

HVAC Member Day Hearing Statement: Rep. Peter Meijer

Thank you, Mr. Chairman, and Mr. Ranking Member, for calling this hearing today and giving members the opportunity to discuss their efforts on behalf of our nation's veterans. This is clearly an area where strong bipartisan support and cooperation remains, and I am grateful for the opportunity to speak to the Committee today.

We have an urgent moral obligation to take care of the men and women who have served and sacrificed to defend our nation. As an Iraq War veteran, I will always advocate for these brave servicemembers and consider it an honor to have the opportunity to do so now as a member of Congress. I am proud to have already joined several of my colleagues in these bipartisan efforts.

One of my top priorities is addressing the toxic exposure our veterans have experienced from burn pits during their service. I am proud to have introduced H.R. 2436, the Veterans Burn Pits Exposure Recognition Act, alongside my Michigan colleague Representative Slotkin as a critical first step to move this conversation forward and complement other legislative efforts.

This bill formally concedes exposure to airborne hazards and toxic substances from burn pits for veterans who served in certain locations during covered periods, taking the unreasonable burden off the veteran to first prove specific exposures when filing a claim with the VA.

I commend Chairman Takano, Ranking Member Bost, and the entire Committee for your clear dedication to addressing this issue, and I appreciate the conversations you have had on this bill and others. I am committed to this effort and stand ready to assist the Committee in any way that I can.

I also want to use my time today to bring attention to the persistent staffing challenges that have plagued the Veterans Health Administration for years.

We all want to make sure that veterans are receiving the high-quality care they deserve, and this requires having enough medical providers to administer that care. Unfortunately, severe VHA staffing shortages have continued for years and represent a consistent obstacle to adequate treatment and care for our veterans.

I am proud to be co-leading an effort to address this longstanding challenge alongside my good friend from Colorado, Mr. Crow, and would like to thank him for his continued leadership on this issue. Together we introduced H.R. 3027, the Veterans Improved Access to Care Act of 2021, to establish a VA pilot program aimed at expediting the onboarding of licensed medical professionals at understaffed VA facilities.

The bill would also expand related reporting requirements in the VA MISSION Act and require the Secretary of the VA to submit a detailed report on how to best streamline the VA's hiring process.

According to a September 2020 report from the VA Office of the Inspector General, 95% of VHA facilities identified having at least one severe occupational staffing shortage. The report also found that 87% of medical center directors identified a severe shortage of medical officers, and 72% reported a severe shortage of nurses. This is an unacceptable and unsustainable situation for our veterans. We must do better.

I appreciate the significant efforts made by the Department to expedite the hiring and onboarding processes in order to meet the needs and challenges posed by the COVID-19 pandemic. These steps, however, were emergency steps taken to address a public health crisis. What we need now is careful analysis of what worked well, what could be improved upon, and what other strategies may exist that could be used to expedite the hiring process while ensuring the continuation of quality care. That is the exact opportunity that this pilot program would provide.

This existing information gap amplifies the need for the pilot program that would be established by our bill. This legislation sets the conditions of the program, requiring the participation of at least ten facilities in regionally diverse areas with varied populations. It mandates that at least three of those facilities are chosen from areas that have populations of less than 100,000 people, ensuring that facilities serving smaller and more rural communities are also included.

By choosing facilities from all over the country, representing different communities with varied demographics, this program will provide the VA with strategies that can be used to benefit all veterans regardless of where they live. The lessons learned by this program will be critical in determining the most efficient

strategies to help address staffing shortages and get more qualified VA medical personnel into facilities without sacrificing the quality of care that our veterans receive.

This bill has real potential to improve access to and quality of care for our veteran population and help address the VA's longstanding staffing challenges, and I encourage the Committee to consider this measure and related efforts in the future.

I look forward to continuing to work with all of you on efforts to assist the brave men and women who answered the call to serve our country in uniform. Thank you again for this opportunity to speak to the Committee today, and I yield back.