Our Nation’s most sacred obligation is to prepare and equip the troops we send into harm’s way, and to care for them and their families when they return home. VA is honored to fulfill the promise made to care for our brave Service members and we will stop at nothing to serve Veterans, their families, caregivers, and survivors every bit as well as they have served us.

VA has provided more care, more benefits, and more services to more Veterans than ever before. Across the enterprise, VA has achieved record-breaking numbers in providing benefits and care. In 2022 alone, the Veterans Benefits Administration (VBA) completed more than 1.7 million disability compensation and pension claims for Veterans, an all-time VA record that broke the previous year’s record by 12%. Continued focus on claims processing fundamentals, such as expanded C&P examination capacity, digitization of federal records, and ensuring a robust hiring and onboarding process, contributed to the agency’s ability to meet these goals. This resulted in Veterans and survivors receiving over $128 billion in disability compensation and pension benefits in 2022, including nearly $10 billion in retroactive awards.

During this same period, the Veterans Health Administration (VHA) also provided more than 115 million clinical encounters, with VA serving over 6.4 million patients. This included roughly 40 million in-person appointments and more than 31 million tele-health and telephone appointments and approximately 38 million community care appointments in 2022 alone.

In addition, the National Cemetery Administration (NCA) interred nearly 150,000 Veterans and eligible family members in our national cemeteries during FY 2022—the highest number of annual interments VA has recorded. NCA also provided more than 350,000 headstones, markers and columbarium niche covers around the world. We also provided nearly 12,000 medallions in 2022 to mark the privately purchased headstones of Veterans. In 2023, VA will continue to deliver more care and more benefits to more Veterans than ever before, and continue to fight for all Veterans, their families, caregivers, and survivors.

To continue this momentum, VA has a threefold approach. First, VA is focused on *increasing access* to world class health care and earned benefits by improving customer service and ensuring that Veterans and their families trust VA by expanding
outreach to underserved Veterans and implementing new authorities (such as the Sergeant First Class Heath Robinson Honoring our Promise to Address Comprehensive Toxics (PACT) Act to expand services, programs, and benefits.

Second, VA is **investing in its people**. This means VA is hiring more staff across the Department to ensure that care and benefits are delivered in a timely manner. VA is also focused on improving employee experience to help improve outcomes for Veterans, their families, caregivers, and survivors which makes sure that we keep the Veteran at the center of everything we do. Additionally, VA is implementing new hiring authorities and new retention authorities to grow and maintain a diverse, talented workforce with a shared mission to provide more care and more benefits to more Veterans. For example, using the recently approved Direct Hire Authority for mission critical occupations, VBA was able to increase its total workforce by more than 5% (more than 1,300 employees) in the first four months of FY23, compared to less than 1% growth in the workforce over the same time period in FY22.

Third, VA is **transforming systems, processes, and infrastructure** in order to achieve operational excellence, increase productivity, and ensure that systems and processes are easy to use by both the staff and the Veterans we serve. Outcomes for Veterans drive everything we do – because Veterans, not us, are the ultimate judges of our success. The proof of VA’s ability to deliver on this promise is evident in NCA’s recent top score in the prestigious American Customer Satisfaction Index (ACSI)\(^1\) ratings. For the second time, NCA has scored 97 (out of 100) on the index, which is the highest score ever achieved by any organization rated by the ACSI, public or private, including the best-known companies in our country. The ACSI survey describes itself as “the only national cross-industry measure of customer satisfaction available in the United States.”

This is the seventh time NCA has been ranked first in customer satisfaction by ACSI. This remarkable achievement is testament to the extraordinary hard work that every member of the NCA team puts in every day. They are motivated every day to ensure that Veterans receive the final honor they have earned from our grateful Nation – a place of eternal rest in a National shrine. NCA’s impressive customer satisfaction scores are an inspiration for all of us in VA. Every employee in VA shares that dedication and motivation to serve our Nation’s Veterans every day.

**Increasing Access**

Across VA, VHA, VBA, and NCA have focused on increasing access to world class health care and earned benefits to all Veterans, their families, caregivers, and survivors. We will continue to do so by facilitating timely access, focusing on women’s health care, and expanding mental health care and suicide prevention.

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\(^1\) In 1999, the federal government selected the ACSI to be a standard metric for measuring citizen satisfaction. The ACSI measures citizen satisfaction with over 100 services, programs, and websites of federal government agencies. The objective of the survey is to measure customer satisfaction with a score of 0-100.
Access to the Soonest and Best Care

Providing Veterans access to the best care in a timely way is at the core of our mission. Over the last two years, VA has delivered more care to more Veterans through both VA and community care providers than during any time in our Nation’s history. Veterans completed more than 73 million outpatient appointments in VA and another 38 million community care outpatient appointments in calendar year 2022. While enrolled Veterans continue to receive the majority of their outpatient care in VA, more than 3.5 million Veterans have completed at least one outpatient appointment with a community care provider since we implemented the VA MISSION Act of 2018. As such, more than 1/3 of all Veterans enrolled in VA health care have been eligible for and chosen to elect to receive at least one community care appointment at some point in the last five years.

Veterans today have more options for care than ever. VA has more than 1,100 medical centers and community-based outpatient clinics for Veterans to receive their care. VA offers care in-person, over the phone or through video appointments as clinically appropriate. VA’s community care network has more than 1.3 million community care providers across all 50 States and U.S. Territories. Enrolled Veterans also have access to community urgent care, and all Veterans have access to emergent suicide care.

Veterans’ trust levels for VA health care exceed 90% nationally, whether care is received in VA or through a community provider. Veterans believe VA health care is getting better, according to studies by the Veterans of Foreign Wars, more than 90 percent of Veterans surveyed say they would recommend VA care to other Veterans. VA is seeing more patients than ever before and studies show VA compares favorably to the private sector for access as well as quality of care and in many cases exceeds the private sector.

Women’s Health Care

VA remains committed to providing high-quality, equitable care to women Veterans at all sites of care. More women are choosing VA for their health care than ever before, with women accounting for over 30% of the increase in Veterans served over the past 5 years. The number of women Veterans using VHA services has more than tripled since 2001, growing from 159,810 to more than 600,000 today.

To provide the highest quality of care to women Veterans, VA offers women Veterans trained and experienced designated Women’s Health Primary Care Providers (WH-PCP). National VA satisfaction and quality data indicate women who are assigned

2 Comparison of Wait Times for New Patients Between the Private Sector and United States Department of Veterans Affairs Medical Centers | Health Care Quality | JAMA Network Open | JAMA Network
3 VA Health System Generally Delivers Higher-Quality Care Than Other Health Providers | RAND
to WH-PCPs have higher satisfaction and higher quality of gender-specific care than those assigned to other providers. Importantly, we also find women assigned to WH-PCPs are twice as likely to choose to stay in VA health care over time. Designated WH-PCPs are available across all VA health care systems. VA tracks sites with fewer than two WH-PCPs to enhance national training and local hiring initiatives in rural areas and in additional areas where we have gaps in capacity to treat women.

While maternity care is not provided in VA facilities, a significant number of Veterans use maternity services provided through VA-authorized care in the community. Pregnant and postpartum Veterans continue to receive care in VA for other conditions and may also need primary care, emergency care and require coordination of Community Care services. To support pregnant and postpartum Veterans, VA has developed a Maternity Care Coordination (MCC) program in all VA health care systems to ensure coordination of care both in VA and in the community. To further support our Veteran population and in response to Public Law (P.L.)116-79, Protecting Moms Who Served Act of 2021, VA is expanding the maternity care coordination program to follow pregnant Veterans for one year postpartum, a particularly vulnerable time for families. VA MCCs support pregnant Veterans through every stage of pregnancy and postpartum. MCCs help pregnant Veterans navigate health care services both inside and outside of VA, connect to community resources, cope with pregnancy loss, connect to needed care after delivery and answer questions about billing. MCCs screen Veterans for intimate partner violence, perinatal mental health conditions, substance use disorders, homelessness and food insecurity and ensure Veterans are connected to appropriate resources and needed services.

VA is focusing on enhancing care coordination for preventive care, such as breast and cervical cancer screening. VA is actively implementing the Dr. Kate Hendricks Thomas Supported Expanded Review for Veterans In Combat Environments (SERVICE) Act. Beginning in March 2023, VA will be providing breast cancer risk assessments, including toxic exposure risk assessments, to Veterans eligible under the SERVICE Act with referral for mammography as clinically indicated. Breast and cervical cancer screening programs require meticulous tracking to ensure that all eligible Veterans receive appropriate screening and receive results of screening tests, and that follow-up care is arranged as needed. To ensure accuracy, timeliness and reliability, VA tracks the provision of breast and cervical cancer screening and the availability of breast and cervical cancer care coordinators across the system.

Preventing Suicide

Preventing Veteran suicide is a top priority, and VA has implemented a comprehensive public health approach to reach all Veterans. This approach is in full alignment with the President’s national strategy, Reducing Military and Veteran Suicide, advancing a comprehensive, cross-sector, evidence-informed public health approach with focal areas in lethal means safety, crisis care, and care transition enhancements, increased access to effective care, addressing upstream risk and

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4 Military-and-Veteran-Suicide-Prevention-Strategy.pdf (whitehouse.gov)
protective factors, and enhanced research coordination, data sharing, and program evaluation efforts.

With the goal to reach Veterans both inside and outside VA care, VA launched *Suicide Prevention 2.0* (SP 2.0). SP 2.0 is a population-based, public health model of intervention. SP 2.0 includes community-based prevention strategies and evidence-based clinical strategies that empower action at National, regional, and local levels. To accomplish the goal of working towards ending suicide among all 20 million U.S. Veterans, a comprehensive approach to suicide prevention that blends community-based prevention and clinically based interventions is needed. The model works to reach Veterans in the community and those we currently serve in VA with evidence-informed community-based prevention strategies combined with strategies with known outcomes for reducing suicide and suicide attempts based upon the VA-Department of Defense (DoD) Clinical Practice Guidelines.

Another tool VA actively uses to combat suicide is the Veterans Crisis Line (VCL), which offers support to Veterans who reach out for help. Since July 16, 2022, the VCL has been easily accessible via 988, and pressing 1. The new, shorter number, implemented thanks to the National Suicide Hotline Designation Act of 2020, directly addressed the need for ease of access and clarity in times of crisis, both for Veterans and non-Veterans alike. Between 2007 and October 2022, VCL has taken more than 6.4 million calls, 269,000 texts, 772,000 chats and provided more than 1.2 million referrals. Since the official launch of 988 through February 5, 2023, VCL has seen a 12.35% increase in call volume and 25.46% increase in text volume compared with last year. Average calls per day exceeded 2000 between July 15, 2022, and February 5, 2023. Additionally, VCL campaigns are designed to raise awareness of call, chat, and text supports for Veterans in crisis. The campaign also provides social media, web, print and video resources that can be broadly shared through the [Spread the Word Initiative](#).

In partnership with the Department of Health and Human Services’ Substance Abuse and Mental Health Services Administration, VA is facilitating State-level efforts to prevent Veteran suicide with the Governor’s Challenge to all States and territories. The Governor’s Challenge advances a public health approach to suicide prevention by bringing together key State leaders to develop strategic action plans focused on Veteran suicide prevention. As the President announced in the State of the Union address, VA is working with the Departments of Health and Human Services and Defense to work with the States and territories through the Governor’s Challenge. VA is launching a new $10 million program to further bolster these efforts. We appreciate Congress’ support in this regard. Additionally, with the launch of Mission Daybreak, VA invited innovators across the country to participate in a $20 million challenge to help VA develop suicide prevention strategies for Veterans. VA received over 1,300 submissions and recently announced 2 Grand Prize Winners as well as second and third place prize winners. The prize winners have at least one element in common: they each reflect various innovative approaches to clinical and community-level suicide prevention and intervention and they each are well-positioned to be deployed across a variety of settings and communities as part of our collective suicide prevention efforts.
VA is expanding outreach to Veterans like never before. To reach Veterans wherever they are, VA has emphasized paid media campaigns to facilitate suicide prevention awareness. These include: 1) Don’t wait. Reach out; 2) Keep it Secure; and 3) the Veterans Crisis Line. To develop the “Don't Wait. Reach Out” campaign, VA entered into an agreement with the Ad Council, a national non-profit organization that uses donated communication industry resources to elevate messaging. The campaign strategy was informed by extensive research with Veterans and portrays real Veterans in all videos. For the Don’t Wait, Reach Out Campaign, from October 2021-July 2022, we have had over 1 billion impressions with over $10 million in donated media value.

The Keep it Secure campaign is a national public health campaign, launched in September 2021, focused on safe storage for firearms during times of distress. From launch through January 2023, the campaign has garnered over 1.8 billion impressions, and over 20 million website visits to access resources and support for safe storage. As part of the White House Strategy to Reduce Military and Veteran Suicide, VA will continue expansion of this lethal means safety campaign this year with new communication endeavors also focused on providers, caregivers, and family members of Veterans, encouraging secure storage of firearms and medication.

Finally, the VCL campaign works to reach Veterans and those who love them to support them 24/7 during times of crisis. Since the launch of the VCL campaign in February 2020 until July 2022, there have been nearly 2 billion impressions. When developing these and other campaigns, VA strives to represent the demographic and cultural diversity of Veterans. Together with ongoing campaigns like AboutFace and Make the Connection, VA hopes every Veteran will see themselves represented and know VA is here to serve them. VA is also making it easier for customers to connect with us with VA.gov and VA’s Health and Benefits mobile app as our digital front door and 1-800-MyVA411 as our telephonic front door.

With the enactment of the Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019 (Hannon Act , P.L. 116-171), VA is using new authorities that improve Veterans’ mental health and substance use disorder care and services through the expansion of mental health care options. This includes the Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program (SSG Fox SPGP), which awards grants to eligible entities to provide or coordinate suicide prevention services to eligible individuals and their families. This grant program is the first-of-its-kind effort by VA to provide funding for local suicide prevention programs through outreach, suicide prevention services, and connection to VA and community resources.

Through this new program, VA awarded $52.5 million to 80 grantees in 43 States, the District of Columbia and American Samoa. Twenty-one grantees serve Tribal lands including Navajo Nation, Cherokee Nation, Choctaw Nation, Alaskan Native Tribes and others. Funding decisions reflect VA’s authority to prioritize the distribution of grants to rural communities, Tribal lands, Territories of the United States, medically underserved areas, areas with a high number or percentage of minority Veterans or women Veterans, and areas with a high number or percentage of calls to the Veterans Crisis Line.
In addition to implementation of the authorities in the Hannon Act, VA continues to implement several other statutory requirements related to mental health care. As of January 17, 2023, as part of the COMPACT Act, eligible individuals (including Veterans) in suicidal crisis are eligible to receive covered emergency care – including transportation costs, inpatient or crisis residential care - from any health care facility, whether at VA or in the community. Inpatient care is available for up to 30 days, and outpatient care is available for up to 90 days.

**Access to Burial Benefits**

VA is focused on increasing access to burial benefits as well by developing new National cemeteries, developing additional gravesites at existing National cemeteries, and establishing and expanding Veterans cemeteries through grants to States, territories, counties and Tribal organizations. VA has been steadily managing the largest expansion of the cemetery system since the Civil War. VA has opened 13 new cemeteries in the last decade with one more planned this year. We also plan to open one new cemetery in each of the next two years. These National cemeteries will provide new or enhanced burial access to over 3.8 million Veterans and their families.

VA is also working with States and Tribal authorities to encourage the development and placement of VA grant-funded cemeteries in locations where Veterans do not have reasonable access to a burial option, either in a VA National or VA grant-funded Veterans’ cemetery. Tribal access is a particular focus for VA. Within the last year, VA has engaged directly with the Crow Tribe in Montana, the Pascua Yaqui tribe in Arizona and the Sisseton Wahpeton Oyate tribe in South Dakota to address challenges and identify potential solutions regarding utilization of their grant-funded cemeteries. Similar sessions with leaders from the remaining eleven tribes with grant-funded Veterans cemeteries are planned.

In FY 2022, VA interred nearly 150,000 Veterans and eligible family members in our National cemeteries—the highest number of annual interments VA has recorded. Also in FY 2022, VA also provided more than 350,000 headstones, markers and columbarium niche covers around the world, as well as nearly 12,000 medallions to mark the privately purchased headstones of Veterans. But these statistics reveal a key challenge for VA: ensuring Veterans know about and take advantage of interment in a VA national cemetery, or a VA-funded State, territorial or tribal cemetery.

Approximately half of all Veterans are eligible for benefits and services, about one third of all Veterans actively use VA health care, and 85 percent of eligible Veterans use their GI Bill benefits (either themselves or by transferring those benefits to a family member). However, only 15 percent of all Veterans who die each year are interred in a VA National cemetery, with another 5 percent interred in a VA-funded State, territorial or Tribal cemetery. That’s why we are embarking on a campaign to ensure that Veterans know they have the option to Choose VA for their final resting places. To ensure they know that VA stands ready to fulfill our solemn obligation to them: to care for them and
their loved ones in a manner that mirrors their own dedicated service and devotion to our nation – in perpetuity.

**Serving Veterans with Environmental Exposures**

Passage and enactment of the PACT Act marked the largest and most significant expansion of Veterans’ care and benefits in decades, empowering VA to deliver additional care and benefits to millions of Veterans and their survivors. VA issued sub-regulatory guidance and provided training before going live with nationwide claims processing on January 1, 2023. Prior to implementation of the law, the VA used its authority under sections 403, 404, and 406 of the PACT Act to treat all presumptive conditions newly added as part of the PACT Act as applicable as of August 10, 2022, instead of future phased-in dates as prescribed by the law, to allow VA to deliver much-needed benefits and access to care to Veterans, family members, caregivers, and survivors as soon as the law was signed. As of February 4, 2023, VA has received nearly 300,000 PACT Act-related claims and completed over 110,000 claims. Using the new PACT Act authorities, VA has granted presumptive service connection for over 1,200 terminally ill Veterans.

VA immediately began executing a comprehensive, targeted outreach effort to encourage Veterans and survivors to apply now for PACT Act-related care and benefits. VA hosted 127 PACT Act “Week of Action” events between December 10th and 17th in all 50 States, the District of Columbia, and Puerto Rico. Each event was open to Veterans, their families, caregivers, survivors, and advocates as well as the press. Invitations were also extended to Members of Congress, State Directors of Veterans Services, and local officials and stakeholders. More than 50,000 attendees participated in person or online, VA completed 5,600 exposure screenings, and received 2,600 claims for benefits, and more than 800 applications to enroll for health care. Over the coming weeks and months, VA will continue targeted outreach efforts to include public service announcements (PSA), advertisements such as the video billboard in Times Square, social media posts, and radio, TV, and audio streaming.

One of the biggest challenges VA faces is identifying and contacting survivors, even more so now that many more may now be eligible for benefits under the PACT Act. We have mailed nearly 300,000 letters to potentially eligible survivors and are working with Veterans Service Organizations and survivor organizations such as the Tragedy Assistance Program for Survivors (TAPS) and Gold Star Wives to amplify and streamline messaging. VA is also leveraging social media and posting YouTube videos to provide easy to read information on PACT Act. VA’s goal is to provide information on the PACT Act not just to survivors themselves, but to anyone who may know a survivor so that VA’s message can reach as many impacted individuals as possible.

**Toxic Exposure Screenings**

As of February 8, 2023, VA has screened more than 1.78 million Veterans for toxic exposure. Of the 1.78 million Veterans screened, 43 percent required follow-up. This includes both Veterans who reported possible exposure, and Veterans who were
unsure of potential exposure concerns and had additional questions. When the screening is initiated by physicians (MD), osteopathic doctors (DO), advanced practice registered nurses (APRN), and physician assistants (PA) with privileges, 90 percent of follow-up screenings occur on the same day as the initial screening. If a screening is initiated by a staff member without clinical privileges (such as the facility Toxic Exposure Screening, or TES Navigator), the follow-up screening is then referred to and completed by a clinical provider. This ensures all Veterans with health concerns receive appropriate clinical assessment in a timely manner.

Toxic Exposure Research and Registry

VA has completed a review of the Airborne Hazards and Open Burn Pit Registry in light of the 2022 National Academy of Sciences Engineering and Medicine (NASEM) 5-year review of the Registry, VA’s internal Office of Inspector General review and our partnership with DoD to better address a Service member’s (soon to be a Veteran’s) health through the separation health assessment done at separation or retirement from military service.

Title V of the PACT Act elevates the timely progress of exposure science through a whole-of-government approach. VA, in collaboration with the heads of other Federal entities, will establish an interagency, mission-aligned toxic exposure research working group with the goal of collaboratively developing and executing a 5-year strategic research plan on the health consequences of toxic exposures experienced during active military, naval, air, or space service, as required by section 501 of the PACT Act. VHA’s Office of Research and Development met with other Federal agencies on February 2, 2023, to address section 501 of the PACT Act, and establish an interagency Toxic Exposure Research Working Group, which will, in part, identify collaborative research activities and resources available among entities represented by members of the Working Group to conduct collaborative research activities and develop a five-year strategic plan for such entities to carry out collaborative research activities.

Ending Veteran Homelessness

VA has made significant progress in preventing and ending Veteran homelessness and VA remains focused on ending homelessness for all Veterans. Since 2010, the number of Veterans experiencing homelessness in the United States has declined by more than 55 percent. More than 1,000,000 Veterans and their family members have been permanently housed, rapidly rehoused, or prevented from falling into homelessness through VA’s homeless assistance programs. VA housed over 40,000 homeless Veterans in 2022. This accomplishment along with VA’s ongoing collaborative efforts with the Departments of Housing and Urban Development and Labor and the U.S. Interagency Council on Homelessness, are anticipated to further reduce the overall number of Veterans experiencing homelessness.

Supporting Transitioning Service Members
VA is charged with ensuring that every Veteran is aware of and understands the benefits they have earned as they transition from military service. In FY 2022, VA conducted 6,467 Transition Assistance Program (TAP) briefings to over 164,000 Service members and provided 58,356 one-on-one counseling sessions.

The VA Solid Start program which launched in December 2019 has successfully connected with 315,604 (66.4%) eligible Veterans and provided information about, and access to, the benefits and services they have earned. Additionally, to reduce the Veteran suicide risk and to ensure continuity of care, VA Solid Start provided priority contact to those Veterans who met certain risk criteria. Since the program launched, VA Solid Start has successfully connected with 53,220 (78.9%) priority Veterans supporting a successful transition to VA mental health care treatment.

VA has begun work with DoD on a TAP Military Life Cycle (MLC) module with Other than Honorable (OTH) discharge as the topic focus. Further, VA will look to update OTH information in the VA TAP Benefits and Service Participant Guide beginning in March 2023. VA has found Veterans with an OTH character of discharge did not receive adequate information or support to connect with the VA benefits and services for which they are eligible, which may have detrimental downstream effects on a population already prone to crisis situations (mental health emergencies, joblessness, suicidality, homelessness, etc.).

VA has a special commitment to understanding and supporting the unique needs of women Veterans. The Women’s Health Transition Training Program is a critical resource tool that provides a comprehensive holistic approach to help transitioning Service women and recently separated women Veterans understand their VA health care benefits and services. In concert with our TAP interagency partners, VA has worked diligently to promote the Women’s Health Transition Training Program through TAP and other means to make sure every Service woman is aware of this specialized course and is able to participate in this effective learning opportunity through five modules.

**Improving Economic Opportunity**

VA is dedicated to improving the economic opportunity of Servicemember, Veterans and their families. VA has undertaken a number of improvements with the Veteran Readiness and Employment (VR&E) Program, Education Program, Home Loan Guaranty Program and Insurance Service to ensure that Veterans have an opportunity to achieve suitable employment, attain an education, obtain affordable housing, and maintain life insurance for themselves and their families.

In FY 2022, VA implemented a six-point plan to improve outcomes for Veterans participating in the Veteran Readiness & Employment (VR&E) Program. This plan includes implementing a new comprehensive data management system (RES), formerly known as the Case Management System (CMS); implementation of e-VA, electronic document signing, and other system enhancements; enhancements to the Veteran
Success on Campus (VSOC) program; Employment Services; Quality Review Teams; and increased Vocational Rehabilitation Counselor (VRC) recruitment and retention.

VA continues its efforts in realigning the services provided by the VSOC program. VSOC counselors have taken on increased workload allowing for more Veterans to be served in a counseling capacity at the school to which they are assigned. Therefore, an updated position description has been classified, removing the positive education requirement, which ultimately expands the population of individuals who can qualify to work as a VSOC counselor.

Through the Digital GI Bill (DGIB), the VA is also transforming how GI Education Benefit Claims are submitted, reviewed, and processed using a multi-prong strategy – with the intent of enhancing the Veteran and beneficiary education experience. In August 2022, for the first time, Veterans were able to submit original Post-9/11 GI Bill applications could through an automated system. Applicants receive a head start by having pre-filled service history information which leads to quicker eligibility decisions, including as soon as the same day instead of more than 10 days on average.

In support of the DGIB, the Office of Information and Technology (OIT) has worked with its VBA partners to successfully deploy “My Education Benefits” through va.gov, allowing the automated processing of original claims for the first time ever. The DGIB team has also moved the DGIB Application to production, saving the government millions in infrastructure costs for cloud computing and storage. DGIB is ready to deploy the “Enrollment Manager” and Chatbot to over 45,000 school certifying officials around the world, which will improve the user experience for schools and increase automation of claims. This allows for the decommissioning of the VA-Once legacy application. In addition, VA has refined the rules so that Supplemental Automation has consistently been above 50 percent and as high as 62 percent. Lastly, the DGIB team deployed text messaging (with opt-in rates above 90%) and email services, enabling faster communication with VA that allows Veterans and beneficiaries to easily verify their enrollment in college courses.

The Veterans Rapid Retraining Assistance Program (VRRAP) was enacted on March 11, 2021, under the American Rescue Plan to support Veterans seeking retraining and economic opportunities in response to the effects of the COVID-19 pandemic. VA worked on a highly effective PSA campaign with over 29 million impressions on television and radio, as well as a robust social media campaign to increase Veteran and eligible schools' awareness and participation in VRRAP. VA processed over 5,600 enrollments in less than 90 days. These actions were vital in allowing VA to obligate 98 percent of the $386 million available for Veterans to train and find suitable employment.

The Veteran Employment Through Technology Education Courses (VET TEC) is a five-year pilot program for eligible Veterans to help them secure meaningful employment in the technology sector. VET TEC pairs eligible Veterans with market-leading training providers offering sought after high-tech training and skills development. Since the program started, over 93,000 Veterans have applied for VET TEC with 64,463
receiving Certificates of Eligibility. 9,075 Veterans have graduated from a VET TEC training program and 4,089 have found meaningful employment with an average salary of $65,118. The VET TEC Employer Consortium helps Veterans bridge the gap between program completion and meaningful employment, it also fosters a network of employers and training providers for graduates to leverage at the beginning of, and throughout, their careers.

VA is dedicated to protecting Veterans as they pursue higher education. The Department of Education (ED) recently announced final rules that will better protect Veterans and Service members from predatory recruitment practices. These regulations implement an important change made by the American Rescue Plan, closing a longstanding loophole in the Higher Education Act of 1965 that allowed for-profit colleges to aggressively recruit Veterans and Service members because they could count money from Veteran and Service member benefits toward their 10 percent revenue requirement (other than Federal assistance). VA worked with ED on this effort and is assisting schools in maintaining compliance with ED’s 90/10 rule, by providing training on how to obtain reports from VA detailing GI Bill payments.

Since 1944, VA’s home loan program has helped almost 28 million Veterans achieve the dream of home ownership. This program continues to maximize opportunities for Veterans, Service members, and surviving spouses to obtain, retain and adapt their homes. Veteran households have higher homeownership rates than the general population and, for many Veterans, VA’s home loan program is the most advantageous mortgage option. Veterans make up approximately 6 percent of the U.S. population, but VA home loans account for 13 percent of the current mortgage market. VA’s home loan program is popular because Veterans receive competitive interest rates, pay limited closing costs, and avoid private mortgage insurance requirements—usually without having to make a down-payment. Due to efforts of the Loan Guaranty Service to improve the program, even in today’s higher interest rate environment, rates for 30-year, fixed-rate VA home loans currently average nearly one-half of one percent (or 50 basis points) lower than rates on conventional loans. Another specialized feature of the home loan program is the individualized service VA loan technicians provide to Veteran borrowers facing financial difficulty.

VA continues to look for opportunities to improve the homebuying process for Veterans and their families. Through people, process, and technology enhancements, 76 percent of home loan certificates of eligibility (COE) are issued instantaneously. Appraisal timeliness has shown steady improvement, with average business days to completion decreasing from 10.4 business days in October 2021 to 6.7 business days in January 2023. As a member of the Property Appraisal and Valuation Equity (PAVE) Task Force, supporting Veterans’ ability to utilize their home loan benefit without bias or racial impacts is of utmost importance. VA’s commitment is further augmented by the fact that VA is the only agency that maintains and oversees an independent appraisal panel. VA recently announced advanced oversight procedures to improve methods of screening for potential appraisal bias and discrimination.
VA remains committed to expanding opportunities for homeownership to Native American Veterans residing on trust land. VA is providing expansion through increased outreach to and collaboration with the 574 Federally Recognized Tribes. VA has signed 111 memoranda of understanding allowing the signatory Tribes to participate in the Native American Direct Loan (NADL) program. We continue to work with stakeholders in the State of Alaska to expand this vital direct loan program for Native American Veterans residing in Alaska.

At the start of the COVID-19 pandemic, VA proactively announced numerous flexibilities in servicing guidelines to help Veterans with VA home loans. Since the start of the pandemic, VA’s loss mitigation options have helped more than 200,000 Veterans remain in their homes, with more than 30,000 Veterans assisted through VA’s temporary home retention options, the COVID-19 Veterans Assistance Partial Claim Payment, and the COVID-19 Refund Modification programs. As the COVID-19 national emergency nears an end, VA continues to explore changes in servicing policies and home retention options to assist Veteran borrowers.

As VA celebrates the 75th anniversary of the Specially Adapted Housing (SAH) grant program this year, it is worth reflecting on the nearly 50,000 grants that have been awarded under this program since inception. Each SAH grant represents VA’s enduring commitment to assisting the Nation’s most severely disabled Veterans live independently in their homes. The enactment of the Ryan Kules and Paul Benne Specially Adaptive Housing Improvement Act of 2019 led to expanded SAH assistance, with nearly $250 million in grant approvals in fiscal years 2021 and 2022.

VA Insurance Service provides 5.7 million Veterans, Service members, military families and survivors insurance coverage totaling over $1.45 trillion with Servicemembers Group Life Insurance (SGLI) coverage increasing to $500,000, the highest level ever. This makes VA the Nation’s 12th largest American life insurer. Additionally, on January 1, 2023, VA launched VALife, a whole life policy which eliminates time barriers and medical underwriting for all service-connected Veterans with any rating (0-100 percent) aged 80 and under. VALife offers automated online applications and instant approvals even through a smart phone and at the most competitive rates which will never increase.

**Supporting Family Caregivers**

VA expanded its Program of Comprehensive Assistance for Family Caregivers (PCAFC) to eligible family members and Veterans of all eras on October 1, 2022, and has received over 44,300 applications as of February 8, 2023. Previously, PCAFC was only available to eligible Veterans who served on or after September 11, 2001. On October 1, 2020, VA expanded the program to eligible Veterans who served on or before May 7, 1975, or on or after September 11, 2001. Currently, there are over 44,800 Veterans participating in the PCAFC across the country, including territories. As of February 8, 2023, 98 percent of PCAFC applications are dispositioned in under 90 days.
VA is not only adding to the services and supports that we offer our caregivers but focusing on how VA offers it. Additionally, VA is enhancing and expanding the types of resources provided to caregivers, including enhanced respite, mental health services, and the caregiver and Veteran experience. The Caregiver Support Program has partnered with the Office of Mental Health and Suicide Prevention to fund 54 mental health clinicians who will be dedicated to providing mental health services for our Family Caregivers through clinical resource hubs. In addition, VA is funding 14 respite liaisons to assist caregivers in experiencing a smooth and seamless respite experience.

VA has trained over 120 staff at 54 sites to be health and well-being coaches for Caregivers. These coaches focus on providing individualized personal care plans on areas that matter most to caregivers. By the end of this fiscal year, VA will have staff trained at every VA medical center in this model. VA has also trained over 7,271 staff through the Campaign for Inclusive Care, which seeks to move from caregiver support to caregiver integration, making the caregiver an integral part of the Veteran’s treatment team.

In addition, caregivers participating in PCAFC will have access to services such as household budget planning, debt management, retirement planning review and education, and assistance with advanced directives, power of attorney, simple wills, and guardianship.

Investing in Our People

Providing Veterans, their families, caregivers, and survivors access to world class health care, timely access to earned benefits, and when the time comes, a final resting place is only possible with an enterprise-wide team of the best and brightest in their respective fields. VA is investing in our people by dramatically increasing hiring, holding onboarding surge events to onboard staff more quickly, increasing the use of incentives for recruitment and retention, maximizing pay authorities and scheduling flexibilities, expanding scholarship opportunities, and providing more education loan repayment awards than ever before.

Veterans’ Health Administration

In FY 2022, VHA nearly doubled the number of scholarships for clinical education offered to employees and increased the number of Education Debt Reduction Program (EDRP) awards to over 3,000. Additionally, the percentage of staff receiving recruitment, retention, and relocation incentives (3Rs) more than doubled from 5.9 percent to 12.2 percent. At rural facilities, the use of 3Rs increased from 4.3 percent to 18.9 percent. And for some critical shortage occupations, such as housekeeping aides (10.5 percent to 35 percent) and food service workers (2.1 percent to 18.7 percent), the use of 3Rs increased even more dramatically. These incentives assisted with the reduction of loss rates for critical shortage occupations in those areas to address increased competition for health care and entry level staff.
The nationwide onboarding surge event that occurred in November 2022 resulted in onboarding more new staff in VHA in the first quarter of FY 2023 (12,900 staff) than first quarter onboarding in any previous year, this was 86 percent higher than the typical number onboarded in the first quarter. Onboarding continued to be high in January 2023 (5,603 new staff onboard, approximately 600 more than last January). VHA’s emphasis on hiring has also resulted in a net increase in onboard staff of 2.1 percent as of January 31, 2023. This is already two-thirds of our end strength goal of 3 percent growth just 4 months into the fiscal year.

**Veterans Benefit Administration**

Through the implementation of the PACT Act, VA has actively engaged the workforce through a variety of avenues and solicited feedback. Since the enactment of the PACT Act, VA has hosted open townhalls with VA leaders, hosted local townhalls led by the Regional Office Directors and engaged with both labor partners and claim processors to ensure the workforce is equipped with the necessary information to process PACT claims and to resolve concerns. VA created a PACT Act inquiry tool to allow regional offices direct access to policy experts for questions about process and policy. In response to feedback on training, VA hosted additional live training sessions and created additional tools to aid processors in understanding how to implement the law.

These investments in employee engagement are critical as we look to hire more employees than ever before. Under the initial Toxic Exposure Funding (TEF) spend plan approved on October 6, 2022, VA allocated 1,871 positions towards claims processors and supporting staff. As of February 21, 2023, VA has hired 1,257 of the 1,871 positions (67.2 percent).

Currently, VA is hosting in Salt Lake City the 7th in-person PACT Act Career and Hiring Fair of the month. These events have been a resounding success with thousands of candidates coming in-person to learn about available jobs, participate in on-site interviews, conduct suitability assessments, and complete fingerprinting, resulting in hundreds of candidates receiving tentative job offers the same day. VA is leveraging all available hiring options to ensure we meet our PACT Act hiring goals – including the use of expanded hiring authorities provided in Title IX of the PACT Act.

VA continues to partner with military installations to recruit military spouses and transitioning Service members. The Secretary visited the VA Intake Center at Fort Hood and discussed the total rewards of a VA career directly with Service members. Additionally, during the Waco hiring fair, the Secretary spoke directly to candidates interested in career opportunities with VA. FY 2022 was a record year for VA hiring and by the second quarter of FY 2023, we are pleased to report that we have already surpassed 60 percent of FY 2022 total hires.

**National Cemetery Administration**
Developing our staff is a critical investment for all of VA. The Cemetery Director Development Program trains the next generation of leaders at NCA by teaching them how to lead, manage burials, conduct maintenance, and manage administrative operations at a national cemetery. The Cemetery Caretaker/Representative is the face of VA to grieving families at our National cemeteries and VA has recently upgraded the position to increase recruitment and retention of these important staff and to provide them with advancement opportunities.

Transforming Systems, Processes, and Infrastructure

VA has strengthened its capital construction project change management processes for Major Construction, Major Lease, and CHIP In Act (Community Helping Invest through Property and Improvements Needed for Veterans Act of 2016) projects. This has been accomplished through regular engagement on projects at both the local and national levels, collaborative review of decision event documents, and synchronization of the VA change management processes for these programs. Over time, this will improve VA’s ability to deliver large projects within budget and on schedule, and to be good stewards of taxpayer investments while bringing modernized health care infrastructure to support care for the Nation’s Veterans.

 Authorities in Title VII of the PACT Act have already helped further our infrastructure further improvement in our infrastructure. All 31 leases authorized by the PACT Act are in development, with some already in the solicitation phase. The revised approval and budget authorities for leases allow VA much greater flexibility than in the past, particularly accelerating timelines for leases that fall below the new Major Lease threshold but above the previous threshold. VA is in active discussion with multiple academic affiliates and multiple DoD entities on opportunities enabled by new authorities in the PACT Act, and both are already informing our FY 2025 Strategic Capital Investment Process currently underway.

VA is making progress in upgrading its facility infrastructure to correct deficient building systems, such as horizontal cabling and electrical upgrades, that will support modernized technologies such as the electronic health record, financial management, and supply chain management systems. This needed investment in facility infrastructure will allow timely and efficient future deployments of these modernized systems. The increase in non-recurring maintenance funding in recent fiscal years has allowed VA to make bigger investments per project and allowed many more projects to be funded. These improvements will help VHA address more of the Facility Condition Assessment backlog than has been possible previously.

The modernization of VA’s electronic health record (EHR) system is a highly complex clinical and business transformation endeavor, with the opportunity to standardize and optimize clinical operations for VA health care personnel, support delivery of consistent, high-quality care for Veterans, and ensure interoperability with the DoD and the broader health care community. In October 2022, VA delayed upcoming deployments until June 2023 to address challenges with the system. VA has
been focusing on assessing and remediating identified issues at the five current sites where the system has been implemented and has been planning for future sites. VA is committed to continuous improvement of the electronic health record and associated health information technologies, even while executing ongoing deployments across the health care system in the years to come. VA continues to develop and finalize a new deployment schedule and remains fully committed to implementing a modernized electronic health records system, in service of providing the best possible care for our Veterans.

Our national cemeteries are also transforming and evolving with the rest of the agency to meet Veterans’ expectations in the modern, cyber-driven world. Beyond merely establishing the physical burial locations, NCA has embraced technology and made significant improvements to its digital landscape to better serve Veterans and their families. The Veterans Legacy Memorial (VLM) continues to expand its reach among Veterans, their families, and friends. Loved ones and others can upload tributes, photos, and other items to a Veteran’s VLM page, hosted on NCA’s public-facing webpage. The number of VLM pages, for those individuals buried in National and VA grant-funded cemeteries, increased to 4.4 million pages in 2022. This year VA is planning to add VLM pages for those interred in 28 DoD-managed cemeteries, including Arlington National Cemetery, 18 Army post cemeteries, 5 Navy cemeteries, and 4 Air Force cemeteries. VLM was awarded three industry awards last year, further highlighting its unique position in honoring the lives and legacies of Veterans.

NCA is also preparing to meet the changing needs and preferences of Veterans and their families in the 21st century. With the enactment of the National Cemeteries Preservation and Protection Act of 2022 (P.L. 117-355), NCA will soon begin piloting green burials at the Pikes Peak National Cemetery with potential expansion to other locations. Green burial sections will include a natural appearance of the grounds, with a design and grounds maintenance plan based on the cemetery’s geographic location, which may include use of natural prairie and meadow grasses and wildflower mixes.

The Path Forward

As described throughout this statement, there are many joint concerted efforts to address every domain of Veterans, their families, caregivers, and survivors’ lives. While many of these efforts are still in early stages, we commit to a continued partnership of transparency and accountability to ensure VA is doing right by those we serve. VA is a Veteran-centric, collaborative and transparent organization dedicated to serving more Veterans than ever before.