

Senator Bernard Sanders  
Chairman  
Conference Committee Opening  
June 24, 2014

**Good afternoon and welcome. Let me thank Chairman Miller, Ranking Members Michaud and Burr and all the members of the House and Senate Veterans Committees for their very hard work on veterans' issues.**

**Despite a very partisan environment here in Congress, I am confident that we as Democrats, Republicans and Independents will come together to pass a significant piece of legislation which addresses some of the very serious problems currently facing the VA.**

**Both pieces of legislation, the House bill and the Senate bill, focus on two main issues: the need to provide access to health care for veterans in a timely manner, and the need for holding dishonest or incompetent senior officials accountable. We will not accept VA officials lying about wait-times or falsifying data. We will not accept honest whistleblowers – who want to improve the system – having their concerns ignored. I am pleased that, in reality, there are more similarities than differences between the two bills and I am confident that we can reach an agreement that will be satisfactory to everyone. Our nation's veterans deserve no less.**

**I think everyone in this room understands that the cost of war does not end when the last shots are fired and the last missiles are launched. The cost of war continues until the last veteran receives the care and benefits that he or she has earned on the battlefield.**

**War is an incredibly expensive proposition – in terms of human life, human suffering and in financial terms. And in my very, very strong view – if we are not prepared to take care of those men and women who went to war, then we shouldn't send them to war in the first place. Taking care of veterans is a cost of war. Period!**

**In terms of Iraq and Afghanistan, the human cost of those wars is almost 7,000 dead. The cost of war is 530,000 veterans seeking care at the VA in 2013 for PTSD, not to mention those who are struggling with Traumatic Brain Injury. The cost of war is too many service-members coming home with missing arms and legs, lost eyesight or lost hearing. The cost of war includes veterans each day dying by suicide, high rates of divorce, wives trying to be rebuild their lives after losing their husbands, kids growing up in one-parent homes and too high rates of unemployment for returning servicemembers.**

**Three weeks ago, Senator McCain and I hammered together a proposal to deal with the current crises at VA. It**

**is no secret that Senator McCain and I have very different world-views, but I thank him very much for working with me to move this legislation forward – and to move it forward expeditiously. The Sanders-McCain bill passed the Senate with overwhelming bipartisan support, with a vote of 93 to 3. In terms of funding, by a vote of 75 to 19, the Senate made it crystal clear that the current crisis in the VA is truly an emergency - and should be paid for through emergency funding.**

**In the last four years, we have seen a significant increase in the number of veterans utilizing VA health care. In addition, many of our veterans from World War II, Korea, and Vietnam require a greater amount of care as they age. Further, a recent VA audit revealed that more than 57,000 veterans are on too-long waiting lists in order to be scheduled for medical appointments. In addition, there are other veterans seeking care at VA who were never even added to these wait lists. This is clearly unacceptable and must be dealt with immediately. I couldn't agree with Senator McCain more when he said on the Senate floor, "If there is a definition of emergency, I would say that this legislation fits that. It is an emergency. It is an emergency what is happening to our veterans and the men and women who have served this country. And we need to pass this legislation and get it in conference with the House as soon as**

**possible.” End of quote from Senator McCain. I fully concur.**

**Veterans in this country must get quality health care in a timely manner. And we need to provide the funding the VA needs to accomplish that goal - and do it as fast as possible. The simple truth of the matter is that the VA needs more doctors, more nurses, more mental health providers and, in certain parts of the country, more space for a growing patient population.**

**In a letter sent to the House and Senate veterans’ committees on June 17th which was signed by virtually every major veterans’ group – the American Legion, the DAV, the VFW, the Paralyzed Veterans of America, the Vietnam Veterans of America, the Iraq and Afghanistan Veterans of America and many others, they write:**

**“PROTECT AND PRESERVE THE VA HEALTH CARE SYSTEM**

**Any legislative, regulatory or administrative changes designed to respond to the VA health access crisis, whether temporary or permanent, must protect, preserve and strengthen the VA health care system so that it remains capable of providing a full continuum of high-quality, timely health care to all enrolled veterans...” The letter continues, quote, “unless the legislation simultaneously sets VA on a**

**path to intelligently strengthen health care delivery, expand access and capacity, reallocate resources and ensure that overall VA funding matches its mission, the current problems confronting VA and veterans will inevitably recur.” End of quote.**

**In order to address the long wait periods, the Senate legislation says to veterans around the country that if you cannot get into a VA facility in a timely manner, you will be able to get the care you need outside the VA. That means access to private doctors, community health centers, or Department of Defense or Indian Health Service facilities. The goal here is to give veterans a wide option to access care in a timely manner through providers in their communities. This bill also says to veterans who live 40 miles or more from a VA facility that – if they choose – they also have the option of seeking care outside of the VA.**

**Just as the VSO’s articulated in their letter, while it is critical to address the current waiting period crisis, we also have the responsibility to ensure this crisis doesn’t happen again. We do that by providing VA the tools it needs to ensure sufficient capacity for veterans seeking care at VA medical facilities. Clearly, no medical program – no matter how well administered – can provide quality care in a timely manner if it lacks the necessary number of doctors, nurses and other medical providers.**

**Today, VA has thousands of vacancies for health care providers. These vacancies – along with an untold shortage of health care providers to meet the demand of veterans who want to get care at VA – have a direct impact on the Department’s ability to get veterans in the door for appointments. To fill these positions, the Senate bill provides for the hiring of VA doctors and nurses. And, it does so in an expedited fashion by ensuring VA’s hiring efforts are not hamstrung by federal bureaucracy. VA needs to be able to compete for the best and brightest.**

**During this discussion of VA health care, let us not forget that – today alone – some 230,000 veterans are walking in the door of a VA facility for health care. And the overwhelming majority – well over 90% of them – believe they receive high-quality care. Over and over again, I hear from Vermont veterans and veterans across the country that once they get into the system the care is good. That’s not just my view. It is the view of virtually all of the major veterans’ organizations and independent studies that compare VA care with care in the private sector. We owe it to these veterans to fix the current problems and bolster the system to ensure this quality care is available to them for the years and decades to come.**

**Clearly, nobody believes that the VA health care system is perfect. I expect that today we may well hear criticisms of VA health care – some of which may be very valid. But all that I would ask is that we put VA health care into the broader context of what is happening in health care in America today. It is not the case that everyone outside the VA gets wonderful care in a timely manner at an affordable cost. Unfortunately, that is not what is happening.**

**Forget the reality that some 40 million Americans have no health insurance and that, according to a Harvard study of a few years ago, some 45,000 Americans die each year because they don't get to a doctor when they should.**

**Here are a few headlines from the last couple of weeks and I quote, “A report released Monday by a respected think tank [The Commonwealth Fund] ranks the United States dead last in the quality of its health care system when compared with ten other Western industrialized nations.” End of quote. Further, the report states that the United States, quote, “has maintained this dubious distinction while spending far more per capita [\$8,508] on health care than Norway [\$5,669], which has the second most expensive system.”**

**Let me read you another headlined, published September 20, 2013, by FierceHealthCare, quote: “Hospital**

**Medical Errors Now the Third Leading Cause of Death in US.” Quote “Medical errors leading to patient death are much higher than previously thought and may be as high as 400,000 deaths a year, according to a new study in the Journal of Patient Safety.”**

**I mention all of this to make clear that of course the VA has its share of problems, some of them serious – but so does the American health care system in general.**

**Our job, working together, is to keep the promises made to our veteran and that is that they get the highest quality care possible in a timely way. Let’s do it.**