

LEGISLATIVE PRESENTATIONS OF AMVETS;
AIR FORCE SERGEANTS ASSOCIATION; FLEET
RESERVE ASSOCIATION; NON-COMMISSIONED
OFFICERS ASSOCIATION; MILITARY ORDER OF
THE PURPLE HEART; THE RETIRED ENLISTED
ASSOCIATION; MILITARY OFFICERS ASSOCIATION
OF AMERICA; NATIONAL ASSOCIATION OF
STATE DIRECTORS OF VETERANS AFFAIRS;
AND VIETNAM VETERANS OF AMERICA

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THURSDAY, MARCH 12, 2009

United States

Senate,

Committee on Veterans

Affairs,

joint with

the

House of

Representatives,

Committee on Veterans

Affairs,

Washington,

D.C.

The committee met, pursuant to notice, at 9:36 a.m.,
in

Room 106, Dirksen Senate Office Building, Hon. Daniel K.
Akaka, chairman of the committee, presiding.

Present: Senators Akaka, Webb, Begich, Burris, and
Burr. Representatives Filner, Perriello, Teague, Buyer,
Bilirakis, and Roe.

OPENING STATEMENT OF CHAIRMAN AKAKA

Chairman Akaka. This hearing of the United States

Senate Committee on Veterans' Affairs will come to order.

Good morning and aloha to all of you who are here
this

morning. I am very, very pleased to join all of the
leaders

of the Veterans Affairs Committee, Chairman Filner and
Ranking Members Buyer and Burr, and my colleagues on the
committee, in welcoming all of you here for this

important

event.

All of the organizations testifying before us today
have proud traditions of public service. Your tireless

advocacy on behalf of our nation's veterans and also
their families are truly honorable and I want to applaud all of
you this morning. Meeting with all of you regularly is
so valuable to us to hear your views on important issues
facing our nation's veterans and to help us craft an appropriate
budget for VA. These committees rely on your concerns
and agendas for the coming year.

Two weeks ago, the President announced his budget.
Among other things, it proposed \$55.9 billion for the VA
in discretionary spending, an increase of \$5.6 billion over
measures fiscal year 2009 spending. This amount is by all
and significant and close to what AMVETS and its co-authors
Year supporters recommended in the Independent Budget Fiscal
2010. In fact, the Senate Committee on Veterans Affairs
held a hearing two days ago on the Department of Veterans
Affairs fiscal year 2010 budget proposal. We heard

testimony from Secretary Shinseki and several VSOs,
including AMVETS and Vietnam Veterans of America.
I have said this many times and will say it again.
Veterans benefits and services are a cost of war and must
be understood and funded as such. I am pleased that
President Obama, who served on this committee last year,
understands and shares that view.

Last month, I reintroduced bipartisan legislation to
secure the timely funding of veterans health care through
advance appropriations. Too often, VA medical care
funding is subject to delay and uncertainty, hampering budget
and planning and threatening health care quality for wounded
indigent veterans. This situation must end.
As Chairman of the Senate Committee on Veterans

Affairs, I am determined that veterans must receive quality benefits and quality services. Caring for our troops when they return home is critical. We must provide the best health care. Anything else is a breach of our fundamental obligation to those who wear and have worn our nation's uniform. We must fairly compensate veterans for their injuries, including invisible wounds of TBI and PTSD. We simply must in this time of war ensure that VA has the resources it needs to carry out these missions.

Accessing the families of veterans is a key part of the successful and seamless reintegration of veterans into their communities. Family members are often the primary caregivers for injured veterans and steps have been taken to reach out to these families in recent years, but much work still remains.

We have done a great deal together to work on disability compensation. Timely and accurate processing of disability claims and appeals remains problematic. Restructuring of the disability compensation system, including consideration for the loss in quality of life, will be an important issue in this Congress. Claims and appeals processing is an area on which we will also continue to focus.

As one who knows firsthand how valuable the G.I. Bill is and who worked to secure passage of the new Post-9/11 G.I. Bill into law, I am working to make certain that the new G.I. Bill is implemented in a timely manner and as smoothly as possible.

In closing, I again thank each of the national organizations represented here this morning and their members for their service and dedication to our nation and its veterans. I look forward to your presentation today.

And now, let me call on Chairman Filner. As you know, this is a joint hearing of the Senate and the House, and let me call on Chairman Filner for his opening statement.

OPENING STATEMENT OF CHAIRMAN FILNER

Chairman Filner. Thank you, Mr. Chairman.

It has not only been a great honor to work with you, but it is a great joy, so it is great to be here with you again and to have all of you here. We couldn't do our job,

I think, without you. You and your members keep us informed of what is going on and your Washington folks certainly keep us on our toes with legislative information and suggestions, so thank you for what you do every day.

Senator Akaka put the budget submission that we have already had from the President, I think, in the proper context. The President's budget follows the 110th Congress,

where we added almost \$17 billion to the budget for our veterans, the highest increase in history, and the President's budget is the first time, I think, in the history of the Independent Budget when his number actually exceeded what the Independent Budget had done. So not only do we have a five-year increase of \$25 billion, but I think the numbers are good.

We are submitting our views and estimates to our Budget Committees this week, or today, I think, and we are going to call for an even slightly higher number, about \$800 million more, to make sure that the job is done for all of your members and all of our veterans.

I do want to just make a few comments, having read your testimony, having talked with you over the years. Many of

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you

you have as your first priority the so-called advance or forward funding to make sure that this health system gets its funding on time. Otherwise, we have rationing of care. You can't hire people, you can't buy equipment, can't plan. The Senator said his commitment, and we are going to be jointly working on advance or forward funding together.

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and
years

In addition, you know the claims backlog is just a disgrace. It is an insult to our veterans. I think we to do more than what Secretary Shinseki called in his testimony. He is using brute force now with hiring more hiring more and hiring more, but we know that it takes to train people. The backlog continues to grow. Other people leave. I think we need a real radical slashing of the red tape involved.

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As far as I am concerned, if a veteran submits all medical data with the help of a certified Veteran Service Officer, we should accept the claim subject to audit, as IRS does and allows you to get a refund check within weeks. Why not do that with the VA?

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yet

And lastly, we cannot ever underestimate the need the mental health care of our veterans. The VA is world renown for its physical care. We are trying to catch up with demands that both the older and newer veterans have made on mental health. I am not sure we have caught up

for
that

and we have got to do a better job, both in evaluating mental health, getting rid of the stigma that somehow is attached to it, and get all our veterans to understand this is as important as physical health to treat.

So I am looking forward to your testimony. I am

looking forward to working with you in the coming year.
It looks like our budget is going to be sufficient and helpful and able to meet all the demands and we are going to work with you to make sure that money is spent wisely.
Thank you, Mr. Chairman.
Chairman Akaka. Thank you very much, Chairman

Filner. I would like to call on our Ranking Member of the Senate, Senator Burr, for his opening statement.

OPENING STATEMENT OF SENATOR BURR

Senator Burr. Aloha, Mr. Chairman. To my House colleagues and friends, we welcome you.

Mr. Chairman, I would like to welcome all of our witnesses today. A special welcome, though, to Charlie Smith from my State of North Carolina. I want to extend my genuine thanks for the work you do on behalf of our veterans in the State of North Carolina, more importantly across the country for all of you.

We had an opportunity this week to have General Shinseki testify for the first time, a great American hero, somebody I think will be a great leader of the VA, but more

importantly, an outspoken advocate on behalf of veterans. And I shared with him at that hearing that I was concerned

when I looked at the budget projections for the out years that we have a very aggressive intent on the part of the

VA, and that is to absorb over some period of time 550,000-

plus Priority 8s that we know with a 100,000 troop draw-down in

Iraq that some will transition from active duty to the private sector. They will become part of the VA.

We have got very aggressive programs to increase the quality of the delivery of health care and it is impossible

for me to look out in those out years and see that a 2.2

percent increase is sufficient, and I believe that that
is what Congress is supposed to do. We are supposed to look
out further than the 12 months before our nose and ask
the right questions and see if they align with the plans. In
this particular case, hopefully we will work with General
Shinseki to try to rectify what I think is a shortfall on
the projections.

These hearings give us an opportunity to hear
firsthand accounts of what challenges veterans face today, what
benefits and services aren't working well and what are
are working well, and more importantly, where improvements
absolutely needed. This insight, together with feedback
to from our constituents at home, help to guide our efforts
improve the lives of veterans, and more importantly their
families across this country.

In recent years, we have made many improvements to
the services for veterans. As your testimony has stated, we
of will still have many challenges that need the attention
our legislative and oversight duties of this Congress.

Among the concerns raised in your testimony is the
need to provide VA with a timely, predictable, and sufficient
come budget. I commend you that every organization that has
pleased up has been focused on that issue. That is why I am
Veterans to have joined Chairman Akaka in cosponsoring the
Health Care Budget Reform Transparency Act. This bill
will allow the VA to plan its health care budget in two-year
cycles through advanced appropriations and hopefully will
short, lead to new transparency in the budget process. In
it will bring a much-needed change that veterans deserve,
if, in fact, our projections for the out years are
indicative of what the actual cost is going to be.

Your testimony also highlights the need to improve VA's claims processing and appeals system. As we all know, the system takes far too long, frustrates too many veterans, including veterans from North Carolina, which is a sizeable number. So I hope we can work together to find common sense solutions that make this system work better for veterans and their families, both now, and more importantly, in the future.

Also, many of you have stressed the need to ensure that wounded service members experience a seamless transition from active duty to civilian life. I share that goal and welcome your input on how we can make that a reality for the brave men and women who have served and sacrificed on behalf of our country.

As we collectively work on these and other important issues affecting our nation's veterans, we should keep in mind that just funding programs doesn't go far enough.

We must make sure that these benefits and services are meeting the needs of our nation's veterans and their families and are actually improving their lives. I am committed to working with my colleagues on both sides of the aisle and both sides of the Hill to make sure we accomplish this.

I want to take this opportunity to apologize to our witnesses today, because when I conclude in just one minute, I am going to sneak out. I am the fortunate Senator who represents an individual who has been chosen by Extreme Makeover, the ABC TV show that builds houses, to have a family that is the recipient this week of the efforts of that show and the volunteers throughout Northeastern

North Carolina that are constructing that house. Jeff Cooper happens to be a Gulf War veteran. He has quite a story, and

I am going to leave here to go spend some time with him before they return to North Carolina to see their new home.

It is no longer a double-wide that leaks and is rotted at the foundation. It is a house that his neighbors built, recognizing not only his contribution to the community, but the sacrifice he has made to his country.

It is vitally important that we not forget on this committee something that I think most of you remember every day. This is about how well we perform our job, and that is judged by how that impact affects our veterans. At the end of the day, it is outcome that matters. We do have the best health care system in the world. It can get better. We can make sure nobody falls through the cracks. We can accomplish that. We can't accomplish it unless we work collectively together.

Mr. Chairman, I am committed to do that with you and with the other members. I thank you for your testimony today.

Chairman Akaka. Thank you very much, Senator Burr.

Let me call for the opening statement of the Ranking Member of the House committee, Congressman Steve Buyer.

OPENING STATEMENT OF MR. BUYER

Mr. Buyer. Thank you. Thank you, Chairman Akaka, Chairman Filner, and my good friend, Richard Burr, and members of the committee.

To the Commanders, Directors, and Presidents, thank you for being here this morning. I would like to touch on a few

areas, and before I proceed, let me also thank the leadership of your auxiliary who are with you here today. Since my mother was the President of the Indiana Auxiliary,

I know they all make you look pretty good.

I would also like you to acknowledge the hard work of my staff, who is sitting behind me and many who are not here. The reason I am asking you to acknowledge them is during the Christmas holidays, while a lot of people were enjoying their families, I put them to work. I embraced the tone and the words by then President-Elect Obama. I put them to work to pour through our budgets and attempted to write what I would call a bipartisan letter. Yes, I am a Republican, but what I sought to do was to take this letter, put a proposal to then President-Elect Obama, and I had two sides to it.

One side was, I know my Democrat colleagues love to do public works, so I had them pour through all of the construction projects and work with the VA on what time lines could we move up, what monies could we spend on non-recurring maintenance, and we did that and we came up with just under \$1 billion. As you know, I am a huge advocate of the National Shrine Program to increase the standards of our military cemeteries, so we put \$50 million for the cemeteries, not for new construction, but for the maintenance issues. We also added some renewable energy projects, roof replacements, things like that. One of them is a geothermal, some photovoltaic, and that is one side of the letter.

The other side of the letter, I said, okay, now let us create entrepreneurs and let us reinstitute the loan guarantee program within the VA that expired in 1986. We have a new wave of veterans coming back from wars and we need to bring this back, a \$2 billion request.

What happened? Well, I should have been prepared for

and this. My Democratic colleagues loved my Democrat ideas
they canned my Republican ideas. So they set aside the
\$1 billion for entrepreneurs and they accepted the public
works side of the bill. That was unfortunate. I am glad that
disappointed they advanced the time lines and all, but I was
that that we didn't take the \$1 billion for the creation of
entrepreneurs because we have a lot of great veterans
could have benefitted economically from that. So I have
reintroduced that as a stand-alone bill.
back, I also have an idea. The idea is that some years
I created the Economic Opportunities Subcommittee, and I
am appreciative that Chairman Filner kept that as a separate
subcommittee. So my idea is to create a fourth
administration within the VA, and I have got a bill here,
Mr. and I am going to send it over to Chairman Akaka and to
Burr, and I would like for everybody to really go through

this. What I am hoping to do here is to create a fourth
administration of economic opportunity within the VA. So
example, there are some of the programs, take homeless, for
and vocational rehabilitation that come under the Health
Administration of discretionary. Let us move that over,
and with a laser beam, let us focus on the economic
opportunities.

their I am exhausted by our comrades somehow defining
quality of life from a bottle, and then we end up dealing
we with the consequences. So if we work really hard and if
get can do the sub-acute care, even that much better, and we
to them into a job that can sustain their life and increase
their quality of life, that is extremely important. And

things
look
be able to do that and put the housing programs and
under that, I would like for all of you to take a good
look
at this idea.

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and
The other thing I would like to touch on is the
disability system. Now, let us do a time out here for a
second. We all talk about the problems of the disability
system. So a few years ago, I asked Rick Weidman to get
together with some other of the VSOs and we put together
a
working group, began to focus on a lot of the challenges
within the system. While he was doing that, the House
and
Senate put together the Disability Commission. On top of
that, we had then Dole-Shalala. Then Mr. Burr and I, we
introduced legislation.

with
gets
but
just
Wow, did I learn about the third rail within the
veterans' community. Wow. Don't step forward and come
with
an idea on how to cure the VA disability system. It is
almost like it is okay for dog to be kicked. Everybody
gets
to kick it so they can pound their chest and look good,
but
who is stepping forward here with solutions? You can't
just
throw money and people at it.

and
move
ideas.
So Mr. Burr and I, we stepped forward with an idea.
Where are the ideas? Now, I have met with the Secretary
and
I have had the same conversation with him about where are
the ideas, and we will give him some running room, but we
need to stop talking about the problem and we need to
move
toward a solution. So I am really anxious to look at
ideas.

have
The other one you need to keep your eyes on is the
implementation of the new G.I. Bill. Now, when this bill
was coming along, we were working on a different proposal
and then we got big-footed. Those of us that had some
concerns about the details of a bill--this bill should
have

gone through regular order. It could have had some
really good improvements made with regard to the details of the
bill. But now as we are moving to the implementation, we
have got challenges. Those challenges could have been
worked out. So now this implementation, the VA, they
have got a huge ramp-up in front of them and they have got
some

IT challenges.

And so with the Secretary to talk about, we are
going to be doing it by hand supplemented by IT, and he is
trying to figure out how he does the IT then into the future for
full implementation. Blah, blah, blah. That is what I
call that. We have got to be doggone careful, and I welcome
your scrutiny. I welcome your oversight on this, because I am
scared. I am scared here because there are a lot of
claims that are going to be coming quickly on the new G.I. Bill,
and if we don't get this right, there are going to be a
lot of upset veterans in the country. So we had better be
really careful with regard to the implementation.

A couple other things I will mention and then I will
yield back. I am working with Mike Michaud, and I look
forward to working with other members of the committee on
how we are building these new VA hospitals. We need to
incorporate our renewable energy portfolios and looking
at the building envelope on how we do these buildings with
regard to energy efficiencies.

And the last one I want to mention to you is--well,
two things. Mr. Walz and I are going to introduce a bill to
increase the baseline for DIC. It is really unfortunate.
We talk about taking care of widows and orphans, but
really do we take care of widows and orphans? We don't.

I went out there. I did a quick assessment and
said,

okay, with regard to the States and workers' compensation and Federal employees. Now, think about this picture when you were on active duty. You are at the depot and you are working on the tank and right next to you is a Federal civilian employee. Two of them go down. The gunnery sergeant goes down and is killed along with a Federal civilian employee. The widow of the Federal civilian employees receives 55 percent of his pay and that gunnery sergeant who went down, his wife receives 12 percent less.

That is not right. So we are going to put an initiative here to create equity in the systems to make sure that the widows of those who wear the military uniform are taken care of.

The last is, please, I mentioned about the cemeteries.

We have got three standards of cemeteries, and that is unfortunate. The Battlefield Monuments Commission, they set the standard in the world. You have been there. You have seen that. The VA has theirs. What you may not realize, the Department of Interior, they have also two active cemeteries that veterans are buried in, one in Tennessee and one at Andersonville in Georgia. Their standards need to be brought up, and if they are not going to be brought up, I am going to work with members of the committee here and I have proposed that the VA take over the administration of those two cemeteries. We are not going to have three-tier standards of our national cemeteries.

With that, I will yield back. Thank you, Mr. Chairman.

Chairman Akaka. Thank you very much, Representative

Buyer.

I am going to introduce the panel and ask for your testimony. Following that, I will call on the members

for

their opening statements, other members of the committee, and then we will move into questions.

This morning, I want to introduce John Chad Hapner, National Commander of AMVETS.

The committees will hear also from Senior Master Sergeant Robert H. Price. He is Director of Military and Government Relations for the Air Force Sergeants Association.

We will hear from Master Chief Joseph L. Barnes, who is

the National Executive Director of the Fleet Reserve Association.

Then we will hear from Sergeant Major Gene Overstreet.

He is the National Commander for the Non-Commissioned Officers Association.

Next is Colonel Jeff Roy, the National Commander of the

Military Order of the Purple Heart.

We will hear from Master Sergeant Charlie L. Flowers is

the National President for the Retired Enlisted Association.

Next, Colonel Robert F. Norton, the Deputy Director for

Government Relations for the Military Officers Association of America.

We will then hear from Charles F. Smith, President of

the National Association of State Directors of Veterans Affairs.

And finally, we will hear from John Rowan, National President of the Vietnam Veterans of America.

A warm welcome to all of you. Mr. Hapner, will you begin, and then we will move down the table in order. I

ask

each of you to keep your testimony to five minutes. Your prepared remarks will, of course, be made part of the hearing record.

Mr. Hapner?

STATEMENT OF JOHN CHAD HAPNER, NATIONAL
COMMANDER,
AMVETS

Mr. Hapner. Good morning, Chairman Akaka, Chairman
Filner, Ranking Member Burr, Ranking Member Buyer, and
members of the Senate and House Veterans Affairs
Committees.

I am John Chad Hapner, National Commander of the AMVETS,
and

on behalf of the AMVETS, the AMVETS Ladies Auxiliary, the
Sons of AMVETS, and our other subordinate organizations,

I
thank you for giving us the opportunity to present our
legislative agenda for 2009.

Before I lay out our AMVETS agenda, I want to
address

an issue that is of great concern. There is speculation
in

the VA that the VA will be again billing third-party
insurers for service-connected disabilities. AMVETS will
vehemently oppose this concept if it is introduced.

First and foremost, AMVETS advocates for the
veterans a
health care system that is sufficient, timely, and
predictable. I want to personally thank Chairmen Akaka
and

Filner for introducing the Veterans Health Care Reform
and

Transparency Act of 2009, and I also want to thank the
members of both committees who have cosigned on the
legislation and made it a strong bipartisan bill. For

those
who still have questions and concerns about advance
appropriations, AMVETS looks forward to discussing

possible
improvements to these bills as the legislative session
moves

forward.

We must remember that the spirit of this legislation
is

health to provide the VA health care system with sufficient
care budgets that will allow the VA to fully serve our
sick and disabled veterans. Sufficient funding is not enough.
It will take timely and predictable access to funds for
health care systems to work effectively. We cannot
expect the VA to plan for and care for our veterans' needs when
there is no real deadline for a budget approval.

Transitioning from military life to civilian life
often comes with difficulties. Including the idea of a
seamless transition is providing educational benefits for those
who served. Education continues to be a top priority with
the AMVETS.

AMVETS praises the passage of Post-9/11 G.I. Bill
Chapter 33. We also recognize an issue that endangers
its implementation, add confusion to an already complex
benefit and place a wedge in the parity between the new program
and the Montgomery G.I. Bill Chapter 30 and REAP Chapter 1607
benefits, which remain in some cases the only benefits
with which a serviceman may qualify. Allowing competing
benefits will cause great portions of veterans to receive a
benefit that is less strictly based on the type of educational
program he or she pursues. AMVETS supports combining the
Montgomery G.I. Bill Chapter 30 and REAP benefits from

Chapter 1607 into Chapter 33 of the Post-9/11 bill.
Consolidation will simplify the benefits, eliminate the
need

for service members to buy into the Montgomery G.I. Bill,
not knowing which benefit will be needed when the service
members or the veterans are prepared to attend an
educational program.

Currently, military personnel are required to complete a pre-deployment health assessment. This two-page questionnaire consists of general information, such as name, gender, service branch, component, pay grade, as well as eight health-related questions. AMVETS supports the development of a comprehensive pre- and post-deployment health care assessment. The current assessment asks pointed questions and rely on the service members to, in effect, evaluate their own mental health. A more thorough assessment will help raise red flags on issues that could be precursors to destructive behavior.

The Department of Veterans Affairs, in conjunction with the Department of Defense, need to create a reintegration program or de-boot camp to help service members and their families reenter civilian life. AMVETS has outlined the issues and subjects that need to be covered during a week-long reintegration program. They include a complete mental health care screening for the service members, enrollment into the VA health care system, schedule appointments for veterans who are determined by health care providers to need further mental or physical treatment, benefit explanations, seminars for the service members and his or her spouse, seminars specifically for spouses as well as age-appropriate day care for dependent children.

Compensation claims development and adjudication is complex and time consuming. Inadequately trained employees fail to recognize claims that are adequately prepared and continue to develop claims that are ready to be rated.

When the VA notifies a claimant that he or she can submit a private medical opinion, they do not explain what element makes the private opinion adequate. Also, the employee work

credit system is an ineffective measure of productivity.

It measures productivity allowing for credit to be given regardless of the quality of the claim.

program The VA should undertake an extensive training program to educate its adjudicators on how to weigh and evaluate medical evidence. In addition, to complement recent improvements in their training programs, VA should require mandatory and comprehensive testing of the claims process and the appellate staff. To the extent that the VA fails to provide adequate training and testing, Congress should require mandatory and comprehensive testing and under which the VA will hold trainees accountable. The VA must establish a quality assurance program, an accountability program that would detect, track, and hold responsible those VA employees who commit errors by simultaneously providing employee motivation and achievement of excellence.

term Mr. Chairman, this concludes my testimony and I look forward to working with all of you to ensure the long-term stability of our veterans programs. Again, I thank you for extending me the opportunity to appear before you today and I thank you for your support of our veterans. I hope all of you will be able to join us tonight for our annual Congressional reception and Silver Helmet presentation to the Honorable Chet Edwards of Texas, to be held in Room B-

338 of the Rayburn Office Building from 6:00 to 8:00 p.m. tonight.

This concludes my testimony and I will be happy to answer questions if you have any.

[The prepared statement of Mr. Hapner follows:]

Chairman Akaka. Thank you very much, Mr. Hapner.

H. Now we will hear from Senior Master Sergeant Robert Price.

MILITARY STATEMENT OF SENIOR MASTER SERGEANT ROBERT H. PRICE, U.S. AIR FORCE (RET.), DIRECTOR, AND GOVERNMENT RELATIONS, AIR FORCE SERGEANTS ASSOCIATION

Sergeant Price. Chairmen Akaka and Filner and distinguished committee members, on behalf of the 125,000 members of the Air Force Sergeants Association, thank you for this opportunity to offer the views of our members on the fiscal year 2010 priorities of the Department of Veterans Affairs.

How a nation fulfills its obligations to those who serve reflects its greatness. How we treat them also influences our ability to recruit future service members. Simply speaking, if we want to keep good people in the military, it is important that our country live up to the commitments made to our veterans, the role models for today's force and tomorrow's. Therefore, it is important that this committee view American veterans as a vital national resource rather than a financial burden.

This morning, I would like to address the new G.I. Bill, DOD-VA joint ventures, support for State veterans homes, and women's health care.

As a member of the Military Coalition and the Partnership for Veterans Education, we strongly recommend you make technical corrections to the Post-9/11 Veterans

G.I. Bill that needs to be done prior to ensure its smooth implementation this August 1. We as a government give them a one-time chance to enroll in the Montgomery G.I. Bill during basic training. The Department of Defense charges them \$1,200 to enroll at a time when they can least afford it as enlisted members. Service members are even offered an opportunity to increase their education benefit by paying an additional \$600.

These service members who have not utilized the Montgomery G.I. Bill will now have to wait until their Chapter 33 entitlements are exhausted before they will be allowed to receive a refund on their Montgomery G.I. Bill contributions. Under current law, those who have contributed the additional \$600 will not have the money returned to them at all. This is unacceptable. Our recommendation is that the service members who choose to enroll into Chapter 33 benefits receive an immediate refund of unused portions of their Montgomery G.I. Bill entitlement.

As we continue to look at DOD-VA joint ventures, one area where a joint venture would benefit from this is the Colorado Springs, Colorado, area, which is undergoing a large growth of beneficiaries due to the BRAC process. There are simply not enough medical treatment facilities to take care of this growth. They are stretched to the max now.

Another contributing factor in this growth is the desire of veterans who want to remain in the area after the completion of their military service. We urge these committees to encourage aggressive joint DOD-VA efforts to alleviate potential problems, as in the Colorado Springs area, prior to 2011 and the full implementation of the 2005 BRAC decisions. We ask you to exercise close oversight to ensure such arrangements are properly handled.

Continued support for State veterans homes. One-hundred-and-forty State-run veterans homes serve about 32,000 former service members. These homes are good Federal investments, since the States provide funding for two-thirds of the total operating cost. 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. 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 a difficult decision to place their loved ones in a veterans home.

It is absolutely necessary that our nation's leaders ensure there is room for them and quality care is 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.

In order to completely satisfy the State veterans home need as it exists today, an additional \$1 billion would be needed immediately. For that reason, although it comes up short, we concur with the Independent Budget request that \$250 million in grants be provided to States in fiscal year 2010.

As the care for women veterans health care increases, we applaud the actions of these committees along with legislators like Representative Stephanie Herseth-Sandlin for championing women's health care issues in recent years.

The unique health challenges by women veterans must be met with a higher sense of urgency from Congress. As the number of women veterans increases, the VA must be funded to increasingly provide the resources and the legal authority

to take care for female-specific health care needs.

The Airmen's Creed has three lines in it and it explains it all here. They will never leave an airman behind, they will never falter, and they will never fail. Therefore, the Air Force Sergeants Association will never fail them, falter them, nor leave them behind.

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In closing, Mr. Chairman, I would like to recognize Active Duty Air Force Enlisted members here today to stand up before you as they witness this very important hearing which the outcomes of this committee will affect their lives forever. It is an honor to have them here today with us. They have sworn an oath to defend this nation and they have done hell of a job.

My desires and hopes are our nation will not fail and follow their servicemen and women as they preserve our valued and hard-gained freedom for over 317 million Americans today. Thank you, sir.

[The prepared statement of Sergeant Price follows:]

Price.
Barnes.

Chairman Akaka. Thank you very much, Sergeant
And now we will call on Master Chief Joseph L.

U.S.
both
FRA's
FRA's
Donald
Director

STATEMENT OF MASTER CHIEF JOSEPH L. BARNES,
NAVY (RET.), NATIONAL EXECUTIVE DIRECTOR, FLEET
RESERVE ASSOCIATION
Chief Barnes. Distinguished Chairmen, members of
committees, thank you for this opportunity to present
legislative goals. My name is Joe Barnes. I am the
National Executive Director and I am representing F.
Mucheck from the great State of South Carolina, who is
serving as FRA's National President. He is unable to be
here today. Accompanying me are John Davis, FRA's

of Legislative Programs, and Chris Slawinski, our
National
Veterans Service Officer.

A primary and major concern for FRA is ensuring that
wounded troops, their families, and the survivors of
those

killed in action are cared for by a grateful nation.

This

includes adequate and sustainable funding to ensure
quality

health care, support, and benefits, medical and
prosthetic

research, and a smooth, seamless transition for veterans
transitioning from DOD to the VA for care.

There is progress towards these goals and FRA
appreciates the strong support from these distinguished
committees in achieving this. Enhanced DOD and VA
cooperation is essential and the disability evaluation
system pilot program reflects progress in simplifying the
disability evaluation process for wounded, injured, and

ill

service members. Sharing information and resources
between

the Departments is essential to the seamless transition
process, and FRA salutes Secretaries Gates and Shinseki

for

serving as interim Co-Chairs of the Senior Oversight
Committee associated with this process, something that

sends

a powerful message about the committee and its mission.
Given the scope, importance, and complexity of associated
challenges within the DOD and VA, FRA believes the SOC
should be made permanent and that continuing

Congressional

oversight is essential.

FRA salutes Chairmen Filner and Akaka and other
members

of the committees for championing important legislation
and

scheduling hearings on a number of key issues. The
Veterans

Benefits Improvement Act and Post-9/11 G.I. Bill were
both

enacted last year, and recent legislation sponsored by
both Chairmen in the House and Senate would authorize advance appropriations for the VA medical care.
Despite these and other initiatives and enactment of the Wounded Warrior Assistance Act as part of last year's defense authorization, the VA disability and health care systems are still overwhelmed and more needs to be done, particularly with regard to reforming the disability rating system, expanding implementation and interoperability of electronic medical records, and providing care and support from service members suffering from PTSD and TBI.

In addition to improving the VA funding process through advanced two-year budget authority and improving claims processing problems, other top 2009 FRA priorities are opposition to enrollment fees for Priority 7 and Priority Group 8 beneficiaries for care in VA health care facilities, ensuring implementation of the Post-9/11 G.I. Bill by August 1, 2009, and eliminating Agent Orange claims restrictions for Blue Water veterans who served off the coast of Vietnam.

A Post-9/11 G.I. Bill inequity is that recently retired and soon-to- retire career personnel who meet eligibility requirements are unable to transfer benefits, compared with active duty personnel with significantly fewer years of service who can do so, and many of these personnel are expressing frustration to FRA about this. FRA appreciates and strongly supports increased VA funding in the President's 2010 budget outline, including additional health care funding, support to further open enrollment for Priority Group 8 veterans, and attention to concurrent receipt of disability compensation and retired pay for more disabled military retirees.

to Medical and prosthetic research funding is essential
sustaining state-of-the-art prosthesis and world class
medical care for our wounded warriors. It is especially
important to ensure adequate and sustainable funding for
these programs in 2010 and beyond.

VA FRA also continues its advocacy for authorization of
Medicare subvention, full concurrent receipt of military
retired pay and veterans disability compensation for all
disabled retirees, and reform of the Uniformed Services
Former Spouses Protection Act. Other issues are also
addressed in our full statement.

again Distinguished Chairman, in closing, allow me to
express the sincere appreciation of the Association's
National President, National Board of Directors, and our
members for all that you and the members of both the
House and Senate Veterans Affairs Committees and your
outstanding staffs do for our nation's veterans. Thank you.

[The prepared statement of Chief Barnes follows:]

Chairman Akaka. Thank you very much, Master Chief
Barnes.

Now we will hear from Sergeant Major Gene
Overstreet.

STATEMENT OF SERGEANT MAJOR H. GENE OVERSTREET,
U.S. MARINE CORPS (RET.), NATIONAL COMMANDER,

NON-

COMMISSIONED OFFICERS ASSOCIATION

Chairman Major Overstreet. Aloha, Chairman Akaka and

Filner and Ranking Member Mr. Buyer and to all our
distinguished members of this committee. My name is Gene
Overstreet. I am the President of the Non-Commissioned
Officers Association, and accompanying me today I have

Chief Master Sergeant Richard Snyder, United States Air Force,
Retired. He is our Executive Director of Legislative

Affairs in the Washington area. Also is Master Sergeant Matt Daley, United States Army, Retired. He is also our Military Affairs.

I am pleased to see that we recognize all the active duty men and women that are here this morning. Once again, I think that is great that they are here because they are veterans and they are going to be in the same place we are here in a few years and I think it is very important that they see how this system works and what is important to them and how they pass it along to their constituents out there.

The Non-Commissioned Officers Association represents enlisted service members of every stage of their military life, from the first enlistment to the playing of taps.

I further point out that the Association has been involved in all of their lives, the quality of life of today's men and

women that grow up in and around the military, and including their dependents. We literally have been with them providing a broad cradle-to-grave membership services. A representation before this committee and others is what we do for our members.

This is an all-service, all-component, and all-enlisted base membership, which makes it unique amongst our colleagues. We are the voice that seeks comprehensive legislation agenda for those who cannot speak for themselves. As you know, there are countless thousands of veterans out there that will never have the opportunity to speak to America, that is you, addressing their concerns to you as members of the Veterans Committees from the Senate and the House. We speak for the patriots whose services and sacrifices preserve and provide the freedoms that are

enjoyed by all Americans.

Veterans
Committee of the 111th Congress because you have hit the
ground running ever since you have been sworn in and we
recognize that you are fully engaged and continue with
the
am
legislative actions. On behalf of America's veterans, I
here to say for them, thank you for your consideration
because there are a bunch of grateful veterans out there
that never get a chance to say thank you for what you are
doing for them, and they know what you are doing for them

and they appreciate that.

in
like
Mr. Chairman, I want to thank you for accepting our
written testimony. Within the written testimony it lines
out all of our concerns for this coming year. However,
light of the time that I have remaining here, I would
to just point out a couple of things, if I may.

of
that
We applaud the recent news release from the
administration's proposal for a \$113 billion budget. Two pages
announcements provide the big picture. It is great.
Obviously, there weren't that many specific agendas in
there, but with \$113 billion, that looks very good to us.
NCOA appreciates the early release and the information
reflects a 15 percent increase over the previous year's
budget. The budget numbers appear to be aligned with the
Independent Budget recommendations for 2010. The
Association fully supports that budget.

VA.
NCOA is a supporter of the two-year budget for the

veterans
year
before
The budget proposal is not only widely endorsed by
communities and veteran committee leadership. It is easy
for us to recall President Obama's support for the two-
concept, and his nominee announced, General Shinseki,
the Senate Veterans confirmation hearing, he specifically
pointed out that he supports that concept. However, it

appears now that no one is talking about that. As a matter of fact, in the President's remarks, he doesn't say anything

about that and I don't see anything like that in General Shinseki's remarks, as well.

I guess the bottom line is this. We need a timely budget, whether it is going to be a one-year budget or whether it is going to be a two-year budget. We all know that we need that budget.

With the time remaining, I would just briefly touch on

a couple of things here. For the last two years and for every year that I have been here, I think one of the big things that we talk about is the backlog of claims. How

do you fix that backlog of claims? I don't have to tell you.

You have heard this many times. You know how to fix it. Yes, we need qualified people. We need the people that are

qualified to process those claims. And also, we need to implement that computerized technology that we are talking about. We need it up and running.

A couple of other things that I would mention to you.

Increase the disability rates across the board, for the same conditions, the same rating and the same compensation, across the board. Let us make it fair for everyone.

We are also concerned about the implementation of the

Post-9/11 G.I. Bill. We think it is a great G.I. Bill. Once again, we would ask that the committee provide oversight to ensure that the program goes as advertised.

Surviving spouses, first, I am glad to see that we are

talking about DIC and SBP benefits. I would suggest another

thing to allow our surviving spouses to remarry at age 55.

Third, NCOA fully supports the increased DIC benefits for surviving spouses.

A couple of other things that I would mention is the medical for our women. We need to expand that in our VA facilities since we have more women coming on each and every day.

In conclusion, Mr. Chairman and distinguished members of the committee, I thank you for the opportunity for the Non-Commissioned Officers Association to present our 2009 legislative goals. The Association looks forward to working with you and the joint committee to improve the lives of the nation's veterans, their widows, and their children. Thank you.

[The prepared statement of Major Overstreet follows:]

Chairman Akaka. Thank you very much, Mr. Overstreet.

Now we will hear from Colonel Jeff Roy.

STATEMENT OF JEFF ROY, NATIONAL COMMANDER,
MILITARY ORDER OF THE PURPLE HEART

Mr. Roy. Good morning, Chairman Akaka, Chairman Filner, Ranking Member Buyer, and members of both committees. I am Jeff Roy, National Commander of the Military Order of the Purple Heart. It is certainly an honor and a privilege for me to represent my members here today.

I would just like to draw your attention to several items that we have in our written testimony. First is the elimination of the SBP DIC offset. To the MOPH, this is another one of those issues that makes absolutely no sense under the current law. Survivor benefit receipt income is reduced dollar for dollar by the amount of compensation from

the DIC, which provides flat monthly payments after service-connected death of a veteran. Many military retirees voluntarily pay premiums for SBP coverage with the reasonable expectation that their survivors would receive what was due them. This is not happening. Survivors of retirees upon eligibility of DIC lose a majority and on occasion the entire amount of the SBP monthly annuity.

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Recently, I had the chance to visit several Gold families and widows in Killeen, Texas. I was able to firsthand the impact that this legislation has on these families. They are dealing with the emotional loss of a loved one and now must deal with the financial realities of having lost their spouses and adjustment to an outside world. The impact on these families is enormous and one not expected when their families paid into the SBP coverage. These patriots did so with the full expectation that their loved ones would be provided for. We are not living up to that expectation. These surviving family members have difficulty bringing up their families in this trying economic time and we are placing billions of dollars into economic stimulus packages while at the same time we are placing surviving military families in economic hardship.

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VA
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Now is the time to correct this inequity. MOPH supports and urges Congress to support and pass H.R. 775, which would right this wrong, and we also support the efforts of Senator Bill Nelson of Florida, who is introducing S. 535.

Additionally, we would like to talk about the lack of VA infrastructure in the stimulus package. The MOPH was disappointed in the legislation that was signed into law by the President in that it did not include funding for the VA and veteran-related items. The VA received \$1 billion for medical facilities non-recurring maintenance, even though

the VA has identified a \$5 billion backlog in needed repairs, including energy efficiency projects at its 153 medical facilities. The VA has projects that are ready

to

commence and there are many needed medical facilities,

such

as the VAMCs at Denver, Louisville, and New Orleans, and these should be built immediately.

for

The National Cemetery System receives \$50 million monument and memorial repairs, and the VA has done its

very

best to maintain these cemeteries. Additional funds

would

have and would assist the VA in making sure that these projects move forward.

The last thing I would like to discuss is VA rural health care. This issue of rural health care is a growing

concern

for many current and returning veterans not

living

near VA facilities. We applaud the VA and the

legislature

for their efforts to increase access to mental health treatment centers for many of these veterans. However,

the

issue goes much further than mental health because many

of

our veterans who are authorized health care are being

denied

access simply due to where they live. The MOPH does not favor the issuance of vouchers for VA health care. The voucher system is fraught with problems and is open to misuse.

We believe there is a better way and one that would meet the needs of veterans and the VA rural health care program. MOPH recommends VA explore and consider using

the

Federal Employee Health Benefit Program as a guide. Anyplace in small town America there is a post office and

guaranteed there is a doctor and a hospital facility that accepts the Federal Employee Health Benefit Program or

would probably Tri-Care, as well. We believe that if the VA
health follow that system, then they would have negotiated
care at a price that the VA would know what they would be
paying for each one of these specific illnesses or
of treatments. So we believe that this is something that
and should be looked at. We have thousands of veterans West
care we need to allow for further access into the VA health
system.

So this concludes my remarks for today and I would
be willing to answer any questions.

[The prepared statement of Mr. Roy follows:]

Chairman Akaka. Thank you very much.
And now we will hear from Master Sergeant Charlie
Flowers.

STATEMENT OF MASTER SERGEANT CHARLIE L.

FLOWERS,

U.S. AIR FORCE (RET.), NATIONAL PRESIDENT, THE
RETIRED ENLISTED ASSOCIATION

Ranking Sergeant Flowers. Chairmen Akaka and Filner,

Member Buyer, and distinguished members of the committee,
good morning.

Chairman Akaka. Good morning.

National Sergeant Flowers. I am Charlie Flowers, the
President of the Retired Enlisted Association. It is an

honor to appear before you and have the opportunity to
discuss some of the concerns of enlisted men and women

who are now serving or who have served a career in the
American military.

TREA is a veterans service organization founded 46
years ago to serve the needs of the enlisted men and
women

in who have chosen to dedicate their life and career serving
the active duty military, the National Guard and Reserve,
as well as their families and survivors. In Washington and
throughout our State capitols, we outlined our issues,
concerns, and points of view to our elected
representatives.

That is what I intend to do in the few minutes I have
before you.

However, before we speak about legislative goals for
this year, we must thank you again for the numerous
successes we have seen in the last few years. The
dramatic

increase in the VA health care budget and this year on-
time budget, the authorization to hire 2,000 new VA claims
adjustors, the passage of the Post-9/11 G.I. Bill, the 20
percent benefit increase for the Montgomery G.I. Bill,
and more have made the last few legislative years a very good
time for American veterans. But now we must make sure
that these successes are solidified.

Congress and the VA need to take two actions to make
sure that these accomplishments are made permanent.

First, TREA wishes to join the many other voices in support of
the idea of the two-year budgetary authority. S. 423 and H.R.
1016, sponsored by Chairmen Akaka and Filner, give the VA
the ability to plan ahead for their hiring and

maintenance for their hospitals and clinics. With a system
consisting of 153 medical centers and over 730 outpatient clinics
serving 5.5 million, the Veterans Administration needs to
make long-term plans, not live with continuing

resolutions while waiting for a yearly budget. Advanced
appropriation will fix this problem. We hope that this new budget
structure will solve a long-term problem.

Secondly, TREA asks you again to focus on the need to deal with the terrible claim backlog pending at the VA. TREA believes this is still the worst problem facing disabled veterans when trying to maneuver through the VA system. As of October of last year, there were 847,285

claims pending at the VA. The VA predicted that they will be adjudicating 942,700 disability claims this year, and there will be at least 100,000 appeals for their decision.

These numbers are staggering. It means that a simple disability or rating case will take at least six months to decide, and there is no end on how long a complicated case may go.

The authorization to hire 2,000 new claims adjustors to handle these cases is a crucial first step, but now we and you must see that first-rate people are hired, that they are trained and supervised properly, and that the training is consistent throughout the country. I might say that TREA doubts that 2,000 more claims workers will be enough to deal with the influx. We expect that after the new Post-9/11 G.I. Bill is stood up in August, there will be a flood of educational benefit claims.

And it should be noted that as of last August, over 400,000 of the 945,000 separated veterans of the War in Iraq and Afghanistan have enrolled in the VA. In these hard economic times, we can only expect that the percentage will grow. And it should not be forgotten that waiting in the same backlog are all the other veterans that retired who have served this country and dedicated their lives to keeping this nation safe. This problem needs to be finally resolved and we urge your committee to make this a higher

priority this year.

TREA wishes to thank the Senate and House Committees for the honor of testifying before you once again. We are grateful for the opportunity to speak of our concerns and legislative goals. We are also grateful for the opportunity to work with you and your terrific staff throughout the year.

I thank you for your time and interest, and we will be happy to try to answer any questions you may have.

[The prepared statement of Sergeant Flowers follows:]

Chairman Akaka. Thank you very much, Mr. Flowers. Now we will hear from Colonel Robert F. Norton.

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STATEMENT OF COLONEL ROBERT F. NORTON, U.S.
(RET.), DEPUTY DIRECTOR FOR GOVERNMENT
MILITARY OFFICERS ASSOCIATION OF AMERICA
Colonel Norton. Thank you, Chairman Akaka, Chairman Filner, Ranking Member Buyer, and distinguished members of the committees for this opportunity to appear before you and present the legislative priorities of the Military Association of America. My name is Bob Norton, the Deputy Director of Government Relations. I am honored to represent our 375,000 members here today. Our top priority this year for the veterans health care system is approval of advanced appropriations legislation. Unfortunately, this is not in the President's budget for the fiscal year 2010 budget. With the growing number of returning Iraq and Afghanistan veterans and the planned

enrollment of as many as 550,000 Priority 8 veterans in the next few years, it is more important than ever to have a sustainable and predictable funding stream available at the start of each fiscal year. So we strongly support the bipartisan bills that would establish advanced appropriations in the VA.

I want to speak now, Mr. Chairman, about the importance of wounded warrior transition from the Department of Defense into the VA and the lack of a system to help them make a successful transition. MOAA is very grateful that the

committees have recommended additional resources for the special needs of our nation's wounded warriors, including funding for polytrauma centers, PTSD, traumatic brain injury care, and research. But there are still substantial gaps in the services provided for severely wounded warriors in the DOD and VA systems.

Congress recognized this fact by extending the charter of the VA-DOD Special Oversight Committee, or SOC, until this coming December. The fact that Secretary Shinseki and Secretary Gates have jointly chaired one SOC meeting already this year, with another planned this month, is a positive signal. But MOAA continues to strongly recommend the establishment of a permanent separate joint VA-DOD transition agency--call it what you will--so that seamless transition tasks can be addressed five days a week, 52 weeks a year.

An example of how the systems are not working is caregiver support. There is no coherent support for caregivers of our severely wounded veterans. In the military services, training, compensation, and support for

caregivers varies widely and there are no common standards for compensation, certification, and training. When caregivers follow their wounded warrior husband, son, daughter, mother, father, or friend into the VA, it is fair to say that there is no real caregiver system awaiting them

in the VA system. To put it bluntly, there is a crying need for a coordinated VA-DOD program for the system of caregiver support.

The experience of the last seven years of war should have taught us that VA and DOD can't or won't get this done on their own. That is why a separate transition agency is needed. Chairman Akaka, I appreciate your comment at the beginning about the importance of caregivers. Along these lines, we are encouraged by the introduction last week of a pilot caregiver services bill introduced by Senator Durbin, Senator Kay Bailey Hutchison, and Senators Udall and Begich.

MOAA strongly recommends that the members of the committees work with your Armed Services Committees counterparts to establish a permanent Joint Transition Agency. Ultimately, it may be necessary to set up a Joint Congressional Select Subcommittee to oversee this effort.

Turning now to the G.I. Bill, I want to express our deep appreciation to Senator Webb, retired Senators Warner and Hagel, and Senator Lautenberg for their leadership in spearheading their bipartisan Post-9/11 G.I. Bill legislation. MOAA appreciates the committee's continuing oversight of the new program's implementation on August

1. We recommend that the committees resume hearings on how best

to coordinate and consolidate all of the G.I. Bill programs available so that they can achieve their maximum potential

for our veterans' readjustment and for Armed Forces recruiting and retention.

MOAA also recommends upgrading the Veterans Rehabilitation Employment Program, the Survivors and Dependents Educational Benefits, and Survivors and Dependents DIC Program. Ranking Member Buyer, we appreciate

your introduction of the bill to raise the DIC rates.

Finally, MOAA recommends that the committees hold hearings on reemployment rights and financial and legal protections for our servicemen and women under the Uniformed

Services Employment and Reemployment Rights Act and the Service Members Civil Relief Act, respectively. We appreciate Senator Burr's sponsorship of legislation to authorize residency rights for military spouses. Legislation is also needed to guarantee that servicemen

and

women may bring suit under the SCRA in cases like

Sergeant

James Hurley of the Michigan National Guard, whose family was evicted from their home during his deployment and

sold

out from under the family. The nation cannot have an operational reserve policy without a strong legal and reemployment safety net coupled with employer incentives

for

our Guard and Reserve warriors.

I thank the Chairs and members of the committees and look forward to your questions.

[The prepared statement of Colonel Norton follows:]

Chairman Akaka. Thank you very much, Colonel Norton.

And now we will hear from Charles Smith.

STATEMENT OF CHARLES F. SMITH, PRESIDENT,
NATIONAL

ASSOCIATION OF STATE DIRECTORS OF VETERANS

AFFAIRS

Mr. Smith. Thank you, sir. Chairman Akaka and Chairman Filner, Ranking Members Burr and Buyer, and members of the Senate and House Veterans Affairs Committees, I want to thank you for holding this joint hearing today. By way of introduction, I am Charlie Smith, the Director of the North Carolina Division of Veterans Affairs, but the President of the National Association of State Directors of Veterans Affairs. NASDVA, an organization with a history dating back to World War II, represents veterans throughout this United States. It is composed of State Directors from all 50 States as well as the District of Columbia, American Samoa, Northern Mariana Islands, Puerto Rico, and the Virgin Islands. We appreciate the opportunity to testify and to make comments today.

Unlike the other veterans organizations, such as the ones seated with me here today and the others, we are also a government agency composed of State government agencies across this nation. We provide additional benefits to veterans to augment those that are provided by the Federal Government, and also, we provide service to these veterans in order so they can get benefits that they have earned. We are where the rubber meets the road in every village or city or town across these United States. We have personnel there to assist veterans.

On a daily basis, we are confronted at a State department level with challenges about veterans, such as the one that Senator Burr mentioned earlier, Jeff Cooper, who

in has had such a struggle since returning from the Gulf War
1991. I would like to point out that we are a State
agency.

We are a government agency. And we know who, where, and
how to orchestrate successful outcomes on the local level.

In many respects, all veterans and their needs are our
agenda.

NASDVA recently met and identified some of the
following legislative priorities. As many of you know,
State and local governments face severe financial
difficulties at the present time. During this time, it
is

very likely that some veterans' benefits will suffer
because of reductions in budgets by the State and local
governments.

But let me also mention this, that if we want to help
veterans, we will find a way to assist them. If we
don't,

we will find an excuse. I want to reiterate that we are
there to make changes in our State governments and to
provide services that are maybe not provided at a Federal
level.

One of the changes that we would like to see is to--
of course, we have now an MOU with the DOD on the Heroes to
Hometowns. This is very limited, where we receive the
names and addresses of these individuals who are coming back to

our States. We are getting some, but we are not getting
all of those individuals that need assistance. We can
implement

the transition from that wounded warrior back to a
productive civilian status. So we are hoping that that
can

be extended to--this program can be expanded to include
all military members to ensure that they receive a full array
of

local, State, and Federal benefits and services authorized them and their families.

We would like to increase the State home construction benefits. State homes across this nation provide a valuable service to the elderly and the severely disabled veterans with skilled nursing care, domiciliary care, and also hospital care. There are currently 137 State veterans homes across the United States, in all 50 States and Puerto Rico. Twenty-four-thousand veterans are served on skilled care nursing, and over 6,000 domiciliary care and 300 hospital beds. The States provide 55 percent of the long-term health care across this nation at the VA's cost of 15 percent of their geriatric budget. We can provide additional care if we can get additional funding.

One of the things to improve the funding for these State veterans homes is to--we recommend that the States be paid a more equitable per diem rate representing 50 percent of the States' average cost. At the present time, that cost is only about a third of what it costs to take care of that

veteran. We are asking that--the VA by law has the authority to spend up to 50 percent of the average cost of State home care across this nation. We would like for that per diem from the Federal Government, from the VA, to more closely approach that 50 percent figure.

We also want to call your attention to that for the past, there have been attempts to limit the Secretary of Veterans Affairs from accepting applications for new State home construction in favor of funding non-institutional care

options. I agree that non-institutional care options need to be expanded, but the State directors feel that a large shift in the focus of care from funding of the State veterans homes to non-institutional care will create problems for the State veterans homes.

We tend to, or intend to establish a partnership with the U.S. Department of Veterans Affairs with Secretary Shinseki. We don't feel like the States have been

utilized as much as they could have in the past.

Chairman Akaka. Mr. Smith, will you please summarize your statement?

Mr. Smith. Sure. I would like to summarize--to summarize, I would like to address one other thing that

I-- two other things. One is that we would like to have an increase in the amount of cemeteries funding. Right now,

we are paid \$300. We would like that to increase to \$600 to

more closely identify with the cost of that.

The other thing is we are suggesting a soft landing

for the Guard and Reserve forces that are returning. Right

now, they only have about five to seven days of reintegration into the public. We feel that they should stay on active duty for at least 30 days so that the readjustment would

be better for those individuals. It would reduce the homelessness and the amount of suicide if they have more time coming back from a war zone.

I thank you, sir, for the opportunity to make a presentation and I will answer any questions.

[The prepared statement of Mr. Smith follows:]

Chairman Akaka. Thank you so much, Mr. Smith. Now we will hear from John Rowan.

STATEMENT OF JOHN ROWAN, NATIONAL PRESIDENT,

VIETNAM VETERANS OF AMERICA

Mr. Rowan. Good morning, Mr. Chairman, Mr. Akaka
and
Chairman Filner and Ranking Member Buyer and the other
members of the House and Senate that are with us this
morning. This is my fourth year being able to present
before these joint committees and representing our VVA
membership here and I want to take this opportunity to
thank
the Senate and the House for the work that they have done
over the last several years in providing the funding that
is
necessary to care for our veterans and for all of the
budget
proposals that you submitted.

It is nice to see the new administration coming in
with
more money even before we get a chance to beat them up.
We
are looking forward to the new Secretary to see what
Secretary Shinseki goes forward with over the next
several
years. We look forward to his work, as well.

We are appreciative of the President's efforts to
finally get Category 8 back into the VA system. To see
where we are with that is going to be interesting, to see
how the VA adjusts to the increase in people coming into
the
system.

Our highest legislative priority is actually
resolving
the POW-MIA issue. Unfortunately, that is not your
purview,
but we just want to make sure we put that on the record.

We, of course, join with our colleagues in
supporting
the advanced appropriations concepts and the various
bills
that have been submitted by the Chairmen and we look
forward
to working with you on that.

We are concerned, however, that over the years, with
all this increased funding and appropriations, that we
are

concerned about accountability. We think the Congress
and the VSOs need to know just how the VA is spending the
increased money. We are concerned about that you have
made these appropriations, but now it does seem to get stuck
when it actually goes out into the system and the vast
bureaucracy of the VA doesn't necessarily get
accomplished what they need to do with that money.

For example, one of the things we think needs to be
looked at is the whole issue of bonuses. Bonuses seem to
be handed out just because they do competent work and bonuses
should really only be given out for extraordinary work.
And conversely, for those who are not doing good work, they
don't need to be just reshuffled somewhere in the VA
bureaucracy but need to be removed from the VA
bureaucracy,
which unfortunately never occurs.

We are concerned about outreach. The VA doesn't do
any. It doesn't tell anybody about all of the wonderful
things that they do. It doesn't tell anybody about all
of the issues that they should be concerned about. And as a

result, we are in the process of putting together--we put
together a Veterans Health Council and we have a new
website, www.veteranshealth.org, that tries to inform
veterans of all the recent wars about all the VA-related
illnesses that the VA has already agreed that they are
responsible to take care of.

It galls me to no end when I run into Vietnam
veterans who are unaware of the fact that their diabetes or their
prostate cancer allows them to get compensation and
health care from VA, and it happens day in and day out. So we
are very concerned about that and we think that the VA needs
to provide some funding and some outreach to--the Army
spends

they millions of dollars to tell everybody they can be all
what can be, and the VA doesn't spend ten cents to tell you
think happens to you after you have been in the Army, so we
that needs to change.

And we want to again reiterate something we talked
about when we had the meeting with Chairman Filner on the
House side in a general conversation as the session
started

this year, and we promised we didn't look over
Representative Buyer's shoulder. We wanted to talk about
the operation, the idea of the creation of a fourth
administration within the VA called the Veterans Economic
Independence Administration. Its goal would be to help
prepare veterans through education and job training and

vocational rehabilitation to obtain and sustain
meaningful

work at a living wage. Ensuring that governmental
entities

comply with veterans' preference law would be in its
portfolio. Such an administration would coordinate what
is

now widely disparate efforts across two Federal
departments,

one Federal administration, and across State and Federal
lines, as well. It would really attempt to try to get
all

of those things that are frankly lost in the VHA
Department

and bring them out into the sunlight.

Again, this is another area that the VA doesn't
really

go out of their way to let people know. For example,
work-

study programs. Back in the day, when I was a lad going
back to school after I got out of the Air Force, we had
work-study. The VA work-study program was a big part of

the
idea of helping us reintegrate and go back to school,

give
us a little bit of income while we were going to get our
degrees. Nobody tells anybody about this anymore. It is

like they hid it away. They have buried it in the
bureaucracy. I have no idea what they are spending on
this

anymore. Nobody tells anybody about it. And when I tell
the new veterans about it, they go, "What?"

And if we are talking about a new G.I. Bill and
trying
to get people back into school, which is a wonderful idea
and I congratulate Senator Webb and the others who got
that
passed, part of that process is work-study and we need to

inform the people about this VA project and the fact that
VA
work-study still exists.

I would also just like to mention that we really
need
to see much more research done on long-term health issues
like Agent Orange for the Vietnam veterans and continued
research into the Persian Gulf illnesses and all of the
other illnesses.

The National Vietnam Veterans Research Study, which
was
done a while back, was a wonderful program and really
exposed some of the issues that faced those of us who
went
through war in the Vietnam era and the problems of the
new
warfare today and what happens when you get exposed to
things in your military service above and beyond getting
shot at. The same holds true for some of the newer
veterans, as well, that came out of the Persian Gulf and
even the ones today in both Iraq and Afghan, with
depleted
uranium shells and all kinds of other situations.

We think there needs to be a lot more research.
There
is zero research done right now on Agent Orange. We need
to
get that back into line. We need to get that Agent
Orange
research back done again. We need to look at what is
happening to our children and our grandchildren. The
Australians and New Zealanders are far ahead of us on
this.

They have looked into this situation. They understand that this unfortunate incidence of exposure to Agent Orange has

trailed over into our next generations. We are concerned that that could happen, as well, to the Persian Gulf veterans.

So with all of that in mind, we hope that you would consider pushing for more research money for all of these veteran-related health issues. You know, it is almost

like we need a big warning stamp when you sign up in the military

saying, "Military service may be hazardous to your health,"

and not just the obvious one of getting shot at. When we walked away from the battlefield, many of us assumed if

we were lucky enough to walk away in one piece, we said, ah, good. We are done. I didn't realize that 40 years later when I contracted diabetes that I would become a disabled veteran at 48. It didn't make any sense to me.

Chairman Akaka. Mr. Rowan, will you please summarize?

Mr. Rowan. Yes. I am done. I just wanted to again stress that last thing, that we need the research for all

of these illnesses, for all the things that veterans face

when they are on the battlefield beyond the bullets and the

guns and the bombs. Thank you.

[The prepared statement of Mr. Rowan follows:]

Chairman Akaka. Thank you very much, Mr. Rowan.

What I would like to do now is to ask for opening statements of other members of the committee, Senator

Webb, Mr. Perriello, and also Mr. Roe. And then we will then

have questions from the Ranking Members and also the other members of the committee.

Senator Webb?

OPENING STATEMENT OF SENATOR WEBB

Senator Webb. Thank you, Mr. Chairman, and for all of you, with think on service are uniform who in other much

the witnesses, I appreciate hearing from you. Many of I know personally. Most of you, I have worked either you or your organizations over the last 30 years. I all of you have had some personal contact with our staff one issue or another and I want you to know how much I appreciate all of your willingness to continue your that in most cases was begun in uniform.

We, all of us, I think, join in the notion that we stewards to the service of people who have put the on or who are wearing it today. Part of that is the care for the physical needs and the emotional needs of people have worn the uniform, and a great bit of it also is the need for us to protect the place of that military service in the context of how our society views it. It is no small measure, and I think it spills over into a lot of the issues that we address in veterans law in terms of how understanding and respect goes to military service.

In terms of the budgetary items and the issues that many of you raised during your hearings, first I would say part of this big budget increase is the new G.I. Bill, which I am very happy to see, and I think that our citizens should be able to look at that not simply as a reward for service but as an investment. That is going to be paid back. It is going to be paid back in terms of enlarged opportunities for

World
War II
remunerations

people to have a first-class life. We saw that after War II, where for every dollar that went into the World War II G.I. Bill, our country received \$7 in tax remunerations

because people were able to have successful lives.
Also, in terms of those sorts of items, for all of you,

Shinseki

I would say message received. The discussion about the backlog, I have been able to sit down with General several times and discuss my concerns about that. I have raised it in a number of hearings over the past more than two years.

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The questions about the G.I. Bill implementation, I think those are fair questions. The VA, I think, got a little ahead of itself in some of its implementing regulations, quite frankly without coordinating with my office and the people who worked on this. I think, Mr. Price, particularly your idea of when the G.I. Bill pay-should cease or the remuneration should be done on the

happen

Montgomery G.I. Bill, that was one of the intents of our bill. That is a technical fix. I think that should fairly soon. In fact, we had a discussion with my staff while you were talking about that.

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and

And Colonel Roy, your comments about the SBP, I can personally, watching my father pay into the SBP from 1969 to 1997, when he passed away, and then the compensation that my mother received as a survivor was adjusted from her Social Security at that time. Those shouldn't happen. This is an earned annuity. People need to understand that retired members who pay into SBP pay in \$100 a month for a long period of time to try to protect their surviving spouse and we should really get on top of that.

In terms of the issues of ratification of service, I

have three items that I hope all of you will focus on and help us with. Yesterday, I introduced a bill to make the Purple Heart stamp a perpetual stamp, where it will always be a first class postage stamp. As everyone in this room knows, the Purple Heart is our oldest military decoration. You can't be recommended for it as a recipient of it. I can say it just kind of happens. But it is an award that everyone in this country understands. You know, I have a bunch of these 37-cent Purple Heart stamps from when they first came out. I like to send them out. And in fact, since 2003, 1.2 billion Purple Heart stamps have been bought in this country. It is something we ought to make a permanent, a perpetual stamp. So it seems to be a small thing, but it is a great indicator of how people can show their respect and the way that they value service. I personally believe there should be a Cold War Victory Medal. I don't believe the estimate for the Department of Defense in terms of how much that would cost. We are working to fix that legislation. I say that as someone who grew up in the Air Force. My father was a bomber pilot, but then he went into the strategic forces and they were working their tail off all through this Cold War period, and having watched, for instance, the Navy Submarine Service, who are always out there, no campaign awards, but they did an immeasurable good in terms of the strategic needs of our country, and I think it is a pretty simple thing to say that this is an award that can be--that someone can be eligible

think for rather than mandatory issuance. There is a way I
we can fix that one.

on And finally, I would be interested in your thoughts
the Military Role of Valor Act, which the Legion of Valor
has introduced, basically to try to have a database for
gallantry awards because of the misuse of those awards

by-- over the misuse of people saying they have those awards.
larger On those three issues, I hope as we work on the

budgetary issues, we can also work together to protect
the dignity of service and to continue to affirmatively
reward that service in the minds of our countrymen.

Thank you very much. Thank you, Mr. Chairman.

Chairman Akaka. Thank you very much, Senator Webb.

On the basis of early arrivals, let me call on
Representative Perriello, followed by Representative Roe,
for their opening statements. Then we will get to the
questions. Mr. Perriello?

OPENING STATEMENT OF MR. PERRIELLO

Mr. Perriello. Thank you so much, Mr. Chairman, and
thank you to all of you not only for your comments today,
but as a new member of Congress and a new member of the
committee, your organizations and various VSOs have been
essential in helping us get up to speed and be as
effective

is as we can be early on in advocating for veterans. There
able no greater honor here in serving my district than being
early to serve the veterans of this country of current and
the wars. So I really thank you and all of your staffs for
endless efforts to help us do our job well.

We have talked a lot about health today and clearly
particularly there is a great need there and a growing need,

and in the areas of PTSD and TBI, as many have talked about,

looking at the astronomical rise in suicide rates, as well. I have been working with a bipartisan group in the House on

some efforts in that regard.

But I think right now, in addition to some of these large macro reforms and improvements that we have talked about today that are incredibly important, we are also all intensely aware that we are operating in a very different economic environment and that veterans are being hit by the very same dynamics that everyone else in the country is being hit by, only worse, in particular job loss and housing. I think there have been some important moves made in that direction and we are going to need to continue to be vigilant to make sure as this foreclosure crisis continues that we are making sure that veterans and their families have the protections they need and the support they need in those areas, and also in a job market that is increasingly difficult to find work.

I come from a part of Central and Southern Virginia. Several of our small towns have topped 15 percent unemployment. We have simply lost jobs. And one of the things that I plan to focus on here is looking at not just the education and benefits of the new G.I. Bill, but also the expansion of vocational and skills training and on-the-job training that several of you mentioned today, and authored H.R. 1098, which will increase and make permanent many of the benefits for on-the-job training. Many of the veterans in my area are looking to build on and enhance trade skills that they already have begun to develop and

those are things where there is more immediate employment.

So I hope that in addition to looking at very important efforts and reforms in the health area that we do take economic opportunity seriously and not only try to make colleges affordable, if possible, but also treat with equal dignity and support those who may not want to go on the college track but are looking at OJT and other opportunities.

So again, I just thank you very much. I think the more we can do to help put our veterans back to work, the better they will appreciate our efforts here. Thank you very much for your efforts and I look forward to continuing to work with you and your staffs through this Congress. Thank you.

Chairman Akaka. Thank you very much.
Representative Roe?

OPENING STATEMENT OF MR. ROE

Mr. Roe. Thank you, Mr. Chairman and Chairman Filner. It is an honor to be on this committee. I am a new Congressman from the First District of Tennessee. I am a veteran and my real job before I came to Congress was a physician. We also have a large veterans medical center, the Quillen VA Medical Center and Mountain Home in Johnson City, Tennessee, and this was the committee I wanted to be on.

I also want to welcome a good friend here today, Bill Kilgore from Sullivan County, who has worked very actively with veterans, and I do want to acknowledge him being here today.

I, too, used the G.I. Bill when I got back from my military. It was \$300 a month, and I can tell you, at that

point in my life, it was a great help to me and to my family. I was very appreciative of that help.

Sergeant Major Overstreet made some comments about a timely budget and advanced appropriations. Certainly a timely budget--I heard General Shinseki point that out--

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to

VA or any business has to know what their budget is going to be before you can operate, so I agree with you on that completely.

today's

I think one of the things that is a tragedy in

VA is this backlog of claims. It is just--the number I have heard is as many as 900,000 claims. I told General Shinseki

I have some experience in electronic medical records. We use that in our medical practice, and certainly this seamless transition between when a veteran is signed up, when you first take the oath of office, until the time

you

transition to the VA should be a seamless record.

Of course, all of you all know this was our record, and we walked around with a manilla envelope and half the papers fell out. This was also Thomas Jefferson's medical record.

It hadn't changed much in 200 years. But now it has and we

are able now to get that information. It is extremely critical because the complexity of the injuries that occur

today to be able to go, and I look forward to going to the

battlefield in Afghanistan and following that injured warrior to the VA, all the way through, to see how we can make this really work.

I have a unique, I guess, relationship with veterans.

I delivered them. I am OB/GYN doctor, so I delivered a lot of veterans, and women's health care is a very big issue for

me. That has been neglected in the VA system and I look forward to taking the expertise that I have and improving the quality of care for our women veterans, and there are

a

tremendous number that serve now and they have special needs

and I look forward to working with that.

One last thing and I will yield back. I think it is the most tragic thing that we have among our veterans, is homelessness. It breaks my heart to see the number of homeless veterans that we have out there and we need to

do,

whether it is the G.I. Bill, education--I know as Mayor

of

Johnson City, one of the things that I am proudest of

doing

probably at the time I served was if you go serve our

nation

and you are an employee of the City of Johnson City and

your

salary is less than when you are working, we make up the difference. It is a very simple thing to do. You go

work

there. You don't suffer financially. Your family

doesn't

suffer financially. Every business should strive to do

that

so that when a veteran serves, their family doesn't

suffer.

They don't have to worry about that when they are gone,

that

their income would go down and they can't take care of

their

families. We can't expect these men and women to do

that.

I appreciate being given the opportunity as a new member of Congress to serve here and look forward to

working

with all your organizations, and you all made great

points

and I have your written testimony. Thank you very much

for-

-everyone in this room for their service, and I yield

back

my time.

Chairman Akaka. Thank you very much, Representative Roe.

Let me ask a question to the panel, for you to think about this. Probably this will be my only question, and this has to do with claims processing.

Many of your organizations have focused on the need to improve the timeliness of VA compensation claims processing.

Besides additional funding for more staffing and training--

this is the question--do any of you have suggestions on how to make improvements?

Let me start from Mr. Hapner.

Mr. Hapner. I believe that during the course of this past year, we have put together a little study on this and

we would be more than happy to provide it to the committee

when our Legislative Director and your staff can get together. I believe we have looked into this issue and

we do have some recommendations, but right now, off the top of my head, I am not going to pin us down.

Chairman Akaka. Thank you very much. We really look forward to it, as you suggest.

Sergeant Price?

Sergeant Price. AFSA believes, sir, just as long as the process can be done, we have made the contracts, some retirees, bring them back. Ask them if they want to work for a short time to help reduce the backlog. Part of the transition with them separating from the military, we

have the doctors in the military. We need to be able to say, they have got a doctor's degree. They can sit there and look at the records and help process and make the recommendations.

But the one thing with the military doctors, because

the
in
to
could
smoother.

they are to get the person well, to get them back into
fight. The VA doctor is looking, okay, now he has been
the fight. What injuries do they have? So we have got
get them smart in how to look at the process, and we
probably streamline it that direction and make it

That is all.

Chairman Akaka. Thank you very much.

Master Chief Barnes?

FRA
medical
which
claims.

Chief Barnes. Mr. Chairman, I believe this is a
challenging--very challenging situation. We believe at

that IT is a key aspect of solving this. Electronic
records, implementing that. The staffing challenge,
has been alluded to, I believe, by one of my colleagues
here, with retaining qualified personnel to process

more
implementation
that.

But we firmly believe that the IT part of this deserves
attention and that implementation or further
of the electronic medical record, utilizing available
technology, interoperability and bidirectional use on

I know there is progress on that, but there is much more
that needs to be done.

Chairman Akaka. Thank you.

Mr. Overstreet?

Major, I
with
have
with

Major Overstreet. Mr. Chairman, as a Sergeant
hate to agree with a Master Chief, but I have to agree
my counterpart here about the technology. I think we
wasted ten years in this. We have been messing around
it. We need to have some duty experts, so to speak, get

the
into
had

this technology up and running. Mr. Roe hit it right on head. We have the technology from when a recruit comes the military to track them regardless of what track they take all the way through until they hit the VA. If we had that technical system, that should be a piece of cake.

we
to
say,
on
that

If we are going to have this large of a backlog, if we are going to have this large of a delay, if we are going to have--you know, why don't we do, as someone suggested earlier, why don't we have a certain amount of money to say, okay, if, in fact, you are authorized to be adjudicated on one of these claims, we are going to give you a certain amount of money right now, up front, until we adjudicate your claim, and whatever that is, we are going to take that away from it when it rolls out to you.

answer
go

So I think the technology portion of it is the here, with qualified people. You have got to invest in qualified people and they have to have the understanding that they know how to process those claims and where to go to fix that.

Chairman Akaka. Thank you very much.

Major Overstreet. You are welcome, sir.

Chairman Akaka. Mr. Roy?

my

Mr. Roy. Well, when I was a Second Lieutenant, they always said, listen to your NCOs, so I have to agree with two previous speakers. And we focused on that in our written testimony, as well, as far as the IT. We have to get into the 21st century.

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this

Just a brief story. Monday, I was at the VA for a little visit and I was sitting down with the doctor and doctor pulled out--had my medical file, which was about

thick [indicating], and we were talking over some things
of
when I was on active duty back in 1963 and he pulls out
my
physical from 1963 that must have been burned on one of
those old type of copy machines. It is brown. And why
are
we still dealing with paper going back to 1963? So we
need
to get into IT.

Chairman Akaka. Thank you very much.

Chairman Filner. But at least he found it.

[Laughter.]

Chairman Filner. You are lucky.

Mr. Roy. That is true. He did.

Chairman Akaka. Mr. Flowers?

Sergeant Flowers. Thank you. Training individuals,
adding more individuals for this claim process is great.

We
need to have them trained. We also have to have it
standardized. The training must be consistent throughout
all the different regions and not just one region doing a
different thing. We should do just like we do when we
file
our income tax. We get a refund. After an audit, if we
got
too much, then we have to give it back. We shouldn't sit
on
it and wait, and they don't sit on it and wait. They
process it. We should do the same. We should process it
and then after an audit, take care of the situation, if
necessary.

Chairman Akaka. Thank you.

Mr. Norton?

Mr.
Colonel Norton. I agree with the technology piece,
Chairman, but I would also say that I think all of us in
this business have a tendency to sort of think of the
process starting over on the VA side. The fact of the
matter is is that servicemen and women and the Department
of
Defense, the Armed Forces, coupled with the VA, need to
have

and the ratings done fairly and prior to their separation,

that means, of course, expanding and improving the Benefits

Delivery at Discharge program.

Our men and women should get a fair, accurate rating before they ever get over into the VA. You know, quality in, quality out. Bad information, incomplete, missing,

et

cetera, it all starts with military service. You have to capture that information properly, do an adequate rating before they get out, have the information seamlessly transferred electronically over to the VA.

This doesn't solve the mountain of claims now, but with

hundreds of thousands of veterans who will be serving and coming home in these long wars, we need to make sure that

VA

and DOD get together and get this right. It is not just

the

VA side of the equation.

Thank you, Mr. Chairman.

Chairman Akaka. Thank you.

Mr. Smith?

Mr. Smith. Thank you, Mr. Chairman. There are a couple of things. I have been in veterans service work since 1971, so I go way back to the Vietnam era, when we

had

all that coming out. And a couple of things that are different now than what was then.

One is you have too many personnel creating data at the

VA regional offices where the ratings are done. More people

ought to be doing the ratings as opposed to making reports

to higher headquarters. And I don't mean that derogatory.

It is just that that is the way the system is.

The other thing is rating exams. Rating exams is a part of the backlog. The quicker they can get a rating exam, as my colleague just said about coming out of DOD

or

the Navy, Army, wherever it comes from, if they have got
an exam that they can use to rate that individual, then they
can use that. But we have got so many claims coming out
of Vietnam, Korea, and places that before the BDB systems
started, and it is where the backlog is, and those were
tough cases to have to go back and try to obtain those
military medical records. That is another big delay, is
getting that information from the military to the VA so
that these ratings can be done.

One of the other things is this letter that is sent
to each veteran once they file a claim, and they are going
to wait about 60 days before they even start. They get this
notice to assist that has been imposed by the courts.

That can be done away with and reduce the time that that
veteran is receiving the benefits.

The other thing is to utilize the State and county
veteran service officers more. We can better establish a
claim, do better ratings if that claim is developed
initially for rating purposes. Thank you.

Chairman Akaka. Thank you very much.

Mr. Rowan?

Mr. Rowan. Where do I begin? We have talked about
this in all of my testimony over the last several years,
but just to start the litany, better training, obviously.
Competence-based testing is interesting. That really
needs to be done for all of those who get involved in the
claims. Better examinations for compensation.

The whole issue of ready to rate that some of my
colleagues have talked about, and I will give you an
example of when it actually just recently worked. A friend of
mine filed a claim for prostate cancer. He clearly was a
Vietnam

veteran because he had already been getting disability
for PTSD. He had a doctor's note that clearly delineated the
fact that he had prostate cancer. Actually, I couldn't
believe it. He actually got his claim done in two
months.

I was shocked that he actually got his 100 percent
disability while he is getting treatment for his cancer,
and

it was done in two months. That should be done
automatically for those kinds of presumptive diseases.

Second of all, the patient history issue that we
talk about, we obviously have focused a lot on the transition
of DOD to VA for all the new folks coming out, and I
appreciate all my colleagues who talk about that. The 900,000
backlog is not everybody coming home from Iraq and Afghanistan.

The reality is, most of that, unfortunately, is us Vietnam
veterans getting sick with Agent Orange diseases and the
Persian Gulf veterans who are suffering from all kinds of
diseases.

So we don't have any of that history, and as has
been mentioned earlier, our records are a disgrace, I mean, if
where you can even find them in St. Louis or anywhere else
they are hiding. And trying to get the stuff into the
system is really, really tough.

The idea of patient history is a very good one, but
unfortunately, the VA doesn't even do this very well.

The VHA system can't tell you who the Vietnam veteran is
compared to the in-country veteran, non-in-country
veteran, Korean veteran. They don't delineate that very clearly
in the VHA records. While I appreciate Dr. Roe's idea about
getting more involved with electronic medical records, as
we go forth with the administration's proposal to bring that

into the private sector, they have to take military history,

as well.

And again, going back to the other thing everybody talked about, when I became a service rep when I retired in 2002, I actually took a course on the virtual VA that they were telling me in 2006 was coming, or 2005 was coming down the pike. So here we are, three years later, nobody has moved on it and we are still sitting around saying, gee, we ought to have electronic medical records. So, I mean, it is the same story over and over again. Let us get the computerization in there. There is no reason why we can't do it.

One of the other things that would be interesting, too, is when my colleague here and the State Directors and all the rest of us are doing--we are all sitting out there in all the various organizations with service reps, service officers, whatever you want to call them. Many of us use different kinds of computer systems on our own, that we have on our own, that they have created either in the States or in the organizations. The VA should create one system that they can give us for free, software that we can utilize to file claims electronically.

There is no reason--you know, this whole idea that they are so paranoid about getting a signature on the thing to make sure that it is a claim filed by a veteran, do it electronically. It is so easy today. There are a million

people doing this in the private sector, and unfortunately,

when we get into computer contracts, and I have had a history of that in my private life in working for city government, they get so carried away about creating their own system. Well, they don't have to. There are a million things sitting on the shelf out there. The VA could go out and buy it tomorrow.

Chairman Akaka. Thank you very much, Mr. Rowan.

I am going to call on the Chairman of the House committee for his questions. Following that, I will call on Senator Begich for his opening statement and questions.

Chairman Filner. Thank you, Mr. Chairman.

Just very briefly--by the way, I have been trying to answer your question and only one or two of you have got it right. I don't know why you won't accept my idea, all you guys. Look, I mean, yes, IT. Yes, military records. Yes, everything. But it is going to take years before that all works out. Meanwhile, you have got close to a million records sitting there.

I say, basically, do what the IRS is. Just grant them if they have been prepared with a veteran service officer's help and audit them. I don't care if you take five years or 22 years. Just start getting the check out. We have had people, as you know, die before they get a first check, or lose their home. Let us stop the--and certainly the Vietnam

veterans have been fighting this system for 20, 30 years. Let us stop their suffering by granting those claims and just move on. You served, you were there, we should care.

Anyway, I don't know why you guys just keep ignoring that.

Just very briefly, I know the Secretary and I know the

White House has heard your comments on the third-party
billing of service-connected, as most of you did. I
wouldn't worry about that. I don't think that is going
to
be a part of any proposal that comes down. So I think
the
White House has heard your views on that.

A couple people have talked about women's health.
We
are going to do some, I think, hopefully, some major
stuff
on that.

We have recognized the active duty. I want to
recognize the auxiliaries that are in the audience. With
all due respect, I am tired of having all the guys up
here.

I am going to give the auxiliaries an assignment. We are
going to do some major hearings on women's health and I
want
you gals to be the experts. I want to have all you up
here
and let them be the nice spouse behind you. So I hope
that
the auxiliaries will take up a challenge and really give
us
some sound recommendations on what we ought to be doing
for
women's health and get you guys sitting in the back
seats.

Thank you, Mr. Chairman.
Chairman Akaka. Thank you very much, Mr. Filner.

Let me call on Senator Begich for a statement.

OPENING STATEMENT OF SENATOR BEGICH

Senator Begich. Thank you, Mr. Chairman. I
apologize.

I am going back and forth between committee hearings, but
I
will just make a brief statement. I have a question, and
also to recognize two Alaskans that are here, Bob
Delouche
[ph.] and Don Oliver. Thank you very much for traveling
the
far distance that people have to do from Alaska to come
and

testify in front of the Congress in one form or another.

First, again, Mr. Chairman, thank you for holding this hearing. For me as a new member, it is always informative.

When I am not actually physically in here, we do get your written testimony and it is very informative for me to help understand some of the issues and struggles out there.

In Alaska, 11 percent of our population are veterans, so that gives you a pretty significant percentage of our folks, and a growing number of folks are coming and staying in Alaska. It is about 75,000 individuals.

I will say one program which I have asked a panel before and I have been back to Fort Wainwright and talked to

folks there and how it is working, that is the Disability Evaluation System. We are one of a dozen or so pilot programs, which I think is exciting from Alaska's perspective, a DES pilot program, and we are seeing great success with it. I have had a conversation with Secretary

Shinseki about what his view is and how to expand that. He

is, in my understanding, going to push that to some larger facilities, like Hood and Bragg, and do a little stress test on it and makes sure it works well, because my view, and at least what I have been hearing from folks, is it has been working very well and we need to move it to the next level.

So I was encouraged by his testimony on that, but also the private meeting I had in regards to that issue.

Along with that, I know earlier in the opening comments from the Ranking Members, there was some discussion of the G.I. Bill, and I know the organizations, or at least one of

the organizations asked for a 30-day--every 30 days for
an
update to be given publicly and to us. We have also
asked
for that. I know the Secretary in the Senate hearing we
had, I think it was earlier this week, he brought that
issue
up, very focused and honed in on making sure the G.I.
program, the new bill, the G.I. Bill, gets implemented
properly.

He, like you and us, are a little nervous about how
efficiently it will be done in such a significant
program.

But I am feeling better because we are putting the stress
test to him to make sure he does it, and he sounds like
he
is going to give us on a regular basis, at least to the
Senate committee, an update and keep us on track of what
is
happening there.

Actually, it was interesting, Chairman Filner. I
have
heard him bring that up more than once about the idea of
just grant it and move on. It would be interesting, and
Mr.
Chairman, I don't know if this is in our purview or not,
but
it would be interesting to do just a quick cost-benefit
analysis, because 90 percent of them get approved, and
then
the ones that go to appeal, a high percentage of them get
approved. And so when you lay out what it costs us to go
through that process just to get caught up, it may be
worthy
to kind of figure out how to move that system forward.
So I
know he brings it up every joint meeting. I like the
idea.

But the one question I have, and it is for Mr.
Smith,
if I can ask you the question, it seems to be a constant
obstacle to prepare our folks coming back, prepare the
veterans who are returning home, is the lack of
information

flow from the Department of Veterans Affairs to the State
VAs. It seems like this has gone all the way up to the
Chairman of the Joint Chiefs, the sense of concern, and
the
issue that seems to pop up off and on is the privacy
issues
are cited as an issue.

As a former mayor, we dealt with this a lot in a
variety of things we do with the police department, fire
department, how they work together. We seem to be able
to
resolve that issue. Can you give me any quick thoughts
on
what Congress or what the Federal Government can do to
help

States prepare for the return of veterans and just some
simple ideas that you might have, and I would be open to
your comments.

Thank you very much, Mr. Chairman.

Mr. Smith. Thank you, Senator. I will be glad to
answer that, or try to give an answer to it.

Senator Begich. Okay.

Mr. Smith. We, as certified service officers, we
have
to have a program and tested, approved by the General
Counsel of the U.S. Department of Veterans Affairs. But
we
cannot receive information on all the veterans coming
into
our States because we don't hold a power of attorney on
those individuals. That is where the Privacy Act comes
from. In other words, it would have to go to that.

But a lot of these individuals do not have a power
of
attorney with any organization. We could eliminate the
requirement of that for the State directors to receive
this
information directly from the U.S. Department of Veterans
Affairs or Department of Defense and be able to go see
those
individuals. We are not a membership organization. We
are
a State agency to serve all the veterans.

Senator Begich. Right.

Mr. Smith. And so we are not looking for any kind of membership. We are there to serve, but yet we are treated as we have got to hold this power of attorney before we can

get the information to approach these veterans.

Senator Begich. [Presiding.] I will take command. He is gone.

[Laughter.]

Senator Begich. Isn't that how it works?

[Laughter.]

Mr. Buyer. The committee won't.

[Laughter.]

Senator Begich. A quick question, then, on that. The power of attorney, I mean, if you had a very limited, focused power of attorney for your ability to do that, that could solve the problem.

Mr. Smith. Yes, sir.

Senator Begich. And do you think that can be done through the veteran--well, you have given me a good idea. That is a very--I mean, I have done power of attorneys for my family and many other things, that if you narrow focus it, then they are protected from other uses of it, but you can narrow focus it on the issues of VA benefits.

Mr. Smith. One of the things that we have recommended and, of course, the State directors receive the DD Form 214, Report of Separation from Active Duty, for all those service persons who elect to send that document to the State director. There is a block on there. They could change that around where the veteran could deny the State director

the opportunity to receive that. In other words, if he doesn't say, "No," it comes to us automatically.

Senator Begich. I have got you.

Mr. Smith. We are contacting everyone that we receive the 214 on. We are sending a letter from our Governor to the individual, welcome you home. These are the benefits that are available. These are the offices that can assist you. But we are not getting--for one thing, we are not getting real good addresses. About ten percent of those come back because it is about, in some cases, four to six months before we get the 214.

Senator Begich. I have got you.

Mr. Smith. The other possibility, someone mentioned the VA giving us a computer. DOD give us a computer and send us those 214s electronically, and that way we will have them within a matter of days and we can contact the individual before they get home maybe.

Senator Begich. Very good. Thank you very much.

My time has definitely expired, but I appreciate your comments.

Those are great ideas. Thank you.

I would yield back to somebody.

[Laughter.]

Mr. Buyer. I will take care charge of that. No. Thank you very much for your contribution.

Senator Begich. Thank you.

Mr. Buyer. Gentlemen, I want to go back to the discussion on cemeteries. I would like to have this conversation with all of you because we don't spend enough time on the issue. We truly can observe not only ourselves, but countries around the world. It defines a nation by the individuals who not only do we honor, but how we honor those who came before us and how we honor those who fell with us.

So let me take a moment. There are four departments or agencies within the Federal Government that maintain final

resting place for our veterans and dependents, so we are
all aware regarding the National Cemetery Administration.
That has jurisdiction over 125 national cemeteries. Then we
have the Battle Monuments Commission, which has jurisdiction
over 25 overseas military cemeteries. Then the Department of
Army has Arlington, of which then the VA, we have
oversight,
but the funding comes through the Department of Army with
regard to Arlington. And then we have the Department of
Interior, which has jurisdiction over 14 cemeteries, of
which two are active.

Now, my chief concern here is that we have got four
different agencies overseeing these national cemeteries.
So with regard to our standards on upkeep and maintenance of
appearance is the issue that I am going to continue to
raise. Maybe what we should do, I am going to speak
aloud here with regard to thoughts, is if we have got four

different departments, agencies of government having the
oversight and the Battle Monuments Commission really sets
a gold standard, we have got the Shrine Program within the
VA to increase that standard, but I am not a big endorser of
studies and commissions and all those kinds of things,
but maybe we should have someone take a look at the four
departments, and I would like to have that further
conversation with you, Mr. Chairman, and work between the
House and the Senate with regard to how we can coordinate
these standards and increase the appearance of our
national cemeteries. So I look forward to that continuing
conversation with regard to our National Cemeteries
Administration.

Would all of you concur with this? I doubt if
anybody would disagree. Yes, John?
Mr. Rowan. I don't disagree. I would like to throw

another little wrinkle in the discussion, though, burial issues.

Mr. Buyer. Wrinkle, or are you assisting, or is--

Mr. Rowan. Well, no, it is a concern that we have got, and some of my chapters have been working with, and that is indigent veterans and veterans who just die without family members and who seem to get lost in the systems of medical examiners all across the country or lost in funeral homes all across the country.

In New York City, my local chapter has been burying veterans, taking over as the family member of individuals who either had died without family or died in homelessness--

Mr. Buyer. All right. Time out. Time out.

Mr. Rowan. Yes.

Mr. Buyer. That is outside of this discussion.

Mr. Rowan. I understand, but I think it is interesting that we don't talk about that, either.

Mr. Buyer. You are right. I am going to focus just for the moment with regard to our aesthetic appearance of the cemetery. We can have that discussion with regard to who gains the access to the cemetery. I don't have a problem with any of those kinds of discussions.

The challenge I had is when I actually visited Andersonville and saw that a veteran was being buried, and when I saw all the tombstones misaligned, they had dark stained moss on them, you had grass growing up all around the stones, and someone had mowed the leaves, I was not very happy.

Now, the challenge that the gentleman had is he didn't have that many individuals to provide the maintenance. I will say that he has worked hard to increase it with what he could do with the resources that he had. But I almost got

kind of tickled by--I shouldn't say "tickled," but,
Sergeant
Major, it is kind of like when you grab a Gunny and you
say,

"Gunny, get over here. I have got a task for you. I
want
this cleaned up." And he said, "Okay." "We have got the
weeds around that side of the building. I want them
cleaned

up." So what does he do? He grabs the weed eater and a
bunch of guys and they weed eat it so well, there is no
grass. They weed it all the way to the dirt, right?

So I have this wonderful picture at Andersonville.
They have got dirt now around all the stones. We are not
going to have any weeds anymore. So I look at this and
go,
okay, I guess I was making a demand to get rid of the
weeds.

We got rid of the weeds, but what do we do with the
aesthetic appearance?

So I am just like, all right, time out here. We
need
to get the standards right. I think, Mr. Chairman, you
and
I can get this one resolved and work with the VA. I know
all of you agree on this one, and we will get it taken
care
of.

Thank you all very much for your testimony. Yes?
Mr. Smith. Congressman Buyer, I would like to

remind
you that there are 38 States that have veterans
cemeteries.

There are 70 or 80 cemeteries in those 38 States. So
that
is another one.

Mr. Buyer. Well, if you want to enjoin and you go
after all the governors to hit the standards that we are
about to hit--

Mr. Smith. All right.

Mr. Buyer. --I will applaud that. But I don't have
jurisdiction over all those State cemeteries, okay?

Mr. Buyer. Okay. Thank you.

Mr. Buyer. I will enjoy you with that.

Thank you very much for all of your testimony, and Chairman Akaka, it is a privilege and a pleasure to work with you. I yield back.

Chairman Akaka. [Presiding.] Thank you very much, Ranking Member Buyer.

Let me ask one question here that has come up, and this has to do with caregivers. Some of you have testified in support of having VA provide support services for caregivers of seriously injured veterans. This would be a significant shift for VA in that, typically, benefits for family members are very limited. For those who support this idea, what is the single best argument you would make for this change in mission for VA?

Mr. Norton?

Colonel Norton. If I may, Mr. Chairman, I think it really falls into what you talked about at the outset of the hearing, and that is the absolute obligation of the nation to take care of its warriors, for those who have served and borne the battle, as President Lincoln has said.

The fact of the matter is, Mr. Chairman, we have family

members who are caregivers who have left their jobs, lost their homes, lost their health insurance, are economically

destitute because they are providing full-time caregiver services to their severely wounded veterans. The nation can

do better than that.

We have an absolute obligation to support the wounded warrior, and if the caregivers are the ones who are providing the support services, we believe very strongly

that there is an obligation to provide a system of training, certification, compensation, even health insurance for those

caregivers when we are talking about severely wounded warriors who need such support. And that is why we strongly

support the bill that was just introduced last week by Senator Durbin and Senator Hutchison and others.

Thank you, Mr. Chairman.

Chairman Akaka. Thank you.

Are there any--Mr. Norton?

Colonel Norton. Yes, Mr. Chairman. I guess we feel that with the caregivers being trained and paid, it would relieve some of the help in the VA. The VA, in my estimation, anyway, personally, is lacking in a lot of

the areas when it comes to this kind of care.

Our veterans, whether they are male or female, feel comfortable around their own family. If they could be certified, trained, and paid, then they don't have to go

to a VA hospital. They don't have to have VA employees checking on them because they would be quasi-VA employees,

if you want to look at it that way. And I think it would be

better care for the veterans that have the ability to be cared for at home or off the VA and make them a better quality of life for them because they are being cared for

by their own loved ones. If we could get a system where

they could be actually certified to be caretakers and get some compensation for them, rather than running them down to a

VA center 150 miles away in the middle of the night, these people would be certified and take care of them, and I

think to me it is a quality of life issue, also, that these veterans can stay with their own loved ones.

Chairman Akaka. Mr. Rowan?

Mr. Rowan. Yes, Mr. Chairman. My understanding in

talking to my colleagues is that there was a bill to allow family members to get aid and dependents money, and I think we need to revisit that if that was the case, because that would take care of a lot of what you are talking about if, in fact, a family member, instead of going out and hiring an outside assistant, could take that position, it would be wonderful.

I mean, quite honestly, the VA acts as if nobody has a family. They just totally ignore the family when it comes to not only this issue, but any issue. When we talk about

mental health questions, for example, with PTSD and things, everybody who has studied the issue knows about secondary PTSD for the children and PTSD with regards to the spouse, and yet we don't get any help for that, either.

Chairman Akaka. Any other comments? Mr. Overstreet?

Major Overstreet. Mr. Chairman, thank you, sir. I think there are a couple of issues here. One is it doesn't make any difference how tough you are or how bad you are hurt or how long your hospital stay is going to be. You can take the toughest soldier, marine, sailor, airman, whatever, and I will guarantee you, when they are hurt, the person that they want to see, and I see this all the time in their hospitals, is their mother. And when they get over that first initial, when they are able to go home, whether they have PTSD or traumatic brain injury or any of these other things, they want to be around a comfortable setting. They want to go home.

for
some kind of remuneration for the family. As someone
already alluded to, I see people day in and day out that
lose their homes, lose everything that they have just to
go
be with their service member, and that is truly a shame,
that this nation calls upon them and they did what they
were
called to do and now we are not there to kind of prop
them
up when they really need it.

So I think it comes down for training some of the
family members and some remuneration for the family
members,
because some of these young men and women that we have,
and
not so young men and women, it is a 24/7, someone has to
be
dedicated to take care of them during that time. So once
again, it is a matter of us training them and giving them
a
livelihood to sustain the rest of their life, because in
some cases, that is what it is going to be, for the rest
of
their life, and we need to put them in a setting where
they
feel comfortable with that.

Chairman Akaka. Mr. Roy?

Mr. Roy. Mr. Chairman, it comes back to the basic
question of access into the health care system for those
who
have earned that right. Whether we are talking in-home
care, hospital care, rural health care, all this comes
back
to the simple premise of are we going to give access to
our
veterans? And then the VA has to take a look at health
care
as what is best for the veteran, and that includes home
care. It is just a very simple premise that one size
does
not fit all anymore. We have to take a look at what is
best

of for the veteran. How are we going to improve his quality
of life, as somebody has said?

are We have all had--many of our VSos have members that
are quadriplegics in home and we are taking care of them
versus the VA system and we have to get out of that.

it So is there a very easy answer to it? No, because
it is a complex issue. But we have to start thinking out of
the box, as we have talked about before.

Chairman Akaka. Well, I thank you so much for your
responses. You have been so helpful.

again In closing, I want to thank all of our witnesses
us for appearing before us today. Your testimony has given
us insight, more insight into your organizations' very, very
forward diverse legislative priorities. As always, I look
and to working together to better the lives of all veterans
us and their families. This hearing has been great for all of
us and we will continue to work together in this 21st
century and improve the quality of the services that we give our
veterans.

This hearing is now adjourned.

[Whereupon, at 11:53 a.m., the committees were
adjourned.]