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Statement of the Fleet Reserve Association
on its
2012 Legislative Goals

Presented to the:

U.S. House of Representatives and
United States Senate
Veterans' Affairs Committees

By

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March 22, 2012

THE FRA

The Fleet Reserve Association (FRA) is the oldest and largest organization serving enlisted men and women in the active, Reserve, and retired communities plus veterans of the Navy, Marine Corps, and Coast Guard. The Association is Congressionally Chartered, recognized by the Department of Veterans Affairs (VA) and entrusted to serve all veterans who seek its help.

FRA was established in 1924 and its name is derived from the Navy's program for personnel transferring to the Fleet Reserve or Fleet Marine Corps Reserve after 20 or more years of active duty, but less than 30 years for retirement purposes. During the required period of service in the Fleet Reserve, assigned personnel earn retainer pay and are subject to recall by the Secretary of the Navy.

The Association is actively involved in the Veterans Affairs Voluntary Services (VAVS) program and a member of the National Headquarters' staff serves as FRA's National Veterans Service Officer (NVSIO) and as a representative on the VAVS National Advisory Committee (NAC). FRA testifies regularly before the House and Senate Veterans' Affairs Committees and Appropriations Subcommittees.

FRA's National Veterans Service Officer also oversees FRA's Veterans Service Officer Program and represents veterans throughout the claims process and before the Board of Veteran's Appeals. In addition, 171 FRA Shipmates provided almost 12,000 volunteer hours of support at 59 VA facilities throughout the country in 2011, enabling FRA to achieve VAVS "Service Member" status. Members of the Auxiliary of the Fleet Reserve Association are also actively involved in the VAVS program and hold an Associate Membership seat on the committee which requires involvement at 15 or more VA facilities.

In August 2007, FRA became a member of the Veterans Day National Committee joining 24 other nationally recognized Veterans Service Organizations on this important committee that coordinates National Veterans' Day ceremonies at Arlington National Cemetery. FRA also is a leading organization in The Military Coalition (TMC), a group of 34 nationally recognized military and veteran's organizations collectively representing the concerns of over five million members. In addition, FRA senior staff members serve in a number of TMC leadership roles.

FRA celebrated its 87th anniversary on November 11, 2011. Nearly 90 years of dedication to its members has resulted in legislation enhancing quality of life programs for Sea Services personnel, retirees, veterans and their families and survivors.

FRA's motto is: "Loyalty, Protection, and Service."

CERTIFICATION OF NON-RECEIPT OF FEDERAL FUNDS

Pursuant to the requirements of House Rule XI, the Fleet Reserve Association has received no federal grant or contract during the current fiscal year or either of the two previous fiscal years.

INTRODUCTION

Distinguished Chairman, Chairwoman, Ranking Members and other Members of these Committees, FRA's membership appreciates this opportunity to present the Association's 2012 legislative goals. The foundation for this statement is the fact that veteran's benefits are earned through service and sacrifice in the defense of this great Nation and are not entitlements or social welfare benefits.

THE 2013 VA BUDGET & SEQUESTRATION

A high priority for FRA is to clarify that the entire Department of Veterans Affairs (VA) budget is exempt from sequestration as mandated by the 2011 Budget Control Act (BCA) that will take effect January 2013. This concern stems from vagueness in the current law and the Association appreciates Chairman Rep. Jeff Miller's (Fla.) attention to this issue and the introduction of the "Protect the VA Health Care Act" (H.R. 3895) that excludes the VA health care programs from automatic sequestration cuts next year.

The VA FY 2013 budget request includes a 10.5 percent increase (\$140.3 billion) over the current fiscal year plus \$54.5 billion in advanced appropriations for VA health care in FY 2014. Funding for non-VA outpatient care is increased by almost 14 percent over the FY 2012 budget. The increased funding is in response to estimates that more than one million current active duty personnel will become veterans over the next five years. The budget also addresses a number of other VA priorities, including efforts to reduce the backlog of unresolved disability claims and reduce unemployment and homelessness among veterans.

FRA strongly supports these proposed increases and notes that the FY 2013 Independent Budget (IB) recommends just over \$68 billion in discretionary spending for next year while the Administration's FY 2013 budget recommends nearly \$64 billion in discretionary funding

FRA supports the recommendations of the IB which was recently released by AMVETS, Disabled American Veterans (DAV), Paralyzed Veterans of America (PVA) and the Veterans of Foreign Wars (VFW). The IB provides detailed funding analysis of the proposed VA budget and is intended to be used as a guide to policy makers to make necessary adjustments to meet the challenges of serving America's veterans.

DISABILITY CLAIMS BACKLOG

The cost of defending the Nation includes treating the nation's wounded warriors, and FRA is deeply concerned about the backlog of claims at the VA. Veterans injured in service to their country deserve accurate and timely disability determinations. Our military's involvement in Iraq is ending and the war in Afghanistan is winding down yet there are additional demands on VA health care resources. For years, FRA has advocated for new and improved technology to better manage the deluge of disability claims associated with the war efforts and to eviscerate the disability claims backlog. However, as of January 2012, the VA reports that more than 800,000 veterans are awaiting decisions, 60 percent of which are pending 125 days or more – an increase of more 100% over the past three years.

FRA notes that thousands of additional claims adjusters have been hired since January 2007. Yet despite the additional resources and manpower, the backlog of disability claims continues to increase. Adding to this backlog are errors due to inadequate examination, inaccurate processing and lack of oversight.

Two recent VA Inspector General Regional Office inspections indicated that the Veterans Administration Regional Office staff did not accurately process disability claims, and used insufficient medical examination reports to process TBI claims. VBA claims processors perform a vital role in adjudicating these claims, and it is clear that VA needs to ensure that decisions in disability compensation and pension cases are accurate, consistent, and timely. New personnel must become proficient in the claims process and maintain their knowledge and skills proficiency in this field.

FRA's National Veterans Service Officer (NVSO), Christopher Slawinski, states that he continues to receive calls from Association's members and/or their surviving spouses who express concerns about having been denied benefits by the VA based on inaccurate, incomplete or missing information or evidence. These errors by the VA contribute to the growing number of appeals and a further strain on the claims adjudication backlog.

FRA continues to believe there is strong bi-partisan support to reform the system and lawmakers have made clear that they want to improve claims processing to eliminate bureaucratic delays and ensure more uniformity between branches of the military and the VA in how they rate disabilities. The VA must maintain an effective delivery system, taking decisive and appropriate action to correct deficiencies and improve processes. That said, VA can promptly deliver benefits

to veterans only if it has modern technology, adequate resources, sufficient personnel training and staffing.

FRA strongly supports the Administration's efforts to create a Joint Virtual Lifetime Electronic Record (VLER) and an integrated Electronic Health Record (iEHR). A VLER for every service member would be a major step towards the Association's long-standing goal of a truly seamless transition from military to veteran status for all service members and would permit a DoD, VA, and private health care providers immediate access to a veteran's health data. There is some sharing now between DoD, VA and the private sector, but more needs to be done. Wider expansion of data sharing and exchange agreements between VA, DoD and the private sector is needed. VA's "Blue Button" initiative permits veteran's online access to some medical history, appointments, wellness reminders and military service information, but most is only accessible only after an in-person authentication. The VLER strategy utilizes secure messaging standards, similar to that which is used for email, to securely relay information between sources. The VLER working group is collaborating with VBA and its paperless processes and while being HIPPA (Health Insurance Portability and Protection Act) compliant, there are legislative hurdles to overcome, similar to that which the VBA is facing with its paperless process.

WOUNDED WARRIORS & SEAMLESS TRANSITION

FRA believes post traumatic stress should not be referred to as a "disorder." This terminology adds to the stigma of this condition, and the Association believes it is critical that the military and VA work to reduce the stigma associated with PTS and TBI.

The goal of a truly seamless transition for wounded warriors transitioning from DoD to VA still remains elusive. The Senate Veterans Affairs Committee heard testimony in May 2011 from Scott Gould, VA Deputy Secretary, and DoD Deputy Secretary William Lynn on the progress the two agencies are making in achieving the goal of a seamless transition for disabled veterans from the Department of Defense (DoD) to the VA. Committee Chairwoman Sen. Patty Murray, and Ranking Member Sen. Richard Burr acknowledged improvements but also expressed concern and frustration with bureaucratic infighting and the pace of reform almost four years after the 2007 media firestorm over conditions for wounded warriors at Walter Reed Army Medical Center in Washington, DC. FRA agrees and a top priority for the Association is to ensure adequate funding for DoD and VA health care resource sharing in delivering seamless, cost effective, quality services to wounded or injured personnel. There has been progress, however additional oversight hearings are needed to ensure that the Department's respective bureaucracies are held accountable for further progress on this issue.

FRA remains concerned that the military service commands continue to either bypass the medical evaluation board (MEB) process through administrative measures, or "lowball" disability ratings to deny service connected injured military members their full benefits. FRA is currently working with a service member through this process who stated that his MEB was not handled properly and evidence which would have confirmed disability was not considered in the decision process.

The VA has launched a streamlined version of its online application for VA health benefits (VA Form 1010EZ) for active duty personnel and Reservists returning from deployment at 61

demobilization sites nationwide and expects the form to reduce processing time by seven days. The new online application will be completed as part of a their demobilization and regularly scheduled briefing on VA benefits, which outlines five years of free healthcare and medications for returning service members eligible for VA health care.

The new application is a joint venture between the VA and DoD, and is a positive step toward a seamless transition from DoD to VA benefits. Additionally the VA and other federal agencies must work collaboratively to improve the Transitional Assistance Program (TAP) to help veterans return to civilian life as easily as possible per provisions of the recently enacted Veterans Opportunity to Work Act (VOW.)

The Armed Services Committees and Veterans Affairs Committees must also remain vigilant regarding their oversight responsibilities associated with ensuring a “seamless transition” for our Nation’s wounded warriors. In conjunction with this, FRA notes with concern the shifting of departmental oversight from the Senior Oversight Committee (SOC) comprised of the DoD and VA secretaries per provisions of the FY 2009 National Defense Authorization Act, to the more junior Joint Executive Council (JEC) which is now responsible for supervision, and coordination of all aspects of DoD and VA wounded warrior programs.

Related to essential transition programs, according to Navy Times editors, “Even before sequestration takes effect budget cuts have impacted the (DoD) Office of Wounded Warrior Care and Transition Policy with the elimination of 40 percent (44 positions) of the staff, and all 15 contract employees in the transition policy section that leaves only two full-time civilian employees.” FRA also notes the importance of the Virtual Transition Assistance Program (VTAP) website that was scheduled to replace the current Turbo TAP website. The VTAP is envisioned to enhance access to online and digital resources, virtual classrooms, social media and other 21st century information platforms.

VTAP is in tune with the current generation of service members and their families and enables them to tailor their own transition experience

The existing Turbo TAP program has been moved to the Office of Civilian Personnel Policy and is under review to try to make the program more useful for troops. Program changes include greater focus on improving resumes with links to Defense Manpower Data Center to allow potential employers to confirm military education and training, automatic translation of military skills into language employers can understand, access to job banks, and search for accredited schools for continuing education.

The Association notes the potential of the eBenefits web site which serves as an electronic portal for veterans, service members and their families to research, find, access, and in the near future manage their VA benefits. The program is a service of the VA and DoD and was one of the recommendations of the President's Commission on Care for America's Returning Wounded Warriors (Dole/Shalala).

The Association also encourages support for the Navy’s Safe Harbor Program and the Marine Corps Wounded Warrior Regiment (WWR), programs that are providing invaluable support for these personnel before they transition to veterans’ status.

Finally, Congress should expand the VA Caregivers Act to full-time care givers of catastrophically disabled veterans before September 11, 2001. In addition, the Defense Centers of Excellence should be adequately funded and staffed.

CAMP LEJEUNE CONTAMINATED WATER

The Federal Agency for Toxic Substance and Disease Registry efforts last year are important in determining the impact the contaminated water at Camp Lejeune had on those Marines, their families, and others assigned to the base between 1957 and 1987. Their survey is the largest ever carried out by the agency and is intended to determine the impact on birth defects, childhood cancers, and mortality rates due to exposure to pollution at Camp Lejeune. Statistical analysis is expected to be available in early 2014. FRA appreciates the efforts of House VA Committee Chairman Rep. Jeff Miller and Senate VA Committee Ranking Member Sen. Richard Burr in addressing this issue.

The Association supported the original version of the “Caring for Camp Lejeune Veterans Act” (S. 277), sponsored by Sen. Burr that authorizes VA health care for former military family members, veterans, and family members stationed at Camp Lejeune for three decades beginning in 1957, when the water at the base was acknowledged to have been contaminated with carcinogens. That said, the Association strongly opposes funding the legislation by eliminating appropriations for the Defense Commissary Agency (DeCA) and directing consolidation of all DoD commissaries and exchanges.

FRA also supports the Janey Ensminger Act (H.R. 1742) sponsored by Rep. Brad Miller which is similar to Senator Burr’s S. 277, however the legislation does not require DoD to reimburse VA for the cost of care for affected veterans and family members.

DISABILITY RATING REVIEW

The Association urges aggressive committee oversight of the Integrated Disability Evaluation System (IDES) to ensure that disability ratings established by this system are fair and consistent. FRA supports the modernization of the VA Schedule of Rating Disabilities to ensure that the ratings are uniform between the different services, between enlisted and officers, and uniform between DoD and VA.

According to a May 2011 GAO report (GAO-11-633T) the IDES pilot evaluation results were promising, but degree of improvement was unknown, and timeliness for disability claim adjudication has since worsened. The report noted that service members who went through the IDES pilot were more satisfied than those that went through the previous legacy system which took on average 540 days. The IDES process adjudicated claims for active duty personnel on average of 295 days and Reserve Component claims took 305 days on average. Although IDES is an improvement over the legacy system is still currently falls short of the VA’s goal of adjudicating claims at 125 days or less.

The Independent Budget (IB), a recent Institute of Medicine report (IOM), the final report (2007) of the Veterans Disability Benefit Commission (VDBC), and the Dole –Shalala Commission all

agree that the current disability rating should be reformed to more fully take into account non-economic loss and quality of life factors when determining compensation.

The Association also recommends that Congress change the current practice of rounding down veterans and survivors benefits to the next lowest dollar. Over time, the effect of rounding down can be substantial and our members have expressed concern about these effects.

A Senate floor amendment to the FY 2012 Military Construction and Veterans Affairs Appropriations bill was offered as a cost-savings measure that would change the manner in which presumptive disabilities related to exposure to Agent Orange would be determined. Sick Vietnam-era veterans would be required to prove a “causal relationship” between Agent Orange exposure and one or more of the 15 presumptive illnesses that the VA now recognizes. This onerous amendment was tabled by a vote of 69-30. FRA strongly opposes this type of budget-saving gimmick that would do serious harm to many disabled veterans and would further delay disability rating evaluations. Current law requires that a disease or injury be incurred concurrently with military service that has been a reliable standard of proof. Congress through the important oversight of these distinguished committees, much remain vigilant regarding other attempts to restrict service connection for disability benefits.

In 2010 Congress excluded the requirement that a veteran with PTS must provide a specific instance that caused the problem. The change allowed veterans, displaying PTS symptoms, to only prove that they served in a combat zone. This change was intended to streamline the disability rating process for veterans with PTS, however, the VA now requires that PTS cases to be confirmed only by a department psychiatrist or psychologist. Allowing a qualified psychiatrist or psychologist to determine a PTS diagnosis outside the VA network would reduce demand on scarce VA resources and personnel and speed-up the disability rating process.

The Association urges Congress to authorize a presumption of service-connected disability for combat veterans and veterans who are exposed to high levels of noise and subsequently claim hearing loss or tinnitus. Currently, veterans must prove that the hearing problem was caused by military service.

PHYSICAL DISABILITY BOARD OF REVIEW (PDBR)

FRA salutes Sen. Mark Udall for his efforts to get the VA to assist the Physical Disability Board of Review (PDBR) in communicating with more than 40,000 veterans with disability ratings of 20 percent or less via a series of PDBR info packet mailings to them from VA. FRA also published articles on the PDBR in its weekly electronic newsletter and monthly magazine.

The PDBR was mandated by the FY2008 Defense Authorization Act to reassess the accuracy and fairness of disability claims that resulted in combined disability ratings of 20 percent or less for service members who were separated from service due to medical conditions rather than being medically retired. To be eligible for a PDBR review, service members must have been medically separated between September 11, 2001, and December 31, 2009, with a combined disability rating of 20 percent or less, and found ineligible for retirement. PDBR can not downgrade a disability for veterans seeking a review if their rating. Since January 1, 2009 only 2,842 of the more than 77,000 eligible for reassessment have applied. Nearly half of those reviewed have

been upgraded to 30 percent or more. FRA urges that adequate staff and resources be provided to the PDBR to be able to process an increase in the volume of veterans seeking a review of their ratings.

AGENT ORANGE REFORM

FRA appreciates the VA's efforts to expand presumption to ships exposed to Agent Orange during the Vietnam era. In January 2012 the Department added 47 ships to its list of Navy and Coast Guard vessels that may have been exposed to the Agent Orange herbicide. The list expanded as VA staff determined that a ship anchored, operated close to shore or traveled on the inland waterways and was exposed to the toxic herbicide.

While the expanded VA policy to include veterans who sailed on "inland waterway" ships is appreciated, FRA believes it does not go far enough. FRA receives hundreds of calls from "blue water sailors" and their surviving spouses, stating that due to service on "their ships" in Vietnam waters, they too suffer or have died from many of the illnesses associated to presumed exposure to herbicides as their "brown water" and "boots on the ground" counterparts.

The Association strongly supports the "Blue Water Navy Vietnam Veterans Act" (H.R. 3612, S. 1629) sponsored by Rep. Christopher Gibson and Sen. Kirsten Gillibrand respectively and the "Agent Orange Equity Act" (H.R. 812) sponsored by Ranking Member Rep. Bob Filner. These proposals clarify that veterans who served off the coast of Vietnam may presume exposure to herbicides in determining disability ratings and would allow "Blue Water" veterans to be compensated for their service-connected disabilities. In addition, the Association urges the distinguished committees to schedule hearings on this legislation.

ACCESS TO VA CARE

FRA appreciates the lifting of the "temporary" 2003 ban on enrolling Priority Group 8 veterans, and was encouraged that the VA opened enrollment for some of these beneficiaries. The ban significantly limited access to care and more than 260,000 veterans have been impacted by the policy, however the gradual elimination on the ban has stopped. Our Nation made commitments to all veterans in return for their service and limiting enrollment conveys the wrong message to service members currently serving in Iraq and Afghanistan and those who have served in the past.

Expanding access to VA Hospitals and Clinics for TRICARE beneficiaries is important and FRA supports opportunities to expand DoD/VA joint facilities demonstration projects such as combining the VA Hospital and the Naval Hospital at Great Lakes Naval Base, Illinois, and ensuring that military retirees are not required to pay for care in VA facilities. All 153 VA medical centers accept TRICARE beneficiaries except for TRICARE for Life beneficiaries.

MEDICARE SUBVENTION

FRA believes authorization of Medicare subvention for eligible veterans would improve access for Medicare-eligible veterans and enhance health care funding for the Department of Veterans Affairs (VA). The Association supports the "Medicare VA Reimbursement Act" (H.R. 814)

sponsored by House VA Committee Ranking Member Rep. Bob Filner that would authorize Medicare reimbursements to Department of Veterans' Affairs (VA) medical facilities for care provided to Medicare-eligible veterans for non-service-connected conditions. Under current law, Medicare is not authorized to reimburse VA hospitals for care provided to Medicare eligible veterans. This results in veterans being forced to decide between receiving medical care through the VA or using Medicare at a non-VA facility and foregoing the personalized care of a VA hospital. Most veterans pay into Medicare for most of their lives, yet the law prohibits them from benefitting from this via care at VA facilities later in life.

WOMEN VETERANS

During the past decade military roles and responsibilities have been broadened and the number of women serving has significantly increased. There are more than 1.8 million women veterans and today they make up more than 15 percent of our active duty forces and 18 percent of the Reserve Component (RC). "Traditionally women veterans have under utilized VA health care. Women veterans who use VA are younger than their male counterparts." The average female veteran age is 48, and the male veteran average age is 61. According to IB the number of female veteran patients doubled from FY 2000-FY 2010 during which the population of female veteran's patients went from 150,000 to 300,000. Looking back, in 1999 more than 44 percent (of women veterans) had enrolled in VA as compared to only 15 percent utilization by women vets from earlier eras.

A recent Military Times poll indicates women veterans serving in the combat zone have a slightly higher rate of PTS with 20 percent of women serving in Iraq and Afghanistan displaying symptoms of PTS. A Rand Corp. study released in 2008 indicates that 14 percent of all combat veterans develop PTS.

FRA supports the VA efforts to create an appropriate model of care for women veterans and the pilot program to provide child care services for women veterans who come to the VA for treatment of their wounds and injuries. Further, VA should enhance its sexual trauma and other gender specific programs and continue to improve services tailored to women veterans in all VA facilities.

SCRA ENFORCEMENT

Abuses of service members' Servicemembers Civil Relief Act (SCRA) rights were originally exposed by the House Veterans Affairs Committee under the leadership of Chairman Rep. Jeff Miller during a February 2011 hearing. The hearing revealed J.P. Morgan Chase Bank violated the SCRA by improperly charging higher-than-allowed interest on 4,500 active duty service members' mortgages and foreclosing on 18 service members' homes while they were deployed. The Association thanks the Administration for the efforts referenced above and appreciates Chairman Miller's leadership in scheduling oversight hearings on these abuses.

In addition, the President's "Blue Print for an America Built to Last" includes provisions intended to assist veterans and active duty service members with their housing. In conjunction with this, financial institutions that provide mortgages will be required to conduct a review of every service member foreclosed upon since 2006 and provide compensation for any who where

wrongly foreclosed upon. This process is being coordinated by the Department of Justice's Civil Rights Division.

The review will also search for deployed service members who were wrongfully charged a mortgage interest rate in excess of six percent in violation of the SCRA. Further the DoD's Homeowners Assistance Program (HAP) to help certain service members who were forced to sell their homes at a loss due to Permanent Change in Station (PCS) has been extended to include those who received a PCS after October 1, 2010. Currently the program is limited to PCS moves between July 1, 2006-December 31, 2008. Certain mortgage institutions will also collectively pay \$10 million into the Department of Veterans Affairs (VA) home loan program.

VETERAN'S EMPLOYMENT

Veterans' unemployment and programs to assist them in finding jobs throughout our Nation is a major concern for our members. The recently enacted Veterans Opportunity to Work to Hire Heroes Act (VOW) addresses veterans' employment and related programs and along with other MSO/VSO leaders FRA attended a recent meeting with White House staff for an update on implementing employment initiatives and programs to address these challenges. The agenda included briefings on job fairs being scheduled throughout the country in conjunction with the White House Business Council, updates on related initiatives and the publication of a new 22-page Guide to Hiring Veterans that includes information on legal and policy developments, skills transition, how to hire veterans and appropriate interview questions, veterans benefits, resources and contacts, plus appendixes on disability employment and VOW tax credits for employers. The Guide is now posted on FRA's web site (www.fra.org) and our leadership is encouraging our Branch leaders and others to check this out and become more familiar with resources and support that are now available to our Nation's veterans. In addition, VA Career Fairs are being scheduled throughout the country to help veterans' connect with potential employers and find jobs.

According to Navy Times (March 9, 2012), the unemployment rate for veterans between the ages of 18-24 is 31 percent. FRA thanks the distinguished leaders of these Committees, Rep. Miller and Sen. Patty Murray, for working to advance legislation to authorize tax credits to employers that employ veterans and disabled veterans. The Association also appreciates the White House Jobs Bank powered by the National Resource Directory which provides a central source for veterans seeking job opportunities without having to visit multiple sites.

FRA supports the enforcement of The Uniformed Services Employment and Reemployment Rights Act (USERRA) which is a federal law intended to ensure that persons who serve or have served in the Armed Forces, Reserves, National Guard or other "uniformed services:" (1) are not disadvantaged in their civilian careers because of their service; (2) are promptly reemployed in their civilian jobs upon their return from duty; and (3) are not discriminated against in employment based on past, present, or future military service.

Many assume that the federal government leads by example and were surprised by a February 29, 2012 story in the Washington Post claiming that the federal government could be one of the biggest offenders of USERRA. The article stated that the Departments of Labor, VA, DoD and the U.S. Postal Service are the biggest offenders of USERRA. FRA urges continued attention to

veteran's employment issues to ensure that veterans returning home are not penalized for their military service.

MENTAL HEALTH

FRA is deeply concerned about the long waits for mental health care appointments at some VA facilities across the country, and reports that as many as 18 veterans are committing suicide daily. At the request of Senate VA Committee Chairwoman Sen. Patty Murray, the VA surveyed mental health providers revealing that in many areas of the country wait times far exceeded the VA's mandated 14-day window. In addition 70 percent of providers said they did not have adequate staff or space to meet the mental health care needs of the veterans, and 46 percent said the lack of off-hour appointments prevented veterans from accessing care. FRA shares Sen. Murray's concerns that with 33,000 more troops coming home from Afghanistan next year, the demands on the VA mental health program will only increase.

The Committee's Ranking Member, Sen. Richard Burr expressed disappointment with the VA mental health program even though the program funding has increased by 136 percent and staff increased by 47 percent since FY 2006. The Senator believes that 70-80 percent of PTS patients will recover if they get adequate and timely treatment. FRA is likewise concerned about the situation and supports the Committee's call for an investigation and audit to determine what is causing the long waits in the VA mental health program.

The IB expresses concern that potential changes to mental disorders rating table being developed by the Veterans Benefit Administration (VBA). This entirely new rating methodology for mental health disorders would focus on work impairment rather than the current "average impairment of earnings capacity" that also includes non-employment functional impairment. The IB expresses additional concern about the lack of transparency and lack of input from the VSO community in the new mental health rating methodology. FRA advocates that any rating changes should not reduce any disabled veterans benefits.

SBP/DIC

FRA supports the "Military Surviving Spouses Equity Act" (H.R. 178) sponsored by Rep. Joe Wilson, and Senate companion legislation sponsored by Sen. Bill Nelson (S. 260). This legislation addresses the reduction of SBP annuities for survivors by the amount of DIC they receive. Current DIC payments are \$1,154 and enacted legislation in 2009 partially addressed this inequity by authorizing an increase via the Special Survivor Indemnity Allowance of only \$50 per month for that year, with increases to \$100 in 2014. The above referenced legislation would increase the allowance to \$150 per month in 2014 with gradual increases to \$310 per month in 2017.

SBP and DIC payments are paid for different reasons. SBP coverage is purchased by the retiree and intended to provide a portion of retired pay to the survivor upon his/her death, while DIC is indemnity compensation paid to survivors of service members who die of service connected causes. And it's important to note that surviving spouses of federal civilian retirees who are disabled veterans and die of service connected causes receive DIC without offset to their federal civilian SBP benefits.

POST 9/11 GI BILL

The Post 9/11 GI Bill is a tremendous benefit for service members who qualify for benefits under the new program and has significantly improved the morale of those currently serving. The Association urges the committees to continue its oversight of the program to ensure that the changes in the law do not delay timely processing of benefits.

FRA supports upgrading Vocational Rehabilitation and Employment (VRE) to ensure parity with Post 9/11 GI Bill benefits. Also OIF/OEF survivors should have the same benefits provided to dependent children. There should be transparency and better oversight of Post 9/11 GI Bill benefits to ensure beneficiaries are getting benefits at a reasonable cost, and allow catastrophically disabled veterans to transfer education benefits to their full-time care givers when the transfer did not occur prior to the disabled veterans discharge.

The Association appreciates enactment of the “Restoring GI Bill Fairness Act” (Public law 112-26) sponsored by House VA Committee Chairman Miller, that increases the tuition cap from \$17,500 to \$27,000 for veterans attending private schools if they were enrolled in the private school before the Post 9/11 Veterans Assistance Improvement Act took effect. Last year’s bill reforming the Post 9/11 GI Bill included a tuition cap (\$17,500) for private schools. The legislation ensures that veterans already attending private schools before the legislation passed last year, are able to complete their education that was promised them when the original Post 9/11 GI Bill was enacted in 2008.

NATIONAL CEMETERY ADMINISTRATION

Chairman Miller’s call for to complete an audit of veteran’s gravesites to ensure all veterans and their dependents are buried in the correct graves, is important and our members appreciate the House Committee’s ongoing investigation to ensure that these problems do not ever arise again at veterans cemeteries.

The National Cemetery Administration (NCA) maintains over three million gravesites at 131 national cemeteries in 39 states, the District of Columbia, and Puerto Rico that are composed of 3.1 million gravesites. The VA estimates that about 22.4 million veterans are alive today. They include veterans from World War II, the Korean War, the Vietnam War, the Gulf War, and the War on Terror, as well as peacetime veterans. It is expected that one in every six of these veterans will request burial in a national cemetery. Annual internments are estimated to gradually increase to 116,000 in FY 2013 and remain at that level until 2015.

FRA appreciates the increased burial plot allowance from \$300 to \$700 effective October 1, 2011, although there is still a gap between the original value of the benefit and the current benefit. The Association also supports the IB recommendations to increase the plot allowance to \$1150. Further NCA’s Operations and Maintenance budget should be increased by \$20 million for FY 2013 so it can meet increasing demands created by the aging veteran population.

FULL VETERANS STATUS FOR RESERVE COMPONENT SERVICE

FRA supports full veteran status for Reservists with 20 years or more of service, who do not otherwise qualify for same with associated benefits under current law. The Association appreciates Sen. Mark Pryor's leadership by introducing the "Honor American's Guard-Reserve Retirees" (S. 491) bill and appreciates the leadership of Rep. Timothy Walz's companion bill (H.R. 1025) that has passed the House by voice vote.

COURT-ORDERED DIVISION OF VETERANS COMPENSATION

The intent of service-connected disability compensation is to financially assist a veteran whose disability may restrict his or her physical or mental capacity to earn a greater income from employment. FRA believes this payment is that of the veteran and should not be a concern in the states' Civil Courts. If a court finds the veteran must contribute financially to the support of his or her family, let the court set the amount allowing the veteran to choose the method of contribution. FRA has no problem with child support payments coming from any source. However, VA disability should be exempt from garnishment for alimony unless the veteran chooses to make payments from the VA compensation award. The Federal government should not be involved in enforcing collections ordered by the states. Let the states bear the costs of their own decisions. FRA recommends the adoption of stronger language offsetting the provisions in 42 USC, now permitting Federal enforcement of state court-ordered divisions of veterans' compensation payments.

CONCURRENT RECEIPT

FRA continues its advocacy for legislation authorizing the immediate payment of concurrent receipt of full military retired pay and veterans' disability compensation for all disabled retirees. The Association appreciates the progress that has been made on this issue. There still remain disabled service members collecting Concurrent Retirement and Disability Payments (CRDP) that are 50 percent disabled or greater that are slowly being phased in over a ten-year period (2004-2014). They should receive full benefits starting in 2014. Additionally, those Chapter 61 retirees receiving CRDP and retirees with less than 50 percent disability rating should also receive full military retired pay and VA disability compensation without any offset.

The Association strongly supports Rep. Sanford Bishop's "Disabled Veterans Tax Termination Act" (H.R. 333) and Senate Majority Leader, Harry Reid's "Retired Pay Restoration Act" (S. 344). Both proposals would authorize comprehensive concurrent receipt reform, and Rep. Gus Bilirakis' "Retired Pay Restoration Act" (H.R. 303) would authorize concurrent receipt for retirees receiving CRDP with a disability rating of 50 percent or less.

FRA also strongly supports House Personnel Subcommittee Chairman Joe Wilson's bill (H.R. 186), that expands concurrent receipt for service members who were medically retired with less than 20 years of service (Chapter 61 retirees) and would be phased-in over five years. This proposal mirrors the Administration's proposal from the 110th Congress. In 2008, Congress voted to expand eligibility for Combat-Related Special Compensation (CRSC) coverage to Chapter 61 retirees and the proposed legislation would, in effect, extend eligibility for CRDP to all Chapter 61 retirees over five years. FRA supports Rep. Robert Andrews bill (H.R. 1979) that among other provisions also expands concurrent receipt. A less costly improvement in an austere budget year would be fixing the so-called "glitch" for CRSC that result in compensation

declining when the VA disability rating increases – another enhancement supported by the Association.

UNIFORMED SERVICES FORMER SPOUSES PROTECTION ACT (USFSPA)

FRA urges Congress to take a hard look at the USFSPA with a sense of purpose to amend the language therein so that the Federal government is required to protect its service members against State courts that ignore provisions of the Act.

The USFSPA was enacted 29 years ago; the result of Congressional maneuvering that denied the opposition an opportunity to express its position in open public hearings. The last hearing, in 1999, was conducted by the House Veterans' Affairs Committee rather than the Armed Services Committee which has oversight authority for amending the USFSPA.

Few provisions of the USFSPA protect the rights of the service member, and none are enforceable by the Department of Justice or DoD. If a State court violates the right of the service member under the provisions of USFSPA, the Solicitor General will make no move to reverse the error. Why? Because the Act fails to have the enforceable language required for Justice or the Defense Department to react. The only recourse is for the service member to appeal to the court, which in many cases gives that court jurisdiction over the member. Another infraction is committed by some State courts awarding a percentage of veterans' compensation to ex-spouses, a clear violation of U. S. law; yet, the Federal government does nothing to stop this transgression.

There are other provisions that weigh heavily in favor of former spouses. For example, when a divorce is granted and the former spouse is awarded a percentage of the service member's retired pay, the amount should be based on the member's pay grade at the time of the divorce and not at a higher grade that may be held upon retirement. Additionally, Congress should review other provisions considered inequitable or inconsistent with former spouses' laws affecting other Federal employees with an eye toward amending the Act.

CONCLUSION

In closing, allow me again to express the sincere appreciation of the Association's membership for all that you and the Members of both of the House and Senate Veterans' Affairs Committees and your outstanding staffs do for our Nation's veterans.

Our leadership and Legislative Team stands ready to meet with you, other members of the Committees or their staffs at any time, to improve benefits for all veterans who've served this great Nation.