

Mr. Neil Appleby National President Blinded Veterans Association

Summary of Statement,  
Neil Appleby  
National President  
Blinded Veterans Association

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Priority Concerns:

? The waiting list of 2,500 blinded veterans awaiting entrance in to any one of 10 VA Blind Rehabilitation Centers has been reduced to 1,549 but more work needs to be done.

? Establishment of a uniform standard of care for blind veterans that takes into account the need for a continuum of care along an entire spectrum of visual impairment problems and needs.

? Keeping open all Veterans Integrated Service Networks (VISNs) where Blind Rehabilitation Centers (BRC) are located.

? VA should develop new opportunities to provide blind rehabilitation in outpatient settings close to veterans' homes.

? The association supports the concept of making health care from a discretionary budget item to a mandatory funding function of the budget.

Healthcare:

? Congress must provide the means to preserve the integrity of the of the Blind Rehabilitation Centers and the outpatient and local services must be provided.

? Need for a more aggressive policy with the Visual Impairment Services Teams (VIST) to identify blinded veterans and this is accomplished through the implementation of a continuum of vision rehabilitation services.

? Support of local Computer Access Training (CAT) as opposed to centering the training at the main Blind Rehabilitation Centers (BRC).

? Support for more Blind Rehabilitation Outpatient Specialists (BROS).

? Further support and expansion of the Visual Impairment Services Outpatient Rehabilitation (VISOR) which combines features of a residential program with those of outpatient service delivery.

? Strongly support the expansion of the Visual Impairment Centers To Optimize Remaining Sight (VICTORS). It is a program developed by the VA Optometry Service to provide special

low-vision services to veterans who while not legally blind nevertheless suffer from severe visual impairments.

? BVA expressed concern over abuses with the Veterans Equitable Resource Allocation (VERA) model as they believe it is used to justify in the name of savings the taking away from the blinded veteran comprehensive residential blind rehabilitation at a BRC.

? BVA desires a follow-up hearing to a July oversight hearing on a GAO report addressing the provision and evaluation of VA's Blind Rehabilitation Services.

#### Miscellaneous:

? BVA disagrees with the President's Budget for FY 2006 saying that it exemplifies the need for mandatory funding of health care and endorses the Independent Budget, especially its call for a \$3.5 increase in spending.

? The association has concerns with the Prosthetic Clinical Management Program. One concern is that it disagrees with the philosophy that one size fits all as veterans should be treated as individuals. The second concern has to deal with reorganization of the office with the logistics office and the possible diversion of precious funding under such a plan. The third concern is over the shortage of trained personnel due to retirements.

? Require the National Institutes of Health to pay VA for the indirect cost of NIH-funded research grants. Also, increase funding for Rehabilitation Research and Development Service.