



**TESTIMONY OF  
Richard J. Delaney USAF Master Sergeant (Ret)  
National President  
Of  
THE RETIRED ENLISTED ASSOCIATION  
Before a  
JOINT HEARING**

**Of the  
HOUSE and SENATE VETERANS AFFAIRS COMMITTEES**

**On  
March 6, 2014**

## **DISCLOSURE OF FEDERAL GRANTS OR CONTRACTS**

The Retired Enlisted Association does not currently receive, nor has it received during the current fiscal year or either of the two previous years any federal money for grants or contracts. All the Association's activities and services are accomplished completely free of any federal funding.

### **Chairmen Sanders and Miller, Ranking Members Burr and Michaud and distinguished members of both Committees'**

It is an honor for me to speak again before this Joint Committee hearing about TREA's legislative goals and concerns for this year, FY2015 and beyond concerning American's military veterans, and retirees as well as their families and survivors.

This is my second opportunity to testify before you, though I have had the honor to speak to several of you about these serious concerns. I am Richard Delaney, President of The Retired Enlisted Association. TREA was created in 1963 to give a voice to the needs and ideas of the men and women who have served in America's enlisted ranks before both the federal and state governments. Our members are from all the branches of the Armed Services. They serve in the active duty, National Guard and Reserves. Originally our members were retirees or were in line to serve a full career in the military. Now we have opened our membership to veterans of the enlisted ranks as well as retirees. This is a very happy turn of events. As a VSO with members who were DoD retirees *as well as* veterans we always worked on and studied veteran issues. Now happily they are in our ranks.

This is a critical time for the U.S. military and its present and future veterans. It is expected that by the end of this year this country's longest war will end. Throughout our history this always means a river of new veterans will be returning to civilian life. If the Department of Defense's proposals of troop strength (especially the Army) are accepted by Congress the number of service members becoming veterans will turn into a flood. It will put enormous of new burdens on a Department that has been stretched to its breaking point for the last decade. And will now be required to do even more.

America's longest war is expected to be over by the end of the year. Our remaining 34,000 men and women should be back from Afghanistan. (Though news of the last two weeks continue to show us that this is still a very dangerous and unpredictable world.)

When they return home and to their civilian lives they must be shown the honor and gratitude and given the practical help that they have earned and deserve. And their families and survivors deserve the help, support and protection that our service members expected. While there has

been real in the economy and in unemployment (please see our section on veterans employment the men and women who are returning to the civilian job market today and in the near future are still finding a very sluggish economy.

Your Committees have never forgotten this Nation's sacred duty to her veterans, and their families and survivors and we are very grateful. We were very disappointed that S. 1982 failed to pass the Senate. But we assure we will fight for all those wonderful positions. One after another. During the last several years you have shepherded through Congress dramatic increases in the amount of VA funding, passed an advanced appropriation procedure for VA healthcare and created a wonderful education G.I. Bill. We are extremely grateful for all these improvements. However when times are tough; and these are tough times people start looking for places to cut. We know you will fight to protect all these Improvements you have made. And we will join you at every turn in the fight. .

### **Advanced Funding for all of the VA**

TREA believes that it has become obvious that good governance of the VA includes advanced funding for its entire budget. In 2009 Congress wisely established two year budgeting (one year in advance) for the VA's health programs. The "Veterans Health Care Budget Reform and Transparency Act of 2009" has been a stunning success. It has allowed long term (at least longer term) planning of healthcare projects and hiring. Furthermore during this time of shutdowns and continuing resolution it has allowed for predictable timely funding. It has worked. The clearest example of that was the way VA healthcare continued without a hiccup during last fall's federal government shutdown.

Now it is time to give the rest of the VA's critical programs the same reliability. (This is approximately 14% of the VA's budget.) During last year's shutdown we came within days of delaying the issuing of veteran disability, survivors and pension checks from being issued. These are payments that many of our veterans and their families base their lives on. It is wrong to hold them hostage to the failure of Congress to reach budgetary agreements. We were disappointed that when **S. 1982** failed it meant that its provision to grant advanced funding for the rest of the VA's discretionary programs fell. But clearly **H.R 813, S.932** would succeed in accomplishing the same goal. The bills would also make it easier for the VA to "plan for key investments in information technology, claims processing and construction projects "and "would grant Congress greater oversight on multi-year funding proposals, with one year building off of the next year."

We know we are preaching to the choir. Chairman Miller (R-FL) sponsored H.R 813 and Chairman Sanders (I-VT) included advanced funding in his S.1982. Additionally, after last year's government shutdown both Chairmen said how important passing advance funding is. Chairman Sanders said: "As we saw earlier this month in the event of a prolonged shutdown, VA would not have been able to issue disability compensation, pension payments or education

benefits. That outcome would have been reprehensible.” While Chairman Miller said: “We don’t want veterans to be able to be used as political pawns in the discussion. We need to all agree to take veterans and their earned benefits off the table.”

TREA is well aware that there may well be problems convincing appropriators and leadership to move on these bills. (Indeed the VA itself refused to come out in favor of a bill that would result in making the VA much easier to run.) But it is crucial that we convince them that they should and we volunteer to do anything we can to help you succeed in reaching this important goal.

## **VA Claims Adjudication Backlog**

TREA firmly believes that the claims backlog is still the most pressing problem facing veterans Turning to the VA today. We have been saying that year after year. And it is still true. Obviously we are well aware of the time and effort Secretaries Shinseki and Hickey and their staffs have given to this problem. There has certainly been some improvement. The VA has finally automated the system, and made adjudication of cases by creating segmenting lanes and developing the “fully developed claims” project. But there is still a 400,000 case backlog. And as more and more men and women leave the service as the wars end and the end strength shrinks.

We are aware of the tremendous effort that Chairman Miller (R-FL) and indeed the membership of both Committees have expended to solve this long term problem once and for all. And we are grateful But it is still not solved. Ten years ago we wrote articles bemoaning the backlog in our monthly magazine. And we are still writing them!

TREA is hopeful that now that we may be reaching a tipping point and that the pending case load will start to go down.

It must be remembered that while a veteran is waiting for a disability decision to be made he or she must continue to keep body and soul together; as well as support a family and hopefully start a new life or continue a productive one. It is crucial for all returning veterans, **as well as those who served in the past**, to have their claims quickly **and correctly** adjudicated. It is also critical for the faith of all Americans in our system that this problem finally be solved. There has not been the consistency of outcomes throughout the Country that is essential for a system of adjudication to be fair and to be **seen** to be fair. When the public hears about the backlog or incorrectly decided cases they start to lose faith in the entire system.

## **Compliance with Americans with Disabilities Act**

Section 508 of the Americans with Disabilities Act requires that all federal government departments and agencies assure that their information be made technologically available to all Americans with disabilities. (please see part of section 508 below) This is a requirement for both the general public and for federal employees. TREA was recently made aware that after all these years the Department of Veterans Affairs has met this requirement for the blind and vision impaired.

### Section 508, Rehabilitation Act of 1973

#### **Sec. 508. Electronic and information technology**

(a) Requirements for Federal departments and agencies

(1) Accessibility

(A) Development, procurement, maintenance, or use of electronic and information technology When developing, procuring, maintaining, or using electronic and information technology, each Federal department or agency, including the United States Postal Service, shall ensure, unless an undue burden would be imposed on the department or agency, that the electronic and information technology allows, regardless of the type of medium of the technology -

(i) individuals with disabilities who are Federal employees to have access to and use of information and data that is comparable to the access to and use of the information and data by Federal employees who are not individuals with disabilities; and

(ii) individuals with disabilities who are members of the public seeking information or services from a Federal department or agency to have access to and use of information and data that is comparable to the access to and use of the information and data by such members of the public who are not individuals with disabilities.

There are numerous screen readers in the marketplace ( ZoomText, Jaws, Open Book etc) but the VA has not changed their format to be compatible with any of them. We have spoken to veterans in the general public who have found it impossible to get the information from the VA due to this technological incompatibility when using the internet. The VA's intranet programs are also not compliant- which makes it difficult or impossible for some blind veterans to work for the VA. This needs to be corrected immediately. Of course it is a big job; but Social Security has finally accomplished this so there is no reason that the VA should not. After all it is both the law and the right thing to do.

### **Chained CPI and COLA**

For the past year TREA has been very concerned by the push in favor of the Chain CPI. It now looks like the wind may be out of its sails of using this to calculate a lowered COLA for federal programs including VA disability compensation and DIC. The Administration has already announced that they will not again propose it in their budget. We know that one of the main people we must thank for effectively and unrelentingly fighting this damaging proposal is Chairman Sanders. We are very pleased that this threat has receded.

But the history of the last few months has shown that the Cost of Living Adjustment for federal government programs has been under attack and is likely to remain so. Protecting disabled

veterans and survivors who died for their country is as appropriate now as when the COLA was created and

TREA urges you to continue to protect the COLA and its method of calculation.

## **VA Health Care**

Of course we always have ideas of how to make a program, or Department work better. To make it serve our veterans in the way they deserve. But before we start our suggestions we should take some time to say what a terrific job the VA has done in so many ways. In the last year the VA has provided first class health care for over 5 ½ million veterans of the approx. 8 million veterans enrolled throughout the country. In these tight economic times they are running 153 medical center and approx 750 local clinics. They are getting first class health care nearer to where veterans live. The quality of care has become better and better and the VA's specialty health care services- spinal cord injuries, prosthetics and treatment for the blind- are among the best in the world.

When writing this testimony we do not know what the Administration will propose for the FY2014 VA healthcare budget. (Though by the time we appear before you the Administration's VA budget will have been rolled out.) We expect that it will be much more generous than many other federal departments' and agencies budgets will be. We have been very grateful for the years of increases during these difficult times. But as we have previously noted more and more veterans are coming to the VA for medical treatment.

TREA is sure that you will do everything in your power to assure that the VA is properly funded.

Long after a war is over there are tremendous costs that need to be dealt with. There are presently 22 million veterans in the United States. 67% of the 1.4 million new veterans returning from Iraq and Afghanistan have used a VA "benefit or service." The VA also estimated that there will be 600,000 more veterans using the VA in the next 5 years.

TREA hopes that Congress will pass the provision in S. 1982 that would lengthen the time that a veteran of the wars in Iraq and Afghanistan can enroll in VA healthcare without a proven service connected disability from 5 to 10 years. This will give us a real chance to discover if another agent orange or gulf war syndrome is lurking. We will be able to track and hopefully deal with it quickly.

And it goes on and on. These are amazing numbers and if the health care is not properly funded the whole system can seize and freeze up. In fact complaints are growing from different parts of the country. That is why we urge you to support and pass Representative Dennis Ross' of

Florida, **H.R. 241** “ Veterans Timely Access to Health Care Act” which would require that the VA provide an appointment within 30 days of being contacted. There were terrible delays for treatment in the past and great progress was made. We do not wish the problem to reappear.

Last year we were very upset when the Department of Defense and the Department of Veterans Affairs jointly announced that they were stopping all work on developing a single life time electronic medical record that would cover a patient from the day he or she entered the service until he or she died. And we still are. (As are many of our colleagues in other VSOs and MSOs) After literally decades of work and at least one billion spent they said it was not necessary and they have 2 systems that work fine together. We did not believe that last year and we do not believe that now. If VA’s well thought of VISTA system will work then DoD should adopt it. If the system is getting too old then at the very least both Departments should look at all the off the shelf programs that are being commercially developed and sold. And if the two Departments think it is just throwing good money after bad; then why don’t they tell us? TREA was very excited about the prospect of a single electronic system since we thought it could lead to:

- a clear and instantaneous keeping and transfer of medical information
- a system that could help our veterans become and stay healthy
- would make medical treatments easier and more successful
- would make adjudication of claims easier
- could help us recognize and trace wartime injuries and new illnesses quickly
- would save the VA and DoD countless hours of work keeping, finding and distributing
- data.

Regardless of the obvious lack of enthusiasm that both the VA and DoD has shown for this project

TREA urges all of you to continue to push for this sensible improvement in how all of our military will be medically treated. Indeed development of such a program would help everyone in our Nation.

TREA urges the VA to continue their analysis of what is causing the spike in veterans suicides and how to better treat them. Also, we urge the VA to focus on their own finding that 69% of veterans’ suicides are men and women over the age of 50. Since this is clearly true from a VA 2 year study. It seems likely that the treatments of veterans who have recently returned from a war zone may not be effective in dealing with the problems burdening a man or woman who had been out of the military for decades.

We also hope that Congress passes Representative Michael’s H.R. 1443 which would create a research study in the VA’s Auditory Center of Excellence for the treatment of tinnitus. Tinnitus is the most prevalent service connected disability for enlisted veterans of the U.S. Air Force. It severely damages their quality of life. It should be studied and if at all possible cured.

We also note once again that for older Veterans there will be an ever growing need for nursing home

care. The demographics of many of our elderly veterans require the VA to focus on this urgent issue. The financial losses that many American families suffered for the past several years (with little time to regroup) will naturally cause them to look to VA and State programs for help in caring for their loved ones. The VA's partnership and support with state veteran nursing homes is a good program that in even these difficult times must be increased. The per diem paid by the VA should be increased.

While providing care for elderly veterans the VA should be allowed to do what all other qualified American providers are allowed to do: collect from Medicare. These Veterans have paid for their Medicare coverage throughout their careers. The VA should be allowed to become a Medicare provider and collect appropriate fees..

TREA wishes to note that our long term goal of providing some general dental care to the great majority of veterans who are enrolled in VA and receive no dental care (or support for dental care) is a step closer to existing the VA Dental Insurance Program \*VADIP) 's 3 year pilot was finally stood up last fall. Like the TRICARE Retiree Dental Program the federal government does not underwrite any of the premium costs. But it has set up the programs, issued the RFPs and gave the pilot contracts to 2 large insurance companies –Delta Dental and MetLife. We expect both companies to work hard to make the program and obvious success with the hope of assuring its permanence. It has become dramatically clear how crucial good dental health is for general health. For many years veterans requested that the VA help them get this crucial treatment. Hopefully this program is the first step and we thank you very much for insisting on this pilot.

## **Veterans Employment**

The recently announced force reductions and the winding up of the war in Afghanistan will lead to hundreds of thousands of military veterans leaving the service over the next several years. Our country should reward their service by making every effort to ensure that they successfully reintegrate back into society. The best way to do this is to make sure they have jobs.

The unemployment rate for veterans, which has been an unsightly sore on American society for the last several years, has admittedly improved in the last year. The 5.6% unemployment rate for all veterans is a welcome change. But the 7.9% unemployment rate for Post-9/11 veterans recently rose, and it is still higher than the 6.6% national rate. We thank the committees for their focus on this pressing issue and urge them to keep the pressure on businesses to hire veterans.

Female veterans have been suffering severely high unemployment rates in recent years, but according to the Bureau of Labor Statistics (BLS) the rate has come down dramatically in the last year. The overall rate of female veteran unemployment is 4.6%, compared to 8.8% the year before. Post 9/11 female veterans have an unemployment rate of 6.7%, which is down from 17.1% the year before. Overall, Post 9/11 veterans have a 7.9% unemployment rate, with male Post 9/11 veterans clocking in just a tick above at 8.2%.

As has been known for years now, the unemployment rate for veterans can fluctuate greatly among different sub-groups, and the numbers can change from month to month because of small sample sizes. The sub-group of veterans who have had the hardest time finding work is the 18 to 24 age group. Not surprisingly, this is the age group with the highest unemployment rate nationally as well. 25% of this group of veterans was unemployed in 2011, and as of December of 2013 the unemployment rate for the youngest veteran age cohort is 15.6%, compared to 11.4% for non-veterans in the same age cohort.. So while the improvement is welcome, it is clear that there is much, much more work to be done.

TREA applauds the attention and effort that Congress, the White House, the local communities, states and the private sector have paid to this important issue, but we encourage everyone to double down in their efforts. With the huge numbers of veterans returning to the private sector in the months and years ahead, it is possible that we could see these numbers shoot up if we let our guard down.

One way Congress can continue to make a difference for veterans seeking employment would be to reauthorize the Work Opportunity tax credits (WOTC) in the VOW To Hire A Hero Act. The WOTC changed the meaning of a qualified veteran in the tax code and provided up to a \$5600 tax credit to employers who hire a veteran who has served over 180 days of active service and up to \$9600 for hiring a disabled veteran who has served more than 180 days of active duty. Continuing this program would give veterans a leg up in the worst job market since the Great Depression, and it would help members of the National Guard and Reserves to find jobs. It is believed that employers, upon hearing about the Department of Defense's new "Operational Reserve" policy can possibly be less likely to hire Guard & Reserve members without additional incentives.

It is for these reasons that TREA supports **S. 6, S. 1624**, and **HR 3395**, the VOW to Hire Heroes Extension Act of 2013 sponsored by Senate Majority Leader Harry Reid (D-NV), Senator Richard Blumenthal (D-CT) and Congresswoman Julia Brownley (D-CA).

This legislation would extend the VOW to Hire Heroes Act of 2011, and Majority Leader Reid's bill would also extend the Veterans Retraining Assistance Program (VRAP), and the Wounded Warrior Act through 2016 would thus help continue the impressive progress that has been made reducing veteran unemployment.

The passage of the VRAP was an important step in helping to retrain older veterans who have exhausted their standard education benefits but needed help getting the skills to compete in a 21st-century economy and for that we thank you. While extending the VRAP program is important, it should also be noted that aligning the program's termination dates with the end of school calendars, rather than the federal government's fiscal calendar, would help smooth out difficulties that some veterans are having in paying for school that Congress has induced them to sign up for. TREA supports Senator Chuck Schumer (D-NY) in his efforts to fix this problem.

Enforcing the three-percent rule contract set aside and increasing Small Business Administration funding for new Veterans Business Development Centers and other similar programs will provide veterans with necessary training, business planning, networking, and access to capital. TREA is working with the Presidential Inter-Agency Task Force, as well as the Veteran Entrepreneurship Task Force (VET-Force) to achieve these aims as well. TREA believes that since veterans tend to hire other veterans, advancing veteran-owned businesses goes a long way towards ensuring that America successfully reintegrates the so-called “tsunami” of veterans re-entering society in the next several years.

### **VETERAN EDUCATION BENEFITS**

TREA salutes the House and Senate Veterans’ Affairs Committees for their continued support of the Post 9/11 GI Bill, which is possibly the greatest reminder of our country’s gratitude towards the men and women who have served and sacrificed for all of us.

The Department of Veterans Affairs announced late last year that the one millionth veteran applied for the Post 9/11 GI Bill and used that money to enroll in college. As more veterans are separated from active service during the drawdown that is taking place, this will become an even more important benefit as they attempt to reintegrate back into society. This is why the Post-9/11 GI Bill should not be considered for reduction in the current climate of budgetary contraction. These Post-9/11 GI Bill benefits are nonnegotiable and are priceless when it comes to re-arming veterans to compete in the 21<sup>st</sup> century job market.

Changing the rules of the game after the sacrifices have been made is no way to support a strong and healthy national defense. To ensure that these benefits remain robust, the VA must accurately measure the short-term and long-term impacts of the Post 9/11 GI Bill. Demonstrating veteran student success after using the Post 9/11 GI Bill will help prove the need to keep the benefit intact.

Educating veterans about their benefits and helping them to make sound choices with their educational allowance will enable them to choose schools that will give them the tools to pursue a career after their service to our country. It will be key to provide information about school outcomes is readily available to them. To this end, the Improving Transparency in Education for Veterans Act will help to improve the information flow and oversight regarding schools that use the Post 9/11 GI bill. The online comparison tool will help veterans make informed decisions about their future.

Further, the collaboration between the National Student Clearinghouse and the VA will allow VA to build a database of information about student veterans since 9/11. This will help tremendously when it comes to showing Congress about the importance of the Post 9/11 GI Bill.

Stories of predatory practices among some for-profit schools receiving Post-9/11

GI Bill funds have unfortunately continued over the last year. This can make it seem as though the whole for-profit education industry is rife with fraud and abuse, and thus should be cut back when the reality is much more nuanced. Some for-profit schools provide veterans with the needed flexibility have full-time jobs, family lives and use educational benefits accrued through their military service.

Furthermore, TREA feels that veterans who are residents of a state but who do not qualify for in-state tuition SOLELY because of their military service should not be punished for their service to our country. The in-state tuition system is predicated on the idea that this preference is accorded to everyone by their home state; veterans who fall into this category are denied in-state preference by every state (the Texas in-state policy only applies to active duty personnel stationed in Texas, and not after the service member transitions to civilian life).

TREA supports all current legislative efforts to provide in-state tuition to service members and veterans who do not qualify for in-state tuition solely because of their military service.

The Vet Success on Campus program (VSOC) is an example of congressional action that has positively impacted veteran student outcomes nationwide. VSOC places counselors on college campuses to provide individually-tailored career and academic advice that provide veterans with information about available services and programs that can help them succeed.

The value of the program has been magnified with the expansion of the original 32 participating campuses to a total of 94 campuses in FY 2014. Counselors at these campuses will also be allowed to help veterans from other, non-served college campuses. Hopefully this will ensure that there are well-adjusted veterans who are able to access and use the benefits that VA provides them. Increasing funding for the VSOC program would allow more veterans to fully maximize the benefit that they have earned.

The Veterans Retraining and Assistance Program (VRAP) has had some measurable successes in providing skill re-training to unemployed veterans aged 35-64. Out of roughly 140,000 VRAP applications, 125,000 applicants were approved and 70,500 have enrolled in a training program and \$518,000,000 in VRAP training benefits were dispersed, according to the VA.

For this reason TREA supports House Veteran Affairs Committee Chairman Jeff Miller's bill, **HR 352** to extend VRAP funding three months, as well as **S. 1982** and related legislation which would have extended VRAP two more years until 2016 while also aligning the funding period with the end of the school period.

## **Transition Assistance Program**

One way to encourage veteran participation in business interests is by training them through The Transition Assistance Program (TAP). TREA is happy that this has now become mandatory for the vast majority of service members transitioning out of the military as it is the best chance to provide veterans with the skills that they are going to need to thrive in the private sector.

The services provided by the Department of Labor Veterans Employment Training Service (DOLVETS) meets the ongoing employment and training needs of transitioning veterans, especially those injured or disabled, and brings together employers and qualified veterans to fill open positions.

The Jobs for Veterans State Grant program distributes funding to states for Disabled Veterans' Outreach Program (DVOP) specialists to work with veterans who have the "most significant barriers to employment" as well as Local Veterans' Employment Representative (LVER) staff. LVERs are on the front lines of the veteran employment issue, convincing employers in their local areas that veterans possess the skills and training that will make them model employees.

The Homeless Veterans' Reintegration Program aims to reintegrate homeless veterans back into both society and the workforce. In FY 2011 this program helped place thousands of previously homeless veterans on the road to recovery and integration. It has undoubtedly been a big part of lowering the overall homeless veteran population, along with the Department of Housing and Urban Development's homeless veteran voucher program. The Veterans' Workforce Investment Program is a great tool to train veterans for meaningful employment through things like apprenticeships on-the-job training and encourages effective use of services for eligible veterans who face significant barriers to employment.

TAP Employment Workshops provide critical assistance to service members and their spouses by giving them the tools necessary for a successful transition from military to civilian life. We also want to point out the importance of the Disabled Transition Assistance Program (DTAP), through which individuals leaving the military with service-connected disabilities go through an individualized course to determine their level of employability in addition to the normal TAP program. DTAP provides information to wounded service members and their families at a crucial time in their lives.

Because these individuals are often receiving care while separated from their regular units during their military service discharge process and are no longer located on or near a military installation, they are often forgotten in the transition assistance process. Coordination needs to be closer between the DOD, VA, and the DOL-VETS to ensure these severely disabled service members get the TAP services that they need and deserve.

It has come to our attention that large numbers of reserve and National Guard service members are moving through the out-processing system with only a shortened version of TAP, rather than the more comprehensive program attended by active component service members. Neither the DOD nor VA seems prepared to handle the large numbers and prolonged activation of reserve forces for the global war on terrorism. Rapidly transitioning from active duty to civilian life is a strenuous event even if a disability is not involved. Guard and reserve service members spend little of their time at demobilization sites learning about veterans' benefits and services. This is an issue that will begin to take on even more importance in the coming years.

TREA recommends that all TAP classes include in-depth VA benefits and health-care education sessions as well as allow time for question and answer sessions. Ensuring every service member is aware of existing benefits before they leave the service is the key maximizing utilization of VA benefits while also amplifying efforts that VA has made at outreach in the past year.

TREA also recommends that all VA homeless veteran assistance programs be fully funded and the HUD-VA voucher program have its funding increased so that it can fully fund the case management services to support the voucher program.

### **Survivors' Education Benefits**

For several years TREA has urged that spouses of those who have fallen since 9/11/01 should be qualified for the equivalent of the Fry Scholarships that their children presently can receive. Presently, a widow/widowers can only qualify for education benefit under Chapter 35 of Title 38 of the U.S. Code. Their benefits do not reflect the improvements of the Post 9/11 GI Bill. They receive only \$ 1003.00 a month as a full time student; with no housing allowance and no book stipend.

The average cost to attend a four-year public university has reached \$14,256 per year. In 2003, the last increase for Chapter 35 benefits, the average cost of a four-year degree was \$10,674. While Chapter 35 benefits have remained the same, the cost of education has increased by 33 percent. It is time to increase the DEA's monthly stipend.

It is also time to henceforth have the DEA program be adjusted proportionally whenever Congress raises the payments for MGIB (Chapter 30) or the Post 9/11 GI Bill (Chapter 33)

### **Female Veterans**

Women presently make up 15% of the active duty and 17% of the Reserve Components. By 2040 the VA projects that women will make up just under 18% of all living veterans. They are therefore becoming much more of a presence at the VA. The numbers keep growing. There are already over 100,000 women veterans from OIF/OEF and Operation New Dawn. 52% of these women veterans are enrolled in VA health care.

The VA is well aware that they need to modify their practices to reflect the needs of their changing beneficiary pool. In 2010 the VA Advisory Committee on Women Veterans issued a report, "Women Veterans—A Proud Tradition of Service," and we urge that more of their Recommendations be implemented.

This past year has also revealed the serious problem of sexual assault in the military. While the Department of Defense is the present focus on how to solve this terrible problem it will quickly become a problem that the VA must deal with. This is a terrible problem that the VA must develop appropriate mental health programs to treat. These female victims (and indeed male victims as well) will be their patients. They will need help. Again and again we call on the VA to create a larger and more sophisticated mental health practice. And this is another group of patients that they must serve.

It has also been discovered that women veterans are less likely to self identify as veterans as men are. This seems to be especially true of women who did not serve in war zones. Therefore it is imperative for the VA to study different methods of outreach for women veterans who deserve and need their services.

**TREA urges Congress to focus on the particular medical needs of women veterans**

### **Survivors Benefits**

A small percentage of the American people are fighting her wars, protecting her shores and preserving her freedoms. And their families and loved ones are bearing the terrible loss and loneliness when one of them dies. Of course America wants to protect and help those that are left behind. It is our duty. As President Lincoln said in his Second Inaugural address it is America's duty to "care for his widow and orphan" This same quote can be found on the front of the Department of Veterans Affairs National Headquarters. TREA is grateful for all the time and effort both Congress and the VA has spent trying to make this pledge a reality. Although the following suggestion is under the Armed Services Committees' jurisdiction it greatly involves the VA.

**SBP/DIC Offset**- TREA strongly urges Congress to end the unfair SBP/DIC offset and to make DIC equivalent to other federal survivor programs. **H.R. 32**, the Military Surviving Spouses Equity Act sponsored by Representative Joe Wilson. And Senator Bill Nelson (R-FL) It would

finally end the unfair dollar for dollar offset of military SBP and VA's DIC. Currently the flat DIC payment is \$1,215 a month- so survivors of all but the most senior enlisted retirees never receive a dime of the SBP that was purchased either with their retired pay or their lives on active duty. In 2009 a Special Survivor Indemnity Allowance was passed to partially deal with this obviously unfair practice. Starting at \$50 a month in 2009 and increasing in steps until reaching \$310 per month in 2017 this inequity is being partially offset. This year DIC widows are receiving \$150 a month in SSIA payments. And then the allowance **disappears**. This clearly does not solve the problem. There are two groups of widows (and widowers) who are harmed by this offset. The first group is made up of those whose spouses died on active duty and the second group is made up of those whose spouses died of service-connected disabilities or injuries. Both groups should be relieved of this burden.

The offset takes a dollar from the SBP payment for every dollar the widow receives from DIC. Each payment covers a different purpose and should be treated separately. The DIC is an indemnity (compensation or insurance) payment that is paid by the Department of Veterans Affairs (VA) to the survivor of a member of the military whose service directly causes his or her death. The SPB annuity, paid by the Department of Defense reflects the longevity of the service of the military member. It is ordinarily calculated at 55% of retired pay. Military retirees who elect SPB pay a portion of their retired pay to ensure that their family has a guaranteed income should the retiree die. If that retiree dies due to a service connected disability, only then would their survivor become eligible for DIC.

SBP was created as a purchased annuity- an earned employee benefit. This is a retirement plan. Qualification for SBP for an active duty death was added to stop the grim but extremely well intended practice of medical personnel keeping a lost comrade "technically alive" until he or she could be retired.

There is no offset if a federal civilian retiree dies of a service connected disability. The survivors will receive the civilian SBP and the VA's DIC without offset.) As stated above it takes into account longevity of service. The vast majority of families affected by this offset served a full career in the military. We all now accept the maxim that you recruit a member but you retain a family. This is part of the retirement package. Even the name of the Dependency Indemnity Compensation's (DIC) name makes clear that it was created for a very different reason. It is an indemnity program to compensate a family for the loss of a loved one due to his or her military service. Again, they are different programs created to fill different purposes and needs. The survivor does receive a taxable pro-rated share of the paid SBP premiums back without interest in a lump sum. But that cannot make up for the cost and difficulty paying those premiums all those years of retirement caused. If a disabled veteran earns a civilian pension as a federal civil servant the family will never lose either their survivor payment or their DIC to any offset. The service member did what he could to provide for his spouse. This is behavior the Federal Government wishes to encourage. This offset makes his attempts a failure. The offset should be abolished.

Year after year we (and many other VSOs and MSOs have asked that this unfair offset be abolished. Hopefully, this may finally be the year. In addition to the Chapter 35 improvements that we discussed in the section on Veterans Education Benefits there are several concepts under your Committees that we hope you will consider.

***DIC Equality-*** Dependency and Indemnity Compensation (DIC) set a flat monthly rate regardless of rank if the service connected death occurred after January 1st 1993. It is presently \$1215.

TREA believes that the rate of compensation should be set at 55% of the compensation paid to a 100% VA service disabled rated veterans. This would calculate the DIC recipient benefit in the same manner as survivors of disabled federal civil service employees. In 2009 a GAO report "Military and Veterans' Benefits" (GAO 10-62) found "DIC payments are almost always less than workers' compensation payments for survivors of federal employees who die as a result of job-related injuries" This would be a fair and ***rational*** way to set the DIC level.

TREA urges that Congress recalculate the method of setting the DIC payment levels.

***DIC Retention at age 55-*** Finally, we hope that survivors will be permitted retain DIC if they remarry at or after the age of 55. Presently a survivor may retain DIC upon remarriage if he or she is, at least, 57. Most federal survivor programs allow retention of survivors benefits after remarriage if the survivor is at least 55 years old. Indeed, the age to retain CHAMPVA upon remarriage **is** the normal federal program age of 55. The difference is because the two benefits were reinstated in different years and during different Congressional negotiations. There are no policy reasons for this awkward and unequal distinction and we hope that this year it can finally be corrected.

During this session of Congress SVAC Chairman Senator Sanders (I-VT) in **S.735, S.944, S.1950** and the latest **S. 1982** has included a section in each bill that would end this unfair distinction. TREA thanks the Chairman and hopes that he will continue to focus on this until it is finally corrected.

***VADIP-*** As we said in the VA health care section TREA was very grateful that Congress has directed that a three year pilot program. For years we had been urging such a fee based program (similar to the TRICARE Retiree Dental Program. Like the TRICARE Retiree it is fully funded by the enrollee premiums. It took quite a while to set it up but now it has been stood up and is running. We believe that this provides an important benefit for CHAMPVA enrollees even through the VA is not underwriting or supporting the premiums. We all know how important dental health is to general health and we believe this will be a dramatic success.

TREA hopes that you will continue to keep a close eye on this very important program.

### **CHAMPVA until the Age of 26**

TREA is a very strong supporter of that Ranking Member Representative Michaud's very fine bill H.R. 288. It will allow young adults to continue on their parent's CHAMPVA health care plan until they reach the age of 26. This would put this final cohort of young Americans on the same footing as all their peers. We do not know why it was not included but that is no reason for us not to pass H.R. before the end of this legislative year. While there has been continuing, dramatic disagreements over numerous sections of the Affordable Care Act this has been the overwhelmingly popular benefit throughout the country. Young Adults under TRICARE have this option. Young Adults on FEHBP have this option. Young Adults in all private insurance plans have this option. These young people should not be left out. We hope that finally these fine young men and women will also be covered.

TREA urges you to join your colleagues to pass this sensible bill.

### **The Non-Veteran Military Retiree**

TREA likes to say that all Military Retirees are Veterans but all Veterans are not retirees. However, that is not totally correct. While it is true for the vast sum of Military retirees, one group is left out. Guard and Reserve retirees who have served honorably for 20 or more years but have not been called to active duty on Title 10 orders for the minimum number of days (normally at least 180 consecutive days of federal active duty) do not qualify as veterans under the current law. (Active Duty for Training does not qualify a member for Veterans Status).

This is true even though they were always required to be prepared to be activated during their 20 years or more of service. Indeed, they may have served a great deal of time on other than Title 10 orders, of which there are more than 30, but they are not designated veterans.

With the dramatic changes in how our nation is using the Guard and Reserve the percentage of retirees in this situation is dropping and will continue to drop. Still, this is an anomaly that needs to be corrected. These Military Retirees should be allowed the honor of the designation of "veterans of the Armed Forces of the United States. "

Bills to grant veterans status were passed by the House of Representatives twice in the last three years and last year a provision granting veterans status was added to the House NDAA. However, it was stripped out in the final conference bill. The individuals covered by this legislation are, in fact, Military retirees and are eligible to receive active duty retiree benefits when they reach 60 years of age including military retirement pay and TRICARE health care. They have unlimited use of military Commissaries and Exchanges during and after their service.

In short, they are recognized and compensated by the federal government as military retirees. In addition, these dedicated members of the National Guard and Reserve already qualify for many Veterans benefits including VA home loans, VA burial and memorial benefits and eligibility for SGLI and VGLI.

The members who fit into this situation by definition would not qualify for a VA disability rating and thus do not qualify for a disability payment or VA health care. They have civilian health care insurance and once they turned 60 they qualify for TRICARE. We want to emphasize that this is not an attempt to gain additional benefits for this group of military retirees. In fact, the legislation passed in previous years by the House of Representatives specifically stated that no new benefits will be granted to these individuals by virtue of those bills. As a result, the Congressional Budget Office scored those bills as having no cost.

Until 9-11-01, in many ways members of the Guard and Reserve tended to be treated as step children of the military. Now the nation has realized that its military cannot function without the Operational Guard and Reserve. Thus, the simple step of recognizing the service of those who spend twenty years or more as meriting the distinction of being called a veteran is a major issue for them, one of pride and one of having their sacrifices recognized. After all, we now have a Total Force that includes the Guard and Reserve Components. They wear the same uniforms and earn the same medals and awards. Why are they not worthy of the honor of being called “veteran?”

We want to emphasize again, these non-retiree veterans want this change for the recognition and honor—not any increase in benefits. They wish to be termed “veterans of the Armed Forces of the United States”. They volunteered to serve, served honorably, and were prepared to serve on active duty if called. TREA firmly believes that a career of military service in the reserve forces of our nation should constitute qualification for veteran status under the law.

TREA urges passage of legislation by Congress to modify Title 38 to define as veterans the members of the Guard and Reserve who have served 20 or more years but who have not been activated for a qualifying length of time.

## **Conclusion**

TREA wishes to thank the Senate and House Committees on Veteran Affairs for the honor of

testifying before you. We are grateful for the opportunity to speak of our concerns and legislative goals. We are also grateful for the opportunity of working with you and your terrific staffs throughout the year.

The VA is a crucial institution for helping to preserve our Nation's freedoms by serving those who protect all from danger. TREA knows that it is a heavy burden for the members of both Committees to take on the oversight duties for such a huge, far flung, and critical Government Department. We know that you will do all in your power to assure that once again adequate and timely funding is provided for health care, that improvements are made in case adjudication, that we will all join together to help our returning veterans and indeed all veterans find jobs and businesses that will both provide them with both an adequate income and an occupation that will fill their lives with purpose; and finally that the Veterans and their families and survivors who have given so much to preserve this Union are provided the help they need and deserve. Again thank you for your attention and I would be happy to try and answer any of your questions.



***Richard J. "Rick" Delaney***

Richard "Rick" Delaney joined the United States Air Force in June of 1965. He served three tours of duty Thailand in 1966, 1969, and 1971 as well as two tours to Europe in Germany and England. He has been stationed in Tennessee, Arkansas, Alabama, Wyoming, California Georgia and South Dakota. His decorations include the Meritorious Service Medal, Air Force Commendation Medal with 1 Oak Leaf Cluster, Air Force Achievement Medal, Vietnam Gallantry Cross with Palm, Republic of Vietnam Campaign Medal, and Vietnam Service Medal with 1

Silver 4 Bronze Stars.

Rick retired from the U.S. Air Force as a Master Sergeant in October of 1989 and except for a 5 year period living in Las Vegas, has made his home in Warner Robins, Georgia, with his wife of 40 years, Pat.

Rick is currently retired from his last position with the Central Georgia Multiple Listing Service, Inc., after serving 15 years as and President and Chief Executive Officer.

He is a life member of The Retired Enlisted Association (TREA) and was a member of the committee that chartered TREA Chapter 94, Warner Robins, GA, in 1999. He also served as their first President from 1999 to 2001. In 2001, he moved to Las Vegas, and joined Chapter 84, where he served as their President from 2002-2005. He returned to Warner Robins 2006, and rejoined Chapter 94. He served as their President in 2007 and 2008 and still remains active in chapter activities. He is currently the Director, Robins AFB Retiree Activities Office and he stays actively involved in the Warner Robins community, including participating in Retiree Appreciation Days, delivering TREA's *VOICE* magazines to various locations in Warner Robins and Robins AFB, and TREA's JROTC Awards Program. Rick is also a member of the National Association of the Uniformed Services (NAUS) and is also an advocate for all veterans and retirees. Rick is currently serving as TREA: The Enlisted Association's National President, having been elected for a second term at TREA's National Convention in Colorado Springs, Colorado in September of 2013. Prior to serving on the National Board of Directors from 2009-2013 he served on several National Committees. During his tenure on TREA's Board of Directors, he chaired the Legislative Affairs, Information Technology, Convention and 5-Year Plan committees.



**TESTIMONY OF  
Richard J. Delaney USAF Master Sergeant (Ret)  
National President  
Of  
THE RETIRED ENLISTED ASSOCIATION  
Before a  
JOINT HEARING**

**Of the  
HOUSE and SENATE VETERANS AFFAIRS COMMITTEES**

**On  
March 6, 2014**

## **DISCLOSURE OF FEDERAL GRANTS OR CONTRACTS**

The Retired Enlisted Association does not currently receive, nor has it received during the current fiscal year or either of the two previous years any federal money for grants or contracts. All the Association's activities and services are accomplished completely free of any federal funding.

### **Chairmen Sanders and Miller, Ranking Members Burr and Michaud and distinguished members of both Committees'**

It is an honor for me to speak again before this Joint Committee hearing about TREA's legislative goals and concerns for this year, FY2015 and beyond concerning American's military veterans, and retirees as well as their families and survivors.

This is my second opportunity to testify before you, though I have had the honor to speak to several of you about these serious concerns. I am Richard Delaney, President of The Retired Enlisted Association. TREA was created in 1963 to give a voice to the needs and ideas of the men and women who have served in America's enlisted ranks before both the federal and state governments. Our members are from all the branches of the Armed Services. They serve in the active duty, National Guard and Reserves. Originally our members were retirees or were in line to serve a full career in the military. Now we have opened our membership to veterans of the enlisted ranks as well as retirees. This is a very happy turn of events. As a VSO with members who were DoD retirees **as well as** veterans we always worked on and studied veteran issues. Now happily they are in our ranks.

This is a critical time for the U.S. military and its present and future veterans. It is expected that by the end of this year this country's longest war will end. Throughout our history this always means a river of new veterans will be returning to civilian life. If the Department of Defense's proposals of troop strength (especially the Army) are accepted by Congress the number of service members becoming veterans will turn into a flood. It will put enormous of new burdens on a Department that has been stretched to its breaking point for the last decade. And will now be required to do even more.

America's longest war is expected to be over by the end of the year. Our remaining 34,000 men and women should be back from Afghanistan. (Though news of the last two weeks continue to show us that this is still a very dangerous and unpredictable world.)

When they return home and to their civilian lives they must be shown the honor and gratitude and given the practical help that they have earned and deserve. And their families and survivors deserve the help, support and protection that our service members expected. While there has

been real in the economy and in unemployment (please see our section on veterans employment the men and women who are returning to the civilian job market today and in the near future are still finding a very sluggish economy.

Your Committees have never forgotten this Nation's sacred duty to her veterans, and their families and survivors and we are very grateful. We were very disappointed that S. 1982 failed to pass the Senate. But we assure we will fight for all those wonderful positions. One after another. During the last several years you have shepherded through Congress dramatic increases in the amount of VA funding, passed an advanced appropriation procedure for VA healthcare and created a wonderful education G.I. Bill. We are extremely grateful for all these improvements. However when times are tough; and these are tough times people start looking for places to cut. We know you will fight to protect all these Improvements you have made. And we will join you at every turn in the fight. .

### **Advanced Funding for all of the VA**

TREA believes that it has become obvious that good governance of the VA includes advanced funding for its entire budget. In 2009 Congress wisely established two year budgeting (one year in advance) for the VA's health programs. The "Veterans Health Care Budget Reform and Transparency Act of 2009" has been a stunning success. It has allowed long term (at least longer term) planning of healthcare projects and hiring. Furthermore during this time of shutdowns and continuing resolution it has allowed for predictable timely funding. It has worked. The clearest example of that was the way VA healthcare continued without a hiccup during last fall's federal government shutdown.

Now it is time to give the rest of the VA's critical programs the same reliability. (This is approximately 14% of the VA's budget.) During last year's shutdown we came within days of delaying the issuing of veteran disability, survivors and pension checks from being issued. These are payments that many of our veterans and their families base their lives on. It is wrong to hold them hostage to the failure of Congress to reach budgetary agreements. We were disappointed that when **S. 1982** failed it meant that its provision to grant advanced funding for the rest of the VA's discretionary programs fell. But clearly **H.R 813, S.932** would succeed in accomplishing the same goal. The bills would also make it easier for the VA to "plan for key investments in information technology, claims processing and construction projects "and "would grant Congress greater oversight on multi-year funding proposals, with one year building off of the next year."

We know we are preaching to the choir. Chairman Miller (R-FL) sponsored H.R 813 and Chairman Sanders (I-VT) included advanced funding in his S.1982. Additionally, after last year's government shutdown both Chairmen said how important passing advance funding is. Chairman Sanders said: "As we saw earlier this month in the event of a prolonged shutdown, VA would not have been able to issue disability compensation, pension payments or education

benefits. That outcome would have been reprehensible.” While Chairman Miller said: “We don’t want veterans to be able to be used as political pawns in the discussion. We need to all agree to take veterans and their earned benefits off the table.”

TREA is well aware that there may well be problems convincing appropriators and leadership to move on these bills. (Indeed the VA itself refused to come out in favor of a bill that would result in making the VA much easier to run.) But it is crucial that we convince them that they should and we volunteer to do anything we can to help you succeed in reaching this important goal.

## **VA Claims Adjudication Backlog**

TREA firmly believes that the claims backlog is still the most pressing problem facing veterans Turning to the VA today. We have been saying that year after year. And it is still true. Obviously we are well aware of the time and effort Secretaries Shinseki and Hickey and their staffs have given to this problem. There has certainly been some improvement. The VA has finally automated the system, and made adjudication of cases by creating segmenting lanes and developing the “fully developed claims” project. But there is still a 400,000 case backlog. And as more and more men and women leave the service as the wars end and the end strength shrinks.

We are aware of the tremendous effort that Chairman Miller (R-FL) and indeed the membership of both Committees have expended to solve this long term problem once and for all. And we are grateful But it is still not solved. Ten years ago we wrote articles bemoaning the backlog in our monthly magazine. And we are still writing them!

TREA is hopeful that now that we may be reaching a tipping point and that the pending case load will start to go down.

It must be remembered that while a veteran is waiting for a disability decision to be made he or she must continue to keep body and soul together; as well as support a family and hopefully start a new life or continue a productive one. It is crucial for all returning veterans, **as well as those who served in the past**, to have their claims quickly **and correctly** adjudicated. It is also critical for the faith of all Americans in our system that this problem finally be solved. There has not been the consistency of outcomes throughout the Country that is essential for a system of adjudication to be fair and to be **seen** to be fair. When the public hears about the backlog or incorrectly decided cases they start to lose faith in the entire system.

## **Compliance with Americans with Disabilities Act**

Section 508 of the Americans with Disabilities Act requires that all federal government departments and agencies assure that their information be made technologically available to all Americans with disabilities. (please see part of section 508 below) This is a requirement for both the general public and for federal employees. TREA was recently made aware that after all these years the Department of Veterans Affairs has met this requirement for the blind and vision impaired.

### Section 508, Rehabilitation Act of 1973

#### **Sec. 508. Electronic and information technology**

(a) Requirements for Federal departments and agencies

(1) Accessibility

(A) Development, procurement, maintenance, or use of electronic and information technology When developing, procuring, maintaining, or using electronic and information technology, each Federal department or agency, including the United States Postal Service, shall ensure, unless an undue burden would be imposed on the department or agency, that the electronic and information technology allows, regardless of the type of medium of the technology -

(i) individuals with disabilities who are Federal employees to have access to and use of information and data that is comparable to the access to and use of the information and data by Federal employees who are not individuals with disabilities; and

(ii) individuals with disabilities who are members of the public seeking information or services from a Federal department or agency to have access to and use of information and data that is comparable to the access to and use of the information and data by such members of the public who are not individuals with disabilities.

There are numerous screen readers in the marketplace ( ZoomText, Jaws, Open Book etc) but the VA has not changed their format to be compatible with any of them. We have spoken to veterans in the general public who have found it impossible to get the information from the VA due to this technological incompatibility when using the internet. The VA's intranet programs are also not compliant- which makes it difficult or impossible for some blind veterans to work for the VA. This needs to be corrected immediately. Of course it is a big job; but Social Security has finally accomplished this so there is no reason that the VA should not. After all it is both the law and the right thing to do.

### **Chained CPI and COLA**

For the past year TREA has been very concerned by the push in favor of the Chain CPI. It now looks like the wind may be out of its sails of using this to calculate a lowered COLA for federal programs including VA disability compensation and DIC. The Administration has already announced that they will not again propose it in their budget. We know that one of the main people we must thank for effectively and unrelentingly fighting this damaging proposal is Chairman Sanders. We are very pleased that this threat has receded.

But the history of the last few months has shown that the Cost of Living Adjustment for federal government programs has been under attack and is likely to remain so. Protecting disabled

veterans and survivors who died for their country is as appropriate now as when the COLA was created and

TREA urges you to continue to protect the COLA and its method of calculation.

## **VA Health Care**

Of course we always have ideas of how to make a program, or Department work better. To make it serve our veterans in the way they deserve. But before we start our suggestions we should take some time to say what a terrific job the VA has done in so many ways. In the last year the VA has provided first class health care for over 5 ½ million veterans of the approx. 8 million veterans enrolled throughout the country. In these tight economic times they are running 153 medical center and approx 750 local clinics. They are getting first class health care nearer to where veterans live. The quality of care has become better and better and the VA's specialty health care services- spinal cord injuries, prosthetics and treatment for the blind- are among the best in the world.

When writing this testimony we do not know what the Administration will propose for the FY2014 VA healthcare budget. (Though by the time we appear before you the Administration's VA budget will have been rolled out.) We expect that it will be much more generous than many other federal departments' and agencies budgets will be. We have been very grateful for the years of increases during these difficult times. But as we have previously noted more and more veterans are coming to the VA for medical treatment.

TREA is sure that you will do everything in your power to assure that the VA is properly funded.

Long after a war is over there are tremendous costs that need to be dealt with. There are presently 22 million veterans in the United States. 67% of the 1.4 million new veterans returning from Iraq and Afghanistan have used a VA "benefit or service." The VA also estimated that there will be 600,000 more veterans using the VA in the next 5 years.

TREA hopes that Congress will pass the provision in S. 1982 that would lengthen the time that a veteran of the wars in Iraq and Afghanistan can enroll in VA healthcare without a proven service connected disability from 5 to 10 years. This will give us a real chance to discover if another agent orange or gulf war syndrome is lurking. We will be able to track and hopefully deal with it quickly.

And it goes on and on. These are amazing numbers and if the health care is not properly funded the whole system can seize and freeze up. In fact complaints are growing from different parts of the country. That is why we urge you to support and pass Representative Dennis Ross' of

Florida, **H.R. 241** “ Veterans Timely Access to Health Care Act” which would require that the VA provide an appointment within 30 days of being contacted. There were terrible delays for treatment in the past and great progress was made. We do not wish the problem to reappear.

Last year we were very upset when the Department of Defense and the Department of Veterans Affairs jointly announced that they were stopping all work on developing a single life time electronic medical record that would cover a patient from the day he or she entered the service until he or she died. And we still are. (As are many of our colleagues in other VSOs and MSOs) After literally decades of work and at least one billion spent they said it was not necessary and they have 2 systems that work fine together. We did not believe that last year and we do not believe that now. If VA’s well thought of VISTA system will work then DoD should adopt it. If the system is getting too old then at the very least both Departments should look at all the off the shelf programs that are being commercially developed and sold. And if the two Departments think it is just throwing good money after bad; then why don’t they tell us? TREA was very excited about the prospect of a single electronic system since we thought it could lead to:

- a clear and instantaneous keeping and transfer of medical information
- a system that could help our veterans become and stay healthy
- would make medical treatments easier and more successful
- would make adjudication of claims easier
- could help us recognize and trace wartime injuries and new illnesses quickly
- would save the VA and DoD countless hours of work keeping, finding and distributing
- data.

Regardless of the obvious lack of enthusiasm that both the VA and DoD has shown for this project

TREA urges all of you to continue to push for this sensible improvement in how all of our military will be medically treated. Indeed development of such a program would help everyone in our Nation.

TREA urges the VA to continue their analysis of what is causing the spike in veterans suicides and how to better treat them. Also, we urge the VA to focus on their own finding that 69% of veterans’ suicides are men and women over the age of 50. Since this is clearly true from a VA 2 year study. It seems likely that the treatments of veterans who have recently returned from a war zone may not be effective in dealing with the problems burdening a man or woman who had been out of the military for decades.

We also hope that Congress passes Representative Michael’s H.R. 1443 which would create a research study in the VA’s Auditory Center of Excellence for the treatment of tinnitus. Tinnitus is the most prevalent service connected disability for enlisted veterans of the U.S. Air Force. It severely damages their quality of life. It should be studied and if at all possible cured.

We also note once again that for older Veterans there will be an ever growing need for nursing home

care. The demographics of many of our elderly veterans require the VA to focus on this urgent issue. The financial losses that many American families suffered for the past several years (with little time to regroup) will naturally cause them to look to VA and State programs for help in caring for their loved ones. The VA's partnership and support with state veteran nursing homes is a good program that in even these difficult times must be increased. The per diem paid by the VA should be increased.

While providing care for elderly veterans the VA should be allowed to do what all other qualified American providers are allowed to do: collect from Medicare. These Veterans have paid for their Medicare coverage throughout their careers. The VA should be allowed to become a Medicare provider and collect appropriate fees..

TREA wishes to note that our long term goal of providing some general dental care to the great majority of veterans who are enrolled in VA and receive no dental care (or support for dental care) is a step closer to existing the VA Dental Insurance Program \*VADIP) 's 3 year pilot was finally stood up last fall. Like the TRICARE Retiree Dental Program the federal government does not underwrite any of the premium costs. But it has set up the programs, issued the RFPs and gave the pilot contracts to 2 large insurance companies –Delta Dental and MetLife. We expect both companies to work hard to make the program and obvious success with the hope of assuring its permanence. It has become dramatically clear how crucial good dental health is for general health. For many years veterans requested that the VA help them get this crucial treatment. Hopefully this program is the first step and we thank you very much for insisting on this pilot.

## **Veterans Employment**

The recently announced force reductions and the winding up of the war in Afghanistan will lead to hundreds of thousands of military veterans leaving the service over the next several years. Our country should reward their service by making every effort to ensure that they successfully reintegrate back into society. The best way to do this is to make sure they have jobs.

The unemployment rate for veterans, which has been an unsightly sore on American society for the last several years, has admittedly improved in the last year. The 5.6% unemployment rate for all veterans is a welcome change. But the 7.9% unemployment rate for Post-9/11 veterans recently rose, and it is still higher than the 6.6% national rate. We thank the committees for their focus on this pressing issue and urge them to keep the pressure on businesses to hire veterans.

Female veterans have been suffering severely high unemployment rates in recent years, but according to the Bureau of Labor Statistics (BLS) the rate has come down dramatically in the last year. The overall rate of female veteran unemployment is 4.6%, compared to 8.8% the year before. Post 9/11 female veterans have an unemployment rate of 6.7%, which is down from 17.1% the year before. Overall, Post 9/11 veterans have a 7.9% unemployment rate, with male Post 9/11 veterans clocking in just a tick above at 8.2%.

As has been known for years now, the unemployment rate for veterans can fluctuate greatly among different sub-groups, and the numbers can change from month to month because of small sample sizes. The sub-group of veterans who have had the hardest time finding work is the 18 to 24 age group. Not surprisingly, this is the age group with the highest unemployment rate nationally as well. 25% of this group of veterans was unemployed in 2011, and as of December of 2013 the unemployment rate for the youngest veteran age cohort is 15.6%, compared to 11.4% for non-veterans in the same age cohort.. So while the improvement is welcome, it is clear that there is much, much more work to be done.

TREA applauds the attention and effort that Congress, the White House, the local communities, states and the private sector have paid to this important issue, but we encourage everyone to double down in their efforts. With the huge numbers of veterans returning to the private sector in the months and years ahead, it is possible that we could see these numbers shoot up if we let our guard down.

One way Congress can continue to make a difference for veterans seeking employment would be to reauthorize the Work Opportunity tax credits (WOTC) in the VOW To Hire A Hero Act. The WOTC changed the meaning of a qualified veteran in the tax code and provided up to a \$5600 tax credit to employers who hire a veteran who has served over 180 days of active service and up to \$9600 for hiring a disabled veteran who has served more than 180 days of active duty. Continuing this program would give veterans a leg up in the worst job market since the Great Depression, and it would help members of the National Guard and Reserves to find jobs. It is believed that employers, upon hearing about the Department of Defense's new "Operational Reserve" policy can possibly be less likely to hire Guard & Reserve members without additional incentives.

It is for these reasons that TREA supports **S. 6, S. 1624**, and **HR 3395**, the VOW to Hire Heroes Extension Act of 2013 sponsored by Senate Majority Leader Harry Reid (D-NV), Senator Richard Blumenthal (D-CT) and Congresswoman Julia Brownley (D-CA).

This legislation would extend the VOW to Hire Heroes Act of 2011, and Majority Leader Reid's bill would also extend the Veterans Retraining Assistance Program (VRAP), and the Wounded Warrior Act through 2016 would thus help continue the impressive progress that has been made reducing veteran unemployment.

The passage of the VRAP was an important step in helping to retrain older veterans who have exhausted their standard education benefits but needed help getting the skills to compete in a 21st-century economy and for that we thank you. While extending the VRAP program is important, it should also be noted that aligning the program's termination dates with the end of school calendars, rather than the federal government's fiscal calendar, would help smooth out difficulties that some veterans are having in paying for school that Congress has induced them to sign up for. TREA supports Senator Chuck Schumer (D-NY) in his efforts to fix this problem.

Enforcing the three-percent rule contract set aside and increasing Small Business Administration funding for new Veterans Business Development Centers and other similar programs will provide veterans with necessary training, business planning, networking, and access to capital. TREA is working with the Presidential Inter-Agency Task Force, as well as the Veteran Entrepreneurship Task Force (VET-Force) to achieve these aims as well. TREA believes that since veterans tend to hire other veterans, advancing veteran-owned businesses goes a long way towards ensuring that America successfully reintegrates the so-called “tsunami” of veterans re-entering society in the next several years.

### **VETERAN EDUCATION BENEFITS**

TREA salutes the House and Senate Veterans’ Affairs Committees for their continued support of the Post 9/11 GI Bill, which is possibly the greatest reminder of our country’s gratitude towards the men and women who have served and sacrificed for all of us.

The Department of Veterans Affairs announced late last year that the one millionth veteran applied for the Post 9/11 GI Bill and used that money to enroll in college. As more veterans are separated from active service during the drawdown that is taking place, this will become an even more important benefit as they attempt to reintegrate back into society. This is why the Post-9/11 GI Bill should not be considered for reduction in the current climate of budgetary contraction. These Post-9/11 GI Bill benefits are nonnegotiable and are priceless when it comes to re-arming veterans to compete in the 21<sup>st</sup> century job market.

Changing the rules of the game after the sacrifices have been made is no way to support a strong and healthy national defense. To ensure that these benefits remain robust, the VA must accurately measure the short-term and long-term impacts of the Post 9/11 GI Bill.

Demonstrating veteran student success after using the Post 9/11 GI Bill will help prove the need to keep the benefit intact.

Educating veterans about their benefits and helping them to make sound choices with their educational allowance will enable them to choose schools that will give them the tools to pursue a career after their service to our country. It will be key to provide information about school outcomes is readily available to them. To this end, the Improving Transparency in Education for Veterans Act will help to improve the information flow and oversight regarding schools that use the Post 9/11 GI bill. The online comparison tool will help veterans make informed decisions about their future.

Further, the collaboration between the National Student Clearinghouse and the VA will allow VA to build a database of information about student veterans since 9/11. This will help tremendously when it comes to showing Congress about the importance of the Post 9/11 GI Bill.

Stories of predatory practices among some for-profit schools receiving Post-9/11

GI Bill funds have unfortunately continued over the last year. This can make it seem as though the whole for-profit education industry is rife with fraud and abuse, and thus should be cut back when the reality is much more nuanced. Some for-profit schools provide veterans with the needed flexibility have full-time jobs, family lives and use educational benefits accrued through their military service.

Furthermore, TREA feels that veterans who are residents of a state but who do not qualify for in-state tuition SOLELY because of their military service should not be punished for their service to our county. The in-state tuition system is predicated on the idea that this preference is accorded to everyone by their home state; veterans who fall into this category are denied in-state preference by every state (the Texas in-state policy only applies to active duty personnel stationed in Texas, and not after the service member transitions to civilian life).

TREA supports all current legislative efforts to provide in-state tuition to service members and veterans who do not qualify for in-state tuition solely because of their military service.

The Vet Success on Campus program (VSOC) is an example of congressional action that has positively impacted veteran student outcomes nationwide. VSOC places counselors on college campuses to provide individually-tailored career and academic advice that provide veterans with information about available services and programs that can help them succeed.

The value of the program has been magnified with the expansion of the original 32 participating campuses to a total of 94 campuses in FY 2014. Counselors at these campuses will also be allowed to help veterans from other, non-served college campuses. Hopefully this will ensure that there are well-adjusted veterans who are able to access and use the benefits that VA provides them. Increasing funding for the VSOC program would allow more veterans to fully maximize the benefit that they have earned.

The Veterans Retraining and Assistance Program (VRAP) has had some measurable successes in providing skill re-training to unemployed veterans aged 35-64. Out of roughly 140,000 VRAP applications, 125,000 applicants were approved and 70,500 have enrolled in a training program and \$518,000,000 in VRAP training benefits were dispersed, according to the VA.

For this reason TREA supports House Veteran Affairs Committee Chairman Jeff Miller's bill, **HR 352** to extend VRAP funding three months, as well as **S. 1982** and related legislation which would have extended VRAP two more years until 2016 while also aligning the funding period with the end of the school period.

## **Transition Assistance Program**

One way to encourage veteran participation in business interests is by training them through The Transition Assistance Program (TAP). TREA is happy that this has now become mandatory for the vast majority of service members transitioning out of the military as it is the best chance to provide veterans with the skills that they are going to need to thrive in the private sector.

The services provided by the Department of Labor Veterans Employment Training Service (DOLVETS) meets the ongoing employment and training needs of transitioning veterans, especially those injured or disabled, and brings together employers and qualified veterans to fill open positions.

The Jobs for Veterans State Grant program distributes funding to states for Disabled Veterans' Outreach Program (DVOP) specialists to work with veterans who have the "most significant barriers to employment" as well as Local Veterans' Employment Representative (LVER) staff. LVERs are on the front lines of the veteran employment issue, convincing employers in their local areas that veterans possess the skills and training that will make them model employees.

The Homeless Veterans' Reintegration Program aims to reintegrate homeless veterans back into both society and the workforce. In FY 2011 this program helped place thousands of previously homeless veterans on the road to recovery and integration. It has undoubtedly been a big part of lowering the overall homeless veteran population, along with the Department of Housing and Urban Development's homeless veteran voucher program. The Veterans' Workforce Investment Program is a great tool to train veterans for meaningful employment through things like apprenticeships on-the-job training and encourages effective use of services for eligible veterans who face significant barriers to employment.

TAP Employment Workshops provide critical assistance to service members and their spouses by giving them the tools necessary for a successful transition from military to civilian life. We also want to point out the importance of the Disabled Transition Assistance Program (DTAP), through which individuals leaving the military with service-connected disabilities go through an individualized course to determine their level of employability in addition to the normal TAP program. DTAP provides information to wounded service members and their families at a crucial time in their lives.

Because these individuals are often receiving care while separated from their regular units during their military service discharge process and are no longer located on or near a military installation, they are often forgotten in the transition assistance process. Coordination needs to be closer between the DOD, VA, and the DOL-VETS to ensure these severely disabled service members get the TAP services that they need and deserve.

It has come to our attention that large numbers of reserve and National Guard service members are moving through the out-processing system with only a shortened version of TAP, rather than the more comprehensive program attended by active component service members. Neither the DOD nor VA seems prepared to handle the large numbers and prolonged activation of reserve forces for the global war on terrorism. Rapidly transitioning from active duty to civilian life is a strenuous event even if a disability is not involved. Guard and reserve service members spend little of their time at demobilization sites learning about veterans' benefits and services. This is an issue that will begin to take on even more importance in the coming years.

TREA recommends that all TAP classes include in-depth VA benefits and health-care education sessions as well as allow time for question and answer sessions. Ensuring every service member is aware of existing benefits before they leave the service is the key maximizing utilization of VA benefits while also amplifying efforts that VA has made at outreach in the past year.

TREA also recommends that all VA homeless veteran assistance programs be fully funded and the HUD-VA voucher program have its funding increased so that it can fully fund the case management services to support the voucher program.

### **Survivors' Education Benefits**

For several years TREA has urged that spouses of those who have fallen since 9/11/01 should be qualified for the equivalent of the Fry Scholarships that their children presently can receive. Presently, a widow/widowers can only qualify for education benefit under Chapter 35 of Title 38 of the U.S. Code. Their benefits do not reflect the improvements of the Post 9/11 GI Bill. They receive only \$ 1003.00 a month as a full time student; with no housing allowance and no book stipend.

The average cost to attend a four-year public university has reached \$14,256 per year. In 2003, the last increase for Chapter 35 benefits, the average cost of a four-year degree was \$10,674. While Chapter 35 benefits have remained the same, the cost of education has increased by 33 percent. It is time to increase the DEA's monthly stipend.

It is also time to henceforth have the DEA program be adjusted proportionally whenever Congress raises the payments for MGIB (Chapter 30) or the Post 9/11 GI Bill (Chapter 33)

### **Female Veterans**

Women presently make up 15% of the active duty and 17% of the Reserve Components. By 2040 the VA projects that women will make up just under 18% of all living veterans. They are therefore becoming much more of a presence at the VA. The numbers keep growing. There are already over 100,000 women veterans from OIF/OEF and Operation New Dawn. 52% of these women veterans are enrolled in VA health care.

The VA is well aware that they need to modify their practices to reflect the needs of their changing beneficiary pool. In 2010 the VA Advisory Committee on Women Veterans issued a report, "Women Veterans—A Proud Tradition of Service," and we urge that more of their Recommendations be implemented.

This past year has also revealed the serious problem of sexual assault in the military. While the Department of Defense is the present focus on how to solve this terrible problem it will quickly become a problem that the VA must deal with. This is a terrible problem that the VA must develop appropriate mental health programs to treat. These female victims (and indeed male victims as well) will be their patients. They will need help. Again and again we call on the VA to create a larger and more sophisticated mental health practice. And this is another group of patients that they must serve.

It has also been discovered that women veterans are less likely to self identify as veterans as men are. This seems to be especially true of women who did not serve in war zones. Therefore it is imperative for the VA to study different methods of outreach for women veterans who deserve and need their services.

**TREA urges Congress to focus on the particular medical needs of women veterans**

### **Survivors Benefits**

A small percentage of the American people are fighting her wars, protecting her shores and preserving her freedoms. And their families and loved ones are bearing the terrible loss and loneliness when one of them dies. Of course America wants to protect and help those that are left behind. It is our duty. As President Lincoln said in his Second Inaugural address it is America's duty to "care for his widow and orphan" This same quote can be found on the front of the Department of Veterans Affairs National Headquarters. TREA is grateful for all the time and effort both Congress and the VA has spent trying to make this pledge a reality. Although the following suggestion is under the Armed Services Committees' jurisdiction it greatly involves the VA.

**SBP/DIC Offset**- TREA strongly urges Congress to end the unfair SBP/DIC offset and to make DIC equivalent to other federal survivor programs. **H.R. 32**, the Military Surviving Spouses Equity Act sponsored by Representative Joe Wilson. And Senator Bill Nelson (R-FL) It would

finally end the unfair dollar for dollar offset of military SBP and VA's DIC. Currently the flat DIC payment is \$1,215 a month- so survivors of all but the most senior enlisted retirees never receive a dime of the SBP that was purchased either with their retired pay or their lives on active duty. In 2009 a Special Survivor Indemnity Allowance was passed to partially deal with this obviously unfair practice. Starting at \$50 a month in 2009 and increasing in steps until reaching \$310 per month in 2017 this inequity is being partially offset. This year DIC widows are receiving \$150 a month in SSIA payments. And then the allowance **disappears**. This clearly does not solve the problem. There are two groups of widows (and widowers) who are harmed by this offset. The first group is made up of those whose spouses died on active duty and the second group is made up of those whose spouses died of service-connected disabilities or injuries. Both groups should be relieved of this burden.

The offset takes a dollar from the SBP payment for every dollar the widow receives from DIC. Each payment covers a different purpose and should be treated separately. The DIC is an indemnity (compensation or insurance) payment that is paid by the Department of Veterans Affairs (VA) to the survivor of a member of the military whose service directly causes his or her death. The SPB annuity, paid by the Department of Defense reflects the longevity of the service of the military member. It is ordinarily calculated at 55% of retired pay. Military retirees who elect SPB pay a portion of their retired pay to ensure that their family has a guaranteed income should the retiree die. If that retiree dies due to a service connected disability, only then would their survivor become eligible for DIC.

SBP was created as a purchased annuity- an earned employee benefit. This is a retirement plan. Qualification for SBP for an active duty death was added to stop the grim but extremely well intended practice of medical personnel keeping a lost comrade "technically alive" until he or she could be retired.

There is no offset if a federal civilian retiree dies of a service connected disability. The survivors will receive the civilian SBP and the VA's DIC without offset.) As stated above it takes into account longevity of service. The vast majority of families affected by this offset served a full career in the military. We all now accept the maxim that you recruit a member but you retain a family. This is part of the retirement package. Even the name of the Dependency Indemnity Compensation's (DIC) name makes clear that it was created for a very different reason. It is an indemnity program to compensate a family for the loss of a loved one due to his or her military service. Again, they are different programs created to fill different purposes and needs. The survivor does receive a taxable pro-rated share of the paid SBP premiums back without interest in a lump sum. But that cannot make up for the cost and difficulty paying those premiums all those years of retirement caused. If a disabled veteran earns a civilian pension as a federal civil servant the family will never lose either their survivor payment or their DIC to any offset. The service member did what he could to provide for his spouse. This is behavior the Federal Government wishes to encourage. This offset makes his attempts a failure. The offset should be abolished.

Year after year we (and many other VSOs and MSOs have asked that this unfair offset be abolished. Hopefully, this may finally be the year. In addition to the Chapter 35 improvements that we discussed in the section on Veterans Education Benefits there are several concepts under your Committees that we hope you will consider.

***DIC Equality-*** Dependency and Indemnity Compensation (DIC) set a flat monthly rate regardless of rank if the service connected death occurred after January 1st 1993. It is presently \$1215.

TREA believes that the rate of compensation should be set at 55% of the compensation paid to a 100% VA service disabled rated veterans. This would calculate the DIC recipient benefit in the same manner as survivors of disabled federal civil service employees. In 2009 a GAO report "Military and Veterans' Benefits" (GAO 10-62) found "DIC payments are almost always less than workers' compensation payments for survivors of federal employees who die as a result of job-related injuries" This would be a fair and ***rational*** way to set the DIC level.

TREA urges that Congress recalculate the method of setting the DIC payment levels.

***DIC Retention at age 55-*** Finally, we hope that survivors will be permitted retain DIC if they remarry at or after the age of 55. Presently a survivor may retain DIC upon remarriage if he or she is, at least, 57. Most federal survivor programs allow retention of survivors benefits after remarriage if the survivor is at least 55 years old. Indeed, the age to retain CHAMPVA upon remarriage **is** the normal federal program age of 55. The difference is because the two benefits were reinstated in different years and during different Congressional negotiations. There are no policy reasons for this awkward and unequal distinction and we hope that this year it can finally be corrected.

During this session of Congress SVAC Chairman Senator Sanders (I-VT) in **S.735, S.944, S.1950** and the latest **S. 1982** has included a section in each bill that would end this unfair distinction. TREA thanks the Chairman and hopes that he will continue to focus on this until it is finally corrected.

***VADIP-*** As we said in the VA health care section TREA was very grateful that Congress has directed that a three year pilot program. For years we had been urging such a fee based program (similar to the TRICARE Retiree Dental Program. Like the TRICARE Retiree it is fully funded by the enrollee premiums. It took quite a while to set it up but now it has been stood up and is running. We believe that this provides an important benefit for CHAMPVA enrollees even though the VA is not underwriting or supporting the premiums. We all know how important dental health is to general health and we believe this will be a dramatic success.

TREA hopes that you will continue to keep a close eye on this very important program.

**CHAMPVA until the Age of 26**

TREA is a very strong supporter of that Ranking Member Representative Michaud's very fine bill H.R. 288. It will allow young adults to continue on their parent's CHAMPVA health care plan until they reach the age of 26. This would put this final cohort of young Americans on the same footing as all their peers. We do not know why it was not included but that is no reason for us not to pass H.R. before the end of this legislative year. While there has been continuing, dramatic disagreements over numerous sections of the Affordable Care Act this has been the overwhelmingly popular benefit throughout the country. Young Adults under TRICARE have this option. Young Adults on FEHBP have this option. Young Adults in all private insurance plans have this option. These young people should not be left out. We hope that finally these fine young men and women will also be covered.

TREA urges you to join your colleagues to pass this sensible bill.

### **The Non-Veteran Military Retiree**

TREA likes to say that all Military Retirees are Veterans but all Veterans are not retirees. However, that is not totally correct. While it is true for the vast sum of Military retirees, one group is left out. Guard and Reserve retirees who have served honorably for 20 or more years but have not been called to active duty on Title 10 orders for the minimum number of days (normally at least 180 consecutive days of federal active duty) do not qualify as veterans under the current law. (Active Duty for Training does not qualify a member for Veterans Status).

This is true even though they were always required to be prepared to be activated during their 20 years or more of service. Indeed, they may have served a great deal of time on other than Title 10 orders, of which there are more than 30, but they are not designated veterans.

With the dramatic changes in how our nation is using the Guard and Reserve the percentage of retirees in this situation is dropping and will continue to drop. Still, this is an anomaly that needs to be corrected. These Military Retirees should be allowed the honor of the designation of "veterans of the Armed Forces of the United States. "

Bills to grant veterans status were passed by the House of Representatives twice in the last three years and last year a provision granting veterans status was added to the House NDAA. However, it was stripped out in the final conference bill. The individuals covered by this legislation are, in fact, Military retirees and are eligible to receive active duty retiree benefits when they reach 60 years of age including military retirement pay and TRICARE health care. They have unlimited use of military Commissaries and Exchanges during and after their service.

In short, they are recognized and compensated by the federal government as military retirees. In addition, these dedicated members of the National Guard and Reserve already qualify for many Veterans benefits including VA home loans, VA burial and memorial benefits and eligibility for SGLI and VGLI.

The members who fit into this situation by definition would not qualify for a VA disability rating and thus do not qualify for a disability payment or VA health care. They have civilian health care insurance and once they turned 60 they qualify for TRICARE. We want to emphasize that this is not an attempt to gain additional benefits for this group of military retirees. In fact, the legislation passed in previous years by the House of Representatives specifically stated that no new benefits will be granted to these individuals by virtue of those bills. As a result, the Congressional Budget Office scored those bills as having no cost.

Until 9-11-01, in many ways members of the Guard and Reserve tended to be treated as step children of the military. Now the nation has realized that its military cannot function without the Operational Guard and Reserve. Thus, the simple step of recognizing the service of those who spend twenty years or more as meriting the distinction of being called a veteran is a major issue for them, one of pride and one of having their sacrifices recognized. After all, we now have a Total Force that includes the Guard and Reserve Components. They wear the same uniforms and earn the same medals and awards. Why are they not worthy of the honor of being called “veteran?”

We want to emphasize again, these non-retiree veterans want this change for the recognition and honor—not any increase in benefits. They wish to be termed “veterans of the Armed Forces of the United States”. They volunteered to serve, served honorably, and were prepared to serve on active duty if called. TREA firmly believes that a career of military service in the reserve forces of our nation should constitute qualification for veteran status under the law.

TREA urges passage of legislation by Congress to modify Title 38 to define as veterans the members of the Guard and Reserve who have served 20 or more years but who have not been activated for a qualifying length of time.

## **Conclusion**

TREA wishes to thank the Senate and House Committees on Veteran Affairs for the honor of

testifying before you. We are grateful for the opportunity to speak of our concerns and legislative goals. We are also grateful for the opportunity of working with you and your terrific staffs throughout the year.

The VA is a crucial institution for helping to preserve our Nation's freedoms by serving those who protect all from danger. TREA knows that it is a heavy burden for the members of both Committees to take on the oversight duties for such a huge, far flung, and critical Government Department. We know that you will do all in your power to assure that once again adequate and timely funding is provided for health care, that improvements are made in case adjudication, that we will all join together to help our returning veterans and indeed all veterans find jobs and businesses that will both provide them with both an adequate income and an occupation that will fill their lives with purpose; and finally that the Veterans and their families and survivors who have given so much to preserve this Union are provided the help they need and deserve. Again thank you for your attention and I would be happy to try and answer any of your questions.



***Richard J. "Rick" Delaney***

Richard "Rick" Delaney joined the United States Air Force in June of 1965. He served three tours of duty Thailand in 1966, 1969, and 1971 as well as two tours to Europe in Germany and England. He has been stationed in Tennessee, Arkansas, Alabama, Wyoming, California Georgia and South Dakota. His decorations include the Meritorious Service Medal, Air Force Commendation Medal with 1 Oak Leaf Cluster, Air Force Achievement Medal, Vietnam Gallantry Cross with Palm, Republic of Vietnam Campaign Medal, and Vietnam Service Medal with 1

Silver 4 Bronze Stars.

Rick retired from the U.S. Air Force as a Master Sergeant in October of 1989 and except for a 5 year period living in Las Vegas, has made his home in Warner Robins, Georgia, with his wife of 40 years, Pat.

Rick is currently retired from his last position with the Central Georgia Multiple Listing Service, Inc., after serving 15 years as and President and Chief Executive Officer.

He is a life member of The Retired Enlisted Association (TREA) and was a member of the committee that chartered TREA Chapter 94, Warner Robins, GA, in 1999. He also served as their first President from 1999 to 2001. In 2001, he moved to Las Vegas, and joined Chapter 84, where he served as their President from 2002-2005. He returned to Warner Robins 2006, and rejoined Chapter 94. He served as their President in 2007 and 2008 and still remains active in chapter activities. He is currently the Director, Robins AFB Retiree Activities Office and he stays actively involved in the Warner Robins community, including participating in Retiree Appreciation Days, delivering TREA's *VOICE* magazines to various locations in Warner Robins and Robins AFB, and TREA's JROTC Awards Program. Rick is also a member of the National Association of the Uniformed Services (NAUS) and is also an advocate for all veterans and retirees. Rick is currently serving as TREA: The Enlisted Association's National President, having been elected for a second term at TREA's National Convention in Colorado Springs, Colorado in September of 2013. Prior to serving on the National Board of Directors from 2009-2013 he served on several National Committees. During his tenure on TREA's Board of Directors, he chaired the Legislative Affairs, Information Technology, Convention and 5-Year Plan committees.



**TESTIMONY OF  
Richard J. Delaney USAF Master Sergeant (Ret)  
National President  
Of  
THE RETIRED ENLISTED ASSOCIATION  
Before a  
JOINT HEARING**

**Of the  
HOUSE and SENATE VETERANS AFFAIRS COMMITTEES**

**On  
March 6, 2014**

## **DISCLOSURE OF FEDERAL GRANTS OR CONTRACTS**

The Retired Enlisted Association does not currently receive, nor has it received during the current fiscal year or either of the two previous years any federal money for grants or contracts. All the Association's activities and services are accomplished completely free of any federal funding.

### **Chairmen Sanders and Miller, Ranking Members Burr and Michaud and distinguished members of both Committees'**

It is an honor for me to speak again before this Joint Committee hearing about TREA's legislative goals and concerns for this year, FY2015 and beyond concerning American's military veterans, and retirees as well as their families and survivors.

This is my second opportunity to testify before you, though I have had the honor to speak to several of you about these serious concerns. I am Richard Delaney, President of The Retired Enlisted Association. TREA was created in 1963 to give a voice to the needs and ideas of the men and women who have served in America's enlisted ranks before both the federal and state governments. Our members are from all the branches of the Armed Services. They serve in the active duty, National Guard and Reserves. Originally our members were retirees or were in line to serve a full career in the military. Now we have opened our membership to veterans of the enlisted ranks as well as retirees. This is a very happy turn of events. As a VSO with members who were DoD retirees **as well as** veterans we always worked on and studied veteran issues. Now happily they are in our ranks.

This is a critical time for the U.S. military and its present and future veterans. It is expected that by the end of this year this country's longest war will end. Throughout our history this always means a river of new veterans will be returning to civilian life. If the Department of Defense's proposals of troop strength (especially the Army) are accepted by Congress the number of service members becoming veterans will turn into a flood. It will put enormous of new burdens on a Department that has been stretched to its breaking point for the last decade. And will now be required to do even more.

America's longest war is expected to be over by the end of the year. Our remaining 34,000 men and women should be back from Afghanistan. (Though news of the last two weeks continue to show us that this is still a very dangerous and unpredictable world.)

When they return home and to their civilian lives they must be shown the honor and gratitude and given the practical help that they have earned and deserve. And their families and survivors deserve the help, support and protection that our service members expected. While there has

been real in the economy and in unemployment (please see our section on veterans employment the men and women who are returning to the civilian job market today and in the near future are still finding a very sluggish economy.

Your Committees have never forgotten this Nation's sacred duty to her veterans, and their families and survivors and we are very grateful. We were very disappointed that S. 1982 failed to pass the Senate. But we assure we will fight for all those wonderful positions. One after another. During the last several years you have shepherded through Congress dramatic increases in the amount of VA funding, passed an advanced appropriation procedure for VA healthcare and created a wonderful education G.I. Bill. We are extremely grateful for all these improvements. However when times are tough; and these are tough times people start looking for places to cut. We know you will fight to protect all these Improvements you have made. And we will join you at every turn in the fight. .

### **Advanced Funding for all of the VA**

TREA believes that it has become obvious that good governance of the VA includes advanced funding for its entire budget. In 2009 Congress wisely established two year budgeting (one year in advance) for the VA's health programs. The "Veterans Health Care Budget Reform and Transparency Act of 2009" has been a stunning success. It has allowed long term (at least longer term) planning of healthcare projects and hiring. Furthermore during this time of shutdowns and continuing resolution it has allowed for predictable timely funding. It has worked. The clearest example of that was the way VA healthcare continued without a hiccup during last fall's federal government shutdown.

Now it is time to give the rest of the VA's critical programs the same reliability. (This is approximately 14% of the VA's budget.) During last year's shutdown we came within days of delaying the issuing of veteran disability, survivors and pension checks from being issued. These are payments that many of our veterans and their families base their lives on. It is wrong to hold them hostage to the failure of Congress to reach budgetary agreements. We were disappointed that when **S. 1982** failed it meant that its provision to grant advanced funding for the rest of the VA's discretionary programs fell. But clearly **H.R 813, S.932** would succeed in accomplishing the same goal. The bills would also make it easier for the VA to "plan for key investments in information technology, claims processing and construction projects "and "would grant Congress greater oversight on multi-year funding proposals, with one year building off of the next year."

We know we are preaching to the choir. Chairman Miller (R-FL) sponsored H.R 813 and Chairman Sanders (I-VT) included advanced funding in his S.1982. Additionally, after last year's government shutdown both Chairmen said how important passing advance funding is. Chairman Sanders said: "As we saw earlier this month in the event of a prolonged shutdown, VA would not have been able to issue disability compensation, pension payments or education

benefits. That outcome would have been reprehensible.” While Chairman Miller said: “We don’t want veterans to be able to be used as political pawns in the discussion. We need to all agree to take veterans and their earned benefits off the table.”

TREA is well aware that there may well be problems convincing appropriators and leadership to move on these bills. (Indeed the VA itself refused to come out in favor of a bill that would result in making the VA much easier to run.) But it is crucial that we convince them that they should and we volunteer to do anything we can to help you succeed in reaching this important goal.

## **VA Claims Adjudication Backlog**

TREA firmly believes that the claims backlog is still the most pressing problem facing veterans Turning to the VA today. We have been saying that year after year. And it is still true. Obviously we are well aware of the time and effort Secretaries Shinseki and Hickey and their staffs have given to this problem. There has certainly been some improvement. The VA has finally automated the system, and made adjudication of cases by creating segmenting lanes and developing the “fully developed claims” project. But there is still a 400,000 case backlog. And as more and more men and women leave the service as the wars end and the end strength shrinks.

We are aware of the tremendous effort that Chairman Miller (R-FL) and indeed the membership of both Committees have expended to solve this long term problem once and for all. And we are grateful But it is still not solved. Ten years ago we wrote articles bemoaning the backlog in our monthly magazine. And we are still writing them!

TREA is hopeful that now that we may be reaching a tipping point and that the pending case load will start to go down.

It must be remembered that while a veteran is waiting for a disability decision to be made he or she must continue to keep body and soul together; as well as support a family and hopefully start a new life or continue a productive one. It is crucial for all returning veterans, **as well as those who served in the past**, to have their claims quickly **and correctly** adjudicated. It is also critical for the faith of all Americans in our system that this problem finally be solved. There has not been the consistency of outcomes throughout the Country that is essential for a system of adjudication to be fair and to be **seen** to be fair. When the public hears about the backlog or incorrectly decided cases they start to lose faith in the entire system.

## **Compliance with Americans with Disabilities Act**

Section 508 of the Americans with Disabilities Act requires that all federal government departments and agencies assure that their information be made technologically available to all Americans with disabilities. (please see part of section 508 below) This is a requirement for both the general public and for federal employees. TREA was recently made aware that after all these years the Department of Veterans Affairs has met this requirement for the blind and vision impaired.

### Section 508, Rehabilitation Act of 1973

#### **Sec. 508. Electronic and information technology**

(a) Requirements for Federal departments and agencies

(1) Accessibility

(A) Development, procurement, maintenance, or use of electronic and information technology When developing, procuring, maintaining, or using electronic and information technology, each Federal department or agency, including the United States Postal Service, shall ensure, unless an undue burden would be imposed on the department or agency, that the electronic and information technology allows, regardless of the type of medium of the technology -

(i) individuals with disabilities who are Federal employees to have access to and use of information and data that is comparable to the access to and use of the information and data by Federal employees who are not individuals with disabilities; and

(ii) individuals with disabilities who are members of the public seeking information or services from a Federal department or agency to have access to and use of information and data that is comparable to the access to and use of the information and data by such members of the public who are not individuals with disabilities.

There are numerous screen readers in the marketplace ( ZoomText, Jaws, Open Book etc) but the VA has not changed their format to be compatible with any of them. We have spoken to veterans in the general public who have found it impossible to get the information from the VA due to this technological incompatibility when using the internet. The VA's intranet programs are also not compliant- which makes it difficult or impossible for some blind veterans to work for the VA. This needs to be corrected immediately. Of course it is a big job; but Social Security has finally accomplished this so there is no reason that the VA should not. After all it is both the law and the right thing to do.

### **Chained CPI and COLA**

For the past year TREA has been very concerned by the push in favor of the Chain CPI. It now looks like the wind may be out of its sails of using this to calculate a lowered COLA for federal programs including VA disability compensation and DIC. The Administration has already announced that they will not again propose it in their budget. We know that one of the main people we must thank for effectively and unrelentingly fighting this damaging proposal is Chairman Sanders. We are very pleased that this threat has receded.

But the history of the last few months has shown that the Cost of Living Adjustment for federal government programs has been under attack and is likely to remain so. Protecting disabled

veterans and survivors who died for their country is as appropriate now as when the COLA was created and

TREA urges you to continue to protect the COLA and its method of calculation.

## **VA Health Care**

Of course we always have ideas of how to make a program, or Department work better. To make it serve our veterans in the way they deserve. But before we start our suggestions we should take some time to say what a terrific job the VA has done in so many ways. In the last year the VA has provided first class health care for over 5 ½ million veterans of the approx. 8 million veterans enrolled throughout the country. In these tight economic times they are running 153 medical center and approx 750 local clinics. They are getting first class health care nearer to where veterans live. The quality of care has become better and better and the VA's specialty health care services- spinal cord injuries, prosthetics and treatment for the blind- are among the best in the world.

When writing this testimony we do not know what the Administration will propose for the FY2014 VA healthcare budget. (Though by the time we appear before you the Administration's VA budget will have been rolled out.) We expect that it will be much more generous than many other federal departments' and agencies budgets will be. We have been very grateful for the years of increases during these difficult times. But as we have previously noted more and more veterans are coming to the VA for medical treatment.

TREA is sure that you will do everything in your power to assure that the VA is properly funded.

Long after a war is over there are tremendous costs that need to be dealt with. There are presently 22 million veterans in the United States. 67% of the 1.4 million new veterans returning from Iraq and Afghanistan have used a VA "benefit or service." The VA also estimated that there will be 600,000 more veterans using the VA in the next 5 years.

TREA hopes that Congress will pass the provision in S. 1982 that would lengthen the time that a veteran of the wars in Iraq and Afghanistan can enroll in VA healthcare without a proven service connected disability from 5 to 10 years. This will give us a real chance to discover if another agent orange or gulf war syndrome is lurking. We will be able to track and hopefully deal with it quickly.

And it goes on and on. These are amazing numbers and if the health care is not properly funded the whole system can seize and freeze up. In fact complaints are growing from different parts of the country. That is why we urge you to support and pass Representative Dennis Ross' of

Florida, **H.R. 241** “ Veterans Timely Access to Health Care Act” which would require that the VA provide an appointment within 30 days of being contacted. There were terrible delays for treatment in the past and great progress was made. We do not wish the problem to reappear.

Last year we were very upset when the Department of Defense and the Department of Veterans Affairs jointly announced that they were stopping all work on developing a single life time electronic medical record that would cover a patient from the day he or she entered the service until he or she died. And we still are. (As are many of our colleagues in other VSOs and MSOs) After literally decades of work and at least one billion spent they said it was not necessary and they have 2 systems that work fine together. We did not believe that last year and we do not believe that now. If VA’s well thought of VISTA system will work then DoD should adopt it. If the system is getting too old then at the very least both Departments should look at all the off the shelf programs that are being commercially developed and sold. And if the two Departments think it is just throwing good money after bad; then why don’t they tell us? TREA was very excited about the prospect of a single electronic system since we thought it could lead to:

- a clear and instantaneous keeping and transfer of medical information
- a system that could help our veterans become and stay healthy
- would make medical treatments easier and more successful
- would make adjudication of claims easier
- could help us recognize and trace wartime injuries and new illnesses quickly
- would save the VA and DoD countless hours of work keeping, finding and distributing
- data.

Regardless of the obvious lack of enthusiasm that both the VA and DoD has shown for this project

TREA urges all of you to continue to push for this sensible improvement in how all of our military will be medically treated. Indeed development of such a program would help everyone in our Nation.

TREA urges the VA to continue their analysis of what is causing the spike in veterans suicides and how to better treat them. Also, we urge the VA to focus on their own finding that 69% of veterans’ suicides are men and women over the age of 50. Since this is clearly true from a VA 2 year study. It seems likely that the treatments of veterans who have recently returned from a war zone may not be effective in dealing with the problems burdening a man or woman who had been out of the military for decades.

We also hope that Congress passes Representative Michael’s H.R. 1443 which would create a research study in the VA’s Auditory Center of Excellence for the treatment of tinnitus. Tinnitus is the most prevalent service connected disability for enlisted veterans of the U.S. Air Force. It severely damages their quality of life. It should be studied and if at all possible cured.

We also note once again that for older Veterans there will be an ever growing need for nursing home

care. The demographics of many of our elderly veterans require the VA to focus on this urgent issue. The financial losses that many American families suffered for the past several years (with little time to regroup) will naturally cause them to look to VA and State programs for help in caring for their loved ones. The VA's partnership and support with state veteran nursing homes is a good program that in even these difficult times must be increased. The per diem paid by the VA should be increased.

While providing care for elderly veterans the VA should be allowed to do what all other qualified American providers are allowed to do: collect from Medicare. These Veterans have paid for their Medicare coverage throughout their careers. The VA should be allowed to become a Medicare provider and collect appropriate fees..

TREA wishes to note that our long term goal of providing some general dental care to the great majority of veterans who are enrolled in VA and receive no dental care (or support for dental care) is a step closer to existing the VA Dental Insurance Program \*VADIP) 's 3 year pilot was finally stood up last fall. Like the TRICARE Retiree Dental Program the federal government does not underwrite any of the premium costs. But it has set up the programs, issued the RFPs and gave the pilot contracts to 2 large insurance companies –Delta Dental and MetLife. We expect both companies to work hard to make the program and obvious success with the hope of assuring its permanence. It has become dramatically clear how crucial good dental health is for general health. For many years veterans requested that the VA help them get this crucial treatment. Hopefully this program is the first step and we thank you very much for insisting on this pilot.

## **Veterans Employment**

The recently announced force reductions and the winding up of the war in Afghanistan will lead to hundreds of thousands of military veterans leaving the service over the next several years. Our country should reward their service by making every effort to ensure that they successfully reintegrate back into society. The best way to do this is to make sure they have jobs.

The unemployment rate for veterans, which has been an unsightly sore on American society for the last several years, has admittedly improved in the last year. The 5.6% unemployment rate for all veterans is a welcome change. But the 7.9% unemployment rate for Post-9/11 veterans recently rose, and it is still higher than the 6.6% national rate. We thank the committees for their focus on this pressing issue and urge them to keep the pressure on businesses to hire veterans.

Female veterans have been suffering severely high unemployment rates in recent years, but according to the Bureau of Labor Statistics (BLS) the rate has come down dramatically in the last year. The overall rate of female veteran unemployment is 4.6%, compared to 8.8% the year before. Post 9/11 female veterans have an unemployment rate of 6.7%, which is down from 17.1% the year before. Overall, Post 9/11 veterans have a 7.9% unemployment rate, with male Post 9/11 veterans clocking in just a tick above at 8.2%.

As has been known for years now, the unemployment rate for veterans can fluctuate greatly among different sub-groups, and the numbers can change from month to month because of small sample sizes. The sub-group of veterans who have had the hardest time finding work is the 18 to 24 age group. Not surprisingly, this is the age group with the highest unemployment rate nationally as well. 25% of this group of veterans was unemployed in 2011, and as of December of 2013 the unemployment rate for the youngest veteran age cohort is 15.6%, compared to 11.4% for non-veterans in the same age cohort.. So while the improvement is welcome, it is clear that there is much, much more work to be done.

TREA applauds the attention and effort that Congress, the White House, the local communities, states and the private sector have paid to this important issue, but we encourage everyone to double down in their efforts. With the huge numbers of veterans returning to the private sector in the months and years ahead, it is possible that we could see these numbers shoot up if we let our guard down.

One way Congress can continue to make a difference for veterans seeking employment would be to reauthorize the Work Opportunity tax credits (WOTC) in the VOW To Hire A Hero Act. The WOTC changed the meaning of a qualified veteran in the tax code and provided up to a \$5600 tax credit to employers who hire a veteran who has served over 180 days of active service and up to \$9600 for hiring a disabled veteran who has served more than 180 days of active duty. Continuing this program would give veterans a leg up in the worst job market since the Great Depression, and it would help members of the National Guard and Reserves to find jobs. It is believed that employers, upon hearing about the Department of Defense's new "Operational Reserve" policy can possibly be less likely to hire Guard & Reserve members without additional incentives.

It is for these reasons that TREA supports **S. 6, S. 1624**, and **HR 3395**, the VOW to Hire Heroes Extension Act of 2013 sponsored by Senate Majority Leader Harry Reid (D-NV), Senator Richard Blumenthal (D-CT) and Congresswoman Julia Brownley (D-CA).

This legislation would extend the VOW to Hire Heroes Act of 2011, and Majority Leader Reid's bill would also extend the Veterans Retraining Assistance Program (VRAP), and the Wounded Warrior Act through 2016 would thus help continue the impressive progress that has been made reducing veteran unemployment.

The passage of the VRAP was an important step in helping to retrain older veterans who have exhausted their standard education benefits but needed help getting the skills to compete in a 21st-century economy and for that we thank you. While extending the VRAP program is important, it should also be noted that aligning the program's termination dates with the end of school calendars, rather than the federal government's fiscal calendar, would help smooth out difficulties that some veterans are having in paying for school that Congress has induced them to sign up for. TREA supports Senator Chuck Schumer (D-NY) in his efforts to fix this problem.

Enforcing the three-percent rule contract set aside and increasing Small Business Administration funding for new Veterans Business Development Centers and other similar programs will provide veterans with necessary training, business planning, networking, and access to capital. TREA is working with the Presidential Inter-Agency Task Force, as well as the Veteran Entrepreneurship Task Force (VET-Force) to achieve these aims as well. TREA believes that since veterans tend to hire other veterans, advancing veteran-owned businesses goes a long way towards ensuring that America successfully reintegrates the so-called “tsunami” of veterans re-entering society in the next several years.

### **VETERAN EDUCATION BENEFITS**

TREA salutes the House and Senate Veterans’ Affairs Committees for their continued support of the Post 9/11 GI Bill, which is possibly the greatest reminder of our country’s gratitude towards the men and women who have served and sacrificed for all of us.

The Department of Veterans Affairs announced late last year that the one millionth veteran applied for the Post 9/11 GI Bill and used that money to enroll in college. As more veterans are separated from active service during the drawdown that is taking place, this will become an even more important benefit as they attempt to reintegrate back into society. This is why the Post-9/11 GI Bill should not be considered for reduction in the current climate of budgetary contraction. These Post-9/11 GI Bill benefits are nonnegotiable and are priceless when it comes to re-arming veterans to compete in the 21<sup>st</sup> century job market.

Changing the rules of the game after the sacrifices have been made is no way to support a strong and healthy national defense. To ensure that these benefits remain robust, the VA must accurately measure the short-term and long-term impacts of the Post 9/11 GI Bill. Demonstrating veteran student success after using the Post 9/11 GI Bill will help prove the need to keep the benefit intact.

Educating veterans about their benefits and helping them to make sound choices with their educational allowance will enable them to choose schools that will give them the tools to pursue a career after their service to our country. It will be key to provide information about school outcomes is readily available to them. To this end, the Improving Transparency in Education for Veterans Act will help to improve the information flow and oversight regarding schools that use the Post 9/11 GI bill. The online comparison tool will help veterans make informed decisions about their future.

Further, the collaboration between the National Student Clearinghouse and the VA will allow VA to build a database of information about student veterans since 9/11. This will help tremendously when it comes to showing Congress about the importance of the Post 9/11 GI Bill.

Stories of predatory practices among some for-profit schools receiving Post-9/11

GI Bill funds have unfortunately continued over the last year. This can make it seem as though the whole for-profit education industry is rife with fraud and abuse, and thus should be cut back when the reality is much more nuanced. Some for-profit schools provide veterans with the needed flexibility have full-time jobs, family lives and use educational benefits accrued through their military service.

Furthermore, TREA feels that veterans who are residents of a state but who do not qualify for in-state tuition SOLELY because of their military service should not be punished for their service to our county. The in-state tuition system is predicated on the idea that this preference is accorded to everyone by their home state; veterans who fall into this category are denied in-state preference by every state (the Texas in-state policy only applies to active duty personnel stationed in Texas, and not after the service member transitions to civilian life).

TREA supports all current legislative efforts to provide in-state tuition to service members and veterans who do not qualify for in-state tuition solely because of their military service.

The Vet Success on Campus program (VSOC) is an example of congressional action that has positively impacted veteran student outcomes nationwide. VSOC places counselors on college campuses to provide individually-tailored career and academic advice that provide veterans with information about available services and programs that can help them succeed.

The value of the program has been magnified with the expansion of the original 32 participating campuses to a total of 94 campuses in FY 2014. Counselors at these campuses will also be allowed to help veterans from other, non-served college campuses. Hopefully this will ensure that there are well-adjusted veterans who are able to access and use the benefits that VA provides them. Increasing funding for the VSOC program would allow more veterans to fully maximize the benefit that they have earned.

The Veterans Retraining and Assistance Program (VRAP) has had some measurable successes in providing skill re-training to unemployed veterans aged 35-64. Out of roughly 140,000 VRAP applications, 125,000 applicants were approved and 70,500 have enrolled in a training program and \$518,000,000 in VRAP training benefits were dispersed, according to the VA.

For this reason TREA supports House Veteran Affairs Committee Chairman Jeff Miller's bill, **HR 352** to extend VRAP funding three months, as well as **S. 1982** and related legislation which would have extended VRAP two more years until 2016 while also aligning the funding period with the end of the school period.

## **Transition Assistance Program**

One way to encourage veteran participation in business interests is by training them through The Transition Assistance Program (TAP). TREA is happy that this has now become mandatory for the vast majority of service members transitioning out of the military as it is the best chance to provide veterans with the skills that they are going to need to thrive in the private sector.

The services provided by the Department of Labor Veterans Employment Training Service (DOLVETS) meets the ongoing employment and training needs of transitioning veterans, especially those injured or disabled, and brings together employers and qualified veterans to fill open positions.

The Jobs for Veterans State Grant program distributes funding to states for Disabled Veterans' Outreach Program (DVOP) specialists to work with veterans who have the "most significant barriers to employment" as well as Local Veterans' Employment Representative (LVER) staff. LVERs are on the front lines of the veteran employment issue, convincing employers in their local areas that veterans possess the skills and training that will make them model employees.

The Homeless Veterans' Reintegration Program aims to reintegrate homeless veterans back into both society and the workforce. In FY 2011 this program helped place thousands of previously homeless veterans on the road to recovery and integration. It has undoubtedly been a big part of lowering the overall homeless veteran population, along with the Department of Housing and Urban Development's homeless veteran voucher program. The Veterans' Workforce Investment Program is a great tool to train veterans for meaningful employment through things like apprenticeships on-the-job training and encourages effective use of services for eligible veterans who face significant barriers to employment.

TAP Employment Workshops provide critical assistance to service members and their spouses by giving them the tools necessary for a successful transition from military to civilian life. We also want to point out the importance of the Disabled Transition Assistance Program (DTAP), through which individuals leaving the military with service-connected disabilities go through an individualized course to determine their level of employability in addition to the normal TAP program. DTAP provides information to wounded service members and their families at a crucial time in their lives.

Because these individuals are often receiving care while separated from their regular units during their military service discharge process and are no longer located on or near a military installation, they are often forgotten in the transition assistance process. Coordination needs to be closer between the DOD, VA, and the DOL-VETS to ensure these severely disabled service members get the TAP services that they need and deserve.

It has come to our attention that large numbers of reserve and National Guard service members are moving through the out-processing system with only a shortened version of TAP, rather than the more comprehensive program attended by active component service members. Neither the DOD nor VA seems prepared to handle the large numbers and prolonged activation of reserve forces for the global war on terrorism. Rapidly transitioning from active duty to civilian life is a strenuous event even if a disability is not involved. Guard and reserve service members spend little of their time at demobilization sites learning about veterans' benefits and services. This is an issue that will begin to take on even more importance in the coming years.

TREA recommends that all TAP classes include in-depth VA benefits and health-care education sessions as well as allow time for question and answer sessions. Ensuring every service member is aware of existing benefits before they leave the service is the key maximizing utilization of VA benefits while also amplifying efforts that VA has made at outreach in the past year.

TREA also recommends that all VA homeless veteran assistance programs be fully funded and the HUD-VA voucher program have its funding increased so that it can fully fund the case management services to support the voucher program.

### **Survivors' Education Benefits**

For several years TREA has urged that spouses of those who have fallen since 9/11/01 should be qualified for the equivalent of the Fry Scholarships that their children presently can receive. Presently, a widow/widowers can only qualify for education benefit under Chapter 35 of Title 38 of the U.S. Code. Their benefits do not reflect the improvements of the Post 9/11 GI Bill. They receive only \$ 1003.00 a month as a full time student; with no housing allowance and no book stipend.

The average cost to attend a four-year public university has reached \$14,256 per year. In 2003, the last increase for Chapter 35 benefits, the average cost of a four-year degree was \$10,674. While Chapter 35 benefits have remained the same, the cost of education has increased by 33 percent. It is time to increase the DEA's monthly stipend.

It is also time to henceforth have the DEA program be adjusted proportionally whenever Congress raises the payments for MGIB (Chapter 30) or the Post 9/11 GI Bill (Chapter 33)

### **Female Veterans**

Women presently make up 15% of the active duty and 17% of the Reserve Components. By 2040 the VA projects that women will make up just under 18% of all living veterans. They are therefore becoming much more of a presence at the VA. The numbers keep growing. There are already over 100,000 women veterans from OIF/OEF and Operation New Dawn. 52% of these women veterans are enrolled in VA health care.

The VA is well aware that they need to modify their practices to reflect the needs of their changing beneficiary pool. In 2010 the VA Advisory Committee on Women Veterans issued a report, "Women Veterans—A Proud Tradition of Service," and we urge that more of their Recommendations be implemented.

This past year has also revealed the serious problem of sexual assault in the military. While the Department of Defense is the present focus on how to solve this terrible problem it will quickly become a problem that the VA must deal with. This is a terrible problem that the VA must develop appropriate mental health programs to treat. These female victims (and indeed male victims as well) will be their patients. They will need help. Again and again we call on the VA to create a larger and more sophisticated mental health practice. And this is another group of patients that they must serve.

It has also been discovered that women veterans are less likely to self identify as veterans as men are. This seems to be especially true of women who did not serve in war zones. Therefore it is imperative for the VA to study different methods of outreach for women veterans who deserve and need their services.

**TREA urges Congress to focus on the particular medical needs of women veterans**

### **Survivors Benefits**

A small percentage of the American people are fighting her wars, protecting her shores and preserving her freedoms. And their families and loved ones are bearing the terrible loss and loneliness when one of them dies. Of course America wants to protect and help those that are left behind. It is our duty. As President Lincoln said in his Second Inaugural address it is America's duty to "care for his widow and orphan" This same quote can be found on the front of the Department of Veterans Affairs National Headquarters. TREA is grateful for all the time and effort both Congress and the VA has spent trying to make this pledge a reality. Although the following suggestion is under the Armed Services Committees' jurisdiction it greatly involves the VA.

**SBP/DIC Offset**- TREA strongly urges Congress to end the unfair SBP/DIC offset and to make DIC equivalent to other federal survivor programs. **H.R. 32**, the Military Surviving Spouses Equity Act sponsored by Representative Joe Wilson. And Senator Bill Nelson (R-FL) It would

finally end the unfair dollar for dollar offset of military SBP and VA's DIC. Currently the flat DIC payment is \$1,215 a month- so survivors of all but the most senior enlisted retirees never receive a dime of the SBP that was purchased either with their retired pay or their lives on active duty. In 2009 a Special Survivor Indemnity Allowance was passed to partially deal with this obviously unfair practice. Starting at \$50 a month in 2009 and increasing in steps until reaching \$310 per month in 2017 this inequity is being partially offset. This year DIC widows are receiving \$150 a month in SSIA payments. And then the allowance **disappears**. This clearly does not solve the problem. There are two groups of widows (and widowers) who are harmed by this offset. The first group is made up of those whose spouses died on active duty and the second group is made up of those whose spouses died of service-connected disabilities or injuries. Both groups should be relieved of this burden.

The offset takes a dollar from the SBP payment for every dollar the widow receives from DIC. Each payment covers a different purpose and should be treated separately. The DIC is an indemnity (compensation or insurance) payment that is paid by the Department of Veterans Affairs (VA) to the survivor of a member of the military whose service directly causes his or her death. The SPB annuity, paid by the Department of Defense reflects the longevity of the service of the military member. It is ordinarily calculated at 55% of retired pay. Military retirees who elect SPB pay a portion of their retired pay to ensure that their family has a guaranteed income should the retiree die. If that retiree dies due to a service connected disability, only then would their survivor become eligible for DIC.

SBP was created as a purchased annuity- an earned employee benefit. This is a retirement plan. Qualification for SBP for an active duty death was added to stop the grim but extremely well intended practice of medical personnel keeping a lost comrade "technically alive" until he or she could be retired.

There is no offset if a federal civilian retiree dies of a service connected disability. The survivors will receive the civilian SBP and the VA's DIC without offset.) As stated above it takes into account longevity of service. The vast majority of families affected by this offset served a full career in the military. We all now accept the maxim that you recruit a member but you retain a family. This is part of the retirement package. Even the name of the Dependency Indemnity Compensation's (DIC) name makes clear that it was created for a very different reason. It is an indemnity program to compensate a family for the loss of a loved one due to his or her military service. Again, they are different programs created to fill different purposes and needs. The survivor does receive a taxable pro-rated share of the paid SBP premiums back without interest in a lump sum. But that cannot make up for the cost and difficulty paying those premiums all those years of retirement caused. If a disabled veteran earns a civilian pension as a federal civil servant the family will never lose either their survivor payment or their DIC to any offset. The service member did what he could to provide for his spouse. This is behavior the Federal Government wishes to encourage. This offset makes his attempts a failure. The offset should be abolished.

Year after year we (and many other VSOs and MSOs have asked that this unfair offset be abolished. Hopefully, this may finally be the year. In addition to the Chapter 35 improvements that we discussed in the section on Veterans Education Benefits there are several concepts under your Committees that we hope you will consider.

***DIC Equality-*** Dependency and Indemnity Compensation (DIC) set a flat monthly rate regardless of rank if the service connected death occurred after January 1st 1993. It is presently \$1215.

TREA believes that the rate of compensation should be set at 55% of the compensation paid to a 100% VA service disabled rated veterans. This would calculate the DIC recipient benefit in the same manner as survivors of disabled federal civil service employees. In 2009 a GAO report "Military and Veterans' Benefits" (GAO 10-62) found "DIC payments are almost always less than workers' compensation payments for survivors of federal employees who die as a result of job-related injuries" This would be a fair and ***rational*** way to set the DIC level.

TREA urges that Congress recalculate the method of setting the DIC payment levels.

***DIC Retention at age 55-*** Finally, we hope that survivors will be permitted retain DIC if they remarry at or after the age of 55. Presently a survivor may retain DIC upon remarriage if he or she is, at least, 57. Most federal survivor programs allow retention of survivors benefits after remarriage if the survivor is at least 55 years old. Indeed, the age to retain CHAMPVA upon remarriage **is** the normal federal program age of 55. The difference is because the two benefits were reinstated in different years and during different Congressional negotiations. There are no policy reasons for this awkward and unequal distinction and we hope that this year it can finally be corrected.

During this session of Congress SVAC Chairman Senator Sanders (I-VT) in **S.735, S.944, S.1950** and the latest **S. 1982** has included a section in each bill that would end this unfair distinction. TREA thanks the Chairman and hopes that he will continue to focus on this until it is finally corrected.

***VADIP-*** As we said in the VA health care section TREA was very grateful that Congress has directed that a three year pilot program. For years we had been urging such a fee based program (similar to the TRICARE Retiree Dental Program. Like the TRICARE Retiree it is fully funded by the enrollee premiums. It took quite a while to set it up but now it has been stood up and is running. We believe that this provides an important benefit for CHAMPVA enrollees even though the VA is not underwriting or supporting the premiums. We all know how important dental health is to general health and we believe this will be a dramatic success.

TREA hopes that you will continue to keep a close eye on this very important program.

**CHAMPVA until the Age of 26**

TREA is a very strong supporter of that Ranking Member Representative Michaud's very fine bill H.R. 288. It will allow young adults to continue on their parent's CHAMPVA health care plan until they reach the age of 26. This would put this final cohort of young Americans on the same footing as all their peers. We do not know why it was not included but that is no reason for us not to pass H.R. before the end of this legislative year. While there has been continuing, dramatic disagreements over numerous sections of the Affordable Care Act this has been the overwhelmingly popular benefit throughout the country. Young Adults under TRICARE have this option. Young Adults on FEHBP have this option. Young Adults in all private insurance plans have this option. These young people should not be left out. We hope that finally these fine young men and women will also be covered.

TREA urges you to join your colleagues to pass this sensible bill.

### **The Non-Veteran Military Retiree**

TREA likes to say that all Military Retirees are Veterans but all Veterans are not retirees. However, that is not totally correct. While it is true for the vast sum of Military retirees, one group is left out. Guard and Reserve retirees who have served honorably for 20 or more years but have not been called to active duty on Title 10 orders for the minimum number of days (normally at least 180 consecutive days of federal active duty) do not qualify as veterans under the current law. (Active Duty for Training does not qualify a member for Veterans Status).

This is true even though they were always required to be prepared to be activated during their 20 years or more of service. Indeed, they may have served a great deal of time on other than Title 10 orders, of which there are more than 30, but they are not designated veterans.

With the dramatic changes in how our nation is using the Guard and Reserve the percentage of retirees in this situation is dropping and will continue to drop. Still, this is an anomaly that needs to be corrected. These Military Retirees should be allowed the honor of the designation of "veterans of the Armed Forces of the United States. "

Bills to grant veterans status were passed by the House of Representatives twice in the last three years and last year a provision granting veterans status was added to the House NDAA. However, it was stripped out in the final conference bill. The individuals covered by this legislation are, in fact, Military retirees and are eligible to receive active duty retiree benefits when they reach 60 years of age including military retirement pay and TRICARE health care. They have unlimited use of military Commissaries and Exchanges during and after their service.

In short, they are recognized and compensated by the federal government as military retirees. In addition, these dedicated members of the National Guard and Reserve already qualify for many Veterans benefits including VA home loans, VA burial and memorial benefits and eligibility for SGLI and VGLI.

The members who fit into this situation by definition would not qualify for a VA disability rating and thus do not qualify for a disability payment or VA health care. They have civilian health care insurance and once they turned 60 they qualify for TRICARE. We want to emphasize that this is not an attempt to gain additional benefits for this group of military retirees. In fact, the legislation passed in previous years by the House of Representatives specifically stated that no new benefits will be granted to these individuals by virtue of those bills. As a result, the Congressional Budget Office scored those bills as having no cost.

Until 9-11-01, in many ways members of the Guard and Reserve tended to be treated as step children of the military. Now the nation has realized that its military cannot function without the Operational Guard and Reserve. Thus, the simple step of recognizing the service of those who spend twenty years or more as meriting the distinction of being called a veteran is a major issue for them, one of pride and one of having their sacrifices recognized. After all, we now have a Total Force that includes the Guard and Reserve Components. They wear the same uniforms and earn the same medals and awards. Why are they not worthy of the honor of being called "veteran?"

We want to emphasize again, these non-retiree veterans want this change for the recognition and honor—not any increase in benefits. They wish to be termed "veterans of the Armed Forces of the United States". They volunteered to serve, served honorably, and were prepared to serve on active duty if called. TREA firmly believes that a career of military service in the reserve forces of our nation should constitute qualification for veteran status under the law.

TREA urges passage of legislation by Congress to modify Title 38 to define as veterans the members of the Guard and Reserve who have served 20 or more years but who have not been activated for a qualifying length of time.

## **Conclusion**

TREA wishes to thank the Senate and House Committees on Veteran Affairs for the honor of

testifying before you. We are grateful for the opportunity to speak of our concerns and legislative goals. We are also grateful for the opportunity of working with you and your terrific staffs throughout the year.

The VA is a crucial institution for helping to preserve our Nation's freedoms by serving those who protect all from danger. TREA knows that it is a heavy burden for the members of both Committees to take on the oversight duties for such a huge, far flung, and critical Government Department. We know that you will do all in your power to assure that once again adequate and timely funding is provided for health care, that improvements are made in case adjudication, that we will all join together to help our returning veterans and indeed all veterans find jobs and businesses that will both provide them with both an adequate income and an occupation that will fill their lives with purpose; and finally that the Veterans and their families and survivors who have given so much to preserve this Union are provided the help they need and deserve. Again thank you for your attention and I would be happy to try and answer any of your questions.



***Richard J. "Rick" Delaney***

Richard "Rick" Delaney joined the United States Air Force in June of 1965. He served three tours of duty Thailand in 1966, 1969, and 1971 as well as two tours to Europe in Germany and England. He has been stationed in Tennessee, Arkansas, Alabama, Wyoming, California Georgia and South Dakota. His decorations include the Meritorious Service Medal, Air Force Commendation Medal with 1 Oak Leaf Cluster, Air Force Achievement Medal, Vietnam Gallantry Cross with Palm, Republic of Vietnam Campaign Medal, and Vietnam Service Medal with 1

Silver 4 Bronze Stars.

Rick retired from the U.S. Air Force as a Master Sergeant in October of 1989 and except for a 5 year period living in Las Vegas, has made his home in Warner Robins, Georgia, with his wife of 40 years, Pat.

Rick is currently retired from his last position with the Central Georgia Multiple Listing Service, Inc., after serving 15 years as and President and Chief Executive Officer.

He is a life member of The Retired Enlisted Association (TREA) and was a member of the committee that chartered TREA Chapter 94, Warner Robins, GA, in 1999. He also served as their first President from 1999 to 2001. In 2001, he moved to Las Vegas, and joined Chapter 84, where he served as their President from 2002-2005. He returned to Warner Robins 2006, and rejoined Chapter 94. He served as their President in 2007 and 2008 and still remains active in chapter activities. He is currently the Director, Robins AFB Retiree Activities Office and he stays actively involved in the Warner Robins community, including participating in Retiree Appreciation Days, delivering TREA's *VOICE* magazines to various locations in Warner Robins and Robins AFB, and TREA's JROTC Awards Program. Rick is also a member of the National Association of the Uniformed Services (NAUS) and is also an advocate for all veterans and retirees. Rick is currently serving as TREA: The Enlisted Association's National President, having been elected for a second term at TREA's National Convention in Colorado Springs, Colorado in September of 2013. Prior to serving on the National Board of Directors from 2009-2013 he served on several National Committees. During his tenure on TREA's Board of Directors, he chaired the Legislative Affairs, Information Technology, Convention and 5-Year Plan committees.