

HVAC Pending Legislation

Jun 21, 2023

Statement of

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For the Record

United States House of Representatives
Committee on Veterans' Affairs
Subcommittee on Health

With Respect To

Pending Legislation

Washington, D.C.

Chairwoman Miller-Meeks, Ranking Member Brownley, and members of the subcommittee, on behalf of the men and women of the Veterans of Foreign Wars of the United States (VFW) and its Auxiliary, thank you for the opportunity to provide our remarks on these important pieces of legislation pending before this subcommittee.

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H.R. 1182, Veterans Serving Veterans Act of 2023

The VFW supports this legislation that would amend the *VA Choice and Quality Employment Act of 2017* (P.L. 115-46) to direct the Secretary of Veterans Affairs (VA) to establish a vacancy database to facilitate the recruitment of certain members of the armed forces to satisfy the occupational needs of VA, and to establish and implement a training and certification program for intermediate care technicians. The VFW recognizes the skill sets that veterans obtain from their time in service and the need for those skills in our workforce. Providing training and certifications would help veterans obtain employment, and also aid VA with hiring the qualified employees it desperately needs to fill its vacancies. This would be beneficial to both transitioning service members and to veterans receiving care at VA facilities.

H.R. 1278, DRIVE Act

The VFW supports this legislation that would increase the rate of reimbursement payments provided by VA for beneficiary travel. The VFW agrees that beneficiary travel rates should be at least equal to those for government employees. The inflation of automotive fuel cost has made it more financially difficult for veterans to travel to their appointments. Prices have risen but the travel beneficiary has remained the same, causing hardship for some veterans. This proposed increase would equalize VA with all other government agencies. Veterans should receive reimbursement payments at a rate that enables them to afford the cost of travel to health care appointments.

H.R. 1639, VA Zero Suicide Demonstration Project Act of 2023

The VFW supports this legislation that would establish the Zero Suicide Initiative pilot program of VA. Reducing the number of service members and veterans who die by suicide has been a priority for the VFW and will remain so until it is no longer needed. This multi-layered approach consists of continuous suicide screening at all health care touchpoints, creating a crisis plan, and maintaining consistent communication with veterans. Removing the stigma of discussing suicide and fostering healthy conversation will help in reaching the goal of zero suicides. The Veterans Health Administration has the opportunity to support all VA providers with the tools and knowledge to screen their patients for suicide at every appointment.

H.R. 1774, VA Emergency Transportation Act

The VFW supports this legislation to reimburse a veteran for the reasonable cost of emergency medical transportation by a non-VA provider to a facility for emergency treatment, or from a non-VA facility to a VA or other federal facility for additional care. A veteran should not be burdened with the transportation cost component of receiving critical medical attention.

H.R. 1815, Expanding Veterans' Options for Long Term Care Act

The VFW supports this legislation that would require VA to carry out a three-year pilot program to assess the effectiveness of providing assisted living services to eligible veterans. Assisted living facilities are needed when a veteran does not require nursing home care but cannot live alone. This program would allow veterans to receive needed services without being financially responsible for the cost, thereby reducing or eliminating the burden on family members who may not be able to provide round-the-clock care. This option for long-term care has great potential for veterans to still have some independence while being cared for at facilities that are authorized and inspected by VA.

H.R. 2683, VA Flood Preparedness Act

The VFW knows this proposal has a worthy goal, but cannot support it at this time. The Ralph H. Johnson VA Medical Center is located in a highly flood-prone area that can cause life-threatening conditions for patients during flood emergencies, which of course is a major concern. However, VA's current authority to make contributions to local authorities was meant to help patients safely ingress and egress facilities. We believe making contributions to local authorities for major infrastructure work would be outside of the intent of Section 8108, Title 38, United States Code. Additionally, the VFW believes VA infrastructure is already underfunded and does not have sufficient personnel to oversee its own backlog of necessary infrastructure work. Rather than routing VA funds to local communities to combat the effects of rising sea levels, we recommend adding funds for the U.S. Army Corps of Engineers to incorporate this problem or to prioritize it in existing projects.

H.R. 2768, PFC Joseph P. Dwyer Peer Support Program Act

The VFW supports this legislation that would make grants to State and local entities to carry out

peer-to-peer mental health programs. The VFW recognizes that all veterans do not utilize VA facilities to obtain mental health services or the support of peer-to-peer specialists. This grant would enable eligible entities to establish peer-to-peer mental health programs for veterans. We understand there is a demand for more mental health services, and would particularly like to see additional services in rural areas.

H.R. 2818, Autonomy for Disabled Veterans Act

The VFW supports this legislation that would increase the amount paid by VA to veterans for medically necessary improvements and structural alterations furnished as part of home health services. As veterans age their mobility may decrease, which may make navigating their surroundings and accomplishing daily tasks increasingly difficult. Having a resource for improvements or alterations creates more accessible, safer homes, and better quality of life for these veterans.

H.R. 3520, Veteran Care Improvement Act of 2023

The VFW supports this legislation that would improve the provision of care and services under the Veterans Community Care Program of VA. We understand this program is essential as it provides services for veterans who live too far from a VA facility or in the event a requested appointment is not available in an acceptable timeframe. VA's focus should remain on how veterans can receive the care they need, whether it is inside or outside of its facilities.

Adapting a value-based health care model allows for a patient-centered system that aligns with VA's whole health care approach. Value-based care programs focus on prevention efforts to reduce illnesses and suicide, which is a top priority of VA. The VFW also supports the continuation of the Electronic Health Record Modernization program as it is needed to work in conjunction with the value-based program.

The VFW agrees the ability to access the scheduling system would help improve the timeliness of appointments and/or allow veterans to obtain care at non-VA facilities. Medical record documentation needs a timely return to allow VA providers to access treatments received and determine if additional follow-up would be appropriate. The VFW understands the need for VA to explore a value-based reimbursement plan to determine and implement a more holistic system.

There are two parts of this proposal we believe should be clarified. Section 4 may provide contradictory guidance to patients or clinicians regarding a veteran's preference for care. Currently, if a veteran and the veteran's referring clinician agree that receiving care and services through a non-VA entity or provider would be in the best medical interests of the veteran, then the veteran is referred to community care. We are concerned this proposed section has the potential to allow for conflicts with the veteran's preference and the best medical interest of the veteran. We would like to see this clarified.

Additionally, the VFW questions if the telehealth provisions in Section 2 and Section 6 are in conflict with each other. Telehealth is a critical tool for VA to deliver care for veterans. Veterans should not have telehealth appointments scheduled for them if that is not their request or preference. However, we do believe they should be an option if appropriate to patients' wants and needs. We look forward to working with the committee to ensure the best outcomes are available for veterans.

H.R. 3581, Caregiver Outreach and Program Enhancement (COPE) Act

The VFW supports this legislation that would modify the family caregiver program of VA to include services related to mental health and neurological disorders. However, we would like clarification on the neurological disorders referred to in this bill. Caring for our nation's veterans is not an easy task. The diverse and often complex issues our veterans face require the care and support of well-trained caregivers. Balancing everyday life with the health care needs of a veteran can cause mental, emotional, and physical distress for the caregiver. The VFW believes that caregivers need support to ensure they are healthy enough to be of service.

Chairwoman Miller-Meeks, Ranking Member Brownley, this concludes my testimony. I am prepared to answer any questions you or the subcommittee members may have.

Information Required by Rule XI2(g)(4) of the House of Representatives

Pursuant to Rule XI2(g)(4) of the House of Representatives, the VFW has not received any federal grants in Fiscal Year 2023, nor has it received any federal grants in the two previous Fiscal Years.

The VFW has not received payments or contracts from any foreign governments in the

current year or preceding two calendar years.