

AMVETS - 2014 Legislative Priorities

Federal Government Reform

- VA (including extending advanced appropriations to the remaining discretionary & mandatory programs)
- DoD
- National Debt & Spending

Veteran Unemployment

- Veteran Anti-Discrimination (HR 2654/S 1281)

VA/DoD Health Care & Mental Health

- Traumatic Brain Injury (TBI) & Post-Traumatic Stress (PTS) – Recognition & Treatment
- Toxic Wounds – Recognition & Treatment

Veterans Benefits

- Protect Earned Retirement and Health Care Benefits
- VA Claims & Appeals Backlog

Women Veterans & Service Members

- Military Sexual Trauma (MST) Prevention and Treatment
- Women in Combat Implementation

National Guard & Reserve Service Members

- On-going Transition Between State and Federal Service
- Veteran Status

Homeless & Rural Veterans

- Full Continuum of Care for Homeless Veterans (employment training, housing, legal aid)
- Access to Physical and Mental Health Care and other benefits

POW/MIA Recovery/Identification & Cemetery Affairs

- Continuing Over Site of DPMO & Mortuary Affairs Operations
- Increase Veterans Burial Benefits

Veterans Treatment Courts

- Increase Number of and Access to Veterans Treatment Courts Nationally
- Enhance Resources to Address Mental Health and Substance Abuse Issues

Honor and Remembrance

- Establish the National Desert Storm War Memorial in Washington, D.C.

Mr. Chairman and distinguished committee members, on behalf of the quarter of a million AMVETS (American Veterans) members, we appreciate this opportunity to share our legislative concerns and comment on issues of importance to all American veterans.

AMVETS, a leader since 1944 in preserving the freedoms secured by America's Armed Forces, has been proudly providing support for veterans, active duty and reserve component service members, their families and survivors, for more than half a century. Originally founded by World War II veterans, AMVETS, the most inclusive Veteran Service Organization in the country, includes among its members individuals who have honorably served in the U.S. Armed Forces from every era; every branch of service; and every rank.

Guided by our core principles – Veterans, Family, Patriots and Volunteers, AMVETS seeks to enhance and defend the earned benefits of all American men and women, who are serving or have served honorably and selflessly in our Armed Forces, through leadership, advocacy and service. As a leading advocate for veteran's rights and benefits, as well as one of the four authors of the *Independent Budget*, AMVETS serves as one of the preeminent voices of American Veterans on Capitol Hill.

As we near the end of the longest, continuous military engagement in the history of this nation, come to grips with massive fiscal and economic uncertainty, and as the VA continues to face growing demands, it is more important than ever that we recognize and honor the steadfast dedication of our men and women in uniform. It is the sacred obligation of this body, on behalf of a grateful nation, to **ensure** that the promises made to those who have paid for the freedoms we enjoy every day, are kept.

This extended period of war will leave behind a legacy of unmatched damage to the physical and mental well-being of all those who have served. It is both your responsibility and ours to ensure that they receive any and all appropriate healthcare and other benefits in a timely, competent, compassionate and efficient manner.

With this philosophy underpinning all of our legislative activities and programs, the following are our legislative priorities for 2014:

- **Federal Government Reform:**
 1. VA Accountability (including extending advanced appropriations to the remaining discretionary & mandatory accounts) – AMVETS fully supports the following legislation:
 - **HR 4031 & S 2013**, the Department of Veterans Affairs Management Accountability Act of 2014, which would modify the currently antiquated and morbidly dysfunctional civil service system by providing a mechanism for the removal of VA's SES employees for unacceptable performance;
 - **H.R.2072**, Demanding Accountability for Veterans Act of 2013, which requires the Inspector General (IG) of the Department of Veterans Affairs (VA), upon determining that the VA Secretary has

not appropriately responded to an IG report that recommends actions to be taken by the Secretary to address a VA public health or safety issue, to notify the Secretary and the congressional veterans committees of such failure.

Requires the Secretary: (1) within 15 days after such notification, to submit to the IG a list of the names of each responsible VA manager and the matter for which the manager is responsible; (2) within 7 days after such submission, to notify each such manager of the covered issue; (3) to direct such manager to resolve the issue, (4) to provide the manager with appropriate counseling and a mitigation plan for resolving the issue; and (5) to ensure that a manager's performance review includes an evaluation of actions taken with respect to such issue.

- Perhaps most importantly, it prohibits the Secretary from paying a bonus or award to any manager whose issue remains unresolved.
- 2. DoD – including auditing the Pentagon (**H.R. 3184**, the Audit the Pentagon Act of 2013) and improving military records sharing between agencies (especially medical records with the VA);
- 3. Fiscal Matters – including getting control of the National Debt & Spending - Legislation we support includes: **H.R.33**, the Audit The Fed Act of 2013 and **S. 280**, the Budget Reform Act of 2013;

- ***Veteran unemployment:***

Introduction: During this time of persistent unemployment in our country, the problem of Veteran unemployment, especially for our National Guards and Reserve members, should be seen as a national disgrace. In recognition of those who honorably and selflessly fought to maintain the freedoms of those who stayed behind, we as a nation cannot do enough to ensure that American Veterans get the proper skills, certifications/credentials and degrees necessary to be successful and competitive in the civilian job market.

Veteran unemployment is a complex problem which will require the efforts of federal and state governments, the business community and the military/veterans community working in concert if any meaningful solution is to be developed. The efforts of any one entity alone will be insufficient to meet the challenges posed by this massive problem facing American Veterans everywhere and it's important to keep in mind that veterans, like their civilian counterparts, require not just a job, but living-wage employment following their service. The vast majority of working-age veterans want to continue to be productive citizens and they need to be provided every opportunity to achieve their career goals. In recognition of the unimaginable sacrifices made by American Veterans, Congress and the Administration need to continue to make a concerted

effort to guarantee that veterans have access to employment and training opportunities.

Additionally there needs to be a better system to connect employers with open positions to unemployed veterans; the current system of merely posting jobs online, while beneficial, just isn't enough. There are literally hundreds of online employment and career sites catering to veterans and civilians alike, which unfortunately can leave veterans confused and overwhelmed. What is needed is a comprehensive 'veteran employment resource guide' along with a single portal or site where all of these opportunities can be accessed in one place. The 'Hero2Hired' program is a good example and should serve as a good foundation to build on.

In addition to the previous issues, there is the very real problem of licensing and credentialing which is required in certain career fields. AMVETS believes that if an individual has received training and practical experience in a career field while serving in the military there should be a streamlined process for demonstrating their knowledge and expertise in order to qualify for any necessary license or credential.

Congress and the Administration also need to consider the very real connection between unemployment and its effects on the already vulnerable mental health of our veterans. Common sense suggest that individuals who are gainfully and appropriately employed, who are able to support themselves and their families, who are able to utilize their skills and abilities, who are receiving any necessary health care, who feel useful, challenged and appreciated are less likely to suffer from depression, substance abuse problems and/or commit suicide.

1. As you may know, AMVETS was instrumental in getting legislation introduced in the House and the Senate which would make it illegal, at the federal level, to discriminate against individuals based on their military or veteran status in the workplace and housing.

AMVETS formally invites each of you to become a co-sponsor of **HR 2654** or **S 1281**, the Veterans & Servicemembers Employment Rights & Housing Act of 2013. Interestingly, research as already identified at least 12 states which have enacted similar legislation at the state level including:

Massachusetts

Illinois

Washington

Ohio

Minnesota

New York

Wisconsin

Oregon

Missouri

California

New Jersey

Delaware

AMVETS believes that perhaps the greatest and most comprehensive assistance this nation could provide for its veterans is to protect them from all forms of discrimination and employer bias by enacting HR 2654 & S 1281.

Since moving to an all-volunteer military, the number of veterans serving in congress, and at all levels of leadership, is the smallest it's ever been and this, added to the years of constant focus on the negative aspects of war, has created the negative perception that all veterans are flawed, dangerous and unstable.

While it is true that veterans should be protected from all forms of discrimination under USERRA, sadly that is not the case, in part, due to ignorance of its legal requirements as well as lax oversight and enforcement. Sadly, those who have served and fought for their country do not enjoy the same protections and advantages under the law as many other citizens. In fact, just the opposite is often true; frequently those who have served and sacrificed are at a disadvantage in comparison to their civilian peers.

This comprehensive, nearly cost-neutral legislation would enhance veteran access and equity in all areas and it would provide legal recourse to veterans experiencing any form of discrimination.

- ***VA/DoD Health Care & Mental Health:***

Introduction: The Veterans Health Administration (VHA) is not only the largest direct provider of healthcare services in the nation, it also provides the most extensive training environment for health professionals as well as providing the most clinically focused setting for medical and prosthetic research. While providing primary care to American Veterans is among the VA's prime responsibilities, it also provides specialized health care services including: spinal cord injury, blind rehabilitation, traumatic brain injury, prosthetic services, mental health, and war-related poly-trauma injuries. AMVETS believes that in order to avoid catastrophic degradation to these critical services that congress needs to:

- pass a budget on a regular basis. The need for sufficient, timely and predictable funding cannot be over-emphasized;
- continue and extend advance appropriations to all VA discretionary and mandatory programs, services and benefits; and
- continue to introduce and support legislation that protects veterans benefits

1. Toxic Wounds/Gulf War Illness – this has become a critical issue for AMVETS this year and we plan to take every opportunity to advocate for

of veterans suffering from the effect of all forms of toxic exposure. Because of its high importance, we will briefly focus on this often overlooked issue.

After many years, science is finally making significant progress toward understanding Gulf War Illness and identifying recommended treatments. Research has shown that Gulf War illness: is associated with service in the 1991 war; that it affects at least 175,000 veterans; and that it is physiologic, rather than a psychiatric condition caused by toxic exposures.

This progress has been achieved largely through the work of two organizations created by Congress, the Gulf War Illness research program of the DoD Congressionally Directed Medical Research Programs (CDMRP) and the VA Research Advisory Committee on Gulf War Veterans' Illnesses.

AMVETS supports continued funding of the CDMRP Gulf War illness research program, minimally, at last year's level of \$20 million. We also support legislation to restore the oversight component and independence of the Research Advisory Committee on Gulf War Veterans' Illnesses.

Furthermore, legislation is urgently needed to assert appropriate Congressional authority over Gulf War Illness research and enable scientific progress to continue, including the need to:

- re-establish the independence of the Research Advisory Committee on Gulf War Veterans' Illnesses, restoring its oversight role and providing for appointment of its members by Congress, rather than VA; and
- require VA to properly conduct Institute of Medicine Gulf War studies previously ordered by Congress. The studies have not been conducted in strict accordance with Congress's direction, or in some cases, have not been conducted at all, which may suggest some level of effort to manipulate research by government employees. Importantly, these studies relate to the health of veterans from the wars in Iraq and Afghanistan, as well as Gulf War veterans.

Finally, AMVETS fully supports passage of legislation such as **S 1602**, Toxic Exposure Research and Military Family Support Act of 2013 and **HR 2510**, Helping Veterans Exposed to Toxic Chemicals Act.

2. Traumatic Brain Injury (TBI) & Post-Traumatic Stress (PTS) – Despite the VA's clear efforts in the identification and treatment of the various mental health issues plaguing our military members and veterans, including serious mental illness, more routine mental health challenges, post-deployment mental health readjustment issues, persistent

incidents of military suicide and military sexual trauma, these concerns continue to take their toll on America's military and veterans.

- DoD needs to seek ways to build and improve the resiliency of all members of the Armed Forces, as well as continuing to develop protective gear which evolves simultaneously with current combat practices and weapons and effective incident monitoring equipment
 - Simultaneously, VA needs to continue aggressively seeking effective mental health identification and assessment tools, they need to ensure that there is sufficiently trained staff available to meet the current and growing mental health care needs of our military and veterans, and they need to develop timely, effective, evidence-based therapies.
3. Unfortunately, the VA also faces significant challenges ensuring that newly returning war veterans have access to post-deployment readjustment services and specialized treatments while guaranteeing that all other enrolled veterans gain and keep access to effective, timely, high-quality mental health services. In fact, outreach to veterans from all eras needs to continue to improve.

The mental health of our service members and veterans may be one of the greatest challenges facing the VA today and while there have been improvements, there's still a long way to go. This is especially true in the case of women veterans who not only respond to and deal with combat stress differently than their male counterparts, but also need gender-specific treatment.

4. Even more significant are the alarming number of service members and veterans who experienced repetitive, low level TBI that did not require medical attention but, taken cumulatively, produce serious medical conditions years later. These conditions often exhibit symptoms that affect mood, behavior and thoughts. Many of our veterans are experiencing a complex combination of mental and physical health problems, the weight of which should be viewed as a contributing factor to the feelings of pain, hopelessness, loneliness, helplessness and depression that can lead to suicide.
5. There can be no doubt that the problem of military/veteran suicide is of great concern to everyone in the military community and sadly the problem continues to grow. The fact that the number of military/veteran suicides is not substantially declining is especially distressing in light of the ongoing efforts of the Department of Defense (DoD), Veterans Affairs (VA) and a variety of public and private enterprises. It seems obvious that more needs to be done to uncover

the complex mental and physical factors that lead military service members and veterans to commit suicide.

6. One significant aspect that may shed some additional light on this unacceptable situation is the possible correlation between blast injuries caused by Improvised Explosive Devices (IEDs) and suicide. By collecting information about the physical injuries sustained by suicide victims, we may be able to get a clearer idea of the underlying causes of military and veteran suicide.

Additionally, IED survivors face a wide variety of challenges ranging from the minor to the monumental: fractures, amputations, disfigurement, cognitive and motor impairments, emboli, headaches, personality changes, visual and auditory disturbances, altered effect, hypersensitivities, and dulled judgment.

While the good news is that more servicemembers than ever are surviving the battlefield wounds, the bad news is that those same individuals will likely require highly specialized neurological, psychological, and ophthalmological care, life-long mental health care, sophisticated prosthetics and other vital services. At this juncture, there is no definitive connection between IED injuries, these conditions, and veterans' suicides because this possibility has not been adequately investigated. Now is the time to do so.

7. As previously mentioned, untreated/unhealed physical and mental health combat injuries play a significant role in the number of military/veteran suicides in this country. The data on these suicides are startling and they have continued to rise. This horrific trend is a national disgrace and finding effective, practical solutions should be not only a service-wide, but a nation-wide priority.

Finally, it must be remembered that we are looking at an issue that will span decades. AMVETS applauds the VA for working to reduce the stigma surrounding mental health concerns/treatment and the increase in support services. We recommend that the VA consider both clinical and non-clinical treatment options when deciding how to fill the gap between need and timely access. Non-clinical mental health treatment options are readily available in most communities, are generally much more cost effective than clinical options with shorter wait times and can be an effective segment in an overall mental health treatment program.

- ***Veterans Benefits***

Introduction: AMVETS believes in the solemnity of the promises made to our military members and veterans when they agreed to leave their homes and families to go fight in our stead. In addition to providing physical and mental healthcare to millions of veterans, the VA is also the primary federal agency providing a variety of benefits to our nation's veterans including:

disability compensation, dependency and indemnity compensation, pensions, retirement, education benefits, home loans, ancillary benefits for service-connected disabled veterans, life insurance and burial benefits. It is absolutely crucial, that veteran's benefits become a national priority, as they had been following earlier conflicts, and they must be viewed in the context of the service and sacrifice performed by our men and women in uniform. These benefit programs however must not only be maintained, they need to be carefully monitored and constantly improved so they maintain their value and effectiveness.

1. For more than three years, the VA has been engaged in a comprehensive transformation process designed to convert the current claims processing system from an antiquated paper-based system to a 21st century, electronic-based system. As VA continues to move forward with improvements and innovations, it is essential that Congress provide the resources and oversight necessary to complete the work at hand. This being said, AMVETS is somewhat encouraged by the progress VBA has made in reducing the claims backlog, thousands of veterans or their survivors are still waiting too long to receive their just compensation. Now is the time to really ramp up implementation of new organizational and operational practices including: position-specific training/cross-training and testing; improved IT systems and quality control.

There is certainly no shortage of problems plaguing VA's claims processing system, including:

- the unprecedented numbers of claims being filed;
- the failure of claims adjudicators to equitably and accurately decide claims the first time;
- the large number of appeals of claims decisions being filed;
- the VA's outdated and inefficient infrastructure; and
- the layer of middle managers entrenched within the VA who are not only uncooperative and unproductive, their lack of cooperation is actually undermining all of the good work that both Secretary Shinseki and General Hickey are attempting to accomplish.

AMVETS offers the following recommendations as part of a holistic solution to the problems plaguing VA's claims processing system:

- that there be an increase in the quantity and quality of training provided to employees involved in the adjudication of claims;
- that all testing or skills certifications instruments be reviewed to ensure that they accurately measure the appropriate job skills;
- that VA continues to engage and utilize the expertise of its VSO partner organizations;
- resources must be equitably distributed between the various claims processing lanes; and finally

- Congress must ensure that the VA receives sufficient funding to appropriately implement its mandate to serve veterans.

- ***Women Veterans and Service Members***

Introduction: It is a little recognized, and perhaps unappreciated, fact that every woman who ever served in America's Armed Forces has done so as a volunteer! Women have a long and proud history of service to this country even though their service prior to the Civil War was strictly unofficial; they have been involved in every battle, one way or another, going back to the Revolutionary War. Today, women comprise between 15% – 18% of the U.S. military and there are currently 2.3 million women veterans.

1. As the women veteran population continues growing, there will be corresponding growth in the enrollment and utilization of all VA services. In order for VA to meet the needs of current, and future, women veterans, AMVETS believes that VA needs:
 - to continue to increase capacity in women's clinical services; and
 - ensure that all providers are competently trained in all facets of women's health care, including ob/gyn and other reproductive specialties.
2. Among the most critical issues facing women veterans today are: homelessness, military sexual trauma (MST), employment and the lack of gender specific health care. These issues are essentially the trifecta of degradation and deprivation for women veterans. They are also somewhat of a 'Catch-22' in that each issue overlaps and effects the others, making it that much more difficult for women veterans to escape this negative cycle.

How can we as a nation allow some of our most vulnerable veterans, many of whom also have children, to be living on the streets of our cities? Why is it that a woman should have to fear for her personal safety, not only from foreign enemies, but from her comrades-in-arms simply because she made a conscious decision to serve in the military? All veterans, by their very service to their country, should be guaranteed some basics: shelter, any necessary physical and mental health care, food, job training or education, and an opportunity to support themselves and their children upon exiting the military.

3. Many of our homeless women veterans are already victims of MST and PTSD due to their military service and once they transition back to civilian life, many are faced with the dangers and lack of appropriate physical and mental health care inherent in being homeless. These veterans are often unable to locate temporary housing at local homeless shelters because many of these facilities are not set up to house to accommodate the specific safety and privacy needs of women, not to mention their children. It's a sad fact that homeless individuals are not

infrequently involved in the criminal justice system for a variety of offences, including crimes against women and children. This situation is truly a national disgrace and must not be allowed to continue.

4. For a complete rundown on the unique problems and needs of women veterans along with specific recommendations, please see the FY 2015 *Independent Budget*.

Thank you for the opportunity to present this testimony and for all you do to support veterans through your public service. While we did not expound on each of our priorities in this document, we invite you to reach out to us with your inquiries. If there are any questions regarding this testimony or any of our legislative priorities, please contact, Diane Zumatto, AMVETS, National Legislative Director, dzumatto@amvets.org or 301-683-4016

28 February 2014

The Honorable Representative Jeff Miller, Chairman
U.S. House of Representatives, Veterans Affairs Committee
335 Cannon House Office Building
Washington, DC 20510

Dear Chairman Miller:

Neither AMVETS nor I have received any federal grants or contracts, during this year or in the last two years, from any agency or program relevant to the upcoming 6 March 2014, Joint Veterans Affairs Committee hearing on the legislative priorities of AMVETS.

Sincerely,



Diane M. Zumatto, AMVETS
National Legislative Director