



# Committees on VA House of Representatives and Senate

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STATEMENT OF

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COMMANDER-IN-CHIEF  
VETERANS OF FOREIGN WARS OF THE UNITED STATES

BEFORE THE

JOINT HEARING OF THE  
COMMITTEES ON VETERANS' AFFAIRS  
UNITED STATES HOUSE OF REPRESENTATIVES  
AND  
UNITED STATES SENATE

WASHINGTON, D.C.

Chairmen Filner and Akaka, Ranking Members Buyer and Burr, Members of the House and Senate Veterans' Affairs Committees, Distinguished Comrades of the VFW and our Auxiliaries and our Special Guests:

I am honored to be here today to represent the 2.2 million men and women of the Veterans of Foreign Wars of the U.S. and our Auxiliaries. The VFW is this nation's oldest and largest major combat veterans organization, and our impact is felt in every state and congressional district throughout the country, and even the world.

Despite our diversity, we share the experience of the battlefield. We know what it's like to be thousands of miles away from friends and family, far from safety and security. We know the

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struggles that those who now wear the uniform face.

For that reason, we understand the obligation this nation has to all these brave men and women. President Lincoln's words are well worn, but they still resonate. This nation must care for "him who have borne the battle and for his widow, and his orphan."

Chairman Filner and Chairman Akaka, I know you understand that obligation. Thanks to your efforts and those of Senator Webb, we have seen the creation of the new GI Bill that will create a new generation of leaders. In addition, the health care and benefits bills you steered through the process will improve the lives of thousands of veterans.

We salute you and your hard-working staff on those amazing accomplishments.

Even with those accomplishments, two things have come up in recent weeks that shake our faith.

The first is the out-of-touch proposal to begin charging veterans with insurance for their service-connected conditions. The second is about the continuing horror stories coming out of the Veterans Benefits Administration and some of its employees' callous disregard for the veterans they serve.

Let me start with the billing for service connection issue. I want to be clear. This proposal is a non-starter for the VFW.

It is unconscionable to pass along the costs of war to wounded and disabled veterans. At its most basic level, veterans' affairs is about caring for these men and women, as Abraham Lincoln noted. Their care is part of a sacred trust this nation has with its defenders. The care and treatment for those who are wounded or disabled is the ongoing cost of war. It is the price a grateful nation pays to her defenders.

We understand that the President has not finalized the proposal, but that he is likely to introduce it when he releases his full budget details in April. Nevertheless, the budget framework he released in February shows some of the details. It calls for a roughly \$1 billion increase in collections, which is about 40% more than the current year's level. We have heard that the revenue projections for this new billing proposal make up the bulk of that increase.

The care and treatment of wounded and disabled veterans is something all Americans must share equally. This proposal would raise insurance premiums across the board, creating inequities. It would also lead to disabled veterans subsidizing their own injuries through increased premiums and fees as insurance companies try to find ways to pass along the added expense.

It could also have a dramatically negative effect on the ability of disabled veterans to obtain and maintain private health care insurance. More companies would be inclined to bar payment for service-connected conditions on the grounds of it being a pre-existing condition. These disabilities could make it more difficult for a veteran to find insurance in the first place – especially insurance that is affordable.

In addition, although we would like to think that it would not, it is entirely possible that this proposal could impair a veteran's ability to obtain a job. Many small- and medium-sized businesses are self-insured, and their health-care costs would go up dramatically. That is a strong disincentive for them to hire disabled veterans – or even veterans, in general, because some of them do not physically show their disabilities.

Think about these issues carefully. Think about the impact beyond a bottom-line budget number. Think about the impact on the veterans. Think about the impact on their families if the veteran is the primary insurance carrier. Think about that sacred trust and think about what Lincoln's words truly mean.

If you do, you will realize that this proposal is wrong.

We look to every one of you sitting before us – and the entire Congress – to soundly defeat this proposal. Our members – and certainly all of America – will be watching your actions very carefully.

The second distressing issue involves the most recent rash of reports on the VA claims processing system.

It is bad enough that it takes half a year for VA to adjudicate even the most basic of claims, but the VA Inspector General's recent report takes our frustration to a new level. These revelations have confirmed many veterans' worst fears and darkest suspicions. Veterans are losing faith in this unmanageable system.

Consider the revelations:

- Over 600 claim-related documents were improperly found at shredders during a one-time search throughout the system.
- Managers of the NY regional office directed staff to intentionally alter claims dates to artificially improve the office's processing times, and an audit showed date errors on a majority of claims.
- 16,000 pieces of unopened mail were turned in at the Detroit office during an amnesty period

Are these signs of a system veterans can trust?

This is a failure of VBA at every level – from the employee who tucked away envelopes he or she did not feel like opening, to the managers who did not perform proper supervision, to the leaders here in Washington who refused to seriously address the issues we have pointed out for years.

We need leadership and accountability at every single level. We also need new and innovative solutions that actually work, not just the quick fix to put out the latest fire of controversy.

In his statements, it is clear that Secretary Shinseki has a vision for technology that we wholly support. We believe that if you fully support his vision, he can effectively leverage information technology to dramatically transform and improve the department.

VBA and its employees are drowning in paper. If you have visited a VA office, you have seen mountains of paperwork running from the floor to the ceiling. File cabinets are full, and desks are overflowing with veterans' claims files. Much of this paperwork could and should be electronic.

Computerized records would prevent paper files from getting lost or shredded. They could be tracked and monitored more effectively so that VA and the veteran know where in the process their claim file is. Anyone who has shipped a package through FedEx gets a tracking number and knows exactly where it is every day until FedEx delivers it. Veterans deserve the same.

Computers could help decide many education and pension claims. On complex claims, computers can provide valuable assistance if they are programmed smartly.

The net result would be a speedier process. That benefits VA, but a faster, more reliable system benefits the veteran.

Improving the claims process system is not just a technological issue. It is also one of individuals, leadership and accountability.

When he testified before the House Veterans Affairs Committee, Secretary Shinseki noted, "people induce change, not technology, or processes, so transformation is ultimately a leadership issue." We agree.

The VFW has always argued that leadership and accountability are the keys to fixing the benefits problem. We salute your efforts to increase the number of claims raters. We believe that, in time, this will make a big improvement in the backlog.

However, it is not going to be an instant solution. It might not even be something we see in a year or two.

It takes about two years for a rater to understand the process. Mastery can take even longer.

While they are learning, their mentors, those rating specialists with 20-30 years of experience, are retiring in huge numbers. Although VA rehires some as trainers, it would be more cost effective and increase flexibility and management's options if VA could induce potential retirees to remain in the workforce for a few more years. We urge Congress to examine changes to the law to allow VA management to use retention bonuses to keep the best VA raters around long enough to continue mentoring, training and rating cases.

Short-term gains are not necessarily a realistic expectation. We have a huge number of inexperienced raters, an increasing number of claims, and the claims themselves are growing in complexity.

It is hard to say have patience when delays take money out of a veteran's pocket – money that the veteran likely needs to help support themselves and their family – but we need to focus on long-term fixes, instead of chasing short-term gains.

We need to change the culture of VA leadership, to hold managers and employees accountable for the quality of their decisions. That also includes training and education, and a commitment from all levels of VA to dig in and solve these problems.

Another innovation we would like to see that would lead to better management is in health care funding. We are calling on Congress to pass Advanced Funding for the VA health care system. We strongly believe that it would result in more efficient spending, higher quality health care, improved access, and more successful management.

Chairmen Akaka and Filner, the VFW commends your leadership in re-introducing this critical bill. We also salute the many others who have signed on to the concept. It is among the VFW's highest priorities.

Advanced funding is a simple solution to a complex problem. It does not change how the process works, just when it does.

All it does is fund veterans health care a year ahead of time. That way VA can properly manage its health care resources. If VA hospital directors know their funding before the year begins, they can better target money towards problem areas. It allows them to be proactive, not reactive.

This is especially true when it comes to the hiring of health care providers. With an advanced budget locked in, VA can aggressively recruit doctors and nurses. This is critical to

address the availability of care in rural areas as well as gaps in specialty care.

Advanced funding does not take away your oversight ability or any control. It just ensures that veterans have a budget that is sufficient, timely and predictable.

The VFW looks forward to working with you to ensure its passage.

While we have advanced funding as a goal, we must still work within the current funding process. To that end, we salute all of your efforts over these last few years. The dramatic increases in health care funding have done a lot to improve the services provided to America's veterans.

The quality of VA health care is high. Even though I am a service-connected veteran, until recently, I had never used the VA system. I decided to use the Dallas VA, one of the largest in the country, because I go to Dallas regularly, and had heard good things about the service there.

Having lived in Dallas in the late 1970s, I had often gone to the VA as a volunteer with my VFW Post. It was a dingy place full of old veterans – not exactly the kind of place I would want to use.

So I was surprised to see the change today. Under Director Joseph Dalpiaz, it has become the model of service to veterans. The parking needs some work, but not the treatment veterans receive.

On my first visit, I did lab work, x-rays and an EKG. Every part of the appointment went smoothly without major delay. I was impressed and satisfied. In fact, they went out of their way to ensure that I was taken care of fully. They would not leave my side until I made a follow-up appointment with a primary care doctor, and had a full PTSD screening.

All veterans deserve this kind of care.

You are all familiar with the Independent Budget, a budget prepared for veterans by veterans. As the 2010 funding process plays out, we would hope that Congress and the administration would consider those recommendations. We are calling for \$54.6 billion dollars in discretionary funding. Other than the aggressive collections targets, the President's budget framework appears to be in line with our recommendations. However, the devil is in the details.

Funding is essential in shoring up access problems, especially in rural areas. We realize that not every veteran is going to have care within a short car trip, so we look to VA – especially the new Office of Rural health care – to provide innovative solutions. This could be through

mobile health care vans, expansion of outpatient clinics, or VA using the authority it already has to provide limited contract care for veterans in remote areas.

Full funding is important because the veterans' health care system is facing new challenges. The newest generation of veterans has different needs and different requirements than previous generations. VA has had to learn and grow, adapting on the fly. While those changes have sometimes come too slowly, VA is getting better. Nevertheless, VA can do more.

We need further research and better treatment for Traumatic Brain Injuries. There is still a lot we do not know about TBI, especially in its milder forms. What are the long-term consequences? What future health care needs will veterans have?

We also need better screenings for the symptoms of TBI. We must ensure that VA screens everyone, and that those who suffer from TBI are treated.

For those men and women with the most severe disabilities, we must be mindful of the needs of those who provide care. Many of these traumatically injured heroes return home and receive a substantial part of their care from loved ones. We need to train and support these family members, and the VFW continues to support legislation that would allow VA to compensate them as caregivers.

Many returning servicemembers face other problems. The wounds of those suffering from mental health issues are not physical, but these men and women struggle just the same.

These have been wars with no true front line. Even routine patrols require constant vigilance. Stress is inescapable.

No one ever goes into battle and comes home the same person. We all handle it differently.

Routine screenings are essential to tackling mental health issues early, and ensuring that those who need help get help. We must be proactive in our efforts to help those who suffer.

VA must continue to expand the scope of its services, especially through Vet Centers. We have been pleased with their continued spread throughout the country. We strongly believe that their informal drop-in approach reduces one of the barriers to care.

VA, however, can do other things. It needs to recruit and retain more mental health care professionals. The department must continue to educate doctors, nurses and staff about the needs of veterans and the warning signs of mental health problems.

This is especially true with the national tragedy of veterans' suicides. We need to ensure that



there are services available when veterans need them, such as the VA Suicide Hotline. Even one suicide is too many.

Simply, veterans must have access to services when they need them. For veterans who are dealing with milder problems, options must be available, too.

Another area in which OEF/OIF veterans are changing VA is with women's health care. The growing number of female veterans is not just a short-term challenge. Women will be in the VA system from now on, and the system must continue to adapt to their needs.

VA must provide more gender-specific care, and eliminate all barriers to care.

We appreciate the increased attention that VA is paying to providing care in appropriate settings. For example, we cannot expect a female veteran suffering from military sexual trauma to sit in a waiting room full of male veterans before she speaks to a psychiatrist.

In many cases, the solutions are common sense. However, it is a cultural shift for VA. VA is making progress on it, but these improvements must come at a faster pace.

To that end, we strongly supported last year's "Women Veterans Health Improvement Act." We understand that a similar version has been reintroduced in the House and Senate, and we would hope that your committees would approve this vital legislation.

Another major issue OEF/OIF veterans face is with the seamless transition. Just like with VBA, we believe that technology – and the Secretary's vision of what works – is going to be the answer to this decades-long problem.

We are optimistic that the Secretary's experience in DOD is going to help the two departments finally break through. After years of inaction, delays and false starts, we have confidence that he can make progress – If you give him the resources.

Simply put, we want a system with a single file, created on the day a man or woman enlists. It should contain their health and medical records, following with them wherever they are transferred. If they go to Germany, it goes with them. If they go to the front lines in Afghanistan, it travels with them. It must contain deployment histories and any medical treatments the servicemember received.

When it is time for them to leave the service, that record moves to VA electronically and seamlessly. VA's people could immediately use the information without having to wait for some office somewhere to pick through paper files and send copies across the country.

If the veteran wants to file a claim for service connection, all the treatment and deployment information is right there. If the veteran uses VA for health care, it should integrate with



VA's system. These treatments would add to the record, and be portable, no matter which VA the veteran uses.

It is a simple vision, but complex in execution. We just need true dedication and effort. We need Congress to fully empower Secretary Shinseki to get this done.

However, our efforts at improving the transition involve more than just quick access to health care or speedier claims decisions. Our nation provides a number of education and employment programs to help our veterans return to civilian life. In this tough economic climate, these are especially important.

Even before the economic downturn, young veterans had a much higher unemployment rate than non-veterans. We owe them a chance to resume the life they put on hold to protect and defend us.

Along those lines, we must ensure that VA meets all targets for implementing the new GI Bill. We cannot delay this program even by a day. If technology and bureaucracy are roadblocks, then VA needs a short-term solution for this most important benefit. We really need Congress to use its oversight authority to ensure that VA gets this done. Veterans are relying on all of you.

We also need improved employment and training opportunities for veterans. We need an emphasis on programs that prepare our veterans for the job market. Our goal should not just be getting a vet a quick job tomorrow. We must keep our eye on the long-term goal of getting these men and women in position to have meaningful careers.

We look to you in Congress, but especially those in corporate America to live up to that promise. Yes, it is a tough business climate, but companies must do more to hire America's veterans.

In addition, we continue to assert that we must enforce all veterans' preference laws and regulations.

We also call on Congress to improve Voc Rehab, including raising the rates to bring them in line with the GI Bill.

Some have suggested that Voc Rehab is less relevant now that veterans can use the expanded GI Bill. However, Voc Rehab provides a host of services aimed at service-disabled veterans. It is a vital program that enables the most disabled to become employable again.

We also call for a Voc Rehab for Life program. We strongly believe that a service-disabled veteran should have every opportunity for increased training and educational opportunities throughout their career.

With today's unsteady economic conditions, it is especially important. A disabled veteran who, for example, was laid off from a factory job should be able to go back to school, and learn new technologies to better his or her prospects. It will put them in position to have a meaningful career.

We must all double our efforts to honor those who have put on this nation's uniform.

This is especially true for those men and women who sadly find themselves homeless. It truly is a national tragedy that so many go without a roof over their head or without a means to support themselves or their families.

We need more funding for the critical partnerships between VA and the many state, local, civic and religious organizations to solve this crisis.

We also must thank the thousands of people throughout the country who run these programs because they are making a meaningful difference in the lives of thousands of veterans every day.

While recently visiting Kentucky, I visited the Homeless Veterans Transition Facility at the Leestown Campus in Lexington. A building that VA no longer needed, now houses 40 homeless veterans. I saw, first-hand, 40 highly motivated homeless veterans who, thanks to this program, are on their way to leading a normal life. The VFW congratulates Dr. Patrick McKiernan and his staff for the great job they do.

This level of compassion must begin even before these men and women separate from service. We need to ensure that those currently serving have a high quality of life. We need higher pay and better benefits.

In addition, we must offer them peace of mind by improving their home life. We need better barracks and better housing. We need safe living and working environments.

We need improvements for their families, such as better schools and easier access to health care. In my travels, I have found a great need for more childcare for active duty personnel and their families. We have more married servicemembers than ever before, and the accompanying overseas tours create new problems that we should address. We must have counseling services for families to help them deal with difficulties associated with deployments. If there is anything we can do to lessen the toll, we must do it.

We continue to oppose any increase in TRICARE enrollment fees, co-pays and deductibles. We urge Congress to require DoD to pursue other means to make TRICARE cost efficient without seeking to "tax" beneficiaries whose service has more than paid for this benefit. We also support legislative action to move the authority to set TRICARE fees from DoD to the U.S. Congress, so this issue doesn't have to be revisited year after year. Military health care

and retirement benefits are earned entitlements.

The VFW strongly urges Congress to repeal the law that reduces military Survivor Benefit Plan (SBP) annuities by the amount of any survivor benefits payable under the VA Dependency and Indemnity Compensation (DIC) program.

SBP and DIC payments have distinct purposes. Retirees purchase SBP to provide a portion of retired pay to the survivor. DIC, which is tax free, is a special indemnity compensation paid to the survivor when a member's service causes his or her premature death. In such cases, the VA indemnity compensation should be added to the SBP the retiree paid for, not substituted for it.

Before I conclude, I would be remiss if I did not note our unwavering commitment to the fullest possible accounting for those who are still missing in action and whose fate is still unknown. It is imperative that the Congress not shrink from its responsibility to fully fund this national priority. We owe it to their families who are waiting for answers and to those who serve to fulfill this most sacred mission.

Mr. Chairmen, we are very mindful of the fact that much of what we ask requires more funding, but everything we are asking for benefits someone else. As you go about your agenda, we ask you to keep in mind the men and women who benefit from your actions: the 22.5 million veterans and the 2.2 million service members, as well as their families. The bills you write are not just words on a page. Every change and every improvement you make affects millions.

So take the changes you make seriously. Look for long-term answers to these complex problems. The quick fix is not always the best.

Keep in mind the three things that all who wear or who have worn the uniform share: "Honor, Sacrifice, and Service."

If you let those three words be your guide, you will achieve much.

I thank you for the honor of letting me appear here today on behalf of the Veterans of Foreign Wars. I stand ready to answer any questions you and the members of these great committees may have. Thank you.