

TESTIMONY OF  
REPRESENTATIVE JOHN R. CARTER (TX-31)  
MEMBER OF CONGRESS  
BEFORE THE HOUSE VETERANS AFFAIRS COMMITTEE  
ON H.R.1133 VETERANS TRANSPLANT COVERAGE ACT OF 2017  
24 OCTOBER 2017

Chairman Roe, Ranking Member Walz, and other Members of the Committee, it is an honor to speak before you this morning. Chairman, I thank you for including my bill, H.R. 1133 Veterans Transplant Coverage Act of 2017, in today's hearing.

I am here this morning on behalf of the thousands of American veterans who find themselves in need of transplant care. Under current law, a veteran in critical need of a live donor transplant can't, with their VA coverage, receive a donation from a non-veteran. This excludes children, siblings, and other non-veteran family members - the people a veteran would most likely find a willing and successful organ match with.

This is unacceptable. My legislation, the Veterans Transplant Coverage Act of 2017, removes unnecessary barriers that prevent veterans from receiving the care they deserve. H.R. 1133 will allow veterans to receive donations from a live donor regardless if the donor is a veteran or non-veteran, and allow them to have the procedure done at a non-VA facility if that makes more sense for the patient. This is common-sense, life-saving policy, and I'm proud that it has received robust and bipartisan support as a standalone bill.

This legislation is a good fit for the Veteran Coordinated Access & Rewarding Experiences (CARE) Act because it seeks to give Veterans more options when it comes to their healthcare, both in donors and providers. This is especially beneficial for veterans who live in rural areas, far from the closest VA Medical Center, to say nothing of the closest VA transplant facility.

Chairman, I want to take this time to pause and recognize my constituents, the inspiration for this bill, Mr. and Mrs. Charles Nelson and their son Austin, in from Leander, TX. Mr. Nelson, a 100% disabled service-connected veteran, served his country and did everything this grateful nation asked of him. Unfortunately, while serving in Korea, he developed kidney disease which further led to the need of a kidney transplant. His then 28-year old son Austin was a willing

donor, and a match. Initially, Mr. Nelson was told the surgery would be covered under the VA Choice Program of 2014 and able to be performed at the University Hospital in San Antonio. However, because his son is not a veteran, the VA Central office denied coverage of the costs. The Nelsons were forced to use Medicare and private donations, and their own savings to cover the surgery's costs.

Mr. Charles Nelson deserved better.....Our veterans deserve better. VA Health should be there to address the healthcare needs of those who have served this country in uniform. For Mr. Nelson, who served our nation bravely, to be forced to solicit donations to cover life-saving medical treatment was a failure of the VA system and an insult to his service.

I am proud to represent Mr. Nelson and the more than 84,000 veterans in my congressional district. Each one of them, along with the 22 million nationwide, deserves access to life-saving transplant procedures regardless of donor, and in a facility which makes sense for them and their family. I hope that, with the passage of H.R.1133 Veterans Transplant Coverage Act of 2017, and of the entire Veteran Coordinated Access & Rewarding Experiences (CARE) Act our veterans can access the care they need in the best facility through their VA coverage. Our veterans deserve nothing less than the best we can offer them for their service.

Chairman Roe and Ranking Member Walz, I want to thank you again for the opportunity to speak here today, and I want to thank all the Members of the Committee for their service to our country and our veterans.

I yield back.