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## COMMENTS OF THE WOUNDED WARRIOR PROJECT (WWP)

## TO THE SENATE COMMITTEE ON VETERANS AFFAIRS

**REGARDING HEALTH CARE LEGISLATION** 

## CURRENTLY BEFORE THE COMMITTEE

Submitted by:

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Chairman Craig, Ranking Member Akaka, and members of the committee, I thank you for convening this hearing and for allowing me the opportunity to comment on various pieces of legislation pending before the committee. I would like to limit my remarks to Senate Bill 2736 (S2736) which would create five Department of Veterans Affairs Amputee and Prosthetic Rehabilitation Centers. Wounded Warrior Project recently proposed the creation of these centers and we strongly support the bill. We commit to you our assistance to seeing this bill through to passage and enactment.

The Wounded Warrior Project (WWP) is a non-profit organization aimed at assisting the men and women of the United States armed forces who have been severely injured during the war on terrorism in Iraq, Afghanistan and other hot spots around the world. Beginning at the bedside of the severely wounded, WWP provides programs and services designated to ease the burdens of these heroes and their families, aid in the recovery process and smooth the transition back to civilian life. We strive to fill the vital need for a coordinated, united effort to enable wounded veterans to aid and assist each other and to readjust to civilian life.

In assisting these wounded warriors as they reintegrate back to civilian life we have the opportunity to observe various systems in place and to identify where these systems may need improvement to meet the growing patient needs that have arisen as a result of the ongoing war on terror. One program in need of modernization and restructuring is the system through which the Department of Veterans Affairs (VA) provides all veterans who have lost limbs, including newly injured service members from the ongoing military conflicts, with the necessary long term physical and occupational therapy as well as their prosthetic appliances. These appliances include all of the prosthetic limbs, wheelchairs, and adaptive sports equipment these injured heroes rely on to help put their broken lives and bodies back together.

As a result of the current Global War on Terror the VA Healthcare system finds itself, for the first time in many years, inundated with young service members who have lost limbs in the war and who are looking to the VA for their long-term health care and prosthetic and assistive device needs. This new amputee population is made up of young men and women who, just months ago,

were in peak physical condition on the battlefields of war prior to the traumatic event that has taken their limbs. Other than their amputations, many are still in, or are close to, that prime physical conditioning and they are now looking to the VA to maintain that lifestyle as they move forward. Rightfully, many still view themselves as warriors or athletes and they are more determined than ever to live active and productive lives that include a myriad of recreational activities such as skiing, kayaking, hunting, etc. Unfortunately, unless the VA changes the way it offers the full range of prosthetic devices and rehabilitation services, it is simply not going to be able to provide the level of care that these soldiers are in need of.

I would like to tell you about the experiences of wounded warrior Heath Calhoun in accessing prosthetic services and equipment from his local VA Medical Center as an example of the struggle that severely injured service members are facing as they transition out of the Department of Defense medical system and into the VA health care system. On November 7, 2003, Heath, a Staff Sergeant in the United States Army, lost both of his legs in Iraq when his convoy was hit by a rocket propelled grenade. This past summer Heath rode a hand-cycle over 4,200 miles as part of a cross country bike riding program called Soldier Ride which raises public awareness and support for severely wounded service members. Upon completion of the ride Heath's hand-cycle was in need of repairs so, in late December 2005, he took his bike to the VA Medical Center in Salem, VA. Heath did not receive his bike back from the VA until two weeks ago, meaning that he was unable to ride for 5 months.

Heath is also an active skier. In early December of 2005, Heath attempted to procure a ?sit -ski? through the Salem VAMC so that he could participate in several skiing events that run between December and April which is prime ski season. Upon reaching out to the VA for this equipment, Heath was told that the first appointment he could schedule was not until February 1st, 2006. Additionally, he was informed that upon his appointment, should the Doctor approve his request for this equipment, it would then take an additional 10 days for full VA approval to be obtained before the purchase could be made. Heath was then told it would take an additional 4-6 weeks from that point until the equipment would be provided, in essence killing any chance he would be able to participate in any of that season's ski events.

When asked about his struggles with his local VA, Heath said, ?As an amputee I can't just take off jogging down the street to keep in shape. I get my exercise by skiing and cycling. By making it hard to get my equipment and exercise it was like my doctor was taking away my gym pass for six months. These people are supposed to encourage health and fitness, not stymie it.?

Fortunately for Heath, WWP was able to put him in contact with a high ranking VA prosthetic specialist who assisted him in obtaining the equipment in just five weeks. Heath was then able to ski in several events in February, March and April. Not all wounded service members will be that fortunate and we know for a fact that Heath is not the only one of our constituents who has found himself frustrated as a result of seeking VA prosthetic and rehabilitation services. VA must reconfigure its prosthetic system in order to meet the needs and expectations of Heath Calhoun and his fellow amputees or it runs the risk of alienating this population and having them seek all of their care from non-VA providers.

The biggest problem facing the VA's prosthetics program is that there is no system wide consistency and coordination from medical center to medical center. . Some centers are well

equipped to evaluate the needs of the individual service member with fully-functioning prosthetic laboratories, a full range of physical and occupational therapies, and a well-versed prosthetic representative or prosthetist. Others simply are not able to evaluate or provide the prosthetic needs of the newly injured service member. Therefore, a wounded service member's ultimate success hinges upon their proximity to a location with a strong prosthetic program and a knowledgeable prosthetic representative.

The creation of Amputee and Prosthetic Rehabilitation Centers, as proposed in S2736, would rectify many of these issues. While these Centers would in no way replace the current prosthetic system at each medical center, they would be responsible for the system-wide coordination of the physical and occupational therapy and prosthetic care provided to veterans with amputations and would ensure the quality of care regardless of where the patient was physically located. They would be the central location for the development and implementation of standardized referral protocols for service members in need of higher levels of physical or occupational therapy as well as higher level prosthetic needs. They would be responsible for the standards of education and training of the prosthetic representatives and prosthetists at all of the VA Medical Centers around the country and would ensure they were able to easily refer patients to the Amputee Centers whenever appropriate. It is also our hope that much of the amputee or prosthetic related research and development projects will be facilitated at these Centers to ensure the projects are consistent with the needs and issues of the related patient population.

With respect to infrastructure and construction we believe these new centers can be created using existing VA infrastructure with the realignment of certain facilities. Startup funding would be utilized for minor construction projects, establishment of Gait Labs, new equipment, recruitment, new salary dollars, continuing education, and travel dollars for staff and potential patients.

Finally, while Wounded Warrior Project is seeking these new centers on behalf of the new generation of injured soldiers it should be noted that creating these centers will greatly assist the entire population of veterans with amputations, including those injured in previous conflicts or later in life. All veterans in need of prosthetic and amputee rehabilitation, regardless of age, will benefit as a result of this legislation. Again, we thank Chairman Craig and Ranking Member Akaka for their sponsorship of this bill and we pledge to work with you on seeing it through to enactment.