Code.

''SEC. 109. SURVEY OF PERSIAN GULF VETERANS.

''(a) IN GENERAL.—The Secretary of Veterans Affairs may carry out a survey of Persian Gulf veterans to gather information on the incidence and nature of health problems occurring in Persian Gulf veterans and their families.

''(b) COORDINATION WITH DEPARTMENT OF DEFENSE.—Any survey under subsection (a) shall be carried out in coordination with the Secretary of Defense.

''(c) PERSIAN GULF VETERAN.—For purposes of this section, a Persian Gulf veteran is an individual who served on active duty in the Armed Forces in the Southwest Asia theater of operations during the Persian Gulf War as defined in section 101(33) of title 38, United States Code.

''SEC. 110. AUTHORIZATION FOR EPIDEMIOLOGICAL STUDIES.

''(a) STUDY OF HEALTH CONSEQUENCES OF PERSIAN GULF SERVICE.—If the National Academy of Sciences includes in the report required by section 706(b) of the Veterans Health Care Act of 1992 (Public Law 102–585) [set out in a note under section 527 of this title] a finding that there is a sound basis for an epidemiological study or studies on the health consequences of service in the Persian Gulf theater of operations during the Persian Gulf War and recommends the conduct of such a study or studies, the Secretary of Veterans Affairs is authorized to carry out such study.

''(b) OVERSIGHT.—(1) The Secretary shall seek to enter into an agreement with the Medical Follow-Up Agency (MFUA) of the Institute of Medicine of the Na-

tional Academy of Sciences for (A) the review of proposals to conduct the research referred to in subsection (a), (B) oversight of such research, and (C) review of the research findings.

''(2) If the Secretary is unable to enter into an agreement under paragraph (1) with the entity specified in that paragraph, the Secretary shall enter into an agreement described in that paragraph with another appropriate scientific organization which does not have a connection to the Department of Veterans Affairs. In such a case, the Secretary shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives, at least 90 days before the date on which the agreement is entered into, notice in writing identifying the organization with which the Secretary intends to enter into the agreement.

''(c) ACCESS TO DATA.—The Secretary shall enter into agreements with the Secretary of Defense and the Secretary of Health and Human Services to make available for the purposes of any study described in subsection (a) all data that the Secretary, in consultation with the National Academy of Sciences and the contractor for the study, considers relevant to the study.

''(d) AUTHORIZATION.—There are authorized to be appropriated to the Department such sums as are necessary for the conduct of studies described in subsection (a).''

[Pub. L. 104–262, title III, §352(b), Oct. 9, 1996, 110 Stat. 3211, provided that: ''Any diagnostic testing and medical examinations undertaken by the Secretary of Veterans Affairs for the purpose of the study required by subsection (a) of such section [section 107(a) of Pub. L. 103–446, set out above] during the period beginning on October 1, 1996, and ending on the date of the enactment of this Act [Oct. 9, 1996] is hereby ratified.'']

REPORT TO CONGRESS ON INTENTION TO PAY COMPENSATION

Section 106(c) of Pub. L. 103–446 directed Secretary of Veterans Affairs, not later than 60 days after Nov. 2, 1994, to submit to Congress a report stating whether or not the Secretary intended to pay compensation as provided in this section.

EXECUTIVE ORDER NO. 12961

Ex. Ord. No. 12961, May 26, 1995, 60 F.R. 28507, which established the Presidential Advisory Committee on Gulf War Veterans' Illnesses, was revoked by Ex. Ord. No. 13138, §3(g), Sept. 30, 1999, 64 F.R. 53880, formerly set out as a note under section 14 of the Appendix to Title 5, Government Organization and Employees.

EX. ORD. NO. 13034. EXTENSION OF PRESIDENTIAL ADVISORY COMMITTEE ON GULF WAR VETERANS' ILLNESSES

Ex. Ord. No. 13034, Jan. 30, 1997, 62 F.R. 5137, provided:

By the authority vested in me as President by the Constitution and the laws of the United States of America, it is hereby ordered as follows:

SECTION 1. *Extension.* The Presidential Advisory Committee on Gulf War Veterans' Illnesses (the ''Committee''), established pursuant to Executive Order 12961 [set out above] of May 26, 1995, is hereby extended for the purposes set forth herein. All provisions of that order relating to membership and administration shall remain in effect. All Committee appointments, as well as the President's designation of a Chairperson, shall remain in effect. The limitations set forth in section 2(c)–(e) and section 4(a) of Executive Order 12961 shall also remain in effect. The Committee shall remain subject to the Federal Advisory Committee Act, as amended, 5 U.S.C. App.

SEC. 2. *Functions.* (a) The Committee shall report to the President through the Secretary of Defense, the Secretary of Veterans Affairs, and the Secretary of Health and Human Services.

(b) The Committee shall have two principal roles:

(1) Oversight of the ongoing investigation being conducted by the Department of Defense with the assistance, as appropriate, of other executive departments and agencies into possible chemical or biological warfare agent exposures during the Gulf War; and

(2) Evaluation of the Federal Government's plan for and progress towards the implementation of the Committee's recommendations contained in its Final Report submitted on December 31, 1996.

(c) The Committee shall provide advice and recommendations related to its oversight and evaluation responsibilities.

(d) The Committee may also provide additional advice and recommendations prompted by any new developments related to its original functions as set forth in section 2(b) of Executive Order 12961.

(e) The Committee shall submit by letter a status report by April 30, 1997, and a final supplemental report by October 31, 1997, unless otherwise directed by the President.

SEC. 3. *General Provisions.* (a) The Committee shall terminate 30 days after submitting its final supplemental report.

(b) This order is intended only to improve the internal management of the executive branch and it is not intended to create any right, benefit or trust responsibility, substantive or procedural, enforceable at law or equity by a party against the United States, its agencies, its officers, or any person.

WILLIAM J. CLINTON.

§ 1118. Presumptions of service connection for illnesses associated with service in the Persian Gulf during the Persian Gulf War

(a)(1) For purposes of section 1110 of this title, and subject to section 1113 of this title, each illness, if any, described in paragraph (2) shall be considered to have been incurred in or aggravated by service referred to in that paragraph, notwithstanding that there is no record of evidence of such illness during the period of such service.

(2) An illness referred to in paragraph (1) is any diagnosed or undiagnosed illness that—

(A) the Secretary determines in regulations prescribed under this section to warrant a presumption of service connection by reason of having a positive association with exposure to a biological, chemical, or other toxic agent, environmental or wartime hazard, or preventive medicine or vaccine known or presumed to be associated with service in the Armed Forces in the Southwest Asia theater of operations during the Persian Gulf War; and

(B) becomes manifest within the period, if any, prescribed in such regulations in a veteran who served on active duty in that theater of operations during that war and by reason of such service was exposed to such agent, hazard, or medicine or vaccine.

(3) For purposes of this subsection, a veteran who served on active duty in the Southwest Asia theater of operations during the Persian Gulf War and has an illness described in paragraph (2) shall be presumed to have been exposed by reason of such service to the agent, hazard, or medicine or vaccine associated with the illness in the regulations prescribed under this section unless there is conclusive evidence to establish that the veteran was not exposed to the agent, hazard, or medicine or vaccine by reason of such service.

(4) For purposes of this section, signs or symptoms that may be a manifestation of an undiagnosed illness include the signs and symptoms listed in section 1117(g) of this title.