

Statement of the Fleet Reserve Association on its 2014 Legislative Goals

Presented to the:

U.S. House of Representatives and United States Senate Veterans' Affairs Committees

By

Virgil P. Courneya National President Fleet Reserve Association

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# The FRA

This year the Fleet Reserve Association (FRA) will celebrate its 90th anniversary on November 11. It is the oldest and largest organization serving enlisted men and women in the active, Reserve, and retired communities plus veterans of the Navy, Marine Corps, and Coast Guard. The Association is Congressionally Chartered, recognized by the Department of Veterans Affairs (VA) and entrusted to serve all veterans who seek its help.

FRA was started in 1924 and its name is derived from the Navy's program for personnel transferring to the Fleet Reserve or Fleet Marine Corps Reserve after 20 or more years of active duty, but less than 30 years for retirement purposes. During the required period of service in the Fleet Reserve, assigned personnel earn retainer pay and are subject to recall by the Secretary of the Navy.

FRA testifies regularly before the House and Senate Veterans' Affairs Committees and, and the Association is actively involved in the Veterans Affairs Voluntary Services (VAVS) program. A member of the National Headquarters' staff serves as FRA's National Veterans Service Officer (NVSO) and as a representative on the VAVS National Advisory Committee (NAC). FRA's NVSO also oversees the Association's Veterans Service Officer Program and represents veterans throughout the claims process and before the Board of Veteran's Appeals. FRA Shipmates and members of the Auxiliary provide many volunteer hours of support at VA facilities throughout the country, enabling FRA to achieve VAVS "Associate Service Member" status.

FRA became a member of the Veterans Day National Committee in August 2007, joining 24 other nationally recognized Veterans Service Organizations (VSO) on this important committee that coordinates National Veterans' Day ceremonies at Arlington National Cemetery. The Association is a leading organization in The Military Coalition (TMC), a group of 33 nationally recognized military and veteran's organizations collectively representing the concerns of over five million members. FRA senior staff members also serve in a number of TMC leadership positions.

The Association's motto is "Loyalty, Protection, and Service."

# Certification of Non-Receipt Of Federal Funds

Pursuant to the requirements of House Rule XI, the Fleet Reserve Association has received no federal grant or contract during the current fiscal year or either of the two previous fiscal years.

#### Introduction

Distinguished Chairmen, Ranking Members and other members of the Committees, thank you for the opportunity to present the Association's 2014 legislative goals. Before addressing specific issues, it's important to note that veteran's benefits are earned through service and sacrifice in the defense of this great Nation and are unlike other entitlements or benefits programs.

## **Two Year Funding for VA**

FRA supports extending VA advance appropriations authority to all VA discretionary and mandatory accounts. If last year's government shutdown would have continued past October 16, 2013 the Department of Veterans Affairs (VA) would have furloughed more than 7,000 VA employees in the Veterans Benefit Administration (VBA) and more than 2,700 Office of Information Technology (OIT). These furloughs would have resulted in development of VA software ceasing, including work on the Veterans Benefits Management System (VBMS), the system critically important to reducing the backlog of disability claims. Access to VBA facilities for VSOs with office space was also suspended. The Association's recent (February 2014) online survey of veterans indicates that 85 percent are "Very Concerned" about the need for two-year funding to avoid problems caused by government shutdown.

That is why FRA is supporting the "Putting Veterans Funding First Act." This act would require Congress to fully fund the VA budget a year ahead of schedule by providing two-fiscal year budget authority, ensuring that all VA services will have timely, predictable funding in an era when continuing resolutions and threats of government shutdowns are all too frequent. Rep. Jeff Miller (Fla.), chairman of the House Veterans Affairs Committee (HVAC), is sponsoring the House bill (H.R. 813) that has been approved by the committee and is awaiting action on the House floor. The Senate companion bill (S. 932), sponsored by Senator Mark Begich (Alaska), is awaiting action in the Senate Veterans Affairs Committee. In addition Senator Bernie Sanders is sponsoring legislation S. 944 and S. 1982 that includes two-year funding for VA too.

FRA believes that America's veterans should not be held responsible for Washington's inability to reach an agreement on spending. Our veterans were there for us when we needed them the most, and the Putting Veterans Funding First Act will ensure they have our support during their times of need.

Currently, Congress provides advanced funding for the VA's health care programs as a result of FRA-supported legislation enacted in 2009 (P. L. 81-111). Providing that the remainder of the discretionary budget up front would make it easier for the VA to plan for key investments in information technology, claims processing and construction projects. The recent government shutdown demonstrated the need for two-year funding for the entire VA.

## FY 2015 Budget

FRA supports the recommendations of the FY 2015 Independent Budget (IB) which was recently released by AMVETS, Disabled American Veterans (DAV), Paralyzed Veterans of America (PVA) and the Veterans of Foreign Wars (VFW). The IB has served as a guide for funding the VA for 28 years and provides detailed VA budget analysis to meet the challenges of serving America's veterans. "Since FY 2000 the VA budget has tripled to \$148 billion in this current

fiscal year."<sup>1</sup> The Association's recent (February 2014) online survey indicates that 82 percent of veterans are "Very Concerned" about future budget cuts. FRA acknowledges that the VA budget has increased by 40 percent under this Administration but is disappointed that the Administration's budget request for FY 2015 for health care (VHA) is \$2.3 billion less than that proposed by the FY 2015 Independent Budget (IB).

# **Disability Claims Backlog**

The President mentioned the claims disability backlog at his recent State of the Union Address in which he said - "As this time of war draws to a close, a new generation of heroes' return to civilian life we'll keep slashing that backlog so our veterans receive the benefits they've earned, and our wounded warriors receive the health care—including the mental health care—that they need. We'll keep working to help all our veterans translate their skills and leadership into jobs here at home. And we all continue to join forces to honor and support our remarkable military families." FRA agrees with the President. The Association views the enormous backlog of disability claims as a threat to the Nation's solemn commitment to properly care for disabled veterans. The cost of defending the Nation should include timely and adequate treatment of our wounded warriors. In FRA's recent (February 2014) online recent survey indicates that 80 percent of veterans see the disability claims backlog as "Very Important."

The Veterans Benefit Administration (VBA) claims that the number of pending claims has dropped by 175,000 and the number of pending claims pending more than 125 days has been reduced by 200,000. The most important improvement for processing claims more efficiently is the Veterans Benefits Management System (VBMS), a paperless system VBA uses to create electronic claims files, manage work flow, and determine disability ratings. Nearly all disability rating claims are now being processed electronically. Further VA implemented a policy of mandatory overtime for disability claims processors from May through November 2013. Another key factor in reducing the backlog is the focus on increasing the number of Fully Developed Claims (FDC). FDC consists of a complete application, all military and civilian medical treatment records, and relevant military records including the claimants DD 214. Claims submitted under the FDC program are currently processed on average within 115 days.

FRA continues to believe there is strong bipartisan support to further reform the system and lawmakers have made clear that they want to improve claims processing to eliminate bureaucratic delays and ensure more uniformity between branches of the military and the VA in how they rate disabilities. An effective delivery system is essential along with decisive and appropriate action to correct deficiencies and improve processes. That said, VA can promptly deliver benefits to veterans only if it has modern technology, adequate resources, sufficient personnel training and staffing.

# WOUNDED WARRIORS & SEAMLESS TRANSITION

FRA strongly supports the Administration's efforts to create an integrated Electronic Health Record (iEHR) for every service member which would be a major step towards the Association's long-standing goal of a truly seamless transition from military to veteran status for all service members and permit Department of Defense (DoD), VA, and private health care providers immediate access to a veteran's health data.

<sup>&</sup>lt;sup>1</sup> Wall Street Journal Feb. 10, 2014 page 4, Michael Phillips

The importance of fully implemented interoperability of electronic medical records cannot be overstated. FRA was deeply disappointed when VA and DoD jointly announced that the departments are abandoning plans to create a single electronic health record for active duty military and veterans. And FRA shares concerns expressed by many members of both committees that this could be viewed as a step backwards on this issue apparently due to budget pressures and higher costs. The Association was grateful that the FY 2014 National Defense Authorization Act (NDAA) has a provision that requires DoD and VA to implement a seamless electronic sharing of medical health care data by October 1, 2016.

There is some sharing now between DoD, VA and the private sector, but more needs to be done. Wider expansion of data sharing and exchange agreements between VA, DoD and the private sector is needed. VA's "Blue Button" initiative permits veteran's online access to some medical history, appointments, wellness reminders and military service information, but most is only accessible only after in-person authentication. VHA is also moving forward on its paperless processes that is Health Insurance Portability and Protection Act (HIPPA) compliant.

The Veterans Affairs and Armed Services Committees must remain vigilant regarding their oversight responsibilities associated with ensuring a "seamless transition" for our Nation's wounded warriors. In conjunction with this, FRA is concerned about shifting of departmental oversight from the Senior Oversight Committee (SOC) comprised of the DoD and VA secretaries per provisions of the FY 2009 National Defense Authorization Act, to the more lower echelon Joint Executive Council (JEC) which is now responsible for supervision, and coordination of all aspects of DoD and VA wounded warrior programs. This change is perceived by many as diminishing the importance of improving significant challenges faced by service members – particularly wounded warriors and their families – in transitioning from DoD to the VA.

Caregivers of veterans with catastrophic injuries assume formidable challenges, and VA must do all it can to assist the caregiver. FRA supports the "Caregivers Expansion and Improvement Act" (S. 851/H.R. 3383) sponsored by SVAC Chairman Sen. Bernie Sanders (Vt.) and Rep. Elizabeth Esty (Conn.) respectively that extends to all veterans with a serious service-connected injury eligibility to participate in the family caregiver services program. The program currently only applies to veterans that had serious service-connected injuries after September 11, 2001. The Association supports the "Comprehensive Veterans Health and Benefits and Military Retirement Pay Restoration Act" (S. 1982) sponsored by Sen. Sanders (Vt.) that also contains this important provision.

## MENTAL HEALTH/SUICIDE

FRA believes post-traumatic stress (PTS) should not be referred to as a "disorder." This terminology adds to the stigma of this condition, and the Association believes it is critical that the military and VA work to reduce the stigma associated with PTS and TBI. Access to quality mental health service is a vital priority, along with a better understanding of these conditions and improved care. "Roughly 20 percent of the 2.5 million men and women who served in Afghanistan and Iraq have PTSD or other mental ill. About 200,000 incarcerated veterans in the U.S., about 14% of the nation's prisoners. Contrary to public perception, Afghanistan and Iraq vets are only half as likely to be incarcerated as those who fought in earlier wars, but... suffer

from PTSD at three times the rate of older veterans." <sup>2</sup> PTS diagnosis and treatment remain a major challenge for the VA. "The number of veterans who received VA treatment for PTSD and other mental health issues reached 1.3 million last year, up 400,000 since 2006"<sup>3</sup>

An average of 22 veterans a day commit suicide and because of that fact suicide prevention is a priority issue for FRA. More specifically the Association is deeply concerned that "suicides among young veterans climbed sharply in a recent three-year period, according to a new government analysis focused on Veterans Health Administration clients. The number of suicides among 18- to 29-year-old men increased from 88 in 2009 to 152 in 2011. That translates into a 44% rise in the suicide rate, which jumped to 57.9 suicides per 100,000 veterans."<sup>4</sup> In 2005 the VA's 13,000 mental health professionals were providing care for veterans. Today there are more than 20,000 mental health professionals at the VA and that number should continue to increase. The VA/DoD crisis hot line has assisted more than 640,000 people and rescued over 23,000 from potential suicide, and there must be readily available counseling support and expanded awareness of help that's available to veterans in crisis.

A member posted this on FRA facebook page January 14, 2014: "Suicide prevention and the FAILURE of the VA. 22 Veterans committed suicide every day in 2010. This past Sunday (12Jan2014) at 2008 hours I chose to call the VA's suicide/crisis hotline on behalf of a Veteran I felt was in distress and prone to taking his life. My call was answered by a machine, was immediately placed on hold with elevator music and my call was DROPPED after 4:15 min/sec... having never spoken to a human. Suicide/crisis line... never answered after 4+ minutes... REALLY?!?!?! FRA passed on this information to VA staff.

Expanding VA counseling to veteran's family members, strengthening oversight of IDES, and requiring VA to establish accurate measures for mental health were included in the FY 2013 NDAA are also important in addressing this issue. "The number of military suicides declined significantly in 2013, a relief to the services after record and near record levels in 2012."<sup>5</sup> Hopefully the number of veteran suicides will also decline.

## **Agent Orange**

From 1964-1975 more than 500,000 service members were deployed off the coast of Vietnam and may have been exposed to Agent Orange, a herbicide used in Vietnam. Past VA policy (1991-2001) allowed service members to file claims if they received the Vietnam Service Medal or Vietnam Campaign Medal. But VA implemented a "boots on the ground" limitation on obtaining an Agent Orange presumption connection.

FRA is concerned about the recently released (December 2013) report from the National Academy of Sciences on the health effects from exposure to herbicides used during military operations in Vietnam. The study is mandated by the Agent Orange Act of 1991 (P.L. 102-4) and the Veterans Education and Benefits Expansion Act of 2001 (P. L. 107-103). The study provides limited or suggestive evidence that some Vietnam veterans exposed to Agent Orange herbicide have a higher incidence of stroke after age 70. The study also notes that the possibility of adverse

<sup>&</sup>lt;sup>2</sup> Time Magazine, Feb. 10, 2014, "A Troubled Marine's Final Fight" page38-39, Mark Thompson

<sup>&</sup>lt;sup>3</sup> The Washington Post, Nov. 11, 2013 "VA Shinseki is determined to Leave no Vet Behind" Steve Vogel

<sup>&</sup>lt;sup>4</sup> Los Angeles Times, Jan. 12, 2014, "More Young Veterans Committing Suicide, Data Show" Alan Zarembo

<sup>&</sup>lt;sup>5</sup> Marine Corps Times, Feb. 17, 2014, "Military Suicides Decline but Data Incomplete," Patricia Kime

health effects in offspring of Vietnam veterans is a high priority with veterans, but is a very elusive outcome to establish or refute.

The Association appreciates the establishment of a presumptive service-connection for Vietnam veterans who have B cell leukemia, Parkinson's disease or ischemic heart disease. These diseases are related to exposure to Agent Orange. VA Secretary Eric Shinseki's decision is a major step in the right direction, but FRA is advocating for a broader Agent Orange service-connection.

However, a January 2013 VA statement referencing a careful review of another IOM report in 2011, entitled, "Blue Water Navy Vietnam Veterans and Agent Orange Exposure," indicates that there is insufficient evidence to establish a presumption of exposure to herbicides for Vietnam veterans who served off the Vietnam coast during the conflict.

FRA believes that decision maintains the status quo regarding disability claims of these so-called "Blue Water" veterans and that the IOM report validated the 2002 Royal Australian Navy study that confirmed the desalinization process used on Australian and U.S. Navy ships actually magnified the dioxin exposure. The Association continues to seek a legislative remedy to reverse current policy so Blue Water veterans and military retirees who have health problems commonly associated with herbicide exposure will be eligible for service-related VA medical and disability benefits.

The Association notes the VA's efforts to expand presumption to ships exposed to Agent Orange during the Vietnam era. In January 2012 the Department added 47 ships to its list of Navy and Coast Guard vessels that may have been exposed to the Agent Orange herbicide. The list expanded as VA staff determined that a ship anchored, operated close to shore or traveled on the inland waterways and was exposed to the toxic herbicide. That is why FRA is supporting Rep. Chris Gibson's (N.Y.) "Blue Water Navy Ship Accountability Act" (H.R. 1494) to require the Department of Defense (DoD) to do a comprehensive search to determine which ships operated on the inland waterways of Vietnam between January 9, 1962 and May 7, 1975 and thereby makes service members serving on those ships eligible for an Agent Orange presumption when filing a disability claim with the Department of Veterans Affairs (VA). This would help with claims veterans are making when they are sick or, in some cases, have died and claims are made by their surviving families.

While the expanded VA policy to include veterans who sailed on "inland waterway" ships is significant, FRA believes it does not go far enough. The Association has received hundreds of calls from "blue water sailors" and their surviving spouses, stating that due to service on "their ships" in Vietnam waters, they too suffer or have died from many of the illnesses associated to presumed exposure to herbicides as their "brown water" and "boots on the ground" counterparts.

The Association wishes to thank Representative Chris Gibson (N.Y.) for his introduction of H.R. 543 "Blue Water Navy Vietnam Veterans Act of 2013." The bill was introduced with 42 original bi-partisan co-sponsors. FRA looks forward to the Senate introducing companion legislation and potential hearings on this priority issue of the Association

#### **Disability Rating Review**

Aggressive committee oversight of the Integrated Disability Evaluation System (IDES) is essential to ensuring that disability ratings established by this system are fair and consistent. In FRA's recent (February 2014) online survey indicates that 84 percent of veterans see claims processing as "Very Important." The Association supports the modernization of the VA Schedule of Rating Disabilities to guarantee that the ratings are uniform between the different services, between enlisted and officers, and uniform between DoD and VA. The 2015 Independent Budget (IB), the final report (2007) of the Veterans Disability Benefit Commission (VDBC), and the Dole –Shalala Commission all agree that the current disability rating should be reformed to more fully take into account non-economic loss and quality of life factors when determining compensation.

The Association also recommends that Congress change the current practice of rounding down veterans and survivors benefits to the next lowest dollar. Over time, the effect of rounding down can be substantial and our members have expressed concern about these effects.

FRA urges Congress to authorize a presumption of service-connected disability for combat veterans and veterans exposed to high levels of noise and subsequently claim hearing loss or tinnitus. Currently, veterans must prove that the hearing problem was caused by military service.

The Physical Disability Board of Review (PDBR) was mandated by the FY 2008 National Defense Authorization Act to reassess the accuracy and fairness of disability claims that resulted in combined disability ratings of 20 percent or less for service members who were separated from service due to medical conditions rather than being medically retired. To be eligible for a PDBR review, service members must have been medically separated between September 11, 2001, and December 31, 2009, with a combined disability rating of 20 percent or less, and found ineligible for retirement. PDBR cannot downgrade a disability for veterans seeking a review if their rating and nearly half of those reviewed have been upgraded to 30 percent or more. FRA urges additional funding for mailing and other outreach efforts to eligible veterans and that adequate staff and resources be provided to the PDBR to be able to process an increase in the volume of veterans seeking a review of their ratings.

The Association supports the "Servicemembers Mental Health Review Act" (H.R. 975/S. 628) sponsored by Rep. Tim Walz (Minn.) and Sen. Jon Tester (Mt.) respectively, that would authorize the Physical Disability Board of Review (PDBR) to review and, when necessary, correct service records for veterans diagnosed by the Department of Defense (DoD) with a Personality Disorder (PD) or Adjustment Disorder (AD) and discharged after active duty deployment. Many of these brave veterans have seen combat and are actually suffering from PTS. Because PD and AD are considered pre-existing conditions, the DoD is not obligated to award the benefits they earned that may help them properly reintegrate into their communities.

## COLA

FRA is thankful that the Administration has abandoned its call for implementing the Chained Consumer Price Index (CPI) in lieu the current CPI. The Department of Labor's Consumer Price Index (CPI) is used to determine annual COLAs for various benefit programs. The Association is committed to ensuring equitable COLAs for military retiree's retainer pay, veterans disability compensation, dependency and indemnity compensation for surviving spouses and children, and

was listed as a supporting organization on a letter signed, February 19, 2014, by 118 U.S. Representatives that calls on President Obama to avoid using the Chained CPI to calculate costof-living adjustments (COLA). Switching to this measure of inflation, known as "chained CPI," would reduce payments and have a negative financial impact on seniors, military retirees, veterans, survivors, and people with disabilities. The Association wants to acknowledge SVAC Chairman Bernie Sanders' (Vt.) effort in leading the opposition to the chained CPI.

FRA also supports Rep. Jon Runyan's (N.J.) legislation (H.R. 569) to provide automatic annual cost-of-living-adjustments (COLA) for veterans with service connected disabilities and survivors of certain disabled veterans receiving dependency and indemnity compensation (DIC). Currently Congress must authorize veteran's COLA legislation every year. Runyan's legislation would make this increase automatic just like the automatic annual increases for military retirees.

#### Post 911 GI Bill

The Association strongly supports the "GI Bill Tuition Fairness Act" (H.R. 357/S. 257), sponsored by Rep. Jeff Miller (Fla.) and Senator John Boozman (Ark.) respectively, that would require schools eligible for GI Bill education benefits to authorize veterans in-state tuition rates even though they may not be residents of the states where the schools are located. The legislation passed the House on February 3, 2014 (390-0) Last year only 13 states provided in-state tuition to non-resident veterans. "Today 20 states provide in-state tuition to non-resident veterans."<sup>6</sup> Those who volunteered to defend this Nation did not just defend the citizens of their home states, but the citizens of all 50 states, and the educational benefits they receive from the taxpayers should reflect that fact. The current limit on GI Bill tuition is in excess of \$18,000 per semester and this legislation will ensure that veterans receiving benefits from the Post 911 GI Bill will have their tuition reimbursed, which was the intent of the original Post 911 GI Bill law.

FRA supports authorizing Post 9/11 GI Bill benefits to survivors of service members who died in the line of duty after September 11, 2001. The Association also supports authorizing transfer of Post 9/11 GI Bill benefits from catastrophically disabled veterans to their full-time care givers in cases where a transfer did not occur prior to the veterans discharge or retirement.

The Post 9/11 GI Bill is a tremendous benefit for service members who qualify for the program and has significantly improved the morale of those currently serving. The Association urges sustained oversight of the program to ensure that qualifying veterans and their families can make informed decisions about choosing the best educational program for their needs and that they receive benefits in a timely manner. The demand for Post 911 GI Bill benefits is expected to increase as the U.S. military disengages from Afghanistan and there is a drawdown of forces.

## Access to VA Care

In 2009 there was a partial lifting of the "temporary" 2003 ban on enrolling Priority Group 8 veterans. VA opened enrollment for some (10 percent) of these beneficiaries and the intent was to gradually add 10 percent more enrollments each successive year, however the lifting of the ban stopped after the first year significantly limiting access to care. More than 260,000 veterans

<sup>&</sup>lt;sup>6</sup> http://www.studentveterans.org/what-we-do/in-state-tuition.html

have been impacted by the policy. Our Nation made commitments to all veterans in return for their service and limiting enrollment conveys the wrong message to those currently serving and those who have served in the past.

Expanding access to VA Hospitals and Clinics for TRICARE beneficiaries is important and FRA supports opportunities to expand DoD/VA joint facilities demonstration projects such as combining the VA Hospital and the Naval Hospital at Great Lakes Naval Base, Illinois, and ensuring that military retirees are not required to pay for care in VA facilities. All 153 VA medical centers accept TRICARE beneficiaries except for TRICARE for Life beneficiaries.

## **Data Security**

FRA members are concerned about media reports that veteran's financial and medical data is at risk. These concerns stem from leaked internal reports indicating that a data breach to financial, medical and personal information is "practically unavoidable" and is likely to happen within 12 to 18 months. It was also recently announced that the VA E-benefit website exposed the online accounts of about 5,000 veterans to unauthorized users. The defective software allowed veterans and service members logged into the E-benefit website to view account information of other users. After discovering the problem, the VA shut down the system and switched over to an earlier version of the software.

VA's Data Breach Core Team (DBCT) is reviewing the E-benefit website error. According to a statement issued by the VA, once the DBCT determines the individual veterans affected, "VA will take the appropriate response, which may include free credit monitoring for the affected individuals, consistent with VA's standard practice." FRA urges both of these distinguished committees to provide heighted oversight to ensure that veteran's confidential information at VA is not compromised.

## More Accountability at VA

FRA supports the "VA Management Accountability Act" (S. 2013/ H.R. 4031), sponsored by Sen. Marco Rubio (Fla.) and Chairmen rep. Jeff Miller (Fla.) respectively, that would give the VA Secretary complete authority to fire or demote VA Senior Executive Service (SES) or equivalent employees based on performance. Current law supposedly allows SES workers, a group representing most of VA's senior leaders, to be disciplined and fired, but there are considerable amounts of red-tape involved and the process can drag on for long periods of time. FRA agrees that senior VA staff should be held accountable when their job performance falls short.

## **Medicare Reimbursement**

FRA wants to thank Ranking Member of the HVAC, Rep. Michael Michaud (Me.) for introducing legislation (H.R. 2953) that authorizes Medicare reimbursement for eligible veterans to improve access for Medicare-eligible veterans and enhance health care funding for the VA. FRA believes authorization of Medicare reimbursement for eligible veterans would improve access for Medicare-eligible veterans and enhance health care funding for the VA. Under current law, Medicare is not authorized to reimburse VA hospitals for care provided to Medicare eligible veterans. This results in veterans being forced to decide between receiving medical care through the VA, or using Medicare at a non-VA facility and foregoing the personalized care of a VA hospital. Most veterans pay into Medicare for most of their lives, yet the law prohibits them from benefitting from this via care at VA facilities later in life.

#### **Women Veterans**

In January 2013 the Pentagon lifted the ban on women in direct combat and Defense Secretary Leon Panetta stated that women have become an "integral part" of the military and have already demonstrated their willingness to fight during the wars of the last decade. Even before the change women were playing a significant role in the nation's defense.

During the past decade military roles and responsibilities have been broadened and the number of women serving has significantly increased. There are more than 1.8 million women veterans and today they make up more than 15 percent of our active duty forces and 18 percent of the Reserve Component (RC). FRA strongly supports VA efforts to create an appropriate model of care for women veterans and the pilot program to provide child care services for women veterans who come to the VA for treatment of their wounds and injuries. VA now has Women Veterans Coordinators (WVC) in every regional office. Further, the VA should continue to enhance its sexual trauma and other gender specific programs and continue to improve services tailored to women veterans in all VA facilities.

# **SCRA Enforcement**

The Association is concerned that many of our service members have been unable to enforce their Servicemembers Civil Relief Act (SCRA) rights due to the increased use of forced arbitration clauses buried in the fine print of all types of contracts, including mortgage origination documents, automobile leases, and student loans. These clauses eliminate access to the courts that would protect the service member and instead funnel all claims against those who are deployed into costly arbitration systems set up by the same businesses that hope to bypass the law in the first place. That is why FRA is supporting the Servicemembers Civil Relief Act Rights Protection Act (S. 1999) sponsored by Senators Lindsey Graham (SC) and Jack Reed (RI), that bans these forced contractual arbitration provisions. It is important to note that Congress has already passed laws to ban forced arbitration for disputes brought by auto dealers; certainly our nation's troops should be afforded the same protections on other types of contracts.

Congress should also prohibit the expiration of any license or certification of a member of the Reserve Component (RC) issued by any state or federal agency until 90 days after the release from active duty. FRA is also concerned that certain SCRA protections have limits. SCRA only protects service members and their families from eviction from housing while on active duty due to nonpayment of rents that are \$1,200 per month or less and covering housing leases up to \$2,932.31 per month. These caps were established in 2003 and FRA supports increasing the caps to account for today's higher cost of living. The Association also wants to ensure that SCRA is enforced by regulatory agencies, including the Consumer Financial Protection Bureau (CFPB), Office of Military Affairs. FRA wants to recognize past HVAC hearings that exposed systematic violations of SCRA.

SCRA is the basis of civil law rights and protections for our troops and never has this legal shield been put to the test with the long-enduring military conflict with fighting terrorism. It's time Congress enhanced SCRA protections for our brave men and women who commit their lives to defending our country.

#### **Veterans Homelessness**

FRA supports the goal of eliminating veteran's homelessness by 2015. With assistance from the Housing and Urban Development (HUD) the VA has made progress on this issue. According to *The Washington Post*, ("Donovan, Shinseki hit D.C. Streets for National Homeless Count," Steve Vogel, Feb. 1, 2013), "Last year's count found 62,619 homeless veterans, representing a 17.2 percent decline since 2009." Since HUD and VA have joined forces more than 37,000 homeless veterans have been place in housing.

## Full Veteran Status for Reserve Component Service

The Association supports full veteran status for members of the Reserve Component (RC) with 20 years or more of service. FRA appreciates Sen. Mark Pryor's leadership by introducing the "Honor American's Guard-Reserve Retirees" (S. 629) bill and FRA also appreciates the leadership of Rep. Timothy Walz's (Minn.) companion bill (H.R. 679). A similar provision was added to S. 944, S. 1950 and S. 1982 that are sponsored by Senator Bernie Sanders.

#### **Court-Ordered Division of Veteran's Compensation**

The intent of service-connected disability compensation is to financially assist a veteran whose disability may restrict his or her physical or mental capacity to earn a greater income from employment. FRA believes this payment is for the veteran and should be out of reach of state Civil Courts. If a court finds the veteran must contribute financially to the support of his or her family, let the court set the amount allowing the veteran to choose the method of contribution. FRA has no problem with child support payments coming from any source. However, VA disability should be exempt from garnishment for alimony unless the veteran chooses to make payments from the VA compensation award. The Federal government should not be involved in enforcing collections ordered by the states. Let the states bear the costs of their own decisions. FRA recommends the adoption of stronger language offsetting the provisions in 42 USC, now permitting Federal enforcement of state court-ordered divisions of veterans' compensation payments.

#### **National Cemetery Administration**

The National Cemetery Administration (NCA) maintains over three million gravesites at 131 national cemeteries in 39 states, the District of Columbia, and Puerto Rico that include more than 4 million gravesites. The VA estimates that about 22 million veterans are alive today. They include veterans from World War II, the Korean War, the Vietnam War, the Gulf War, and the Global War on Terror, as well as peacetime veterans. It is expected that one in every six of these veterans will request burial in a national cemetery. Annual internments are estimated to have increased to 116,000 in the current fiscal year (FY 2014) and will remain at that level through 2015. A recent (February 2014) FRA online survey indicates that 63 percent of veterans view VA burial benefits as "Very Important," the highest category.

FRA welcomed the VA Inspector General's report (February 2013) that reviewed over three million veteran's graves in 131 national cemeteries that indicated an error rate of less than 0.0003 percent. This report was a result of HVAC Chairman Miller's call for a complete audit of gravesites to ensure all veterans and their dependents are buried in the correct graves. Our members appreciate the House Committee's ongoing oversight to ensure that these problems do

not arise again at NCA cemeteries. The VA has also indicated it will "tighten procedures" and will continue to conduct audits at the 17 cemeteries where problems were discovered.

The Association supported the enactment of the "Dignified Burial and Veterans' Benefits Improvement Act" (S. 3202 P. L. 112-260) that authorizes the VA to furnish a casket or urn for a deceased veteran when VA is unable to identify the veteran's next-of-kin and determines that sufficient resources are not otherwise available to provide for proper burial in a national cemetery.

FRA appreciates the increased burial plot allowance from \$300 to \$700 effective October 1, 2011, although there is still a gap between the original value of the benefit and the current benefit. The benefit should be increased from \$700 to \$1,150. Congress should also divide the existing burial benefits into two new categories: veterans within the NCA accessibility model and veterans outside the accessibility model. Further NCA's Operations and Maintenance budget should be increased so it can meet increasing demands created by the aging veteran population.

## **Concurrent Receipt**

FRA continues its advocacy for legislation authorizing the immediate payment of concurrent receipt of full military retired pay and veterans' disability compensation for all disabled retirees. The Association appreciates the progress that has been made on this issue that includes a recently enacted provision fixing the CRSC glitch that caused some beneficiaries to lose compensation when their disability rating was increased. Chapter 61 retirees receiving CRDP, and CRDP retirees with less than 50 percent disability rating should also receive full military retired pay and VA disability compensation without any offset.

The Association strongly supports legislation to provide additional improvements that include Senate Majority Leader Harry Reid's recently introduced legislation (S.234), Rep. Sanford Bishop's (N.Y.) "Disabled Veterans Tax Termination Act" (H.R. 333) and Rep. Gus Bilirakis' (Fla.) "Retired Pay Restoration Act" (H.R. 303).

## **SBP/DIC Offset Repeal**

FRA supports the "Military Surviving Spouse Act" (S. 734/H.R. 32) sponsored by Sen. Bill Nelson (Fla.) and Rep. Joe Wilson (S.C.), respectively. This bill would eliminate the offset, also known as the "widow's tax," on approximately 60,000 widows and widowers of our Armed Forces.

Current DIC payments are \$1,215 and 2009 legislation partially addressed this inequity by authorizing an increase via the Special Survivor Indemnity Allowance of only \$50 per month for that year, with increases to \$100 in 2014. The above referenced legislation would increase the allowance to \$150 per month in 2014 with gradual increases to \$310 per month in 2017.

SBP and DIC payments are paid for different reasons. SBP coverage is purchased by the retiree and intended to provide a portion of retired pay to the survivor upon his/her death, while DIC is indemnity compensation paid to survivors of service members who die of service connected causes. And it's important to note that surviving spouses of federal civilian retirees who are disabled veterans and die of service connected causes receive DIC without offset to their federal civilian SBP benefits.

# **Uniformed Services Former Spouses Protection Act (USFSPA)**

FRA urges Congress to examine the Uniformed Services Former Spouses-Protection Act (USFSPA) and support amendments to the language therein to protect its service members against State courts that ignore provisions of the Act.

The USFSPA was enacted 31 years ago; the result of Congressional maneuvering that denied the opposition an opportunity to express its position in open public hearings. The last hearing, in 1999, was conducted by the House Veterans' Affairs Committee rather than the Armed Services Committee which has oversight authority for amending the USFSPA.

Few provisions of the USFSPA protect the rights of the service member, and none are enforceable by the Department of Justice or DoD. If a State court violates the right of the service member under the provisions of USFSPA, the Solicitor General will make no move to reverse the error. Why? Because the Act fails to have the enforceable language required for Justice or the Defense Department to react. The only recourse is for the service member to appeal to the court, which in many cases gives that court jurisdiction over the member. Another infraction is committed by some State courts awarding a percentage of veterans' compensation to ex-spouses, a clear violation of U. S. law; yet, the Federal government does nothing to stop this transgression.

There are other provisions that weigh heavily in favor of former spouses. For example, when a divorce is granted and the former spouse is awarded a percentage of the service member's retired pay, the amount should be based on the member's pay grade at the time of the divorce and not at a higher grade that may be held upon retirement. Additionally, Congress should review other provisions considered inequitable or inconsistent with former spouses' laws affecting other Federal employees with an eye toward amending the Act.

# Conclusion

In closing, allow me again to express the sincere appreciation of the Association's membership for all that you and the Members of both of the House and Senate Veterans' Affairs Committees and your outstanding staffs do for our Nation's veterans.

Our leadership and Legislative Team stand ready to meet with, other members of the Committees or their staffs at any time, to improve benefits for all veterans who've served this great Nation.

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# FRA National President Virgil Courneya

Mr. Virgil Courneya, a resident of Carson City, NV, was recently elected National President (NP) of the Fleet Reserve Association (FRA), a congressionally chartered military and veterans' service organization serving current and former enlisted members of the Navy, Marine Corps and Coast Guard. As National President he represents active duty, reserve, retired, and veteran Sea Service members. The Association's mission is to protect their pay and benefits on Capitol Hill. NP Courneya has been a member of the FRA since 1982 and is currently a member of FRA Branch 274 in Reno, Nev. He has held numerous leadership positions at the local, regional and national levels of the organization, including his service as the Association's West Coast Regional President (2004-2006), and National Vice President (2012-2013).

Courneya enlisted in the United States Marine Corps in 1972, and his military career included assignments in California, Nevada, North Carolina, Hawaii and Pennsylvania, overseas duty in Japan and Marine Security duty in Bolivia. He achieved the rank of Master Gunnery Sergeant before retiring from the Marine Corps in 1996. Courneya holds a bachelor's degree in Social and Criminal Justice. NP Courneya is recently retired from the U.S. Postal Service in Carson City, NV.