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September 10, 2020

The Honorable Mark Takano
Chairman
House Committee on Veterans' Affairs
B234 Longworth House Office Building
Washington, DC 20515

The Honorable Phil Roe
Ranking Member
House Committee on Veterans' Affairs
B234 Longworth House Office Building
Washington, DC 20515

Dear Chairman Takano and Ranking Member Roe:

On behalf of the American Federation of Government Employees, AFL-CIO (AFGE) which represents approximately 700,000 federal and District of Columbia government employees in 70 agencies, including over 270,000 employees of the Department of Veterans Affairs (VA), I write to express our positions on specific bills being considered by the House Veterans Affairs Committee during the legislative hearing on September 10, 2020.

H.R. 7504, “VA Clinical TEAM Culture Act of 2020”

AFGE supports H.R. 7504, the “VA Clinical TEAM Culture Act of 2020.” Since the inception of the Choice program we have seen firsthand how the lack of understanding of the complex needs of the veteran community can lead to negative patient outcomes. Private providers should be held to the same standards of quality and competency as internal providers, and the type of training offered in this legislation points the Department in that direction.

H.R. 7784, “VA Police Improvement and Accountability Act”

AFGE is proud to represent VA police officers and supports several provisions of H.R. 7784, the “VA Police Improvement and Accountability Act.” Specifically, AFGE supports Section 2(b) of the bill, which will help train officers in “recognizing, defining, understanding, and avoiding racial profiling and implicit bias and best practices regarding the duty to intervene,” and “preventing suicide among the population served by the police officers.” This training will better allow VA police to support the veteran and staff population it serves.

AFGE also strongly endorses Section 2(d) of the bill which requires the VA to create a report on the “Staffing, Training, and Data Systems” of VA Police. This report will help identify staffing needs of the VA police force and ways to recruit and retain officers, including how “compensation for Department police officers affects such needs and turnover.”

Additionally, as the representative of the VA workforce, AFGE urges the committee to include AFGE on the list of named stakeholders that the VA must consult with when it implements policy changes.



H.R. 7879, “VA Telehealth Expansion Act”

H.R. 7879, the “VA Telehealth Expansion Act,” would require the VA to award grants for the expansion of telehealth capabilities for VA providers and non-Department providers who participate in the Veterans Community Care Program. AFGE has serious concerns that providing grant money to private sector providers will continue to erode the care being delivered by VA providers. While we support expanding telehealth capabilities, we cannot support allowing the private sector to continue taking over vital VA care. We ask the Committee to strike the references to non-Department providers.

H.R. 8005, “Veterans Access to Online Treatment Act”

AFGE takes no position on H.R. 8005, the Veterans Access to Online Treatment Act,” however, we urge the Committee to consider several changes to strengthen this proposal including required qualifications for principal investigators and consideration of the views of front line clinicians and researchers and their labor representatives. It is imperative that this proposed program does not in any way reduce veterans’ access to in-person individual psychotherapy which has consistently proven to be the most effective form of treatment.

H.R. 8033, “Access to Suicide Prevention Coordinators Act”

AFGE supports H.R. 8033, the “Access to Suicide Prevention Coordinators Act.” For too long mental health positions have remained unfilled at VA facilities nationwide. This legislation seeks to address that by ensuring each VA facility has at least one fulltime suicide prevention coordinator on staff. While there is certainly more work to be done to eliminate all mental health vacancies, H.R. 8033 will help reduce that backlog and ensure that if veterans are in crisis, the VA will have adequate staff and resources to care for them.

H.R. 8068, “American Indian and Alaska Native Veterans Mental Health Act”

AFGE supports H.R. 8068, the “American Indian and Alaska Native Veterans Mental Health Act.” This legislation would implement long overdue changes to the VA health care system to enable Native veterans to receive culturally competent mental health care through appropriately trained care coordinators, collaboration with local tribal leadership, and expanded data collection.

H.R. 8148, “VA Data Analytics and Technology Assistance Act”

AFGE supports H.R. 8148, the “VA Data Analytics and Technology Assistance Act.” The VA Data Analytics and Technology Assistance Act would allow researchers to better utilize the vast amounts of data that the VA collects through its electronic health record and research in order to make further advances in the treatment of the wounds of war.

H.R. 8144, “VA Mental Health Staffing Improvement Act”

AFGE supports H.R. 8144, the “VA Mental Health Staffing Improvement Act.” The VA Mental Health Staffing Improvement Act would require the VA to develop a plan in consultation with the VA Inspector General to address mental health staffing and fill current vacancies. AFGE believes that filling the more than 50,000 health care vacancies across the VA should be one of the highest priorities for both the Committee and the VA. Ensuring that medical facilities are adequately staffed is essential to providing veterans with timely, quality mental health care.

H.R. 8130, ‘VA Peer Specialists Act”

AFGE supports H.R. 8130, the “VA Peer Specialists Act,” which would increase the number of women peer specialists. The VA Peer Specialists Act would require the VA to take another important and long overdue step to ensure that women veterans receive services including peer support that are especially tailored to their unique needs, and address the current shortage of women peer support specialists at the VA.

H.R. 8107, “VA Emergency Department Safety Planning Act”

AFGE supports H.R. 8107, the “VA Emergency Department Safety Planning Act.” The VA Emergency Department Safety Planning Act would make much needed safety improvements in VA emergency departments (ED) across the nation through improved safety plans for ED personnel, increased follow-ups with at-risk veterans and new reporting requirements.

H.R. 8147, “TREAT Act”

AFGE supports H.R. 8147, the TREAT Act,” to provide additional means to address veteran suicide. The TREAT Act would establish a new VA program for complementary and integrative services to treat post-traumatic stress disorder, depression and anxiety, and require a study of integrative health treatments for mental and physical health conditions.

Discussion Draft, “ANS for Veterans’ ACCESS Act”

AFGE takes no position on the ANS to the Veterans’ ACCESS Act. We support the intention of this ANS, and the underlying bill, which is to ensure that veterans who are in crisis get the care they need immediately. However, AFGE would rather see more emphasis placed on building internal capacity at the VA. Specifically, the VA needs to focus on improving Department Emergency Rooms and reopening previously shuttered Emergency Rooms. The VA also needs to adequately address its staffing deficiencies and work to reduce the nearly 50,000 vacancies that have not been filled in the past two years. For too long the VA’s solution to every problem has been to outsource to the private sector. This shortsighted strategy must stop and AFGE looks forward to working with the Committee to address critical internal capacity needs of the VA health care system.

Discussion Draft, “Veterans Comprehensive Prevention, Access to Care, and Treatment Act of 2020”

AFGE urges the Committee in the strongest possible terms to oppose inclusion of Section 504 in the “Veterans Comprehensive Prevention, Access to Care, and Treatment Act of 2020” (COMPACT Act). Section 504 would move psychologists who work at Department of Veterans Affairs (VA) medical facilities from the Hybrid Title 38 personnel system to the full Title 38 personnel system. Inclusion of Section 504 will destroy the collective bargaining rights of rank and file VA psychologists, and accelerate the current attacks on the rights of every other VA employee, as well as establish a precedent against the union rights of federal employees across the government.

Section 504 will not strengthen the Department’s ability to deliver mental health services, but rather may undermine it by making it harder to recruit and retain psychologists. This provision of the draft bill will eliminate essential rights to bargain with management over virtually all changes in working conditions, including schedules, assignments, career development and violations of pay rules. If Section 504 becomes law, rank and file psychologists will also face an additional year of at-will employment upon hiring because full Title 38 employees have two-year probationary periods while psychologists currently have one-year probationary periods under Title 5. VA psychologists will also risk losing their current right to a 40-hour work week and paid overtime under the VA’s “24/7” policy that covers VA physicians.

Finally, increased psychologist compensation under the physician pay system that would apply is far from guaranteed, especially for rank and file psychologists. The current physician system has significant flaws that have resulted in widespread frustration among full Title 38 clinicians and greatly hindered the Department’s ability to fill chronic physician vacancies.

AFGE stands ready and willing to work with the Committee and stakeholders on the many alternatives to this anti-labor proposal that can improve psychologist compensation and working conditions, as well as build a future path to Title 38 status for psychologists that protects existing rights. We would welcome the opportunity to discuss these more fully with the Committee and stakeholders including veterans’ groups and organizations representing psychologists and full Title 38 clinicians.

AFGE also has concerns with Title 4 of this discussion draft; this section stipulates that the VA must enter into a contract with a non-Federal Government entity for the purpose of studying and providing oversight of the Department’s suicide prevention program. The federal government already has nonpartisan, unbiased entities whose sole purpose is to provide oversight and gauge the effectiveness of federal programs. This language seems superfluous when that work can already be done internally. We ask the Committee to strike this language from the draft.

Discussion Draft, “VA Expanded Care Hours Act”

The “VA Expanded Care Hours Act” (ECHO Act),” would require the VA to conduct a study on the opinions of both eligible veterans and employees on the VA offering appointments outside the usual operating hours of VA facilities, including through the use of telehealth appointments. AFGE supports the underlying bill and urges the Committee to add AFGE as a stakeholder in the study of employees. AFGE would welcome the opportunity to work with the VA to craft the study, maximize participation, and make recommendations based the study outcomes.

Discussion Draft, “Veterans Burn Pits Exposure Recognition Act of 2020”

The discussion draft of the “Veterans Burn Pits Exposure Recognition Act of 2020,” would order the VA to consider veterans who served at specific times in Iraq, Afghanistan, Djibouti, or the “Southwest Asia Theater of operations” to have been exposed to certain “toxins, chemicals, and hazards” in burn pits.

AFGE supports this legislation. This bill will make it easier for veterans to apply for and receive benefits for their exposure to toxic materials found in burn pits. Additionally, by conceding that veterans were exposed, the VA can streamline the claims process and allow employees to process claims more accurately and efficiently. AFGE is proud to represent the employees who process these claims and urges the Committee to require the VA to consult with the employee union to ensure that employees receive adequate training on the new processes related to these claims, and ensure that new trainings and procedures are followed universally at each Veterans Benefits Administration Regional Office.

Thank you for considering the views of AFGE and its front-line workforce. We look forward to working with the Committee to improve the delivery of VA mental health services to veterans. For additional information or questions please contact Matt Sowards at Matt.Sowards@afge.org.

Sincerely,



Alethea Predeoux
Director, Legislative Department

