



STATEMENT FOR THE RECORD

MILITARY OFFICERS ASSOCIATION OF AMERICA

on

Pending Health Care and Benefits Legislation

2nd Session, 114th Congress

HOUSE COMMITTEE on VETERANS' AFFAIRS

June 23, 2016

CHAIRMAN MILLER, RANKING MEMBER BROWN, and Members of the Committee, the Military Officers Association of America (MOAA) is pleased to present its views on veterans' health care and benefits legislation under consideration by the Committee today, June 23, 2016.

MOAA does not receive any grants or contracts from the federal government.

EXECUTIVE SUMMARY

On behalf of our 390,000 members, MOAA thanks the Committee for its steadfast commitment to the health and well-being of our servicemembers, veterans and their families, and for considering the very important provisions in this legislation related to the Department of Veterans Affairs (VA) health care and benefits programs.

MOAA is grateful for the broad range of legislation offered today and greatly appreciate the hard work and efforts of this Committee to reform and modernize VA systems to meet essential needs.

The following provides MOAA's position and recommendations on the following bills:

- H.R. 3216, Veterans Emergency Treatment Act
- H.R. 4150, VA Emergency Medical Staffing Recruitment and Retention Act
- H.R. 4764, Puppies Assisting Wounded Servicemembers (PAWS) Act of 2016
- H.R. 5162, Vet Connect Act of 2016
- H.R. 5392, No Veterans Crisis Line Call Should Go Unanswered Act
- H.R. 5083, VA Appeals Modernization Act of 2016
- H.R. 5047, Protecting Veterans' Educational Choice Act of 2016

PENDING LEGISLATION

H.R. 3216, Veterans Emergency Treatment Act. The bill would clarify emergency care services furnished by the VA Health Administration (VHA) to include examination and treatment for emergency medical conditions, including female veterans in labor.

MOAA supports the intent of the measure to improve emergency care and services so veterans can more readily access this essential care when and where needed, whether in a VA or non-VA medical facility.

Emergency care policies and processes continue to be a great source of frustration to not only VA employees administering the program, but also to veterans who, more often than not, get stuck with medical bills because of policy ambiguity or because they do not meet eligibility requirements. MOAA is pleased to see clarifying language in the bill further defining the term 'emergency medical condition,' as well as additional safeguards to ensure immediate care and priority is given when the health of the veteran or unborn child is in serious jeopardy.

While such clarifying language is helpful and will improve veterans' access to emergency care services on the front end, the bill does not address the necessary back end or administrative barriers currently plaguing the system. MOAA also urges the Committee to require VA to establish uniform policies and procedures for simplifying and determining access, eligibility, and payment for emergency medical care and services which are transparent and simple for VA employees, veterans and their families, and non-VA providers to understand.

H.R. 4150, Department of Veterans Affairs Emergency Medical Staffing Recruitment and Retention Act. This measure seeks to allow the Secretary to modify the hours of employment of physicians and physician assistants employed on a full-time basis in VHA. As such, the Secretary of VA may require a physician or physician assistant to work more than or less than 80 hours in a biweekly pay period as long as the total hours of employment do not exceed 2,080 in a calendar year.

MOAA is pleased to support H.R. 4150 and thanks Representative Raul Ruiz (D-CA) for sponsoring the bill. Flexibility in managing this segment of the medical workforce has been a top priority for the Secretary and a central element of his MyVA plan to improve access to health care. We urge immediate passage of this critical piece of legislation.

H.R. 4764, Puppies Assisting Wounded Servicemembers (PAWS) Act of 2016. VA research on Iraq and Afghanistan veterans indicates somewhere between 10% and 18% of deployed troops are likely to have PTSD once they return home. These veterans are also at risk for developing other mental health problems.

The PAWS Act would direct the VA to carry out a pilot program to provide service dogs to veterans diagnosed with severe post-traumatic stress disorder (PTSD).

Clinically there is not sufficient research to determine if dogs help in treating veterans with PTSD, though VA uses guide and service dogs through their rehabilitation and prosthetic services program.

MOAA supports the intent of the bill but recommends funding for the pilot not be offset with appropriated funds from the VA's Office of Human Resources and Administration, as currently specified in the bill. Rather, we would recommend the pilot be incorporated within existing medical programs using dogs to establish evidence-based therapies which are supported by research, and adequately funded and resourced to support such medical studies.

H.R. 5162, Vet Connect Act of 2016. This bill would give VA the authority to provide medical record information of veterans to non-VA providers in certain instances.

MOAA recommends passage of the bill. Such authority is an important step in further integrating VA and non-VA health systems to achieve better patient health outcomes. VA requires non-VA providers to submit medical information on care provided to veterans through VHA's Care in the Community Programs. The same requirement should apply to VA so community providers have the necessary information to effectively and safely treat the veterans they serve.

H.R. 5392, No Veterans Crisis Line Call Should Go Unanswered Act. MOAA strongly supports this legislation which would improve the Veterans Crisis Line by establishing quality assurance requirements to measure system performance.

The VA Office of the Inspector General (IG) initiated an investigation into the Veterans Crisis Line in 2015 after receiving complaints from callers that they were placed on hold, didn't receive immediate help, or their calls went to voicemail. The investigation revealed a significant number of staffing, telephone and technology system problems. VA has indicated all IG recommendations to fix existing problems will be implemented by September 30, 2016.

This legislation codifies many of the IG recommendations, such as: establishing a quality assurance process and back up call centers; delineating clearly defined measurable performance indicators and objectives; and establishing quantifiable timelines for meeting designated objectives.

H.R. 5083, VA Appeals Modernization Act of 2016. MOAA's position on this bill remains the same as noted in our Statement for the Record for a House Committee on Veterans' Affairs Hearing on May 24, 2016.

In summary:

"MOAA agrees the current number of appeals pending a decision by VA is wholly unacceptable for veterans and thanks Representative Dina Titus (D-NV) for her leadership in this area..."

"MOAA does not support the changes to 38 USC 5103A(d) that would severely limit VA's duty to assist, but recommends approval of the changes that would still improve the veteran experience and reduce the number of appeals – namely, the changes to 38 USC 5103A(e) regarding notices of decisions and the addition of 38 USC 5104A to make favorable factual findings binding upon VA. Additionally, MOAA encourages Congress to add a provision to allow veterans with existing appeals to opt into the new claims system."

H.R. 5047, Protecting Veterans' Educational Choice Act of 2016. MOAA supports this legislation. This bill is a sensible measure ensuring veterans are fully informed prior to making educational choices. Articulation agreements contain important information about which institutions students will be able to transfer educational credits to.

A recent review of settlements reached between educational institutions and state attorneys general revealed that almost 25% of them included false or misleading statements about credit transfers.

MOAA notes that educational institutions participating in military Tuition Assistance Programs are already required to provide this information to potential students. This information should also be provided to veterans, which this bill accomplishes. It is a low-cost (and potentially no-cost) method of assisting veterans in making the best possible decisions for their futures.

MOAA thanks the Committee for considering this important legislation on behalf of our veterans and their families.