

**Statement of
Alfred (Al) J. Lipphardt
Commander-in-Chief
Veterans of Foreign Wars of the United States**

**Before the
Joint Hearing
Committees on Veterans' Affairs
United States Senate and United States House of Representatives**

Washington, D.C.

March 4, 2025

Chairmen Moran and Bost, Ranking Members Blumenthal and Takano, members of the Senate and House Committees on Veterans' Affairs, it is my honor to be with you today on behalf of the more than 1.4 million members of the Veterans of Foreign Wars of the United States (VFW) and its Auxiliary—America's largest war veterans organization.

While the benefits we afford our all-volunteer force may seem generous to those who never raised their right hand and took the Oath of Enlistment, these benefits are simply the warranty of the all-volunteer service contract—DD Form 4—each of us signed before we put on the uniform. In addition to the service member's obligations, each contract explicitly entitles the service member to certain benefits as a result of honorable service. This is why the VFW calls on our nation to honor the contract. Section 9 of this document today includes the following—

“a. My enlistment/reenlistment agreement is more than an employment agreement. It effects a change in status from civilian to military member of the Armed Forces. As a member of the Armed Forces of the United States, I will be:

- (1) Required to obey all lawful orders and perform all assigned duties.
- (2) Subject to separation during or at the end of my enlistment. If my behavior fails to meet acceptable military standards, I may be discharged and given a certificate for less than honorable service, which may hurt my future job opportunities and my claim for veterans' benefits.
- (3) Subject to the military justice system, which means, among other things, that I may be tried by military courts-martial.
- (4) Required upon order to serve in combat or other hazardous situations.
- (5) Entitled to receive pay, allowances, and other benefits as provided by law and regulation.”

This is not charity. This is a contract. Everyone who served honorably, like every member of the Veterans of Foreign Wars, has honored our end of the contract. We call on our leaders to do the same.

Disability Assistance and Memorial Affairs

Crack Down on Unaccredited Claims Consultants Known as Claim Sharks

Over the past year, the VFW continued its advocacy against unaccredited, predatory claims consultants that aggressively advertise and charge veterans for Department of Veterans Affairs (VA) disability claims assistance. The VFW and other accredited Veterans Service Organizations (VSOs) provide this service at no cost, as required by statute. Charging veterans for initial claims assistance is an illegal practice. Unfortunately, criminal penalties for unaccredited claims agents were eliminated from United States Code nearly twenty years ago, providing a loophole through which these predatory claims agents built this market sector. The VFW urges Congress to pass legislation to reinstate these penalties, and we ask for your assistance in getting it passed this year.

These unaccredited claims agents typically enter into agreements with veterans in which the veteran agrees to pay the company a multiple of the disability award, often up to five times the amount. This is a fee structure that is predatory in nature and something we would never accept. In comparison, the VFW and other accredited VSOs provide the same service for free. Veterans are paying thousands of dollars to access the benefits they earned in service. Some companies surreptitiously obtain veterans' VA login credentials so they may monitor any increases in disability awards and then contact the claimant, sometimes years later, demanding additional fees per the contracts they have with veteran clients. The tremendous increase in claims attributable to the PACT Act passage just exacerbated the problem.

Several of these predatory companies have made statements that there is no avenue for them to seek VA accreditation, but this is false. There are no restrictions for these consultants to be accredited by VA, but they refuse to do so because they would no longer be able to charge exorbitant fees. They would also be subject to oversight by VA's Office of General Counsel. Currently, these predatory companies have no accountability, no oversight, and no penalties. Companies that prey upon veterans and flagrantly disregard congressional oversight authority should be held accountable, not rewarded with legislation to legalize their predatory practices.

Toxic/Environmental Exposures

The historic passage of the *Sergeant First Class Heath Robinson Honoring our Promise to Address Comprehensive Toxics Act of 2022*, commonly known as the PACT Act, provided health care and benefits to a tremendous number of veterans and survivors, some of whom had waited years for relief. The VFW is grateful to these committees for developing and passing this legislation.

However, the PACT Act is not the end of the journey for all toxic-exposed veterans and their survivors. The legislation was enacted to address health conditions related to certain known toxins and exposure locations, largely related to burn pits and Agent Orange. The PACT Act also included an enduring framework to guide VA's continuous evaluation of toxic exposures not included in the legislation. This is referred to as the Presumption Decision Process, and oversight of this process is where we are currently focusing efforts. Veterans frequently contact the VFW

about their health conditions resulting from a variety of military toxic exposures not covered by the PACT Act. Examples include but are not limited to exposures at Kashi-Khanabad (K2) Air Base in Uzbekistan; Fort McClellan in Alabama; Naval Air Facility Atsugi in Japan; and various locations in the southwest United States. There are more than 455 sites in the United States where the Department of Defense (DOD) confirmed exposure to “forever chemicals,” and in 2021, Joint Base Pearl Harbor-Hickam in Hawaii experienced a massive fuel spill that contaminated the water supply on base and in the surrounding community. Additionally, there are entire job fields in the military in which individuals may be more exposed to chemicals than others, such as pilots and air crews, and personnel assigned to work around nuclear missiles and reactors. The military is inherently a hazardous profession, and we need to treat it as such.

Over the past year, VA announced several new presumptive conditions of service connection including male breast cancer, bladder cancer, leukemias, and multiple myelomas. VA also published Federal Register notices announcing additional utilization of their presumption process to determine any association between selected military environmental exposures and certain illnesses, such as various types of cancers and the myriad conditions that manifest in K2 veterans. A presumption of service connection eases the evidentiary burden on veterans who file VA disability claims for these conditions. In the absence of a presumptive condition, the veteran must gather evidence to substantiate the claim, In some cases this evidence does not exist due to the passage of time, incomplete records, or classification. Veterans for whom VA presumes that a specific toxin present at a certain time and location caused the illness do not have to produce additional corroborating evidence. This connection can also provide eligibility for VA health care and other veteran benefits programs. However, the presumption process is very detailed with several steps and multi-month stages, contributing to opacity and skepticism. To enhance transparency and build trust with veterans, VA should develop an aggressive outreach program to inform veterans about how to register their own health conditions in this system.

The VFW urges Congress to provide robust resources for VA to properly and efficiently research and review the toxic exposures and related medical conditions experienced by veterans. We also recommend congressional oversight of the efficiency and effectiveness of VA’s Presumption Decision Process.

Digital Claims Processing

As technology advances, we have seen an increase in our country’s reliance on digital processes, automation, and artificial intelligence to assist with tasks that have been traditionally handled by VA rating specialists. While the VFW agrees that digital processes and technology should be used to help ease the burden on VA staff and speed up the disability claims process, VA must ensure this does not negatively impact the accuracy of its rating decisions.

The VFW currently uses a claims management system, in conjunction with VA’s own submission portal, to electronically submit claims to VA on behalf of our nation’s veterans, their families, and survivors. These submission methods are not new processes. Our representatives have been submitting claims electronically in various ways since 2013. However, since May 2024, our accredited representatives have noticed a disturbing trend of claims that have been in VA’s mail portal waiting to be processed for weeks or even months.

Service provider resources saw strong investment in the early 2010s as the Veterans Benefits Administration sought to modernize many of its archaic paper-based systems. Tragically, over the last ten years these systems have languished, often leaving accredited service providers like the VFW to deal with insufficient technology that hinders our ability to responsibly serve clients in the 21st century.

As of January 23, 2025, the VFW had 33 submissions still waiting in the portal from November 2024 and 154 submissions from December 2024 yet to be acted upon. We understand that it takes time to process submissions and establish claims. As a result, we met with VA leadership multiple times to address this problem. VA held weekly calls with VSOs and the mail processing center in September and October 2024, which never materialized into solutions. We were informed that the issue was due to a backlog from the PACT Act and that mail could take up to 40 days to appear in VA's claims management system after submission.

Since identifying this issue, VFW accredited representatives have been vigilant, double-checking submissions to ensure they were received by VA. However, when VA's guidance is to wait 40 days before following up on a stalled submission, there is a real risk of missed deadlines resulting in denials or other negative results. VFW Service Officers assisted a veteran in Kansas who submitted an appeal to the Board of Veterans' Appeals (BVA). This appeal was filed in August 2024. The veteran then added evidence to his appeal, which prompted BVA to request a new appeal form as the veteran had selected the Direct Docket Lane on the original form. The veteran submitted the new form on October 9, which was within the timeframe stated in the notification from BVA. The submission was pending in the mail portal for more than 60 days resulting in the veteran's appeal being dismissed because BVA never received the paperwork. The VFW had to submit a motion to BVA to have a judge vacate and reconsider the decision. Had the submission been processed in a timely manner, that veteran would have received a decision that considered all of the evidence of record, not just some of it.

A system that causes veterans to be denied benefits and miss deadlines due to no fault of their own is not acceptable. We urge VA to continue to use automated processes when developing claims, but they must be efficient and produce tangible results.

Increase Dependency and Indemnity Compensation Benefits for Survivors

The VFW strongly supports an increase in the amount of Dependency and Indemnity Compensation (DIC) payments—a benefit for the spouse, child, or parent of a veteran who died from a service-related injury or illness. Currently, DIC is paid at 43 percent of the compensation of a 100 percent permanent and totally disabled veteran. In comparison, other federal survivor programs pay 55 percent. Also, this survivor benefit has only received cost-of-living increases since it was created in 1993, further devaluing it. For several years, legislators have introduced the *Caring for Survivors Act* seeking to raise the DIC payment on par with other federal survivor programs, and the VFW has strongly supported its passage. Military and veteran survivors need this increased compensation and deserve parity with other federal programs.

Also, it is crucial that both veterans and their prospective survivors are informed of their eligibility for survivor benefits and the application process. Veterans in receipt of VA disability

compensation or health care may assume that VA will automatically award benefits to survivors with no deliberate application. VFW Service Officers report that many surviving spouses do not realize that when their veteran dies, the associated VA disability payments stop, and the surviving spouse must apply for DIC, a benefit that is often significantly less than the veteran's VA disability compensation. Without foreknowledge, the surviving spouse could unexpectedly be in a difficult financial situation.

Improve the Accuracy of Disability Compensation Claims Related to MST

Military sexual trauma (MST) adversely affects the lives of both service members and veterans alike. A common condition in an MST-related VA disability claim is post-traumatic stress disorder (PTSD); however, other diagnoses such as depression, mood disorders, and substance use disorders can also be attributable to an MST. Some victims are reluctant to report the incident to either law enforcement or the chain of command. In some cases, survivors wait years before reporting the incident because they fear skeptical authorities, being retraumatized while repeatedly relaying the case story, or being punished for collateral misconduct. This time lag, coupled with the lack of traditional evidentiary support such as a police report or medical screening, makes these claims complex, nuanced, and difficult to accurately adjudicate. However, expeditious and accurate claims processing contributes to timely adjudication and access to VA benefits.

The VFW urges Congress to pass legislation that would require VA to update the standard of proof for MST-related PTSD claims, ensuring parity with combat-related PTSD claims and other in-service traumas. We also ask that this legislation provides a modern definition of MST to include technological and online abuse, and a review for quality of VA's MST claims training. These are necessary steps to ensure veterans' MST claims are handled respectfully and they are provided with the necessary support services from VA.

Improve Burial Benefits

The purpose of the National Cemetery Administration (NCA) is to provide burial options for 95 percent of all veterans within 75 miles of their homes. The VFW applauds NCA's work to reach that standard. Nearly 15 years ago, NCA reduced its threshold of 170,000 veterans within a 75-mile radius with no access to a national or state cemetery to 80,000 veterans. The increased demand prompted NCA to plan for additional cemeteries, develop both an urban and rural initiative, acquire adjacent lands to existing cemeteries, build columbaria, and use innovative designs maximizing available space. Additionally, through its management of the Veterans Cemetery Grants Program, NCA enables states, U.S. territories, and tribal governments to build cemeteries in areas unserved by a national cemetery, affording more veterans burial alternatives a reasonable distance from their homes. The VFW applauds NCA's considerable progress toward the 95 percent benchmark, increasing reasonable burial options within a 75-mile radius from 65 percent in 1995 to nearly 94 percent (93.7 percent) as of June 2024.

For veterans who are not near a national or state cemetery or who prefer burial in a private cemetery, VA provides burial allowances to help defray costs for transportation of the decedent's remains, the cemetery plot, and the burial or interment. VA also provides a headstone or marker

allowance. Unfortunately, although the allowance amount has increased over the years, it is considerably below market costs. In 2025, the burial allowance is \$2,000 for a death related to a service-connected condition and \$948 for a non-service-connected death. VA will also provide a \$948 plot allowance for burial in a private cemetery. However, according to the National Funeral Directors Association, the 2023 median cost of an adult funeral and burial was \$8,300 and a cremation cost \$6,280—both far below the VA burial allowances. Additionally, costs vary per region with the most expensive burials and cremations in the New England region (Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont) at \$8,985 and \$7,023, respectively. The least expensive region is the Mountain region (Arizona, Colorado, Idaho, Montana, Nevada, New Mexico, Utah, and Wyoming) at \$7390 and \$5505, respectively and also far below the current VA burial allowance. The VFW urges Congress to pass legislation to associate burial allowance increases with the Consumer Price Index.

The VFW also applauds NCA's pilot program establishing green burial sections at Pikes Peak National Cemetery in Colorado Springs, Colorado; the National Memorial Cemetery of Arizona in Phoenix, Arizona; and Florida National Cemetery in Bushnell, Florida. We support NCA's plans for burial without chemicals or embalming fluids and using biodegradable materials in caskets, shrouds, and urns. These green burial sections will enable honoring our decedents with minimal environmental impact, aiding in conserving natural resources, reducing carbon emissions, protecting worker health, and restoring and preserving habitats. These environmental actions will ensure the national cemeteries remain pristine, national shrines for as long as possible.

Economic Opportunity

Parity for Guard and Reserve

National Guard and Reserve members serve alongside active duty service members and consistently make sacrifices without always earning VA education benefits. The VFW strongly urges Congress to pass the *Guard and Reserve GI Bill Parity Act of 2025*, to allow National Guard and Reserve members to rightfully earn GI Bill benefits for their time served. Congress must act to expand eligibility to allow the increasingly frequent activations of these service members to count toward Post-9/11 GI Bill eligibility, allowing them to earn this education benefit and achieve upward mobility.

For years, the sacrifices of these service members have been overlooked. These inequities were further highlighted through the COVID-19 pandemic as National Guard and Reserve members stood on the front lines administering relief and health services. They have also assisted during natural disasters and have spent time providing security at the U.S. southern border. Whether for short-term activations, annual training, drill weekends, or Active Guard Reserve, every day served in uniform for pay should be recognized. The time is now for parity with all the armed forces in earning their VA education benefits.

Access to Education and Training

Since the passage of the PACT Act in 2022, more veterans have qualified for the Veteran

Readiness and Employment (VR&E) program. This is VA's primary employment program, designed to retrain disabled veterans experiencing significant barriers to employment. Veterans have described VR&E as a life-changing opportunity that put them on a path to success. However, the VFW is concerned about shortages of VR&E counselors, also known as Vocational Rehabilitation Counselors (VRCs), who assist student veterans on college campuses across the country. Even before the recent increases in VR&E users, veterans had reported issues over several years with their VRCs not being available for counseling because of heavy workloads and high turnover.

The VetSuccess on Campus (VSOC) program aims to help veterans, service members, and their qualified dependents succeed and thrive through a coordinated delivery of on-campus benefits assistance and counseling, leading to completion of their education and preparing them to enter the labor market in viable careers. The VFW recommends that additional VSOC counselors be added to the VR&E program. These important positions do not require the same level of training as traditional VR&E counselors due to other support already available to students through their institutions of higher learning. Our work with VSOC counselors at different schools has shown the value of these positions, and we believe the program should be expanded so more student veterans can utilize these important services.

The VFW also recommends that the number of technicians be increased to help reduce the burden faced by VRCs. The VR&E program must maintain the congressionally mandated 1:125 ratio of counselors to veterans at all schools around the country. Several VA regional offices are experiencing caseloads that exceed the 1:125 ratio. The VFW recommends adding administrative support positions to help reduce the administrative burden counselors currently face, and allow them more time to foster improved relationships with the veterans they counsel.

The VFW urges Congress to expand the monthly housing stipend for student veterans in the VR&E program for those who are enrolled in courses full time during their "gap" periods between semesters. VR&E students, as outlined in the program eligibility requirements, have significant barriers to finding employment, so it is unreasonable to assume they could work in between semesters to earn enough to cover their housing.

In addition, the VFW urges Congress to expand the monthly housing stipend for student veterans who take courses online to at least the national average amount. Currently, the monthly housing allowance rates for online courses are half of the national average, which is simply not enough for many student veterans. Many veterans attend colleges as non-traditional students and may have spouses and children, work jobs while pursuing their education, and have service-connected disabilities. Taking some or all courses online may be the best option for some veterans to continue their education, and their housing benefits are just as critical to their success as those attending college fully in person. Housing stability is also a key factor in reducing veteran suicide.

The VFW also urges VA and Congress to provide student veterans with stipends for child care. Veterans with children often struggle to take advantage of their VA benefits, including pursuing an education to improve their job opportunities. Stipends would allow veterans to pay for child care and use the VA benefits they need to thrive.

Reducing Red Tape

In recent years, institutions of higher education have voluntarily withdrawn from VA benefits programs because of the many cumbersome regulations. Every time they must provide more information, meet more reporting requirements, or put additional tasks on employees, they are disincentivized to continue participating in the GI Bill program. This is especially true for smaller schools with fewer veterans and limited staff. It is time we closely examine these burdens we have collectively placed on institutions that are already compliant. For example, schools should be provided with at least a six-month period to implement any new VA educational assistance program rulemaking. This would allow them to implement program changes outside of peak times such as enrollment and registration. Providing this flexibility may help ensure continued participation in the programs by eliminating the perception that implementing changes is too cumbersome and, therefore, not worth the time and effort. Risk-based surveys provide VA and State Approving Agencies with a way to review and mitigate potential fraud, waste, and abuse. Schools currently have only one business day to complete these surveys to avoid giving time to fabricate data. School officials have indicated that a timeframe of only one day is not feasible, but extending the period of notice to two business days would enable them to provide VA with all the necessary information.

The VFW supports reducing or repealing the requirement for schools to provide students receiving VA education benefits with a personalized “shopping sheet.” Within the language of the Forever GI Bill, Section 1018 codified in the statute that schools must provide students with a timely personalized Financial Aid Shopping Sheet covering the total cost of an education program. The goal was to inform students who are eligible to receive VA education benefits of the potential eligibility for federal financial aid before turning to private student loans or alternative financing. While this was a well-intended initiative, unfortunately school officials have told the VFW that this requirement is too burdensome and often unrealistic. Schools may not be able to provide accurate estimates in the timeframe needed for veterans to make cost comparisons or to be in compliance with the law.

In addition, financial estimates for students who receive Chapter 35 benefits, as in VA education benefits for dependents and survivors, may not be accurate. Under Section 702 of the *Veterans Access, Choice, and Accountability Act of 2014* (Public Law 113-146) public schools must offer these students in-state tuition, which is a requirement to receive GI Bill payments. For students applying out of state, their in-state status would not begin until they have moved to the school dormitory or other in-state housing. This is another example of a financial estimate that can be inaccurate and cause schools to be out of compliance, which is another reason to remove this requirement. The VFW supports passing legislation to provide educational institutions with multi-year waivers to have accredited courses and programs approved by VA. Yearly approvals are cumbersome for schools. A multi-year waiver would provide them with the necessary flexibility to seek course approval periodically as courses change or evolve.

The VFW suggests that VA adopt a master calendar similar to the calendar used by the Department of Education for standard regulation changes. This would set dates for when certain changes will be implemented for education regulations, for example by June 1, or the changes would fall to the next year. We believe the relevant parts of the master calendar should be adopted for VA education-related benefits in order to ease the burden of regulation changes put

upon schools. The VFW has heard from schools that it would be useful to have a single VA website for current training and up-to-date policy changes. They may have turnover in staff, and updates sent by email can be lost over time. This would ensure that schools have a one-stop resource for this information.

Veteran Homelessness

The *2024 Annual Homelessness Assessment Report (AHAR) to Congress* released by the U.S. Department of Housing and Urban Development (HUD) indicated that the number of unhoused veterans decreased from 2023 to 2024. The eight percent decline of 2,692 fewer veterans is promising as the numbers have been steadily reducing since 2020. Overall, since data collection began in 2009, veteran homelessness has declined by 55 percent. The VFW applauds Congress for supporting various programs and funding that have led to this significant success. However, there are still nearly 20,000 veterans who remain unhoused and more than 13,000 are unsheltered. The work must continue until this most basic need is met for every veteran.

The VFW thanks Congress for passing the *Housing our Military Veterans Effectively (HOME) Act of 2023* as part of the *Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act* — the Dole Act. It will increase the maximum rate of per diem payments provided by VA to entities that furnish services and transitional housing to homeless veterans. The purpose of the transitional housing component of this program is to promote the development and provision of supportive housing and services with the goal of helping homeless veterans achieve residential stability, increase their skill levels and/or income, and obtain greater self-determination. The legislation will also help veterans using the HUD-Veterans Affairs Supportive Housing program vouchers for food, shelter, clothing, and transportation for certain purposes. Unfortunately, this provision in the Dole Act is authorized for only two years. The VFW urges Congress to fund this vital program that has proven to be effective for as long as it is needed.

Additionally, during the COVID-19 pandemic, tens of thousands of veterans with VA home loans were affected by sudden job loss. To ensure veterans did not lose their homes, VA allowed temporary mortgage forbearance. When veterans were able to make their payments again, VA offered short-term financial options for borrowers to modify their mortgages. Those measures expired in October 2022, and some veterans who came out of their forbearance after this date were faced with having to pay the full sum of missed payments or undergo foreclosure. Some people were given the option to refinance with a higher interest rate, but this caused their monthly payments to increase by hundreds of dollars more than before and become unaffordable. This meant veterans had to sell or foreclose on their homes, creating a housing crisis for many. The VFW urges Congress to work with VA to ensure that veterans with VA-guaranteed home loans do not face homelessness due to the circumstances of the COVID-19 pandemic.

Home Loan Access for Transitioning Service Members

Housing stability is an essential need when service members transition out of the military to their new civilian lives. Expanding access to the VA Home Loan Guaranty program would make the

process of quickly purchasing a home less daunting for transitioning service members and their families.

The VFW urges Congress to support transitioning service members (TSMs) by ensuring they are able to access the VA Home Loan Guaranty program before receiving a disability rating from VA. Many service members cannot afford to wait until their VA disability claims are processed before acting on home purchasing opportunities. Some may choose to purchase a home when the right opportunity arises, rather than delaying months for a VA rating. For those who conduct a pre-discharge examination, the VFW calls for the ability to receive reimbursement for the VA home loan funding fee if they finalize a home purchase before receiving a disability rating. Disabled veterans are exempt from this fee, and TSMs should be as well once VA has completed their Benefits Delivery at Discharge (BDD) claims. Reimbursement of the funding fee would directly help these families, providing added support as they begin the next phase of their lives.

Employment Protections

As the National Guard and Reserve components are increasingly called to active duty to support a range of military and domestic needs such as responding to natural disasters, securing U.S. borders, and participating in overseas missions, the VFW is committed to ensuring that these service members do not face financial hardship or job insecurity upon their return. To protect their livelihoods, we urge Congress to pass legislation improving Public Law 103-353, the *Uniformed Services Employment and Reemployment Rights Act of 1994* (USERRA). This law was designed to shield National Guard and Reserve members from job loss and missed promotions, and to provide equity when mobilized for more than thirty consecutive days. However, loopholes and bad actors have at times undermined its effectiveness.

The VFW strongly supports the removal of the immunity clause for certain federal agencies that would ensure they too are required to comply with USERRA when reemploying National Guard and Reserve members. Additionally, we ask Congress to oversee the Department of Labor's *Veterans' Employment and Training Service Investigations Manual: USERRA, VEOA, and VP* that governs USERRA, the *Veterans' Employment Opportunity Act of 1998* (VEOA), and Veterans' Preference (VP). Regular revisions and updates to this manual with thorough reporting to Congress would provide vital transparency and allow for better understanding of changes made to these processes.

Another critical concern for the VFW is the use of forced arbitration clauses in employment contracts, which often require service members to waive their USERRA rights before any potential issue arises. These clauses, frequently buried in fine print or electronic agreements, force military personnel into binding arbitration proceedings that are typically biased in favor of the employer, as the arbitrators are hired and paid by the companies involved. Non-disclosure agreements that accompany these clauses further prevent service members from seeking damages in civil court. The widespread use of forced arbitration clauses is especially troubling given its potential impact on the financial security of military personnel, which is an issue that is central to the ability to meet the needs of their families and maintain security clearances for sensitive roles. No service member should be coerced into accepting binding arbitration as a condition of employment. The VFW calls on Congress to pass legislation making the use of

binding arbitration optional for military personnel, ensuring that their rights are fully protected in the workplace.

Transition

By design, our all-volunteer fighting force is largely made up of individuals, roughly 80 percent, who serve and leave before retirement. Eventually, even retirees will take off the uniform. The transition from military to civilian life is a critical period for service members, marking not only the end of their military careers but also the beginning of their civilian identities. While DOD's Transition Assistance Program (TAP) aims to provide a structured framework for this transition, it often falls short in addressing the full scope of challenges veterans face as they reintegrate into society. The military-to-civilian transition is not simply about securing employment and managing basic needs; it also involves deeply personal changes in identity, social support, and purpose. Without proper support and planning, these transitions can lead to negative outcomes such as an increased risk of underemployment or unemployment, housing or food insecurity, and substance abuse. Consequently, younger, junior-enlisted veterans are at the highest risk for these negative outcomes. However, years of transition data since the *VOW to Hire Heroes Act of 2011* indicate that when veterans utilize programs and resources, they in fact thrive after service.

The VFW commends Congress for including measures in the *National Defense Authorization Act (NDAA) for Fiscal Year 2025* to direct DOD to establish a pathway for personalized counseling for Reserve component members under TAP. The legislation also extends the Troops to Teachers program and expands DOD's reporting on TAP. Additionally, the VFW supports the mandate for DOD to provide service members with records upon discharge of their "military training and competency," detailing the training and qualifications earned during service.

However, the VFW is disappointed to see changes to DOD reporting requirements, including the shift from a four-year to a seven-year interval for reports on whether TSMs attended TAP in person or virtually, an assessment of challenges to in-person TAP attendance, and the number of members unable to attend TAP due to operational requirements. The latter exclusion is particularly concerning since a 2022 Government Accountability Office (GAO) report highlighted two troubling trends: Nearly a quarter of service members required to attend the mandatory TAP course failed to do so, and 70 percent did not begin the program early enough to meet legal requirements. Waiver policies that allow commanding officers to bypass mandatory TAP attendance have contributed to this issue, with 53 percent of waiver requests granted. This disturbing trend must be examined and addressed. The culture of ignoring these systemic issues in participation and oversight has left many service members without the support they need during a critical time.

The VFW strongly believes that further reform is necessary to improve the transition process and ensure that all service members, particularly those at highest risk, receive the resources and support they need. To this end, the VFW supports legislation that would hold DOD accountable for providing adequate transition services as required by federal statute by establishing an Under Secretary of Defense for Transition (USD-T). This office would be responsible for overseeing and coordinating all transition programs, ensuring compliance with TAP requirements, and evaluating the cultural stigma surrounding transitions within the military. The USD-T should be

empowered to implement targeted interventions for those at greatest risk for post-transition challenges, including suicide, substance use disorders, and mental health issues.

Furthermore, the VFW supports measures to integrate transition support into military culture early and consistently, including initiatives that encourage commanders to prioritize transition services alongside mission readiness. The VFW urges Congress to take action to establish the USD-T and implement these reforms. This is essential not only for improving the well-being of veterans but also for enhancing recruitment, retention, and the overall quality of life for service members after they leave active duty. Transition should be recognized as a core mission within DOD, with the necessary resources and support provided to ensure every veteran can successfully reintegrate into civilian life.

BDD Program Access and TAP 6.0

The inception of TAP 6.0 in January 2023 improved the number of active duty service members seeking VA claim support from our VFW BDD representatives on installations by more than 35 percent. VFW Pre-Discharge Representatives consistently attend VA TAP briefings sharing information on how to prepare for the claims process. The VFW leads the way with VSO participation in VA TAP. The fifteen minutes allowed in each TAP class provides service members with an opportunity to learn how VSOs can professionally assist them with filing for VA benefits at no charge.

Several TAP Managers have reported to the VFW that the participation rate for service members starting within the required timeframe is approximately 40 percent. The predominant reason is support of the mission. This can result in service members not having time to adequately prepare for transition. We need DOD to be consistent with allowing service members full access to TAP at the required time. This will help reduce potential veteran homelessness, underemployment, food insecurity, and veteran suicide. The VFW strongly supports codifying into law VA's current practice of including an accredited service officer during the VA portion of TAP classes.

Access to accredited representatives plays a crucial role by allowing TSMs to begin their VA claims process prior to discharge to ensure that as veterans they are connected with the full range of their earned benefits from day one. Research has shown that veterans who fail to engage with VA immediately after discharge are less likely ever to do so, potentially missing out on critical benefits such as educational opportunities, health care, and home loan guarantees. By making this policy a permanent part of the law, we can ensure that veterans receive the timely support they deserve and reduce the risk of benefits being overlooked as they transition into civilian life.

Community Connections

Connections to resources in the communities in which service members will reside can be an incredible force multiplier for TSMs and can be the difference between successful transitions and unsuccessful ones. That is why the law was written to ensure these connections are made for all service members leaving the force.

The law as written states, “(2) Each member described in subsection (a) shall meet in person or by video conference with a counselor before beginning counseling under this section to—(C) receive information from the counselor regarding resources (including resources regarding military sexual trauma)—(ii) located in the community in which the member will reside after separation, retirement, or discharge.”

This specifies that each member is to receive information regarding resources located in the community in which the member will reside after separation. This is not happening for every TSM, and where it is happening it is not being done consistently and effectively. One third of our survey respondents have reported they either were not connected to community resources or did not know if they were connected. DOD has decided to make warm handovers only for individuals it determines require the most transition assistance. The law does not state that it is at the discretion of TAP managers to make connections to community resources. It requires those connections be made for all TSMs.

In accordance with this law, the VFW urges Congress to ensure connections are being made consistently between TSMs and resources in the communities to which they are transitioning, with an emphasis on specialized transition service organizations that receive federal grant funding. One existing tool Congress can designate is the National Resource Directory (NRD), which is housed within the Defense Health Agency. NRD, which is a partnership between DOD, VA, and the Department of Labor, contains a large repository of strictly vetted organizations that span the transition spectrum from career assistance to caregiver support.

Additionally, VA has partnered with Onward Ops to provide TSMs with trained, volunteer sponsors in their destination communities. The sponsors provide guidance and resources during their first year reintegrating into civilian life. Currently, this opportunity is available only to roughly 25,000 service members separating each year.

There are no national transition services in every city and state that support individuals who are seeking services across all industries. However, there are a multitude of organizations that specialize in certain fields in certain areas of the country. If TSMs are seeking educational opportunities, they should be connected to local Student Veterans of America chapters. If they are seeking employment in the technology industry in Texas, they should be connected to organizations like VetsinTech. If they are seeking to enter the finance world in New York City, they should be connected to FourBlock. If they are service members separating from the Special Operations Forces, they should be connected to organizations like The Honor Foundation. Organizations with tailored transition plans for service members and veterans will not be able to offer the most value if they are underutilized and individuals in need do not know they exist.

TAP cannot be everything for everybody, but there are countless organizations that could offer specialized services as long as DOD makes the connections to community resources as required by law. Within Section 1142 (c)(2)(C) of Title 10, United States Code, the VFW recommends that Congress define “resources” to mean those contained within the NRD. We believe Congress should evaluate and make sure the NRD team and website are properly funded and staffed to accommodate any increased workloads, capabilities, or necessary upgrades. Furthermore, we

recommend ensuring all service members are connected to community resources as outlined in this section.

Health Care

The VFW's latest health survey, which closed December 9, 2024, revealed that veterans prefer using VA medical facilities for their health care needs. This is consistent with past VFW surveys. Of the more than 3,000 veterans who responded, 93 percent indicated overwhelming support for VA to remain the primary deliverer of care for veterans. Our findings come at a time when VA continues to deliver more care to veterans than ever, and it has reached a 92 percent trust in VA outpatient care. The VFW believes VA is the right fit to provide the needed care to veterans where they are located. Our survey found that 85 percent of survey participants would recommend VA care to others.

America faces an aging population and navigational issues in providing geriatric care. VA has implemented plans to accelerate their ability to provide high-quality geriatric and long-term care to meet the needs of the older veteran population. VA experienced a growth in enrollment of veterans aged 35-64 years old, likely due to the PACT Act. More than 60 percent of veterans who took our survey are over the age of 65. Certain veterans are at higher risk for chronic health conditions that require more complex medical and mental health care support.

A significant proportion of veterans reside in rural areas and have a higher propensity than urban veterans to enroll in VA health care services. As we focus on the medical needs of our veterans and where they are, we note that 81 percent of veterans who took the VFW survey shared that appointment availability and travel distance to their appointments were concerns for them. Knowing that much of the veteran population is rural and aging, the VFW urges Congress to prioritize funding for a robust VA health care framework for the specialty needs of aging veterans, ensuring VA has the necessary resources to effectively support its mission and deliver the care all veterans deserve.

Community Care Network

The VFW strongly believes community care is VA care. It is not direct care from VA, but the Community Care Network (CCN) is a necessary supplement to provide veterans with the care they have earned. This program is essential because it provides services for veterans who live too far from a VA facility or if a requested appointment is unavailable in an acceptable timeframe. VA's focus should remain on how veterans can receive the care they need, whether it is inside or outside of its facilities.

The VFW commends Congress on the passage of the *Senator Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act*, which will establish a standardized screening process to determine, based on clinical need, whether a veteran satisfies criteria for priority or routine admission to a residential treatment program for mental health or substance abuse disorders.

The *VA MISSION Act of 2018* included many provisions that were anticipated to help veterans, caregivers, and survivors. It transformed the Veterans Choice Program into the CCN we see

today and expanded eligibility for the Program of Comprehensive Assistance for Family Caregivers to veterans of all eras. It provided hiring and retention incentives for the VA workforce and health care providers, and instituted a plan for the future infrastructure needs of the Department called the Asset and Infrastructure Review (AIR) Commission.

VA's CCN is plagued with too many problems that need thoughtful solutions. Unfortunately, it seems whenever CCN is discussed, it is in polar terms, preventing wholesale privatization or opening full choice for the community. Neither is realistic nor what veterans who actually use VA are requesting. Our veterans who use VA prefer to stay in the VA system and they want more VA care closer to home and easier to access. This can include community providers that are well integrated into VA's care ecosystem. If given the choice, veterans routinely tell us they prefer VA direct care, but that does not mean a wholesale rejection of community providers supplementing care where appropriate. We believe some of that sentiment is driven by negative experiences with the community care process. We must fix those issues because our veterans have earned quality care regardless of who provides it.

CCN as it is currently structured is a "leaking ship," and shoving more people onto that ship would be detrimental to those veterans seeking care. We need to "plug the holes" in this problematic program before unduly adding more veterans to it. When used properly, CCN can save lives and improve the health outcomes for countless veterans, but when problems with CCN arise, it can drive people away from the care they have earned.

The VFW has consistently reinforced to VA that its greatest cost for care in the community is uncoordinated emergency room care. We have also called on VA to lean on its third-party administrators to ensure consistent delivery of community care to eligible veterans. Unfortunately, VA has not heeded these calls, and we regularly hear from veterans whose potential community care eligibility has been stifled by bureaucrats at the local level. The VFW has been unequivocal since the Phoenix crisis in 2014 that community care must be a part of VA care. It always has been. However, veterans expect consistency. When 23 Veterans Integrated Services Networks (VISNs) interpret the MISSION Act in 23 different ways, veterans are overlooked, just as the VA Inspector General pointed out earlier this year in Buffalo, New York.

DOD has been able to make this work through its community care networks, which means that when veterans seek to navigate VA care for the first time, they rightfully expect a similar experience to navigating care in the military. Today, the military supplements a highly functional direct care system with a robust network of accessible community providers, and veterans expect VA to do the same.

What is jarring to the VFW is that some of the same vendors administer DOD's networks. However, VA refuses to integrate these vendors similarly to allow for seamless care for veterans. Instead, VA holds onto the archaic mindset that it must control the levers of care coordination, leaving the veteran to languish waiting for approved referrals and scheduling.

We believe that veterans must also have access to timely, high-quality care through the VA's Mental Health Residential Rehabilitation Treatment Programs (MH RRTPs). Veterans in crisis must not face bureaucratic delays in accessing care. We recommend the establishment of a

seventy-two-hour deadline for residential treatment screening and admissions decisions, as we believe this could save lives and reduce instances of veterans losing trust in the VA system when they need help most. We strongly urge Congress and VA to prioritize the timely treatment of veterans in crisis.

Additionally, the VFW advocates for removing barriers to accessing the full range of community-based treatment programs, including those outside VA networks. Too many veterans are denied access to critical services simply because the programs are outside of VA's contractor-managed networks, which often restrict care to specific geographic areas. This limitation disproportionately affects veterans seeking specialized mental health and substance use disorder care where options are already limited. We urge Congress and VA to adopt a more flexible, needs-based approach to residential treatment referrals to ensure that all veterans can access the care they need, no matter where it is located.

The VFW also supports grants that would enable eligible organizations to establish peer-to-peer mental health programs for veterans. We know there is a great demand for additional mental health services, particularly in rural areas, where veterans face significant barriers to accessing care. Expanding these services will help ensure that veterans, regardless of where they live, have access to the support they need.

Properly Implement VA and DOD Health IT Systems

The VFW is frustrated and disappointed by VA's progress in instituting a modern electronic health record (EHR) solution across the Veterans Health Administration (VHA). Over the last few years, VA has blamed its vendors, Oracle-Cerner and Booz Allen Hamilton, but neglected to hold itself accountable for its responsibility for change management in the VA workforce. Make no mistake, the vendors are not entirely innocent in this process. However, throughout our review of the VA modernization effort, DOD's similar modernization to the same Oracle-Cerner product, and other EHR migrations for major health systems, the VFW concludes that VA has failed in its program governance.

During the six years of this contract, the constant change of VA leaders, including five different VA deputy secretaries overseeing the project, and the failures in change management at all levels have left VHA unprepared for such a historic and necessary modernization. Moreover, understanding how VA often leans on program management consultants for support on significant projects leads us to have further questions about whether or to what extent VA may have abdicated its change management responsibilities to Booz Allen Hamilton.

Change management is complex, especially in a health care environment where the stakes are high. Missed follow-up examinations, referrals, or lost prescriptions are matters of life and death. The shortfalls identified by the VA Office of Inspector General cannot simply be excused as a byproduct of lost productivity in a significant systems migration. The VFW knows that productivity suffers in the short term when any company institutes major systems and technology changes. EHR migration for VA and DOD is no exception.

However, vastly different patient outcomes seem inevitable when looking at how these agencies handled it. In speaking with military doctors who participated in the migration, the VFW believes that they understood what was about to happen, why it would happen, the future

benefits of the migration, and the steps to achieve adoption and growth. Intermediary workflow considerations are needed to ensure that patient care does not suffer. Based on end-user surveys from VA sites that have attempted EHR migration, the VFW sees no indication that these basic change management principles were satisfied before VA chose to execute its migration. Instead, VA seemed overly reliant on the vendors to guess what its workforce needed, leading to miscommunication and discord among users.

The VFW supports legislation that would prohibit the Secretary of VA from carrying out certain activities under the Electronic Health Record Modernization program until system stability improvements are certified. The VFW would also support legislation in which Congress delivers a modern, safe, and trusted EHR system for patients and providers. That would establish specific success metrics and ensure that no further deployments of the EHR proceed until those metrics are satisfied. The need for EHR is immense, and Congress should be willing to adjust the budget to upgrade the dated systems, which provides an added layer of protection and direct interaction with DOD to aid in the transfer of medical records and transitioning with ease.

Staffing and Retention

The VFW would be remiss if we did not acknowledge the effects that the recent Executive Order for a hiring freeze on government agencies would have on the standards of care for veterans, whether they chose to utilize care within or outside VA medical facilities. After an unprecedented hiring surge in fiscal year (FY) 2023, VHA started employing a stricter practice of strategic hiring and employed the use of a hiring pause in FY 2024 to help restructure its workforce. VA's FY 2025 budget request submitted in March 2024 called for just over 448,000 employees, which is a decrease of more than 10,000 from the 2024 estimated workforce levels with most of the workforce reduction coming from VHA. To meet veteran needs, VHA must hire at least 5,000 employees in the current fiscal year. Most of these positions are believed to be related to the mental health care profession.

The streamlined access to VA benefits and health care for toxic-exposed veterans through the PACT Act has had a notable positive effect on veterans, their families, and survivors, with over 740,000 veterans having enrolled in VA health care. Now is not the time to limit the quality of care our honorable veterans deserve. This does not consider the new patient workload based on a projected increase of approximately 48,000 new unique patients, which includes approximately 80,000 new priority groups 1–6 veterans, a decrease of 42,000 priority groups 7 and 8 veterans, and an increase of 10,000 nonveterans according to the *Independent Budget Recommendations for the Department of Veterans Affairs for FY 2026-2027*.

We call on Congress to focus on ensuring that VA remains the primary provider and coordinator of care for veterans, and that community care is available and accessible to veterans as needed to support and supplement their VA care.

VA Infrastructure

In the past ten years, VA infrastructure funding has had only marginal increases. In 2014, VA requested \$1.1 billion. In 2024, VA requested \$4 billion. Conversely, the infrastructure backlog

known as the Strategic Capital Investment Planning (SCIP) project list in the same timeframe has doubled, increasing by 116 percent. In 2014, the SCIP was approximately \$60 billion worth of work. Currently, it is estimated to be more than \$150 billion. Unless there is a drastic increase in resources provided for VA infrastructure, this funding backlog will continue to grow, particularly as infrastructure costs continue to increase. To overcome VA's infrastructure challenges, Congress must not only provide significantly increased funding to fully address these long-standing issues but must also enact comprehensive planning, budgeting, management, and oversight reforms to ensure more effective use of those funds. The VFW suggests that the level of funding for VA's construction budgets should total, at a minimum, 3 percent of its overall operating budget just to keep up with the growing backlogged SCIP list.

Enhance Programs and Services for Women and Underserved Veterans

The veteran community as we know it is changing. As our nation becomes more diverse, so too do our military and veteran populations. To best serve the veteran community of today, tomorrow, and for generations to come, we must arm VA with critical information and tools that will empower it to deliver 21st-century health care. Veterans from across the identity spectrum face unique health challenges that require training and continued education for those who serve them to allow for appropriate treatment and optimal outcomes. The VFW urges VA to continue its efforts to provide culturally responsive and informed care to veterans across the agency. As more women serve in the military, the number of female veterans eligible for health care continues to rise. Women veterans have unique health care needs that should be addressed throughout various stages of their lives, including pregnancy, perimenopause, and menopause. However, limited research on menopause and its effects on women veterans restricts the development of treatment options for patients and training for health care providers. The VFW urges Congress to ensure VA conducts more research on women veterans and the impact that military service has on their physical and mental health.

In addition to training and education, we know that data empowers us to understand health trends and address inequities faced by specific veteran populations. VA is making efforts to enhance demographic data collection from its patients, but these efforts must be standardized and codified for the purpose of early detection and long-term disease prevention. The VFW believes that better data collection will empower VA to care for veterans more effectively. According to the October 2020 GAO report titled *Better Data Needed to Assess the Health Outcomes of Lesbian, Gay, Bisexual, and Transgender [LGBT] Veterans*, VA's EHR lacks the standardized field for health care professionals to record a veteran's sexual orientation or self-identified gender identity. The agency recently began collecting this data as the result of Executive Order 14075 mandating this collection across government agencies. VA should expand these efforts as well as develop a plan for reporting outcomes annually. Additionally, understanding a veteran's race and ethnicity can help health care providers address specific concerns for which the veteran may be at a higher risk. The VFW believes that VA should continue to foster a culture of trust and action to achieve positive health outcomes for minority veterans.

To begin this process, VHA must consistently collect accurate race, ethnicity, sexual orientation, and gender identity data in the EHR system. Collecting basic demographic information is the first step in understanding the needs of a diverse veteran population. As the number of minority

veterans continues to grow, VA must adapt to meet the need to access both benefits and health care services. Women, LGBT, and racial and ethnic minority veterans face barriers and challenges across different life domains. In 2014, less than a quarter of the total veteran population were minorities. This number is expected to increase to at least 35 percent by 2040. Until this information is accurately collected, health care providers may not be armed with the best information to accurately assess and treat veterans at VA.

One example of a health issue that needs to be monitored is socioeconomic factors that contribute to African Americans being at risk of cancer at an earlier age than their Caucasian counterparts. The age of cancer screenings for these veterans, especially gastrointestinal, must be authorized earlier than the standard age of forty-five years old. Paired with exposure to airborne hazards, waiting to begin screenings at age forty-five is a disservice to an already susceptible community.

Due to toxic exposures, women veterans are disproportionately at risk for reproductive cancers. This is why gender-specific care and counseling must be available and easily accessible at all VA facilities. Special attention needs to be paid to certain veterans who are more susceptible to illnesses and diseases than similar groups of veterans. For example, African Americans have a mortality rate during childbirth that is three times as high as their Caucasian counterparts. Examples such as these are why we urge VA to train its health care providers on all issues facing the increasingly diverse veteran population.

Under the “Don’t Ask, Don’t Tell” (DADT) policy, thousands of service members were discharged without an honorable status, preventing them from accessing essential military benefits, including education benefits, and potentially affecting their ability to apply for jobs and loans. Although DADT was repealed in 2011, allowing for open service by LGBT individuals, the repercussions of the policy are still felt today. In June 2024, President Biden issued a mass pardon for service members convicted under the Uniform Code of Military Justice. This action allows those convicted to apply for proof of their conviction’s erasure, petition for discharge upgrades, and recover lost pay and benefits. However, this places the onus on veterans to determine their eligibility and navigate the application process.

The VFW urges Congress to honor its commitment to LGBT veterans and hold DOD accountable. It is time to prioritize the upgrading of their records so these veterans can finally receive the benefits and recognition they deserve.

Strengthen Care and Research for Mental Health/Brain Health

The VFW recognizes the crucial importance of improving mental health and trauma care for our service members and veterans. We are encouraged by provisions in the FY 2025 NDAA that address the care of service members with traumatic brain injury (TBI), PTSD, and other mental health conditions.

We are pleased to see the continued integration of the Defense Intrepid Network for TBI and Brain Health, which is in the process of becoming a program of record. This network aims to standardize care and improve prevention, diagnosis, treatment, and rehabilitation for service

members affected by TBI, PTSD, blast overpressure, and other mental health challenges. The VFW supports efforts to enhance care, research, and education around these conditions, and we are particularly encouraged by the focus on developing a coordinated, multi-specialist approach to care.

Additionally, these provisions direct the establishment of a comprehensive brain health and trauma demonstration program, which will provide integrated, multi-specialist evaluations, treatment initiation, and follow-up care for service members and their families. This initiative is an important step in ensuring that all service members have access to comprehensive care tailored to their needs.

It also mandates a review of DOD's research on traumatic brain injury, particularly injuries related to blast overpressure. We support these efforts to better understand the cumulative effects of blast exposure and advocate for policies that allow service members to seek medical treatment without fear of retaliation. The VFW urges DOD to conduct a longitudinal study to better understand the long-term effects of repeated blast exposure and other health effects including the link between blast overpressure and suicide, and to ensure necessary adjustments are performed to weapons and equipment to minimize these effects.

The VFW is pleased to learn that DOD will now conduct baseline cognitive assessments of service members, as required by the FY 2025 NDAA, but we believe repetitive cognitive testing is required to fully understand the full depth of this issue. These provisions represent meaningful steps toward improving the care and treatment of service members and veterans dealing with TBI, PTSD, and other mental health conditions. We urge Congress to continue working to expand and enhance these initiatives, ensuring that no veteran is overlooked due to bureaucratic delays or geographic restrictions. The VFW remains committed to supporting efforts that improve access to care, reduce barriers, and ensure that every veteran receives the care and support they deserve.

Research the Efficacy of Medical Cannabis and Other Alternative Therapies

The VFW acknowledges that there is a growing need for alternative PTSD treatments, and we have a resolution that speaks to the need for this important exploratory research. Currently, veterans are provided with two types of medications—SSRIs (selective serotonin reuptake inhibitors) and SNRIs (serotonin-norepinephrine reuptake inhibitors)—and various evidence-based therapies to reduce PTSD symptoms. However, certain treatments are successful for some but not practical for others.

Many veterans are affected by PTSD, and these effects can hurt the veteran's lives in a negative way including the risk of homelessness, exacerbating existing mental health issues that lead to substance abuse, and difficulties in transitioning back to civilian life. VA's data indicates that 16 percent of veterans enrolled in VA care have a PTSD diagnosis.

Some veterans are choosing alternative approaches to treatment for PTSD. According to a 2020 national survey on drug use and health of veterans by the Substance Abuse and Mental Health Services Administration, veterans in the age range of 18 to 25 have been shown to use marijuana at 19 percent and LSD at 2.3 percent. These rates are higher than those in the 26 and older age

range. One promising treatment involves stellate ganglion block (SGB), which is an injection placed in nerves near the stellate ganglion that is known to have short-term benefits, but further research is needed to determine long-term benefits. Hyperbaric oxygen therapy (HBOT) is a treatment in which a veteran inhales 100 percent oxygen that dissolves in plasma and body tissues, which can induce neuroplasticity and improve clinical outcomes. Ketamine therapy is an intravenous infusion known to decrease thoughts of self-harm, feelings of hopelessness, and depression. MDMA-assisted therapy (MDMA-AT) uses a drug that causes the release of serotonin and dopamine with reported results of reduced fear, increased social engagement, increased openness, and increased empathy and compassion. The VFW believes that if there are additional treatments that can effectively treat PTSD, then VA should receive funding to research those treatments and, if found beneficial, we would urge the rescheduling of those substances to help treat mental health issues and hopefully lower suicide rates.

Additionally, VA should institute strong signatory informed consent protocols on all mental health medications, implement ethical deprescribing guidelines for veterans seeking to stop psychiatric medication, train prescribers and clinicians on the emerging harm reports on psychotropic and psychiatric drugs, and publicize all available data regarding the growing concern of overprescription and harm in the veteran community related to psychiatric drugs. To that end, the VFW has partnered with the Grunt Style Foundation to call attention to this critical issue. Our shared goals are to identify more tools for the veteran community to address suicide and mental health instead of simply continuing to spend money without tangible results.

Board of Veterans' Appeals

The VFW believes a third-party audit of BVA's policies, procedures, staffing, and equipment is needed and justified to ensure that it is operating to its maximum potential. We are unaware of any such audit having been administered within at least the past five years. If one was done, the results were not shared with the VSO community. Therefore, a new quality review is warranted. We believe an outside review is proper and needed as it would provide the necessary transparency for veterans, their families, and the VSO community that is deserved. Support of Congress can prioritize this request and move it forward quickly.

With the implementation of the *Appeals Modernization Act* (AMA) more than six years ago, we urge VA to develop a reliable and comprehensive report more regularly from BVA as to its success and failures. This report should be data driven and address short-term concerns such as the continued emphasis on legacy claims, and how soon the backlog will be not only at true functional zero but eliminated completely. Information should also include if the AMA workload is expected to reach functional zero and how. This is important because addressing concerns about the AMA inventory will help reduce the still unpredictable wait times veterans endure in the BVA appeals process despite its intent to get veterans decisions sooner.

Next, there needs to be a more urgent focus on reducing and eliminating the high number of AMA remands, and analysis of the underlying issues for remands. Many times the VFW has told this committee that while hiring more staff and judges is a good step, if the training they receive is subpar then decisions will be as well. Too often we have seen a decision that could have been reached without a remand if the entire file had been reviewed and all existing evidence had been

properly considered. We have also cautioned about the need for greater communication and collaboration between Veterans Law Judges and their staff attorneys that is favorable to the appellant. We have heard of BVA staff members who have many more years of experience being overruled by newer judges by virtue of their position. Often times this causes improper decisions and unnecessary delays in the appeals process.

Substantive and data-backed dialogue also needs to regularly take place between BVA and the VSO community as to whether or not AMA has actually improved the claims process and the claimants understanding as to what adjustments or corrections are needed to prove the claim. Although BVA has provided updates since the launch of AMA, more frequent communication is necessary for greater transparency and optimum results.

Foreign Medical Program Reform

Enhance Services for Veterans Outside of the United States

The Foreign Medical Program (FMP) is a crucial initiative that allows veterans to receive reimbursement for medical care related to service-connected disabilities. However, there are several updates needed to enhance its usability and effectiveness compared to other VA benefit programs, which is a common concern among veterans from the VFW Department of Europe. Currently, veterans using FMP for reimbursement cannot receive payments via direct deposit, even though VA disability and GI Bill housing payments are made this way. Veterans should receive their FMP reimbursements in the same manner.

Additionally, there is a lack of coordination between FMP and VA teams responsible for rating disabilities. When a veteran files a claim for a newly rated issue but fails to provide necessary evidence, such as a decision letter and a screen grab from benefits, FMP will deny the claim. Each time a claim is denied, the veteran must start the process again from the beginning. Unfortunately, FMP cannot access the VA system, even though it is part of VA.

To qualify for reimbursement through FMP, the medication received must be currently approved by the U.S. Food and Drug Administration (FDA). However, finding FDA-approved medications can be nearly impossible in many countries. Other significant issues faced by veterans and retirees in Europe include difficulties accessing the VA crisis hotline and limited availability of commissaries, PXs, and APOs.

We urge VA to revise its antiquated paper-based system and utilize Electronic Funds Transfer to allow veterans and service providers to file claims and receive reimbursement from VA through electronic means. Additionally, Congress needs to address the statutory loophole that restricts FMP to *only* service-connected care, and offer similar care for non-service-connected issues. Lastly, Congress and VA need to restructure FMP by potentially utilizing a third-party administrator to coordinate and deliver care for overseas veterans similar to TRICARE Overseas, VA contract compensation and pension examinations, and VA's domestic community care programs.

Concurrent Receipt

For two decades, Congress has failed to correct the injustice of withholding military retirement pay from disabled veterans. Military retirement pay and VA disability compensation are two distinct benefits earned for two different reasons, yet Congress continues to wrongly treat their concurrent receipt as "double-dipping."

In 2004, Congress authorized full concurrent receipt of benefits for veterans with at least 20 years of service and a 50 percent service-connected disability rating or higher. The VFW strongly believes this 50 percent threshold is arbitrary and unjust. Disabled veterans rated below 50 percent still face sacrifices, risks, and challenges, yet they are unfairly excluded from the full benefits they have earned with no definable reasoning. Despite the commitment of past congresses to gradually expand concurrent receipt, twenty years later that promise remains unfulfilled, leaving countless veterans behind and feeling deeply frustrated.

Between 2013 and 2020, over 72,000 veterans who had previously received Voluntary or Involuntary Separation Pay had that pay recuperated, while an additional 2,600 veterans had their Special Separation Benefit recuperated before they could receive any service-connected disability pay. In total, \$1.4 billion in VA disability compensation was withheld from thousands of veterans, with the Defense Finance and Accounting Service withholding at least \$177 million in voluntary separation pay due to their subsequent awarding of VA compensation for service-connected disabilities.

During the 118th Congress, the VFW strongly supported the *Major Richard Star Act* and other legislation that would have provided full concurrent receipt to all deserving veterans. These bills must be passed in the 119th Congress to ensure veterans receive all of the benefits they have rightfully earned. The VFW insists that any laws denying the concurrent receipt of benefits should be resisted, and that disabled veterans should not continue to be punished for their service.

These findings highlight the harsh financial burden placed on veterans who have already sacrificed so much for this country. Congress must act now to correct this injustice and fulfill its promise. Every year of delay inflicts further personal and economic harm on disabled veterans. The cost of full concurrent receipt is far outweighed by the moral obligation to honor their sacrifices. Congress should not continue to use veterans as a cost-saving measure or political tool. It is time to stop balancing the budget to the detriment of those who have already given so much to this country. Congress must take immediate, decisive action to ensure veterans are not left questioning whether their service is truly valued. The VFW calls on the 119th Congress to fix the concurrent receipt inequity for all veterans who have earned their DOD and VA benefits.

Our All-Volunteer Force

The preservation of the all-volunteer force is a top priority for the VFW. The strength of this force relies not just on recruitment, but on retention. Despite some progress, persistent recruiting challenges threaten our military's readiness and ability to meet the demands of a complex, volatile world. As Congress and DOD address recruitment, it is critical to focus on the well-

being of current and transitioning service members. These individuals are essential not only to mission success but also as ambassadors for military service.

The DOD *Office of People Analytics Fall 2023 Propensity Update* shows a decline in youth interest in military service. While altruistic reasons remain a key motivator, recruits are increasingly driven by tangible benefits like pay, health care, and education. The military must offer a compelling value proposition that balances personal and professional needs to compete with other career options. In addition to financial benefits, recruits need assurance that their basic needs will be met and that they will receive support to focus on their mission. We are concerned that insufficient attention to troop well-being will further diminish the attractiveness of military service.

A 2023 Blue Star Families survey revealed that only 32 percent of military families would recommend military service, which is down from 55 percent in 2016. The survey identified challenges such as poor job opportunities for spouses, inadequate health care, and housing issues. Time away from families was a primary concern for active duty and reserve component members.

The 2023 DOD *Propensity Update* found that only 23 percent of youth meet core eligibility requirements for military service, and only 7 percent would qualify for active duty enlisted service. The report also revealed that 71 percent of youth fear injury or death, while 68 percent are discouraged by the prevalence of PTSD and other mental health issues. We commend programs like the Army's Future Soldier Preparatory Course that supports youth who need extra help to meet enlistment standards. We urge Congress to fully fund and monitor such initiatives to ensure their success.

The VFW urges Congress and DOD to address these challenges by improving support for service members and their families, including employment opportunities for spouses, housing, health care, and overall quality of life. Only by making these improvements can we ensure the military remains an attractive, sustainable career for future generations.

Military Readiness

The VFW is encouraged by several provisions that were included in the FY 2025 NDAA aimed at improving the quality of life for service members and their families, which directly contributes to military readiness. The expansion of eligibility for the Basic Needs Allowance and the increase in the income threshold to 200 percent of the federal poverty guidelines are important adjustments that will help more service members meet their basic needs. We also welcome provisions authorizing the Basic Allowance for Housing for junior enlisted members on sea duty, offering vital support to those serving in demanding and often isolated environments.

The VFW supports the inclusion of a provision requiring the evaluation of Basic Allowance for Subsistence rates to ensure they reflect the needs of service members with dependents, particularly in areas with limited access to fresh food or higher living costs. Similarly, evaluating Overseas and CONUS Cost-of-Living Allowances will ensure adjustments based on factors such as dependents, commissary access, and spousal income.

We commend the decision to provide no-cost broadband internet to all unaccompanied housing, and we urge Congress to extend this benefit to service members aboard surface vessels across the fleet. The VFW supports this continued effort and views internet access as part of military readiness. Consistent and reliable internet access is essential for service members to connect with their families, pursue educational opportunities, and manage personal tasks, which helps them stay focused on their mission.

The VFW is concerned about the inconsistency of quality-of-life resources at military installations, especially at remote or austere locations. Service members need outlets to socialize, decompress, and build camaraderie outside of duty hours. These resources are critical to reducing isolation and supporting mental health. We urge Congress to ensure adequate funding is appropriated to support the DOD's Morale, Welfare, and Recreation (MWR) programs.

Additionally, we are alarmed by food insecurity among military families, with an estimated 25 percent of service members affected. The VFW has partnered with Humana to provide over 4.5 million meals through our Uniting to Combat Hunger campaign. We believe Congress should reinstate Basic Allowance for Housing to cover 100 percent of housing costs, remove it from the eligibility formula for the Supplemental Nutrition Assistance Program (SNAP), and ensure it is excluded from calculations for the Basic Needs Allowance.

The VFW has long raised concerns about the quality of military housing. In September 2023, GAO reported troubling conditions in unaccompanied housing (barracks), including issues such as sewage backups, black mold, and broken air conditioning, which disproportionately affect junior enlisted service members. These issues extend beyond barracks to family housing, both stateside and overseas. Such substandard living conditions not only affect the health and well-being of service members and their families but can also impact retention and enlistment. Service members cannot focus on their mission if they or their loved ones are dealing with health problems caused by mold, lack of hot water, or uncomfortable temperatures. This is why the VFW is pleased to see the FY 2025 NDAA direct DOD to explore digitizing maintenance work order requests that will enhance accountability in addressing military housing issues.

Although the provision is a step in the right direction, significant challenges persist. Service members still lack a transparent, centralized third-party option to report poor conditions in both family and unaccompanied housing. Under Section 3016 of Public Law 116-92, part of the FY 2020 NDAA, Congress mandated the creation of a public-facing complaint database for privatized housing. However, this provision does not cover single service members in barracks, even though nearly half of all enlisted personnel are unmarried and face similar housing issues. The VFW urges Congress to amend this provision to include single service members, ensuring all service members have an equal opportunity to voice their concerns.

The VFW is encouraged by DOD's initiatives to improve military quality of life, including efforts to enhance military spouse employment, increase child care access, alleviate the burden of frequent moves, and expand access to high-speed Wi-Fi. These reforms are critical to ensuring the health, well-being, and readiness of the all-volunteer force.

Military Sexual Trauma

As recent historic reforms to the Uniform Code of Military Justice (UCMJ) continue to take shape, and DOD implements recommendations from the *Independent Review Commission (IRC) on Sexual Assault in the Military*, the VFW remains cautiously optimistic that incidents of sexual assault and harassment within the military will decline as accountability increases and trust begins to build. The 2023 DOD report on sexual assault shows a decrease in prevalence across the services, which signals progress. However, much work remains to be done and Congress must continue to play a critical role in exercising oversight to ensure that these reforms are implemented effectively.

Despite these positive trends, sexual harassment and assault remain significant deterrents for young Americans considering military service. Fear of these offenses is one of the top ten reasons why youth choose not to join the military, and their concerns are not unfounded. We were deeply dismayed by the recent exposure of the Operation Fouled Anchor cover-up at the United States Coast Guard Academy, which highlighted systemic issues within our military academies. While alarming, the nature of this cover-up is not unprecedented, and it raises serious concerns about the persistent cultures across the military services that enable sexual harassment and violence to continue.

The VFW is especially disturbed by the prevalence of these behaviors within the Junior Reserve Officers' Training Corps (JROTC) where young cadets are introduced to military life. How can we expect our future military leaders to foster a zero-tolerance culture within their units when during their formative training they are implicitly taught that such behaviors are tolerated or overlooked? Lasting, cultural change cannot occur unless those responsible for implementing UCMJ reforms and related policies are themselves fully committed to eradicating sexual violence and dismantling the cultures that enable its persistence.

The VFW calls on Congress to ensure that each committee of jurisdiction works collaboratively to oversee UCMJ and IRC reforms across all military services and academies. We also urge Congress to ensure that the Coast Guard is held to the same standards as DOD in implementing these reforms. Accountability for individual leaders who fail to protect the service members under their command is essential to affecting meaningful cultural change. Moreover, we encourage stakeholders to engage with impacted service members and veterans, ensuring they receive the support and benefits related to MST to which they are entitled. Persistent oversight and accountability will be the key to creating an environment where every service member is safe, respected, and able to serve without fear of harassment, assault, or retaliation.

Military Suicide

This past fall, DOD released its *Calendar Year 2023 Annual Report on Suicide in the Military*, the first report since the establishment of the Suicide Prevention Response and Independent Review Committee (SPRIRC). The report revealed that the suicide rate among active duty service members continues to trend upward, which is a concerning development that underscores the urgent need for continued action. Every death by suicide is a tragedy, and the VFW remains deeply committed to eliminating suicide among those who serve in our military.

In response to this crisis, the VFW was encouraged by last year's SPRIRC report that included over 100 recommendations aimed at improving suicide prevention efforts. We are also heartened by DOD's subsequent rollout of suicide prevention initiatives that focus on key areas such as enhancing service member well-being, improving access to mental health care, reducing stigma and barriers to care, revising suicide prevention training, and promoting lethal means safety. These efforts represent important steps toward addressing the root causes of suicide within the ranks.

Furthermore, the VFW commends Congress for its continued commitment to supporting DOD's suicide prevention initiatives. As we continue this fight, we urge Congress to remain steadfast in its oversight of the Department's efforts, ensuring that necessary resources and statutory changes are provided to bolster these programs. Most importantly, we call on Congress to ensure that the SPRIRC recommendations are implemented as swiftly and effectively as possible, so that we can honor the memory of those lost to suicide and protect the health and well-being of our service members.

Military Compensation

The VFW was pleased to see the 5.2 percent pay raise for service members included in the FY 2025 NDAA. This increase is critical to ensure that military compensation remains competitive, especially given the recruitment and retention challenges faced by DOD amidst a tight labor market and low unemployment. Competitive pay continues to be one of the top reasons why youth choose military service, and the VFW urges Congress to continue prioritizing annual pay increases that meet or exceed statutory requirements to prevent service members from losing earning potential.

The findings from the Fourteenth Quadrennial Review of Military Compensation (QRMC) further highlight the importance of a competitive compensation system. The QRMC recommends updating military compensation to the 75th percentile of comparable civilian wages, which reflects the unique hardships associated with military life. It also emphasizes the need for improved communication about the full scope of military benefits, such as health care, housing allowances, and retirement programs, which significantly enhance the overall compensation package.

Additionally, the QRMC calls for targeted improvements, such as refining allowances and exploring more retirement savings options for military spouses. The VFW is committed to working with Congress to implement these recommendations, as they will help ensure that our service members and their families are adequately supported while they continue to serve this nation. Competitive pay, along with these comprehensive recommendations, will better position the military to attract and retain the skilled and dedicated individuals required to keep our nation safe.

National Security, Foreign Affairs, and POW/MIA

DPAA Accounting Mission

Our nation's service members and veterans of the United States military have long made a commitment to never leave a fallen comrade behind. It is in this solemn tradition and dedication to duty that the VFW supports the comprehensive accounting for and recovery of all service members who are listed as "Missing in Action." The Defense POW/MIA Accounting Agency (DPAA) leads these honorable efforts to analyze, build case files, disinter, investigate, excavate, identify, and repatriate to their loved ones the remains of service members who have fallen on the field of battle. The mission and impact that DPAA has on the integrity of this nation's promise to never leave a fallen comrade behind cannot be overlooked, ever.

Currently, more than 81,000 DOD personnel are unaccounted-for from WWII to Operation Iraqi Freedom, 75 percent of whom are in the Indo-Pacific area with more than 41,000 presumed lost at sea. For more than thirty years, the VFW has been intimately involved in the fullest possible accounting mission. Since 1991, we have been traveling to sites across the world to assist in this noble endeavor. It has been the mission of DPAA to recover missing personnel who are listed as prisoners of war (POW) or missing in action (MIA) from past wars and conflicts in countries around the world. Within that mission, DPAA coordinates with hundreds of countries and municipalities worldwide in search of missing personnel.

Our nation's ability to bring our fallen heroes home is not guaranteed and is extremely limited by the lack of funding and the dwindling numbers of eyewitnesses who can assist in identifying possible recovery sites, among other factors. That is why the VFW has been partnering with DPAA to work with foreign governments to help American researchers gain access to foreign military archives and past battlefields. Since 1991, (except during the COVID-19 pandemic travel prohibitions), the VFW is the only VSO to return to Southeast Asia annually, and to Russia and China periodically. It is our goal to not rest until we achieve the fullest possible accounting of all missing American military service members from all wars.

The process to bring a missing service member home often takes years and requires predictable funding. Before a recovery team is deployed to a potential site, researchers and historians examine host nation archives, investigate leads in Last Known Alive cases, and obtain oral histories from foreign military and government officials that may have broad information about a particular region or a specific battle. Investigative teams follow up on leads by interviewing potential witnesses, conducting onsite reconnaissance, and surveying terrain for safety and logistical concerns.

Once a site has been located, recovery teams that include civilian anthropologists and military service members are deployed to conduct an excavation. Each mission is unique, but certain processes are common to each recovery. Depending on the location and recovery methods used on site, the standard missions last 35-60 days. Recovery sites can be as small as a few meters for individual burials to areas exceeding the size of a football field for aircraft crashes. Artifacts and remains discovered during excavations are transported to one of DPAA's two forensic laboratories. The main laboratory is located at DPAA's facility on Joint Base Pearl Harbor–

Hickam. The Hawaii laboratory is responsible for forensic analysis of all evidence associated with service members unaccounted-for from conflicts in the Indo-Pacific region. The other laboratory is on Offutt Air Force Base in Nebraska.

DPAA has the largest and most diverse skeletal identification laboratory in the world, and is staffed by over thirty anthropologists, archaeologists, and forensic odontologists. Due to DPAA's efforts, the remains of 172 Americans were accounted for in FY 2024. However, government budgetary uncertainty in the past interrupted DPAA operations, as it did for many DOD organizations.

Congress must continue to support full mission funding and personnel staffing for DPAA, as well as its supporting agencies such as the Armed Forces DNA Identification Laboratory and the military Service Casualty Offices. The fullest possible accounting mission remains a top priority for the VFW, and we will not rest until every possible missing American military service member is brought home.

Foreign Nationals and U.S Allies

For generations, foreign nationals have served alongside U.S. citizens in our military, many of whom later attain permanent residency or citizenship. However, too many of them have been unable to complete the process, leaving them vulnerable to deportation for even minor infractions. The VFW believes that these veterans who risked their lives in service to our country should have their contributions considered when facing legal challenges. Specifically, we urge that veterans in this situation be eligible for Veterans Treatment Courts rather than the standard immigration court system.

While veterans should be held accountable for any crimes, non-violent offenses and misdemeanor charges should not lead to permanent deportation, especially when those veterans have served this nation honorably. They have already sacrificed for our country, and their path to justice should reflect that service. Further, DOD should work with the immigrant service members they recruit to ensure that no one leaves the military without having achieved legal naturalization.

In August 2021, U.S. forces executed a hastily planned evacuation of U.S. government personnel and thousands of Afghan allies at great personal cost. Thirteen service members gave their lives during this operation. Yet, nearly four years later, the 80,000 Afghan allies brought to the United States are still in legal limbo with no clear path to safety or stability.

These individuals risked everything to support U.S. troops in the fight against terrorism, and we owe them more than uncertainty. The VFW urges Congress and the Administration to fulfill our moral obligation by providing a permanent, clear pathway to citizenship for these Afghan personnel. We have a duty to honor their sacrifice by ensuring they receive the stability and security they deserve. These brave men and women earned the right to a future without fear, and it is time we deliver on our promise to them.

Chairmen Moran and Bost, Ranking Members Blumenthal and Takano, thank you for the opportunity to provide our testimony today. As the VFW has done for 125 years, we stand ready to assist service members, veterans, families, and survivors. We are prepared to answer any questions you may have.