Making Veterans A Priority

House Committee on Veterans' Affairs Landmark Accomplishments: 2007-2010

Note from the Chairman

For too many years, the needs of America's veterans had been forgotten. Even during wartime, budgets for the Department of Veterans Affairs failed to keep up with the real needs of veterans. Incidents like poor care for soldiers at Walter Reed and restricted access to VA health care were wake up calls that we needed to do more. Nearly four years ago, Democrats gained control of Congress and responded by tackling the many issues faced by veterans, passing significant legislation providing historic budget increases, expanding access to VA health care, improving health services for all veterans, and modernizing benefits earned by America's troops. Democrats in Congress made the needs of veterans their top priority and the results of the 110th and 111th Congress are a pledge to veterans of our vision for the future.

Since 2007, the House Committee on Veterans' Affairs conducted more than 200 hearings and passed more than 135 bills to address the everyday needs of veterans, not only of returning veterans but also the needs of veterans from previous conflicts. Making the Committee one of the most productive in history, legislative successes include a G.I. Bill for the 21st Century, a nearly 60% increase in the baseline of the VA's health care budget, and a program for veteran caregivers which was the top priority of many veteran service organizations. Congress also passed advance appropriations to ensure a predictable funding stream for veterans' health care one year in advance and concentrated on providing care for veterans suffering from post-traumatic stress and traumatic brain injury.

The cost of war is high. Too many veterans remain uncompensated for their service, and there is much we must do to prepare to keep the promises made to today's fighting troops. Meeting the needs of America's veterans is a fundamental cost of war – and will remain a top priority for Democrats.

Sincerely,

Bob Filmer

A Budget Worthy of Our Veterans	2
Making Veterans Part of the Economic Recovery	.4
Caregiver Legislation	5
Caring for Our Wounded Warriors	6
Modernizing Benefits and Cleaning up the Benefits Backlog	7
Providing for the Housing Needs of Veterans	3

A Budget Worthy of Our Veterans

Under the Bush Administration, VA health care funding remained stagnant, co-pay increases were proposed, and investment in much-needed research to provide the best care for veterans suffering from unknown injuries languished. America was a country at war, yet the Department of Veterans Affairs remained unprepared to care for the hundreds of thousands of new veterans returning from Iraq and Afghanistan. Democrats in Congress offered a new direction and went to work to ensure that the cost of the war included the cost of the warrior, fighting for budgets that honor the sacrifices of our service members and veterans.

On October 22, 2009, President Obama signed historic legislation to secure timely funding for veterans' health care, a top priority of many veterans advocacy groups. The new law provides Congress greater ability to develop appropriations bills that provide sufficient funding to meet the best estimate of anticipated demand for VA health care services in future years by allowing funding for medical accounts one year in advance. Each July, the VA is required to report to Congress if it has the resources it needs for the upcoming fiscal year and Congress is authorized to approve medical care appropriations one year in advance. This will help to safeguard against the VA facing budget shortfalls such as it faced just a few years ago.

- Congress has taken significant steps to address the serious shortfalls that existed in veterans' health care funding. The last veterans' funding bill signed by President Bush provided \$34 billion for veterans' health care during wartime! The House passed a bill that would bring VA health care funding to nearly \$57 billion for fiscal year 2011, better responding to the needs of all veterans.
- The cost of the war must include the cost of the warrior. Under the leadership of Speaker Pelosi, the House added \$23 billion worth of new money for veterans' health care and services.
- Congress took action to respond to years of chronic underfunding of VA medical care, and our veterans pay the price with fewer doctors, longer waiting times, and more restricted access for the 6 million veterans using VA health care. Members of the Committee have worked closely with veteran service organizations to pass this landmark bill and guarantee that veterans have access to comprehensive, quality health care.
- House Democrats did more to increase veterans funding in the last 4 years than action taken in the previous 12 years. In fiscal year 2008 alone, Congress passed the largest increase in veterans' health care and benefits funding in the history of the VA.
- Congress finally started passing budgets that exceed the request of the *Independent Budget*, a coalition of veterans' organizations that have formulated an annual budget request for more than 20 years.

Department of Veterans Affairs Budget Details for Fiscal Year 2010

\$53 billion, \$5.4 billion above 2009, for veterans' medical care, claims processors, and facility improvements. In addition, the bill provides \$48.2 billion in advance appropriations for veterans medical care programs for fiscal year 2011.

Veterans Health Administration (VHA): \$45.1 billion for veterans' medical care, an increase of \$4.1 billion over 2009. The Veterans Health Administration estimates that it will treat more than 6.1 million patients in 2010, including more than 419,000 veterans of Iraq and Afghanistan (56,000 more than 2009). Some significant provisions are highlighted below:

Rural Health: \$250 million as requested to continue the Rural Health Initiative and an additional \$30 million to increase the number of Community Based Outpatient Clinics (CBOCs) in rural areas for veterans who do not have ready access to VA hospitals. More than 3.2 million (41%) of enrolled veterans live in rural or highly rural areas.

Mental Health: \$4.6 billion, matching the request and \$300 million above 2009, for mental health care to treat the psychological wounds of returning combat veterans, including post-traumatic stress disorder. Includes an additional \$1 million to provide education debt relief as a hiring incentive for mental health professionals.

Operation Enduring Freedom and Operation Iraqi Freedom (OEF/OIF) Veterans: \$2.1 billion, matching the request and \$463 million above 2009, to meet the healthcare needs of veterans who have served in Iraq and Afghanistan. The VA estimates that the number of OEF/OIF veterans in the VA healthcare system in 2010 will have increased by 61 percent since 2008.

Women Veterans Programs: \$183 million, matching the request, to meet the unique needs of women veterans.

Assistance for Homeless Vets: \$3.2 billion, matching the request and \$421 million above 2009, for healthcare and support services for homeless veterans; including \$26 million for a Presidential Initiative to combat homelessness, \$150 million for the homeless grants and per diem program, \$20 million for supportive services for low income veterans and families, and \$21 million to hire additional personnel for the HUD-Veterans Affairs Supportive Housing Program.

Medical and Prosthetic Research: \$581 million, \$71 million above 2009, for research in a number of areas including mental health, traumatic brain injury, spinal cord injury, burn injury, polytrauma injuries, and sensory loss; including a \$48 million increase for research to address the critical needs of Operation Enduring Freedom and Operation Iraqi Freedom veterans

Medical Facilities: \$4.9 billion, \$166 million above the President's Request and \$170 million below 2009. Includes a \$130 million increase for non-recurring maintenance at existing facilities, \$30 million for additional Community Based Outpatient Clinics in rural areas, and \$5 million for additional contracting personnel.

Making Veterans Part of the Economic Recovery

Returning veterans have shown their commitment to our country by their service and it is important to provide an opportunity to receive the education and training they missed while serving in the military. Providing veterans with the means to better themselves through educational opportunities has been a goal of this nation since 1944, when the first G.I. Bill of Rights laid a foundation for veterans, essentially creating the middle class.

The Post-9/11 G.I. Bill is the greatest overhaul of the G.I. Bill in more than 20 years, providing tuition to veterans of the Iraq and Afghanistan wars based on the cost of the most expensive four year public university in the state. The bill recognizes the sacrifice of Reserve and National Guard troops by better aligning their educational benefits with their length of service, allows unused education benefits to be transferred to spouses and children, and ensures that the children of soldiers killed in action get the college aid their parent earned.

Department of Labor has teamed with the Chamber of Commerce to create a pilot program to help veterans find jobs as they transition to civilian life. Investing in employment training, working with the private sector, and providing a 21st Century G.I. Bill will help make our veterans part of the economic recovery, much like the veterans of World War II.

The Veterans' Benefits Act of 2010 (P.L. 111-275)

The Veterans' Benefits Act of 2010 reauthorizes the recently expired VA work-study program and expands the type of work available for participating veterans. The new law increases job opportunities for veterans by reimbursing energy employers for the cost of providing on-the-job training for veterans in the energy sector with the creation of the pilot "Veterans Energy Related Employment Program." The law also supports veteran-owned business by requiring VA to verify small business ownership and operate a database of veteran-owned small businesses and service-connected veteran-owned small business in an effort to end contracting with businesses that fraudulently claim to be owned by a veteran.

Supplemental Appropriations Act of 2008 (P.L. 110-252)

On June 19, 2008, the House passed the Post 9/11 G.I. Bill Veterans Educational Assistance Act of 2008 as part of the FY 2008 Supplemental, by an overwhelming vote of 416 to 12. The bill was signed into law on June 30, 2008.

- The Post-9/11 G.I. Bill is the greatest overhaul of the G.I. Bill in more than 20 years, covering the cost of a college education at a public university.
- Reserve and National Guard benefits are tied to length of service better reflecting the sacrifice of these citizen soldiers and soldiers and veterans now have the option of transferring education benefits to their spouses and children.
- Vocational rehabilitation is crucial to what many disabled and transitioning veterans need in
 order to re-establish themselves in their communities and support their families. Because of
 the large influx of wounded veterans returning from the operations in Iraq and Afghanistan, it
 is absolutely critical that VA employment training programs adapt to the increased demand
 and ensure that disabled veterans receive the assistance and benefits they deserve.

The Caregivers and Veterans Omnibus Health Services Act

The Caregivers Act (P.L. 111-163) represents the voices of veterans and their advocates from around the country. The new law goes a long way in helping caregivers of injured veterans, women veterans, rural veterans, homeless veterans, and veterans with mental health issues. The provisions of this law provide support to those that care for America's wounded warriors and represent an understanding that the sacrifices of our veterans are shared among us all as Americans.

Provides Caregiver Support

The Caregiver Act provides immediate support for veteran caregivers by creating a program to offer caregiver training, access to mental health counseling, and 24-hour respite care in the veteran's home. This allows caregivers temporary relief without having to leave the veteran at a medical facility. Veterans who served in Operation Enduring Freedom/Operation Iraqi Freedom (OEF/OIF) are eligible to select a caregiver to receive a financial stipend along with travel and lodging expenses associated with the veteran's care.

Welcomes Home Women Veterans

The Caregiver Act expands and improves VA services for the 1.8 million women veterans currently receiving VA health care – AND goes one step further by anticipating the expected increase of women warriors over the next five years. This new law seeks to build a VA health care system respectful of the unique medical needs of women veterans. For the first time, VA will be authorized to provide health care for newborn infants of women veterans.

Expands Access to Rural Health Care

The Caregiver Act includes key provisions to improve the health care provided to our rural veterans by authorizing stronger partnerships with community providers and the Department of Health and Human Services, allowing VA to offer health care options to those living far from the nearest VA medical facility. The new law requires VA to establish a grant program for veteran service organizations to provide transportation options to veterans living in highly rural areas.

Increases Mental Health Care Access

The Caregiver Act addresses the troubling reality of post-traumatic stress and troubling incidents of suicide among the veteran population. The new law requires a much-needed and long-awaited study on veterans' suicide and requires the VA to provide counseling referrals for members of the Armed Forces who are not otherwise eligible for readjustment counseling.

Other Veteran Health Care Provisions

- Provides for a pilot program studying the use of community organizations and local and state government entities in providing care and benefits to veterans.
- Creates a pilot program, which would provide specified dental services to veterans, survivors, and dependents of veterans through a dental insurer.
- Requires the VA to provide hospital care, medical services, and nursing home care for certain Vietnam-era veterans exposed to herbicide and Gulf-War era veterans who have insufficient medical evidence to establish a service-connected disability.
- Creates a Committee on Care of veterans with traumatic brain injury.

Caring for Our Wounded Warriors

Simplified Service-Connection for PTSD

Too many veterans return from the battlefield only to suffer from invisible wounds of war and face a battle with the VA to prove it. After Congressional pressure drew attention to the challenges of veterans, VA simplified the process to immediately help combat veterans get the help they need. Now, proof of service in uniform in a war zone, combined with a later diagnosis of PTSD, will be all that is required. Veterans can now focus on treatment and recovery, instead of proving that invisible wounds incurred as a result of their military service.

More Illnesses Connected to Agent Orange

In September 2010, VA published a new rule to expand the list of health problems VA will presume to be related to Agent Orange exposure by adding three new conditions – B cell leukemia, Parkinson's Disease, and ischemic heart disease. As a result, veterans who were physically stationed in Vietnam will no longer have to prove an association between these illnesses and their military service. A certain group of Vietnam veterans, however, will not be treated or compensated because VA continues to use an arbitrary requirement that only veterans that actually stepped "foot on land" in Vietnam can qualify, effectively excluding veterans who served on the blue waters and in the blue skies of Vietnam.

Investing in Research (P.L. 111-163, P.L. 111-275)

The Caregiver Act requires the VA to contract with the Institute of Medicine to study the health impact of Project Shipboard Hazard and Defense. The Veterans' Benefits Act of 2010 extends the evaluation of chronic multi-symptom illness of veterans of the Persian Gulf War and Post-9/11 Global Operations and allows the Institute of Medicine to carry out a comprehensive review of best treatment practices for chronic multi-symptom illness in Gulf War veterans.

The Veterans' Mental Health Care and Other Care Improvements Act of 2008 (P.L. 110-387) S. 2162 was signed into law on October 10, 2008. The legislation expands mental health services, increases research through the National Center for Post-Traumatic Stress Disorder, and provides much needed counseling for families of veterans. This bill also mandates a program to help rural veterans get the health care they need closer to home.

The National Defense Authorization Act for Fiscal Year 2008 (P.L. 110-181)

H.R. 4986 was signed into law in January 2008, and contained the Wounded Warrior Assistance Act to improve the transition from active duty to veterans' status. The bill improved and expanded VA's ability to care for returning veterans suffering from traumatic brain injury, including research, screening, and care coordination.

Joshua Omvig Veterans Suicide Prevention Act (P.L. 110-110)

The Joshua Omvig Veterans Suicide Prevention Act addresses the troubling increase of suicide in our veteran community, by offering comprehensive services to veterans. The bill set up a 24-hour suicide hotline which has served more than 300,000 veterans, family members, and friends.

- Congress voted to provide an additional three years of VA health care eligibility for returning Iraq and Afghanistan veterans for a total of five years to ensure that newly returning combat veterans receive the treatment and care they need following deployment.
- More than 44% of our veterans of Operation Enduring Freedom and Iraqi Freedom are entering the VA health care system. Of these veterans, 48% are seeking mental health care.

Modernizing Benefits and Cleaning up the Benefits Backlog

The Veterans' Benefits Act of 2010 (P.L. 111-275)

This comprehensive new law ensures the welfare of veterans and their families by increasing many of the outdated insurance policy amounts and terms for our veterans, many who are severely disabled or have suffered traumatic injury. The Veterans' Benefits Act honors fallen service members and their families by increasing burial and funeral benefits and allows a parent whose child gave their life in service to our country to be buried in a national cemetery with that child when their veteran child has no living spouse or children. The law increases the number of veterans to receive independent assisted living services and the quality of those benefits, provides greater automobile and adaptive equipment to veterans with severe burn injuries, and increases the automobile allowance for disabled veterans from \$11,000 to \$18,900.

The Veterans Benefits Improvement Act of 2008 (P.L. 110-389)

S. 3023 was signed into law on October 10, 2008. The legislation provides essential reforms to bring the claims processing system up-to-date for more accurate and timely delivery of benefits to veterans, families, and survivors. The law created various pilot programs to explore different and speedier ways to process claims for veterans. Examples of some of the experimental provisions include expedited treatment of fully developed claims, providing checklists to veterans, and greater training requirements for VA employees. Another pilot program has enhanced the use of information technology in claims processing, by developing a new electronic application to digitize all claims records, assessing ways to reduce the time to gather evidence, and employing paperless processes while increasing security and accuracy.

The Committee continues to examine joint VA and Department of Defense programs to streamline service members' transition from active duty to veterans' status. The Benefits Delivery at Discharge and Quick Start programs are mechanisms that if implemented effectively, can help significantly reduce the growing VA backlog of claims for separating or retiring service members. These pre-discharge programs offer a single medical evaluation, a shorter application form, and operate electronically.

- The Committee continues to work with veterans groups and stakeholders to advance the goal of comprehensive claims reform.
- The backlog of claims at the VA totals more than 600,000. Veterans have died while waiting for their adjudication. Veterans have had to give up their homes while waiting on the decisions of their claims. This is a national disgrace!
- Congress took a major step to comprehensively modernize the VBA claims processing system and arm it with the up-to-date tools it needs to process claims, while improving accountability, timeliness, and quality. Veterans, their families, and survivors deserve a benefits process that reflects the selfless sacrifices of those it serves.

Addressing the Housing Needs of Veterans:

A Relevant VA Home Loan Program and Fighting to End Veteran Homelessness

The Veterans Benefits Improvement Act of 2008 (P.L. 110-389)

S. 3023 was signed into law on October 10, 2008. This new law makes home loans more accessible to veterans by easing restrictions on the VA home loan guaranty program and increasing loan amounts for purchase and refinancing. The legislation enables more veterans to qualify to refinance high interest loans with lower interest VA-guaranteed loans.

The Veterans' Benefits Act of 2010 (P.L. 111-275)

The Veterans' Benefits Act of 2010 reauthorizes the Homeless Veterans Reintegration Program through fiscal year 2011 and authorizes an additional \$1 million to provide dedicated services for homeless women veterans and homeless veterans with children. Grants would be made available to provide job training, counseling, placement services, and child care services to expedite the reintegration of veterans into the labor force.

Caregivers and Veterans Omnibus Health Services Act of 2010 (P.L. 111-163)

The Caregivers Act essentially expands the number of places where homeless veterans may receive supportive services by enhancing the successful grant and per diem program. Although this program offers critical support to many community providers leading the charge to care for homeless veterans, too many providers are arbitrarily excluded. P.L. 111-163 allows VA greater flexibility to support more providers and ensure they have the resources they need to care for America's homeless veterans. For veterans struggling without a roof over their heads, this small change in the law will make a big difference in their lives.

The Veterans' Mental Health Care and Other Care Improvements Act of 2008 (P.L.110-387) S. 2162 was signed into law on October 10, 2008. The legislation focuses greater attention on preventing homelessness and providing increased services for veterans experiencing homelessness. The bill expands and extends a valuable joint VA and Department of Labor program of referral and counseling services, ensures that the VA domiciliary program is capable of meeting the needs of the growing female veteran population, and provides necessary support to low-income veteran families that have made the transition to permanent housing. The bill also authorizes a funding increase of \$150 million for homelessness programs.

- The Veterans' Benefits Improvement Act of 2008 revamped the VA home loan program by enabling more veterans to refinance their existing high-risk loans with VA loans.
- For many of our returning service members and veterans, the stress of deployment is still prevalent when they return home. Congress provided these heroes with not only the necessary time to readjust, but also ensured they have the opportunity to do this in the comfort and security of their own home.
- The number of homeless veterans today is atrocious and a national disgrace. There is much more that needs to be done to support our veterans as they transition from the battlefield back into their communities.