

**STATEMENT OF
RONALD BURKE
DEPUTY UNDER SECRETARY FOR POLICY AND OVERSIGHT
VETERANS BENEFITS ADMINISTRATION (VBA)
DEPARTMENT OF VETERANS AFFAIRS (VA)
BEFORE THE
SENATE COMMITTEE ON VETERANS' AFFAIRS**

April 28, 2021

Good Morning, Mr. Chairman, Ranking Member Moran and Members of the Committee. I appreciate the opportunity to appear before you today to discuss pending legislation, including bills pertaining to disability compensation, health care, education, transition assistance and other benefits. Accompanying me today are Beth Murphy, Executive Director for Compensation Service; Dr. Patricia R. Hastings, Chief Consultant for Post Deployment Health Services; and Paul Brubaker, Deputy Chief Information Officer for Account Management, Office of Information Technology

In the opening statement of his confirmation hearing, Secretary McDonough made it clear that VA will provide Veterans with timely world-class health care and ensure Veterans and their families have timely access to their benefits. It is clear by the number of toxic exposure bills before us today that military toxic and environmental exposure is a critical congressional interest item.

Twenty Veterans Service Organizations (VSO) testified last month on their priorities. It is not surprising that most of these organizations list addressing toxic exposure a top priority. Their message was clear, it is time to act now. It is a credit to the Members of this Committee who worked with VSOs to understand their concerns and develop bipartisan solutions. We acknowledge that VA must continuously evaluate how we approach researching and granting claims for disabilities related to toxic and environmental exposures.

From the tens of thousands of Vietnam and Vietnam-era Veterans, Veterans who cleaned up radioactive hazards from our own nuclear test sites and the more than 200,000 Veterans who have signed their names to the Burn Pit Registry and fear their poor health conditions are a direct result of just breathing the air in places like Iraq and Afghanistan to the nearly 15,000 Veterans who served at Karshi-Khanabad (K2) Air Base, VA is committed to action.

Rather than provide remarks on the specific bills pertaining to toxic exposures today, we will lay out the changes we are making within VA to better serve Veterans and their family members, who were exposed to airborne and environmental hazards For the bills not specific to toxic exposures, we provide our positions and/or comments below.

An End-to-End Review

This is an end-to-end review as it involves reviewing all the major touch points within the agency for a Veteran who has experienced toxic exposure, as well as internal agency functions in this area. The review is a review of both claims data/functions and VHA data/information.

For decades, Veterans and their families have sought answers to questions about health issues and potential connections to service-related toxic exposures. Working with partners from the scientific and medical communities, and with the support of Congress, VA has identified linkages and extended benefits to tens of thousands of Veterans. Despite this progress, we have more work to do. Secretary McDonough is committed to taking immediate and deliberate steps to ensure the Department leans forward in its approach to getting answers to key environmental exposure questions. We recognize that to succeed, the new approach will require the collective efforts of VA, our academic partners, other Federal agencies, and Congress. Secretary McDonough outlined a list of priorities that form the foundation for work he has directed the Department to undertake. To ensure in-depth analyses of high priority issues, the Secretary re-established the VA Executive Board (VAEB), consisting of subject matter experts and senior leaders. The VAEB met on March 23, 2021 and received clear guidance to focus on issues related to toxic exposures and providing input to inform solutions.

While the VAEB led review is designed be holistic, it is not necessary to conduct a review to know that there are some things we can and must do differently today. Historically, VA's presumptive decision-making process has been guided by statutory requirements; however, certain provisions of the Agent Orange Act and Persian Gulf War Veterans Act, notably those governing the use of National Academies of Sciences, Engineering and Medicine (NASEM) reports and requiring the Secretary to respond to such reports within 60 days, have expired. With that expiration, we see an opportunity. VA is creating a new, comprehensive, modernized decision-making model for determining presumptions based on environmental exposures. Our model includes leveraging improved science and surveillance, better use of VA benefit claims data and consideration of other factors. We are moving with a sense of urgency and hope to share the proposed model with Congress, VSOs and other key partners for feedback within the next 180 days.

In order to do a better job researching exposure to toxic substances and military environmental hazards, we need more insight into the health issues that Veterans are experiencing. Our research indicates that an overly cumbersome process and an assumption of denial discourages Veterans from filing toxic and environmental -exposure related claims. At the Secretary's direction, we are undertaking efforts to encourage Veterans, who believe their symptoms are related to toxic exposure, to participate submit a claim. Part of that effort will include encouraging Veterans to get a C&P (compensation and pension) exam and submit a claim to VA if there is a concern about exposure. A new DoD and VA effort that will help in the future is the ILER (Individual Longitudinal Exposure Record) that just went active for clinical care and will be available for claims and research.

With one in three Veterans reporting a possible exposure to military environmental hazards and one in four Veterans reporting health concerns due to deployment exposures, VA must take decisive action. While Secretary McDonough's end-to-end review is being completed, VA will take the following additional steps:

1. Expand Training for Health Care Providers;
2. Improve Science, Surveillance, Epidemiology, and Research;
3. Make Better Use of Benefits Data and Consider Other Factors; and
4. Encourage Veterans to File a Claim.

Expand Training for Health Care Providers

VA is one of the largest providers of medical training for most American physicians, nurses and physician assistants.¹ We have first-rate training available for these practitioners in training and will share this information with all VA providers as well as those in community practice.² This will be accomplished through the VA Talent Management System platform for VA personnel training and the VA TrainingFinder Real-Time Affiliate-Integrated Network (TRAIN) platform for non-VA providers with free, accredited, continuing education credits. VA will also promote VA's "Exposure Ed App," available at <https://mobile.va.gov/app/exposure-ed>, which provides quick overviews of exposures for VA and community health care providers, who may not see toxic exposures routinely.

Improve Science and Surveillance

While scientific rationale will remain critical for decision-making regarding key policy decisions related to treatment and provision of benefits for Veterans who experienced toxic exposures VA expects to find some of this rationale through increased ongoing surveillance and well-designed epidemiologic studies for specific cohorts, such as the surveillance designed for the cohort of Veterans who served at K2 Air Base. When the surveillance signal is strong, VA will seek to quickly address the clinical and benefit changes that may be required. While science is the best way to ensure Veterans are cared for properly, VA will not wait for perfect science before deciding. Part of VA's deliberations will include the concepts of the Sir Bradford-Hill criteria, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4589117/> and described as follows:

- a. Strength: A small association does not mean that there is not a causal effect, although the larger the association, the more likely that it is causal.
- b. Consistency (reproducibility): Consistent findings observed by different persons in different places with different samples strengthens the likelihood of an effect.
- c. Specificity: Causation is likely if there is a very specific population at a specific site and disease with no other likely explanation.
- d. Temporality: The effect must occur after the cause.
- e. Biological gradient (dose-response relationships): Greater exposure generally leads to greater incidence of the effect. However, in some cases, the mere presence of the factor can trigger the effect. In other cases, an inverse proportion is observed, and greater exposure leads to lower incidence.
- f. Plausibility: A plausible mechanism between cause and effect is helpful (but Hill noted that knowledge of the mechanism is limited by current knowledge)

¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6366564/>

² <https://www.militarytimes.com/news/2018/12/13/va-hospitals-often-the-best-option-for-medical-care-study-finds/>

- g. Coherence: Coherence between epidemiological and laboratory findings increases the likelihood of an effect.
- h. Experiment: Occasionally it is possible to appeal to experimental evidence.
- i. Analogy: The use of analogies or similarities between the observed association and any other associations.

VA will not only consider NASEM findings through their consensus reports and reviews, but Secretary McDonough has also directed the Department's subject matter experts to review the wider body of literature for a more rapid response to emerging science and to consider evidence covering human, animal, toxicological and mechanistic studies. VA will work more closely with our many partners, some with whom we have longstanding relationships, such as the Department of Defense (DoD), and some with whom we have coincident interests, such as the National Institute for Occupational Safety and Health (NIOSH). Additionally, VA and its partners, established and developing, have decades of experience for many exposures, and we must use this large body of knowledge to help in adjudicating claims and providing health care.

The Veterans Health Administration's Post-Deployment Health Services and Office of Research and Development, recognizing the need for better, faster and more transparent research, began the Military Exposure Research Program (MERP) in October Fiscal Year 2021 to coordinate and accelerate research efforts across VA while ensuring Veteran research protections. A major challenge for military exposures research is the lack of objective, contemporaneous measurement of the exposure profile that Veterans were exposed to during their military service. The MERP will focus on and support research on military exposures that emphasize exposure(s) assessments.

With regard to original research, VA will continue to conduct important research to inform our approach to provide answers now and in the future for Veterans through VA's Office of Research and Development, through the Airborne Hazards and Burn Pits Center of Excellence, and our Post-Deployment Health Services Epidemiology program.

In the future, VA needs more data from DoD field environmental surveys placed into the Individual Longitudinal Exposure Record (ILER). These data will be used to provide better answers for Veterans, Congress and VA. As the technology of individual monitoring improves, ILER will have better information useful to Veterans, providers and claims adjudicators. DoD is a leader in this area, and we will work closely with them.

Better Use of Benefits to Data and Consideration of Other Factors

While VA decision making and treatment approaches are driven by science, we will also seek out and assess other information that may be relevant to more rapidly providing Veterans with health care and benefits, including VBA and Board of Veterans' Appeals (BVA) claims data. The claims process is inherently administrative, but mining VA's disability claims data has the potential to amplify the science and help inform policy more rapidly.

VA's initiation of a more modern and comprehensive decision-making model for making decisions on presumptions associated with environmental exposures seeks to generate additional evidence to accompany the scientific and medical data. The

retrospective review of disability claims data and analyses of deployed Veteran cohorts will allow us to compare health results with other non-deployed or similar Veteran cohorts based on Veterans who claim disabilities. To gather longitudinal data, VA will review Veteran claims cohort data over periods of time, comparing claims immediately following service and those within the first several years after discharge from military service. Preliminary reviews show that there may be valuable trends and patterns from these claims and appeals, which VA could include in the body of evidence used to decide future policy matters relating to exposures.

In addition to epidemiological studies and claims based analyses, VA will consider other important factors such as public interest and consistency with agency mission and values. We believe that this kind of information is pertinent to present a holistic approach to accelerate certain policy decisions regarding the impacts of exposure events.

Encourage Veterans to File a Claim

VA acknowledges that a clearer policy is needed on the concession or presumption of exposure, and efforts are underway to address this issue. While a presumption is not required to grant disability compensation benefits for Veterans whose duties may have exposed them to an environmental hazard, VA recognizes that some Veterans may forego submission of a claim because there may not be a decision on establishing a service-related presumption. VA is aware that open air burn pits were utilized throughout the Southwest Asia theater of operations, and VA will concede exposure to burn pits if a Veteran served in Southwest Asia. In addition, VA does not generally require Veterans to specify the exact cause of their disability when submitting a claim for compensation. VA also recognizes that environmental exposures during deployment may be associated with both immediate and delayed adverse health consequences; therefore, there is no time limit for submitting claims. VA will work to more proactively communicate with Veterans and other stakeholders.

Legislation on Veterans Benefits

S. 89 – Ensuring Survivor Benefits During COVID-19 Act of 2021

This bill would require VA to secure a medical opinion to determine if a service-connected disability was the principal or contributory cause of death in any case in which a Veteran with one or more service-connected disabilities dies; the death certificate identifies Coronavirus Disease 2019 (COVID-19) as the principal or contributory cause of death; the death certificate does not clearly identify any of the service-connected disabilities as the principal or contributory cause of death; and a claim for benefits is filed with respect to the Veteran under chapter 13 of title 38, United States Code.

VA does not support this bill. VA does not believe requiring VA to secure medical opinions in any case where the Veteran with one or more service-connected disabilities dies from COVID-19, and the death certificate does not identify the Veteran's service-connected disabilities as the principal or contributory cause of death is necessary or advisable. VA's duty to assist claimants under current law provides that the Secretary is not required to provide assistance to a claimant if no reasonable possibility exists that such assistance

would aid in substantiating the claim. See 38 U.S.C. § 5103A(a). In some situations where COVID-19 is listed as the sole cause of death, a medical opinion would not aid in substantiating a claim for benefits under chapter 13 of title 38, United States Code. For example, VA would not view a medical opinion as necessary or required if a surviving spouse filed for service-connected death benefits based on a COVID-19-related death and the Veteran, at the time of death, had a single service-connected condition of right ankle sprain at 0% disabling with no indication of a service-connected disability contributing to death. Requiring medical opinions in all cases would unduly delay claims processing and would not represent a fiscally responsible policy.

Moreover, VA is committed to providing timely service without unnecessary burden for survivors. VA's existing guidance in 38 C.F.R § 3.312 provides instructions on processing claims for service-connected death by considering the primary and contributory cause(s) of death along with the Veteran's service-connected condition(s), including scenarios where the Veteran's service-connected condition(s) are not listed on the death certificate. Existing guidance also addresses VA's duty to assist in obtaining evidence in support of a claim for benefits under chapter 13 of title 38, United States Code, including when to request a medical opinion. If the claim cannot be otherwise granted, and there is an indication that at least one of the Veteran's service-connected disabilities may be related to the principal or contributory cause of death, a medical opinion would be requested.

In response to the COVID-19 pandemic, VA issued a specific reminder to claims processors on April 23, 2020, regarding the processing of service-connected death claims. The guidance reinforced that claims processors must review all facts and circumstances surrounding the death of the Veteran to determine if there is a reasonable probability of service-connected death. The guidance explained that the complete clinical picture of COVID-19 is not fully known, and people with serious underlying medical conditions seem to be at higher risk for developing severe COVID-19 illness. The guidance also reinforced VA's duty to assist when service connection for the cause of the Veteran's death cannot be granted based on the evidence of record.

S. 189 – Veterans' Disability Compensation Automatic COLA Act of 2021

The Veterans' Disability Compensation Automatic Cost of Living Adjustment (COLA) Act of 2021 would amend 38 U.S.C. § 5312 to automatically provide for adjustments each year, tied to COLAs for Social Security benefits, in the rates payable for Veterans' disability compensation, additional compensation for dependents, the clothing allowance for certain disabled Veterans and dependency and indemnity compensation (DIC) for surviving spouses and children. The bill would also require VA to publish the resulting increased rates in the Federal Register. This bill, if enacted, would take effect on the first day of the first calendar year that begins after the date of the enactment of the Act. Consequently, the earliest date the bill can have effect is January 1, 2022.

VA supports this bill. Annual COLAs to compensation rates tangibly express the Nation's gratitude and respect for the sacrifices made by service-disabled Veterans and their surviving spouses and children. Those adjustments also ensure that the value of VA benefits keeps pace with increases in consumer prices.

This bill would alleviate the requirement of annual Congressional action authorizing and directing VA to make COLAs. This bill would effectively authorize VA to make COLAs in accordance with past legislatively-authorized practice but without the need for recurring specific annual Congressional action and approval. Consequently, VA's ability to provide timely and necessary service to beneficiaries and the ability to plan and process workloads would be enhanced.

There are no mandatory or discretionary costs associated with this bill.

S. 219 – Aid and Attendance Support Act of 2021

The Aid and Attendance Support Act of 2021 would increase the amounts of certain payments to 125% of the current rate, including for aid and attendance benefits, during the emergency period resulting from the COVID-19 pandemic plus an additional 60 days after the end of the emergency period.

Assuming sufficient appropriations, VA generally supports expanding benefits to Veterans and their dependents; however, VA requests several amendments to strengthen and clarify the bill.

First, VA notes the bill does not include eligibility for survivors' pension under 38 U.S.C. § 1541. These beneficiaries are one of VA's most vulnerable populations, as most of them are dealing with the loss of a spouse, and in most cases, the highest (if not only) income earner. Therefore, VA recommends Congress consider adding the following provision to paragraph (a) in section 2 to assist Survivors Pension recipients: (7) Paragraphs (1) and (2) of subsection (d) of section 1541.

Second, pension rates in 38 U.S.C. § 1521(d) and (f), along with those in 38 U.S.C. § 1541(d), are annualized. As is, the bill would provide the 125% increase for the whole year if the emergency remains in effect the whole year, but if the emergency ends part way through this or next year, there would be a strong textual basis for concluding the original statutory rate applies, and all the increase did for the portion of the year it was in effect was "accelerate" the benefits. VA believes the intent is the monthly payment amount to be a pro-rated portion of the increased annualized rate. Therefore, VA recommends additional language to make this result clear.

Third, there is potential that the period for the aid and attendance temporary increase may overlap with the period for which the COLA may apply. Therefore, we recommend that Congress clarify whether the COLA percentage would apply to the original or temporary rates.

Mandatory costs are associated with S. 219 and are estimated to be \$376.3 million in 2021, \$572.5 million over 5 years and \$572.5 million over 10 years. For purposes of this cost estimate, VA assumes that the emergency period for COVID-19 would end on September 30, 2021. If the emergency period for COVID-19 continues beyond this date, estimated costs for 2022 and beyond would increase accordingly.

S. 444 – Advancing Uniform Transportation Opportunities for Veterans Act

S. 444, the Advancing Uniform Transportation Opportunities for Veterans Act or “AUTO Act,” would amend 38 U.S.C. § 3903 to allow VA to provide or assist in providing an additional vehicle adapted for operation by a disabled individual if it has been at least 10 years since the individual received previous assistance or a vehicle.

VA supports this bill in principle since it expands eligibility for the automobile allowance but recommends some amendments to the bill text for clarity. In addition, VA would require additional resources to fully implement this bill since we would expect more automobile allowance applications to be received for processing should the bill be enacted. Mandatory costs are estimated to be \$0 in 2021, \$375.6 million over five years, and \$566.9 million over ten years.

Currently, the law only allows Veterans to receive an additional (referred to in section 3903(a)(2) as “second”) automobile or conveyance if a vehicle is destroyed as a result of a natural disaster or other disaster, as determined by the Secretary, and the eligible person does not otherwise receive from a property insurer compensation for the loss. Under the draft bill, *all* eligible Veterans, as of October 1, 2021, would be allowed to receive *an additional* automobile or other conveyance if 10 years have elapsed since the date on which the eligible person received the immediately previous such automobile, other conveyance or assistance under chapter 39.

VA notes that the bill’s apparent intent is to permit only a second automobile benefit (or possibly a third in the disaster scenario contemplated under 38 U.S.C. § 3903(a)(2)), and not an every-10-year benefit. This reading is supported by the singular language (“an additional”) proposed by the bill and also by the general provisions of 38 U.S.C. § 3903(a)(1), which the bill would remove if this was intended to be a periodic but otherwise uncapped entitlement. Nonetheless, there is some room for the contrary interpretation, as the bill’s reference to the “immediately previous such automobile” could be interpreted as implying a recurring entitlement. To the extent that the Committee may want to eliminate ambiguity regarding this issue, it could revise the bill’s proposed language in 38 U.S.C. § 3903(a)(3) to state: “if 10 years have elapsed since the date on which the eligible person received the initial automobile, other conveyance, or assistance under this chapter, or any replacement thereof under 38 U.S.C. § 3903(a)(2).”

S. 458 – Veterans Claim Transparency Act of 2021

S. 458 would amend title 38, United States Code, chapter 59, to require the Secretary of Veterans Affairs to provide the representative of record of a claimant for “compensation or benefits” administered by the Secretary an opportunity to review a proposed determination regarding the claim.

Section 2 of the bill would amend title 38, United States Code, by adding a new section 5906 requiring VA, in each claim for “compensation or benefits” under title 38 in which the claimant has designated a representative of record, to provide that representative an opportunity to review a proposed determination before it becomes final. “Representative of record” would include representatives recognized under 38 U.S.C. § 5902 (VSOs) and 38 U.S.C. § 5904 (claims agents and attorneys).

The bill would require VA to submit notification in writing to a representative of record that a proposed determination is ready for review and would provide that the review period begin at the moment the representative receives notification from VA and end on the earlier of (i) the moment that the claimant or the representative of record indicates to VA that the claimant does not dispute the proposed determination or (ii) the moment that is 48 hours after the moment the representative receives such notification from VA.

VA expressed strong opposition to the same bill in a July 16, 2020, legislative hearing before the House Committee on Veterans' Affairs, Subcommittee on Disability Assistance and Memorial Affairs. VA continues to oppose this bill. VBA discontinued this practice because it is no longer appropriate and legally suspect. Moreover, the bill would not codify VBA's prior practice but greatly expand it. What was a quick, informal review by a local VSO down the hall from a VBA regional office would now be codified as an enforceable legal right to a formal review available to every representative across the country.

By providing a 48-hour review period in chapter 59, rather than chapter 11 of title 38, for "each claim for compensation or benefits," the bill is most reasonably read as applying to all VA benefits. This means that time-sensitive determinations regarding burial and health care, for example, would be delayed while VA (i) searches to determine whether there is a representative of record it is required to notify; (ii) waits 48 hours for a review that may not even occur; and (iii) then takes the time to consider any comments received. Thus, the delay would be beyond 48 hours and exceedingly problematic for claimants in time-sensitive contexts. VA has a responsibility to decide claims efficiently and without delay.

As written, the bill implies that the 48-hour review period applies whether or not the representative has access to VBA systems. It should be stressed that practically, the bill cannot serve its purpose without being limited "to representatives with electronic access to VBA systems." Due to the realities of the mail system, it would not be feasible for VA to mail a pre-decisional determination and then receive a representative's response within a 48-hour period.

In addition, on April 19th, 2021, VA launched a pilot called a Claim Accuracy Request (CAR) which allows representatives opportunities to request an expeditious review and determination of a Compensation claim in accordance with the Appeals Modernization Act lanes of decision review. VA reviews decisions in which the representative alleges an obvious error in fact or law and requests reconsideration within 30 calendar days of VA's notification letter. VA expeditiously reviews and resolve these errors. VA recognizes and acknowledges VSOs' desire to return to the 48-hour review process. In response, VBA is piloting this program that will allow for expedited review of decisions specific to obvious errors in fact or law, without reinstating the 48-hour review. VA is meeting with VSOs monthly to discuss results throughout the 120-day pilot and will analyze the complete pilot at the end of FY21. If successful, this option will be available to all claimants and their representatives, ensuring that non-represented claimants will also have access to CAR. Consequently, VA asks Congress to delay consideration of this legislation to allow the agency to execute this pilot and evaluate the results.

Legal Concerns

While the Committee's intent may be to simply codify and reinstate VBA's discontinued legacy practice, that will not be the effect. Adding a practice to the United States Code has independent consequences. The allegation that VBA did not provide the required review period would become grounds for appeal. This bill would create new appellate workload over procedural issues rather than substantive issues, at a time VBA is making progress toward its goal of implementing AMA and delivering a more efficient experience for all Veterans who desire appellate review.

The bill would also codify disparate treatment between represented and unrepresented claimants, as the latter would not receive this opportunity to review a VBA decision and provide comment before it becomes final. A pivotal reason for VBA discontinuing its 48-hour review practice was the strong indication from the U.S. Court of Appeals for Veterans Claims (CAVC) that a 48-hour review policy involving disparate treatment could not withstand legal scrutiny. Specifically, in *Rosinski v. Shulkin*, a majority of judges on the panel expressed a view that the limited scope of the 48-hour review policy was arbitrary and capricious, and the Chief Judge encouraged VBA to "reflect on its policy, consider whether the justifications behind it and enforcement of it are consistent with the current realities of attorney and VSO practice, and make the review process available to all or to none." 29 Vet. App. 183, 194 (2018) (Davis, C.J., concurring); *see also id.* (Greenberg, J., dissenting). The bill would run afoul of the same concerns identified by CAVC. In addition, an extension of the 48-hour review practice to unrepresented claimants would only create further problems, as unrepresented claimants may not have access to an electronic system enabling review within the 48-hour timeframe.

Impact on Claims Processing

VBA has transformed and transitioned its processes into a modern and paperless environment, moving from a paper-based claims environment to an electronic environment that routes claims efficiently through the National Work Queue and assigns them to the Regional Offices with sufficient capacity and expertise. Moreover, VBA now has a robust quality review program that reviews claims throughout the process, greatly obviating the prior need for VSO assistance in that regard. Under the AMA system, claimants can receive reconsideration of VBA benefits decisions within shorter timeframes through the higher-level review and supplemental-claim lanes. See 38 U.S.C. § 5104C.

Since VBA already has a policy in place for reviewing claims through the supplemental claims process under AMA, this bill would seem to duplicate this effort. It must be emphasized that AMA revolutionized and streamlined the process for appealing and correcting initial decisions and imposing an additional layer of review and delay to this new, streamlined system would negatively affect the progress currently being made on timeliness.

Currently, when adjudicators make decisions on claims, these decisions are uploaded in the electronic record and may be subject to a quality review check through VBA's Individual Quality Review (IQR) program that affects an employee's individual performance. A representative's review of a decision before becoming final is similar to VBA's IQR process. Since there would be a degree of duplication, VBA would have to consider changing its quality review program to have claims reviewed for quality assurance

after the 48-hour review was completed, and the decision had been finalized. Updating the quality review process would pose a significant administrative burden on VA.

VBA Program Needs

VBA would require a significant amount of resources and personnel to effectively implement this bill, which would include a new program office to manage and oversee the activities related to accredited representatives.

Information Technology (IT) concerns

It is very important to note that, if enacted, this bill would delay most, if not all, VBA projects aimed at modernizing the delivery of benefits, such as pension automation and the Digital G.I. Bill. Since the bill applies to all proposed determinations for “benefits,” decisions on various types of benefits would be impacted, such as education, vocational rehabilitation, insurance and home loan benefits. As such, systems across all VBA business lines would need to be changed to develop functionalities to allow representatives to review all proposed decisions and develop data collection reporting.

It must be noted that, even without this bill, representatives may still review the claimant’s entire electronic record at any time and specifically, may use filters within the Veterans Benefits Management System to see when a particular claim advances to the “Rating Decision Complete” status. This allows representatives to raise any quality concerns during the claims process. There is no need to codify a hold of all benefits decisions for 48 hours when representatives can be heard at multiple points in the decision-making process.

S. 976 – Caring for Survivors Act of 2021

The Caring for Survivors Act of 2021 would amend 38 U.S.C. § 1311 to increase the amount of monthly DIC paid and expand the eligibility for DIC paid to certain survivors of certain Veterans rated totally disabled at the time of death. Specifically, section 2(a) of the bill would authorize VA to increase the DIC rate within 38 U.S.C. § 1311(a) from \$1,154 to a monthly amount equal to 55% of the rate of monthly compensation in effect under section 1114(j) of title 38, United States Code. VA assumes this language would allow for the use of the current rate of \$3,146.42 and that the rate will increase proportionally with cost of living adjustments to this rate. Section 2(b)(1) would assign an effective date for the amendments made under subsection (a) for months beginning after the date that is six months after the date of the enactment of this act. Section 2(b)(2) would authorize VA, for months beginning after the date that is six months after the date of the enactment of the Act, to pay a dependents and survivors income security benefit under section 38 U.S.C. § 1311 to an individual eligible predicated on the death of a Veteran before January 1, 1993 in a monthly amount that is the greater of the following:

1. The amount determined under subsection (a)(3) of section 1311, as in effect on the day before the date of the enactment of this Act.
2. The amount determined under subsection (a)(1) of section 1311, as amended by subsection (a).

Section 3 of the bill would add an exception to section 1318 paragraph (1) regarding new paragraph (a)(2). New paragraph (a)(2) would state: "In any case in which the Secretary makes a payment under paragraph (1) of this subsection by reason of subsection (b)(1) and the period of continuous rating immediately preceding death is less than 10 years, the amount payable under paragraph (1) of this subsection shall be an amount that bears the same relationship to the amount otherwise payable under such paragraph as the duration of such period bears to 10 years." Section 3 would further amend 38 U.S.C. § 1318(b)(1) by striking "10 or more years" and inserting "5 or more years."

Under the current statutory authorities, DIC is paid to a surviving spouse at the monthly rate of \$1,154. Please note, per P.L. 116-178, the current rate effective December 1, 2020, is \$1,357.56. See 38 U.S.C. § 1311(a)(1). Further, DIC is paid to a surviving spouse and to the children of a deceased Veteran in the same manner as if the Veteran's death were service connected if his or her death was not as the result of his or her own willful misconduct, and he or she was in receipt of or entitled to receive compensation at the time of death for a service-connected disability rated totally disabling if the disability was continuously rated totally disabling for a period of 10 or more years immediately preceding death. See 38 U.S.C. § 1318(a), (b).

Assuming sufficient appropriations, VA supports the intent of section 2 of the bill because 2(a) increases the amount of monthly DIC payable to eligible survivors for a death of a Veteran; however, due to the extensive information system updates required to implement, VA advises that section 2(b)(1) should be amended with an effective date of 1 year after the date of the enactment of the Act. VA also notes it would require additional mandatory funding to administer the increased benefit amounts.

Assuming sufficient appropriations, VA supports section 3, if amended to add an effective date "for months beginning after the date that is 1 year after the date of the enactment of this Act." As written, VA would likely interpret any new benefit eligibility created by this section to be effective based on the date of enactment of the bill, but not authorize retroactive payments. However, it is currently unclear whether the revised requirements for DIC for survivors of certain Veterans rated totally disabled at time of death would apply retroactively or would be effective based on the date of enactment of the bill.

VA notes this section would expand the population of eligible beneficiaries for the DIC benefit under 38 U.S.C. § 1318(b)(1) due to shortening the amount of time the disability was continuously rated totally disabling immediately preceding death by half, from 10 years to 5 years. Therefore, VA would require additional mandatory funding to administer benefits to the expanded beneficiary population.

VA understands the intent of the newly-added paragraph (a)(2) within section 3 stating, "In any case in which the Secretary makes a payment under paragraph (1) of this subsection by reason of subsection (b)(1) and the period of continuous rating immediately preceding death is less than 10 years, the amount payable under paragraph (1) of this subsection shall be an amount that bears the same relationship to the amount otherwise payable under such paragraph as the duration of such period bears to 10 years." However, VA notes that for the additional allowance under 38 U.S.C § 1311(a)(2) to be payable, the surviving spouse must have been married to the Veteran for 8 continuous years prior to the

Veteran's death and the Veteran must have been rated totally disabled during the entire period. The 8-year marriage period conflicts with the intent of subsection (b)(1).

Mandatory costs associated with S. 976 are estimated to be \$0 in 2021, \$8.8 billion over 5 years and \$25.1 billion over 10 years.

S. 1039 – A Bill to Amend Title 38, United States Code, to Improve Compensation for Disabilities Occurring in Persian Gulf War Veterans, and for Other Purposes

S.1039 would amend 38 U.S.C. § 1117 to permanently extend eligibility for compensation for certain qualifying disabilities for Gulf War Veterans by eliminating the manifestation period and 10% degree of disability requirements as well as the Secretary's authority to prescribe the time period following service in the Southwest Asia theater of operations that is appropriate for the presumption of service connection. The bill would require VA to develop a single disability benefits questionnaire (DBQ) to use when a Gulf War Veteran presents with any one symptom associated with Gulf War Illness. The bill would also expand the definition of a "Persian Gulf Veteran" to include not only those who served in the Southwest Asia theater of operations but also Afghanistan, Israel, Egypt, Turkey, Syria or Jordan. The bill would also require training of health care personnel and a report to Congress once a year regarding such training.

VA appreciates the efforts of Congress to streamline disability compensation benefits for Veterans who were deployed to contingency operations in Southwest Asia. However, VA does not support the bill, unless amended, because it would prematurely extend permanent eligibility to certain qualifying Gulf War disabilities listed in 38 U.S.C. § 1117 without any apparent scientific justification. VA is actively studying and establishing a clinical definition for "Gulf War Illness," which will allow VA to evaluate and better monitor disability patterns that may be present in the Gulf War Veteran population. It should also be noted that VA has repeatedly extended the eligibility period for qualifying disabilities in regulation (See 38 C.F.R. § 3.317) and is currently considering rulemaking to effectively extend eligibility for 5 more years while VA continues to evaluate the health of Gulf War Veterans.

VA is also concerned about the expansion of the definition of Persian Gulf War Veterans to include service in Afghanistan, Israel, Egypt, Turkey, Syria or Jordan as these six countries are not considered part of the Southwest Asia theater of operations. While the intent is clear, the justification for adding these locations of service is unclear when the original legislation (Persian Gulf War Veterans' Benefits Act of 1994) was based on disability patterns observed in Veterans who served in the Southwest Asia theater of operations.

Regarding the bill's requirement to develop a single Gulf War DBQ, VA views this provision as somewhat duplicative and unnecessary. When a claim is received for a Gulf War-related condition, the current examination protocol calls for a Gulf War General Medical Examination and if needed, any additional specialty or specialist exams. The Gulf War General Medical Examination acts as a single, all-inclusive DBQ that provides an overall general assessment of the Gulf War Veteran. However, specialty/specialist exams may also be needed to conduct more in-depth assessments and any appropriate tests such as treadmill tests for heart condition, pulmonary function tests for respiratory conditions and

auditory tests from a hearing specialist. These separate clinical assessments are critical in identifying the full extent of the Veteran's disability and the cause of the Veteran's symptoms. In addition, VA is in the process of updating the current Gulf War DBQ to ensure it meets the needs of this group of Veterans.

VA anticipate costs would be associated with this bill; however, VA is unable to provide an estimate at this time.

S. 1096 – A bill to amend Title 38, United States Code, to Expand Eligibility for the Marine Gunnery Sergeant John David Fry Scholarship to Include Spouses and Children of Individuals Who Die From a Service-Connected Disability Within 120 Days of Serving in the Armed Forces, and for Other Purposes

This bill would amend 38 U.S.C. § 3311(b)(8) to expand eligibility for the Marine Gunnery Sergeant John David Fry Scholarship to a child or spouse of an individual who dies "in line of duty" or from a service-connected disability during the 120-day period beginning on the first day of his or her discharge or release from active duty as a member of the Armed Forces or as a member of the Armed Forces on duty other than active duty. Additionally, the individual must have an honorable discharge or service characterized by the Secretary concerned as honorable. This proposed legislation would apply to deaths that occur before, on or after the date of enactment and would apply to a quarter, semester or term beginning on or after August 1, 2023.

While VA supports the intent of the proposed legislation to expand the eligibility of the Marine Gunnery Sergeant John David Fry Scholarship, the Department has several concerns with the draft bill's language. First, currently under 38 U.S.C. § 3311(b)(8), the Fry Scholarship is limited to individuals who have died on or after September 11, 2001. For clarity, VA recommends revising the applicability date provision in section 1(b)(i) of this bill to refer to deaths "on or after September 11, 2001, that occur before, on or after the date of enactment of this Act."

Second, the bill would remove the limitations that the line of duty death must occur "while serving on active duty as a member of the Armed Forces." Without such limitation, the proposed section 3311(b)(8)(B) would not be limited to only deaths occurring while on active duty but would apply to anyone serving in any duty status. If the intent of Congress is to greatly expand the Fry Scholarship to no longer only be limited to deaths related to active duty in the Armed Forces, then VA would greatly appreciate the opportunity to work with Congress to draft language with the appropriate scope to capture the intended population.

VA anticipate costs would be associated with this bill; however, VA is unable to provide an estimate at this time.

S. 1071 – Veterans Application Assistance Inefficiency Decrease Act of 2021

The Veterans Application Assistance Inefficiency Decrease Act of 2021, or the “VA AID Act of 2021,” would require VA to conduct a pilot program that addresses providing claim-enhancement assistance to individuals applying for pension benefits.

VA does not support this bill because VA believes it is duplicative in nature compared to current statutory authority. VA strives to ensure that “claimants for [VA] benefits have responsible, qualified representation in the preparation, presentation and prosecution of claims for Veterans’ benefits.” See 38 C.F.R. § 14.626. Therefore, an individual must be accredited by VA as an agent, attorney or representative of a VA-recognized VSO to assist in the preparation, presentation and prosecution of a claim for VA benefits. See 38 U.S.C. §§ 5901-5902, 5904. Additionally, statutory authority provides a one-time only exception to this general rule, which authorizes an individual to provide assistance on a particular claim for benefits. See 38 U.S.C. § 5903. Moreover, VA has already created and implemented a fully-developed application ready to be submitted to the Pension Management Centers to utilize in expediting pension claims ([VA Form 21P-527EZ](#) and [VA Form 21P-534EZ](#)). Therefore, VA does not support this bill because current statutory authority already allows and provides for such claim-enhancement assistance.

Furthermore, it is unclear how an entity under the pilot program contemplated in this proposed bill would improve the efficiency of the claim submission process in comparison to similar functions currently being performed by claimant representatives. Pension eligibility is dependent on numerous requirements, and information is utilized from several different sources; many of which the staff of an entity within the pilot program would not be permitted to view when proactively engaging claimants with claim-enhancement services prior to submission of their claims (e.g. income, asset and service information received via computer and/or matching agreements with other Federal agencies). *Compare* 26 U.S.C. § 6103(l)(19)-(20) (authorizing disclosure of tax return information to contractors of certain agencies) *with* 26 U.S.C. § 6103(l)(7)(D)(viii) (containing no similar authority for tax return information disclosed to VA). Any submission VA receives from the pilot program would go through the same adjudication procedures and processes as other claims; therefore, a submission under this pilot program would not ensure a faster processing time by VA.

S. 1095 – A bill to Amend Title 38, United States Code, to Provide for the Disapproval by the Secretary of Veterans Affairs of Courses of Education Offered by Public Institutions of Higher Learning that Do Not Charge Veterans the In-State Tuition Rate for Purposes of the Survivors’ and Dependents’ Educational Assistance Program, and for Other Purposes

This bill would amend section 3679(c) of title 38, United States Code, to add chapter 35 beneficiaries to the definition of a “covered individual” by which VA must disapprove a course of education offered by a public institution of higher learning if the institution does not charge the in-state tuition and fees for covered individuals. Currently, covered individuals include those beneficiaries under chapters 30, 31 and 33 of title 38, United States Code. The amendments would take effect on the date of the enactment and would apply with respect to an academic period that begins on or after August 1, 2022.

VA supports the proposed legislation as it would allow chapter 35 beneficiaries to receive the same protections under the law as beneficiaries who are in receipt of benefits under other VA educational programs. No costs or savings are associated with this bill.

S. 1093 – A bill to Amend Title 38, United States Code, to Establish in the Department the Veterans Economic Opportunity and Transition Administration, and for Other Purposes

This unnumbered bill would amend title 38, United States Code, to establish the VA Veterans Economic Opportunity and Transition Administration (VEOTA). Section 1 of the bill would establish the organization of VEOTA; outline its functions and the programs it would administer; set annual reporting requirements to Congress, provide appropriations for VEOTA; and maintain the labor rights of employees transferred to VEOTA. Section 2 would establish the position of Under Secretary for VEOTA (appointed by the President and directly responsible to the Secretary); outline the Under Secretary's responsibilities; and establish the procedures under which the position would be filled. Section 3 would require the Secretary of Veterans Affairs to submit a report to the Committees on Veterans' Affairs of the House of Representatives and Senate on the progress toward establishing VEOTA within 180 days of enactment and prevent the transfer of functions to VEOTA until the Committees on Veterans' Affairs of the House of Representatives and Senate receive certification that the transition of services to VEOTA will not negatively affect the services provided and that services are ready to be transferred. Further, section 3 would create additional reporting requirements for the Secretary in the event the Committees on Veterans' Affairs of the House of Representatives and Senate do not receive the Secretary's certification by September 1, 2022.

While VA appreciates the Committee's focus on improving services and resources offered by these programs, we do not support this bill. The current VBA structure appropriately reflects the Under Secretary for Benefits' overall responsibility for Veterans benefits programs that include programs related to economic opportunity and transition, as well as compensation, pension, survivors' benefits and insurance.

The Office of Small and Disadvantaged Business Utilization (OSDBU) currently reports directly to the Secretary or Deputy Secretary. OSDBU's mission is to advocate for the maximum practicable participation of small, small-disadvantaged, Veteran-owned, women-owned and empowerment-zone businesses in contracts awarded by VA and in subcontracts awarded by VA's prime contractors. This bill would move only OSDBU's Center for Verification and Evaluation (CVE) program to the new Administration. CVE administers the verification program required for Service-Disabled Veteran-Owned Small Businesses and Veteran-Owned Small Businesses and maintains the vendor information page database. Moving this major program from OSDBU to a new administration might result in a redundancy of efforts. Additionally, the verification program currently administered by OSDBU for Service-Disabled Veteran-Owned Small Businesses and Veteran-Owned Small Businesses is to be transferred to the Small Business Administration by January 1, 2023, under the Fiscal Year (FY) 2021 National Defense Authorization Act.

The VBA portfolio of benefits is thriving. The Education, Loan Guaranty, Veteran Readiness and Employment (VR&E) and Transition and Economic Development programs are part of an integrated suite of interdependent services and benefits that also includes compensation, pension and insurance programs. Together, they form a suite of benefit-related resources on which Veterans can rely.

In FY 2020, education claims timeliness improved from 24.7 days to 15.4 days for original claims, and supplemental claims timeliness improved from 8.6 days to 6.9 days. During this time, over 3.5 million education claims were processed, paying nearly \$12 billion in education benefits for 875,000 Veterans and their beneficiaries.

Loan Guaranty set new records during FY 2020, guaranteeing an all-time program high of 1.246 million loans worth \$375 billion and assisting a record 119,000 Veterans to avoid foreclosure through various loss mitigation strategies. VR&E helps Service members and Veterans with service-connected disabilities and a barrier to employment prepare for, find and maintain suitable jobs through counseling and case management. There were over 123,000 VR&E participants in FY 2020, with more than 33,000 new plans developed to assist Veterans, and over 16,000 Veterans achieving positive outcomes. Further, VR&E's 20-year longitudinal study indicates nearly 90% of Veterans who achieved rehabilitation from an employment plan were employed in the past year.

For those Service members transitioning out of the military, VBA's Office of Transition and Economic Development offered additional focus on helping them move more effectively into civilian life, both socially and economically. VA's commitment to support Veterans transition from the military was bolstered by the establishment of the VA Solid Start (VASS) program in December 2019, which provides early and consistent contact with newly-separated Veterans. The goal of the VASS program is to provide seamless access to information about mental health care and suicide prevention resources, including care for substance use disorders. VASS representatives proactively call newly-separated Veterans over their critical first year (three key stages from 0–90, 90–180 and 180–365 days post transition) to discuss their transition experiences, available benefits and any challenges they may be facing. VASS recently made successful contact with the 100,000th newly-separated Veteran.

VA continues to partner with DoD and the Department of Labor to ensure separating Service members are focused on their transition as early as possible to begin civilian life on the right foot. VA recently launched a pilot program to conduct virtual transition briefings and implemented a new Women's Health Transition Training program focused on providing women Service members with actionable information on their unique health needs transitioning into Veteran status.

In order to support the adjudication and delivery of Veteran and Service member earned benefits, VBA also has many enabling staff offices, such as finance, human resources (HR), facilities, production optimization, outreach and engagement, field operations, business process integration, strategic program management, performance analyses, communications and executive review. These enabling organizations would have to be recreated within the new Administration in order to effectively operate, requiring additional executive leadership and replicated structures. The addition of another Administration would increase leadership oversight for programs that are currently in place, contrary to the modernization efforts that are underway.

General Operating Expense (GOE) costs would result from enactment of this bill with an additional 812 full-time employees (FTE) needed for management direction and support for enabling staff offices (i.e., aforementioned finance, HR, facilities, outreach and engagement, field operations, business process integration, strategic program

management, performance analyses, communications and executive review). VA estimates GOE costs of approximately \$241 million in FY 2023 and \$2.4 billion over 10 years, which includes payroll and non-pay costs (travel, contract support, centralized payments, etc.) for the additional 812 FTEs.

No mandatory costs would be associated with the proposed legislation. While there is no benefit cost associated with the bill, the appropriation language for the Readjustment Benefits account and the Credit Reform account would have to change to reflect the title of the new Administration.

S. 731 – Department of Veterans Affairs Information Technology Reform Act of 2021

The Department of Veterans Affairs Information Technology Reform Act of 2021 would add a new subchapter to chapter 81 of title 38, United States Code, that would govern information technology (IT) projects and activities.

VA does not support this bill in its current form. VA has several concerns with the language of the bill, most notably within proposed section 8175, “Information technology matters to be included in budget justification materials for the Department” and the definition of a major information technology project. VA suggests a simpler method for reporting on major programs would be to mandate their inclusion in the Federal IT Dashboard and the Federal IT Acquisition Reform Act dashboard in order to leverage pre-existing resources and already established reporting requirements. VA also suggests ensuring that the terminology is in alignment with Office of Management and Budget Circular A-11 “Preparation, Submission and Execution of the Budget.” Further, VA believes that planning for IT spending 10 years out would be speculation at best, given the rate of change of technology and recommends a 3-year planning cycle instead to produce more reliable information.

In section 8171, the definitions of what constitutes an IT project in section 8171(3) and a major IT project in section 8171(5) are vague, in that there is no standardization around the word “system.” Also, they do not reflect the reality of IT investment. Furthermore, the bill is unclear on what constitutes “project costs” and “project acquisition and implementation costs.” VA recommends that additional definitions be added to define the scope of costs (e.g. contract cost, direct or indirect costs, fiscal year or life cycle).

Furthermore, the cost thresholds defined in section 8171(5)(B)(ii) and (iii) are too low given modern-day IT costs, the scale of VA systems, and the supported user base. VA recommends increasing the thresholds to \$500 million for the duration of the project/program under section 8171(5)(B)(ii) and \$1.5 billion for total lifecycle costs under section 8171(5)(B)(iii). This would ensure the definition focuses on 'Major IT Projects' and is not too broad, potentially covering 90% of VA IT investments.

In section 8172(d)(1)(A), regarding the proposed mandate to have a certified project manager assigned to each IT project, VA notes that Federal Acquisition Certification for Program and Project Managers (FAC-P/PM) Level III certification is not in section 1701a, which is cited by the bill for project manager certification. VA recommends an adjustment to the language to include FAC-P/PM as a valid project manager certification.

Section 8173 does not specify if the mandated Chief Information Officer (CIO) approval of IT projects at the Financial Services Center (FSC) will be applied retroactively to projects already in progress. This could become an issue if VA is to keep track of life cycle costs retroactively for IT systems, as discussed elsewhere in the bill.

In section 8175, VA recommends adding the following language to solidify the CIO's role in the establishment of the VA Office of Information and Technology (OIT) budget requirements and approval through a transparent governance framework:

“VA Chief Information Officer Role on IT Governance Boards. The Secretary shall ensure that the CIO shall be a member of any investment or related board of the agency with purview over IT, or any board responsible for setting agency-wide IT standards. The Secretary shall also direct the CIO to chair any such board.”

Subsections (b) and (c) of section 8175 ask for information that either does not exist or would not be useful. In section 8175(b), the proposed requirement for a prioritized list of unfunded projects is not possible because OIT accounts for all known projects in its budget requests. VA is working on an enterprise solution to prioritize all IT projects. Unfunded requirements arise when new priorities are sent to VA that were not known at the time of the budget request. VA recommends budget impact assessments be made before new requirements are sent to VA without supporting funding.

In section 8175(c), the proposed requirement to provide projected funding needs for 10 years would not produce useful data. With the rate of change of technology, a 10-year cycle would result in speculation, at best, given the unpredictable pace of change regarding technology. This would force VA to do little more than guess what would occur at a 10-year boundary. A 3-year planning cycle would produce the least amount of speculation and the most reliable planning estimates. In section 8175(d)(B)(v), the bill does not specify if there would be independent validation that a legacy system has been decommissioned and the data removed or sanitized.

S. 894 – Hire Veteran Health Heroes Act of 2021

This bill would require the identification and referral of active duty Service members with a health occupation to VA for potential employment, if interested, within 1 year of transitioning out of the military.

VA does not support this bill. It is redundant to section 207 of P.L. 115-46, *the VA Choice and Quality Employment Act of 2017*, which states that VA “shall establish a program to encourage an individual who serves in the Armed Forces with a military occupational specialty relating to the provision of health care to seek employment with the Veterans Health Administration when the individual has been discharged or released from service in the Armed Forces or is contemplating separating from such service.” In compliance with P.L. 115-46, VA has already established an initiative to target transitioning Service members for mission critical and difficult-to-fill positions by utilizing data contained in the VA/DoD Identity Repository (VADIR) database. VADIR data contain a listing of active duty Service members who have entered the process to transition out of the military. VA

uses the data to send targeted recruitment marketing by military occupation specialty (MOS) to transitioning Service members. This targeted recruitment marketing directs transitioning Service members to the VA Careers website with open job announcements and provides an option to connect directly to a recruiter for their specialty of interest. In addition to the requirements in this bill, which targets those appointed under 38 U.S.C. § 7401, VA also targets transitioning Service members with a military occupational specialty (MOS) that aligns to non-clinical mission critical occupations such as logisticians, police and security specialists and HR professionals.

S. 1031 – A Bill to Require the Comptroller General of the United States to Conduct a Study on Disparities Associated with Race and Ethnicity with Respect to Certain Benefits Administered by the Secretary of Veterans Affairs, and for Other Purposes

S. 1031 would require the Comptroller General of the United States to conduct a study to assess whether there are disparities associated with race and ethnicity with respect to compensation benefits, disability ratings and the rejection of fully developed claims. The Comptroller General would additionally be required to provide a report to Congress on the results of the study. VA defers to the Government Accountability Office regarding S. 1031.

Conclusion

Mr. Chairman, this concludes my testimony. My colleagues and I are prepared to respond to any questions you or other Members of the Committee may have. And, we look forward to continued work with the Committee to address the needs of veterans exposed to toxic and environmental hazards.