



CONGRESSIONAL TESTIMONY

STATEMENT FOR THE RECORD

AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES, AFL-CIO

PROVIDED TO THE

HOUSE COMMITTEE ON VETERANS' AFFAIRS

SUBCOMMITTEE ON HEALTH

HEARING ON

PENDING LEGISLATION

JULY 14, 2021

My name is Everett Kelley and I am the National President of the American Federation of Government Employees, AFL-CIO (AFGE). On behalf of the approximately 700,000 federal and District of Columbia government employees our union represents, including 270,000 employees of the Department of Veterans Affairs (VA), I write to share our union's views on H.R. 3693, The VA Continuing Professional Education Modernization Act and Representative Berman's discussion draft being considered by the Committee.

H.R. 3693, the "VA Continuing Professional Education Modernization Act".

AFGE strongly supports the "VA Continuing Professional Education (CPE) Modernization Act." This bipartisan bill is long overdue and could help address the VA's well-documented history of severe staffing shortages.¹ The VA CPE Modernization Act will be critically important to helping the agency meet its goal of full staffing. To recruit and retain top talent to care for our nation's veterans across the country, increased CPE support is a necessity.

Established in 1991, the continuing education reimbursement allowance program provides VA board-certified physicians and dentists \$1,000 annually for the reimbursement of tuition and course fees associated with CPE. However, these amounts have not been adjusted in 30 years. As such, the increases in this legislation are sorely needed as CPE costs have increased dramatically over that period.

The VA CPE Modernization Act not only increases the VA's subsidies for CPE, but it would also expand the program's eligibility from only board-certified physicians and dentists to include all VA clinicians, Title 38 and Hybrid Title 38, including nurses, pharmacists, and psychologists to participate. Additionally, this legislation would increase the reimbursement limit for physicians and dentists from \$1,000 to \$4,000 annually. All other VA clinicians would be allowed to receive up to \$2,000 in continuing education reimbursements for the first time. Lastly, it empowers the VA

¹ GAO, Veterans Health Administration: Sustained Leadership Attention Needed to Address Long-Standing Workforce Problems, [GAO-19-720T](#) (Washington, D.C.: September 28, 2019).

Secretary to adjust future annual caps based on inflation to prevent another 30-year lapse in change.

For far too long the VA has lost experienced clinicians to other employers because the pay and benefits provided by the VA are inferior. This bill will help reduce the compensation gap between the public and private sector and make the VA a more competitive and attractive employer. It is a small step and does not obviate the even greater need for full market pay for VA clinicians (and all VA employees). However, the improvements in CPE reimbursements in H.R. 3693 are extremely welcome. VA clinicians deserve an updated and expanded continuing education benefit program that serves their professional educational needs to provide high quality care to veterans.

Discussion Draft, To amend title 38, United States Code, to require an independent assessment of health care delivery systems and management processes of the Department of Veterans Affairs be conducted once every 10 years, and for other purposes.

Rep. Bergman's discussion draft would require the VA to enter into one or more contracts with private sector entities for the purpose of analyzing and assessing the VA's health care delivery system. These assessments would be required to take place at least once every ten (10) years.

AFGE urges Congress to reject this thinly-veiled attempt to accelerate the process of privatization of VA healthcare. The VA should not expose its operation to private contractors with such blatant conflicts of interest. Private healthcare providers are intent on cherry-picking the potentially most profitable departments and practice lines within VA healthcare. There is no reason that private contractors should conduct these assessments; the VA can provide this auditing function itself. Further, the AIR Commission will have just conducted a similar inventory and assessment, and this type of assessment would, at a minimum, be redundant.

AFGE has testified elsewhere against the AIR Commission. At the very least, we believe that it should be delayed because the VA is just emerging from a four-year assault by an administration intent on privatization that undermined VA operations at every turn, particularly with regard to staffing levels and abusive treatment of the VA workforce. Before VA is assessed

by hostile forces prepared to judge the system a failure in need of rescue by the private sector, the Department should be given ample opportunity to recover from the ravages of the previous administration's destructive policies and the COVID-19 pandemic.

There are already governmental third-party investigators who routinely assess the VA on health care delivery issues.² These bodies do an excellent job of assessing the VA's operations, but they do so from a constructive position, with the goal of improving, not privatizing the VA. We urge Congress to support the Government Accountability Office and the Office of the Inspector General, both of which are fully capable of providing Congress and the American people with honest, apolitical assessments focused on the interests of veterans and the general public, rather than the profit-interests of private health care providers.

We thank you for considering AFGE's views on these important pieces of legislation. For additional information or questions please contact Barbara Ehimika at Barbara.Ehimika@afge.org, or Elliot Friedman at Elliot.Friendman@afge.org.

² GAO, Priority Open Recommendations: Department of Veterans Affairs, [GAO-21-469PR](#) (Washington, D.C.: May 17, 2021).