

501(C)(3) Veterans Non-Profit

STATEMENT FOR THE RECORD

PARALYZED VETERANS OF AMERICA

FOR THE

HOUSE COMMITTEE ON VETERANS' AFFAIRS

ON

PENDING LEGISLATION

JUNE 12, 2025

Chairwoman Miller-Meeks, Ranking Member Brownley, and members of the subcommittee, Paralyzed Veterans of America (PVA) appreciates this opportunity to share our views on some of the legislation before the subcommittee today. PVA members, veterans who have acquired a spinal cord injury or disorder (SCI/D), experience the breadth of VA care and benefits in unique ways due to their injuries and illnesses. We welcome the chance to share how some of these bills might impact our members.

H.R. 1404, the CHAMPVA Children's Care Protection Act

The Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA) is a comprehensive healthcare program for the spouse or widow(er) and children of an eligible veteran. Through CHAMPVA, VA shares the cost of certain healthcare services and supplies with eligible beneficiaries. It may also provide benefits to the Primary Family Caregiver through the Program of Comprehensive Assistance for Family Caregivers (PCAFC). Coverage for children under CHAMPVA currently expires when they turn 18 unless they are full-time students. In this case, they continue to receive coverage until they turn 23, stop attending school full-time, or get married. However, for most Americans with health insurance, their adult children can remain on their plan until age 26 with no separate premium, as mandated in the Patient Protection and Affordable Care Act (ACA) (P.L. 111-148). CHAMPVA and the military's TRICARE programs were not affected by the ACA, so they required separate congressional action to extend these benefits to children up to age 26. This discrepancy was addressed for TRICARE in 2011 and the CHAMPVA Children's Care Protection Act would fix this for VA's CHAMPVA program.

The delay in making this change to CHAMPVA has adversely impacted several of our members. Take PVA member Amy and her husband for example. She served honorably in the U.S. Marine Corps before an SCI/D cut her military service short. Her husband served in the Marine Corps as well, but injuries he sustained in Operation Desert Storm curtailed his military career, too. Both have 100 percent disability ratings from the VA. Their two boys have severe immune deficiencies that were caused by their parents' exposure to hazards during their military service. As a result, the boys require weekly plasma infusions to keep them alive. These infusions cost thousands per month, and they cannot afford to pay for them out of pocket. They rely on CHAMPVA to provide this life-saving care and suffered tremendous angst when their oldest child turned 18. Fortunately, he became well enough with the infusions that they were able to keep him in school and CHAMPVA until he turns 23 in March 2026. The younger child is currently 17 but he has additional comorbidities that may not allow him to do the same. The family is straining under the pressure that the lack of action from Congress has put on them and unless legislation like this is passed, there is a very real possibility that both children will age out of the program next year.

The VA testified in opposition to the companion measure to this bill at a May 1, 2025, Senate Veterans' Affairs Committee hearing. The witness correctly stated that CHAMPVA was not affected by the ACA, but we disagree with VA's assertion that it is not health insurance because it clearly functions like it. For example, certain types of care and services require preauthorization. This approval is extremely important, and the failure to obtain it may result in denial of the claim. Also, providers must be properly licensed in their state to receive payment from CHAMPVA, and they cannot be on the Medicare exclusion list. To be reimbursed, providers must file a claim, using diagnosis and procedure codes that all other healthcare plans follow.

The Congressional Research Service (CRS) which advises Congress on programs like this seems to agree. In its October report to Congress on VA healthcare programs for dependents and survivors, CRS stated, "CHAMPVA is primarily a health insurance program where certain eligible dependents and survivors of veterans receive care from private sector healthcare providers. The program is administered by the Veterans Health Administration (VHA), Assistant Under Secretary for Health (AUSH) for Integrated Veteran Care, Office of Integrated Veteran Care (IVC). The law (38 U.S.C. §of veterans, 1781) requires CHAMPVA to provide for medical care in the same or similar manner and subject to the same or similar limitations as medical care is furnished to certain dependents and survivors of active duty and retired members of the Armed Forces under [the Department of Defense (DOD) TRICARE program]."

¹ Health Care for Dependents and Survivors of Veterans, October 16, 2024

DOD's TRICARE program wasn't affected by the ACA either, but Congress created the TRICARE Young Adult program in 2011 which provides health care for qualified young adults aged 21 to 26 who are unmarried and not eligible for an employer-sponsored health plan. Our government should not deem veterans' dependents and survivors less worthy than civilians for support. Those who are eligible for CHAMPVA should be able to retain their healthcare coverage until their 26th birthday just like those in private and federal healthcare plans. We urge Congress to correct this inequity as soon as possible.

H.R. 2148, the Veteran Caregiver Reeducation, Reemployment, and Retirement Act

The VA's PCAFC was established by Congress in 2010 to support family caregivers who play a critical role in caring for and supporting veterans severely injured in the line of duty following 9/11. Occasionally, changes have been made to improve the program's support of veterans. Such changes include those in the VA MISSION Act of 2018, which authorized VA to offer PCAFC to caregivers for veterans of all eras.

Still, the program does not consider that many caregivers are forced to reduce their work hours, take unpaid leave, or leave the workforce entirely to provide care. They sacrifice wages, retirement savings, and financial stability to care for those they love. The time away from their jobs creates gaps in their resumes and many lose the employment certifications they previously held. When their loved one either passes away or returns to independent functioning, caregivers need to return to the workplace and must face these issues. Also, those who were relying on CHAMPVA for their health care lose this coverage within 90 days of leaving PCAFC through the death or discharge of the veteran. Members in other insurance programs have 180 days to transition their health insurance benefits.

This bill seeks to strengthen the PCAFC by addressing these, and other common problems that many caregivers face. Provisions in the bill would provide former caregivers with bereavement counseling, funding to renew their professional certifications, and the ability to participate in employment assistance programs like Military OneSource or the Department of Labor's, Veterans' Employment and Training Service. It also directs studies on the possibility of allowing caregivers to make contributions to Social Security and other types of existing retirement accounts, the feasibility of caregivers being allowed to participate in a Department of Labor returnship program, and the possibility of the VA incorporating former caregivers into the VA workforce as personal care attendants, enabling the VA to lessen staff shortages. Lastly, it gives caregivers who are not Medicare eligible the option to keep their CHAMPVA coverage for 180 days, if they need it.

Caregivers are often the most important component of rehabilitation and maintenance for veterans with catastrophic disabilities. As a result, their welfare directly affects the quality-of-care veterans receive. We strongly support this bill and urge Congress to pass it quickly.

Discussion Draft, the Fisher House Availability Act of 2025

Beneficiaries of active-duty service members often travel far from home to receive care through DOD's TRICARE program. Often their appointments don't end until late in the day which then requires them to drive extended distances home at night. This bill would allow VA to provide temporary lodging to a covered beneficiary or a family member of a covered beneficiary on a space available basis. If VA has available space and there is no cost to the department, PVA can support this legislation.

Discussion Draft, to provide for a time frame for the employment in the Department of Veterans Affairs of participants in the Health Professionals Scholarship Program

The Health Professionals Scholarship Program (HPSP) provides financial assistance to students in various healthcare disciplines, aiming to meet VA workforce needs. Participants must complete their education and meet qualification requirements before employment, with the program requiring an 18-month service obligation for each year of support. The current law does not have a provision guaranteeing graduates of the HPSP a job at the VA following completion of their training. PVA supports this draft bill which requires VA to offer each participant a contract for full-time employment at the VA facility with the greatest need for their specialty within 90 days of their course completion date.

Discussion Draft, the VA Mental Health Outreach and Engagement Act

PVA supports passage of the VA Mental Health Outreach and Engagement Act. The VA suicide report clearly states that veterans who are not enrolled and engaged with the VHA are more likely to die by suicide. As we work to reduce the number of veteran suicides, the most common sense first step is to conduct proactive outreach to veterans receiving compensation for a service-connected mental health condition who are not accessing VA mental health services. By conducting intentional outreach to a vulnerable population, the department could not only increase enrollment in VA mental health programs, but ultimately, it may move the needle on curbing the number of veteran suicides.

Discussion Draft, the VA Data Transparency and Trust Act

The House and Senate Veterans' Affairs Committees are responsible for moving legislation expanding, curtailing, or fine-tuning existing laws relating to health care and benefits for veterans, certain dependents, and eligible survivors. The committees also have oversight responsibility of the department, which means monitoring and evaluating the operations of the VA. So, if the committees find that VA is not administering laws as Congress intended, or if emerging needs of veterans are identified, it is addressed through the hearing process and legislation. To fulfil this role, the committees need timely and accurate information, but in recent years, VA has been unable to provide either. We strongly believe that VA should be able to produce timely and accurate reports to Congress and respective oversight bodies so the committees can ensure the department is providing the benefits and services that veterans have earned and deserve.

We support the VA Data Transparency and Trust Act which requires the department to provide Congress with annual reports detailing how VA benefits are delivered, who is using them, and how well the system is performing while still safeguarding veterans' privacy. This would help the committees ensure VA programs are properly funded, operating efficiently, and most importantly, meeting the needs of the veterans they were intended to serve.

H.R. 2605, the Service Dogs Assisting Veterans ("SAVES") Act

Service dogs provide invaluable assistance to disabled veterans with the greatest support needs, allowing them to live more independent lives in their communities. PVA supports the SAVES Act, which requires the VA to establish a competitive grant program to fund nonprofit organizations that provide service dogs to veterans with a variety of disabilities, such as mobility or vision impairments or PTSD. Nonprofit organizations would be required to submit an application to the Secretary that includes a description of the training that will be provided by the organization to eligible veterans; the training of dogs that will serve as service dogs; the aftercare services that the organization will provide for the service dog and eligible veteran; the plan for publicizing the availability of service dogs through a marketing campaign; and the commitment of the organization to have humane standards for animals. Passage of this legislation will increase veterans' access to service dogs and their independence.

Discussion Draft, the Territorial Response and Access to Veterans' Essential Lifecare Act or the TRAVEL Act of 2025

Thousands of veterans who are residents of U.S. territories or reside on islands in the Pacific face significant challenges in seeking medical care. In May 2024, the Government Accountability Office issued a report that found these veterans often experienced "unique and substantial barriers" that veterans in the United States do not encounter when seeking medical services from the VA.² PVA supports this proposed legislation, which authorizes the department to utilize traveling physicians to provide needed health care to veterans residing in these areas.

Discussion Draft, the Representing our Seniors at VA Act of 2025

State Veterans Homes play a crucial role in providing care and support for those who have served this nation in uniform. These facilities are designed to meet the unique needs of veterans, offering a range of services tailored to their medical and emotional well-being. For many veterans and their families, these homes represent a vital resource for long-term care, rehabilitation, and companionship. They play an outsized role in VA's ability to provide skilled nursing and long-term care for veterans. PVA

² GAO-24-106364, VETERANS AFFAIRS: Actions Needed to Improve Access to Care in the U.S. Territories and Freely Associated States

supports including a representative of the National Association of State Veterans Homes on the VA's Geriatrics and Gerontology Advisory Committee.

H.R. 2068, the Veterans Patient Advocacy Act

PVA supports the Veterans Patient Advocacy Act, which seeks to ensure there are an adequate number of patient advocates at VA medical facilities. Patient advocates are highly trained professionals who can help resolve veterans' concerns about any aspect of their healthcare experience, particularly those concerns that cannot be resolved at the point of care. They help to ensure access to care by listening to any questions, problems, or special needs that a veteran has and working to resolve them. PVA supports passage of the Veterans Patient Advocacy Act with the understanding that VA may need additional resources to assign patient advocates to rural community-based outpatient clinics.

PVA would once again like to thank the subcommittee for the opportunity to submit our views on some of the bills being considered today. We look forward to working with you on this legislation and would be happy to take any questions for the record.

Information Required by Rule XI 2(g) of the House of Representatives

Pursuant to Rule XI 2(g) of the House of Representatives, the following information is provided regarding federal grants and contracts.

Fiscal Year 2025

Department of Veterans Affairs, Office of National Veterans Sports Programs & Special Events — Grant to support rehabilitation sports activities — \$502,000.

Fiscal Year 2023

Department of Veterans Affairs, Office of National Veterans Sports Programs & Special Events — Grant to support rehabilitation sports activities — \$479,000.

Fiscal Year 2022

Department of Veterans Affairs, Office of National Veterans Sports Programs & Special Events — Grant to support rehabilitation sports activities — \$ 437,745.

Disclosure of Foreign Payments

Paralyzed Veterans of America is largely supported by donations from the general public. However, in some very rare cases we receive direct donations from foreign nationals. In addition, we receive funding from corporations and foundations which in some cases are U.S. subsidiaries of non-U.S. companies.