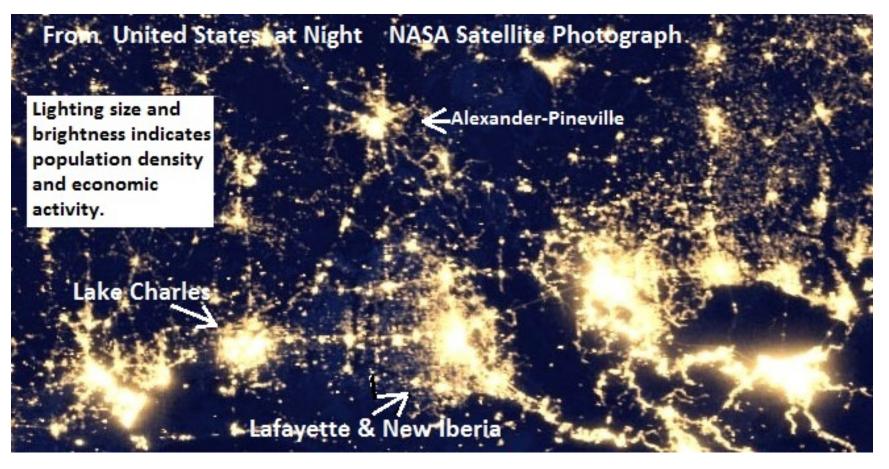
Four-page written testimony submitted to the June 20, 2016 Field Hearing in Alexandria, LA of the US House Veterans Affairs Committee..Submitted by the Veteran ACTION Coalition of Southwest Louisiana (VACSWLA)Page 1 of 4 pages

Population and economic activity distribution within Southwest Louisiana

The NASA photograph below of the USA at night clearly demonstrates the relative populations and relative economic activity of the Alexandria, Lake Charles and Lafayette, Louisiana areas. The Lafayette and New Iberia Metropolitan Statistical Area (MSA) is now the <u>third largest</u> in Louisiana behind only New Orleans and Baton Rouge. Lafayette, New Iberia and Lake Charles are growing very fast. Alexandria is not.



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- 1. <u>For more than forty (40) years</u> the VA Staff in Alexandria LA forced veterans in Lake Charles and Lafayette to drive the four-hour plus round trip to Alexandria to receive VA health care which those veterans have earned by their service to our country. The VA Alexandria Staff prevented construction of a VA clinic in Lake Charles prior to 2016. Congress should demand that the VA deliver health care where veterans live. Congress funded two new VA Clinics in Lake Charles and Lafayette that are now under construction. This entire process transpired as The CBOC's in Lafayette and Lake Charles remained tremendously understaffed.
- There are 35,000 veterans in the thirteen (13) Parishes around Alexandria, LA The Alexandria area has 1,240 VA Staff members that means
 <u>28 veterans per VA Staff member.</u> There are 69,500 veterans in the fifteen (15) Parishes around Lafayette and Lake Charles, LA that has
 eighty (80) VA Staff members or <u>868 veterans per VA Staff member.</u> The Lafayette and Lake Charles populations are growing **RAPIDLY**.
- 3. Veteran population distribution indicate 1,340 VA permanent staff should be as follows: Alexandria clinic 433 staff for 35,000 veterans; Lake Charles clinic 312 staff for 24,000 veterans; the Lafayette clinic 590 staff for 45,500 veterans. The VA Staff in Alexandria will block that distribution unless Congress intervenes.
- 4. Often veterans arriving in Alexandria were redirected to private specialty physicians in Alexandria not on the VA Staff to receive their VA health care. Private specialty physicians were and are available in Lake Charles and Lafayette. Physician "turnover" rate at the Alexandria VA facility is high reflecting the need for more physicians in specialties in Lafayette and Lake Charles, both working in the CBOC's and in the private sector.
- 5. The Alexander, Lake Charles and Lafayette (28 Parish area) VA Medical Care Expenditures for ten years, FY 05 -14, was \$2,082,676,342.00 More than TWO BILLION Dollars in VA funds have been managed by the VA Alexandria Staff in those ten years. Lake Charles and Lafayette had little to show for that gigantic amount of money. More than THIRTEEN MILLION dollars of construction funds were expended in Alexandria in FY 05-FY 14. NOT ONE PENNY of construction funds were expended in Lake Charles or Lafayette in those ten years. Fortunately that trend is changing.
- 6. Veterans in the Alexandria area receive many more VA health care dollars "per veteran" than veterans in the Lake Charles and Lafayette areas. "Unique Patients" are veteran patients receiving health care from the VA. There is a much higher percentage of "Unique Patients" in Alexandria when compared to the total veteran population living in that surrounding area than in Lake Charles and Lafayette communities. Additionally, the Alexandria "Unique Patients" receive many more VA health care dollars than the "Unique Patients" from Lake Charles and Lafayette thus suggesting that Alexandria veterans use VA healthcare at a greater rate because of the lack of travel barriers.
- 7. Because of Veteran Volunteer groups and our national congressional input, and new leadership in Washington Congress funded new VA clinics in Lafayette and Lake Charles to ensure VA health care is delivered where veterans live. The Lafayette Clinic is under construction with the Lake Charles construction to follow shortly. However, the <u>permanent VA staffing</u> and equipping will determine the success of those two clinics by determining what specialty and primary health care is delivered to veterans at those new clinics.

The facts above merely skim the surface. Many more facts are available on the VA Expenditures web page below:

http://www.va.gov/vetdata/Expenditures.asp

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Fairness to Veterans under the VA-Union Master Agreements

Apparently, allegedly the five existing VA and union Master Agreements (contracts) are barriers to delivery of timely, quality health care to veterans. The Federal Tort Claims Act is the source of employee immunity from lawsuits for federal workers, not the union master agreement. The act substitutes the federal government for the employee except for certain law enforcement and investigative agencies. However, under the Master Agreements, Union members, after the first year of employment, can be terminated for cause only with great difficulty and after lengthy appeals. One VA staff member in Alexandria, Louisiana remained on the payroll after being charged with manslaughter in the beating death of an Alexandria, Louisiana VA health center patient.

More than 94% of eligible VA employees are union members.

Please see the bottom of page four listing the five unions with which the VA has Master Agreements (contracts). Page four also lists the union members within VA VISN 16 of the south central United States.

VA Secretary McDonald has the opportunity, as the next contracts are being formulated, to fight for veterans, helping to make the future Master Agreements "veteran friendly", which has not been the case in the past. The current Master Agreements were in place before Secretary McDonnel arrived and appear to place the unions effectively in control of the Department of Veterans Affairs -- and in control of delivery of health care to veterans.

When the VA-Union Master Agreements are renegotiated to make them "Veteran Friendly" there will certainly be points of impasse where the Union negotiators will not agree under any conditions. These points of impasse will be resolved by the all-powerful Federal Services Impasses Panel. (See Title 5 United States Code Chapter 71 Article 7119 {two pages}).

All seven members of the Federal Services Impasses Panel are appointed by the US President.

Any member of the Panel may be removed by the US President.

It is recommended that future VA-Union Master Agreements be "Veteran Friendly" by having veteran representation on the VA negotiating boards and on the Federal Services Impasses Panel.

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US Department of Veterans Affairs Union Membership Totals among VA Employees in VISN 16 (LA, AR, MS, OK, MO, TX)										О <i>,</i> ТХ)			
Source:	http://www.va.gov/	LMR/			VISN: "Veterans Integrated Service Networks"								
VA Station				1272	1276	1613	2039	3537	7777	8888	TOTAL		
Number		Facility Nar	ne		AFGE	AFGE	IAFF-99	SEIU	NFFE	Eligible, NR	Ineligible	Employees	
502	<u>Alexandria VA Hea</u> l	lth Care Systen	<u>n</u>		747	378	0	0	0	72	165	1,362	
598	Central Arkansas Veterans Healthcare System Eugene J. Towbin and John McClellan					1,334	10	0	2	149	429	3,577	
586	G.V. (Sonny) Montgomery VA Medical Center					1	0	175	814	67	324	2,330	
520	Gulf Coast Veterans Health Care System					832	0	0	0	40	324	2,311	
623	Jack C. Montgomery VAMC					503	0	0	0	15	165	1,316	
580	Michael E. DeBakey	Michael E. DeBakey VA Medical Center				1,791	0	0	0	491	489	4,784	
635	Oklahoma City VA Medical Center				1,054	834	0	0	1	15	333	2,237	
667	<u>Overton Brooks VA N</u>	<u>Medical Center</u>			730	1	0	0	550	130	249	1,660	
629	<u>SE Louisiana Veteran</u>	s Health Care S	<u>ystem</u>		608	2	0	0	526	14	244	1,394	
564	Veterans Health Care	e System of the	<u>Ozarks</u>		708	598	0	0	0	35	204	1,545	
			Employee TO		10,210	6,274	10	175	1,893	1,028	2,926	22,516	
	(UNKNOWN) IAFF-99						Alexandria, Louisiana VA Health Care System Totals:						
	Service Employee International Union SEIU						747 + 378 = 1,125 AFGE union members of 1,197 eligible						
	Nation Association of Government Employees NAGE						to join the AFGE union. That is 93.98% AFGE union						
	National Fereration of Federal Employees NFFE						membership in Alexandria, Lafayette, Lake Charles,						
	National Nurses United NNU						Jennings and Leesville						
	VISN 16 Union Membership TOTAL					of	19,590		ole is	94.75%	union m	embership	
UNION	Master Agreement		Status		-,	_	-	•		w.va.gov/LM		•	
AFGE	YES 328 pages	March 2011	Year-to-year Auto	omatic Re	enewal in	March.			See pa	ges 300 and	301		
IAFF-99	UNKNOWN	There are only	rten (10) IAAF organization members across the entire US VA Department										
SEIU	YES Nine(9) pages	March 2011	Year-to-year Automatic Renewal in March										
<u>NAGE</u>	YES 189 pages	Nov 2003	In force for three years. Renewed automatically for three year periods thereafter.										
		Renewed automatically in November 2015 for three years. See page 186.											
<u>NFFE</u>	YES 133 pages	S 133 pages July 2012 In effect for three years. Year -to-year automatic renewal in July. See page 116.											
<u>NNU</u>	YES 177 pages	YES 177 pages Nov 2012 In effect for three years. Year -to-year automatic renewal in Nov. See page 171.											