

Chairman Daniel K. Akaka

Aloha and welcome to today's hearing, the second in a series of oversight hearings dealing with the issue of veterans' disability compensation. This morning, we will be focusing on matters dealing with the rehabilitation of disabled veterans, including specifically VA's vocational rehabilitation and employment program – V. R. and E.

The mission of the V. R. and E. is defined in chapter 31 of title 38 quite clearly. It is to provide the services and assistance necessary to enable veterans with service-connected disabilities to achieve maximum independence in daily living and, to the maximum extent feasible, become employable and obtain and maintain suitable employment. The program addresses the unique and specific needs of veterans with service-connected disabilities in order to help them transition to civilian life, overcome the effects of disabilities, become employable, obtain and maintain suitable employment, and maximize independence in daily living. The need for V. R. and E. services is well documented by continuing increases in the number of applications for assistance and the number of individuals approved for participation. As more Operations Iraqi Freedom and Enduring Freedom veterans return from combat with serious and debilitating conditions -- such as traumatic brain injuries and PTSD -- the demand for services will continue to grow.

It cannot be overstated. V. R. and E. is essentially charged with providing the most critical of services to our highest category of veterans – those with service-connected disabilities. It should rank among the highest priorities of the Department and be a touchstone of excellence within the structure of benefits and services administered by the Department. Unfortunately, that is not always the case.

The role of vocational rehabilitation in the 21st Century is an important part of what we will be reviewing. The current chapter 31 program had its original roots in the War Risk Insurance Act of 1914. When the concept of vocational rehabilitation services for those injured in battle began and through the 1960s, the dominant notion was that vocational rehabilitation was designed to help an individual regain the ability to return to work in a shop, factory, farm or other manual labor field. This may have been a valid perception at the time, but in the information age and with all the positive changes realized through the Americans with Disabilities Act and other progressive laws, veterans with very serious disabilities are able to reintegrate back into a vastly different workforce with increased levels of productivity. This new reality must be reflected in VA's program of rehabilitation.

This morning, we start to explore the role of the V. R. and E. program in the overall rehabilitation and reintegration of seriously disabled veterans. We must begin to examine the relationship between disability compensation and vocational rehabilitation. To the extent that the current disability schedule is based on an average loss of earnings capacity, a question arises as to whether an individual who completes a program of vocational rehabilitation has had the capacity at least partially restored and whether therefore the level of compensation should be re-evaluated. This leads directly to the need to look carefully at the distinction between compensation for lost earnings and compensation for quality of life.

There have been a number of important reviews completed on this program. In 2004, a VA Task Force conducted a comprehensive study of the V. R. and E. program and issued a report with more than 100 recommendations. Chief among those were that limited data and analysis hindered effective management of the program and that there was need for a more aggressive approach to serving veterans with serious employment handicaps. The Task Force recommended placing a priority on services to veterans who have the most serious disabilities that impact quality of life and employment. It also recommended that the system eliminate the need for service connection as a prerequisite for receiving services so as to allow as many disabled veterans as possible to receive services, especially transitioning servicemembers who are found “unfit for duty.”

Both the Dole-Shalala Commission and the Veterans’ Disability Benefits Commission looked at the V. R. and E. program and made recommendations echoing those of the Task Force – particularly for increased staffing and better data analysis. The Dole-Shalala Commission recommended that education, training and work-related benefits should be initiated early in the rehabilitation process. In this regard, I intend to explore the role of the V. R. and E. program in the overall rehabilitation and reintegration of seriously disabled veterans. We need to understand how the medical care professionals and those in the vocational rehabilitation program interact with each other and how a program of vocational rehabilitation is part of the larger rehabilitation process. In addition, I am interested in learning a great deal more about the services offered to those enrolled in a program of Independent Living Services and the coordination of those services with medical care professionals.

The Veterans’ Disability Benefits Commission, based on the Task Force’s report and finding that “V. R. and E. should provide more complete vocational assessments to assist in disability and vocational decisions ... [and] specifically, perform a functional capacity evaluation that would identify what work a veteran could do in the paid economy despite his or her disabilities,” agreed with a 2005 G.A.O review that V. R. and E. should screen veterans who file for compensation based on individual unemployability.

A good veterans’ disability benefits package does not just compensate veterans for what they have lost. It also helps them rehabilitate and reintegrate themselves, focusing on their strengths, and mindful of their wounds. This is what we must deliver.