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THE LEGISLATIVE PRESENTATION OF
THE AMERICAN LEGION

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WEDNESDAY, FEBRUARY 24, 2016

United States Senate,
Committee on Veterans Affairs,
Joint with the
House of Representatives,
Committee on Veterans Affairs,
Washington, D.C.

The committees met, pursuant to notice, at 10:00 a.m.,
in Room 216, Hart Senate Office Building, Hon. Johnny
Isakson, chairman of the Senate Committee on Veterans
Affairs, presiding.

Present: Senators Isakson, Boozman, Rounds, Sullivan,
Blumenthal, Murray, Brown, Tester, and Manchin.

Representatives Miller, Lamborn, Roe, Coffman,
Wenstrup, Abraham, Zeldin, Costello, Brown, Takano,
Brownley, O'Rourke, and Walz.

OPENING STATEMENT OF CHAIRMAN ISAKSON

Chairman Isakson. I call this joint hearing of the
House and Senate Veterans Affairs Committees together and
welcome all the members of the American Legion, the
Auxiliary, and all our special guests that are here today.
We are honored with your attendance. We look forward to

1 your advice. And, I am particularly proud to have a
2 Georgian as the Commander of the American Legion and I will
3 give him an appropriate introduction a little bit later in
4 the program.

5 I am going to make a few opening remarks, followed by
6 Chairman Miller from the House, followed by Senator
7 Blumenthal as Ranking Member from the Senate, and Ms. Brown,
8 the Ranking Member from the House, and then we will go
9 straight to the testimony of Commander Barnett, and I will
10 introduce him at that time.

11 Let me welcome you to the nation's capital, welcome you
12 to the home of the United States of America, welcome you to
13 the capital that is here today because of all of you. As I
14 tell many, many people every time I have the chance to
15 speak, there would be no United States of America were it
16 not for our military and the men and women who over the
17 years have volunteered, fought, and in some cases risked
18 their lives or taken their lives in order for the American
19 people to have the country we have today, and that battle
20 still goes on. Because the service members today are the
21 Legion members and veterans of the future, we have got to
22 take as good of care of the ones in the past as we do of
23 those in the future to see to it being in the military in an
24 all-volunteer force is something everybody wants to do, can
25 do, and that the country never looks the other way when our

1 veterans come before us.

2 I enjoyed being with you yesterday at the Hilton. I
3 appreciate very much the recognition. It was undeserved,
4 but as a politician, we take it when we can get it, so thank
5 you very much for--

6 [Laughter.]

7 Chairman Isakson. I am going to take that thing home
8 and show what a great job I am doing to all my constituents
9 in Georgia.

10 I am really honored that we are working this year with
11 Chairman Miller, Ranking Member Blumenthal, and Ranking
12 Member Brown on what I hope will be breakthrough legislation
13 in a number of areas. We need to make sure the Veterans
14 Administration and its employees are held accountable for
15 their services to our veterans and the horrible stories that
16 come out on the news that we have seen so frequently in the
17 last few years, those go away.

18 I want to make a point here. Most of the terrible
19 stories, the most recent one that broke in Cincinnati, what
20 happened in Phoenix, Arizona, what happened in Raleigh, what
21 happened in Denver, and I can go around the country, that is
22 old news. In many cases, the IG reports are from two or
23 three or four years ago. Secretary McDonald and Sloan
24 Gibson have done, in my opinion, a good job of addressing
25 problems that have come before us, but most importantly,

1 working towards seeing to it we do not have things like that
2 happen again.

3 Chairman Miller and I are committed, without any
4 exception, to seeing to it we give the Veterans
5 Administration the accountability tools it needs to run a
6 first class organization and see to it it is always veterans
7 first, veterans last, and veterans always. That is my
8 commitment, that is Congressman Miller's commitment, and
9 that is what we are going to do.

10 We need to expand our caregivers' coverage, and we know
11 that. We need to go past 9/11/2001 to the pre-9/11 period
12 and I am working hard on doing that.

13 Accountability is something that is very important for
14 us to do, making sure we have a VA that can hire and fire
15 effectively and staff its membership. We have far too many
16 acting people, far too many vacancies that are open, far too
17 many restrictions of law that do not give the VA the
18 flexibility it needs to hire the personnel it needs to do
19 the job it is supposed to do. We are going to change that
20 and we are going to make sure it is held accountable as we
21 do it.

22 So, my message to the American Legion is, first and
23 foremost, thank you very much for your service to our
24 country. Thank you for coming to Washington to comment on
25 the President's budget and the VA's budget for the next

1 term. I am honored to be your servant and look forward to
2 being with you all day long, and I will now introduce the
3 Chairman of the House Veterans Affairs Committee, Jeff
4 Miller from Florida.

5 OPENING STATEMENT OF CHAIRMAN MILLER

6 Chairman Miller. Thank you very much, Mr. Chairman. I
7 appreciate the opportunity.

8 Let me first start by congratulating Commander Barnett
9 on his election, the 97th Commander of the Legion. You know
10 his history, from West Point through his family, and I know
11 Johnny is going to introduce him in just a moment, so I will
12 not go through that. But, I want to say that I do look
13 forward to our continued discussion and dialogue as it
14 relates to the priorities of the second session of the 114th
15 Congress. For many years, you and the Legion have been a
16 great source of guidance to those of us that serve on the
17 House and Senate committees and for that we are very
18 thankful. We have always valued your input and are grateful
19 for your continued service to the nation and to our troops.

20 And, I know a lot of you have traveled across this
21 great nation to be here, and in particular, I want to
22 recognize the members from the Sunshine State. I love to
23 get to do this before Ms. Brown gets to do it, but I promise
24 you she is going to do it anyway. The members from Florida,
25 if you would, wave or stand if you can so we can recognize

1 you. Good morning.

2 [Applause.]

3 Chairman Miller. Thanks for taking some time out of
4 your days at the Sunshine State to come up here and talk
5 about the things that are important to not only the Legion,
6 but veterans around this country.

7 Now, over the course of my five years as Chairman of
8 the Committee on Veterans Affairs, I have seen some of the
9 good work that VA does on behalf of the veterans, such as
10 fully implementing the new G.I. Bill, guaranteeing thousands
11 of home loans for veterans, and providing a dignified place
12 to perpetually memorialize our nation's heroes.

13 But, unfortunately, I have also seen a seemingly
14 endless parade of mismanagement and waste at the Department
15 of Veterans Affairs. Examples include the billions of
16 dollars that have been wasted on questionable IT projects,
17 the lavish spending on certain VA medical centers on what
18 somebody defined as art--it looked like a bunch of rocks to
19 me. I do not want to forget the billion dollar overrun for
20 the major hospital construction project in Denver that
21 remains very, very far from completion, and those of you
22 from Denver understand that very well.

23 And, without a doubt, the most egregious failure I have
24 seen is the corrosive culture that has allowed unscrupulous
25 employees of the Department of Veterans Affairs to

1 manipulate scheduling data while patients languished and
2 died, again, waiting for care. It has been close to two
3 years since the nationwide scheduling scandal broke.

4 VA has undergone massive changes in their leadership.
5 However, it is obvious that more changes are going to be
6 needed as serious organizational problems remain ingrained.
7 So, in our efforts to reform how VA manages its people by
8 instilling a new sense of accountability in its workforce,
9 the Legion has been a stalwart ally in our efforts and I
10 want to thank you, Commander, for you and the membership's
11 support.

12 I am confident that each of you are held accountable in
13 the jobs that you do. VA employees, especially senior VA
14 employees, should equally be held accountable.
15 Accountability has got to be ingrained in the mission for
16 the veterans of this country. And as part of the Choice
17 Act, we successfully enacted an expedited removal process
18 for SES employees. However, in the last three attempts to
19 use this process, VA has been stymied by the Merit Systems
20 Protection Board. Recognizing that these reversals
21 undermine the confidence of many of the conscientious
22 employees who perform admirably in their jobs, the Secretary
23 indicated a willingness to engage in reforms so that VA
24 removal decisions would receive more deference than they now
25 receive from the Merit Systems Protection Board.

1 We have got more to do, but we have the Legion's
2 support and I look forward to continuing to engage in that.
3 And, clearly, it is going to take a sustained oversight
4 effort on a bipartisan and a bicameral basis to support the
5 cultural change that the Secretary has admitted is needed at
6 the Department of Veterans Affairs, and we ask the Legion to
7 please remain engaged in visiting and reporting on what is
8 happening at the local level at VA facilities across this
9 country.

10 And with that, I yield back.

11 Chairman Isakson. It is my pleasure to introduce my
12 partner, the Senator from Connecticut, Richard Blumenthal,
13 the Ranking Member.

14 OPENING STATEMENT OF SENATOR BLUMENTHAL

15 Senator Blumenthal. Thank you very much, Chairman
16 Isakson. I am really honored and pleased to be here today.

17 Commander Barnett, congratulations. You are my
18 Commander, as a member of American Legion, proud member of
19 the American Legion. I also want to give a special welcome
20 to the folks from Connecticut who are here and most
21 especially my State Commander, Paul Spedaliere. If the
22 folks from Connecticut could stand or wave your hand so we
23 can give you a great big shout out, thank you, ladies and
24 gentlemen.

25 [Applause.]

1 Senator Blumenthal. You know, I want to point out that
2 we have standing room only in this room, one of the biggest
3 hearing rooms in the United States Congress, and it is not
4 only in this room, but as I came in--in fact, I was a little
5 bit delayed because there are so many of our fellow Legion
6 members--it extends out into the ante room and beyond. So,
7 I want to congratulate and thank you for being here in such
8 force, because your presence speaks volumes about the
9 importance of these issues.

10 Commander Barnett, you and I had a chance to talk
11 briefly at the VA transformation strategy hearing, and I
12 have had a chance to review your testimony. It is
13 excellent, very insightful and important.

14 I commend particularly your support for the Fair
15 Caregiver Benefits Program. Too often, we forget that the
16 ones who serve are not merely the ones in uniform, the men
17 and women who serve and sacrifice in harm's way, but also
18 their families who care for them when they come home bearing
19 the wounds of war, often the invisible wounds of war, post-
20 traumatic stress and traumatic brain injury that can be
21 every bit as troublesome and painful as the visible wounds
22 of war. And, so, I am going to push, with your support, for
23 S. 425, which includes Senator Murray's Military and
24 Veterans Caregiver Services Improvement Act of 2015, which
25 will provide the kind of support those caregivers need.

1 And, likewise, our women veterans, the fastest growing
2 part of the veteran population, female veterans, need more
3 attention, which, rightly, the American Legion has given to
4 them.

5 And, of course, post-traumatic stress and traumatic
6 brain injury, the need for updating the care that we provide
7 in mental health so that we stop the current trend of
8 suffering among our veterans from anxiety, depression,
9 anger, that prevent them from leading productive and happy
10 lives, and sometimes cause them to take their own lives, all
11 too often. The searing, staggering truth is 22 veterans
12 every day still, in the greatest, strongest country in the
13 history of the world, take their own lives.

14 So, these breakthrough priorities which have been
15 identified by the President and by the VA should be molded
16 and perfected, as you are doing today through this hearing
17 process, with input from the public.

18 And, I want to say, finally, I particularly appreciate
19 your very significant insights on accountability. Chairman
20 Miller has rightly focused on that issue. We are all,
21 Chairman Miller and I and Representative Brown, focused on
22 holding accountable the VA for better performance. It is a
23 common cause that we share. And, you point out in your
24 written testimony, and I am quoting--I hope you do not mind
25 my quoting you--"Employee discipline is one part, but full

1 accountability runs deeper than that. It includes real
2 improvements in VA health care, better services for women,
3 innovation on mental health treatment, rewarding career
4 opportunities, and a functional medical records system that
5 truly connects DOD and VA."

6 I could not agree more. I could not say it better.
7 And, I am proud to be with you today. Thank you very much,
8 Commander Barnett.

9 Chairman Isakson. Ranking Member Corrine Brown of
10 Florida.

11 OPENING STATEMENT OF REPRESENTATIVE BROWN

12 Ms. Brown. Thank you.

13 Listen, God bless America, and he has blessed America
14 because you are here, and for your service, I want to thank
15 you, and give yourself a hand.

16 [Applause.]

17 Ms. Brown. My colleague mentioned the people in the
18 room. I want you to note, they are still trying to get into
19 the building.

20 [Laughter.]

21 Ms. Brown. So, it is a big group this year.

22 Before I begin, I want to thank the 2.4 million members
23 of the American Legion for your contribution to your
24 community, your state, and to this nation, both in your
25 service in the military, but in your service now, making

1 sure that the veterans get what we promised to them.

2 Before I begin, I do have to go back to Florida, so I
3 know someone has already introduced the people from Florida,
4 but I have to do it myself. The people from Florida, will
5 you wave your hand or stand? Florida. Is Florida in the
6 house? Thank you.

7 [Applause.]

8 Ms. Brown. As you are aware, today's veterans face
9 many challenges, with reintegration into our society, for
10 making good use of their educational benefits, to
11 effectively and fair process of health and disability
12 claims, and to adjust to a society where service is no
13 longer a norm.

14 Since President Barack Obama has been in office, the VA
15 annual budget has increased by 86 percent, discretionary
16 budget. But, now, the important thing is the other agencies
17 have either had a flat budget or seen a decrease. But, our
18 job as the members of the Congress is to make sure we use
19 those funds and make sure the veterans get what we promised
20 to them.

21 There are two issues that I want to raise. One is the-
22 -I see in the news often that there are 22 a day veterans
23 committing suicide. The point is, only three of them are in
24 the VA system, and I am interested in your ideas of how we
25 can bring those into the system, because a lot of people

1 think that they are young veterans, that they are veterans
2 that just disconnected with the military, but that is not
3 the truth. Most of them are Vietnam veterans, older
4 veterans. Maybe they have worked a second career and now
5 they are feeling not loved. The question is, how can we
6 identify those veterans and get them as a part of the system
7 and make a turn in this 22 a day. It is unacceptable.

8 And, second, we do know that women are the fastest
9 growing group of veterans, and when it was mentioned
10 earlier, I did not see a clap or hear anything about it, but
11 I want to thank them for their service. But in addition--
12 you want to clap, you can clap for them.

13 [Applause.]

14 Ms. Brown. But, the saddest thing for me is to see a
15 homeless female veteran with family, and we have got to
16 address that.

17 And, with that, I want to thank you again for your
18 service and thank you for being here and keeping us on our
19 job, too. Thank you. We all need to soldier up. Thank
20 you.

21 [Applause.]

22 Chairman Isakson. Commander Barnett, would you please
23 stand for a moment? Is your wife, Donna, here?

24 Mr. Barnett. Yes, she is.

25 Chairman Isakson. Donna, would you please stand. Are

1 any of--

2 [Applause.]

3 Chairman Isakson. Remain standing, if you would,
4 because you have five children. Are any of them here?

5 Mr. Barnett. No, they are not.

6 Chairman Isakson. And the grandchildren must not be
7 here if they are not here.

8 Mr. Barnett. They are in school.

9 Chairman Isakson. Well, thank you for perpetuating the
10 Barnett legacy with five children and four grandchildren.
11 That is terrific.

12 Are there any other Georgia members of the Legion
13 present? Would you stand with Dale Barnett. All Georgia
14 members, please stand. Welcome.

15 [Applause.]

16 Chairman Isakson. It is with a great deal of personal
17 pleasure that I introduce Commander Barnett to all of you
18 for his opening remarks and the introduction of his team.
19 He and I have a lot in common. I am a member of Loganville
20 Post 130 of the American Legion. He is 105 from
21 Fayetteville, Georgia, if I am not mistaken. He resides in
22 Douglas County, Georgia. I reside in Cobb County, Georgia,
23 which is right next door. So, we go back a long way.

24 Dale is a graduate of West Point, served 22 years in
25 the United States Army as an infantry officer, was in both

1 Desert Storm and Desert Shield, retired as a Lieutenant
2 Colonel, has an outstanding military record. He has been
3 recognized with the Legion of Merit, the Bronze Star, the
4 Meritorious Service Medal, the Combat Infantry Badge, the
5 Parachutist Badge, and the Pathfinder Badge.

6 But his biggest credit is Donna and his five children
7 and four grandchildren. We know how proud he is of them.
8 And, Dale, we want you to know how proud we are of you.
9 Welcome to Washington, D.C. Congratulations on your
10 leadership of the Legion. Please introduce your team and
11 then take the floor for any statement you want to make.

1 STATEMENT OF DALE BARNETT, NATIONAL COMMANDER, THE
2 AMERICAN LEGION; ACCOMPANIED BY BRETT REISTAD,
3 CHAIRMAN, NATIONAL LEGISLATIVE COMMISSION; RALPH
4 BOZELLA, CHAIRMAN, NATIONAL VETERANS AFFAIRS AND
5 REHABILITATION COMMISSION; LOUIS CELLI, JR.,
6 DIRECTOR, NATIONAL VETERANS AFFAIRS AND
7 REHABILITATION DIVISION; IAN dePLANQUE, DIRECTOR,
8 NATIONAL LEGISLATIVE DIVISION; JAMES W. OXFORD,
9 CHAIRMAN, VETERANS EMPLOYMENT AND EDUCATION
10 COMMISSION; AND JOSEPH SHARPE, JR., DIRECTOR,
11 VETERANS EMPLOYMENT AND EDUCATION DIVISION

12 Mr. Barnett. Thank you, Senator Isakson.

13 First, I would like to introduce my team. From our
14 Veterans Affairs and Rehabilitation Commission, Chairman
15 Ralph Bozella and Director Louis Celli. From our Veterans
16 Education and Economic Commission, Chairman James Oxford and
17 Director Joe Sharpe. From our Legislative Commission,
18 Chairman Brett Reistad and Director Ian dePlanque.

19 Good morning, Chairman Isakson, Chairman Miller,
20 Ranking Member Blumenthal, Ranking Member Brown, and members
21 of the House and Senate Committee on Veterans Affairs. I
22 thank the Chairman for his kind words of introduction and
23 his steadfast leadership in support of his fellow veterans
24 and for all who have sworn with their lives to protect our
25 nation.

1 On behalf of more than 2.2 million wartime veterans of
2 the American Legion, I appreciate the opportunity to testify
3 at such a critical time for those who have served our
4 country, their families, and the nation itself.

5 Understanding that time is of the essence with you, I
6 will go directly into my testimony and reserve the
7 introduction of distinguished guests until the conclusion of
8 my statements.

9 This morning, I want to talk about a word we have all
10 been wrestling with. The word is accountability.
11 Dictionaries define it as an abstract noun that means a
12 willingness or obligation to accept responsibility and
13 account for actions.

14 Men and women of the United States Armed Forces
15 understand what that word means. When asked to stand in
16 harm's way, knowing that fulfillment of obligations and
17 responsibilities can cost their lives, they accept without
18 hesitation and they go about the business of executing their
19 missions. That is accountability. And when battle plans do
20 not survive first contact with the enemy, as so often they
21 do not, they improvise. They find a different way to
22 succeed. Accountability has never been a matter of choice
23 for our troops. It has been a matter of life and death.

24 Today, accountability is a buzzword that flies through
25 hearings, candidate debates, and media releases, generally

1 meaning the inability, or more accurately, inability to
2 discipline or fire poor performing executives, managers, and
3 employees. To the American Legion and the veterans of our
4 nation, that is important, but it is only a fraction of what
5 it means to be accountable.

6 Put yourself in the place of a newly minted veteran,
7 perhaps rifted by sequestration after a dozen or so years on
8 active duty. She may have served, may have a service-
9 connected disability after multiple deployments. Maybe for
10 the first time, the veteran is coming into contact with the
11 VA claims process and health care system. He may have
12 children at home, but cannot get a night's sleep without
13 reliving IED explosions and RPG attacks that killed a half-
14 dozen of his comrades. To file for VA benefits, she needs
15 electronic access to her military records and service to our
16 country. They held up their end of the accountability
17 bargain. How do you think they assess their nation's
18 ability to do the same for their fellow veterans?

19 Congress tried to address this struggle by passing the
20 VA Accountability Act of 2014 to remove obstacles that
21 prevent dismissal of poor performing managers and employees.
22 VA has described accountability as a top priority in the
23 aftermath of scandals blamed for costing some veterans their
24 lives. The payout of questionable performance bonuses and
25 ill-fated efforts to discipline executives who were found to

1 abuse their position.

2 You cannot imagine how disappointed I was and my fellow
3 American Legion members were on October 21, 2015, when five
4 senior VA witnesses failed to appear at an accountability
5 hearing and the House Committee on Veterans Affairs had to
6 issue subpoenas to summons them. And then once they were,
7 two of the key witnesses invoked the Fifth Amendment to
8 avoid explaining findings from the VA IG that they had
9 manipulated the system to the tune of about \$400,000 in
10 unscrupulous relocation costs and practices.

11 Our disappointment only grew after additional hearings
12 established wrongdoing and punishments were imposed, only to
13 be overturned in the appeals process. Veterans do not see
14 this as accountability, as I mentioned, some of the highest
15 priorities.

16 Please understand that neither I nor the American
17 Legion believe that the U.S. Government is not serving our
18 veterans. We look at these challenges with confidence that
19 they can and they will be overcome.

20 First, it is the nation's moral duty to provide a VA
21 health care system that is accessible, efficient,
22 compassionate, and capable of providing the best possible
23 treatment of the men and women who have defended our nation
24 in uniform. What does that mean? That means a VA system
25 that is not short of qualified doctors, nurses, specialists,

1 and administrators. It means a timely and accurate benefit
2 adjudication and appeals process. It means reasonable
3 access to care, no matter where veterans live or how
4 overcrowded the nearest VA medical center might be.

5 And if the most reasonable option for a veteran is to
6 use the Choice program to get help from a non-VA provider,
7 the process must be seamless and create no additional burden
8 to the veteran. Some non-VA providers have opted out of the
9 Choice program due to a lack of timely and accurate
10 compensation, and some veterans have been charged back out-
11 of-pocket costs, causing unnecessary strain and even credit
12 damage for the very people this program was designed to
13 help.

14 A more recent concern, VA executives, managers,
15 employees who failed to perform in a responsible or
16 competent manner, or worse yet, abused their positions for
17 personal gain should be appropriately disciplined, to
18 include termination. The American Legion, Congress, and VA
19 all supported the Accountability Act because it made clear
20 that dereliction of duty would have consequences. The words
21 are there. Execution is the problem.

22 Another example is the newest effort to deliver a
23 lifetime electronic medical record system that finally
24 connects DOD and VA. Many have been the attempts, but full
25 interoperability is still not a reality after several years

1 and many promises and over a billion dollars. Having served
2 22 years in the active duty Army, I recently tested myself
3 the new system. My own medical records from the DOD side
4 were missing. I assume that was a function of the era in
5 which I served. VA, to its credit, had a more complete
6 record.

7 Soon after I tried the new system, I met a young man
8 named Jack, a much more recent veteran, serving in the
9 National Guard. He deployed three times to Afghanistan and
10 came home with a 40 percent disability rating. Upon
11 checking his DOD and VA medical records and the new Joint
12 Legacy viewer system, he was shocked, as I was, to find the
13 same results, that his DOD records were not integrated into
14 his VA file. Again, when we talk about seamless transition,
15 all the words and promises are there. Execution is the
16 problem.

17 Accountability extends to the veteran who suffers from
18 post-traumatic stress disorder and traumatic brain injury.
19 The American Legion experience in research leaves one clear
20 conclusion: No two cases are exactly alike. There is no
21 magic bullet to treat these life-changing service-connected
22 conditions which affect entire families. The road to
23 recovery from PTSD and TBI do not always run through the
24 pharmacy.

25 The American Legion supports no fewer than six bills in

1 the 114th Congress to recognize different ways to succeed in
2 the battle to help veterans from PTSD and TBI. The PROMISE
3 Act, the Jason Simcakoski Memorial Opioid Safety Act, the
4 COVER Act, the Veterans Wellness Act, Expanding Care for our
5 Veterans Act, Veterans Dog Training Act, all of these open
6 the door to treatment that does not depend on drugs.

7 I call on Congress to move bills such as these through
8 the process and into law. You have the American Legion's
9 support. We can only achieve accountability to America's
10 veterans if we work together honestly and transparently to
11 prove that a grateful nation will put real execution behind
12 all the words. Congress, VA, the DOD, and Veterans Service
13 Organizations must show those who have served in uniform
14 that America can be accountable to its veterans as veterans
15 have been to America.

16 America and American veterans deserve efficient
17 transition assistance, jobs and business opportunities that
18 match the skills and training of those who have served our
19 country, budget resources necessary for the troops at war
20 today, to see the flag under which our servicemen and women
21 have fought protected from desecration in accordance with
22 the will of over 80 percent of the American public. These
23 are the American Legion priorities. We see them as much
24 more than words.

25 Veterans and Americans at war today are looking to

1 their nation for nothing less than action and accountability
2 to back up these priorities. Too often, what they are
3 seeing is the assignment of blame over an inability to
4 execute. We need to find different ways to succeed. It is
5 time to expand the definition of accountability.

6 Thank you for the opportunity to come before you to
7 renew the American Legion's vow to work with government on
8 behalf of all who have served and those yet to do so to whom
9 we owe so much. Thank you, God bless you, and God bless the
10 United States of America.

11 [Applause.]

12 [The prepared statement of Mr. Barnett follows:]

1 Mr. Barnett. Chairman Isakson, with your permission, I
2 would like to introduce some additional people, if I may,
3 sir.

4 Chairman Isakson. Please, go right ahead.

5 Mr. Barnett. If the following people would please rise
6 and be recognized. The American Legion's National Officers
7 serving with me this year, please rise.

8 [Applause.]

9 Mr. Barnett. I would like the Past National Commanders
10 of the American Legion in the audience to please rise.

11 [Applause.]

12 Mr. Barnett. A very special lady, Sharon Conatser, our
13 National President of the American Legion Auxiliary.

14 [Applause.]

15 Mr. Barnett. Our National Commander of the Sons of the
16 American Legion, Kevin Collier.

17 [Applause.]

18 Mr. Barnett. Our Past National Presidents of the
19 American Legion Auxiliary.

20 [Applause.]

21 Mr. Barnett. And our Past National Commanders of the
22 Sons of the American Legion.

23 [Applause.]

24 Mr. Barnett. And, lastly, and I would be totally
25 remiss, my high school sweetheart, my best friend, my wife,

1 Donna.

2 [Applause.]

3 Mr. Barnett. Thank you, Mr. Chairman.

4 Chairman Isakson. Commander Barnett, Donna, thank you
5 very much for your testimony and your presence today and
6 thank you for what you do for the veterans of America and we
7 are delighted to have all of you.

8 I was listening to your remarks. I read them last
9 night, but they are much better when you hear them delivered
10 and you watch the emphasis and watch the eyes twinkle when
11 you say certain words. There were some words I want to
12 point out in your remarks.

13 One is execution. You said accountability cannot be a
14 buzzword. It has to be evidenced by the execution of the
15 VA. I think it also has to be evidenced by the execution of
16 the Veterans Affairs Committee in the Senate and the House.
17 As I told your group yesterday when we spoke at the Hilton
18 yesterday morning, I have committed myself to see to it that
19 before this term is over this year, and hopefully by the
20 31st of March, we begin the process of passing a
21 comprehensive omnibus bill that incorporates the bills we
22 all know need to become law, addresses accountability in a
23 meaningful fashion, addresses whistleblower protections in a
24 meaningful fashion so people are free to report things that
25 are not right, and changes the VA from an organization where

1 execution is to run and hide. Instead, execution is to do a
2 better job every single day you go to work.

3 Ninety-nine-point-nine percent of the employees in the
4 VA do a great job. They are brought down and torn down by
5 incidents like what happened in Pennsylvania, when people
6 who are disciplined and lose their jobs have those jobs
7 restored for no apparent reason in terms of judgment. There
8 is no good judgment in a hospital when there is no
9 accountability on the part of those that are keeping their
10 job. And what accountability do you get when a veteran
11 calls a hotline and gets a busy signal? That is not a
12 hotline, that is a cold line. When it comes to mental
13 health, somebody at risk for their own life, that execution
14 costs a life.

15 We cannot accept anything but absolute execution in
16 terms of every job, whether it is the Chairman in the House,
17 the Chairman in the Senate, the Commander of the American
18 Legion, or the rank and file veteran in every post all over
19 the United States of America.

20 I am committed to not being a Chairman who has to
21 answer a question at the end of the year that I did not do
22 something when I had the chance. We are going to do an
23 accountability bill. We are going to address what needs to
24 be addressed. We are going to give the Secretary the tools
25 to do so. And we are going to hold ourselves accountable in

1 doing it. I promise you that.

2 [Applause.]

3 Chairman Isakson. And to that end, I want to thank
4 Ranking Member Blumenthal and Senator Murray and Senator
5 Tester on the other side are helping to work towards an
6 agreement. I want this to be something we can be united on
7 in the House and something we can be united on with the
8 Senate, so we send a clear message to the veterans of the
9 United States that Congress heard your word. We are going
10 to see to it there is better execution at the VA and we are
11 going to lock arm in arm to see to it the VA is everything
12 we all want it to be, the best service agency in the United
13 States Government.

14 Now, with that said, one other question I want to ask
15 you before I turn to my fellow colleagues, we have over
16 440,000 delinquent appeals that are still pending before the
17 VA, and it gets longer and longer and longer. Do you have
18 some specific recommendations on what you would recommend
19 that we do to help speed up the process in terms of those
20 appeals and those claims?

21 Mr. Barnett. Thank you, Senator, for that question,
22 and I was very pleased two weeks ago when I was at your
23 hearing on reforming, and I think Senator Blumenthal brought
24 up some innovative ways that we could reduce that appeals
25 process. To have five years of appeals claims for a veteran

1 waiting that long for adjudication, it is just wrong. It is
2 just wrong.

3 But, I want to make very clear, we want to be partners
4 to look at that reform process, but we need to make sure
5 that our veterans continue to have full due process of law
6 in any reform of that appeals process.

7 Chairman Isakson. I appreciate your comment on that,
8 because we have got--there is a sweet spot somewhere we have
9 got to find. There is one appeal at the Veterans
10 Administration that is 25 years old that has been--I do not
11 know the case and I do not know the individual, but 25 years
12 is too long for a case to be dragging. It also takes time
13 away from a contemporary claim that is filed by a veteran
14 today.

15 We have got to find a way to have an appeals process
16 that works, but has a capitation position at some point in
17 time where the VA can make a decision that becomes final so
18 an appeal does not become a burden for every other veteran
19 trying to get an establishment of disability in the Veterans
20 Administration.

21 We want the Legion, Paralyzed American Veterans,
22 Veterans of Foreign Wars, and all the Service Organizations
23 to work with us to find out what that formula is. It is
24 going to take us working together to do so, and I appreciate
25 your willingness to be able to work with us to make that

1 happen.

2 With that said, I will turn to Chairman Miller.

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

4 A quick update, Commander, on some of the legislation
5 that you referred to in your testimony. We have a markup
6 tomorrow in the House, and the Promise Act, which is the
7 House version of the Jason Simcakoski Act, is actually going
8 to be marked up and passed out of the committee. We have
9 also passed the dog training and the COVER Act out of the
10 House. Both the House and the Senate worked together on an
11 omnibus. We will try to see if we can have those recent
12 pieces of legislation tucked into that omnibus, if we can.

13 If I can for a moment focus on mental health and
14 suicide, there has been a lot of attention focused by the
15 media of recent date, the number of 22 veterans a day
16 committing suicide. And you have seen record amounts of
17 money. You have seen staff increases at the Department of
18 Veterans Affairs, a focus there. But, we still have those
19 veterans out there, a great number of them, not even in the
20 system yet.

21 And, so, my question would be, what can VA do to change
22 that trajectory so that those, number one, those veterans
23 get into the system so they can get the help they need, and
24 number two, those numbers begin to decrease from 22 a day.

25 Mr. Barnett. Well, first of all, Representative

1 Miller, thank you for pushing those bills through, because a
2 lot of those address some of the things that we look, and as
3 I said in my testimony, there is no silver bullet. Every
4 case is unique. And, I know that it was old news about that
5 suicide hotline that came out, but leaving one veteran
6 behind is just unconscionable.

7 We need to make sure that we do everything we can to
8 look at ways to help those veterans, and I have got people
9 behind me right now that live that each and every day in
10 their community. The American Legion wants to be partners
11 in that, the peer mentoring, the things that we can do each
12 and every day to make that transition from the military life
13 into civilian life. And, so, we support that. And,
14 anything that we can do to support ways to prevent suicides
15 and to get those numbers down, I will tell you, the American
16 Legion is in the game.

17 Chairman Miller. I think when you look at the Choice
18 Act and the things that we try to do in a bipartisan fashion
19 to allow a veteran to receive care when and where they want
20 to in their local community is something that, obviously,
21 the Secretary, I believe, is committed to. I am not so sure
22 that some of the mid-level folks within the VA are totally
23 committed to Choice. They still in some instances want to
24 say that they are giving you the choice. They are choicing
25 you, if you will. It is supposed to be your decision

1 whether you receive your care inside or outside. But, to
2 allow veterans to receive their care, should they choose, in
3 their own home area, in particular in rural communities, I
4 think is a direction that we all need to keep pushing for.

5 But, we do know that health care is changing
6 dramatically. You know, the days of long stays in the
7 hospital are pretty much gone as it relates to inpatient
8 surgery, and people are in and out relatively quickly. So,
9 if you would, put on your magic thinking cap, if you will,
10 and describe for us--you or staff--what you think the VA
11 will look like 20 years from now in their delivery of health
12 care. Do you see them streamlining the system, or do you
13 see them hanging on to a decades-old system that obviously
14 has been broken?

15 Mr. Barnett. Chairman Miller, thank you very much for
16 your insight, and you are correct. Veterans all--and I am
17 going to pass that on to our real subject matter experts on
18 this, our Veterans Affairs and Rehabilitation. If you would
19 at this time please address the Chairman's question, please.

20 Mr. Bozella. Thank you, Commander, Mr. Chairman,
21 members. The gist of your question, yes, choice is out
22 there right now, and you are also looking into the future,
23 what will the VA look like in 20 years. And if you listen
24 to some people, they are ready to shut the VA now and just
25 send every veteran out in the community. We certainly do

1 not support that. Veterans need total health care. VA
2 understands the veteran. They understand the whole person.
3 They understand the mental health aspects as well as the
4 physical health aspects and the emotional health aspects
5 that go on to treating the whole person.

6 Choice can work, but it is not working right now. It
7 is not working now because of the confusion within the VA
8 itself. I think you just said it, Mr. Chairman, with the
9 middle managers maybe not buying in, as well as the
10 veterans. We really do not know how it works. There is a
11 lot of confusion of how the product will be delivered, the
12 different health providers, Health Net, TriWest, and so on
13 that are working with VA. And what is happening is veteran
14 patients are losing doctors they have already had, maybe
15 through a fee-base or through PC3, and all of a sudden now
16 they are put into a Choice bucket and they have to go
17 through another whole process. We are finding that it is
18 taking longer time and it is adding confusion.

19 Could it work in the future? Maybe in time, it will.
20 And for VA to use community providers is not a new idea, as
21 you know. There have been ways VA has properly utilized
22 that in the past. That is an okay resource. But the first
23 line of defense for veterans' health should be VA health.

24 Chairman Miller. Thank you very much.

25 Mr. Blumenthal, you are recognized.

1 Senator Blumenthal. Thank you, Mr. Chairman, and thank
2 you, Commander Barnett, for that excellent testimony.

3 Thank you for focusing on the suicide issue. I was
4 very proud to spearhead the Clay Hunt Suicide Prevention
5 bill here in the Senate with the help of Senator Isakson and
6 other members of the committee, my colleagues on the
7 Veterans Affairs Committee, and I can tell you, one of the
8 proudest moments of my service in the United States Senate
9 was to stand with my partner in that effort, John McCain,
10 Senator McCain of Arizona, in the White House when the
11 President signed it, and next to us was Clay Hunt's mom, and
12 in the audience were many of the families who had lost loved
13 ones to suicide. This kind of hidden killer is one that
14 ought to concern every American.

15 And, likewise, I appreciate the VA's prioritizing of
16 exposure to hazardous materials, Agent Orange, a continuing
17 scourge for our veterans, but the newer toxic chemicals,
18 nerve gas, other kinds of contaminants found on today's
19 battlefield, radiation. And, so, I am leading an effort to
20 pass a measure with bipartisan support that will provide for
21 study and research and solution to these kinds of exposures
22 and the impacts they have not only on the veterans of today,
23 but potentially on their families through the genetic
24 effects of radiation and hazardous chemicals and toxic
25 poisons found on today's battlefield.

1 I wonder if you have heard from your members about this
2 issue.

3 Mr. Barnett. Absolutely, we have heard about the
4 hazardous material. In fact, it was the American Legion
5 that did the Agent Orange back for the Vietnam veterans. We
6 continue to support equity for all veterans, to include
7 those of the Blue Water Navy veterans. We need to make sure
8 that no veteran is left behind.

9 We need to be up front and accountable as our U.S.
10 Government that when we have exposed our veterans to
11 hazardous situations, that we do the right thing by
12 recognizing that and getting them the best treatment that we
13 possibly can through our VA health care system.

14 Senator Blumenthal. Thank you.

15 Focusing again on the issue of appeals, as you know, as
16 your report--by the way, I want to say, this document ought
17 to be required reading for everyone who cares about
18 veterans' issues. Many of you, I am sure, have read it. I
19 hope all of my colleagues on the committee do. But, it
20 really highlights in a very concise and powerful way what
21 the issues are that ought to concern us in the Congress, and
22 I want to highlight the points that you make on the appeals
23 issue, where the numbers of appeals has doubled even as we
24 have made progress on reducing the number of disability
25 claims, which have gone from 611,000 to 77,000 between 2013

1 and today.

2 The number of appeals pending, 440,000. That is
3 440,000. Just think of it. And, 360,000 are within the
4 jurisdiction of the Veterans Benefits Administration. The
5 rest are within the jurisdiction of the Board of Veterans
6 Appeals. A number of the recommendations that you make in
7 this report, I hope will be adopted, and you cite, for
8 example, the GAO report, the Government Accountability
9 Office, which says, quote, "The Veterans Benefits
10 Administration does not follow accepted statistical
11 practices and thus generates imprecise accuracy data." That
12 goes to the core of accountability, telling the truth, being
13 accurate.

14 And, so, your recommendations about what ought to be
15 done, such as accelerating the use of the fully developed
16 claims process, other kinds of measures, improvements in the
17 outdated work credit system, I think are key here.

18 And I would like to ask, finally, if I may, whether the
19 comment that was just made about continuing reliance on the
20 VA health care system, perhaps not completely or
21 exclusively--community care has a role--but whether the
22 feedback you receive from your members indicates a continued
23 desire to rely on a VA health care system.

24 Mr. Barnett. Thank you, Senator. First of all, I
25 think the statistics that the overwhelming majority of our

1 veterans do have confidence in the VA health care system,
2 because once they get to their provider, it is outstanding.
3 But, it is some of the things you talked about, specifically
4 in the appeal state. We believe if we did it right the
5 first time, and doing right the first time means you have
6 the information, that the information is accurate. That is
7 why I am so passionate about these electronic medical
8 records. We have been promised that for ten years. It is
9 time to execute. It is going to make the claims process
10 more accurate. It is going to make it more timely. And it
11 is going to be fairer to the veteran. That is what we have
12 got to do. We do not need to be assigning blame. We need
13 to get her done. That is what we need to do.

14 Senator Blumenthal. And--

15 [Applause.]

16 Senator Blumenthal. I will take this point and
17 incorporate it in a letter to both the Secretary of Defense
18 and the Secretary of the VA because it very powerfully and
19 eloquently states what many of us feel from day one here--
20 and I have only been here for five years, but from day one,
21 this issue of the lack of interoperability of those records
22 systems has been the bane of my existence. And, time after
23 time, I have asked Secretaries of Defense about it, as well
24 as Secretaries of the VA, only to receive assurances that
25 the solution is just around the corner, that it is on the

1 horizon, that we are about to do it, and I think it is past
2 time that it be done.

3 Thank you very much for your testimony today.

4 [Applause.]

5 Chairman Miller. Ms. Brown.

6 Ms. Brown. Thank you.

7 Commander, I have been on this committee for 23 years
8 and we have been asking the Department of Defense and the
9 Department of Veterans Affairs to work together so that when
10 you--it will be a seamless system. Now, I can tell you, we
11 can ask, and you talk about accountability, but it has just
12 been very difficult to get these two agencies to work
13 together. You know, it makes no sense that when you go to
14 the system, we cannot find your records, because, first of
15 all, when you join the military, you spend--you go through
16 boot training. Well, when you come out, it should be some
17 kind of boot training when you come out, and those systems
18 should just connect and it does not. For 23 years, we have
19 asked them to do it. And, you talk about accountability.
20 How do you make the Department of Defense work with VA? You
21 tell me. I am willing to do whatever you tell me to do.

22 But, I want to mention a couple of things. Fifty-six
23 million appointments in 2015 and we have got two million
24 more from 2014 and one-third of the people that work for the
25 VA are veterans. And when we talk about accountability, as

1 you said, the veterans are very satisfied with the services
2 that they get.

3 Now, the appeals process, the person 25 years been in
4 the system, I think--and you say you want them to continue
5 to have their rights, and I agree. But at some point, maybe
6 "no" is the answer. So, how do we deal with that? They are
7 coming up with a system that--some things are easy, but if,
8 for example, if you go in for one problem and you get
9 satisfaction, then you get another problem, well, how do we
10 deal with the complicated systems problems that are not as--
11 some of them are easy, but some of them, this guy or lady--
12 no, it is a guy. Twenty-five years is a guy. But, tell me,
13 what do we do when the appeals process--I mean, at some
14 point, "no" might be the answer. Not for my constituent,
15 "no" is never the answer, but for someone else, "no" might
16 be the answer.

17 [Laughter.]

18 Mr. Barnett. I am going to let someone else, but
19 sometimes "no" may be the answer, but we want to make sure.
20 I am going to pass that on to Lou Celli for that answer,
21 please.

22 Mr. Celli. Thank you, Congresswoman Brown. We have to
23 instill faith in the system. Our veterans do not have
24 enough faith in the Department of Veterans Affairs
25 adjudication system to know that their claim was processed

1 accurately the first time. If we could get that
2 adjudication system improved and processed the first time,
3 we would not have 440,000 appeals that we would be dealing
4 with today.

5 The American Legion has testified for the past three
6 years on the explosion and the predicted explosion of
7 appeals and this has now come to fruition, and now we are
8 looking at it and say, well, how do we fix the appeals
9 process? We have to fix the adjudication process from day
10 one. We have to make sure that they are adjudicated
11 properly. Senator Blumenthal talked about the GAO report
12 that highlighted insufficiencies in the adjudication
13 process. If we get that fixed, your appeals process will
14 slow to a trickle and those anomalies, like that 25-year
15 veteran who keeps jumping into the hamster wheel of appeals,
16 those will dissipate and disappear.

17 Ms. Brown. One of the other point is working with
18 groups like yourself, when they come in, the packages are
19 complete and they are ready to go through the process, and
20 that is important, too, because when you come in, then you
21 are not asking for something that should already be in the
22 application.

23 So, I guess what I am saying is, is us working together
24 to make sure. It cannot be just the VA. It has got to be
25 you all working with that veteran to make sure when they put

1 that application in, it is complete.

2 Mr. Barnett. Representative Brown, I could not agree
3 with you more. It has to be a partnership, and veterans
4 have to come first. We have to be part of the reform
5 process, and it is important that it is fair to the veteran,
6 that it is an efficient system, it is effective, and it does
7 right by the veterans. That is what we are calling for.
8 And we are all in as partners and we want to be part of that
9 reform process.

10 Ms. Brown. Thank you. Thank you. I yield back, Mr.
11 Chairman.

12 Chairman Miller. Thank you very much.

13 Mr. Lamborn.

14 Mr. Lamborn. Thank you, Mr. Chairman, and I am going
15 to thank all the people from the American Legion being here,
16 Commander Barnett and all of your staff and colleagues, Mr.
17 Bozella from Colorado.

18 And, by the way, I am going to beat Mike Coffman to
19 this. Is anyone here from Colorado? Could you raise your
20 hand, please.

21 [Applause.]

22 Mr. Lamborn. Tim, I saw you in Canon City just the
23 other day.

24 Mr. Barnett, I want to thank you for the good work that
25 you and everyone here does for supporting our nation's

1 veterans, and as a Representative of a district with nearly
2 100,000 veterans, including Tim, I would like to take a
3 minute to recognize--let me see--I have already covered that
4 ground, so let me move on to my question.

5 I am concerned that our veterans are not receiving the
6 services they have earned and we are having, unfortunately,
7 cases of people falling through the cracks and that just
8 simply should never happen. And, we have incidents like
9 what the IG uncovered in my clinic in Colorado Springs in my
10 district, or recent news out of Cincinnati. And, three
11 things that need to be happening that are not happening are
12 transparency, accountability, and culture change.

13 So, are we doing enough here in Congress and with your
14 help to reform the VA, and if not, how do we turn around
15 this aircraft carrier? You know, it is not going to happen
16 over--you know, on the dime. How do we turn around this
17 massive bureaucracy?

18 Mr. Barnett. Well, thank you so much for that insight,
19 and it does need to be accountable. It does need to be
20 transparent. And, I will tell you, I cannot tell you how
21 happy I am with the Veterans Affairs Committee, both the
22 House and the Senate. I think you have listened to us. You
23 have been our partner and you continue to be our partner.
24 And when we find problems, such as we find throughout the
25 country, we are going to stand up for our fellow veterans

1 and we are going to make those identified for you.

2 But, just like the frustration of the telephone system,
3 and Deputy Secretary Gibson talked about this yesterday, and
4 he admitted that it is archaic, that people have trouble
5 getting appointments and the frustration level of those,
6 especially our senior veterans, of getting appointments
7 sometimes leads to their frustration.

8 But, again, as I said earlier, I think most of our
9 veterans, once they get to their health care provider, they
10 are extremely satisfied, and the VA health care system, we
11 want to be very crystal clear, it is a System Worth Saving.

12 [Applause.]

13 Mr. Barnett. Do you want to add anything?

14 Mr. Lamborn. Ralph.

15 Mr. Bozella. Thank you, Mr. Lamborn. Thank you for
16 that question, because it has happened locally for us in
17 Colorado. After the Phoenix issue back a couple of years
18 ago and then the waiting list scandals that perpetuated VA,
19 it was almost unconscionable to see this crop up in Colorado
20 Springs. But, it is still a couple of years old, as well.

21 The issue there is, is it wrongdoing or is it making
22 mistakes? And in talking to Director Hanfield about that,
23 the new Director of the Eastern Colorado Health Care System,
24 she said there is no wrongdoing. It is an issue of people
25 making mistakes and we can train them to do better.

1 Now, I want to go back to Commander's accountability
2 and what you said about transparency. The first step, to
3 me, in accountability is transparency, and that has been the
4 problem with the wait list scandal the whole time. VA has
5 not been transparent.

6 Mr. Lamborn. That is right.

7 Mr. Bozella. When they are transparent, we can help
8 them fix the mistakes, and they will find that we are going
9 to be their greatest ally and their greatest supporter to
10 help them fix mistakes and to publicly stand with them and
11 say, yeah, there has been a problem here. Let us fix that
12 problem. But, you cannot do that unless they want to be
13 accountable.

14 I would hope that, by now, that we never, ever have to
15 hear of another waiting list scandal. When people
16 purposefully put veterans on the list that is not going to
17 go anywhere, be it Choice, be it to a VA appointment, that
18 has to be investigated as to why that is happening, and yes,
19 you have to get new people in there to work it, and yes,
20 they have to train them to do it properly and get them to
21 understand you have to be transparent and accountable.

22 Mr. Lamborn. Ralph, I met with her, also, as did our
23 two Senators. We had a meeting down in Colorado Springs
24 last week. And, she told us this was old news, that they
25 have been retrained, and now it is not going to--should not

1 happen again. The trouble is, I am still getting in my
2 office complaints from people not seeing providers in a
3 timely fashion and not being able to get on the Choice list
4 in a seamless kind of way. So, these problems are still
5 happening, maybe not as much as they were, but they are
6 still happening. So, when I am told that we have got this
7 under control and then I hear differently from veterans in
8 my district, I do not buy it.

9 Mr. Bozella. May I respond? If we can help you, I
10 would be glad to help you with a System Worth Saving review
11 of the Colorado Springs system with our veterans, our
12 American Legion members from Colorado doing that.

13 Mr. Lamborn. All right. Thank you. Yield back.

14 Chairman Miller. Ms. Brownley.

15 Ms. Brownley. Thank you, Mr. Chairman, and thank you,
16 Commander Barnett, for your leadership and your testimony
17 today, and I really want to thank, really, all of the
18 members for your leadership across our great country to make
19 sure that all of our veterans in every corner of our country
20 are properly served. So, thank you very, very much for
21 that.

22 And, I wanted to make sure that if there are any
23 California Legionnaires here, if you would stand up and
24 recognize yourself. Welcome, and thank you for your
25 leadership.

1 [Applause.]

2 Ms. Brownley. Commander Barnett, I had a more specific
3 question, I think. As you know, the Congressional Budget
4 Office has changed its policy for scoring bills to authorize
5 new VA major medical facility leases, and this new policy,
6 at least in my opinion, has made it quite difficult for
7 Congress to authorize high-priority projects across the
8 country in a timely manner.

9 I certainly have suffered through this in my district
10 in Ventura County and we sorely need a VA-run CBOC that is
11 the appropriate size to serve our veterans. Our veterans in
12 Ventura County have been underserved now for many, many
13 years and they need some specialty care services in the
14 district, and particularly mental health services, and
15 sometimes, really, just timely primary care coming out of
16 the CBOC.

17 So, I introduced a bill to fix this problem. It is
18 called the Build a Better VA Act, and my bill would allow
19 the House and Senate Veterans Affairs Committee to approve
20 new leases via resolution instead of legislation, and this,
21 I think, small procedural change will make a big difference
22 in the lives of veterans in more rural areas, in underserved
23 communities, who still face and continue to face significant
24 barriers in accessing VA health care.

25 So, I just wanted to get your feedback and your

1 comments on the impact that you see on the delay in
2 authorizing new construction leases and if you believe that
3 it is having a real impact across our country.

4 Mr. Barnett. First of all, Representative Brownley, I
5 want to thank you for your bill, Build a Better VA Act, H.R.
6 2914. That is a positive move. I will tell you that
7 veterans around the country believe in our CBOCs because it
8 is that personalized state. And, I was going to pass this
9 over to Lou Celli, who could probably provide some
10 additional in-depth information in reference to that, but I
11 want you to know we are totally behind that Act as the
12 American Legion. Lou.

13 Mr. Celli. Thank you, Representative Brownley. So,
14 here we are again, right, 27 CBOCs we were able to slip
15 through with the Choice Act legislation, but it was a band-
16 aid. All we did was kick the can down the road. It is time
17 to fix this problem. Congress makes a concerted effort to
18 fund outreach clinics in districts that desperately need
19 that help. The VA needs to be able to execute. There is a
20 problem there.

21 It is certainly not the will of Congress that these
22 CBOCs are not getting the attention they need, they are not
23 getting built, they are not getting started, they are
24 getting scored in a way that was not intentional. We need
25 to get this fixed. We need to start working with GSA and VA

1 to make sure that legislation like yours is able to stop
2 that, that stop-gap.

3 Ms. Brownley. Well, thank you for that, and I thank
4 you for the support of this bill and I do believe that it is
5 just a--it is a fundamental problem with a relatively easy
6 fix to make sure that we are properly planning and being
7 able to execute to have these CBOCs in local areas across
8 the country. So, I thank you for that.

9 And, I just have a little time left, but I wanted to go
10 back to Commander Barnett's comments relative to post-
11 traumatic stress disorder and traumatic brain injury. So, I
12 just wanted to ask a question. Do you believe that we need
13 to continue to expand alternative remedies, or is it those
14 alternative remedies that the VA has come forward with just
15 are not provided widely enough across the country for our
16 veterans?

17 Mr. Barnett. I will tell you very clear that
18 alternative methods in getting our veterans, instead of just
19 being drugged, drugged, drugged, we have got to do better
20 than that. There are so many innovative ways out there. I
21 have been with the equestrian therapy, dog therapy. It does
22 not work for every person. But, we need to go and we need
23 to be innovative, because our veterans deserve that. They
24 deserve the best health care possible. So, I do not think
25 we should--we should be looking at ways, not looking at ways

1 not to do alternative methods of treatment for PTSD and TBI.

2 Ms. Brownley. Thank you, Commander, and my time is up.

3 I yield back.

4 Chairman Miller. Mr. Coffman.

5 Mr. Coffman. Well, thank you, Mr. Chairman.

6 It is an honor to be with you here today as a 25-year

7 member of the American Legion. I want you to know,

8 Commander, my dues are paid up.

9 [Laughter.]

10 Mr. Coffman. But, I thank you so much for your

11 leadership and for your service to the United States Army.

12 Ralph Bozella and I worked for a very long time together,

13 and thank you for your leadership not just with the American

14 Legion, but back home in Colorado. It has been important

15 and it was instrumental, I think, in getting our hospital, I

16 am not going to say completed, but getting the funding for

17 it and getting us on the road to completion.

18 But, I have a question concerning mental health

19 services and that is I left my first deployment in 1972 with

20 the United States Army's First Armored Division, and then I

21 returned, out of my five deployments, my last one, I came

22 home in 2006 with the United States Marine Corps from Iraq,

23 and so a pretty varied background. But, what I noticed--so,

24 in that interim time, there were two major reductions in

25 force, one after Vietnam and then one after the First Gulf

1 War, and in both those reductions in force, what I noticed
2 in the Army and the Marine Corps, particularly for the
3 junior enlisted, it would be about denying reenlistment on a
4 competitive basis.

5 But, there seems to be a trend today that in the middle
6 of these enlistments, that they are doing these OTHs, these
7 other than honorable discharges, and I think, quite frankly,
8 it is a way to thin the ranks, and the problem with those
9 discharges is that when we have a combat veteran who has
10 been to Iraq or Afghanistan, they are, in fact, denied
11 services by the VA by virtue of that discharge.

12 And, so, I would like you to look at the legislation
13 that I am going to be introducing soon. I think Senator
14 Blumenthal has been a leader on this issue in the Senate and
15 I worked with Representative Walz in the House. And, so,
16 what it would do is that it would--so, we have one bill to
17 change the appeal process to have post-traumatic stress as a
18 consideration in those appeals for those other than
19 honorable discharges, and then the other one for those
20 people--for those soldiers, sailors, Marines, and airmen
21 that have those other than honorable discharges, to make
22 sure that they have access to mental health care that they
23 have been denied by virtue of the discharge.

24 So, I would like you to take a look at both of those
25 bills. I think it is important that those who have served

1 in combat have the ability to, I think, to take a second
2 look at some of those decisions in terms of those discharges
3 as well as access to mental health care.

4 Let me tell you, I have looked at some of these
5 infractions, and certainly during my time, particularly in
6 the Army in the 1970s, nobody would have ever been
7 discharged for the--maybe office hours, Marine Corps,
8 Article 15, United States Army, but not certainly discharge.
9 I would like it if you all could comment on that, if
10 somebody could comment on that.

11 Mr. Barnett. Well, first of all, thank you for looking
12 at that. I want to make sure everyone in the room knows
13 that the American Legion does have an appeal process for
14 that--

15 Mr. Coffman. Sure.

16 Mr. Barnett. --and certainly our veterans should come
17 first. And, we put these soldiers and sailors and Marines
18 in harm's way, and many of them come back with those
19 signature wounds of this war. And, we have demanded so much
20 from them with multiple deployments, so I think we need to
21 do everything that you are saying, and I am going to let Lou
22 talk a little further about that with specifics.

23 Mr. Coffman. Okay.

24 Mr. Celli. So, what the Commander was referring to is
25 our discharge appeals process. The American Legion is the

1 only Veterans Service Organization left that still has a
2 discharge appeal, or discharge upgrade assistance program.

3 Mr. Coffman. Sure.

4 Mr. Celli. We have more customers than we can serve.
5 That is a fact, sir. We get a lot of people who are coming
6 back who are changed by war. They return to, in many cases,
7 a Reserve unit--

8 Mr. Coffman. Sure.

9 Mr. Celli. --and there is a lot of struggle to
10 readjust, and then subsequently, they stop showing up and we
11 end up with other than honorable discharges, and those are
12 the types of discharges that you are referring to. Those
13 are the types of circumstances you are referring to. And
14 that is the type of legislation you have introduced that we
15 would love to be able to get behind. And more importantly,
16 we want to make sure that these veterans' records are
17 straightened out to reflect the struggles that they went
18 through.

19 Mr. Coffman. Sure. Well, I want to thank you and look
20 forward to working with the American Legion on this
21 important legislation, and I want to thank you all for all
22 you do on behalf of America's veterans. And as, I guess, I
23 am one of you, and so it is an honor to have you here today
24 before the Congress of the United States. Thank you.

25 Chairman Miller. Mr. Zeldin.

1 Mr. Zeldin. Thank you, Mr. Chairman, and I also thank
2 Mr. Coffman for reminding me. I have to double-check. I am
3 pretty sure that I am current with my American Legion dues,
4 as well--

5 [Laughter.]

6 Mr. Zeldin. I do not want to get myself into trouble.

7 Any American Legion veterans here from the State of New
8 York? All right. There we go. We have a few.

9 [Applause.]

10 Mr. Zeldin. Thank you for your service.

11 I also want to thank Mr. Coffman and Senator Blumenthal
12 and Congressman Walz for their efforts on the issue that Mr.
13 Coffman just discussed, and I just want to reemphasize that
14 request to look into Mr. Coffman's bill that he is planning
15 on filing. I think that--I was military intelligence, but
16 then I became a prosecutor in the military, and I would say
17 that a lot of our service members who we separate with less
18 than honorable discharges, there is a connection between the
19 circumstances that led to their separation and post-
20 traumatic stress disorder.

21 And the fact that they may have bad paper and cannot go
22 to their local hospital to diagnose and treat their post-
23 traumatic stress disorder is problem number one, because it
24 leads to other challenges for us to be able to take care of
25 those veterans after their service. Furthermore, though,

1 there is a service-connected disability and there is a
2 strong case for why their discharge status should actually
3 be upgraded, and the key is the proposal that is being
4 championed by Mr. Coffman and Senator Blumenthal. So, I
5 thank them for their efforts and I ask that you give it due
6 consideration as they file it.

7 I wanted to further get into the issue of post-
8 traumatic stress disorder. I see that you have an entire
9 page, page six of your agenda, dedicated to this issue. I
10 want to know, what are you seeing around the country as far
11 as community-based peer support that is working? I would
12 like to share some thoughts on what we are doing in New York
13 that is working, but are you seeing around the country that
14 you have in mind on page six?

15 Mr. Barnett. Well, I have had the thrill, and I have
16 been to Saratoga with your horse training, where the--
17 thanks. I have been to Montana, where they go up into the
18 mountains. And when a service member has to connect and
19 survive and it can take his mind off of his signature wounds
20 and do that, those are the type things that are making a
21 difference in that therapy.

22 And, so, I am so glad that you are going to--and we are
23 going to support your reference to this PTSD. So many of
24 our soldiers have that, and it is just a signature wound.
25 It should not be surprising, and they should not be

1 discriminated, because we have put them in that situation.
2 Our nation owes that to those servicemen to do what is right
3 and not punish them again for their sacrifice to this
4 nation.

5 Mr. Zeldin. Commander, you bring up a couple of great
6 points. One, as you reference horses, we have seen it with
7 dogs, with other animals, having access for our vets,
8 because their family, their friends, people at work may not
9 understand what it is that they are going through and the
10 strength of that bond that they may form as you see in
11 Saratoga with horses or what we have more locally on the
12 East End of Long Island where I am with veterans who have
13 dogs. They are finding someone to help them cope.

14 Something else that you said, though, in referencing
15 Saratoga is that in New York State, we created something
16 called the PFC Joseph Dwyer Peer Support Program. I would
17 ask the American Legion, your New Yorkers are definitely
18 very much aware of the program started in four counties.
19 One was my home county of Suffolk, one was Saratoga,
20 Rensselaer, and Jefferson County. It started in four
21 counties. It has now expanded to over a dozen.

22 The key is that you take a veteran, you put him in the
23 same room as maybe eight or ten other veterans going through
24 PTSD, you have a trained mentor, and it is so efficient. We
25 serve hundreds of veterans in Suffolk County and we have a

1 whole lot of veterans who credit this program for saving
2 their lives. Do you know how much it costs in Suffolk
3 County? Two-hundred-thousand dollars. Two-hundred-thousand
4 dollars is serving several hundred veterans in my home
5 county and saving lives. The key is the peer support.
6 People do not realize that there are veterans going through
7 exactly what they are going through in their home community,
8 and we need to be able to connect everyone together.

9 I thank you all for what you do, for dedicating an
10 entire page and so much of your agenda to fighting for our
11 veterans coming home with the mental wounds of war, and I
12 yield back.

13 Chairman Miller. Dr. Abraham.

14 Dr. Abraham. Thank you, Mr. Chairman, and again,
15 thanks for being here. Like Mr. Coffman said, it is an
16 honor for me to be in front of you, and I know it takes a
17 lot of time and treasure to get here, but when you men and
18 women show this show of force here, for us, it is very
19 impressive and we appreciate the valiant effort, because I
20 know getting here is not easy.

21 I am going to hit just a quick thing that I am familiar
22 with, being the physician, or one of them here, and that is,
23 Commander, you reference EMRs. I have talked to the Chief
24 of Staff at Walter Reed and others in the health care. They
25 want it. We want to give it to them. And I know, coming

1 from the private sector, it is not that hard for them to
2 talk to each other. So, DOD and VA, it is a very doable
3 situation, and again, Chairman Miller has championed this.
4 We have had this discussion as far as making this happen.
5 Like Ms. Brown said, it needs to happen, and again, it is
6 not that hard.

7 The other thing I want to hit right quick is--I read
8 your book, and like Senator Blumenthal said, I thought you
9 all did a fantastic job putting it together. But, you
10 mentioned recruitment and retention of VA physicians, and
11 certainly we need to get parity on the civilian side with
12 salary and benefits so that when you men and women see your
13 doctor or your nurse practitioner or your PA, you become
14 comfortable with them and you become a friendship and a
15 partnership in your health care decisions and you keep that
16 physician so he or she does not put the two to three years
17 in and then, boom, go to some civilian hospital that pays
18 them twice the money. So, again, I will go back to Chairman
19 Miller and his staff. They have been spot on working with
20 that.

21 The PTSD, I was with a group of veterans yesterday and
22 we have got some wonderful Louisiana American Legionnaires
23 here that I was fortunate to be in my office yesterday. And
24 we were talking about the PTSD-suicide combination, but as
25 we know, as we age, we have comorbid conditions such as

1 diabetes, hypertension, arthritis, chronic pain, and all
2 these exacerbate not only PTSD, but they also exacerbate the
3 tend to commit suicide. So, these are things that we have
4 to address as a committee of the whole, certainly on both
5 sides of the aisle, Democratic and Republican, but also in
6 both Houses, the Senate and House. So, we understand that
7 we have got to look at this more deeply and more acutely and
8 understand that there are a lot of things that feed into
9 these conditions.

10 Again, going back to your brochure, Hepatitis C, you
11 know, we had the hearing a couple weeks ago about the drug
12 and the doctor that has left without testifying, so we are
13 on, I think, the trail of getting him back to testify. But,
14 again, you guys that have Hepatitis C, you have earned, you
15 deserve the drug, because we know not only it treats, but it
16 cures. And in medicine, when we find a drug that cures,
17 actually cures any viral illness, that is a good drug. That
18 is impressive. So, we want the men and women that have
19 Hepatitis C to get that drug, to provide it to you. And, I
20 know we are doing our part, I think, on the committee to
21 make that happen.

22 And the only other thing I will hit right quick, and
23 that is the claims process that, Commander, you alluded to.
24 You know, unfortunately, I think, in the VA system, they
25 assume it is not like we should be--Mr. Zeldin here to my

1 right is an attorney and he knows that we should assume
2 innocence before presuming guilt and we do not do that in
3 the VA system. We assume that the veteran is going to come
4 and they are trying to get something that they do not
5 deserve. I think it needs to be flopped completely around.
6 We know you deserve it, and then if there is an issue, then
7 we prove that there is. But, we are to the point,
8 unfortunately, I think we have got the table turned 180
9 degrees, and I think as a committee, we have got to push the
10 VA to look at that differently.

11 So, Mr. Chairman, I will yield back. I just wanted to
12 make some comments. Thank you so much.

13 Chairman Miller. Thank you very much, Dr. Abraham.

14 Mr. Costello.

15 Mr. Costello. Thank you, Mr. Chairman.

16 Two observations, questions that I would ask you to
17 provide your thoughts on. In your written testimony, you
18 discuss the VA's caregiver support program and the
19 importance to allow eligibility for all veterans. I have a
20 bill that I have put forth to that effect. The VA has
21 requested \$725 million for that program, in part to address
22 the increase of new enrollees per month. Assuming that if
23 there is going to be an expansion, that the expansion would
24 have to be phased in, can you share what your priorities or
25 opinion is with respect to how, if it were to be expanded,

1 we would go about phasing it in.

2 The second question, and then you can divvy up who
3 would respond to these, relates to the TAP services. Again
4 in your written testimony, you recommended an expansion,
5 enhancement, and better integration of TAP services from
6 DOD, and I believe there is a priority to ensure a smooth
7 transition for our service members into civilian life by
8 everyone. Could you expand on your recommendations for TAP
9 to have that better integration that you speak of.

10 Mr. Barnett. Well, thank you, Representative. First
11 of all, I want you to be crystal clear, we support that
12 Caretakers Act, to expand it to other veterans, because a
13 veteran is a veteran no matter what war or era he came from.

14 And, the TAP question, I am glad you asked that
15 question because I have got a panel member here that just
16 recently went down to Fort Bragg, so I am going to pass it
17 off on the TAP question to Bill, please.

18 Mr. Oxford. Thank you, sir, for your interest in that
19 issue. The Chairman a few minutes ago talked about old
20 news. Well, this is new news. Like the Commander said, I
21 spent three days at Fort Bragg three weeks ago evaluating
22 and looking and trying to find out how the tuition, or
23 Transition Assistance Program is working. They do 1,800
24 discharges a month. They are set up to provide outstanding
25 information and skill development as those people make a

1 transition, and most of the time, that is a successful
2 transition from active duty to the civilian side.

3 The issues that we are talking about, the handoff,
4 there is little or no communication between this Transition
5 Assistance Program and American job centers as that
6 transition is made and they work toward going back to work.
7 We need to figure out a way to better increase or better
8 handle that communication.

9 Another issue, we also need to bring employers into the
10 active duty bases and bring them back into the working
11 relationship and let them help those active duty people
12 transition.

13 And, the last point I would like to make, the Sergeant
14 Major of the Army emphasized attendance for every person
15 being discharged, that they will attend the Transition
16 Assistance Program. I think we need to reemphasize to
17 commanders across all services that this is an important
18 program and we have got to make sure those people have that
19 access to the Transition Assistance Program.

20 Mr. Costello. And, as far as open enrollment for
21 veterans at the VA, the American Legion by resolution
22 supports opening VA to all veterans, all eras, all
23 categories, all the way up until category eight. And as we
24 all know, the Secretary already has the authority to do that
25 and closed priority category eight a number of years ago.

1 We call on the Secretary today to reopen that category.

2 As far as caregivers goes, we are working very closely
3 with caregivers. As a matter of fact, we just during our
4 most recent committee meeting, we hosted the Dole
5 Foundation, the Elizabeth Dole Foundation. We are working
6 very closely with them and we plan on working with them even
7 more closely in the future so that we can provide support to
8 their members, as well, as they need to upgrade their claims
9 and their claims process for their veterans.

10 Chairman Miller. Dr. Wenstrup.

11 Dr. Wenstrup. Thank you, Mr. Chairman, and thank you
12 all for being here. I am a paid-up member of American
13 Legion Post 318, Cincinnati, Ohio. I am sure there are many
14 people here from Ohio and please raise your hands and be
15 recognized. We are glad to have you with us here today.
16 Thank you very much.

17 [Applause.]

18 Dr. Wenstrup. I think more importantly is we are all
19 here from the United States of America and we are all on the
20 same team.

21 One of the things you were talking about earlier was,
22 really, this gap between DOD and VA, whether it is on
23 electronic medical record or whatever the case may be. And,
24 I know that we have been pushing for and we need to continue
25 to push for making it very clear that when you raise your

1 right hand and you join our military services, you are in
2 the VA. You are on your way. This is all part of one
3 package. I would really like someone to stand up and say,
4 Mr. Carter, Mr. McDonald, please tear down this wall,
5 because that wall has been there. And, I know as a
6 Reservist, when I came back from Iraq, here is your DD-214,
7 you know, go find the VA and good luck. Things have gotten
8 a lot better in that regard.

9 But, you mentioned it is a System Worth Saving, and it
10 is a System Worth Saving, but it is really a bureaucracy
11 worth scrapping. And, we have to change things in so many
12 ways. You know, when your doors stay open regardless of how
13 you perform, we have a problem, and that is why you see
14 things like a hidden wait list, et cetera. Private practice
15 cannot do that when it comes to health care, and those are
16 the attitudes that we have to change. And, I think we can
17 do it.

18 And, one of the things we are seeing with the CBOC,
19 because I have several friends that were in private practice
20 and are now working at a CBOC in primary care and they love
21 it, and their patients love it, because that is their
22 doctor. It is not just Doctor fill-in-the-blank at the VA.
23 This is their doctor. And when their doctor says, you need
24 to see a specialist, what we need to have take place is that
25 is a conversation that takes place between their doctor and

1 the patient and you say, well, the best person for you to
2 see may be within the--may be the VA provider within the
3 walls of the VA, or may be the VA provider that is out in
4 the community. But, either way, there is someone there that
5 wants to take care of veterans, because I know in our
6 orthopedic practice, we would have been glad to have the VA
7 sign outside our door saying, we take care of veterans.

8 And, so, there are a lot of ways we can go about it,
9 but it is that personal relationship that has got to be
10 there and that is what is missing, and a lot of times, that
11 may mean that that CBOC doctor calls up the specialist and
12 says, I am sending a patient over to you, because that is
13 how it works the best and that is, I think, where we should
14 be going.

15 We talk about a lot of things here today. This is
16 outstanding. You touch on all the things that we are trying
17 to deal with each and every day, and you know it is
18 insurmountable in a lot of ways, but you have got to do it
19 and I am glad that you are all here doing it.

20 I do have a question for what you may be finding, too,
21 when it comes to this appeals process on claims and over and
22 over again. What is missing, right, because I think
23 sometimes, the person who is going through that, especially
24 the first time, but then also going through an appeal, are
25 they prepared? Are they getting prepared to have all their

1 ducks in a row when they fill that out? Is it being
2 explained to them not only at the beginning, but after they
3 say they have had their physical, their evaluation? Is the
4 process being explained to them so that their expectations
5 are at the right level? And, I think, those may be areas we
6 can improve, but I would love to get your opinion on that,
7 Commander.

8 Mr. Barnett. Well, before I pass that over to Lou, I
9 want to make a couple of comments. First of all, when you
10 put that uniform on, you are a soldier for life and we have
11 that responsibility. And, also, we are going to Cincinnati,
12 so I hope you can join us when we come to Cincinnati, to
13 your home town.

14 Dr. Wenstrup. I would be glad to.

15 Mr. Barnett. But you are so correct that the CBOC is--
16 all our veterans love the CBOCs because it is that
17 personalized medicine that you talked about. That is what
18 they like, because they are just not a number. They are a
19 person. They are a veteran. And they are veteran-centered.
20 That is why they like the CBOC.

21 And, I will let Lou talk a little more in detail about
22 the appeals process, but I will tell you another thing. Our
23 American Legion Service Officers, I would tell this to
24 anybody. You need to have a Service Officer advising you,
25 because if you think you are going to go into the claims

1 process without a Service Officer, you are a lost cause, and
2 that is the value of the membership in the American Legion.
3 It is those qualified Service Officers that we are training
4 this week and we train entirely, and I think they are key to
5 the solution, too.

6 I will turn it over to Lou.

7 Mr. Celli. Thank you, Commander. Thank you, Dr.
8 Wenstrup. And this also gives me an opportunity to wrap up
9 a question from Ranking Member Brown, and that is what can
10 we do to ensure that these veterans are better prepared to
11 file their claims at the beginning of the process.

12 And, the American Legion was instrumental in rolling
13 out the fully developed claims process. It is a program
14 that we piloted. It is a program that we championed. And
15 it is a program that still works well. We also want to be
16 able to take those best practices and work those into an
17 appeals process. We have been working with our brothers and
18 sister VSO organizations in order to fine tune what is going
19 to be necessary to make that process effective. We have
20 been working with VA on making sure that the letter that
21 they send veterans as to why they were denied a claim is
22 clear enough so that the veteran and the VSO understand
23 exactly what deficiencies are in that application process
24 and whether or not the veteran can overcome those
25 deficiencies. Once we get to that point, I think we will

1 have a much smoother system.

2 Dr. Wenstrup. Thank you. I yield back.

3 Chairman Miller. Senator Rounds.

4 Senator Rounds. Thank you, Mr. Chairman.

5 Commander Barnett, I come from South Dakota. It is 200
6 miles north and south and 400 miles east and west. We have
7 got about 78,000 veterans that live there and over 220,000
8 veterans and dependents. I suspect about half of our state
9 is here today. Anybody from South Dakota here today?

10 [Laughter.]

11 Senator Rounds. There we go. All right.

12 [Applause.]

13 Senator Rounds. It is good to see you all here.

14 Commander, in South Dakota, we are currently in the
15 middle of a public comment period for the draft
16 Environmental Impact Statement for the reconfiguration of
17 the Black Hills Health Care System. It is the hospital in
18 Hot Springs. This specifically impacts this particular
19 hospital. It is in the southwestern part of South Dakota,
20 in a very rural area, near a couple of reservations. The VA
21 recently extended this comment period until the first week
22 of May. Can you tell us the American Legion's views on this
23 process and the opinion of the draft results as they have
24 been released so far?

25 Mr. Barnett. I am going to refer that question, but

1 before I do, I want to tell you that we have had so many
2 promises in this area of Hot Springs that it is time that we
3 get the truth. And before we turn it over, and I am going
4 to turn it over to Ralph, but I will tell you that the
5 American Legion has been passionate. We have talked about
6 it at this hearing in previous years. And Ralph has got his
7 finger right on the pulse of what is going on right now.
8 So, I yield right now to Ralph for further clarification.

9 Senator Rounds. Thank you, sir.

10 Mr. Bozella. Thank you, Commander, Senator Rounds. I
11 personally had a visit to Hot Springs in February of 2014
12 with our System Worth Saving site visit. We met with the
13 Save the Veteran group, we met with Fall River Hospital, we
14 met with the American Legion, and we met with the
15 administration of the hospital in Hot Springs.

16 I think the Commander sums it up when he said, well, we
17 do not know what is going on there. You do not know what is
18 going on there. We pushed for an EIS because it was after
19 the fact anyway. The EIS should have been done well before
20 the VA began to do their work there. Since 1996, VA has
21 systemically and systematically--has just gotten rid of
22 services piece by piece and moved things to Rapid City,
23 moved things to Fort Meade. And, so, after 20 years, there
24 is hardly anything left there. And then VA says, well, we
25 have--the veterans are not using this and we have to move

1 the facilities. But, what is it that is going to be in the
2 best interest of the veterans in the Black Hills area? Is
3 that the best interest?

4 Now, we are on the record with a resolution that
5 supports keeping the existing hospital, renovating it, and
6 keeping the rehabilitation services, and creating a Center
7 of Excellence for PTSD, substance abuse, and homeless
8 prevention in the domiciliary area. The area itself lends
9 itself to mental health treatment and to mental health
10 abilities to get better.

11 The EIS itself is somewhat flawed, we believe. The
12 data is inconsistent. Considering ourselves as a consultant
13 through our System Worth Saving report, we reported that the
14 data has come from these different sources and it was 180
15 degrees what the VA data is reporting, as well as other
16 sources like the National Historic Preservation Society, the
17 Indian tribes, all the people that are affected by this.

18 The VA needs to make a decision on that. They need to
19 be able to communicate with the veterans up there what is
20 going to happen. And we have asked that the Secretary of
21 Veterans Affairs makes a personal visit to Hot Springs.

22 Senator Rounds. The Secretary has personally told me
23 that he intends to do it. He says, I want to go there. I
24 want to do the EIS first. But, he says, I want to go and I
25 want to be a part of it. We have not established a date

1 yet, but, clearly, the Secretary cares. Personally, I
2 believe that this gentleman truly cares about veterans and I
3 believe that he will be there.

4 At any time during this process that you are aware of,
5 has the VA offered up a time line for their preferred
6 option, should it be accepted by the Secretary?

7 Mr. Bozella. Well, first of all, hearing, I do not
8 know. I have not seen the writing. But I am hearing that
9 the preferred options have changed. Is there a time line?
10 No, not that we are aware of.

11 Senator Rounds. I have had some veterans say that
12 while they were assigned or that they were working with the
13 doctors in Hot Springs that they get a congratulatory note
14 basically telling them, guess what, you are no longer going
15 to Hot Springs. You are going to go to another doctor
16 someplace else. And, as part of that, then, the count at
17 Hot Springs would be manipulated and the numbers would be
18 dropped. Have you heard testimony or have you heard
19 anecdotal information to that effect, as well?

20 Mr. Bozella. In a sense, I have heard testimony, yes.
21 When we conducted our town hall meeting there, there were
22 probably 50 people lined up to tell us of their experiences
23 and that was one of them. And having been there, and I
24 drove from Hot Springs to Rapid City to Sturgis, made that
25 round trip back to Hot Springs, and I can just imagine

1 making that drive in the wintertime, the wind whipping
2 across those open plains coming off the hills. I think that
3 could be a hard trip for the veterans living in that area.

4 Senator Rounds. Thank you.

5 Mr. Chairman, I will just say this. Hot Springs is a
6 community that was built and based upon service to the
7 veterans. It was one of the earliest hospitals ever created
8 in the United States to take care of veterans. It was put
9 there for a reason. And today, as we look at the process
10 that these individuals who have taken care of--literally
11 generations of individuals have been there serving veterans.
12 And to them, they are losing their identity. They are
13 losing an opportunity to share. And for the veterans that
14 are in the South Dakota Veterans Home, which we just built a
15 brand new one on the site, because here was care provided in
16 a veterans' facility immediately available to them, I think
17 this is a serious problem and I think it is one that,
18 hopefully, we get behind us and Hot Springs continues to
19 provide the care that they have in the past in an even
20 enhanced capacity. And I thank you very much for your
21 testimony today.

22 Thank you, Mr. Chairman.

23 Chairman Miller. Thank you very much, Senator. Also,
24 I have been to Hot Springs to the facility, and it was on
25 that trip that I learned the name of Senator Rounds, or

1 future Senator Rounds, as I saw your signs dotted all across
2 the fruited plains.

3 [Laughter.]

4 Senator Rounds. It is a good way, sir, to get name ID.
5 Thank you.

6 [Laughter.]

7 Chairman Miller. I now recognize the former Chairman
8 of the Senate Committee on Veterans Affairs, my good friend,
9 Ms. Murray.

10 Senator Murray. Mr. Chairman, it is a delight to see
11 you here today. Thank you so much, and thank you to
12 everybody for being here.

13 Thank you all for coming and testifying on behalf of
14 the men and women who served us, and this audience is
15 incredible. It is just really nice to look up here and see
16 so many people who, day in and day out, take care of those
17 who have served us, and I just thank you all for being here.

18 As you all know, I really believe that our country has
19 to fulfill its promise to care for those who served. But,
20 as everybody here knows, the VA has fallen short on that
21 mission, especially in recent years. One of my top
22 priorities is holding the VA accountable for the quality and
23 availability of care and services and changing the culture
24 of the VA to focus on the veterans' experience, not the VA
25 bureaucracy.

1 Now, changing the culture of such a large organization
2 is very difficult, so I wanted to ask you all today, what
3 steps would you recommend to the VA to help change the
4 culture to put our veterans first.

5 Mr. Barnett. Well, two weeks ago, I was at a hearing
6 chaired by Senator Isakson and we heard from the VA
7 Secretary Bob McDonald, and he talked about reforming and
8 there were several things. We have got to be part of that.
9 He talked about veteran centered. I think the words are
10 there, and I said this in my testimony. We are hearing the
11 right words. We just need to ensure that that execution, so
12 that when that veteran walks into the VA hospital situation
13 or a CBOC--and I think that again goes back to those CBOCs.
14 I think at that CBOC, they get that feeling that they are a
15 person. And we need to do that in the largest VA facilities
16 as well as the smallest.

17 And then we have got to ensure that those employees,
18 and I want to be crystal clear, I think the vast majority of
19 our VA--almost overwhelmingly, there are only a few
20 exceptions--really care about veterans. They really do.

21 Senator Murray. Mm-hmm. Anybody else?

22 Mr. Celli. Senator Murray, I can also tell you that
23 the biggest thing that we can do today to improve the
24 quality of care and to improve the morale and improve the
25 veteran experience at the Department of Veterans Affairs is

1 to fill those foxholes. We have about 50 percent leadership
2 foxholes.

3 We have a terrible, terrible succession planning
4 program. It is rare, if ever, that a deputy director fills
5 the spot of a departing director. If the VA does a better
6 job at succession planning, what will happen is the
7 director--the deputy director that is groomed to become now
8 the director is going to have much more loyalty towards the
9 program. There is going to be a lot less finger pointing
10 and saying, well, that was not on my turf.

11 When you have got 50 percent of either vacant or fill-
12 in positions, no one is willing to make a decision. No one
13 is willing to take the blame. No one is willing to put
14 their neck out. When you have got a staff that is dedicated
15 because they have invested in the system through succession
16 planning, then you have got a much better program.

17 Senator Murray. Interesting.

18 Mr. Barnett. And I would like Ralph to add one thing
19 to that, also, please.

20 Senator Murray. Sure.

21 Mr. Bozella. Senator Murray, the most important thing
22 that the VA has to do is to think about customer service to
23 the veteran. We are the customer, and the first thing they
24 could do is answer the telephones, and--

25 [Laughter and applause.]

1 Mr. Bozella. --and my State Commander is here with a
2 recording--

3 Senator Murray. Mr. Chairman, can we legislate that?

4 [Laughter.]

5 Mr. Bozella. My State Commander is here, and he played
6 a recording on his cell phone, that you push this number and
7 this--you know how all that goes. And every time, it routed
8 him right back to the beginning, and that frustrates people
9 to a high degree.

10 And the other problem with the telephone system is that
11 when they tell you, if you leave your name and number, we
12 will call you back, in many of the hospitals, they cannot
13 call you back because the call is dropped. It is not their
14 fault as much as it is the antiquated system that they have
15 for telephones, and that is where they really do need an
16 upgrade there in today's modern communication. But, that
17 would help tremendously.

18 Senator Murray. Interesting. Okay.

19 Let me just mention one other thing. I heard from a
20 lot of veterans in my home State of Washington late last
21 year, and I called for an overhaul of the Choice program and
22 non-VA care because I believe we have got to get this right
23 for our veterans. That means making it easier for our
24 veterans to access the high-quality care that--in a timely
25 manner and making sure that our providers are getting

1 reimbursed on time.

2 The good news is now the VA has sent us a proposal to
3 overhaul and improve care, but I am concerned personally
4 with some parts of that plan, like requiring veterans to pay
5 a \$100 copay for emergency room. I am sure you share that
6 concern. But, if, in my ten seconds left, or if you want to
7 submit to me in writing, I would really like to know from
8 all of you what the most important elements you want to see
9 in a new non-VA care program. I think this ought to be one
10 of our highest priorities.

11 Chairman Miller. I assume that means they will take it
12 for the record.

13 Senator Murray. I would--yes, if you could do that.
14 If you could let us know, I think that is extremely
15 critical. It has to be one of our top priorities here.

16 Mr. Barnett. And Senator Murray, I totally agree with
17 you. Your comments, reference to those problems with the
18 Choice program are not unique to Washington State. They are
19 across the country. They are in our overseas locations.
20 And we have just got to do better. And, so, we will get
21 that information from our staff to your--

22 Senator Murray. Great.

23 Mr. Barnett. --and thank you so much for your--

24 Senator Murray. Thank you very much to all of you.

25 Senator Murray. Thank you.

1 Dr. Roe.

2 Dr. Roe. Thank you, and I want to congratulate you,
3 all the American Legion. It is really great when you have
4 to play dodgeball to actually get up here. I had to walk
5 through this crowd. It is great to see such a crowd, and
6 Commander, thank you for doing such a great job.

7 And, Mr. Bozella, one of the reasons that I answered
8 the phone in my private practice was if I did not, I went
9 broke.

10 And, I want to introduce Bob Hensley and, I think, some
11 other Tennesseans here, if you would hold your hand up. Let
12 us welcome them. I think Bob is here.

13 [Applause.]

14 Dr. Roe. I am going to just take a short time to thank
15 you all. I, 43 years ago, served in the United States Army
16 11 miles south of the DMZ in Korea, 1973, and I had the
17 privilege of going back two years ago on a Congressional
18 delegation and seeing that country 43 years later. Let me
19 tell you what I saw. In the 1960s, the third-poorest,
20 fourth-poorest country in the world. They were digging out
21 after a war that absolutely leveled the country. And,
22 basically, a country that was beginning to grow.

23 Forty years later, what I saw--and there was a military
24 dictator then, I might add. Today, there is a freely
25 elected prime minister. There are 50 million free people in

1 that country and the tenth-largest economy in the world
2 because of what you sitting out in that audience did, the
3 American soldier did for them. And they said to thank you
4 every chance I get, so every group of veterans I get in
5 front of, from the Korean government and people, thank you
6 for making them free.

7 [Applause.]

8 Dr. Roe. I want to--and, by the way, Dr. Wenstrup, I
9 want to see your card before we leave today, make sure it is
10 paid up.

11 [Laughter.]

12 Dr. Roe. One of the things that I want to focus on is
13 the quality and access of care to veterans. As a doctor who
14 trained in a veterans hospital, served in the military and
15 then in private practice, I think I have a unique set of
16 lenses to look at this from. And, when we have veterans who
17 call up, as you say, and you get 1-800-hold, it does not
18 matter how good the care is once you get in there. If you
19 cannot get access, it does not matter.

20 So, one of the things I want to focus on, and I want to
21 get your input on this, is to provide a true Choice card to
22 veterans, so if a veteran cannot get access--let me tell you
23 what really hit me. Monday night, I had a town hall in
24 Rogersville, Tennessee. A veteran came in with a walker who
25 was short of breath. I opened the door for him, and the

1 fellow was a Vietnam veteran and he had called--he had four
2 different people from TriWest call him about an appointment
3 to see a cardiologist. I was afraid the man was going to
4 die, and that is not the Congressman's responsibility is to
5 get you an appointment with your doctor. That is not what
6 we should be doing.

7 So, the system--they have made getting an appointment,
8 making an appointment to a doctor, like putting up the Space
9 Shuttle. I can assure you, in my 31 years of practice, I
10 took Mrs. Jones to the front desk and said, get her an
11 appointment with Dr. Smith next week, and it was done. It
12 ain't complicated to do.

13 The VA has made this something that it is like it is
14 impossible to get a medical appointment. You give that
15 Choice, true Choice to that veteran, then they can take that
16 card and make the appointment if they cannot get in to the
17 VA, if they want to go to their private doctor.

18 Let me give you an example. I could be, as Dr.
19 Wenstrup said, or Dr. Abraham, we have all served in the
20 military. We could be certified VA practitioners off
21 campus. It would not matter whether--I am an OB/GYN doctor,
22 but it would not matter if that woman saw me at the VA or
23 saw me in my office. And with interoperability, with
24 records now, we can have that medical record back in a
25 millisecond, back to the VA. So, I think we need to be

1 doing that.

2 And, the other thing I want to bring up is timely
3 payment. Another friend of mine stopped his dental practice
4 and said, well, I really want to serve veterans, so he
5 started seeing just veterans in his practice. He opened his
6 practice back up, seeing nothing but veterans. Well, the VA
7 decided that in Mountain Home in Tennessee, where I live,
8 that they would pay the West Virginia claims first, so this
9 dentist is not getting paid at all and he is going to have
10 to close his practice because they cannot pay.

11 Medicare--look, I did not like the number that they
12 sent me when they would send me a check, but they sent it in
13 about a month. You knew you were going to get paid by
14 Medicare. When you serve the VA, you never know when you
15 are going to get paid. That is not fair to the veteran,
16 because it can affect their credit. It can also affect the
17 practitioner because they have to pay their bills, also.

18 So, I will stop, Commander, and have you comment.

19 Mr. Barnett. My comment is two words: Veteran
20 centered. And the current system is not veteran centered.
21 You have got to put your place of walking into that office,
22 into that CBOC, into that VA hospital, that you are the
23 customer, that you are the number one person, because that
24 is who we serve.

25 Dr. Roe. Commander, I only want to say that in the 30-

1 plus years I practiced, I knew who I worked for, and that
2 was the patient. It was not the insurance company. It was
3 not the hospital. And when you ask someone at the VA, who
4 do you work for, they will say, "I work for the VA." They
5 should be saying, "I work for you." That is who employs
6 you.

7 Once again, thank you all for being here and I yield
8 back.

9 Chairman Miller. Thank you, Doctor.

10 Senator Boozman.

11 Senator Boozman. Thank you, Mr. Chairman, and I want
12 to give a big shout out to those of you from Arkansas.

13 [Applause.]

14 Senator Boozman. We so appreciate the great work that
15 you do. And, also, I want to give a shout out to the
16 Auxiliary. We know who actually--

17 [Applause.]

18 Senator Boozman. We know who actually does the work
19 around here.

20 [Laughter.]

21 Senator Boozman. I know that they are the backbone of
22 this organization, like they are so many others. If my wife
23 and three grown daughters were here, they would say, "Dad,
24 they are not only the backbone, they are also the brains,"
25 so--

1 [Laughter.]

2 Senator Boozman. But, we do appreciate it.

3 Commander, we have talked a lot about the Choice Act,
4 and it is interesting. Dr. Roe was talking about all of
5 these circumstances that we get into. We were able to help
6 an individual not too long ago that had had an emergency.
7 You know, he goes to the emergency room, gets seen, and then
8 pretty soon the bill collectors are after him. Well, they
9 said, you should have gone to the CBOC and all that. Well,
10 it was a Sunday and the CBOC was closed. So, again, it is
11 just common sense stuff that does not get through.

12 But, the Choice Act, you know, we need to move that
13 forward. We are going to do that working with you all and
14 ushering that through. On the other hand, we do have
15 infrastructure problems, and I think the average is, what,
16 50 years as far as our buildings and things, or our
17 hospitals. Can you talk a little bit about that, and maybe
18 concerns about the budget, you know, making sure that we, as
19 we go forward with the other, we do need to work on the
20 infrastructure that we have now.

21 Mr. Barnett. I am going to refer the infrastructure to
22 Lou, because he works this, and just yesterday, he was at a
23 budget hearing.

24 Senator Boozman. He was. I was at that hearing, and
25 he did--

1 Mr. Barnett. Yes, so I think it would be best that I
2 pass that so that he can give you the actual specifics.

3 Senator Boozman. He did a great job representing you,
4 as always.

5 Mr. Celli. Thank you, Senator Boozman. And, as you
6 heard yesterday, you know, the budget is the major problem.
7 We do have aging infrastructure and what we have neglected
8 to budget for over the past several years is the ability to
9 go in and fix some of those buildings.

10 As you heard the Secretary testify yesterday, some of
11 the buildings need to be fixed. Some may need to be
12 vacated. But, if we look at Representative Brownley's bill,
13 we also need to know when we can walk away from a building
14 and walk into a new CBOC without any strings attached, pay
15 our rent like everybody else, be able to turn the keys back
16 in at the end of 20 years, and walk away.

17 Senator Boozman. And in relation to another thing that
18 we brought up yesterday that I thought was so important, can
19 you talk a little bit about the problem that we have got
20 with filling vacancies and talk about maybe going to Title
21 38 so that we could actually raise salaries a little bit and
22 make ourselves somewhat competitive with the private sector.
23 But, really, what that is doing to the system, I know in
24 Arkansas, we have so many key spots that are being filled by
25 acting people and it is just not the same.

1 Mr. Celli. Sure thing. Thank you for the question.
2 My staff a couple of weeks ago took all of the vacancies
3 that VA has advertised on their website, did a spreadsheet
4 with all the VISNs, and came up with a number of 50 percent-
5 -50 percent of leadership positions at the Department of
6 Veterans Affairs and the VISNs are either stand-ins or
7 vacant. We then took that same spreadsheet and we sent it
8 over to VA and said, do us a favor. We want to make sure
9 that we are quoting the right numbers. Can you match this
10 against your current list? They sent it back and said,
11 thanks for updating our list.

12 [Laughter.]

13 Senator Boozman. So, the suggestions that have come
14 out about Title 38, you are in support of going forward and
15 trying to provide some relief along those lines?

16 Mr. Celli. So, what is interesting is when we first
17 heard about the recommendation, which we have not seen yet,
18 but when we heard about the recommendation, there was a lot
19 of talk about accountability, on how Title 38 would allow
20 more flexibility for the Secretary to hire and to relieve
21 poor performing managers.

22 What we have learned recently is that Title 38--or the
23 recommendation to switch SESes over to Title 38 actually
24 goes much deeper than that and it does relieve some of the
25 burdens of the VA to allow them to be a little bit more

1 competitive in the marketplace to hire physicians at a
2 higher rate. It is something that we would be glad to sit
3 with VA and take a look at as soon as we--as soon as we see
4 what that proposal actually is. It sounds good on the face.

5 Senator Boozman. Well, that is good, and that is good
6 to know. That is, I think, where many of us are at, is
7 trying to figure out the exact proposal.

8 Thank you very much. Thank you for being here.

9 Chairman Miller. Thank you very much, members, for
10 your questions.

11 I would say one unforeseen issue with the Title 38
12 proposal that the Secretary is--it actually increases the
13 amount of time it takes to discipline an employee. It could
14 go as long as 700 days to go through the process. So, what
15 we are trying to find is a good way to streamline it, give
16 folks the ability to appeal, but get through the process and
17 allow the Secretary, the Deputy Secretary, to be able to
18 discipline employees, and the Secretary and the Deputy
19 always say that we are hung up on the word "fire." No, it
20 is accountability, Mr. Commander, and discipline.
21 Regardless of what it is, they should be the people that
22 have the ability to discipline their employees so that they
23 can keep order in the ranks. I do not need to say that in
24 front of this organization, because you certainly know how
25 that process works.

1 So, Commander, we want to say thank you so much for
2 being here today, providing your testimony, bringing your
3 high school sweetheart with you so that we may have an
4 opportunity to visit with her, too. Thank you to everybody
5 for being here.

6 All members, I would ask that we have five days with
7 which to revise and extend their legislative remarks or add
8 any extraneous material. Without objection, so ordered.

9 This hearing is adjourned.

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