

CMSGT (RET) USAF JOHN R.

STATEMENT

BY

CMSGT (RET) USAF JOHN R. "DOC" MCCAUSLIN  
CHIEF EXECUTIVE OFFICER  
AIR FORCE SERGEANTS ASSOCIATION

FOR THE JOINT HEARING OF THE  
SENATE AND HOUSE COMMITTEES  
ON VETERANS' AFFAIRS March 30, 2011

\*\* AFSA – Your Global Voice for 50 Years \*\*

Senator Murray and Congressman Miller, Congratulations on your selections to chair the Veterans Affairs Committees, on behalf of the 110,000 members of the Air Force Sergeants Association, thank you for this opportunity to offer the views of our members on the FY 2012 priorities. This hearing will address issues critical to those serving and who have served our nation.

Congratulations also to Congressman Miller, Congressman Bilirakis, Congressman Filner and Congressman Reyes as they are former recipients of our L. Mendel Rivers Award.

Congratulations to Congressman Phil Roe with receiving a very recent Congressional Silver Helmet Award from American Veterans.

AFSA represents active duty, guard, reserve, retired, and veteran enlisted Air Force members and their families, and this year marks our 50th Anniversary in doing so. Your continuing efforts toward improving the quality of their lives make a real difference, and our members are grateful. In this statement, I will list several specific goals that we hope this committee will pursue for FY 2012 on behalf of current and past enlisted members and their families. The content of this statement reflects the views of our members as they have communicated them to us. As always, we are prepared to present more details and to discuss these issues with your staffs.

How a nation fulfills its obligations to those who serve reflects its greatness. Since 1973 with the inception of the all volunteer force, we have continued to meet our objectives in recruiting. It is evident that today's treatment of the military influences our ability to recruit future service members, since a significant percentage of those wearing the uniform today come from of military families.

It is important that this committee view America's veterans as a vital national resource and treasure rather than as a financial burden. As you deliberate on the needs of America's veterans, this Association is gratified to play a role in the process and will work to support your decisions as they best serve this nation's veterans. We believe this nation's response for service should be based on certain principles. We urge this committee to consider the following principles as an underlying foundation for making decisions affecting this nation's veterans.

#### GUIDING PRINCIPLES

1. Veterans Have Earned a Solid Transition From Their Military Service Back Into Society: This country owes its veterans dignified, transitional, and recovery assistance. This help should be provided simply because they faithfully served in the most lethal of professions. For example –

America lost 36,500 in the Korean War, 58,000 died in the Vietnam conflict, another 4,424 were lost in Iraq, and most recently 1,461 in Afghanistan.

2. Most Veterans Are Enlisted Members: Enlisted veterans served with great pride and distinction. Our volunteer force has deployed over 3.3 million servicemembers and over 900,000 have deployed more than once during the last nine years. 45,000 of those who have deployed have Traumatic Brain Injuries (TBI). 700,000 children of our servicemembers have had one parent deployed during their lifetime. We should factor in the unique circumstances of enlisted veterans, especially in the area of the needs of the servicemember and their families once they have completed their tour of service to our country

3. Decisions on Veterans' Funding Primarily Should be Based on Merit: Funding for military veterans must, of course, be based on fiscal reality and prudence. However, Congress and, in turn, the VA must never make determinations simply because "the money is just not there" or because there are now "too many" veterans. Funding for veterans' programs should be viewed as a national obligation—a "must pay" situation. If congress can vote, fund, and send our servicemembers to war, they need to facilitate, fund, and provide care for those who have returned.

4. Remember that Reservists are Full-fledged Veterans Too! In Iraq, Afghanistan, and around the world, reserve component members are valiantly serving their nation, ready to sacrifice their lives if necessary. Since September 11, 2001, record numbers have been called up and continue to support operations. Nearly half of U.S. forces that served in Iraq have been guardsmen and reservists. Without question, enlisted guard and reserve members are full-time players as part of the "Total Force." Differences between reserve component members and the full-time force, in terms of VA programs or availability of services, are well overdue for review and updates.

5. The VA Must Openly Assume the Responsibility for Treatment of the Maladies of War: We are grateful for VA decisions in recent years that show a greater willingness to judge in favor of the service member. The VA focus on health care conditions caused by battle should be on presumption and correction, not on initial refutation, delay, and denial. It is important that the decision to send troops into harm's way also involves an absolute commitment to care for any healthcare condition that may have resulted from that service. Many veterans call and write to this Association about our government's denial, waffling, and reluctant recognition of illnesses caused by conditions during past conflicts. We applaud past decisions of your committees toward reinforcing a commitment to unconditional care after service, and encourage you to do the same in the future.

6. Taking Care of Our Military Families: AFSA led the effort on the Office of Community Support for Military Families, with Special Needs being added, under the Office of the Under Secretary of Defense for Personnel and Readiness, which came into effect under the FY2010 National Defense Authorization Act. AFSA played a significant role in ensuring AF leaders were keenly aware of the limitations of the program, and how a DoD level office would add renewed focus and vigor into an important program affecting thousands of our enlisted members and their families. We must ensure that these programs remain consistent and that the funding is there for them in the future. We need to ensure that once service members choose to retire or separate from the service, there are programs to take care of their families after their dedicated service to our nation. There also needs to be a provision allowing additional household goods weight for shipment of special needs equipment for their exceptional needs family member when they are forced to move on Government orders. For example, an E-6 had to pay \$7,000.00 out of his own

pocket to transport Exceptional Family Member goods for a Permanent Change of Station (PCS), because it exceeded his allotted weight allowance for his house hold goods.

## HEALTHCARE

We are working along with other Veterans Service Organizations (VSO's), The Military Coalition (TMC) and other governmental agencies to ensure that our past, present and future military members and families receive a cost effective, high quality health care benefit. Before seeking increases in enrollment fees, deductibles or co-payments, the DoD should pursue any and all options to contain the growth of health care spending in ways that do not disadvantage beneficiaries and provide incentives to promote healthy lifestyles.

We appreciate your consistent support in recent years to protect beneficiaries from disproportional health care fee increases. AFSA is strongly opposed to any healthcare fee increases in the President's 2012 budget, and will work diligently to maintain the earned healthcare benefit to our servicemembers.

The following are a few of the Healthcare issues included in our Top Priorities:

- Exempt those military retirees who entered service prior to December 7, 1956, from the obligation of Medicare Part B payments
- Oppose the various recommendations for retirees aged 38-64 to seek healthcare coverage from somewhere else besides TRICARE
- Limit beneficiary costs for TRICARE network/mail order prescription drug
- Establish a full optometry benefit for military retirees

Support Judicious VA-DoD Sharing Arrangements: We support the judicious use of VA-DoD sharing arrangements involving network inclusion in the DoD health care program, especially when it includes consolidating physical examinations at the time of separation. It makes no sense to order a full physical exam on your retirement from the military and then within 30 days the VA has ordered their own complete physical exam with most of the same exotic and expensive exams. The decision to begin this process represents a good, common-sense approach that should eliminate problems of inconsistency, save time, and take care of veterans in a timely manner. These initiatives will save funding dollars. AFSA recommends that the committee closely monitor the collaboration process to ensure these sharing projects actually improve access and quality of care for eligible beneficiaries. DoD beneficiary participation in VA facilities must never endanger the scope or availability of care for traditional VA patients, nor should any VA-DoD sharing arrangement jeopardize access and/or treatment of DoD health services beneficiaries. One example of a successful joint sharing arrangement is the new clinic with ambulatory care services being in Colorado Springs, Colorado. This will aid the large number of veterans remaining in the area and support the increases in Colorado Springs as a result of BRAC initiatives. The VA and DoD each have a lengthy and comprehensive history of agreeing to work on such projects, but follow-through is lacking. "We urge these committees to encourage joint VA-DoD efforts, but ask you to exercise close oversight to ensure such arrangements are implemented properly."

Support VA Subvention: With more than 40 percent of veterans eligible for Medicare, VA-Medicare subvention is a very promising venture, and AFSA offers support for this effort. Under this plan, Medicare would reimburse the VA for care the VA provides to non-disabled Medicare-eligible veterans at VA medical facilities. This funding method would, no doubt, enhance elderly veterans' access to VA health care.

## VETERANS

Support State Veterans Homes: The State Veterans home program continues to be the preferred provider of long term care for veterans providing over 30,000 beds in 140 state veteran's homes in all fifty states. This is over fifty percent of our veteran's long term population. Veterans Affairs has formed an ongoing partnership with state governments and the State Veterans Homes, yet it is essential that Congress and the VA recognize that veterans often need a level of care greater than what the per diem reimbursement rate provides. The current challenge is the enhanced per diem program that went into effect twenty three months ago. These homes are an excellent federal investment since the states provide funding for two-thirds of total operating costs. We urge your committees to take a close look at the required level of support to protect these important national assets

This program continues to cause hardships by not providing sufficient compensation for the cost of care that is being provided to our service connected veterans in state homes. This issue has caused state homes to limit or refrain from admitting eligible veterans in their homes. The state homes have worked with the VA for the past 23 months on an administrative fix. There is still a need for a legislative solution that will provide proper reimbursement for our service connected veterans. We urge this committee to take a close look at the required level of support to protect these important national assets, and further, to consider them as opportunities to provide high quality care for our nation's veterans while simultaneously minimizing the cost of providing that care. With current military activities, our nation will bear the burden of a generation of service-members who have been inflicted with severe disabilities who will need a health care environment in which to live. In recognizing this, we must be prepared to fund, build, and maintain significantly more facilities than we have today. Unfortunately, many families will have to make the difficult decision to place their loved one in a veterans' home. It is absolutely necessary that our nation's leaders ensure there is room for them and quality care available. We must plan now--not later! We must determine funding now, start building now, and become proactive in our approach to provide long-term care for the next 50 to 75 years for this generation of service members.

Care for Women Veterans: We applaud the actions of your committee for championing women veteran's health care issues in recent years. The unique health care challenges faced by women veterans must be met with a sense of higher urgency from Congress. During Desert Storm, 41,000 women served in theatre during the operational period (according to the Women in Military Service for America Memorial Foundation). Currently, women make up more than 19 percent of the active duty Air Force and approximately 21 percent of the Air Force Reserve (Air Force Personnel Center). We currently have 214,000 women serving in the DoD today, many of

which have already returned from service in Iraq and Afghanistan. Of those who have served, VA estimates that more than 40 percent have already enrolled for healthcare, a percentage that is expected to double in the next 20 years. They too suffer from the same effects of battle as many of their fellow male servicemembers; such as PTSD, TBI, and Wounded Warrior issues that come with wearing the uniform. As the number of women veteran's increases, the VA must be funded to increasingly provide the resources and legal authority to care for female-specific health care needs. We have been transitioning over the years away from the large male population of previous wars and conflicts and we must absolutely make sure that we do not neglect the needs of these women who have volunteered to serve our country.

**Protect VA Disability Compensation:** Despite being clearly stated in law, veterans' disability compensation has become an easy target for former spouses and lawyers seeking money. This has been allowed to transpire despite the fact the law states that veterans' benefits "shall not be liable to attachment, levy, or seizure by or under any legal or equitable process, whatever, either before or after receipt by the beneficiary." Perhaps, additional legislation is needed to enforce the probation against court-orders or state legislation that would award VA disability dollars to former spouses or third parties in divorce settlements.

**Wounded Warrior Care:** More than 42,000 servicemembers have been wounded in action since the current conflicts began nearly a decade ago. As a nation we have no greater responsibility than to our wounded warriors and their families. Major strides are continually being made and the budget has continued to show the increasing support by providing additional personnel for Wounded Warrior Support projects. This will help the continuing implementation of a military health system enterprise wide approach to prioritize the necessary modernization of treatment facilities and continue to establish Centers of Excellence for the prevention, diagnosis, and treatment of the various severe injuries we are experiencing in today's and future wars. Other areas for improvement include efforts to continue to grow programs such as the Soldier Family Assistance centers, the Marine Corps Wounded Warrior Regimental Headquarters and Wounded Warrior Battalions, increasing the number of Air Force Recovery Care Coordinators and expanding the Navy's Safe harbor program. Continuing to establish a single Disability Evaluation System that creates a simpler, faster, and more consistent process of determining whether wounded, ill or injured service members may continue their military service or should transition to veteran status. Overall, we must ensure that we establish policies, processes, and create programs aimed at ensuring continuity in mental health care and counseling services for military personnel as they transition from one duty station to another or transition from military healthcare to veteran care. We must continue to build on family care compensation for those service members who have a family member taking care of them as they recover from catastrophic medical conditions. We must find every avenue possible to adequately compensate them as our service member recovers from their injuries.

**"Seamless" Transferable Medical Records - Speedier Claims Processing and Improved Accuracy:** For many veterans, association with the VA begins with the claims process. Proposed increases in funding and manpower mentioned in the Administration's budget plan are admirable. The backlog for compensation and pension, education and appeals claims is a disgrace! We are looking at the Veterans Affairs new claims process initiative to address the many concerns of accurate and timely management.

The record numbers of veterans being generated by the wars in Afghanistan and Iraq underscore the importance of accelerating DoD and VA plans to seamlessly transfer medical information and records between the two federal departments. The implementation of the Virtual Lifetime Electronic Record by 2012 will be long overdue and a welcomed step in the 21st century.

**Policy Consistency Needed:** Thank you for working to reduce the pervading feeling among veterans that our government's approach to providing adequate service to an ever-growing number of veterans is to shrink the number of patients by excluding more classes of veterans. Thank you again for allowing Priority 8 enrollments to commence last year for those veterans who deserve to have the VA option available to them--even though they are not inflicted with service connected disabilities.

**Provide a Written Guarantee:** Many veterans are frustrated and disappointed because existing programs they thought they could depend on have been altered or eliminated due to changing budget philosophies. That has created a perception among service members and veterans that the covenant between the nation and the military member is one-sided--with the military member/veteran always honoring his/her obligation, and hoping that the government does not change the law or the benefits upon which they depend. We urge your committees to support a guarantee in writing of benefits to which veterans are legally entitled by virtue of their service. This would demonstrate that the government is prepared to be honest and consistent with its obligation to its service members and "Keep America's Promise to America's Military"

**Homeless Veterans:** We know that homelessness among veterans is a top priority for the President, Secretary Shinseki and the leadership of other federal agencies. The VA has estimated that 25% of all homeless individuals in the U.S. are veterans. That is an absolute shame! We must continue to support the efforts of Secretary Shinseki and his goal to end homelessness within the next five years. Many communities are assisting and we must be able to support them with the appropriate funding to resolve this issue.

For example – the AMVETS National Executive Committee voted to adopt California's Vet Hunters program as a national pilot to assist homeless veterans. The program, which was conceived by California AMVET Joe Leal, seeks to find homeless veterans and ensure that they receive the services they need to make it off the streets.

**Legitimate, Sincere Veterans' Preference:** In recent years, Congress has taken great strides toward making "Veterans' Preference" a reality. We have seen commendable moves recently involving the VA and the Department of Labor to enhance the job preferences available to veterans. We need to ensure that OPM guidelines that allow selective hiring practices within the federal government are removed. Some veteran applications are never even considered for employment in the federal government, due to allowed restrictive qualification wording and narrowed hiring practices. We continue to urge your committees to support any improvement that will put "teeth" into such programs so that those who have served have a "leg up" when transitioning back into the civilian workforce. One example of giving veterans a preference is the recently created Civilian Expeditionary Workforce (CEW), by meeting the goals of DoD and the administration, we can at the same time hire qualified veterans who have already gained the experience from the vast deployments in previous years who are willing to serve their country in this capacity as a full time government employee.

The following are a few of the Veteran's issues included in our Top Priorities:

- Limit user fees and prescription co-pay increases at VA medical facilities
- Require the VA to accept licensed civilian medical/dental provider prescriptions
- Ensure sufficient capacity and full funding and total responsibility and accountability at national cemeteries
- Pursue the VA to have chiropractic care where possible

## CARING FOR SURVIVORS

Support of Survivors: AFSA commends this committee for previous legislation, which allowed retention of Dependency and Indemnity Compensation (DIC), burial entitlements, and VA home loan eligibility for surviving spouses who remarry after age 57. However, we strongly recommend the age-57 DIC remarriage provision be reduced to age 55 to make it consistent with all other federal survivor benefit programs.

We also endorse the view that surviving spouses with military Survivor Benefit Plan (SBP) annuities should be able to concurrently receive earned SBP benefits and DIC payments related to their sponsor's service-connected death. Once again we would like to thank Congressman Joe Wilson, (R-SC) for introducing H.R. 178 and the 90 members of Congress for Co-sponsoring, along with Senator Bill Nelson, (D-FL) for introducing S. 260 and the 54 Senators who have co-sponsored these two pieces of legislation, to repeal the SBP-DIC offset.

Survivors of retirees who draw the final full month's retired pay for the month in which retirees die should not have to pay this compensation back: Congressman Walter Jones, (R-NC) introduced the "Military Retiree Survivor Comfort Act", H.R. 493, in January and this piece of legislation also known as "The Forgiveness Act" should come to pass given the state of the failing economy if not for the service and sacrifice of the deceased.

The following are Survivor issues included in our Top Priorities:

- Permit the member to designate multiple SBP beneficiaries with a presumption that such designations and related allocations of SBP benefits must be proportionate to the allocation of retired pay
- Provide for eligibility for housing loans guaranteed by the Department of Veterans Affairs for the surviving spouses of certain totally disabled veterans.

## DEBT COMMISSION PROPOSALS

Oppose the following Debt commission recommendations:

1. Freeze federal salaries, bonuses and other comp for 3 years including military non-combat pay
2. Reduce spending on base support and facility maintenance
3. Integrate military kids into local schools in the US
4. Use highest 5 years for civil svc and military retiree pay
5. Reform military retire system to vest after 10 years and defer collection to age 60
6. Full 20 + years of military retire pay starts age 57

Work Toward A Consistent Funding Formula and Program Permanence: This association believes that the parameters of who will be served, what care will be provided, the facilities needed, and the full funding to accomplish those missions should be stabilized as mandatory obligations. If that were so, and Congress did not have to go through redefinition drills as economic philosophies change, the strength of the economy fluctuates, and the numbers of veterans increases or decreases—these committees and this nation would not have to re-debate obligations and funding each year. We believe that these important programs should be beyond debate and should fall under mandatory rather than discretionary spending.

The following are a few of the Debt Commission issues recognized in our Top Priorities:

- Make adjustments to the Household Goods (HHG) weight allowances that take into consideration the number of family members
- If advantageous to the government, reimburse transportation expenses for PCSing members to take their POVs to a location other than a commercial storage facility
- Resist DoD/DECA efforts to reduce the benefit that negatively alter current pricing policies, or provide the benefit to non-military beneficiaries
- Resist the Base Exchange merger process to prevent degradation of the benefit
- Monitor/scrutinize housing privatization efforts to preclude adverse impact on all military members

## AIR NATIONAL GUARD AND RESERVE RETIREMENT

Reduce the earliest Guard & Reserve retirement compensation age from 60 to 55; Legislation was introduced during the 111th, to provide a more equitable retirement for the men and women serving in the Guard and Reserves. This proposed legislation would have reduced the age for receipt of retirement pay for Guard and Reserve retirees from 60 to 55. Active duty members draw retirement pay the day after they retire. Yet, Guard and Reserve retirees currently have to wait until they reach age 60 before they can draw retirement pay.



Provide Concurrent Retirement and Disability Pay (CRDP) For Service Incurred Disabilities: National Guard and Reserve with 20 or more good years are currently able to receive CRDP, however, they must wait until they are 60 years of age and begin to receive their retirement check. This policy must be changed, and along with the reduction in retirement age eligibility, is a benefit our Guard and Reserve deserve. They have incurred a service connected disability and we must provide concurrent retirement and disability pay to them.

Many Guard/Reserve retirees have spent more time in a combat zone than their active duty counterparts. The DoD has not supported legislation to provide guard/reserve men and women more equitable retirement pay in the past. Additional requirements and reliance has been placed on the Guard/Reserve in recent years. It is time to recognize our men and women in uniform serving in the Guard and Reserve and provide them a more equitable retirement system.

Provide employer and self-employed tax credits and enhance job security: Congressman Lynn Jenkins, (R-KS) introduced H. R. 743 “Hire a Hero Act of 2011” in February of this year and we support this piece of legislation to allow the work opportunity credit to small businesses, which hire individuals who are members of the Ready Reserve or National Guard.

Award Full Veterans Benefit Status to Guard and Reserve Members: It is long overdue that we recognize those servicemembers in the Guard and Reserve who have sustained a commitment to readiness as veterans after 20 years of honorable service to our country. Certain Guard and Reserve members that complete 20 years of qualifying service for a reserve (non-regular) retirement have never been called to active duty service during their careers. At age 60, they are entitled to start receiving their reserve military retired pay, government health care, and other benefits of service including some veterans’ benefits. But, current statutes deny them full standing as a “veteran” of the armed forces and as a result they are not entitled to ALL veteran benefits. Our goal, along with our TMC partners, is to support pending legislation that will include in the definition(s) of ‘veteran’ retirees of the Guard/Reserve components who have completed 20 years or more of qualifying service, but are not considered to be veterans under the current statutory definitions.

## EDUCATION PROGRAMS

There's no escaping the fact that college costs are rising. As the gap between the cost of an education and value of the Montgomery GI Bill (MGIB) widened, the significance of the benefit became less apparent. For that reason, the Post 9-11 GI Bill is a giant step forward. However, we must make sure that the new Post-9-11 GI Bill stays current at all times, so that this benefit will not lose its effectiveness when it comes to recruiting this nation’s finest young men and women into service. As a member of The Military Coalition and the Partnership for Veterans’ Education, we strongly recommend you make the remaining technical corrections to the Post-9-11 GI Bill. Examples that stand out are active duty not receiving the \$1,000.00 annual book stipend, Title 32 credit for Guard and Reserve service, and BAH for those veterans or retirees taking on-line college courses full-time.

Providing in-state tuition rates at federally supported state universities and colleges—regardless of residency requirements, is an important goal for AFSA due to the rise in servicemembers and their families returning to institutions to further their education and other numerous PCS moves involved with the CONUS.

Ensure full funding for the mission of the Impact Aid Program: Impact Aid Program is to disburse payments to local educational agencies that are financially burdened by federal activities and to provide technical assistance and support services.

Preserve Tuition Assistance: The discretionary Air Force Tuition Assistance (TA) Program is an important quality of life program that provides tuition and fees for courses taken by active duty personnel. The program is one of the most frequent reasons given for enlisting and re-enlisting in the Air Force.

Implement the Interstate Compact! The Interstate Compact on Educational Opportunity for Military Children works to correct the inequalities that military children face as they transfer from one school (system) to another due to deployments or permanent change of station moves by their servicemember parent.

By implementing this Compact, states can work together to achieve cohesive education goals and assure military students are well prepared for success after high school graduation. We encourage your strong support for those who serve this Nation and ask that you take necessary measures to pass this Act in your state and implement this important program. The States that thus far are absent from supporting the “sense of the Senate” are NE, MA, VT, WV, MN, NH, and WY.

## CONCLUSION

Senator Murray and Congressman Miller, in conclusion, I want to thank you again for this opportunity to express the views of our members on these important issues as you consider the FY 2012 budget. We realize that those charged as caretakers of the taxpayers’ money must budget wisely and make decisions based on many factors. As tax dollars dwindle, the degree of difficulty deciding what can be addressed, and what cannot, grows significantly. AFSA contends that it is of paramount importance for a nation to provide quality healthcare and top-notch benefits in exchange for the devotion, sacrifice, and service of military members. So, too, must those making the decisions take into consideration the decisions of the past, the trust of those who are impacted, and the negative consequences upon those who have based their trust in our government? We sincerely believe that the work done by your committees is among the most important on the Hill. On behalf of all AFSA members, we appreciate your efforts and, as always, are ready to support you in matters of mutual concern.

The Air Force Sergeants Association looks forward to working with you in this 112th Congress.

Respectfully submitted this 30th day of March, 2011

(end)