



**STATEMENT FOR THE RECORD  
OF  
COLE T. LYLE  
DIRECTOR  
LEGISLATIVE DIVISION  
THE AMERICAN LEGION  
BEFORE THE  
HOUSE COMMITTEE ON VETERANS' AFFAIRS  
SUBCOMMITTEE ON DISABILITY AND MEMORIAL AFFAIRS  
"MEMORIALIZING OUR VETERANS: OUTREACH, UPKEEP, AND  
COMMUNITY PARTNERSHIPS AT VETERANS CEMETERIES"**

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Chairman Luttrell, Ranking Member McGarvey, and distinguished members of this subcommittee, on behalf of National Commander Dan K. Wiley, and more than 1.5 million dues-paying members of The American Legion, we thank you for the opportunity to offer our statement for the record.

The American Legion is guided by active Legionnaires who dedicate their time and resources to serve veterans, servicemembers, their families, and caregivers. As a resolution-based organization, our positions are directed by more than 107 years of advocacy and resolutions that originate at the post level of our organization. Every time The American Legion testifies, we offer a direct voice from the veteran community to Congress.

**Background**

The American Legion's longstanding policy, as reflected in Resolution No. 181 and Resolution No. 23, strongly supports expanding cemetery capacity where needed and deepening community volunteer partnerships to ensure every veteran receives the honors they earned. Accelerated site selection and construction for new or expanded cemeteries remains a top priority, as evidenced by our support of an additional national cemetery in Hawaii just last week.

Also, just last year, The Legion's National Executive Committee passed a resolution encouraging our membership to volunteer at VA Cemeteries through VA Voluntary Services and to partner with other organizations doing work in this area. The American Legion's network of members, our Auxiliary, and the Sons of The American Legion actively participate in flag placements, graveside services, Memorial Day observances, and volunteer efforts at national and local cemeteries. We partner with VA on the Veterans Legacy Program and encourage broader community involvement, including with local VSOs, schools, and faith-based groups.

Memorialization within the National Cemetery Administration (NCA), the American Battle Monuments Commission (ABMC), and the Department of the Army is, by most measures, a resounding success story. In 2025, NCA earned an American Customer Satisfaction Index score

of 98 – the highest score ever recorded by any public or private organization.<sup>1</sup> The ABMC meticulously maintains 26 permanent American Cemeteries and 31 memorials & monuments across 17 countries, honoring 140,000 fallen Americans and memorializing over 94,000 MIAs. The Department of the Army conducts dignified funeral services with precision and solemnity, serving as the nation’s premier military cemetery.

But memorialization of the veteran does not begin or end at the cemetery gate; it is the critical periods before and after a veteran's death that test our commitment to honoring them. An entire ecosystem of families, caregivers, healthcare providers, benefits administrators, funeral directors, and community organizations form an interconnected web of support, whose success is measured not by individual programs, but by whether veterans and survivors are able to navigate this journey with dignity, clarity, and compassion.

Families who lose their loved ones are often forced to navigate a maze of healthcare decisions, funeral arrangements, survivor benefits, burial benefits, and administrative requirements at the very moment they are least equipped to do so. What should be a coordinated continuum of care, support, and memorialization is too often experienced as a series of disconnected programs, offices, forms, and eligibility requirements that leave grieving families to serve as their own case managers.

Discussions surrounding veteran end-of-life care and memorialization frequently focus on the final act of honoring a veteran's service rather than the systems that support veterans and their families before and after loss. While no single reform will resolve every challenge, Congress has an opportunity to examine how end-of-life care, caregiver support, survivor outreach, benefit delivery, and community partnerships interact – and where gaps in coordination, communication, and accessibility continue to place unnecessary burdens on veterans and their families. Ensuring that these systems work as intended is not simply a matter of administrative efficiency; it is an extension of our nation's obligation to those who served and to the families who continue to bear the weight of that service.

Memorialization is not a singular event. It is the final chapter of a veteran's service and the first chapter of their legacy.

### **Memorialization as a Continuum**

The success of VCA, ABMC, and Arlington can obscure the critical reality that the greatest challenges in memorialization often arise not within the cemetery system itself, but at the transitions surrounding it. Continuity frequently breaks at the handoffs between end-of-life care and memorial benefits, eligibility determination and scheduling, military honors coordination, reimbursement processes, and long-term memorial planning. The issue is not the quality of memorialization once a veteran enters the system; it is ensuring a seamless path into and through it.

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<sup>1</sup> U.S. Department of Veterans Affairs, “VA Sets New Record for Customer Satisfaction in Memorial Services,” press release, February 5, 2026, <https://news.va.gov/press-room/va-sets-new-record-for-customer-satisfaction-in-memorial-services/>

The Veteran Health Administration (VHA) provides end-of-life care, NCA administers burial and memorial services, and the Veterans Benefits Administration (VBA) and associated survivors' programs administer many of the benefits survivors rely upon after a veteran's death. Each program serves a distinct purpose and, by many measures, performs that purpose well. Yet veterans and families do not experience these systems separately, but as a single continuum. This makes the transitions between agencies just as important as the services each agency provides.

Many of the challenges surrounding memorialization begin well before a veteran's death. During a November 2024 hearing before the House Committee on Veterans' Affairs Disability Assistance and Memorial Affairs subcommittee, the National Funeral Directors Association (NFDA) testified that families often enter the memorialization process without a clear understanding of available burial benefits, eligibility requirements, or the documentation needed to access them. Funeral directors also reported that many families incorrectly assume the Department of Veterans Affairs (VA) will cover all funeral and burial expenses, creating confusion and frustration during an already difficult time.<sup>2</sup>

Recognizing the importance of advance planning, the National Cemetery Administration launched its "Plan Today, Honor Forever" campaign in 2025 to increase awareness of burial benefits and encourage greater use of existing pre-need planning tools. Chief among these is the Pre-Need Eligibility Determination program, which has been available since 2016 and allows veterans and eligible family members to establish burial eligibility before a time of need.<sup>3</sup> The campaign generated a record 9,375 pre-need applications in July 2025, followed by 9,350 applications in August, demonstrating substantial interest in advance planning when veterans are informed of available resources.<sup>4</sup>

The significance of these efforts extends beyond application numbers alone. If end-of-life care and memorialization is understood as a continuum rather than a single event, then pre-need planning represents the earliest opportunity to establish continuity within that process. By resolving eligibility questions, documenting preferences, and familiarizing veterans and families with available benefits before a time of need, memorialization can begin as an act of deliberate planning rather than a series of decisions made under crisis conditions. While NCA's outreach efforts demonstrate meaningful progress, the testimony of funeral directors suggests that ensuring veterans and families are aware of these resources remains an ongoing challenge.

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<sup>2</sup> National Funeral Directors Association, *Written Statement for the Record Submitted by Lesley Witter, Senior Vice President of Advocacy*, before the House Committee on Veterans' Affairs, Subcommittee on Disability Assistance and Memorial Affairs, "Memorializing Our Veterans: Planning for the Future and Preservation During Uncertainty," November 13, 2024, <https://docs.house.gov/meetings/VR/VR09/20241113/117712/HHRG-118-VR09-Wstate-WitterL-20241113.pdf>

<sup>3</sup> U.S. Department of Veterans Affairs, "Pre-Need Eligibility for Burial in a VA National Cemetery," National Cemetery Administration, accessed June 9, 2026, <https://www.va.gov/burials-memorials/pre-need-eligibility/>

<sup>4</sup> The American Legion, "Plan Ahead for Burial in a VA National Cemetery," September 2025, <https://www.legion.org/information-center/news/veterans-benefits/2025/september/plan-ahead-for-burial-in-a-va-national-cemetery>

VA should encourage preplanning for every beneficiary and enrollee. Discussions about powers-of-attorney, Health Surrogacies, Advanced Directives, Wills, etc. are usually not had unless the veteran is enrolled in VHA. VA does have a booklet titled "Planning Your Legacy: VA Survivors and Burial Benefits" (VA PAM 27-18-1 Feb 2024), but Legionnaires report rarely seeing it offered in VAMCs. While this booklet covers pre-need, memorials, burials, DIC, CHAMPVA, VA Life Insurance, and Survivor's Pension; it does not cover items prior to that crisis moment which would help establish to continuum.

This challenge is further complicated by the division of responsibilities within VA. Veterans approaching the end of life often interact extensively with VHA through hospice, palliative care, social work, chaplaincy, and caregiver support services. However, responsibility for burial eligibility, interment, headstones, memorial products, and national cemetery operations rests primarily with the NCA. As a result, the transition from end-of-life care to memorialization frequently involves a shift between distinct administrations within VA with different missions, responsibilities, and points of contact. While VHA may help veterans and families navigate needs during their final days, many memorialization decisions and administrative requirements fall outside its primary scope. This reality makes advance planning particularly important, as questions regarding burial eligibility, military honors, required documentation, and memorial preferences may otherwise remain unresolved until after death has occurred.

### **A Family's Journey Through Memorialization**

Before examining individual programs and policies in greater detail, it is worth considering the memorialization continuum from the perspective of the people expected to navigate it. Agencies, offices, and benefits are often discussed as discrete functions with clearly defined responsibilities, but veterans, and their families and caregivers, do not experience them that way. To a veteran approaching the end of life, a caregiver managing an increasing burden of care, or a survivor confronting the death of a loved one, these systems are encountered not as separate bureaucratic processes but as a single journey spanning serious illness, death, memorialization, and survivorship. Understanding where continuity succeeds or fails therefore requires more than an examination of organizational charts and program authorities. It requires viewing the process through the eyes of those moving between these systems and confronting the practical realities, decisions, and uncertainties that accompany each stage.

At that stage where illness becomes chronic and potentially debilitating, the veteran and family are focused primarily on immediate concerns: medical appointments, caregiving responsibilities, symptom management, medications, and difficult conversations about prognosis. They may be referred to palliative care, hospice, or other support services, yet many families remain uncertain about the distinctions between these programs, what services are available, and when they should be utilized. While advance care planning discussions may occur, questions regarding burial eligibility, military honors, survivor benefits, estate planning, and memorial preferences often receive less attention.

As the veteran's condition worsens, the family's responsibilities expand. Caregivers must coordinate appointments, manage medications, communicate with providers, and advocate for the

veteran's wishes. At the same time, they may be expected to locate military service records, understand burial benefits, maintain advance directives, identify beneficiaries, and prepare for decisions that will arise after death. However, many families report receiving little guidance regarding these requirements until they become immediately necessary. The challenge is often not the absence of information, but knowing what information matters and when it becomes important.

When death occurs, the family's role shifts again. In a matter of days, survivors may find themselves coordinating with healthcare providers, hospice personnel, funeral directors, cemeteries, military honors representatives, and government agencies. They may need to obtain death certificates, locate service records, execute funeral arrangements, request military honors, and determine eligibility for burial benefits. Testimony before the House Veterans' Affairs Committee in 2024 found that many families enter this process without a clear understanding of available benefits, eligibility requirements, or required documentation.

The responsibilities do not end with burial. Following memorialization, survivors often encounter an entirely different system of benefits and services. Dependency and Indemnity Compensation (DIC), Survivors Pension, Civilian Health and Medical Program of the Department of Veteran Affairs CHAMPVA, probate proceedings, beneficiary issues, estate administration, and grief support may all require attention. Responsibility shifts from healthcare providers and memorialization professionals to benefits administrators, legal systems, and survivor-support organizations. For many families, this transition occurs with little continuity from the systems that supported them before the veteran's death.

Viewed from the family's perspective, these stages are not separate events, but merely stages of a single long and emotionally taxing journey. Yet the organizations responsible for each stage often operate independently, with different missions, authorities, and points of contact. The result is that families may experience memorialization not as a coordinated continuum of support, but as a series of transitions they must navigate largely on their own.

### **Strengthening the Memorialization Continuum**

The evidence reviewed for this statement does not suggest systemic failure within the agencies responsible for end-of-life care, memorialization, or survivor benefits. Rather, it suggests that these programs are largely designed, administered, and evaluated independently despite serving veterans and families across a single continuum of loss and remembrance. As a result, families are frequently left to manage the transitions between systems on their own. If memorialization is understood as a continuum rather than a single event, Congress should evaluate where continuity breaks down and whether existing authorities are sufficient to address those gaps.

First, Congress should examine opportunities to expand memorialization planning before a time of need arises. NCA's Pre-Need Eligibility Determination program and "Plan Today, Honor Forever" campaign demonstrate the value of advance planning, yet testimony from funeral directors and survivor advocates continues to indicate that many families remain unaware of available benefits, eligibility requirements, and memorialization options until after a veteran's death. Congress should explore whether additional outreach, integration into routine VA

interactions, or standardized memorialization planning resources could improve awareness and preparedness.

Second, Congress should examine continuity between end-of-life care and memorialization services. Veterans receiving hospice, palliative care, caregiver support, and social work services may have frequent contact with VHA personnel in the months preceding death, yet discussions regarding burial eligibility, military honors, survivor benefits, memorial products, and required documentation often occur separately or not at all. Congress should evaluate whether existing programs adequately prepare veterans and families for these transitions and whether stronger coordination between VHA, VBA, and NCA is warranted.

Third, Congress should assess whether survivors receive sufficient support during the transition from memorialization to survivorship. The responsibilities facing survivors frequently extend well beyond funeral and burial arrangements and may include DIC, Survivors Pension, CHAMPVA enrollment, estate administration, probate proceedings, and grief support services. While these programs exist, access to information and assistance remains inconsistent. Multiple survivor advocacy organizations have reported that surviving family members often struggle to understand available benefits, receive incomplete guidance, and navigate programs administered across different offices and systems. As a result, families may find themselves responsible for coordinating a process that no single agency, office, or individual is tasked with managing from beginning to end.

Fourth, Congress should continue to support and strengthen partnerships between VA, veterans service organizations, funeral directors, state and tribal cemeteries, community organizations, and volunteers. Memorialization is not carried out by government alone; these stakeholders frequently serve as the first source of information and assistance for veterans and families navigating the memorialization continuum and are often uniquely positioned to identify gaps in awareness, outreach, and continuity before they become barriers to access. Strengthening these partnerships can improve both the quality of memorialization and the ability of families to successfully navigate the systems that support it.

Finally, Congress should consider whether memorialization warrants a dedicated continuity mechanism. Whether through enhanced case management, formal interagency referral processes, warm handoffs between programs, or another model entirely, veterans and families should not bear sole responsibility for connecting systems that government itself has divided administratively. VA has begun developing the Survivor Assistance and Memorial Support program (SAMS), scheduled for full implementation Q4 2027. Through SAMS, VA has committed to helping all survivors navigate caregiving, memorial support, survivor benefits, bereavement counseling and related services. The American Legion has supported SAMS through on-the-ground volunteer efforts at individual VAMCs and policy recommendations in Washington, DC. However, the program is FTE-neutral and could use guaranteed appropriations and structural support to expand capacity. Without that support, survivor services will remain a patchwork, where a widow in Michigan's Upper Peninsula may receive fundamentally different support than a widow in the Bay Area simply because of the resources available at the nearest VA medical center. Congress must ensure every veteran receives memorialization worthy of their service and every surviving family receives the care this nation has promised.

## **Conclusion**

Chairman Luttrell, Ranking Member McGarvey, and distinguished members of the Subcommittee, The American Legion thanks you for your leadership and for the opportunity to share the perspectives of our members on the challenges facing veterans, caregivers, survivors, and the systems that support them throughout the end-of-life journey. We appreciate the Subcommittee's attention to these important issues and its continued commitment to ensuring that veterans and their families receive the dignity, support, and recognition they have earned through service to our nation.

The American Legion does not suggest that memorialization requires an entirely new bureaucracy. It does suggest that continuity deserves the same attention that Congress has devoted to access, quality, and timeliness in other areas of veterans' services. Memorialization reflects more than how we honor veterans after death: it reflects how effectively we support them, their caregivers, and their survivors during one of life's most difficult transitions. The American Legion encourages Congress to continue strengthening the partnerships, communication, and continuity that make that support possible.

A grateful nation honors its veterans in death. It must also ensure that the systems surrounding that final honor are worthy of their service.

Questions concerning this testimony can be directed to Logan Barber, Legislative Associate, at [lbarber@legion.org](mailto:lbarber@legion.org).