



WRITTEN TESTIMONY FOR THE RECORD

OF

THE

ASSOCIATION of the UNITED STATES NAVY

**Submitted to the
House and Senate
Committees on Veterans' Affairs**

**Joint Veterans' Affairs Committee Hearing on
Veteran Service Organizations Legislative Priorities**

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Submitted By

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The Association of the United States Navy

The Association of the United States Navy (AUSN) continues its mission as the premier advocate for our nation's Sailors and Veterans alike. Formerly known as the Naval Reserve Association, which traces its roots back to 1954, AUSN was established on 19 May 2009 to expand its focus on the entire Navy. AUSN works for not only our members, but the Navy and Veteran community overall by promoting the Department of the Navy's interests, encouraging professional development of officers and enlisted and educating the public and political bodies regarding the Nation's welfare and security.

AUSN prides itself on personal career assistance to its members and successful legislative activity on Capitol Hill regarding equipment and personnel issues. The Association actively represents its members by participating in the most distinguished groups protecting the rights of military personnel. AUSN is a member of The Military Coalition (TMC), a group of 34 associations with a strong history of advocating for the rights and benefits of military personnel, active and retired. AUSN is also a member of the National Military Veterans Alliance (NMVA) and an associate member of the Veterans Day National Committee of the Department of Veterans' Affairs (VA).

The Association's members include Active Duty, Reserve and Veterans from all fifty states, U.S. Territories, Europe and Asia. AUSN has 81 chapters across the country. Of our over 22,000 members, approximately 80% are Veterans. Our National Headquarters is located at 1619 King Street, Alexandria Virginia and we can be reached at 703-548-5800.

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Summary

Chairmen, Ranking Members and Members of the House and Senate Veterans' Affairs Committee, the Association of the United States Navy (AUSN) thanks you and your Committee for the work that you do in support of our Navy, retirees and veterans as well as their families. Your hard work has allowed significant progress in creating legislation that has left a positive impact on our military community.

Last year, in 2012 alone, AUSN was pleased to see passage and implementation of legislation in the areas of Employment, Transition/Reintegration, Concurrent Receipt, Healthcare and Education. Bills such as H.R. 4155, the Veteran Skills to Jobs Act, H.R. 1627, the Honoring Veterans and Caring for Camp Lejeune Families Act, H.R. 4114, the Veterans Compensation Cost-of-Living-Adjustment (COLA) Act, H.R. 4057, the Improving Transparency of Education Opportunities for Veterans Act, and S. 322, the Dignified Burial of Veterans Act. These bills, and others that passed into law last year, show the commitment and determination of Members of this Committee as well as Congress to improving the lives of those who have served our country.

As part of a larger Veteran community, AUSN recognizes the many challenges ahead, especially with the upcoming release of the President's Fiscal Year 2014 (FY14) Budget Request. Though some changes must be made in these fiscal times, we must consider what is fair to our Veterans given the promises that were made to them when they pledged to serve their communities and their country. Of great concern amongst our membership and Veterans are the impacts of an additional Continuing Resolution (CR) for the remainder of Fiscal Year 2013 (FY13) and what the implementation of the sequester will have upon the military and Veteran community. Although AUSN was pleased that military personnel and programs administered by the Department of Veterans Affairs (VA) are largely exempt from sequestration, based off of last year's decision by the Administration, there is uncertainty as to other impacts the sequester may have upon current and former military servicemembers and beneficiaries, most notably effects to the current Defense Health Program (DHP), U.S. Court of Appeals for Veterans Claims, Department of Labor (DOL)-Veterans Employment and Training funding and the Federal jobs that will be lost, affecting Veterans, for example, which constitute a large portion of the Federal work force. AUSN is pleased to see discussions underway to address concern for the impact of sequestration and what effect it might or might not have on the VA. In regards to the CR, AUSN is greatly concerned with the heavy cuts that are already being implemented in the VA's budget this fiscal year from the current CR and what the impact would be for a second CR on crucial programs to our Veteran community.

The Association of the United States Navy, working with its members, Veterans and alongside other Veteran Service Organizations (VSO's), The Military Coalition (TMC) and other partner associations, has devised its Legislative Objectives/ Priorities as described below that we would like both the House and Senate Veterans' Affairs Committees to consider.

Veterans' Healthcare

AUSN was pleased to see that all VA programs were exempt from sequestration and that vital healthcare needs of our Veterans are going to continue to be provided. In addition, AUSN was encouraged to see in Section 723 of the Fiscal Year 2013 (FY13) National Defense Authorization Act (NDAA), that the Secretary of Defense and Secretary of Veterans Affairs, "shall jointly enter into a understanding providing for the sharing of the results of examinations and other records on members of the Armed Forces that are retained and maintained with respect to the medical tracking system for members deployed overseas." This measure seeks to increase the sharing of medical records and information between the two agencies. AUSN supports the increased and improved communication between DOD and the VA, as our overseas contingency operations draw-down and a new generation of Veterans will need to be taken care of. Studies have shown that since October 2001, approximately 1.6 million U.S. troops have been deployed for Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF). Early evidence suggests that many returning service members may be suffering from Post-Traumatic Stress Disorder (PTSD) and depression. Traumatic Brain Injury (TBI) is also a major concern. The sharing of vital healthcare and mental health documents between the two agencies will ensure continuity of care to our servicemembers and Veterans during the forthcoming draw-downs.

Agent Orange

The Veterans' Affairs Committee has a longstanding working relationship with veterans and the effects of Agent Orange on the health of Vietnam Veterans. Once classified in the early 1980's as a, "minor acne condition," Agent Orange has been thoroughly studied, and it has been determined that its exposure to our servicemembers has caused severe illnesses such as various forms of cancer, Parkinson's Disease, Lymphoma and many others. During the Vietnam War, the United States military sprayed more than 19 million gallons of various "rainbow" herbicide combinations, but

Agent Orange was used most often. The name “Agent Orange” came from the orange identifying stripe used on the 55-gallon drums in which it was stored from 1962 to 1971, used to remove trees and dense tropical foliage that provided enemy cover. Often times, U.S. Navy and Coast Guard vessels were in the vicinity of disbursement of these chemicals.

The Navy and Marine Corps Manual (SECNAVINST 1650.1H) defines the area in which a ship must have operated during this time period as follows; “water areas from a point on the east coast of Vietnam at the border of Vietnam with China southeastward to 21N, 108-15E, thence southward to 18N, 108-15E; thence southeastward to 1-30N, 111E; thence southward to 11N, 111E; thence southwestward to 7N, 105E; thence westward to 7N, 103E; thence northward to 9-30N, 103E; thence northeastward to 10-15N, 104-27E; thence northward to a point on the west coast of Vietnam at the border of Vietnam with Cambodia.” Veterans, who served aboard U.S. Navy and Coast Guard ships operating on the waters of Vietnam between 9 January 1962, and 7 May 1975, may be eligible to receive VA disability compensation for 14 medical conditions associated with presumptive exposure to Agent Orange.

With the passage of the Agent Orange Act of 1991, the Secretary of Veterans Affairs was issued the power to declare certain illnesses “presumptive” to exposure to Agent Orange, enabling Vietnam Veterans to receive disability compensation for their related conditions. However, a declaration by the VA in 2002 limited the scope of the Act to only those veterans who could provide proof that they served in land, including troops on the ground and riverine Naval personnel. As such, Blue Water Navy Veterans serving off the coast must file individual VA claims to restore their benefits. However by 2009, over 32,880 such claims were denied.

AUSN was pleased, in 2011, when the VA released an updated list of U.S. Navy and Coast Guard ships that were confirmed to have operated on Vietnam’s inland waterways, docked on shore, or had crewmembers sent ashore. This list, which can be found on the VA’s website at <http://www.publichealth.va.gov/exposures/agentorange/shiplist/index.asp>, can assist Vietnam Veterans in determining potential eligibility for compensation benefits. However, on 26 December 2012, the Secretary of Veterans Affairs, General Eric Shinseki, announced that findings from an Institute of Medicine (IOM) report determined that the evidence currently available does not support the establishment of presumption of exposure to herbicides for Blue Water Navy Vietnam Veterans. The report, titled, “Blue Water Navy Vietnam Veterans and Agent Orange Exposure,” was a culmination of extensive research that included interviews with Vietnam Navy Veterans, as well as examinations of peer-reviewed literature, exposure and transport modeling, ship deck logs and other governmental documents, found that, at this time, there is insufficient evidence to determine whether Blue Water Navy Veterans were exposed to Agent Orange-associated herbicides during the Vietnam War. The IOM report, released in May 2011, did validate the Royal Australian Navy study recognizing the possibility of exposure by Blue Water Navy Vietnam Veterans but did not have sufficient evidence to determine how far the dioxin drifted and concluded that the final decision would have to be either a policy or legislative determination.

General Shinseki did, however, reiterate the fact that any Blue Water Navy Vietnam Veteran who wishes to make a claim based on herbicide exposure will still have their case reviewed, and the VA will continue to review all Blue Water Navy Vietnam Veteran Agent Orange-associated claims on a case-by-case basis. As a result, Blue Water Navy Vietnam Veterans, and many others, must undergo an extremely arduous process to “prove” the exact same conditions their Army, Marine Corps, Air Force and Brown Water Navy counterparts are experiencing. This process includes Vietnam-Era Sailors performing their own individual research to determine if their ship qualifies for compensation. Instructions on researching ships to see if they qualify for Agent Orange

compensation are at <http://www.publichealth.va.gov/exposures/agentorange/shiplist/not-on-list.asp>. The link to research a ship on the VA website immediately directs the visitor to the call support number and generic email at the National Archives and Records Administration (NARA) in College Park, MD, where the NARA research process can be tedious, as the turnaround time to get information is long and requires NARA researchers to review ship logs for Sailors. AUSN is advocating for better methods of research available to Sailors who are voicing frustration and cannot wait such a long period to hear on their qualification results. Possible options AUSN hopes the Committee will explore include digitizing ship logs at NARA and coordinating with the VA to ensure that Blue Water Vietnam Veterans can conduct quick research at VA Centers around the country, or have these logs available for public research online. These measures would eliminate NARA as the 'middle man' in order to process claims quickly and efficiently.

AUSN encourages the House and Senate Veterans' Affairs Committee to continue its work on the Agent Orange issue and support hearings and further actions on pending legislation, such as H.R. 543, the Blue Water Navy Vietnam Veterans Act, introduced by Representative Chris Gibson (R-NY-19). This bill would amend Title 38, to clarify presumptions relating to the exposure of certain Veterans who served in the vicinity of the Republic of Vietnam, as well as to help alleviate the backlogged Agent Orange claims.

Mental Health Treatment and Professional Development

AUSN was pleased that the FY13 NDAA was signed into law on 3 January 2013. The FY13 NDAA represented great leaps forward in providing our Armed Forces and Veterans better mental health care services. Amongst the many provisions in the final NDAA were Section 518, authority for additional behavioral health professionals to conduct pre-separation medical exams for Post-Traumatic Stress Disorder (PTSD), where such professionals will include psychiatrists, licensed clinical social workers or psychiatric nurse practitioners; Section 706 which authorizes DOD to carry out a pilot program to enhance the efforts of the DOD in research, treatment, education and outreach on mental health and substance use disorders and traumatic brain injury (TBI) in members of the Reserve Component, their family members and their caregivers; and Section 726, where in order to improve transparency, the VA is required to develop and implement a comprehensive set of measures to access mental health care services furnished by the VA, including staffing guidelines for specialty mental health care services, including those at community-based outpatient clinics. In addition, AUSN supports the VA's use of \$6.2 billion to expand inpatient, residential, and outpatient mental health programs (a 5.3% increase or \$312 million), further building on last year's initiatives. This increase in funding will help grow outreach for mental health screenings, expand technologies for self-assessment and symptom management of Post-Traumatic Stress Disorder (PTSD) and enhance other programs to reduce stigmas of mental health. AUSN also praises the mental health care advances of H.R. 1627, the Honoring American Veterans and Caring for Camp Lejeune Families Act, where amongst the provisions of that bill are sections from last year's S. 957, the Veterans' Traumatic Brain Injury Rehabilitative Services Improvements Act, which amends the U.S. Code to improve the disability compensation evaluation procedure of the VA for Veterans with PTSD, rehabilitative services for Veterans with Traumatic Brain Injury (TBI), and enhancement of comprehensive service programs, vastly improving the care available to our injured service members.

Despite previous successes, much work needs to be done in addressing mental health treatment and improving the quality and efficiency of VA healthcare. The Veteran suicide rate still remains dangerously high. A recent 2 year study, culminating in the release of a 2012 Suicide Data Report in mid-February 2013 by the VA, reported that 22 veterans had committed suicide per day in 2010. Furthermore, the report estimates that more than 69 percent of Veteran suicides are occurring

among those aged 50 years and older. This trend is an ongoing issue that AUSN hopes the Committee continues to make a high priority. In addition, in regards to treatment, there have been numerous complaints amongst the Veteran community of the inadequate level of mental health care professionals available to them at clinics across the country. Undersecretary of Veterans Affairs for Health, Dr. Robert Petzel, told the House Veterans' Affairs Committee [in a hearing about mental health on 13 February 2013] that the VA is currently working on being more proactive in its services to hold its workers more accountable. At the same hearing, Dr. Linda Schwartz of the VA Center in Connecticut reiterated the belief that the VA needs to stop believing it has to do everything by itself and must work with its state level partners to provide local care to Veterans.

AUSN is closely monitoring these internal VA actions, such as the ones Dr. Petzel testified on, that will move the VA into a more proactive direction in regards to mental healthcare. Amongst the bills that AUSN is tracking are H.R. 577 and H.R. 602, introduced by Representatives Steve Stockman (R-TX-36) and Jeff Miller (R-FL-01) respectively, the Veterans Second Amendment Protection Act which would amend U.S. Code to clarify the conditions under which certain persons may be treated as adjudicated mentally incompetent. AUSN also understands that Representative Tim Walz (D-MN-01) intends to reintroduce the Servicemembers Mental Health Review Act. DOD records have shown that from 2001 through 2007, 26,000 servicemembers were separated from the military because of a personality disorder. In 2008, the Government Accountability Office (GAO) conducted a review of several hundred of these cases. GAO concluded that thousands of improper personality disorder discharges had occurred. GAO also found that military branches were failing to abide by DOD's directives for diagnosing and discharging Veterans with Personality Disorder (PD). Some service compliance rates were as low as 40 percent. Instead of properly diagnosing these troops with PTSD, DOD diagnosed the service members with PD and discharged them from service. DOD has not released any records regarding these discharges since 2010 and since PD and Adjustment Disorders (AD) are preexisting conditions, DOD is not obligated to award the servicemember the benefits they would have received if they were diagnosed with PTSD or TBI. Veterans improperly discharged with a false psychiatric disorder can have a difficult time reintegrating into society. In particular, Veterans discharged with PD or AD cannot access the medical retirement benefits they deserve. This leaves the disabled Veteran without access to education assistance, Federal employment preference, medical insurance and disability compensation. Furthermore, a harmful stigma follows them for life since the diagnosis is indicated on the individuals' discharge papers, hurting their chances of finding civilian employment. This bill would give the Physical Disability Board of Review the authority to correct the service records of Veterans wrongly discharged with an improper psychiatric disorder.

Although there have been great strides in improving the quality of mental healthcare for Veterans, AUSN strongly believes much more work needs to be done in regards to mental health care and looks for continued support for legislative efforts on identifying and providing adequate care and professionals to help alleviate the problems associated with mental illness amongst our veterans.

Remote Area Access for Veteran Healthcare

Last year, AUSN was encouraged by the passage of S. 1849, the Rural Veterans Health Care Improvement Act, included amongst the provisions of H.R. 1627, the Helping Veterans and Camp Lejeune Families Act, particularly Section 110 of H.R. 1627 which read, "Recognition of Rural Health Resource centers in Office of Rural Health." AUSN is extremely pleased that rural health resource centers now serve as satellite offices within the VA's Office of Rural Health and that the Office's goals are to improve the understanding of challenges, identify disparities in the availability of health care, formulate practices or programs that enhance the delivery of health care and develop special practices and products for the benefit of all Veterans living in rural areas. In addition, AUSN

was happy to see that other sections of the bill were aimed to improve the life of rural Veterans such as Section 108 of the bill, which directs the VA to carry out an initiative of tele-consultation for the provision of remote mental health and TBI assessments in facilities of the Department that are not otherwise able to provide such a service. This provision also ensures that facilities of the VA are able to provide mental health or TBI assessments to a Veteran through contracting with a third-party provider.

It is well known that a large population of our nation's Veterans comes from rural areas of the country. This presents numerous challenges to a Veteran if he or she has a service-related disability, as time of travel, expense of travel and ability to do so are all affected by distanced care centers. The VA is making gains to better reach out to our rural Veterans, but there is much more that needs to be done. More military treatment facilities and VA clinics in rural areas are the obvious fix. However, simply putting buildings in rural areas will not solve the problem. No matter how much effort the VA puts into creating care centers in rural areas, caregiver staffing will remain a problem until the VA goes to extremes to properly staff them. While there have been many successful measures to help make rural caregiver assignments more desirable in the past, such as the 2008 Rural Access to Health Act, the VA must now bolster its efforts to attract caregivers to these areas. Pay, alone, does not drive the caregiver or health professional to a certain assignment. VA must not only look at financial, but also career and professional incentives to bring the best and brightest health care staff to our Veterans. Rewarding a health care professional who volunteers to work in a rural area for three years, for instance, could be rewarded with a professional accommodation or, much like in the military, could be given special privileges like being placed at the front of the line for extremely desirable assignments. This and many other options exist, and the VA must do more in terms of attracting promising young health care professionals to needy rural areas.

AUSN fully supports efforts in the 113th Congress, including H.R. 635, the Help Establish Access to Local Timely Healthcare for Your (HEALTHY) Vets Act, which would allow Veterans to access local healthcare facilities, which will save the Veteran time, money and physical strain. Currently, our Veterans must travel to VA hospitals for the majority of their treatments. This distance can often be a major roadblock to healthcare for Veterans living in rural areas who have to travel to reach the closest VA hospital. The HEALTHY Vets Act would allow Veterans to use health providers in their hometowns by directing the VA to contract with local hospitals and doctors on a case-by-case basis to provide medical services to those Veterans who live far away from a VA medical facility. This is the fourth time such legislation has been introduced with this aim, and AUSN hopes that it will finally be given enough time and consideration that Veterans of rural areas deserve.

Disability Compensation/Concurrent Receipt

The VA projects it will receive about 1.25 million claims for Veterans disability benefits for this year. As it exists today, a disability rating is assigned (a percentage) by the VA after a physical examination for all body systems for which the Veteran is claiming disability. However, a cash benefit is only provided to Veterans with a rating of 10% or more. The basic benefit amount ranges from \$127 to \$2,769 a month, depending on the disability rating. However, given the economic situation faced by many of our Veterans, this compensation may not be adequate to meet their needs as costs of living continue to rise. AUSN applauds passage of the Veterans' Compensation Cost-of-Living Adjustment (COLA) of 2012 passed in November 2012 where 3.9 million Veterans and their families saw their COLA raised by 1.7%, effective 1 December 2012.

Though a great step to improve Veteran benefits, these annual COLA bills consume Congress's time every year. Instead of having to return to the issue over and over again every year, AUSN applauds

H.R. 570, the American Heroes COLA Act of 2013, sponsored by Representative Jon Runyan (R-NJ-06), which would make the annual adjustments automatic. The rates of disability compensation for Veterans with service-connected disabilities and the rates of dependency and indemnity compensation for survivors of certain service-connected disabled veterans would become an automatic increase. Such automatic increases save Congress time by alleviating an annual issue that is usually passed with little to no opposition, and it protects Veteran benefits from being delayed by possible Congressional delays (as what happened last fall). This bill, partnered with Representative Runyan's other COLA bill, H.R. 569 to provide a COLA increase to take effect 1 December 2013, both address the important topic of Veteran benefits while tackling the issue early on in the fiscal year.

In addition, AUSN supports efforts to change the Chained Consumer Price Index (CPI) as a method for calculating Veterans disability compensation. We understand that during these times, the Federal Government needs to look for methods to save money, but AUSN does not support writing such checks through the earned, and much needed, benefits of retirees, Veterans, and their families. As Chairman of the Senate Veterans' Affairs Committee (SVAC), Senator Bernie Sanders (I-VT) has said, "Do not balance the budget on the backs of disabled Veterans who have lost their arms, legs, and eyesight defending our country. Do not balance the budget on the backs of working families. Do not adopt the so-called chained-CPI." AUSN, and numerous other VSO's, joined Chairman Sanders on 31 January 2013 at a press conference in the Capitol to voice opposition to Chained CPI. More than 55 million retirees, widows, orphans and disabled Americans on Social Security could be affected by the switch to a so-called chained CPI. According to the Social Security Administration, the change would result in \$112 billion in reduced Social Security benefits over 10 years. The proposed change in how annual COLA are calculated also would mean that Veterans who started receiving VA disability benefits at age 30 would have their benefits reduced by \$1,425 at age 45, \$2,341 at age 55 and \$3,231 at age 65, according to the Congressional Budget Office (CBO). These are dangerous benefits cuts, and alternative methods of lowering spending and the debt need to be investigated.

Veteran Employment/Transition and Housing

AUSN continues to advocate for continued funding for the Vocational Rehabilitation & Employment (VR&E) Program at the VA. Authorized by Congress under Title 38, U.S. Code, Chapter 31 and Code of Federal Regulations, Part 21, sometimes referred to as the Chapter 31 program, this program assists Veterans with service-connected disabilities to prepare for, find and keep suitable jobs. For Veterans with service-connected disabilities so severe that they cannot immediately consider work, this program offers services to improve their ability to live as independently as possible. According to the VA, program participants are expected to increase from 108,000 in 2011 to well over 130,000 this year alone.

There are still many concerns regarding transitioning from Active Duty to the civilian sector amongst the Veteran communities. Amongst the ones described in this testimony, are concerns regarding the experiences of a Veteran while on Active Duty, converting to certain civilian sector jobs and license certifications. AUSN is pleased that there have been great strides in this area such as last year's passage into law of H.R. 4155, the Veteran Skills to Jobs Act, which directs the head of each Federal department and agency to treat relevant military training as sufficient to satisfy training or certification requirements for Federal licenses. In addition, the inclusion of last year's Helping Iraq and Afghanistan Veterans Return to Employment (HIRE) at Home Act, S. 3235 and H.R. 4115, in the FY13 helps transitioning veterans by encouraging states to consider the specialized

military training and experience service members acquire on Active Duty as fulfilling all or some of the state certification and licensing requirements.

Currently, there is a bill this Congress that focuses on medical expertise of Veterans qualifying for license certifications. AUSN supports the House's recent passage a few weeks ago of H.R. 235, the Veteran Emergency Medical Technician Support Act of 2013, which would amend the Public Health Service Act to provide grants to states to streamline state requirements and procedures for Veterans with military emergency medical training to become civilian emergency medical technicians. We strongly urge the Senate to take action on this important bill that would help to facilitate the employment of Veterans with medical experience.

Transition Programs

Last year, AUSN was pleased to see many positive developments with transition programs for our Veterans. Most notably in the FY13 NDAA, Section 513, the availability of Transition Assistance Advisors (TAA) to assist members of the Reserve Component who serve on Active Duty for more than 180 consecutive days. In this particular section, DOD is to establish as part of the Transition Assistance Program (TAP) a Transition Assistance Advisor (TAA) program to provide professionals in each state to serve as statewide points of contact to assist members of the Armed Forces in accessing benefits and health care. In addition, AUSN was pleased with the part of S. 3202, the Dignified Burial and Other Veterans' Benefits Improvement Act, which passed into law that contained portions of the Transition Assistance Program (TAP) Modernization Act, S. 2246 and H.R. 4051. Particularly, Sec. 301 of S. 3202 directs the Secretary of Labor, during a two-year pilot period, to provide TAP to Veterans and their spouses at locations other than military installations in at least three and up to five states selected by the Secretary based on the highest rates of Veteran unemployment.

AUSN is continuing to monitor the debate on mandating participation in TAP for all separating service members as well as expanding its programs. There are still many current service members on Active Duty who continue to not understand why they would need to participate in the program. However, once service members had left the military, many wondered why they never received comprehensive training and information on how to access their earned benefits and successfully transition from military to civilian life. Unfortunately, some Veterans have no way to reasonably anticipate all of the challenges they may face once out of the military. AUSN believes that TAP resources must continue to be made available to Veterans after they have transitioned out of Active Duty and expansion of its programs to include such items as educational benefit instructions which will significantly help prepare service members and their families. There are some encouraging bills that were introduced this Congress that help in these efforts which AUSN supports, including H.R. 562, the Veterans Retraining Assistance Program (VRAP) Extension Act of 2013, which would provide for a three-month extension of the Veterans Retraining Assistance Program administered by the VA, allowing for more time for service members to take advantage of this important transitional program. Currently, VRAP offers up to 12 months of retraining assistance to Veterans who are unemployed, at least 35 but no more than 60 years old, have an other than dishonorable discharge, not eligible for any other VA education benefit programs (i.e., the Post-9/11 GI Bill, Montgomery GI Bill, Vocational Rehabilitation and Employment), are not in receipt of VA compensation due to Individual Un-employability (IU), and are not enrolled in a Federal or state job training program. In addition, AUSN supports H.R. 631, the Servicemembers' Choice in Transition Act of 2013 which provides requirements for the contents of TAP, including, amongst other items, an overview on preparations for employment, preparations for education or career or technical training and preparations for entrepreneurship.

Encourage Hiring of Veterans

AUSN is pleased with the creation and development of the Veterans Jobs Caucus in the Senate by co-chairs Senators Joe Manchin (D-WV) and Mark Kirk (R-IL) and in the House by co-chairs Representatives Tim Walz (D-MN-01) and Jeff Denham (R-CA-10). Their "I Hire Veterans" initiative is a great step in strengthening Congressional support and visibility for Veterans employment issues. In addition, AUSN was happy to see the passage into law last Congress of H.R. 3670, requiring the Transportation Security Administration (TSA) to comply with the Uniformed Services Employment and Reemployment Rights Act (USERRA). This step was taken after TSA was found to be violating USERRA when two Transportation Security Officers (TSO's) in the Reserve Component were dismissed from employment as a result of their service and had their appeals rejected. As a result of the passage of the bill into law, TSO's will now have their jobs protected under USERRA, as it instructs TSA to comply with USERRA when carrying out certain personnel decisions with respect to the employment of air transportation passenger and property screeners.

However, overall unemployment numbers amongst Veterans remain high and are a top concern of AUSN. Currently, there are over 857,000 unemployed Veterans (mostly Vietnam Veterans) throughout the country. In 2012 alone, the unemployment rate for OIF and OEF Veterans hovered at 10%. While this statistic was much better than the 2011 rate of 12%, our nation's returning heroes deserve a better chance to be able to work to secure a good future for themselves and their families. Despite the jobless rate falling, it is not yet where it needs to be. We must continue to strengthen prospects for Veteran employment by extending and strengthening incentives for businesses to employ Veterans. In addition, there are alarming cases where Veterans are afraid to put 'Veteran' on their job applications in fear of employer's not wanting to hire them due to some of the complex burdens some of these Veterans may carry. This discrimination is something that should be monitored and discouraged.

AUSN supports legislative efforts that seek to improve the employment of Veterans and encourage preferential hiring practices in businesses. One such bill is S. 6, the Putting Our Veterans Back to Work Act, which provides assistance to small business owned by Veterans and improves enforcement of employment and reemployment rights for members of the uniformed services. First, the bill directs the Department of Homeland Security (DHS) to award grants to hire veterans as firefighters and requires the head of each Executive and Defense agency to consider favorably, as an evaluation factor in federal solicitations for contracts and task or delivery orders valued at or above \$25 million, the employment by a prospective contractor of Veterans constituting at least 5% of the contractor's workforce. S. 6 would also extend the VOW to Hire Heroes Act of 2011 through March of 2016, which would provide a tax credit to businesses of up to \$5,600 for hiring Veterans who have been searching for a job for more than six months, as well as a \$2,400 credit for Veterans who are unemployed for more than a month but fewer than six. Finally, under USERRA, the bill allows a Veteran with a complaint of a violation of employment or reemployment rights under for the Attorney General (AG) to intervene within 60 days after receiving a referral of an unsuccessful attempt to resolve a complaint relating to a state or private employer.

Homelessness

Last year, there were many improvements in combating homelessness amongst the nation's Veteran population. In particular, Section 590 of the FY13 NDAA extended the authority to carry out referral and counseling service programs to Veterans at risk of homelessness transitioning from certain institutions from 30 September 2012 to 30 September 2013. In addition, the passage of H.R. 1627 into law last year included provisions of S. 3309, the Homeless Veterans Assistance Improvements Act, and S. 3349, the Zero Tolerance for Veterans Homelessness Act. Sections 301 and 302 of H.R. 1627 expand eligibility for the VA's emergency shelter services to include homeless

Veterans who are not seriously mentally ill. Furthermore, these sections enhance grant programs for homeless Veterans with special needs by including dependents of Veterans and male Veterans with dependent children. The bill also reforms the grant and per diem program, which serves upward of 30,000 homeless Veterans annually by requiring the VA to report on how to improve the per diem payment process for grantees.

There is still much work to be done to combat homelessness for Veterans, however. On a single night in January 2012, 62,619 Veterans were homeless. The Department of Housing and Urban Development (HUD) has released annual reports since 2009 on the estimates of homeless Veterans and although there was an increase from 75,609 in 2009 to 76,329 in 2010, there was a substantial 12% decrease in 2011 to 67,495 homeless Veterans. However, the statistics on homeless Veterans are still staggering, as no Veteran should be without a home after serving their country. According to data compiled by the VA in January 2011, about 145,000 Veterans nationwide spent at least one night in an emergency shelter or transitional housing program. Veterans in the groups of age 31-60 compose the greatest percentages of homeless veterans, but Domiciliary Care for Homeless Veterans (DCHV) has reported that of these homeless Veterans, 90% suffer from Substance Use Disorders, 68% have serious psychiatric problems and 61% are being dually treated. One out of every six men and women in homeless shelters is a Veteran, and Veterans are 50 percent more likely to fall into homelessness compared to other Americans. Looking at returning Veterans from Iraq and Afghanistan, the VA recently report that through the end of September 2012, 26,531 of these returning Veterans were living on the streets, at risk of losing their homes, staying in temporary housing or receiving Federal vouchers to pay rent. This figure is up from 10,500 in 2010 for returning Iraq and Afghanistan Veterans and the VA says the numbers could be higher because they include only the homeless the Department is aware of. While the VA has expressed its goal to end homelessness amongst Veterans by 2015, much work still needs to be done.

AUSN looks forward to hearing about the progress on combating homelessness amongst Veterans and urges the House and Senate Veterans' Affairs Committee to consider legislation this Congress that addresses these issues and seeks to lower these shocking numbers. One such bill is S. 287, which would include as a homeless Veteran, for purposes of eligibility for benefits through the VA, a Veteran or Veteran's family fleeing domestic or dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions in a current housing situation.

Claims Processing

Claims backlogs are an area where there is a broad consensus that a lot of improvement is needed and that existing negative public perception amongst the Veteran community is undoubtedly drawn from the VA's shortcomings to process them. AUSN is pleased with VA's heightened efforts to modernize itself and these efforts are being bolstered by DOD's modernization efforts as well. In the FY13 NDAA, for example, Section 682 required a report by the VA on claims process transformations that the VA is currently implementing, whereby no later than 60 days after the NDAA was passed into law, the Secretary of Veterans Affairs is to submit to the Committees on Armed Forces and the Committees on Veterans' Affairs of the Senate and House, a report on the plan of the Secretary to reduce the backlog of claims for benefits that are pending and to efficiently and fairly process claims for such benefits in the future. AUSN looks forward to the findings of this report. It is important in such transformation and modernization efforts to allow Veterans to have the ability to transfer their complete service jacket (medical records, etc.) with a single click. This effort would seek to completely transform and evolve the VA's claims process into a streamlined system and improve the lives of Veterans throughout the country.

However, integration of these claims systems into one has to be continued in order to process claims efficiently. Communication and integration of the Veterans Benefits Administration (VBA) and Veterans Health Administration (VHA) needs to be further developed to have continuity of filing in the VA. The creation of E-BENEFITS, integrating DOD and VA resources into a 'one-stop-shop' webpage, is a great start, but there are still a few overlaps that cause confusion when Veterans file claims and, consequently, when the VA tries to get them processed quickly and, most importantly, efficiently. Recent numbers at the VA have shown that there are 1.4 million various disability compensation and pension claims, which include 4 million education claims, processed in a given year. The VA has noted that by the end of this year, no more than 40% of compensation and pension claims will be more than 125 days old which is a significant cut from the 60% of claims exceeding that mark this past year.

With 1 million new Veterans expected to be utilizing the VA claims system upon returning home from deployment in OIF and OEF, this system of processing needs to improve. AUSN continues to be concerned with the efficiency of the claims system for our nation's Veterans and would like Congress to be on the forefront of any efforts to monitor and improve this process at the VA. Even with increases in funding over the past few years and positive developments, there still appears to be much work to be done in processing claims.

Veteran Education

AUSN was pleased to see passage of one of the most significant education bills introduced last year, H.R. 4057, the Improving Transparency of Education Opportunities for Veterans Act of 2012, which offers a critical first step in ensuring that student Veterans are properly informed about their benefits and have proper recourse for fraud, waste and abuse. AUSN understands that the VA is already taking proactive steps to ensure current service members receive educational material through the transition assistance program (TAP) and that Veterans who apply for GI Bill benefits are exposed to critical information before utilizing this benefit. H.R. 4057 also highlights available resources to help GI Bill beneficiaries choose the school best meeting their educational needs, as Veterans sometimes fall of track towards achieving a higher education. AUSN applauds Congress for coming together to help ensure that Veterans and beneficiaries are well versed in how to utilize this benefit.

There have been drastic improvements to education assistance provided to our nation's Veterans, which AUSN has been pleased to see over the years. The Post-9/11 GI Bill is a magnificent benefit for today's Veterans and correcting certain oversights within the bill has improved its usage for the more than 606,000 service members, Veterans and family members and survivors that it serves. This benefit has potential to help shape and mold future leaders, and AUSN opposes any efforts to scale back the benefit as a disservice to the men and women who have fought in defense of our nation for the last decade.

Since the VA implemented the Post-9/11 GI Bill, the Department has primarily focused on ensuring student Veterans receive timely, accurate payments to finance their education. Unfortunately, as more and more Veterans sought to take advantage of their earned educational opportunities, the VA has stated unequivocally that the system used for decades to process Montgomery GI Bill claims would not be able to handle the more complex Post-9/11 GI Bill program. Consequently, Congress authorized \$100 million to develop a new system, what is now called the "Long Term Solution," or LTS. The major development effort has focused on automating supplemental claims which would comprise the bulk of the interactions between the VA, students and schools. This decision left original claims relatively un-automated. As a result, an original claim still takes about 45 minutes

to process, a time little changed from 2009. Without making the system and its information more accessible to Veterans and schools, the process of filing the claim is incomplete. It is very apparent that LTS needs to continue evolving in order to handle more complex claims under the new Post-9/11 program. In addition, the system still hampers student Veterans from receiving up-to-date information about their claims and funding they are being provided. Student Veterans have stated that to receive funds, and/or information, the turnaround time could be as long as 2-5 months, a serious time delay, when many schools will require funds by certain deadlines. AUSN supports any effort to revise the LTS system in order for claims to not only be filed, but fulfilled with an adequate response in a timely manner.

AUSN continues to advocate for legislative solutions for issues that arise with Veteran educational assistance and programs which make Veterans able to use their benefit with fluid and flexible options. For example, AUSN supports H.R. 357 and S. 257, the GI Bill Tuition Fairness Act of 2013, introduced by Representative Jeff Miller (R-FL-01) and Senator John Boozman (R-AR), which would amend title 38, U.S. Code, to require courses of education provided by public institutions of higher education that are approved for purposes of the educational assistance programs administered by the VA to charge Veterans tuition and fees at the in-state tuition rate. Many Veterans of the uniformed services are unable to use their GI Bill at an institution of higher education of their choice, because their permanent residence is in another state. As public colleges and universities seek ways to offset decreasing revenues, many have significantly raised the costs of out-of-state tuition. The cap for GI Bill benefits often falls short of this high out-of-state rate. Furthermore, because of the nature of military service, Veterans and beneficiaries often have a difficult time establishing residency for purposes of obtaining in-state tuition rates. Circumstances such as these, which oftentimes require individual Veterans to live in certain areas, especially during the time when they are separated from the uniformed services, pose significant challenges to using this important benefit.

In regards to flexibility, AUSN members, particularly those in the Individual Ready Reserve (IRR) have been vocal about the concerns regarding flexibility for family member transfer of GI Bill benefits. Currently, in regards to Post 9/11 GI Bill benefits (Chap. 33, 38 USC), Reserve and Guard GI Bill transfer is based on a commitment to continue in the Reserves. This regulation applies to any member of the Armed Forces (Active Duty or Selected Reserve, officer or enlisted) on or after 1 August 2009 who is eligible for the Post-9/11 GI Bill and has at least 6 years of service in the Armed Forces on the date of election and agrees to serve 4 additional years in the Armed Forces from the date of election and has at least 10 years of service in the Armed Forces (Active Duty and/or Selected Reserve) on the date of election (precluded by either standard policy (service or DOD) or statute from committing to 4 additional years).

A majority of these servicemembers use their GI Bill benefit prior to their enrollment in IRR unless they have come directly off of Active Duty into the IRR (as is the case with a few groups of service members). Consequently, current law only provides for transfer eligibility for "Selected Reserve" members. Despite these IRR members serving qualifying time for GI Bill benefits completed in either an Active Duty or Selected Reserve status, servicemembers that are currently in IRR status are ineligible for the transfer option as it currently exists. The requirements for transfer of GI Bill benefits affect members in the IRR, as there is no "guarantee" anyone who completes their initial service commitment, could have continued with the Reserves past this initial commitment. Also, current Active Duty members with no Reserve commitment are also not "guaranteed" to join the Reserves for six years after leaving 10 years of service. Servicemembers transfer to the IRR for a variety of reasons, such as civilian jobs, travel commitments and even complex family situations,

with many staying in that status for several years. AUSN would like to see this definition for transferability of the GI Bill benefit expanded to include Armed Forces in the IRR.

Navy Reserve

Veteran Status for Reservists

AUSN supports the classification of certain affected groups of our Navy Reservists as Veterans of the Armed Forces. Currently, as it exists in the U.S. Code, a member of the Reserve Component can successfully complete a Guard or Reserve career but not earn the title of, "Veteran of the Armed Forces of the United States," unless the member has served on Title 10 Active Duty for purposes other than training. Currently, Title 38 excludes from the definition of "Veteran" career those Reservists who have not served on Title 10 Active Duty for other than training purposes. Drill training, annual training, Active Duty for training and Title 32 duty are not deemed qualifying service to qualify for "Veteran" status. For example, the service of our Guard and Reserve members in Operation Noble Eagle (ONE) would not qualify to earn the status of "Veterans of the Armed Forces" because it is technically a "training" status.

AUSN applauds the House of Representatives for passing H.R.1025, the Honor America's Guard and Reserve Retirees Act, in the 112th Congress and sending the bill to the Senate. However, H.R.1025, and its Senate companion bill, S. 491, did not see any additional action and an amendment to the FY13 NDAA was put on hold, despite its strong support amongst the Military Coalition (TMC) and its neutral cost to taxpayers, as scored by the Congressional Budget Office (CBO). AUSN was pleased to see that the bill was re-introduced in the form of H.R. 679 with a bipartisan list of cosponsors including Representatives Tim Walz (D-MN-01), Jon Runyan (R-NJ-03), Jeff Denham (R-CA-10), Duncan Hunter (R-CA-50), Tom Latham (R-IA-03), Jim Matheson (D-UT-04) and Nick Rahall (D-WV-03). H.R. 679 would authorize Veteran status under Title 38 for Guard and Reserve members of the Armed Forces who are entitled to a non-regular retirement under Chapter 1223 of 10 USC but were never called to active Federal service during their careers through no fault of their own. Furthermore, the bill was written to explicitly include stronger language with a, "Clarification Regarding Benefits," section which states that as a result of passage of this bill, no additional benefits may be conferred by persons receiving status of 'Veterans' under this act. This zero-cost bill also has the potential to help combat high levels of unemployment amongst the Reserve Component community, providing 'Veteran' status for them to be hired by employers that actively seek Veterans in the workplace.

Again, H.R. 679 would not bestow any benefits other than the honor of claiming Veteran status for those who honorably served and sacrificed as career Reserve Component members. AUSN believes that our Reserve Component deserve nothing less.

Other Veteran Items of Interest

AUSN is increasingly concerned with the findings of the impact that Military Sexual Trauma (MST) is having upon separating servicemembers. According to DOD, 19,000 sexual assaults occurred in the military in 2010, but only about 13 percent of victims reported the attacks. In 2011, fewer than 8 percent of reported cases went to trial, and fewer than 200 attackers were eventually convicted. In recent studies, more than 85 percent of all military sexual assaults go unreported, which means Veterans have a hard time meeting the burden of proof when applying for VA benefits. A Navy Sailor's story, Ms. Ruth Moore, has inspired legislative action. Ms. Moore enlisted in the Navy at age 18 and was the victim of sexual assault twice. Ms. Moore reported the attacks, but the attacker was

never charged or disciplined, and she was later labeled as suffering from mental illness and discharged from the Navy. Ms. Moore fought for 23 years to get the benefits she was owed after noticing her records were tampered with and that she was even diagnosed with a mental illness she did not have. AUSN supports legislation by Representative Chellie Pingree (D-ME-01) and Senator Jon Tester (D-MT), in the forms of H.R. 671 and S. 294, appropriately titled the Ruth Moore Act of 2013, which would amend Title 38 of the U.S. Code to improve the disability compensation evaluation procedure of the VA for Veterans with mental health conditions related to military sexual trauma.

Conclusion

The Association of the United States Navy understands that there are difficult decisions ahead in regards to the Continuing Resolution (CR) for the remainder of FY13 and the forthcoming FY14 Budget Request. A looming concern here at AUSN is the effects of this automatic sequestration trigger upon the DOD. AUSN was pleased when DOD military personnel accounts and the VA were exempt late last spring from sequestration, however there are many factors to be considered that may affect Veterans. Many Federal agencies, DOD included, have preferential hiring practices for veterans, which currently make up close to 44% of DOD's workforce. Sequestration could result in higher unemployment numbers amongst the Veteran community. We encourage members of both the House and Senate to look at our website which has a daily updated Bills of Interest section where we have more legislation that is within our priorities that we are tracking on behalf of our members at <http://www.ausn.org/Advocacy/BillsofInterest/tabid/2668/Default.aspx>.

AUSN believes that the Department of Veterans Affairs (VA) and the Department of Defense (DOD) are both moving in the right direction, as it pertains to their shared commitment to improving the way they care for Veterans. Whether looking at modernization of servicemembers' health records and fitness reports or the much improved collaboration efforts between the two Departments themselves, AUSN is confident that the framework these two Departments laid out in the 112th Congress is of sound structure and will significantly ease the many hardships our brave Veterans now face as we enter the 113th Congress.

AUSN understands that the VA has, almost since its inception, faced a public perception that views it as an Agency filled with incompetency and waste. The VA's sole purpose is to lessen the suffering and adversities faced by those brave few willing to stand and risk life and limb for our nation's ideals and what public perception fails to understand is that the very reason for the VA's existence forces the Department, at times, to be more reactionary than proactive. We cannot see wars coming a decade before they do. Moreover, we cannot predict what types of tactics and warfare our enemy will use, and what types of wounds we will have to learn how to heal. War has irreversible consequences, and the VA is continually adapting to try to reduce these consequences as much as possible. AUSN stands ready to be the Voice for America's Sailors, abroad and upon their return home, and looks forward to working with Congress and the VA on serving our Veterans. Thank you.