

**STATEMENT OF
RACHEL MCARDLE, PH.D.
DEPUTY EXECUTIVE DIRECTOR
REHABILITATION AND PROSTHETIC SERVICES
VETERANS HEALTH ADMINISTRATION (VHA)
DEPARTMENT OF VETERANS AFFAIRS (VA)
BEFORE THE
COMMITTEE ON VETERANS' AFFAIRS
SUBCOMMITTEE ON HEALTH
U.S. HOUSE OF REPRESENTATIVES
ON
HIDDEN WOUNDS: EFFECTIVELY SUPPORTING VETERANS WITH TBI
MARCH 5, 2026**

Chairwoman Miller-Meeks, Ranking Member Brownley, and Members of the Subcommittee: Thank you for the opportunity to testify on the Department of Veterans Affairs' (VA) efforts to support Veterans living with traumatic brain injury (TBI). Joining me today is Dr. Joel Scholten, Executive Director, Physical Medicine and Rehabilitation. Together, we will share how VA addresses the complex needs of Veterans with TBI through clinical care, research, and collaborations.

Understanding TBI

TBI is defined as a disruption of normal brain function caused by an external force, such as a blow to the head, rapid acceleration or deceleration, or blast exposure.¹ It can result in symptoms ranging from headaches and dizziness to memory problems, mood changes, and physical impairments. For Veterans, TBI is often associated with military service, particularly in combat environments, but it also occurs in training and civilian life.

¹ VA/DoD Clinical Practice Guideline for the Management and Rehabilitation of Post-Acute Mild Traumatic Brain Injury. The definition is on page 6. Available at: <https://www.healthquality.va.gov/HEALTHQUALITY/guidelines/Rehab/mtbi/VADODmTBICPGFinal508.pdf>

TBI is considered a “signature injury” of recent conflicts, yet its impact extends across all eras of service. Importantly, TBI rarely occurs in isolation. Many Veterans experience co-occurring conditions such as posttraumatic stress disorder (PTSD), chronic pain, and sleep disturbances, which complicate diagnosis and treatment. Understanding this complexity is essential as we consider how to best support Veterans throughout their lives.

In addition to traumatic events that may cause a TBI, Service members may also have exposures labeled as Military Occupational Blast Exposure (MOBE). MOBE is caused by repeated exposure to jets on aircraft carriers, artillery fire, or blast during breaching operations. These exposures can cause symptoms similar to TBI and can accumulate over time leading to the development of persistent symptoms. MOBE is often overlooked, yet it may contribute to symptoms resulting in difficulties with employment, driving, and interpersonal relationships. As we recognize the scope of this issue, it will be important for VA to adapt how it structures its care systems to meet these needs.

VA’s Care Systems

VA has built a comprehensive care system to address TBI across the continuum of care. This includes screening, diagnosis, individualized treatment planning, and long-term support. At the heart of VA’s approach is the Polytrauma System of Care, a nationwide network designed to provide specialized rehabilitation for Veterans with complex injuries, including TBI. This system includes five Polytrauma Rehabilitation Centers that deliver inpatient and outpatient, intensive, interdisciplinary care for Veterans with severe injuries. These centers work closely with Polytrauma Network Sites and Polytrauma Support Clinics to lead over 110 TBI teams across VA. Dedicated case managers coordinate services, facilitate transitions between settings, and support families throughout recovery.

VA screens all post-9/11 Veterans for TBI. Since 2007, VA has screened more than 1.8 million Veterans and connected Veterans with TBI specialists to complete an

evaluation and develop a treatment plan. In fiscal year 2025 alone, VA treated over 160,000 Veterans with TBI-related conditions.

Every Veteran with TBI receives a personalized care plan tailored to his or her unique needs. These plans address physical, cognitive, and emotional symptoms, and often include therapies for co-occurring conditions, such as PTSD and chronic pain. VA emphasizes integrated care that combines rehabilitation with mental health services and whole health approaches. This comprehensive model helps Veterans manage symptoms, build resilience, and maintain gains achieved during rehabilitation. While clinical care is essential, VA also recognizes that research and innovation are critical to improving outcomes and shaping the future of TBI treatment.

Research and Innovation

VA is committed to advancing knowledge and improving outcomes for Veterans with TBI through research and innovation. Our efforts focus on understanding long-term effects, developing precision diagnostics, and creating effective treatments. VA engages with leading academic institutions and the Department of War through initiatives such as the Long-Term Impact of Military-Relevant Brain Consortium, Chronic Effects of Neurotrauma Consortium, and the Translational Research Center for TBI and Stress Disorders. These programs study chronic effects of TBI, identify biomarkers, and develop interventions to improve brain health.

VA is also actively investigating the impact of repeated MOBE that occurs during military operations and training. These exposures may not cause immediate symptoms but can lead to cumulative effects over time. Research is underway to better document these exposures and understand their relationship to long-term health outcomes. In addition, VA has developed tools such as the Concussion Coach mobile application to help Veterans manage symptoms and access resources. Telehealth and virtual rehabilitation programs are expanding access to care, particularly for Veterans in rural and underserved areas. These research efforts and innovations are not isolated—they

are integrated with VA's clinical programs and academic affiliations to ensure that discoveries translate into better care for Veterans.

The Brain Health Coordinating Center (BHCC) serves as VA's central resource for advancing brain health research and care. The Center integrates data from across VA medical facilities to identify risk factors, track treatment outcomes, and develop strategies that protect cognitive function in Veterans. The BHCC will also coordinate future brain and mental health clinical trials in diagnostics and therapeutics.

VA works closely with universities and TBI Model Systems, a multicenter longitudinal database that captures rehabilitation and functional outcomes of individuals with TBI, to advance evidence-based care and train clinicians.² These relationships allow VA to share best practices, conduct multi-site research, and accelerate the translation of findings into clinical care. By leveraging these connections, VA ensures that Veterans benefit from the latest scientific advances and that our workforce remains at the forefront of rehabilitation medicine. As we look to the future, these alliances will be essential in addressing remaining gaps and improving care for Veterans with TBI.

Opportunities to Put Veterans First

Despite progress, challenges remain. Currently, there is no single test to definitively distinguish symptoms caused by TBI from those related to mental health conditions. Veterans with mild or repeated TBIs may experience persistent symptoms that are difficult to treat. To advance the brain and mental health of Veterans, Total Brain Diagnostics is an ongoing precision, mental health research initiative to identify, validate, and integrate brain and mental health biomarkers among Veterans with specific consideration for depression, anxiety, PTSD, bipolar disorder, other mental health conditions, and TBI. The goal of this initiative is to assist clinicians in diagnosing complex brain and mental health conditions.

² The Traumatic Brain Injury Model Systems (TBIMS) National Database is a prospective, multicenter database and the largest longitudinal traumatic brain injury (TBI) database in the world, funded by National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR).

Looking ahead, VA will continue to improve documentation of blast and occupational exposures during military service, expand precision brain health approaches that tailor treatment to individual needs, and strengthen telehealth and intensive outpatient rehabilitation programs. We are committed to enhancing integration of mental health and whole health concepts into TBI care and deepening relationships with academia, Veterans Service Organizations, non-profits, and the Department of War to accelerate research and innovation. Finally, we aim to develop proactive case management strategies that engage Veterans with persistent symptoms and prevent functional decline. Through these efforts, we will continue to focus on putting Veterans first and advancing comprehensive care to Veterans with TBI.

Conclusion

VA remains committed to delivering world-class care, advancing research, and supporting Veterans and families affected by TBI. Through our Polytrauma System of Care, research collaborations, and innovative programs, we strive to improve outcomes and quality of life for those who have sustained these injuries. Thank you for your leadership and continued support. We look forward to your questions.