

STATEMENT OF
NANCY SPRINGER, ACTING DIRECTOR
NATIONAL LEGISLATIVE SERVICE
VETERANS OF FOREIGN WARS OF THE UNITED STATES

FOR THE RECORD

UNITED STATES HOUSE OF REPRESENTATIVES
COMMITTEE ON VETERANS' AFFAIRS

WITH RESPECT TO

Pending Legislation

Washington, D.C.

March 18, 2026

Chairman Bost, Ranking Member Takano, and members of the committee, on behalf of the men and women of the Veterans of Foreign Wars of the United States (VFW) and its Auxiliary, thank you for the opportunity to provide testimony regarding this pending legislation.

H.R. 210, Dental Care for Veterans Act

The VFW supports this legislation that would finally recognize oral health as a critical part of a veteran's overall well-being. For far too long, the Department of Veterans Affairs (VA) has failed to provide millions of veterans enrolled in its health care system with the dental services they need, even though poor oral health is closely linked to serious medical conditions such as heart disease, diabetes, and respiratory illness. This bill takes an important step toward correcting that gap by ensuring that VA treats dental care the same as any other medical service within its health care system, that is an approach for which the VFW has advocated for many years. We also support the bill's phased rollout that responsibly expands eligibility while giving VA the time and resources needed to build capacity, hire providers, and maintain high-quality care. This approach is practical and ensures the system can grow without overwhelming veterans or providers.

H.R. 1391, Student Veteran Benefit Restoration Act of 2025

The VFW supports this legislation to protect student veterans and their earned education benefits from schools that commit fraud. Instances of fraud could include Title 38, United States Code, Section 3696 violations of substantial misrepresentation through advertising, marketing, recruiting, and enrollment practices. It would also include programs without approval by a State Approving Agency (SAA) and schools found guilty of fraud by a court of competent jurisdiction. This legislation would require VA to restore the student's education entitlements and require the school to repay VA the associated funds it received. As written, the protections would apply to future violations of fraud. We recommend that this legislation include retroactive restoration of education entitlements for students affected before enactment. We also recommend clarification

of the provision regarding programs that SAAs have not approved. Currently, schools without SAA approval do not receive VA education funding. However, if clarified, this provision could protect students who cannot complete their programs if an SAA removes approval due to fraud after they have begun.

H.R. 1732, Governing Unaccredited Representatives Defrauding (GUARD) VA Benefits Act

The VFW continues to strongly support this legislation to establish and enforce penalties for unaccredited individuals and companies that charge fees to assist veterans with VA disability compensation claims. This legislation would protect veterans from the unscrupulous predatory practices of unaccredited representatives commonly known as “Claim Sharks” that operate outside the law purely for monetary gain. It would ensure that only accredited representatives who are duly vetted and trained assist veterans within highly developed, VA-monitored guardrails and safeguards. The VFW urges swift passage of this legislation.

H.R. 2303, Board of Veterans’ Appeals Attorney Retention and Backlog Reduction Act

The VFW supports this legislation to promote attorney retention at the Board of Veterans’ Appeals (BVA) by eliminating the current GS-14 cap on BVA non-supervisory attorneys and allowing promotion to GS-15, which is an approximate \$10,000 salary increase. Currently, other VA departments such as the Office of General Counsel allow GS-15 non-supervisory attorneys, luring some attorneys away from the lower paying positions at BVA.

Attorney attrition also adversely affects the appeals decision backlog at BVA, so this proposal could help reduce the backlog by retaining experienced attorneys. Of note, it does not mandate new hiring or attorney promotion, but gives BVA the flexibility to increase pay within its existing appropriations like other VA entities. However, though higher pay may attract and retain a seemingly more capable attorney, the assumption that these attorneys will provide higher quality and faster production may be unfounded. VA should conduct further research to correlate higher pay with enhanced production.

H.R. 2722, VA Funding and Workforce Protection Act

The VFW supports this legislation to limit disruptions to VA funding and staffing levels. This position aligns with VFW Resolution 614 (VFW Opposes Budget Cuts That Harm Veterans and Their Families) passed in 2025. To ensure VA can effectively serve veterans, this legislation would prohibit the impoundment, transfer, or reprogramming of VA appropriations without specific statutory authority.

VA must also be able to hire and retain a qualified and well-trained workforce. Therefore, we support the provisions that would exempt VA from federal hiring freezes and unplanned layoffs, including those affecting probationary employees. Additionally, the VFW supports the provision requiring VA to notify the House and Senate Committees on Veterans’ Affairs at least 15 days before implementing employee removals resulting from reductions in force or agency reorganizations.

H.R. 3183, Supporting Access to Falls Education and Prevention and Strengthening Training Efforts and Promoting Safety Initiatives (SAFE STEPS) for Veterans Act of 2025

While reducing fall-related injuries among veterans is an important goal, the VFW does not support this legislation to establish an Office of Falls Prevention at VA. We do not believe creating additional structure would be the most effective way to address this serious problem area. The Veterans Health Administration (VHA) currently has multiple offices and teams dedicated to safety, risk prevention, and rehabilitation. Strengthening these existing programs, such as those within the prosthetics department, and physical or occupational therapy, would be a more practical solution. These teams currently conduct home evaluations for adaptation programs, provide mobility and balance training, and engage directly with veterans in fall prevention efforts.

Establishing a new office could add layers of bureaucracy, increase administrative costs, and create confusion regarding roles and responsibilities across VA services. Additionally, it is unclear how many veterans would voluntarily allow home fall-risk evaluations unless they specifically request home adaptations. Before creating a new office, the VFW recommends that Congress and VA conduct a comprehensive evaluation of current resources, staffing, and interdepartmental coordination within VHA. This would help identify gaps and strengthen collaboration within existing structures. Enhancing and integrating current efforts would improve outcomes without creating unnecessary administrative hurdles.

H.R. 3869, Every Veteran Housed Act

The VFW supports this legislation to expand eligibility for VA homelessness programs by modernizing the statutory definition of a veteran. By allowing individuals discharged under conditions other than dishonorable and not by reason of a general court-martial sentence to qualify for VA homelessness programs regardless of length or type of service, this legislation would remove long-standing administrative barriers that prevent vulnerable former service members from accessing essential housing assistance. Housing is a foundational component of mental health stabilization, and consistent access to permanent housing is an integral factor in suicide prevention.

H.R. 4114, Ensuring Veterans' Smooth Transition (EVEST) Act

The VFW supports this legislation. We recognize the importance of ensuring that service members experience a seamless transition from active duty to veteran status, particularly when it comes to accessing health care. This bill proposes to automatically enroll eligible veterans in the VA health care system and establish a 60-day timeframe for VA to complete enrollment. Too many veterans miss out on essential health care during the transition period because the enrollment process can be confusing, delayed, or poorly understood. Provisions in the bill requiring VA to notify veterans of their enrollment and provide clear, accessible options to opt out help ensure veterans are aware of their eligibility while maintaining their ability to control participation in the system. Additionally, the requirement for a Government Accountability Office review within 180 days may provide valuable insight into the most effective methods for reaching veterans of different ages, backgrounds, and geographic areas.

H.R. 4876, Reproductive Freedom for Veterans Act

The VFW supports this legislation to ensure that veterans receiving VA care have access to comprehensive reproductive health services. As the number of women veterans increases, VA must address the full spectrum of their needs. Access to comprehensive care within VA promotes continuity, patient safety, and the overall well-being of veterans.

H.R. 5203, To direct the Secretary of Veterans Affairs to update directives of the Department of Veterans Affairs regarding the management of acute sexual assault, and for other purposes

The VFW supports this legislation directing VA to update its directives for managing acute sexual assault. Veterans who experience sexual assault need timely access to trauma-informed medical care, forensic examinations, and mental health support. Updating VA policies and training staff would improve consistency in facility responses and ensure compassionate, comprehensive care. The VFW supports efforts to strengthen survivor services and enhance VA's ability to provide safe, respectful, and effective care for veterans affected by sexual assault.

H.R. 6549, VA Contracting and Procurement Act

The VFW supports the intent of this legislation to improve efficiency, transparency, and accountability in VA contracting and procurement. Timely and responsible acquisition of medical equipment, services, and technology is vital to providing quality care and benefits to veterans. The VFW also backs initiatives that expand opportunities for service-disabled veteran-owned small businesses to compete for federal contracts. Streamlining procurement while maintaining oversight would help ensure effective use of taxpayer resources, and provide VA facilities with the necessary tools and services to support veterans.

H.R. 6583, VA Research Reform Act of 2025

The VFW supports this legislation to strengthen and modernize VA's medical research enterprise. VA research has been essential in advancing treatments for conditions affecting veterans, such as traumatic brain injury, toxic exposures, mental health, and prosthetic innovations. Enhancing coordination, transparency, and efficiency within the VA research system would help keep priorities aligned with veterans' evolving health needs. The VFW supports efforts to improve VA's capacity for high-quality, veteran-centric research, and to translate findings into better care and health outcomes.

H.R. 6599, Leasing and Infrastructure Act of 2025

The VFW supports this legislation to modernize and improve VA infrastructure to ensure timely, high-quality care for veterans. As veteran populations shift and VA facilities age, greater flexibility in leasing and infrastructure planning may help address emerging access needs. However, the VFW is concerned that expanded leasing authority does not reduce congressional oversight or result in long-term dependence on costly leases instead of investing in permanent VA facilities. Infrastructure reforms should prioritize transparency, cost-effectiveness, and the

long-term stability of the VA health care system while maintaining uninterrupted access to care for veterans.

H.R. 6833, Acquisition Reform and Cost Assessment Act of 2025

The VFW supports the intent of this legislation because of our long-standing call for strong oversight, disciplined governance, and modernization across VA. We continue to emphasize that Congress must “honor the contract” by ensuring VA has the resources, staffing, and structural accountability necessary to deliver earned benefits and prevent systemic failures that harm veterans. Veterans rely on a VA system that must function reliably, transparently, and free of mismanagement to uphold the nation’s obligations. This legislation aims to advance these objectives by establishing unified acquisition leadership, independent cost assessment, and standardized program governance to prevent chronic failures in VA’s major programs, including information technology modernization, supply chain management, and health care systems that are foundational to timely access and high-quality care. These reforms align with VFW resolutions that call for fully resourced and effective VA programs and urge modernization and improved oversight of VA’s digital systems; and with the VFW’s legislative priorities that demand accountability, proper stewardship of taxpayer resources, and modernization of VA programs that fail to meet the needs of service members, veterans, and their families. However, the prospect of these reforms leading to further mandatory force reductions does not allow VFW support to be unconditional.

H.R. 6843, Establishing the Veterans Economic Opportunity and Transition Administration Act of 2025

The VFW recognizes the importance of strong leadership and coordination for programs that support veterans’ economic opportunity and successful transition to civilian life. This legislation proposes the creation of a new administration within VA responsible for overseeing programs related to education benefits, vocational rehabilitation and employment, housing assistance, and certain transition-related services. These programs are critical to helping veterans achieve long-term stability and success after military service. The VFW has consistently emphasized that while VA plays an essential role in supporting veterans after separation, preparation for transition is fundamentally a responsibility of the Department of Defense (DOD) while service members are still in uniform. Strong coordination, clear lines of accountability, and effective oversight between DOD and VA are essential to ensuring service members leave the military fully prepared for the opportunities and challenges of civilian life.

H.R. 6861, Consolidating Veteran Employment Services for Improved Performance Act

The VFW does not support this legislation due to the probable disruption of essential employment, reemployment, and homeless reintegration services by transferring long-standing Department of Labor programs to VA without guaranteed protections for continuity, staffing, or state-level capacity. Last year, the VFW cautioned Congress to ensure VA has proper staffing and resources before expanding its responsibilities, and more recently warned that program failures or mismanagement directly harm veterans and erode trust.

This proposal could jeopardize the effectiveness of the Homeless Veterans' Reintegration Program, weaken the *Uniformed Services Employment and Reemployment Rights Act of 1994* (USERRA) codified enforcement, and strain VA's workforce at a time when veterans already report delays, backlogs, and coordination challenges across multiple VA systems. Without demonstrable evidence that VA can absorb, integrate, and execute these programs without service degradation, and without clear safeguards to maintain or improve employment outcomes, the VFW cannot support this legislation at this time.

Discussion Draft, Get Justice-Involved Veterans BACK HOME Act

While the VFW supports the intent of this proposal to expand VA mental health services for incarcerated veterans, we do not support the proposal as written. It would require VA to conduct a pilot program to provide mental health care in correctional facilities, prioritizing those with a service-connected disability for post-traumatic stress disorder (PTSD), traumatic brain injury, or military sexual trauma (MST). During the pilot, VA would deliver mental health care services through telemental health or mobile units, establish dedicated veteran housing units in federal prisons where feasible, and automatically resume compensation payments upon release. This proposal would also amend Title 34, United States Code, Section 10132 to collect data pertaining to incarcerated veterans for an annual report to Congress.

The VFW has concerns about two provisions. First, the VFW recommends revising the language in Section 2(a) that would prioritize treatment for PTSD or MST. We recommend that the text refer more broadly to veterans with mental health conditions since the Veterans Affairs Schedule for Rating Disabilities does not currently differentiate between types of mental health conditions, except for eating disorders. Moreover, MST is not itself a mental health condition, but VA recognizes conditions that result from MST.

Second, Section 2(e)(2), Treatment and Assessment, states that "a health care provider providing mental health care under the pilot program shall provide treatment and assessment of medical conditions and is not to provide assessment or evaluation of current or future disability claims." This stipulation conflicts with the VFW's long-standing position that VA health care providers should provide medical nexus opinions and supporting documentation for disability claims since they have direct contact with the veterans they treat. As written, this provision could inadvertently discourage or prevent incarcerated veterans from filing disability compensation claims.

Discussion Draft, Toxic Exposure Advisory Committee Establishment Act

The VFW supports this proposal to establish an advisory committee on toxic exposures that includes Veterans Service Organization stakeholders as members. The committee would advise the Secretary of Veterans Affairs on cases in which veterans or their family members experienced toxic exposures during active service. Specifically, it would review toxic exposure cases through surveys of the scientific literature, evaluate the accuracy of information contained in the Individual Longitudinal Exposure Record (ILER) or its successor systems, and develop recommendations for formal evaluation under Title 38, United States Code, Section 1173, including potential nominations for presumption of service connections. By including Veterans

Service Organization stakeholders, this committee would differ from similar bodies and help ensure that VA's presumption decision process remains veteran-centric.

Discussion Draft, Office for Toxic Exposure Implementation and Oversight Establishment Act

The VFW supports this proposal to establish an Assistant Secretary of Veterans Affairs for Toxic Exposure Coordination and an Office for Toxic Exposure Implementation to oversee administration of the *Sergeant First Class Heath Robinson Honoring our Promise to Address Comprehensive Toxics (PACT) Act of 2022* (Public Law 117-168). This historic legislation finally delivered long-delayed health care and disability compensation to thousands of veterans exposed to toxic substances during military service. The law also created a durable framework for VA to systematically evaluate emerging toxic exposures and associated health conditions for presumption of service connection, which is an important designation that significantly streamlines the disability compensation claims process. Establishing this management structure would help ensure VA properly executes this complex and ongoing evaluation process, and continues to deliver health care and compensation to deserving toxic-exposed veterans.

Discussion Draft, Health Oversight for Network Operators Rendering Veterans' Essential Treatment and Services (HONOR VETS) Act of 2025

The VFW supports legislation requiring non-VA providers in the Veterans Community Care Program to complete training on veteran-specific health issues. As more veterans seek care outside VA facilities, it is critical that community providers understand the unique health risks and experiences related to military service, such as suicide risk, opioid safety, and chronic pain management. Standardized training would help ensure veterans receive high-quality, culturally competent care in all settings. The VFW believes this legislation would strengthen coordination between VA and community providers, and improve the quality and safety of care for veterans.

Chairman Bost, Ranking Member Takano, this concludes my testimony. Again, thank you for the opportunity to offer comments on this pending legislation.

Information Required by Rule XI2(g)(4) of the House of Representatives

Pursuant to Rule XI2(g)(4) of the House of Representatives, the VFW has not received any federal grants in Fiscal Year 2026, nor has it received any federal grants in the two previous Fiscal Years.

The VFW has not received payments or contracts from any foreign governments in the current year or preceding two calendar years.