

**STATEMENT FOR THE RECORD
PARALYZED VETERANS OF AMERICA
FOR THE
SENATE COMMITTEE ON VETERANS' AFFAIRS
CONCERNING
PENDING LEGISLATION
NOVEMBER 18, 2015**

Chairman Isakson, Ranking Member Blumenthal, and members of the Committee, Paralyzed Veterans of America (PVA) would like to thank you for the opportunity to submit our views on legislation pending before the Committee. We appreciate the Committee focusing on these critical issues that will affect veterans and their families.

S. 2106, the “Wounded Warrior Employment Improvement Act of 2015”

PVA supports S. 2106, the “Wounded Warrior Employment Improvement Act of 2015,” which would require the Department of Veterans Affairs (VA) to develop and publish an action plan for improving services and assistance provided through VA’s Vocational Rehabilitation and Employment (VR&E) program (Chapter 31). Returning to the workforce is a critical aspect of recovery for many catastrophically disabled veterans. This legislation would require VA to evaluate barriers to participation in VR&E and implement efforts to improve counselor training. It would also seek to improve counselor workload requirements.

A client to counselor ratio of 1:125 is recognized as a full workload in the field of vocational rehabilitation counseling. In January 2014, the Government Accountability Office issued a report calling on VA’s VR&E program to implement performance and workload management improvements. At that time, caseloads for VR&E counselors ranged up to 1:139.¹ When counselors are required to work with more than 125 clients, the employment counseling process is delayed. This is particularly true when counselors are working with veterans who have significant disabilities and increased barriers to employment.

Although not part of this legislation, efforts to decrease counselor caseloads and encourage more veterans to participate in the VR&E program must be supported through increased funding. Congress must invest in this program to ensure that counselors have the tools and resources needed to return veterans with disabilities to work. Otherwise, veterans with significant disabilities, who with proper supports and services can return to employment, are in danger of falling out of the workforce.

¹ Government Accountability Office, “VA Vocational Rehabilitation and Employment: Future Performance and Workload Management Improvements Are Needed,” GAO-14-61, January 2014.

S. 2134, the “Grow Our Own Directive: Physician Assistant Employment and Education Act of 2015”

PVA supports S. 2134, the “Grow Our Own Directive: Physician Assistant Employment and Education Act of 2015.” This bill would set up a five year pilot program to provide education assistance to veterans training as physician assistants (PAs) in the Department of Veterans Affairs. The goal is to train veterans with medical or military health experience to be readily employable physician assistants at VA. Section 2 of the bill explains the prioritization of veteran participants who are in the Intermediate Care Technician Program and those individuals who plan to work in medically underserved states with a high population of veterans. To meet these goals the bill provides funding and support staff to the Office of Physician Assistance Services. It would also require VA to establish a strategic plan to recruit and retain PAs and adopt the standards leading to competitive pay for PAs employed by VA. Currently the vacancy rate of PAs at VA is 25%, the third largest shortage throughout the health care system. Recruiting and retaining PAs at VA is critical to improving access to high quality care. Further, this bill will provide job opportunities for veterans with medical work histories that are hard to translate to the civilian sector.

S. 2170, the “VETS Act of 2015”

PVA supports S. 2170, the “VETS Act of 2015.” This bill would improve access to telemedicine services from the Department of Veterans Affairs. Under current law, VA may only provide at-home tele-health to a veteran if the physician and veteran are in the same state. This requirement can be a particularly troubling barrier for veterans who have specific medical or mental health needs, have moved, or live in rural communities without providers. This bill would alleviate some of these pressures by waiving the in-state requirement, allowing VA health professionals to operate across state lines.

S. 2253, “Department of Veterans Affairs Veterans Education Relief and Restoration Act of 2015”

PVA supports this legislation as written. Veterans entitled to education benefits should not be robbed of those benefits due to external factors beyond their control. A school

closure sets an enrolled veteran back due to the lost time and effort invested without ultimately earning course credit. This legislation ensures that the effects of this inconvenience and loss are not amplified by the additional loss of a semester's worth of benefits eligibility.

The “Veterans Affairs Retaliation Prevention Act of 2015”

PVA has no official position on the “Veterans Affairs Retaliation Prevention Act of 2015” at this time. We acknowledge that ensuring whistleblowers receive a level of protection adequate to encourage government employees to come forward and expose fraud, waste and abuse within the government sphere will always be an important issue. We appreciate and support the initiative Congress is taking to address these issues both within the VA and across the broader government sector.

Once again, we thank you for the opportunity to submit for the record. We look forward to working with the Committee to see these proposals through to final passage. We would be happy to take any questions you have for the record.