



**STATEMENT
OF
MELISSA BRYANT, LEGISLATIVE DIRECTOR
LEGISLATIVE DIVISION
THE AMERICAN LEGION**

BEFORE THE

HOUSE COMMITTEE ON VETERAN'S AFFAIRS

ON

**U.S. DEPARTMENT OF VETERANS AFFAIRS BUDGET REQUEST FOR FISCAL
YEAR 2021**

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Chairman Takano, Ranking Member Roe, and distinguished members of the Committee on Veterans' Affairs, on behalf of National Commander, James W. "Bill" Oxford, and the nearly two million members of The American Legion, we thank you for the opportunity to testify on the Department of Veterans Affairs (VA) Budget Request For Fiscal Year 2021.

As VA moves forward to serve the veterans of this nation, it is important that the Secretary have the tools and resources necessary to ensure that veterans receive the services they are entitled to in a timely, professional, and courteous manner – because they have earned it. The American Legion calls on this Congress to ensure that funding is maintained and increased as necessary to ensure the VA is preserved and enhanced to serve the veterans of the 21st Century, and beyond.

Provides Funding for Overall Mental Health

Post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI) are the signature wounds of today's wars. Both conditions are increasing in number, particularly among those who have served in Operation Iraqi Freedom and Operation Enduring Freedom. The President's request for a 7.1 percent increase in funding will provide much-needed funding dedicated to this area. While veterans who served in Iraq and Afghanistan are not the largest group of VA's patient population, they require a disproportionate amount of VA specialized mental health services. There are nearly 3.5 million veterans who served after September 11, 2001.¹ The need for specialized mental health services will only grow.

In 2019, VA successfully hired more than 1,000 additional mental health providers with the Mental Health Hiring Initiative.² VA also increased same-day warm handoffs from the Primary Care Providers and Primary Care-Mental Health Integration providers by 19 percent, from 2016 through 2019, which resulted in 110,000 same-day primary care encounters in 2019.³ These actions have greatly increased the access and timeliness of quality mental health care for the nation's veterans.

While The American Legion acknowledges advances in this area, there remains significant room for improvement. From the development of PTSD claims, through compensation and pension (C&P) examinations, to ultimate adjudication, The American Legion accredited representatives

¹ <https://www.census.gov/library/stories/2018/04/post-9-11-veterans.html>

² <https://www.va.gov/budget/docs/summary/fy2021VAbudgetInBrief.pdf>

³ <https://www.va.gov/budget/docs/summary/fy2021VAbudgetInBrief.pdf>

routinely see errors throughout the process. The American Legion's report, *The Road Home*, also indicates VA must continue to search for the most effective treatment programs for veterans with comorbidities of PTSD, and TBI with substance use disorder and chronic pain.⁴ Providers in VA must take care to prevent at-risk veterans from becoming dependent on alcohol or drugs used to "self-medicate."

The American Legion believes VA must focus on mental health without sacrificing awareness and concern for other conditions afflicting servicemembers and veterans. As an immediate priority, VA must ensure staffing levels are adequate to meet the need. The American Legion also urges Congress to invest in research, screening, diagnosis, and treatment of PTSD and TBI. The president's proposed budget requests \$10.2 billion for veterans' mental health services, an increase of \$683 million (7.1 percent) above 2020. The American Legion supports this action as a positive step forward.

Prioritizes Funding for Suicide Prevention

The Budget also provides \$313 million, a 32-percent increase over the 2020 enacted level, to support the Administration's veteran suicide prevention initiatives, including the National Roadmap to Empower Veterans and End Suicide, a population-based, public health model encouraging partnerships at the national, regional, and local levels.

-A Budget for America's Future, Administration's Proposed FY21 Budget

Suicide prevention and mental health is a top priority of The American Legion, VA, and the Department of Defense (DoD). The American Legion is deeply concerned by the high suicide rate among servicemembers and veterans. Veterans ages 18-34 are particularly troubling as their suicide rates have risen 76 percent from 2005 to 2017 with 44.5 veterans per every 100,000 dying by suicide each year.⁵ Women have become an increasing percentage of the veteran population which has grown 6.5 percent from 2005 to 2017. Unfortunately, the 2017 rate of suicide among women veterans was 2.2 times the rate among non-veteran women.⁶ In 2017, veterans accounted for 13.5 percent of all deaths by suicide among U.S. adults while only constituting 7.9 percent of the U.S. adult population.⁷ These statistics are disheartening as suicide among veterans has increased by 6.1 percent from 2005 to 2017 despite the national attention veterans suicide has received.

VA has taken great strides to reduce veteran suicide. Of particular note, VA expanded the Veterans Crisis Line (VCL), responding to over 650,000 phone calls every year, as well as thousands of electronic chats and text messages. The VCL has improved its ability to answer incoming calls from 70 percent in 2017 to 99.96 percent in 2019 with an average response time of an average of

⁴www.legion.org/sites/legion.org/files/legion/publications/60VAR0818percent20Thepercent20Roadpercent20Homepercent20-percent20TBI-PTSD.pdf

⁵https://www.mentalhealth.va.gov/docs/data-sheets/2019/2019_National_Veteran_Suicide_Prevention_Annual_Report_508.pdf

⁶ Ibid

⁷ Ibid

eight seconds or less.⁸ VA also hired more than 400 Suicide Prevention Coordinators (SPCs), mental health professionals that specialize in suicide prevention.⁹

The American Legion remains committed to working with Congress to reduce the high suicide rate among service members and veterans and is committed to finding solutions to help end this crisis. To ensure that all veterans are properly cared for at DoD and VA medical facilities, The American Legion, through Resolution No. 2 *Suicide Prevention Program*, has established a Suicide Prevention Program and aligned it under the TBI/PTSD Committee.¹⁰ This committee reviews methods, programs, and strategies that can be used to reduce veteran suicide. The work of this body will help guide American Legion policy and recommendations.

President Donald Trump's executive order, titled the "President's Roadmap to Empower Veterans and End a National Tragedy of Suicide" (PREVENTS), will require top officials from multiple government agencies to coordinate a strategy to tackle the issue of veterans suicide. The American Legion believes this initiative is a step in the right direction, but it must be properly coordinated with the activities of Congress and should not take any resources from VA to support itself.

Congress must ensure sufficient resources are available for effective VA suicide prevention efforts. Funding for the aforementioned programs must be provided as well as money for new programs. President Trump has called for a 32 percent increase in VA spending in FY 2021, up to a total of \$313 million for suicide prevention. The American Legion appreciates the serious attention paid to this issue by the White House and urges Congress to appropriate these funds.

Combats Military Sexual Trauma

Military Sexual Trauma (MST) refers to experiences of sexual assault or repeated, threatening sexual harassment that a veteran experienced during his or her military service. These actions are a gross betrayal of the trust between the men and women who serve in our armed forces and are more common than should ever be acceptable. National data exposes that about 1 in 4 women and 1 in 100 men stated that they experienced MST when asked by their VA provider.¹¹ Although rates of MST are higher among women, because there are so many more men than women in the military, there are actually significant numbers of women *and* men seen in VA who have experienced MST. However, these numbers do not even account for those who choose not to report MST or those who do not seek treatment from VA.

VA has taken significant steps to tackle the issue of MST. Every VA health care system now has a designated MST Coordinator who serves as a contact person for MST-related issues. This person can help veterans find and access VA services and programs. VA also provides treatment for physical and mental health conditions related to experiences of MST free of charge regardless of service connection.¹² The Veterans Benefits Administration (VBA), in response to a 2018 VA Office of Inspector General (OIG) report, updated their "PTSD Due to MST" training course and

⁸ Ibid

⁹ Ibid

¹⁰ archive.legion.org/bitstream/handle/20.500.12203/9286/2018S020.pdf?sequence=1&isAllowed=y

¹¹ https://www.mentalhealth.va.gov/docs/mst_general_factsheet.pdf

¹² Ibid

mandated training to be completed by March 2019 to ensure claims processors were trained adequately to adjudicate MST claims.¹³

The American Legion acknowledges that VA has made significant strides in handling the problem of MST, but work remains to be done. The American Legion uniquely understands the challenges VA faces to support survivors of MST due to our routine site visits through our System Worth Saving (SWS) program. This innovative partnership was launched in 2003 to promote best practices at VA Medical Centers (VAMC) and VA Regional Offices (VARO). During these visits, some critical issues we have witnessed include insufficient training of VA staff, lack of adequate time to process MST claims, high rate of attrition and compassion fatigue among VA staff who work on MST related issues, implications of bias and subjective ratings, and a continued culture of sexual harassment within VA facilities.¹⁴

The American Legion believes that our nation's veterans should never suffer at the hands of institutions whose existence and mission is to care for them. We believe in the quality of care at VA facilities and remain committed to a strong VA. The administration's proposed budget requests \$10.2 billion for veterans' mental health services, an increase of \$683 million (7.1 percent) above 2020, which includes MST related treatment. The American Legion appreciates the serious attention that MST has received and urges Congress to appropriate these funds.

Provides Critical Funding for IT

In 2021, OIT (Office of Information and Technology) is requesting \$4.912 billion, an increase of \$540.4 million (12.4 percent) over the 2020 enacted budget. This requested increase will support critical investments to Veteran-focused development, IT modernization and transformational efforts.

-Department of Veterans Affairs – Budget in Brief 2021

VA's Information Technology (IT) infrastructure has been an evolving technological necessity over the past 40 plus years, sometimes leading the industry, and sometimes trailing. The American Legion has been intrinsically involved with VA's IT transformation from the inception of Veterans Health Information and Technology Architecture (VISTA) to being a pioneer partner in the concept and integration of the fully electronic disability claims process, as well as through the new Project Advancing Telehealth through Local Access Stations, or ATLAS. Project ATLAS will enable remote examinations in selected American Legion posts, among other locations.

IT automation is expensive to implement and expensive to maintain, especially while working on legacy equipment. As in all digital space, IT infrastructure advances so quickly that most IT infrastructure is outdated by the time it is fully implemented, and VA's IT infrastructure is no different. IT is inextricably intertwined into many of the services we take for granted, such as; telephone systems, appointment scheduling, procurement, building access, safety controls, and much more. Maintaining an up-to-date system is not a luxury, it is a necessity.

¹³ <https://www.va.gov/oig/pubs/VAOIG-17-05248-241.pdf>

¹⁴ <https://www.legion.org/systemworthsavings/reports>

The American Legion supports the continued effort by VA to update its systems. The president's budget provides \$4.9 billion for essential investments in IT to improve the online interface between veterans and VA. This includes major investments of over \$300 million to support the implementation of the MISSION Act, over \$250 million for Infrastructure Readiness Program, and over \$50 million for the VA Enterprise Cloud solution.¹⁵

The American Legion continues to call on Congress to consider funding that enables VA to tie all of their IT programs together. This should be a seamless architecture capable of processing disability and education claims, managing veterans' healthcare needs, integrating procurement needs so that VA leaders and Congress can analyze annual expenditures versus healthcare consumption. Additionally, patient information must be integrated into their profiles ensuring a seamless transition between the Department of Defense and VA.

Electronic Health Record Modernization (EHRM)

The request includes \$2.6 billion (an increase of \$1.2 billion or 82 percent from 2020) to continue VA's EHRM effort to create and implement a single longitudinal electronic health record from active duty to Veteran status, and to ensure interoperability with the Department of Defense (DoD).

-Department of Veterans Affairs – Budget in Brief 2021

The American Legion, through Resolution No. 83 *Virtual Lifetime Electronic Record*, has long endorsed and supported the VA in creating a Lifetime Electronic Health Records (EHR) system. Additionally, The American Legion has encouraged both DoD and VA to either use the same EHR system or, at the very least, utilize interoperable systems.

The American Legion recognizes the advantages of a bi-directional interoperable exchange of information between agencies. Collaborating with DoD offers potential cost savings and opportunities for VA. Opportunities include capitalizing on challenges DoD encounters deploying its own Cerner solution, applying lessons learned to anticipate and mitigate issues, and identifying potential efficiencies for faster and successful deployment. The American Legion supports the president's budget including \$2.6 billion as part of a multiyear effort to continue the implementation of a new EHR system.¹⁶ The EHR is a high-priority initiative that ensures a seamlessly integrated healthcare record between DoD and VA, by bringing all patient data into one common system. As such, we call on Congress to fund it accordingly.

Enhances Veteran Outreach

Outreach to veterans has been an ongoing issue for VA as it seeks to bring veterans into the VA system. For example, a recent VA health care utilization report found that only approximately 62 percent of all separated Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), or Operation New Dawn (OND) veterans have used VA health care since October 1, 2001.¹⁷ This has

¹⁵ <https://www.va.gov/budget/docs/summary/fy2021VAbudgetInBrief.pdf>

¹⁶ <https://www.va.gov/budget/docs/summary/fy2021VAbudgetInBrief.pdf>

¹⁷ <https://www.publichealth.va.gov/epidemiology/reports/oefoifond/health-care-utilization/>

been documented for a variety of reasons such as not understanding what benefits and services they are entitled to, bad past experiences with VA services and facilities, or a general distrust of VA.

VA must do a better job reaching out to veterans to ensure they know what benefits and services they can receive. This is especially critical with the passage of new legislation, such as H.R.299, the Blue Water Navy Vietnam Veterans Act of 2019, to ensure veterans have a clear understanding. VA must also take a proactive step with outreach to create an environment of trust with veterans that VA will take care of them with quality service. This is especially important when VA is trying to help underserved communities such as racial and ethnic minorities, women, and LGBT veterans. The administration's budget requests \$413.0 million for General Administration, \$57.1 million (16 percent) above 2020 which covers public relations and outreach. Specifically, the budget requests \$3.2 million in additional funds for the Office of Public and Intergovernmental Affairs.¹⁸ We call upon Congress to adequately fund these efforts to conduct outreach to veterans, including those of underserved communities, and for VA to utilize the funds fully and effectively.

Further Implements the VA MISSION Act

The 2021 request fully supports continued implementation of the MISSION Act. The MISSION Act is fundamentally transforming VA healthcare by giving Veterans greater access to health care in VA facilities and the community, expanding benefits for caregivers, and improving VA's ability to recruit and retain the best medical providers.

-Department of Veterans Affairs – Budget in Brief 2021

In response to veterans preference to receive medical services closer to their homes, Congress enacted the VA MISSION Act in 2018, a historic law that contains a number of policy priorities of The American Legion and other veteran stakeholders.¹⁹ VA MISSION Act, principally, reforms the Department of Veterans' Affairs care programs, including Choice, into a single Veterans Community Care Program (VCCP). MISSION Act requires VA to promulgate new access standards, and to develop strategic plans with completed market assessments to provide care to veterans under the new VCCP.

The budget includes \$18.5 billion in 2021, a 21% increase from 2020, for the Medical Community Care program. The American Legion supports the president in adequately funding the success of the consolidated community care program. We offer this support recognizing that VA must continue to properly allocate sufficient funding to maintain VA's existing healthcare infrastructure. Additionally, our support relies on the understanding that VA must expand capacity in locations where demand for care justifies additional VA infrastructure.

Ensures Proper VA Staffing

The 2021 request supports a total of 404,835 FTE, or 14,866 FTE above the 2020 estimated level to expand access to health care and improve benefits delivery. This includes clinical and hospital

¹⁸ <https://www.va.gov/budget/docs/summary/fy2021VAbudgetInBrief.pdf>

¹⁹ VA Mission Act Pub. L. No: 115-182

staff in the Veterans Health Administration (VHA), including physicians, nurses, and scheduling clerks. These dedicated employees come to work for America's Veterans and have a close connection with Veterans – over 33 percent are Veterans themselves. The 2021 request assumes a 1 percent pay raise.

-Department of Veterans Affairs – Budget in Brief 2021

The American Legion has long expressed concern about staffing shortages at VA. Unfortunately, no easy solutions exist for VA to effectively and efficiently recruit and retain staff at VA healthcare facilities. The American Legion believes access to basic healthcare services offered by qualified primary care providers should be available locally, and by a VA healthcare professional, as often as possible.

It is important to understand that simply providing additional funding will not resolve the issue of staff shortages. The American Legion understands filling highly skilled vacancies at premiere VA hospitals around the country is challenging. VA has a variety of creative solutions available to them beyond additional legislative action. One such idea involves aggressively seeking public-private partnerships with local area hospitals. VA could expand both footprint and market penetration by renting space in existing hospitals, enabling VA to leverage existing resources and foster comprehensive partnerships with the community. Further, VA could research the feasibility of incentivizing recruitment at level 3 hospitals by orchestrating a skills sharing program that might entice physicians to work at level 3 facilities if they were eligible to engage in a program where they could train at a level 1 facility for a year every 5 years while requiring level 1 facility physicians to spend some time at level 3 facilities to share best practices.

The president's budget recognizes the need for additional staff and has proposed adding an additional 14,866 full-time employees above 2020 levels. The American Legion supports adding additional employees to ensure the timely delivery of services but urges the VA to simultaneously employ creative solutions to solve VA staffing issues as well.

Better Care for Women Veterans

The needs of a growing number of women Veterans mean that VA must provide more gender-specific primary care services, expand access to gynecology, and continue to identify and serve the health care needs for a unique Veteran population.

-Department of Veterans Affairs – Budget in Brief 2021

Women are a vital component of the U.S. Armed Forces and have increasingly served in higher numbers than ever before. As a result, VA needs to be prepared for the sustained increase of younger female veterans as they complete their active service. The 2015 Department of Veterans Affairs Women Veterans Report noted that the total population of women veterans is expected to increase at an average rate of about 18,000 per year for the next 10 years.²⁰ While VA has made

²⁰ Women Veterans 2015, The Past, Present and Future of Women Veterans. “*Women Veterans' Report.*” www.va.gov/vetdata/docs/specialreports/women_veterans_2015_final.pdf

significant advancements in meeting the demands of an increasingly diverse veteran population, continued diligence is required to ensure that all veterans receive the high quality care they deserve.

VA must ensure that women veterans have access to quality gender-specific healthcare across the entirety of the network. Women veterans using VA care require knowledgeable providers in women's health to deliver comprehensive primary care services, including mental health, gender-specific care, and referrals for reproductive healthcare needs. The continued funding of a full-time Women Veterans Program Manager at every VHA health care system is essential to ensuring women veterans needs are met.

The American Legion continues to advocate for improved delivery of timely and quality healthcare for women using VA. Ensuring women veterans receive the quality care they deserve is a top priority of The American Legion. The president's budget recognizes the need for additional funding in this critical area, and has proposed an increase of \$53 million which is 9 percent over last year's authorization levels.

Military and Veteran Caregiver Services

Funding requirements for the CSP are driven by an increase in the eligible Veteran population. Currently, only Veterans injured on or after September 11, 2001 are eligible for this program. The 2021 request supports the expansion of this program under the MISSION Act to include eligible pre-9/11 era Veterans seriously injured in the line of duty.

-Department of Veterans Affairs – Budget in Brief 2021

The struggle to care for veterans wounded in defense of this nation takes a terrible toll on families. In recognition of this, Congress enacted, and President Barack Obama signed into law, the *Caregivers and Veterans Omnibus Health Services Act of 2010*. The unprecedented package of caregiver benefits was integral in ensuring America's veterans are properly care for.

The comprehensive package, however, was still not available to most family members who are primary caregivers to severely ill and injured veterans. Congress opened the program only to caregivers of veterans severely injured in the line of duty on or after Sept. 11, 2001.

The American Legion has long advocated for expanding eligibility and ending the obvious inequity that *Caregivers and Veterans Omnibus Health Services Act of 2010* created. All veterans should receive the same level of benefits for equal service. Thus, The American Legion supported the expansion of benefits to include all veterans who otherwise meet the eligibility requirements contained in the supports the expansion of this program under the MISSION Act. We urge this committee and the U.S. Congress to allocate the required funding to continue and expedite the expansion of the caregiver program to all eras of conflict and veterans who should be in this program. Moreover, we urge VA to swiftly implement the expansion of caregiver benefits with the funds that have been allocated by Congress. Failure to properly implement this expansion in the most expedited manner possible will only serve to perpetuate this obvious injustice.

The president's FY21 budget requests \$1.2 billion for the Caregiver Support Program, a \$485 million (68 percent) increase over the 2020 levels. The American Legion supports this initiative

and urges Congress to appropriate funds to ensure the expansion of benefits to veterans of all periods of service.

Additional Funding for State Approving Agencies

State Approving Agencies (SAAs) are responsible for approving and supervising programs of education for the training of veterans, eligible dependents, and eligible members of the National Guard and the Reserves. SAAs grew out of the original GI Bill of Rights that became law in 1944. Though SAAs have their foundation in federal law, SAAs operate as part of state governments. SAAs approve programs leading to vocational, educational or professional objectives. These include vocational certificates, high school diplomas, GEDs, degrees, apprenticeships, on-the-job training, flight training, correspondence training and programs leading to required certification to practice in a profession.

SAAs currently employ 250 professionals across 56 states and territories and are responsible for over 9,000 facilities and more than 150,000 programs. SAAs serve our veterans by protecting the quality and integrity of the GI Bill programs. These unique state agencies, funded by federal contract through the VA, approve programs according to federal and state requirements. They provide oversight to make sure schools remain compliant with those requirements through school visits and routine renewal of approval.

After being flat funded for over a decade at \$19 million dollars, Congress increased the funding of SAAs to \$23 million dollars (\$3 million in discretionary funding has never been paid by VA and is not counted in the increase) in 2017. This amount of funding is far short of the needed increase to reflect the increasing complexity of administering the benefit given legislative changes and the rapid growth of beneficiaries driven by the Post 911 and Colmery GI Bills. This along with the increased cost of hiring and retaining personnel, to include rising health care and benefit costs (well over \$20,000 average per professional over the past decade) means that SAAs continue to struggle to provide the needed service to and protection for veterans and their families. As such, we urge Congress to increase the SAA allocation from \$23 to \$30 million to allow these critical agencies to continue to provide approval and oversight of quality educational and training programs for our veterans.

Ensuring Quality Care to Rural Veterans

The budget requests \$270 million for rural health projects. VA is committed to improving the care and access for Veterans in geographically rural areas.

-Department of Veterans Affairs – Budget in Brief 2021

It is imperative that VA ensures veterans have access to high quality care no matter where they live. Veterans who live in rural or highly rural communities often face difficulties when attempting to receive treatment. Although the implementation of the MISSION Act has allowed veterans to receive care in their communities, rural veterans still encounter challenges when seeking medical services.

VA's use of telehealth technology is integral in ensuring veterans who live in rural communities have access to VA services. As the largest integrated healthcare system in the United States, the VA provides telehealth at more than 900 sites across the country in over 50 areas of specialty care. In 2017, 45 percent of veterans who received care via telehealth lived in rural areas, yet many more veterans have limited access to this technology due to a lack of reliable connectivity. To ensure that more veterans have access to this technology, The American Legion has partnered with VA and Philips to bring telehealth technologies to local American Legion posts.

This program, known as Project ATLAS, will expand the availability of telehealth and allow veterans to be examined by a doctor in a familiar setting. Philips will install video communication technologies and medical devices in selected American Legion posts to enable remote examinations through a secure, high-speed internet line.

The American Legion's System Worth Saving task force travels the country to evaluate VA medical facilities and ensure they are meeting the needs of veterans. During each site visit, a town hall meeting is hosted by an American Legion Post. The town hall meetings have consistently illustrated that veterans are concerned about accessing care in rural areas as VA realigns services closer to population centers. The American Legion urges Congress to evaluate VA's plan in rural areas and to stop VA from closing hospitals and community-based outpatient clinics unless existing community services can meet or exceed the services VA currently provides.

The president's proposed budget requests \$1.3 billion for the total Telehealth program, an increase of \$271 million above the 2020 level. In 2022, VA is requesting \$1.7 billion, an increase of \$48 million above the 2021 level. The American Legion ardently supports this initiative and urges Congress to appropriate funds to bring affordable VA healthcare to veterans in rural areas through this program.

The Veteran Appeals Process

VA requests \$198 million in budget authority and 1,161 FTE for the Board of Veterans' Appeals (Board) to support its operations.

-Department of Veterans Affairs – Budget in Brief 2021

The American Legion currently holds power of attorney on more than 1.3 million claimants. We spend millions of dollars each year defending veterans through the claims and appeals process, and our success rate at the Board of Veterans Appeals (BVA) continues to hover around 75 percent. Until President Trump signed the *Veterans Appeals Improvement and Modernization Act of 2017* (Appeals Modernization Act or AMA) at The American Legion's National Convention in Reno, Nevada, VA had a complex claims and appeals system.²¹

This "legacy" system divided jurisdiction amongst VA's three administrations and the Board of Veterans' Appeals (BVA). This confusing and complex process eventually led to extensive wait

²¹ Veterans appeals Improvement and Modernization Act of 2017, Pub. L. No: 115-55.

times and created a backlog. At the time, it was estimated it would take over nine years to resolve the over 200,000 case backlog.²²

Recognizing this indefensible state of affairs, The American Legion worked with other stakeholders, VA, and Congress to develop the Appeals Modernization Act. The law created a new system with three review options:

- A “higher-level review” by a more senior claims adjudicator
- A “supplemental claim” option for new and relevant evidence
- An “appeal” option for review by the Board of Veterans’ Appeals

Now, claimants may choose the option that best suits their needs. This new framework reduces the time it takes to review, process, and make a final claim determination, all while ensuring veterans receive a fair decision. Additionally, the Appeals Modernization Act framework includes safeguards to make sure claimants receive the earliest effective dates possible for their claims.

The Appeals Modernization Act became fully effective in February 2019. The AMA sets forth specific elements that VA must address in its implementation, including reporting requirements. For example, AMA requires VA to provide reports to Congress every six months. VA’s last report to Congress was in August 2019, so the best information available is six months old.²³ According to that report, the Veterans Benefits Administration has a clear path to a sustainable steady state workload by 2022.

However, the Board of Veterans’ Appeals (BVA) did not report information on the AMA workload in that report and it is unclear if the BVA is on a path to sustainable performance or how long it will take to get there or whether it has adequate resources. We need a lot more data about inflows, outflows and inventory for every docket in the BVA, including the legacy docket and all three AMA dockets. VA must provide stakeholders and Congress clear metrics to measure the progress and success of appeals and claims reform and strengthen Congress’s ability to hold VA accountable for meeting these metrics.

Medical and Prosthetic Research

The 2021 request for the Medical and Prosthetic Research appropriation is \$787 million, an increase of \$37 million, or 5 percent, from 2020...

VA has among the richest health datasets in the world, including those associated with the Million Veteran Program (MVP). These datasets hold information that will benefit both Veterans and the nation. To accelerate the rate of these discoveries, VA is taking the steps necessary to ensure that research with a translational trajectory will be conducted at larger scale.

-Department of Veterans Affairs – Budget in Brief 2021

²² VA Debt Management Brief, Office Of Management, “*Department of Veterans Affairs Debt Management and Collections*” drive.google.com/file/d/0B70_mGYT1tJETzZGWUZKYzdGXzg/view

²³ http://www.veteranslawlibrary.com/files/VA_Appeals_Modernization_Update_August_2019.pdf

The American Legion believes VA research must focus on improving treatment for medical conditions unique to veterans. Because of the unique structure of VA's electronic medical records (VISTA), VA Research has access to a great amount of longitudinal data incomparable to research outside the VA system. Because of the ongoing wars of the past two decades, several areas have emerged as "signature wounds" of the Global War on Terror, specifically Traumatic Brain Injury (TBI), Posttraumatic Stress Disorder (PTSD), and dealing with the effects of amputated limbs.

Much media attention has focused on TBI from blast injuries common to Improvised Explosive Devices (IEDs) and PTSD. As a result, VA devoted extensive research efforts to improve the understanding and treatment of these disorders. Amputee medicine has received less scrutiny but is no less a critical area of concern. Because of improvements in body armor and battlefield medicine, catastrophic injuries that in previous wars would have resulted in loss of life have led to substantial increases in the numbers of veterans who are coping with loss of limbs.

America's disabled veterans depend on VA maintaining its reputation as the leader in prosthetics care and service. VA has a reputation in the United States and around the world of providing the best possible prosthetic care to its disabled veterans. However, The American Legion remains concerned that once these veterans transition away from active duty status to become veteran members of the communities, there is a drop-off in the level of access to these cutting edge advancements.

Reports indicate the state of the art technology available at DoD sites is sometimes not available through a VA Medical Center. With so much focus on "seamless transition" from active duty to civilian life for veterans, this is one critical area where VA cannot afford to lag beyond the advancements reaching service members at DoD sites.

The American Legion urges Congress to ensure appropriations are sufficient to meet the prosthetic needs of all enrolled veterans. We believe the VA must continue to protect all funding for prosthetics and sensory aids. The VA must maintain a dedicated, centralized funding prosthetic budget to ensure the continuation of timely delivery of quality prosthetic services to the millions of veterans who rely on prosthetic and sensory aids' devices and services to recover and maintain a reasonable quality of life.

Finally, The American Legion is supportive of VA's landmark Million Veteran Program (MVP) research effort. MVP is a national research program to learn how genes, lifestyle and military exposures affect health and illness. MVP-based studies focus on topics including PTSD, suicide prevention, heart disease and diabetes. Findings from several studies have appeared in high-impact medical and scientific journals. More than 800,000 veterans are already enrolled in MVP, and the recent launch of online enrollment has made it easier for more veterans to take part.²⁴

Assisting Homeless Veterans

²⁴ <https://www.va.gov/opa/pressrel/pressrelease.cfm?id=5387>

The VA requests approximately \$1.9 billion for homeless programs, \$82 million above 2020. The 2021 request includes an increase of \$30 million for case management for the Department of Housing and Urban Development-VA Supportive Housing (HUD-VASH) program.

-Department of Veterans Affairs – Budget in Brief 2021

The American Legion strongly believes that homeless veteran programs should be granted increased funding to provide supportive services such as, but not limited to: outreach, health care, rehabilitation, case management, personal finance planning, transportation, vocational counseling, employment, and education. Additionally, we urge VA to leverage all monies appropriated to them by Congress to ensure continued progress in the fight against veteran homelessness.

The American Legion continues to place special priority on the issue of veteran homelessness. With veterans making up about 11% of our nation's total adult homeless population, there is reason to give this issue special attention. Along with various community partners, we remain committed to seeing VA's objective of ending veteran homelessness achieved. Our goal is to ensure that every community across America has programs and services in place to get homeless veterans into housing (along with necessary healthcare/treatment) while connecting those at-risk veterans with the local services and resources they need.

State Veteran Home Construction Grants

Perhaps no program facilitated by the VA has been as impacted by the decrease in government spending than the State Veteran Home Construction Grant program. This program is essential in providing services to a significant number of veterans throughout the country at a fraction of the daily costs of similar care in private or VA facilities. States are pivoting towards resuming essential services, taking advantage of depressed construction costs, and meeting the needs of an aging veteran population, greater use of this grant program will continue. As our baby boomer population continues to transition into retirement, many more of these veterans are retiring to state veteran homes due to their excellent reputation for care and cost. The popularity of these retirement options will cause any surplus of space to become consumed. The American Legion encourages Congress to increase the funding level of this program.

National Cemetery Administration (NCA)

No aspect of the VA is as critically acclaimed as the National Cemetery Administration (NCA). In the 2010 American Customer Satisfaction Index, the NCA achieved the highest ranking of any public or private organization. In addition to meeting this customer service level, the NCA remains the highest employer of veterans within the federal government and remains the model for contracting with veteran-owned businesses.

While NCA met their goal of having 90 percent of veterans served within 75 miles of their home, their aggressive strategy to improve upon this in the coming five years will necessitate funding increases for new construction. Congress must provide sufficient major construction appropriations to permit NCA to accomplish this goal and open five new cemeteries in the coming five years. Moreover, funding must remain to continue the expansion of existing cemetery

facilities as the need arises. Additionally, it is imperative that Congress continue to appropriately fund the Veterans Legacy Program, which honors our nations veterans by educating America's youth on the service and sacrifices of those veterans interred at national cemeteries. The American Legion urges Congress to adequately fund all programs to meet the burial needs of our nation's veterans.

Advance Appropriations for FY 2022

The 2022 Medical Care Advance Appropriations request includes a discretionary funding request of \$98.9 billion (with medical care collections). The 2022 mandatory funding request is \$145.3 billion for veterans benefits programs (Compensation and Pensions, Readjustment Benefits, and Veterans Insurance and Indemnities).

-Department of Veterans Affairs – Budget in Brief 2021

The VHA manages the largest integrated health-care system in the United States, with 170 medical centers, nearly 1,400 community-based outpatient clinics, community living centers, Vet Centers and domiciliary serving over 9.2 million enrolled veterans. The American Legion believes those veterans should receive the best care possible.

If veterans are going to receive the best possible care, the system needs to continue to adapt to the changing demands of the population it serves. The concerns of rural veterans can be addressed through multiple measures, including expansion of the existing infrastructure through CBOCs, MISSION Act initiatives, improvements in telehealth and telemedicine, improved staffing and enhancements to the travel system, and other innovative solutions.

Patient concerns and quality of care can be improved by better attention to VA strategic planning, concise and clear directives from VHA, improved hiring practices and retention, and better tracking of quality by VA on a national level.

And finally, mandatory funds must be included in Advanced Appropriations along with full discretionary funding of all VA accounts. Veterans and dependents having their compensation and disability checks delayed because Congress refuses to pass an annual budget before being forced to close the federal government is reprehensible. Pass full advanced appropriations now.

Conclusion

In closing, The American Legion appreciates the leadership of this committee and remains committed to ensuring VA has the necessary funds, resources, and staff to carry out its mission of caring for our nations veterans. Further, The American Legion is committed to working with the Department of Veterans Affairs and this committee to ensure that America's veterans are provided with the highest level of support and healthcare.

Chairman Takano, Ranking Member Roe, and distinguished members of this committee, The American Legion thanks this committee for holding this important hearing and for the opportunity to explain the views of the nearly 2 million members of this organization. For additional

information regarding this testimony, please contact Ms. Melissa Bryant, Legislative Director, at MBryant@legion.org or (808) 263-2981.