

STATEMENT OF
ALEKS MOROSKY, DEPUTY DIRECTOR
NATIONAL LEGISLATIVE SERVICE
VETERANS OF FOREIGN WARS OF THE UNITED STATES

FOR THE RECORD

VETERANS' AFFAIRS SUBCOMMITTEE
ON HEALTH
UNITED STATES HOUSE OF REPRESENTATIVES

WITH RESPECT TO

VA's Caregiver Program: Assessing Current Prospects and Future Possibilities

WASHINGTON, D.C.

December 3, 2014

MR. CHAIRMAN AND MEMBERS OF THE SUBCOMMITTEE:

On behalf of the men and women of the Veterans of Foreign Wars of the United States (VFW) and our Auxiliaries, I would like to thank you for the opportunity to submit for the record regarding the Department of Veterans Affairs (VA) Family Caregiver Program.

Family caregivers who choose to provide in-home care to veterans who were severely disabled in the line of duty truly epitomize the concept of selfless service. They choose to put their lives and careers on hold, often accepting great emotional and financial burdens. They do so recognizing that their loved ones benefit greatly, both in terms of health outcomes and quality of life, by receiving care in their homes as opposed to institutional settings. The VFW strongly believes that contributions of family caregivers cannot be overstated, and that our nation owes them the support they need and deserve.

For this reason, the VFW strongly supported the *Caregivers and Veterans Omnibus Health Services Act of 2010* which provided a monthly stipend, respite care, mental and medical health care, and the necessary training and certifications required for caregivers of severely disabled Post-9/11 veterans. We have consistently maintained, however, that eligibility must be expanded to include veterans of all eras. Severely wounded veterans of all conflicts have made incredible sacrifices, and all family members who care for them are equally deserving of our recognition and support. The fact that caregivers of previous era veterans are excluded from the full complement of program benefits implies that their service and sacrifices are not as significant, and we believe this is wrong.

One of the requirements of the Caregiver Act was for VA to submit a report to Congress examining the feasibility of expanding eligibility for comprehensive caregiver benefits to those who care for severely injured veterans of previous eras. That report, issued in September 2013, estimated that between 32,000 and 88,000 Pre-9/11 veterans would become eligible for the program at a total estimated cost of \$1.8 to \$3.8 billion. VA stated that such an expansion would be operationally feasible, so long as Congress gives them the necessary funding to administer the programs and hire the required additional staff. Accordingly, we strongly support H.R. 3383, the *Caregivers Expansion and Improvement Act of 2013*, which would expand the Family Caregiver Program to all eras by striking “on or after September 11, 2001” from title 38 USC section 1720G(a)(2)(B). We feel that this legislation would correct a great and clear injustice, and we urge Congress to pass it swiftly and ensure that it is fully funded.

The VFW hears from our members often about this issue, and their message is clear: they strongly support expanding full caregiver benefits to veterans of all eras. As an intergenerational veterans service organization that traces its roots to the Spanish American War, this is not surprising. Our members are combat veterans from World War II, the wars in Korea and Vietnam, the Gulf War, and various other short conflicts, in addition to the wars of the current era. They rightly see no justifiable reason to exclude otherwise deserving veterans from program eligibility simply based on the era in which they served.

Recently, we received correspondence from a caregiver in Wisconsin whose husband was shot 18 times in Vietnam, resulting in the amputation of his left leg above the hip, his left thumb, and severe neuropathy of the left arm from a gunshot wound to the wrist. Due to his extreme physical injuries, she has been assisting him with his activities of daily living for more than 25 years. Another caregiver of a Vietnam veteran from Pennsylvania shared with us that he requires 24/7 care due to his severe PTSD which manifests as psychotic episodes, putting him at risk for suicide. She is a registered nurse who was forced to quit her job in order to care for her loved one. Both of these spouses have chosen to accept the task of serving as caregivers rather than see their family members institutionalized, even though both veterans would qualify for full nursing home benefits. They believe, as we do, that the veterans they care for experience a much greater quality of life by living at home, despite the massive challenges they face. The VFW strongly believes that caregivers like these should not be forced to choose between placing their family members in institutional care settings and exposing themselves and their families to severe financial hardship.

Additionally, the VFW strongly believes that program eligibility must be expanded to include caregivers of veterans who suffer from severe service-related illnesses. The Department of Defense provides support to family caregivers of members of the armed forces who are catastrophically disabled through its Special Compensation for Assistance with Activities of Daily Living (SCAADL) program, which includes disability caused by illnesses in its eligibility requirements. Although service-related diseases affect veterans of all eras, we note that this issue is of particular importance to Gulf War veterans who continue to suffer at high rates from horribly debilitating diseases associated with Gulf War Illness. The VFW believes that it is necessary to fully align VA caregiver benefits with the SCAADL program, creating a more seamless transition for the most severely disabled veterans, and ensuring that those who care for them receive the support they need. For this reason, we strongly support H.R. 3672, the *Support*

our Services to Veterans Caregivers Act, introduced by Representative Raul Ruiz, which would expand eligibility for the Family Caregiver program to veterans who suffer from serious illnesses incurred or aggravated in the line of duty.

The VFW is aware of the findings of the September 2014 Government Accountability Office report entitled, "Actions Needed to Address Higher-Than-Expected Demand for the Family Caregiver Program," and that improvements are needed to ensure the program is properly administered. We strongly agree with the recommendations contained in the report. VA must implement a staffing model that ensures that facilities are able to meet the demand for services, and adopt an IT system that is capable of supporting the program. We believe that addressing these shortcomings is obviously the right thing to do and should be non-negotiable. We do not, however, believe that these very fixable problems should be viewed as a reason to deny or delay expanding program eligibility to caregivers of veterans of previous eras or with service-related diseases. These family caregivers have already been without the support they need for far too long. Some have been providing care for severely injured loved ones to their own financial and emotional detriment for decades. The VFW believes that making them continue to wait to receive benefits while relatively minor issues are resolved does them an extreme disservice and is completely unnecessary.

The VFW is also aware that there would be a significant cost associated with expanding program eligibility to all eras, and that the Congressional Budget Office (CBO) estimate that full expansion would cost \$9.5 billion over the next five years may sound prohibitively expensive to some. We contend, however, that this estimate is misleading in terms of the overall impact on the VA budget. It seems logical to us that the ability of veterans to remain in their homes receiving care from family members would allow them to avoid nursing home care which is far more expensive. We do not believe that CBO has taken this into account. According to VA's Fiscal Year 2015 Budget Request, VA spent more than \$5 billion providing institutional care to more than 40,000 veterans in fiscal year 2013. The average per diem cost for a VA Community Living Center was \$971.97, totaling over \$350,000 per veteran, per year. At contracted community nursing homes, VA spends over \$90,000 per veteran, per year. The VA contribution for a veteran at state-run nursing homes averages over \$45,000 per veteran, per year. On the other hand, CBO estimates that the average cost of benefits to a primary caregiver would total only \$33,000 per year. The VFW realizes that CBO is not able to take potential savings into account when calculating cost. We believe, however, that a small technical change to the legislation that has been introduced could make a difference. By inserting a non-duplication of benefits provision such as, "An individual entitled to nursing home care and the Family Caregivers Program may not receive assistance under two such programs simultaneously, but shall elect (in such form and manner as the Secretary may prescribe) under which chapter or provisions to receive such care," we believe that CBO would be induced into scoring the bill more dynamically.

The VFW recognizes that many in Congress may be hesitant to support a large expansion of any VA program at this time, instead choosing to focus on oversight to ensure VA is able to properly administer the programs it currently provides. This is understandable, given the many failures of the Department exposed by the revelations originating in the Phoenix VA Health Care System earlier this year. The VFW notes, however, that the reform bill brought about by that scandal,

the *Veterans Access, Choice and Accountability Act (VACAA)*, dealt in large part with the problem of access by establishing the \$10 billion Veterans Choice Program to allow veterans the option of seeking non-VA care when it could not be readily provided at VA. The VFW strongly supports the idea of veterans' choice, believing that a one-size-fits-all approach to providing health care is not the best option for every veteran. Likewise, we see the option to receive care from a family caregiver, as opposed to an institutional setting, as one that every severely disabled veteran should have. For this reason, we see the full expansion of the Caregiver Program as fully consistent with the spirit of VACAA, and urge Congress to approach this issue with the same urgency as it did the issue of access when it wisely created the Veterans Choice Program.

Mr. Chairman, this concludes my testimony. If you or the Subcommittee members have any questions, I would be happy to respond to them for the record.

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

Pursuant to Rule XI2(g)(4) of the House of Representatives, VFW has not received any federal grants in Fiscal Year 2013, nor has it received any federal grants in the two previous Fiscal Years.