The Honorable Nancy Pelosi Speaker of the House of Representatives Washington, DC 20515

## Madam Speaker:

We are writing to express grave concerns about H.R. 3200, America's Affordable Health Choices Act of 2009. As currently drafted, we would oppose this legislation because it could limit the health care choices for veterans, increase the cost of health care for veterans, deny coverage to dependents family members of veterans, and threaten the quality of health care offered to veterans through the VA health care system.

As you know, the Veterans Health Administration (VHA) provides medical care services to its 8 million enrolled veterans at more than 1,400 medical centers, outpatient clinics and other points of service. With over 200,000 employees, the VHA runs the largest integrated health care system in the United States, and over the past decade the quality of care provided has risen to amongst the finest health care systems in the nation. Unfortunately, as currently drafted, H.R. 3200 fails to adequately recognize, protect or preserve this invaluable system for our nation's 24 million veterans.

By virtue of their service and sacrifices, veterans have earned special benefits that are separate and in addition to benefits the government provides to other citizens. Enrollment in VA health care, especially in the case of service-connected disabled veterans, should never become a bar or obstacle to the receipt of benefits that non-veteran citizens receive in this or any other bill. Any national health reform legislation must make certain that all veterans, including all of those enrolled in VA health care, remain eligible to enroll in any Exchange-participating health benefits plan offered under H.R. 3200 through the Health Insurance Exchange, or in any other public or cooperative health insurance program.

The VHA provides a uniform medical benefits package to all enrolled veterans, regardless of their enrollment priority group, that emphasizes preventive and primary care, and offers a full range of outpatient and inpatient services and prescription medications. Accordingly, enrollment in the VHA health care program must be considered acceptable coverage in the same manner as members of the uniformed services and their dependents, including Civilian Health and Medical Program of the VA (CHAMPVA) coverage furnished under section 1781 of title 38 United States Code, so that they will not be subject to any tax or penalty for lack of health care coverage.

Furthermore, with limited exception, the VA health care program generally does not provide services to dependents and families. As such, health reform legislation must also make clear that

<sup>&</sup>lt;sup>1</sup> CHAMPVA, CHAMPVA CITI); Spina Bifida Program; Children of Women Vietnam Veterans; TRICARE

Speaker Nancy Pelosi July 30, 2009 Page 2

a veteran's spouse and children should also be eligible to enroll in any Exchange-participating health benefits plan offered through the Health Insurance Exchange, or in any other public or cooperative health insurance program.

Finally, it is imperative that H.R. 3200, or any other health care reform legislation considered in Congress, must make clear that the health care system of the Department of Veterans Affairs shall be run by the Secretary of Veterans Affairs to meet the health care needs of veterans, dependents and survivors, and that this authority shall not be infringed by any national health care organizations or any other departments, agencies or independent organizations of the federal government.

Madame Speaker, on behalf of the millions of veterans we represent, and for the benefit of the 24 million veterans living today and the millions more future veterans, we urge you and your colleagues to amend and clarify the current draft language in H.R. 3200 to protect the health care of our veterans. Unless the changes and clarifications discussed above are made in the legislation, we will oppose H.R. 3200 or any other legislation that threatens the health care for our nation's veterans.

Respectfully,

RAYMOND C. KELLEY
National Legislative Director
AMVETS (American Veterans)

JOSEPH A. VIOLANTE National Legislative Director Disabled American Veterans

HERSHEL GOBER
National Legislative Director
Military Order of the Purple Heart
of the USA, Inc.

THOMAS ZAMPIERI

Director of Government Relations Blinded Veterans Association

HERB ROSENBLEETH
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RICHARD F. WEIDMAN

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July 30, 2009

Honorable Henry Waxman, Chairman Committee on Energy and Commerce U.S. House of Representatives 2125 Rayburn House Office Building Washington, DC 20515-6115

Dear Chairman Waxman:

The American Legion is deeply concerned with veterans' related issues within HR 3200:

- Penalty Tax for failure to enroll in an "acceptable" health insurance;
- Disincentive for employers to hire members of the Reserve components:
- Multiple health care options;
- Independence of the Departments of Defense's (DoD's) and Veterans Affairs' (VA's)
  health care systems;
- Third-party reimbursements for treatment of nonservice-connection conditions; and
- Penalty Tax on Reserve components Federalized or activated by the Governor.

The American Legion firmly believes VA provides "the best care anywhere" and is the role model for other health care providers to emulate. It is inconceivable under any conditions that VA health care would be considered "unacceptable" health care coverage and that VA beneficiaries would be subject to a penalty tax for choosing VA as their health care provider of choice.

The American Legion is concerned with the provision that would require all employers to provide health insurance for their workers at all times and the adverse impact it may have on the hiring of members of the Reserve components. Employers should receive a Federal tax credit for maintaining coverage of any Reserve components' service members Federalized or called to active-duty by the Governor.

The American Legion fully supports allowing veterans eligible for multiple health care coverage for themselves and their immediate family members be authorized to seek maximum coverage without penalty or exemption. Just because a veteran is eligible to enroll in VA should not prohibit enrollment in TRICARE, Medicare or any other Federal health care coverage for which he or she is qualified to receive.

The American Legion believes DoD's and VA's health care delivery systems should be excluded from the National Health Care debate as both are earned benefits due to the veteran's honorable military service.

The American Legion believes that all insurance providers should be obligated to reimburse VA "reasonable charges" for allowable medical treatment and care of beneficiaries enrolled in the VA's integrated health care delivery system.

Finally, The American Legion would oppose levying a 2.5 percent tax on members of the Reserve components who may have a "break in health insurance coverage" while transitioning from the civilian work force to active military service or from active military service to the civilian work force. Members of the Reserve component have little to no control over Federalization or active-duty service orders from their Governor.

Thank you again for your leadership on this issue and continued concern for military veterans and their families.

Sincerely,

Steve Robertson, Director

National Legislative Commission

## VETERANS OF, FOREIGN WARS OF THE UNITED STATES

## THE EXECUTIVE DIRECTOR

July 30, 2009

The Honorable Steve Buyer US House of Representatives 2230 Rayburn House Office Building Washington, DC 20515

Dear Congressman Buyer:

On behalf of the 2.1 million men and women of the Veterans of Foreign Wars of the U.S. and its Auxiliaries, I am writing to express our strong support for the amendments you intend to offer today to HR 3200, the 'America's Affordable Health Choices Act of 2009'. Your amendments address a number of our serious concerns with respect to the potentially harmful consequences this legislation poses to this nation's veterans as well as our men and women in uniform and their dependents.

Your amendments would ensure the veterans enrolled in VA Health Care would not be in danger of being penalized with a tax under HR 3200; that there would be no disencentive to employers hiring National Guard and Reserve members; that veterans and their families would retain the choice of maintaining both VA and other health insurance; that the Secretaries of Defense and VA would retain sole authority over their respective health care systems; VA would continue to be able to bill third-party insurers including any new public health insurance for non-service connected conditions; and articulates that National Guard and Reserve members should never be subject to a penalty tax as a result of their service.

We fully concur that the dedication and sacrifice brought to the defense of our nation by our active duty service members and veterans compels an equal measure of commitment to our honoring this nation's solemn obligation to provide them with the best medical care possible. We salute you for standing up for what's right for America's veterans and our military personnel.

Robert E. Wallace

Executive Director



Serving WITH PRIDE



AMVETS

NATIONAL HEADQUARTERS 4647 Forbes Boulevard Lanham, Maryland 20706-4380 TELEPHONE: 301-459-9600 FAX: 301-459-7924 E-MAIL: amvets@amvets.org July 17, 2009

The Honorable Steve Buyer Ranking Member House Committee on Veterans Affairs 333 Cannon House Office Building Washington, D.C. 20515

Dear Ranking Member Buyer:

On behalf of AMVETS (American Veterans) I would like to express our concerns with portions of HR 3200 "The American Health Choices Act." There are several sections within this Act that could adversely affect veterans but two sections leave us with great concern. First, is the eligibility criteria for "acceptable health care coverage" under Section 401, Subpart A, Section 59B(d)(F). This section should be better defined to express which veterans under chapter 1705 of title 38 U.S.C. will be considered as having acceptable coverage. As currently defined, at worst, all veterans' care could be unacceptable coverage by using the criteria of Section 122 of this Act to define acceptability. Currently, VA does not meet the last two criteria: maternity care and well baby and well child care and oral health, vision, and hearing services, equipment, and supplies at least for children under 21 years of age.

Secondly, there is no explanation under Section 202 of this Act on the eligibility of dependents to access the Exchange if the head of the household is covered by a health care benefit in which the family does not qualify. This could lead to dependents of veterans not qualifying for the Exchange because the veteran has acceptable coverage. AMVETS needs assurances that in these cases, dependents will still qualify for the Exchange.

AMVETS strongly believes these issues should be clarified prior to the House of Representatives' vote on this Act. Without a clear understanding of which veterans qualify as having acceptable coverage prior to enactment and providing provisions so dependents of veterans who have acceptable VA health care can access the Exchange, many veterans could be unknowingly taxed for not having coverage or taxed because of a loophole that will prevent dependants of veterans from accessing the Exchange.

Your timely approach to this matter is greatly needed and AMVETS stands behind you in your effort to enact these changes. And as always, thank you for your leadership and commitment to America's veterans and their families.

Veterans Serving Veterans,

John "Chad" Hapner

National Commander, AMVETS



July 30, 2009

The Honorable Steve Buyer United States House of Representatives Washington, D.C. 20515

## Dear Representative Buyer:

As the Committee on Energy and Commerce moves forward with HR 3200, America's Affordable Health Choices Act, it is critical that the Committee's deliberations take careful account of the impact provisions of that legislation could have on wounded warriors and their families, and on the health care systems on which they depend. We share your concern that this complex legislation could have a harmful, unintended impact on some wounded warriors and their families, and offer our support for your targeted efforts to avert such problems.

Of particular concern, provisions of the bill would place many veterans in an anomalous position regarding needed health care. Under the bill, individuals would be subject to a tax penalty unless they have "acceptable coverage." In defining that term, section 202 of the bill would provide that coverage under the veterans' health program would be considered "acceptable coverage," but only if the coverage for the individual involved is determined to be acceptable by the Commissioner in coordination with the Secretary of Treasury, "based on the individual's priority for service as provided under section 1705(a) of such title." Section 202 also provides that all individuals are eligible to obtain coverage through an enrollment in a health plan through the Health Insurance Exchange unless enrolled in another qualified plan or other acceptable coverage. These provisions would pose grave difficulty for many veterans. A veteran who is service-connected for PTSD, for example, and who has a high priority for VA enrollment under section 1705 of title 38, US Code, by virtue of that disability, should certainly have the option of getting specialized VA mental health care - care that might require travel to a distant VA medical center. But that veteran's enrollment with VA - likely deemed "acceptable coverage" under the bill - should not foreclose the option of obtaining routine care in his or her community by electing health coverage available to any non-veteran through a health-exchange. Similarly, a veteran who might enroll for VA care, but whose lower priority under section 1705 might not be deemed "acceptable coverage" should not face the untenable choice of purchasing additional unneeded health coverage or paying a 2% tax penalty.

We strongly support your efforts to ensure that veterans and service-members are not penalized under this legislation by virtue of their service to their country. In that regard, we

share your concern that the bill not inadvertently create disincentives for employers to hire members of the National Guard and Reserves. Rather than allow health-policy objectives to create new barriers to employment of wounded warriors, we should be fostering their economic empowerment.

Thank you for your leadership on these issues.

Sincerely,

Steve Nardizzi

**Executive Director** 

Steven Navidin

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July 30, 2009

Honorable Steve Buyer Ranking Member House Committee on Veterans' Affairs 333 Cannon House Office Building Washington, DC 20515

Dear Representative Buyer:

On behalf of the Paralyzed Veterans of America, I write in support of your amendments to H.R. 3200, a bill to provide affordable, quality health care for all Americans and reduce the growth in health care spending. Your amendments, if accepted, will provide safeguards to veterans, active duty military personnel, including members of the Guard and Reserves, and their families to accessing care in both the veterans and military health care systems while affording them the options that will be provided other Americans.

The veterans and military health care systems currently in place have been designed to address the unique needs of active duty service members and those who have served in the past. Your amendments will ensure continued access to these systems and at the same time make available to these individuals access to the new, broader health care system the bill envisions.

For the members of Paralyzed Veterans of America, the Department of Veterans Affairs health care system offers an unparalleled program of spinal cord injury treatment and care. Your amendments will assure our members of continued access to this care and provides them the additional flexibility of being able to obtain other coverage through private providers or the exchange for both their personal and family health care needs.

Thank you for your support of our nation's veterans and active duty military personnel and working to ensure that the full range of their individual care and their family's health care needs are addressed.

Sincerely,

Carl Blake

National Legislative Director Paralyzed Veterans of America

Carl Blake