



National Veterans Affairs and Rehabilitation Commission

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**STATEMENT OF  
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VETERANS AFFAIRS AND REHABILITATION COMMISSION  
THE AMERICAN LEGION  
BEFORE THE  
SUBCOMMITTEE ON HEALTH  
COMMITTEE ON VETERANS' AFFAIRS  
UNITED STATES HOUSE OF REPRESENTATIVES  
ON  
H.R. 2879, H.R. 2699, H.R. 2698, H.R. 84, H.R. 1075, H.R. 949 H.R. 3926, H.R. 4006,  
DRAFT DISCUSSIONS ON CONTINUING EDUCATION FOR VA EMPLOYEES,  
WAIVING REQUIRIMENTS FOR VA MENTAL HEALTH COUNSELORS AND  
COLLECTIVE BARGAINING RIGHTS FOR VA EMPLOYEES**

**MARCH 25, 2010**

Mr. Chairman and Members of the Subcommittee:

Thank you for the opportunity to present The American Legion's views on the several pieces of legislation being considered by the Subcommittee.

**H.R. 1075, RECOVER Act (Restoring Essential Care for Our Veterans for Effective Recovery)**

This bill would expand access to hospital care for veterans in major disaster areas and for other purposes. In addition, it directs the Secretary of the Department of Veterans Affairs (VA) to enter into a contract with non-Department facilities located in the disaster areas to facilitate covered medical services to veterans, if their designated VA medical facility is unable to do so within 180 days due to the disaster.

Timely and open access to quality health care for veterans is a major priority of The American Legion and this legislation is consistent with our efforts in this regard. The American Legion does, however, have some concerns. Although such contracts would certainly be helpful during a disaster in which VA medical facilities are not available, we do not want such an arrangement to become a disincentive for VA to quickly repair or replace damaged facilities. This bill also does not address length of the contracted care, long-term care or how quality of care will be assessed.

#### **H.R. 84, Veterans Timely Access to Health Care Act**

This legislation would seek to establish standards of access to care for veterans seeking health care from VA. It also directs the Secretary to set standards for timeliness and to report how these standards were carried out.

The American Legion supports this bill and believes that this endeavor will provide VA with a comprehensible overview of the challenges that veterans face in gaining timely access to care. This measure could prove to be a valuable asset in their undertaking to improve access to care, especially among veterans living in rural and highly rural geographic areas.

#### **H.R. 4006, Rural, American Indian Veterans Health Care Improvement Act of 2009.**

This bill would require the VA Secretary to designate Indian Health Care Coordinators at 10 VA Medical Centers that serve communities with the greatest number of American Indian veterans. Additionally, a year after the bill has been enacted; the VA Secretary is directed to establish a Memorandum of Understanding with the Secretary of the Interior to authorize the electronic transfer of American Indian veterans' health records between the Indian Health Services (IHS) and the VA. The provisions of this bill also authorize the VA Secretary to transfer surplus medical and information technology equipment to IHS.

The American Legion advocates timely access to quality health care to all veterans and is on record in strong support of VA's collaboration with other Federal health care providers to provide the best care, at the right time, in the most appropriate medical care setting. This legislation appears to address these goals to better serve veterans enrolled in the VA health care delivery system.

#### **H.R. 3926, Armed Forces Breast Cancer Research Act**

This bill would direct the Secretaries of the Departments of Defense (DoD) and VA to jointly conduct a study on the incidence of breast cancer among members of the Armed Forces and veterans. This study would determine the number of service members and veterans diagnosed with breast cancer; their demographic information; and any possible exposure to hazardous elements or chemical or biological agents.

The American Legion fully supports this timely and important legislation given the recent breast cancer incidences among male veterans that were stationed at Camp Lejeune. Moreover, according to the Clinical Breast Care Project at Walter Reed Army Medical Center, there have

been over 2,000 cases of breast cancer diagnosed in both male and female active-duty service members within the last decade. The Center further stated that breast cancer is the single greatest cause of cancer deaths among women under 40 and is a significant cause of mortality for women in the Armed Forces. The American Legion would also encourage inclusion of the Reserve component in this study.

### **H.R. 949, Improving the Collective Bargaining Rights of Certain VA Employees**

This legislation would seek to amend section 7422 of title 38, United States Code (USC), which would improve the collective bargaining rights and procedures for review of adverse actions of certain VA employees.

Although The American Legion strongly supports the recruitment and retention of quality VA employees, it has no official position on this legislation.

### **Proposed Legislation to Amend Title 38, USC, Concerning Performance Pay and Collective Bargaining**

This legislation would seek to amend section 7431 and section 7422 of title 38, USC, which would make certain improvements in the laws relating to the performance pay and collective bargaining right for certain VA employees.

Although The American Legion strongly supports the recruitment and retention of quality VA employees, it has no official position on this legislation.

### **Proposed Legislation to Amend Title 38, USC, Concerning Continuing Professional Education**

This bill would seek to amend title 38, USC, to improve the continuing professional education reimbursement provided to health professionals employed by VA. This proposal would not only maintain VA's presence in the competitive medical professional market, but also help decrease the attrition rate among VA Medical Centers' medical professionals.

The American Legion supports this draft proposal because it will serve to provide professional education reimbursement for eligible health professional. The expansion of this benefit may also diminish the attrition rate of medical professionals within VA medical facilities because it will be an added benefit to more staff in various disciplines.

### **Proposed Legislation to Amend Title 38, USC, Concerning Mental Health Counselors**

This proposal would seek to amend title 38, USC, to authorize the VA Secretary to waive certain requirements relating to mental health counselors.

The American Legion believes VA should be staffed with the best qualified professionals to ensure this nation's veterans receive timely access to quality health care, especially mental health

services. With service members returning from Iraq and Afghanistan with complex and overlapping illnesses and injuries, it is imperative VA maintains its charge to ensure its medical professionals are properly trained and fully qualified to provide quality care.

According to the National Institute of Health, injuries and illnesses such as mild Traumatic Brain Injury (TBI) and Posttraumatic Stress Disorder (PTSD) respectively, have several symptoms in common. Among these symptoms are irritability, concentration deficits, amnesia for the causal event, reduced cognitive processing ability and sleeping disturbances. Clearly, this situation adds to the difficulty in diagnosing PTSD in patients with TBI. The American Legion contends that due to the complexity of these illnesses and injuries, such as TBI and PTSD, the most qualified mental health professionals are required. Therefore, The American Legion is opposed to waiving current requirements relating to mental health counselors.

### **H.R. 2698, Veterans and Survivors Behavioral Health Awareness Act**

This bill would seek to improve and enhance the mental health care benefits available to veterans. The legislation would also enhance counseling and other benefits available to survivors of veterans, and for other purposes.

The American Legion fully supports this legislation. VA's Vet Centers have served as one of the main catalysts that have assisted with successfully transitioning service members and veterans to VA. Section 3 of this bill would seek to restore the authority of Vets Centers to provide referral and other assistance upon request to veterans currently not authorized counseling. This provision would allow Vet Centers to cast a broader net in further minimizing veterans who would otherwise continue to face transition challenges.

### **H.R. 2699, Armed Forces Behavioral Health Awareness Act**

This bill would seek to improve the mental health care benefits available to service members, to enhance counseling available to their family members, and for other purposes.

While The American Legion agrees with the intent of this bill, we disagree with the restrictive nature of Section 4, which would seek to carry out a pilot program, for service members of the Army only, to enhance awareness of PTSD. This pilot program should be open to members of all five branches of the Armed Services with a presence in Iraq or Afghanistan. In addition, the locations should be expanded to include venues near all of the respective service members.

The American Legion believes the success of the Armed Forces Behavioral Health Awareness Act, with the amendment of Section 4, would assist with timely intervention to help minimize issues plaguing veterans and their families that possibly lead to substance abuse, suicide, and homelessness.

## **H.R. 2879, Rural Veterans Health Care Improvement Act of 2009**

This legislation would seek to amend title 38, USC, to improve health care for veterans who live in rural and highly rural geographic areas, and for other purposes.

VA's Office of Rural Health held their inaugural meeting in August 2008. During that time, VA established Rural Health Centers located in three regions of the country:

- Eastern Region RHRC: White River, Vermont
- Central Region RHRC: Iowa City, Iowa
- Western Region RHRC: Salt Lake City, Utah

These three regions also partner with various VA Medical Centers and Universities. Section 3 of this bill proposes Centers of Excellence for Rural Health Research, Education, and Clinical Activities. The American Legion believes there should be interaction between the abovementioned Rural Health Centers to prevent redundancy. Due to the vastness of rural areas, Rural Health Centers should be increased to accommodate various issues such as lack of access to medical facilities, lack of medical professionals, women veteran issues, and homelessness.

This bill would also seek to increase transportation options for rural veterans. The American Legion believes this is imperative and will increase veterans' options of receiving timely access to quality health care. The American Legion also believes that veterans should not be penalized due to the geographical location in which they choose to reside.

Mr. Chairman, once again The American Legion appreciates the opportunity to address these issues and looks forward to working with you, your colleagues and the staff in advancing legislation that will make a positive difference in the lives of service members, veterans and their families.

That concludes this written statement and I welcome any questions you or your colleagues may have concerning The American Legion's views, comments and recommendations.