



**STATEMENT OF
LOUIS J. CELLI, JR., DIRECTOR
NATIONAL VETERANS AFFAIRS AND REHABILITATION DIVISION
THE AMERICAN LEGION**

BEFORE THE

**SUBCOMMITTEE ON HEALTH
COMMITTEE ON VETERANS' AFFAIRS
UNITED STATES HOUSE OF REPRESENTATIVES**

ON

**"HEALTHY HIRING: ENABLING VA TO RECRUIT AND RETAIN QUALITY
PROVIDERS"**

MARCH 22, 2017

**STATEMENT OF
LOUIS J. CELLI, JR., DIRECTOR
NATIONAL VETERANS AFFAIRS AND REHABILITATION DIVISION
THE AMERICAN LEGION
BEFORE THE
SUBCOMMITTEE ON HEALTH
COMMITTEE ON VETERANS' AFFAIRS
UNITED STATES HOUSE OF REPRESENTATIVES
ON
"HEALTHY HIRING: ENABLING VA TO RECRUIT AND RETAIN QUALITY
PROVIDERS"**

MARCH 22, 2017

The American Legion has been concerned about the dangers of physician and medical specialists staffing shortages at the Veterans Health Administration (VHA) since 1998. In 2003 we established our System Worth Saving (SWS) Program in 2003, and have continued to track and report staffing shortages at VA medical facility across the country. Our SWS report is submitted to Congress, VA, and the President of the United States. For more than 98 years The American Legion has dedicated considerable resources to monitoring the healthcare system established to care for America's returning veterans.¹

Chairman Wenstrup, Ranking Member Brownley and distinguished members of the Subcommittee on Health; on behalf of more than 2.2 million members of The American Legion and our National Commander Charles E. Schmidt; The American Legion, the largest patriotic service organization for veterans serving *every* man and woman who has worn the uniform for this country, we thank you for the opportunity to testify regarding The American Legion's position on "Healthy hiring: Enabling VA to recruit and retain quality providers."

Unfortunately, there are no easy solutions for VHA when it comes to effectively and efficiently recruiting and retaining staff at VA healthcare facilities. The American Legion believes that access to basic health care services offered by qualified primary care providers should be available locally as often as possible at all times.

In 2004, The American Legion urged VHA to develop an aggressive strategy to recruit, train, and retain advanced practice nurses (APN's), registered nurses (RN's), licensed practical nurses (LPN's), and nursing assistants (NA's) to meet the inpatient and outpatient health care needs of veterans. The Legion fully supports VA's education-assistance programs for APNs, RNs, LPNs, and NA's. We also urged VA to provide equitable and competitive wages for Advanced Practice Nurses (APNs), Registered Nurses (RNs), Licensed Practical Nurses (LPNs), and nursing assistants.²

¹ [Resolution 311: The American Legion Policy on VA Physicians and Medical Specialists Staffing Guidelines](#)

² [Resolution No. 237: The American Legion Policy on VA Nurse Recruitment and Retention](#)

A full one-third of all veterans treated by the VA live in a rural area³, and The American echoes VA's concern, supports their efforts and the efforts of this committee, to increase access to quality health care for veterans living in these communities. As the number of veterans residing in rural communities continues to grow veterans will continue struggling to find timely and quality VA health care that meets our community's health care needs. VA medical centers in rural areas face ongoing challenges recruiting and retaining qualified medical and clinical providers due to their inability to compete with medical centers in large metropolitan areas. In The American Legion's 2012 SWS Report on Rural Healthcare, American Legion research found:

*“Department of Veteran Affairs Medical Centers (VAMC) in rural America, recruitment, and retention of primary and specialty care providers has been a constant challenge. Some clinicians prefer to practice in more urban settings with more research opportunities and quality of life that urban settings provide.”*⁴

During our 2013 site visit to the Huntington VA Medical Center in Huntington, West Virginia we recommended, “VHA conduct a rural analysis for hard to recruit areas and look into different options to support VAMCs in getting the talent they need to serve veterans better.” VHA needs to ensure that veteran health care is consistent across each Veterans Integrated Service Network (VISN).

In 2014, The American Legion published an SWS report titled “*Past, Present, and Future of VA Healthcare*”, which noted several challenges VA still faced regarding recruiting and retention such as:

- *Several VAMCs continue to struggle to fill critical leadership positions across multiple departments.*
- *These gaps have caused communication breakdowns between medical center leadership and staff that work within these departments.*

In 2015, during our SWS site visit to the VA Medical Center in St. Cloud, Minnesota, providers were openly upset about the number of physician vacancies, and how the additional workload is impacting morale at the medical centers. During the same visit, one veteran told us “every time [I] visit the medical center, [I am] assigned a new primary care provider because [my] last provider either quit or transferred to another VA.”

There have been numerous reports citing VA's staffing issues, for example in January 2015 the VA's Office of Inspector General (VAOIG) released the report *Determination of Veterans Health Administration's Occupational Staffing Shortages*⁵, that performed a rules-based analysis on VHA data to identify these occupations. The VAOIG determined that the five occupations with the “largest staffing shortages” were Medical Officer, Nurse, Physician Assistant, Physical Therapist, and Psychologist.

³ https://www.ruralhealth.va.gov/docs/ORH_Infosheet_WorkforceAndFacilities_FINAL_508.pdf

⁴ [The American Legion: 2012 System Worth Saving Report on Rural Health Care](#)

⁵ <https://www.va.gov/oig/pubs/VAOIG-15-00430-103.pdf>

In 2015, The American Legion appeared before members of the House Veterans' Affairs Subcommittee on Health and testified again that VA physicians and medical specialists staffing shortages within the Veterans Health Administration (VHA) were dangerously low and required immediate attention⁶. Two years later we are here again to discuss this very important issue, which has now escalated to a level that is creating physician burnout and degradation of employee morale within VHA. Through our SWS site visits The American Legion has heard first hand from VA clinicians, non-clinical employees, and veterans, how the staffing crisis is impacting the VA healthcare system and the patients they serve.

From December 2015 through February 2017, The SWS Program visited more than twenty-five VA health care facilities nationwide. When we asked to describe their number one challenge; directors, human resource officers, and VA managers unanimously responded "staffing." Medical center vacancies ranged from as low as 44 positions at smaller medical centers to over 300 at the larger medical centers. Critical vacancies exist across all occupations, clinical as well as administrative. Directors are being rotated from one VA medical center to another to cover critical shortages, which was the case in over 50 percent of the medical centers we visited during that time frame.

As an example, at the time of our December 2016 visit to the Pacific Island Health Care System, the director, and chief of human resource position were both vacant. At the time of our January 2017 visit to the Greater Los Angeles VA Health Care System, the medical center director had been in his position for less than a year, and the associate director, chief, and assistant chief, human resource positions were ALL vacant. During a follow-up call last month, the VA Pacific Island Health Care System told us that all their top management positions, except for the Director position have now been filled and that the chief of human resources position has been filled with a permanent manager who is highly experienced in human resources.

These staffing shortages are contributing to physician and staff burnout which was reinforced during our Saint Cloud, Minnesota visit. As The American Legion continues to conduct System Worth Saving Site visits across the VA health care system, we see the trend of VA staffing shortages declining rather than improving.

Things that are working well include the significant contribution of the VA's Academic Residency Program. As one of the VA's statutory missions, the VA conducts an education and training program for health profession students and residents to enhance the quality of care provided to veterans within the VHA healthcare system. For almost sixty years, in accordance with VA's 1946 Policy Memorandum No. 2, the VA has worked in partnership with this country's medical and associated health profession schools to provide high quality health care to America's veterans and to train new health professionals to meet the patient health care needs within VA and the nation. This partnership has grown into the most comprehensive academic health system partnership in American history.

While the VA's Academic Residency Program has made significant contributions in training VA health care professionals, upon graduation, many of these health care professionals choose a career outside the VA health care system. The VA will never be in a position to compete with the

⁶ <https://www.legion.org/legislative/testimony/227163/va-staffing-medical-professional>

private sector. To this end, The American Legion feels strongly that VA should begin looking into establishing its own VA Health Professional University and begin training their medical health care professionals to serve as a supplement to VA's current medical residency program.⁷ Conceivably, medical students accepted into VA's Health Professional University would have their tuition paid in full by VA and upon graduation, the graduate would be required to accept an appointment at a federal health facility at a starting salary comparable to what a new medical graduate would be paid by VA based on their experience and specialty. Similar to a military service academy, a VA medical school will be highly selective, competitive, and well respected. Applicants can be nominated by their congressional representative, teaching staff can be sourced organically as well as nationally, and real estate is plentiful. This will help ensure the VA will have an adequate number of healthcare professionals to meet the growing number of veterans and their healthcare needs.

Lastly, there are too many vacancies in VHA, and the recent action by the President to freeze federal hiring will only add to delays in performing life-saving surgeries, patient wait times, and claims backlogs. The American Legion believes the president was correct in exempting national security, public safety, and our armed forces from the federal hiring freeze and looks forward to ensuring VA remains properly staffed to serve the veterans we have an obligation to support. According to Acting Undersecretary for Benefits Tom Murphy, The Veterans Benefits Administration alone loses more than 25 of its staff each pay period and equals an attrition deficit of more than 1,300 claims processors, adjudicators, customer support staff, and more.

“The American Legion believes that the president is correct in exempting national security, public safety and our armed forces from the federal hiring freeze,” National Commander Charles E. Schmidt said. “We fully support his promise to rebuild our military and eliminate the scourge of radical Islamic terrorism from the face of the earth. Acting VA Secretary Rob Snyder has assured us that frontline caregivers will be exempted. We have strong concerns, however, about how this will impact the veterans who have been waiting too long to have their claims processed. The sacrifices that these veterans have made must not be forgotten. VA has made progress in this area, and it must continue to do so.”⁸

The American Legion calls on the administration to exempt all VA employees from the hiring freeze. All health care employees are essential and critical to the health and safety of all patients entrusted to their care. When a patient's room is not properly cleaned, the safety and health of the patient are at risk of acquiring life-threatening illnesses such as Methicillin-resistant Staphylococcus Aureus (MRSA) or any other hospital-acquired infections.

Health care provider positions that remain unfilled due to a lack of HR resources impacts the health and safety of patients. For this reason, The American Legion immediately calls for all HR staff to be exempt from this hiring freeze.

⁷ American Legion Resolution No. 377: [Support for Veteran Quality of Life: \(Sept. 2016\)](#)

⁸ <https://www.legion.org/pressrelease/235742/american-legion-offers-praise-concerns-about-white-house-executive-orders>

Conclusion

The American Legion understands that filling highly skilled vacancies at premiere VA hospitals around the country is challenging. We also expect VA to do whatever is legally permissible to ensure that veterans have access to the level of quality healthcare they have come to expect from VA. VA leadership needs to do more to work with community members and stakeholders. VA has a variety of creative solutions available to them without the need for additional legislative action. One such idea could involve the creation of a medical school, another would be to aggressively seek out public private partnerships with all local area hospitals. VA could expand both footprint market penetration by renting space in existing hospitals where they would also be able to leverage existing resources and foster comprehensive partnerships with the community. Finally, VA could research the feasibility of incentivizing recruitment at level 3 hospitals by orchestrating a skills sharing program that might entice physicians to work at level 3 facilities if they were eligible to engage in a program where they could train at a level 1 facility for a year every 5 years while requiring level 1 facility physicians to spend some time at level 3 facilities to share best practices. Currently, medical staff are primarily detailed to temporarily fill vacancies. This practice fails to incentivize the detailed professional to share best practices and teach, merely hold down the position until it can be filled by a permanent hire.

In addition to what is presented in this testimony, there is a large amount of proposed legislation that would have a positive effect on transforming VA to a more effective healthcare delivery system, most of which The American Legion strongly supports.

As always, The American Legion thanks the Subcommittee on Health for the opportunity to present the position of our 2.2 million veteran members. For additional information regarding this testimony, please contact Mr. Warren J. Goldstein at The American Legion's Legislative Division at (202) 861-2700 or wgoldstein@legion.org

LOUIS JOHN CELLI JR.

Following his 22 year career in the United States Army, Master Sergeant Celli founded the nonprofit organization the Northeast Veterans Business Resource Center, Inc. (NEVBRC), that helped veteran entrepreneurs start and grow small businesses enterprises. Mr. Celli retired from NEVBRC in 2012 to accept a position as the Legislative Director for the American Legion – the largest veteran service organization in the United States, and in 2014 was appointed by The American Legion’s National Commander to serve as Director of the Legion’s National Veterans Affairs and Rehabilitation (VA&R) Division.



Chartered in 1919 by congress, The American Legion is a partner, and watchdog organization of the Department of Veterans Affairs (VA). As director of the VA&R division in Washington, D.C., Louis is responsible for directing programs that impact more than 20 million veterans nationwide, ensuring that veterans and their family members receive the access to VA healthcare and benefits they have earned through their honorable service.

Mr. Celli leads a fulltime staff of 50 highly trained specialists in 6 different states and the District of Columbia who’s responsibilities include creating and managing programs that work within all 1,700 VA hospital and clinics, 56 VA regional offices, over 100 VA cemeteries including Arlington National Cemetery; he and his team oversees a program that manages nearly one million volunteers who work daily at VA facilities nationwide, and is responsible for accrediting more than 3,000 claims representatives who hold active powers of attorney on three quarters of a million veterans seeking disability claims assistance from VA, he oversees The American Legion’s appellate team located at the Board of Veteran Appeals.

Celli’s team also represents veterans before the Department of Defense discharge upgrade review boards as well as the Military and Physical Evaluation Boards, oversees veterans pensions, VA life insurance programs, and debt management programs for veterans who are struggling with debt due to VA overpayment. Mr. Celli testifies regularly before congress, has assisted with legislative language on several important bills that have been signed into law, manages an annual budget of over 4 million dollars, and is an active member of the Board of Directors of the Veterans Consortium Pro Bono program.

Louis is a graduate of Harvard University, a native of Boston Massachusetts, and together with his wife Elise have 6 children ranging in age from 13 to 25 years old.