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## **U.S. HOUSE OF REPRESENTATIVES**

## **Committee on Veterans' Affairs**

# **OVERSIGHT PLAN FOR 107<sup>th</sup> CONGRESS**

Subcommittee on Health Subcommittee on Benefits Subcommittee on Oversight and Investigations

In accordance with clause 2(d)(1) of Rule X of the House of Representatives, the Committee on Veterans' Affairs has adopted by resolution of February 14, 2001, its oversight plan for the 107<sup>th</sup> Congress.

This oversight plan is directed at those matters most in need of oversight within the next two years. The Committee is cognizant of the requirement that it conduct oversight on all significant laws, programs, or agencies within its jurisdiction at least every ten years. To ensure coordination and cooperation with the other House committees having jurisdiction over the same or related laws affecting veterans, the Committee will consult as necessary with the Committee on Armed Services, the Committee on Education and the Workforce, and the Committee on Government Reform.

Oversight will be accomplished through committee and subcommittee hearings, field and site visits by Members and staff, and meetings and correspondence with interested parties. Methods of oversight will include existing and requested reports, studies, estimates, investigations and audits by the Congressional Research Service, the Congressional Budget Office, the General Accounting Office, and the Offices of the Inspectors General of the Departments of Veterans Affairs and Labor.

The Committee will seek the views of veterans' service organizations, military associations, other interest groups and private citizens. The Committee also welcomes communications from any individuals and organizations desiring to bring matters to its attention. A series of joint hearings is scheduled with the Senate Committee on Veterans Affairs at which veterans' service organizations and military associations will present to the committees their national resolutions and agendas for veterans.

While this oversight plan describes the foreseeable areas in which the Committee expects to conduct oversight during the 107<sup>th</sup> Congress, the Committee and its subcommittees will undertake additional oversight activities as the need arises.

Because the Committee generally conducts oversight through its subcommittees, the plan is organized by subcommittee.

#### Subcommittee on Health

- 1. Veterans Equitable Resource Allocation (VERA) System. The Veterans Health Administration (VHA) adopted this system of allocating funds to its field health activities in April 1997, but this year the Under Secretary for Health approved special dispensations of more than \$220 million from a national reserve for contingencies to restore some under-funded networks. The Subcommittee will review the operation and effectiveness of VERA.
- 2. Maintaining Capacity of Programs for Special Disabilities and Long-Term Care. Public Law 104-262, the Veterans' Health Care Eligibility Reform Act of 1996, requires VA to maintain specialized capacities to care for veterans. By law, VA provides a report to Congress each year to indicate the stasis of these capacities. The next report, in April, adds capacity for VA's long-term care programs. The Subcommittee intends to carefully monitor and evaluate VA's capacities to meet high-priority, specialized needs of veterans.
- 3. Hepatitis C (HCV) Programs. The VA health care system reports that it is currently treating 70,000 veterans who have tested positive for HCV. The Subcommittee will examine VA's response to the growing incidence of HCV infection among the population treated by VA and the consequential rise in demand for treatment. We will assess VA's research approach to exploring the etiology of HCV; VA's use of clinical therapies; and methods by which VA allocates and monitors HCV funding.
- 4. **Mental Health and Substance-Use Disorder Programs.** Reported reductions in capacity in VA programs to care for the most seriously mentally ill veterans, especially those with psychoses and with substance-use disorders, are of particular concern. The Subcommittee will explore the state of VA's mental health programs and the effectiveness of chronic mental illness treatment programs in VA's institutional, contract, community-based, case-management and aftercare programs.
- 5. Rural Health Care Matters. The Committee is concerned about the health of veterans who live in rural and remote regions, particularly whether they have adequate access to VA health care and services. The emergence of VA telemedicine holds promise to extend VA services beyond major VA medical centers. The Subcommittee will examine the role of telemedicine in VA's efforts in rural care. Also, VA has promoted improved access through its community-based clinics, primary care outlets now numbering in the hundreds. The Subcommittee will explore these clinics' geographic distribution to determine if VA has adequately responded to rural veterans' needs, including exploration of the availability of mental health services in VA's outreach efforts in rural areas.
- 6. Women Veterans' Programs. An Advisory Committee on Women Veterans was established in 1983 under Public Law 98-160 to assess the health care, outreach, and benefits needs of women and make recommendations to the Secretary of Veterans Affairs and Congress. VA medical centers have been mandated to designate women veterans' coordinators, in addition to providing specialized services and outreach. A recent report to the Under Secretary for Health identified the lack of privacy and gender-specific accommodations for women in VA facilities. The Subcommittee will continue to review VA policies and programs for women veterans.
- 7. **Follow-up on Millennium Act.** Public Law 106-117, the Veterans Millenium Health Care and Benefits Act, was the most significant health care legislation Congress has enacted for veterans in a number of years. The Subcommittee will pay close attention to the steps VA must take to comply fully with its mandates.

The Subcommittee is especially concerned about the implementation of new copayment policy and its impact on poor and disabled veterans. Therefore, the Subcommittee will review VA's copayment plan.

- 8. **Follow-up on Recent Personnel Legislation.** Congress passed significant changes in VA practitioner pay systems and methods during the 106th Congress in Public Law 106-419, the Veterans Health Care Personnel and Benefits Act of 2000. The Subcommittee will examine VA's implementation of these changes.
- 9. Scarce Medical Specialty Contracting. The Subcommittee is concerned about the services of various medical specialties obtained through government contracts. Some of these contracts are very expensive. The Subcommittee will explore VA's options in obtaining such services in a cost-effective manner, including consideration of title 38 employment authority rather than contract arrangements.
- 10. VA and DoD Health Resources Sharing. Authorized under Public Law 97-174, the VA-DoD health resources sharing program has been in existence for nearly twenty years. Yet, oversight by the Subcommittees on Health and Oversight and Investigations has revealed that barriers to sharing still exist in the organizational cultures of VA and DoD. The GAO reported to the Committee that VA and DoD efforts to consolidate procurement of drugs and biologicals could save the federal government hundreds of millions of dollars. Also, the Congressional Commission on Servicemembers and Veterans Transition Assistance made a number of recommendations in 1999 for increased sharing in these federal health programs. The Subcommittee intends to continue its oversight of VA-DoD resource sharing to encourage more effective use of funding for veterans and military health care.
- 11. VA Nonprofit Research Corporations. Public Law 100-322 authorized the establishment of nonprofit research corporations at VA medical centers to advance their research mission. VA is required to report to Congress on an annual basis the activities of these corporations. The Subcommittees on Health and on Oversight and Investigations will conduct joint oversight of them to ensure that they are effective and that their operations are consistent with Congressional intent.
- 12. **Status of VA Medical Research.** VA medical research in collaborative affiliations with the Nation's schools of medicine has been remarkably successful in curing human disease and advancing biomedicine. The Subcommittees on Health and on Oversight and Investigations have monitored VA research for a number of years and have recently observed some lapses in human-subject protections, inadequate management systems and other problems. VA has made a commitment to improve its performance. The Subcommittee will continue to review the progress in carrying out this major mission of the Department.
- 13. Adequacy of CHAMPVA Benefits. In Public Law 106-398, the Floyd Spence Armed Forces Reauthorization Act of 2000, Congress enacted a sweeping reform of military health care programs. However, the Civilian Health and Medical Program-Veterans Affairs (CHAMPVA) continues to offer health care benefits to eligible family members of veterans under the previous CHAMPUS/TRICARE criteria, with significant limitations and considerable costsharing. The Subcommittee will consider the adequacy of this benefit for CHAMPVA beneficiaries compared to the restructured military health care programs.
- 14. Infrastructure Maintenance in VA Health Care. The VA health care system

- capital asset planning process, known as Capital Assets Restructuring for Enhanced Services (CARES), will consume several years of effort. In the meantime, the Subcommittee is concerned about the medical facilities that CARES may not address. Many need maintenance, repair and upgrading. The Subcommittee will review these needs.
- 15. Waiting Times for Outpatient Care. The Committee's chairman and ranking member during the 106<sup>th</sup> Congress requested a series of reports from the General Accounting Office on the amount of time veterans must wait until they receive an appointment for routine or specialty care in VA outpatient clinics. GAO has questioned the value of some of the initiatives for which VA requested funding in FY 2001 and also raised concerns about data used to assess waiting times in VA. The Subcommittee will continue to evaluate factors that exacerbate waiting times and the efficacy of strategies underway to reduce waiting times in VA.

#### Subcommittee on Benefits

- 1. Accuracy and Timeliness of Claims Decisions. VA provides over \$20 billion a year in disability compensation and pension benefits to more than 2.5 million veterans and survivors. Public Law 106-117 required the VA to implement a quality assurance program for programs administered by the Veterans Benefits Administration. Reports by the General Accounting Office and VA's Inspector General have analyzed longstanding problems with the timeliness of claims adjudication. A hearing will examine issues of quality and timeliness in the claims adjudication process, to include veterans' appeals of VA claims decisions.
- 2. Claims Adjudication Commission Recommendations. The 1996 report of the Veterans' Claims Adjudication Commission recommended that VA and veterans service organizations establish a formal claims processing partnership group, develop case management practices and consider a lump sum payment of these benefits. A hearing will examine VA's progress in partnership initiatives and case management, and explore the issue of lump sum payments of disability compensation benefits.
- 3. Long-Term Issues in Claims Processing. The Veterans Benefits Administration has developed a number of initiatives designed to improve the processing of claims. These include computerized training programs, rating board adjudication revisions, telephone improvements and revised notices. In addition, the Veterans Claims Assistance Act, Public Law 106-475, mandates a number of changes in claims processing. A hearing will review these issues.
- 4. **Persian Gulf War Veterans.** The Institute of Medicine of the National Academy of Sciences and the RAND National Defense Research Institute have released reports concerning the health of Gulf War veterans. The Subcommittee will conduct a joint hearing with the Subcommittee on Health to review these and other research findings.
- 5. Veterans Entrepreneurship Opportunities. Veterans should be accorded a full opportunity to participate in the economic system that their service sustains. In conjunction with the House Small Business Committee, the Subcommittee on Benefits will conduct its second oversight hearing on the Small Business Administration and federal government-wide implementation of the Public Law 106-50, the Veterans Entrepreneurship and Small Business Development Act of 1999. A hearing will focus efforts on the business development and technical, financial, and procurement assistance aspects of the law.

- 6. Military Occupational Specialties Requiring Civilian Licensing, Certification or Apprenticeship. The civilian employment sector increasingly relies on various forms of credentialing and licensing to regulate entry into an occupation or profession. The Subcommittee on Benefits held two hearings on this issue in the 106<sup>th</sup> Congress. A hearing will continue to examine the role of the Departments of Veterans Affairs, Labor, and Defense in helping separating servicemembers and veterans meet credentialing requirements.
- 7. National Personnel Records Center (NPRC). NPRC, located in St. Louis, MO, is the records center for all military service documents. Understaffing and minimal technological equipment appear to contribute to a growing backlog of requests for information, thus delaying the processing of veterans' claims. Following an onsite visit by VA Committee Members and staff, a hearing will address what efforts are needed to improve the processing of requests for medical and separation information.
- 8. **National Cemetery Administration (NCA)**. Public Law 106-117 required VA to determine those geographic areas most in need of a new national cemetery. Following receipt by Congress of the report, a hearing will examine the areas NCA deems most in need of a national cemetery.
- 9. Burial Benefits. Public Law 106-117 required VA to enter into a contract to independently examine the adequacy and effectiveness of the current burial benefits administered by VA. Currently, there is no provision in title 38, United States Code, requiring the Secretary of Veterans Affairs to conduct periodic assessments of the burial benefits program. A hearing to receive the report and review the recommendations will inform the Committee how the program could better serve the burial needs of veterans and their families.

### Subcommittee on Oversight and Investigations

- 1. Inappropriate Benefits Payments. VA Office of Inspector General (OIG) audits indicate that the Veterans Benefits Administration (VBA) should develop and implement effective methods to identify inappropriate compensation and pension payments. Additionally, coordination between VA, the Defense Manpower Data Center, and local National Guard and Reserve units continues to be problematical in achieving accurate and timely payments under the Selected Reserve provisions of the Montgomery GI Bill. The Subcommittee will review VBA's efforts to implement procedures to timely identify deceased beneficiaries and terminate their compensation and pension benefits in order to reduce overpayments. Further, the Subcommittee will examine coordination issues associated with selected reserve educational assistance payments under the MGIB.
- 2. VBA Internal Fraud Controls. VA OIG criminal investigations have exposed several instances where VBA employees established fraudulent disability compensation claims and stole more than a million dollars of government funds. The OIG is currently investigating more than a hundred similar fraud cases within VBA. As a part of continuing oversight, the Subcommittee has requested VBA study internal control and security measures used by private sector companies. The Subcommittee will monitor VBA's efforts to improve internal controls and security.
- 3. **Disability Claims Processing**. VA has outlined what it is doing to improve processing of veterans disability claims, but GAO has stated concerns that VA's existing plans may not be adequate. The Subcommittee has requested that VBA gather information from private sector companies regarding information technology and best practices to streamline processing of claims. In conjunction

with the Subcommittee on Benefits, the Subcommittee will continue review of VBA implementation of plans to improve timeliness and accuracy of veterans claims processing.

- 4. Veterans Employment and Training Service (VETS). The Subcommittee will continue its oversight of this Department of Labor program. In prior testimony, GAO stated that VETS lacks a clear vision for the future and has no strategy to conform its operations to the Workforce Investment Act. GAO is performing a detailed study of VETS and will submit a report to Congress in September 2001. This report will be the subject of an oversight hearing. The Subcommittee will determine what progress VETS has made in improving its service to veterans.
- 5. **Veterans Preference**. Veterans who are disabled or who served during certain periods have preference in federal jobs. The U.S. Government should be a model employer of veterans. The Subcommittee will examine the federal observance and enforcement of veterans preference.
- 6. **Benefits Delivery at Discharge**. To improve the transition of servicemembers to civilian life, VA has stepped up its outreach and services to active duty servicemembers before they are discharged. Subcommittee oversight of benefits delivery at discharge will include the extent to which DoD provides VA timely notice of medical discharges. The Subcommittee will also examine the timeliness of entry by veterans into VA's vocational rehabilitation program and the VA's coordination with VETS for job placement.
- 7. **Faith-Based and Other Nonprofit Programs for Homeless Veterans**. The Subcommittee will continue to examine the success rates of faith-based and other nonprofit homeless programs, as well as the development of performance measures for homeless veterans programs. The Subcommittee will further examine whether such faith-based and other nonprofit programs are awarded federal grants on an equitable basis.
- 8. Federal Employees' Compensation Program in VA. The Subcommittee will follow-up its previous oversight hearing during the 106<sup>th</sup> Congress. The Subcommittee will examine the manner in which workers' compensation claims of VA employees are processed as compared with other public and private sector organizations.
- 9. Information Technology. VA's information technology programs will spend over \$1.4 billion in fiscal year 2001. The Subcommittee will continue to review the role of VA's Chief Information Officer and VA's Capital Investment Board in the procurement and management of its IT programs. The Subcommittee will also review VA's progress in IT programs, including: developing a VA-wide data architecture, improving computer security, utilizing VHA's Decision Support System, processing claims with the VETSNET project, and developing the government computerized patient record.
- 10. **Patient Safety**. The VA health care system has established an adverse medical event incident reporting system in response to the Institute of Medicine's report last year on medical errors and continuing reports of serious lapses in the delivery of quality health care in the VA. The Subcommittee will continue to monitor and review VA's progress in identifying, reporting and correcting adverse medical events.
- 11. Capital Asset Realignment for Enhanced Services (CARES). The Subcommittee in conjunction with the Subcommittee on Health will continue to review VA's long-term strategy and current efforts to modernize the VA health

- care delivery system's vast infrastructure. The Subcommittees will examine opportunities for DoD and VA to participate in joint delivery of health care to the men and women who serve or have served in uniform and their family members. The Subcommittee will also examine the VA's plans for addressing the future use of many VA buildings that are functionally obsolete, but have historic significance.
- 12. Civilian Health and Medical Programs of the Department of Veterans Affairs (CHAMPVA). In fiscal year 2000, there were approximately 101,500 beneficiaries of the CHAMPVA program who generated over 1.6 million medical claims. Annual program expenditures were in excess of \$13.4 million and claims totaling \$122.9 million. In conjunction with the Subcommittee on Health, the Subcommittee will review of effectiveness and current requirements of this program.
- 13. **Medical Care Collections Fund.** In fiscal year 2000, VHA carried forward \$1.3 billion in the Medical Care Collections Fund, two-year obligations and equipment funds. Yet individual facilities and several of its health care networks experienced funding shortfalls. The Subcommittee will review VHA's utilization of health care funding, including over multiple fiscal years.
- 14. **VA Medical Research**. Subcommittee hearings in the 106<sup>th</sup> Congress revealed violations of federally established procedures for the protection of human subjects in VA medical research. The Subcommittee will review how VA has corrected these violations, particularly regarding informed consent and Institutional Review Board procedures.
- 15. VA Nonprofit Medical Research Corporations. Funds not appropriated to the Department of Veterans Affairs may be received and administered by a nonprofit corporation at any VA medical center. The Subcommittee will review the accountability of funds expended by such corporations on approved VA research.

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