#### STATEMENT OF

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#### FOR THE RECORD

# COMMITTEE ON VETERANS' AFFAIRS UNITED STATES SENATE

#### WITH RESPECT TO

#### **Pending Health Care and Benefits Legislation**

WASHINGTON, D.C.

October 6, 2015

Chairman Isakson, Ranking Member Blumenthal and members of the Committee, on behalf of the men and women of the Veterans of Foreign Wars of the United States (VFW) and our Auxiliaries, I would like to thank you for the opportunity to testify on today's pending legislation.

### S. 717, the Community Provider Readiness Recognition Act of 2015

This legislation seeks to improve the private sector's ability to provide culturally competent and evidence-based mental health care to service members and veterans by establishing a Department of Veterans Affairs/Department of Defense (VA/DOD) mental health readiness program for private sector providers. The VFW agrees with the intent of this legislation, but cannot support the bill as written.

In a recent study entitled "Ready to Serve" the RAND Corporation found that only 13 percent of private sector mental health providers deliver culturally competent and evidence-based mental health care. The VFW is also concerned by RANDs findings that less than 18 percent of TRICARE affiliates and less than 50 percent of private sector providers who work in a military or VA setting met RAND's readiness criteria. The VFW acknowledges that VA and the military health care systems may never have the resources or capacity to directly deliver timely mental health care to all the service members and veterans they serve. Thus, the two systems have a vested interest to ensure the private sector is ready and able to provide high quality mental health care when such care is not readily available at military treatment facilities or VA medical facilities.

The VFW supports the intent of the readiness program, however, we are concerned that a readiness designation would be interpreted by service members and veterans as VA and DOD deeming providers who are listed in the readiness registry as participants in their respective

private sector provider networks. This may result in service members and veterans receiving care from providers on the registry, but not being covered for such services by VA or DOD.

To ensure this does not occur, the VFW recommends that the Committee amend the legislation to limited program eligibility to private sector providers who have been approved to participate in the VA Choice network or the TRICARE network. This would incentivize providers to join VA and DOD networks and would increase readiness among private sector mental health care providers who treat service members and veterans.

However, the VFW would oppose making the readiness program a requirement for acceptance into VA's or DOD's private sector provider networks. Approval to participate in VA's and DOD's networks must continue to be based on a provider's accreditation and license to practice medicine.

#### S. 1676, the DOCs for Veterans Act of 2015

The VFW supports ten of the eleven sections included in this legislation which would improve the quality of health care for rural veterans. The VFW does not support section 202 as written, but would like to offer a suggestion to improve it.

VA is the largest single provider of health professions education in the United States and is second only to Medicare and Medicaid in funding graduate medical education (GME). According to VA, more than 120,000 health professionals train in VA medical facilities annually and almost all VA medical facilities have some health professions trainees. To further increase VA's role in training America's health care workforce, the Veterans Access, Choice and Accountability Act of 2014 authorized VA to add 1,500 additional GME residency slots over five years. However, a Medicare imposed cap on GME slots has limited VA's academic affiliates from accepting additional slots. We support removing that barrier to ensure VA continues to train America's health care providers. This legislation also includes other provisions that would increase access to VA health care for rural veterans. With the growing number of veterans living in rural areas, the VFW supports efforts to ensure rural veterans have timely access to the health care they need.

This legislation would also require that at least 30 percent of VA's Education Debt Reduction Program beneficiaries practice medicine in rural or highly rural areas. While the VFW supports expanding health care access for rural veterans, we cannot support establishing a quota for this important program. The Education Debt Reduction Program enables VA to recruit and retain the best and brightest health care professionals throughout the country. Requiring VA to have 30 percent of program beneficiaries practice in rural areas may limit VA's ability to recruit and retain health care professionals in areas or occupations with the greatest need. The VFW recommends the Committee amend section 202 to ensure the Education Debt Reduction Program is appropriately dispersed among health care providers in urban, rural and highly rural areas without establishing quotas.

#### S. 1754, the Veterans Court of Appeals Support Act of 2015

The VFW supports this legislation, which would permanently increase the number of judges at the Court of Appeals for Veterans Claims (CAVC) from seven to nine.

Under current law, the CAVC is authorized up to seven active judges, but temporary expansions of two additional judges were authorized in 2001 and again in 2008. These expansions came in an effort to stagger the terms of the judges. The original members of the CAVC all had terms that ended at the same time. The temporary expansion allowed more judges to be appointed within a certain time frame, with the thought that there would then be some judges on the court who had at least a few years of experience when the majority of the judges retired. Unfortunately, since the current cohort also have terms that end around the same time, the Court will soon be in a similar predicament.

The current situation is as follows: Judge Moorman recently retired, bringing the Court down to eight members. The terms of Judge Hagel, Kasold, Schoelen, Davis, and Lance all expire in 2018 and 2019. Judges Greenberg, Pietsch and Bartley were all appointed in 2012 under the last expansion.

While it is possible for judges to be reappointed, it is unlikely that more than two of the five whose terms expire in the next few years will seek or accept reappointment. The VFW believes that expanding the Court is necessary to avoid a circumstance where judicial nomination, which can be an intensive and politically fraught process, would reduce the number of members of the court. If the Court is temporarily reduced to five of the seven judges authorized while they wait for the nomination and installation process, the backlog of cases at the Court would almost certainly grow, along with veterans' wait times.

With over 318,000 total appeals pending at VA, the appeals to the Board and the Court will only continue to grow in the foreseeable future. The VFW believes that the CAVC must remain fully staffed in order to handle the coming workload. With this in mind, we believe it is both justified and prudent to permanently expand the number of judges at the CAVC.

# S. 1885, the Veterans Housing Stability Act of 2015

The VFW firmly believes that no veteran should ever be homeless. We praise the great progress that has been made in reducing veterans' homelessness in recent years as a direct result of coordinated efforts across multiple government agencies to provide transitional housing, rapid rehousing, and employment programs for veterans in need. This legislation seeks to build on that progress by improving the benefits afforded to homeless veterans. The VFW supports this legislation and has a suggestion to improve it.

This legislation would clarify the definition of homeless, thereby aligning it with the McKinney-Vento Act to include those displaced by domestic violence. Expanding the definition of homeless to include veterans who are fleeing situations of domestic abuse is the right thing to do. This change would ensure veterans who have the courage to leave their abusive and sometimes life-threatening situations receive access to the benefits VA already provides thousands of homeless

veterans. The VFW believes this legislation will significantly improve the lives of those who become homeless as a result of difficult circumstances outside of their control, and help them begin a new chapter in their lives.

This legislation would also provide case management services to veterans who are at risk of becoming homeless to ensure they are able to retain their housing. This legislation would expand other homeless programs to at risk veterans. The VFW believes that the best way to eliminate homelessness among veterans is through prevention. We fully support such expansion and believe it will enable the Administration to significantly reduce the number of homeless veterans.

The VFW generally supports section 7, which would require the Secretary to establish a national center for homelessness among veterans. While the VFW recognizes the need for a center of excellence to collect and disseminate best practices, we are concerned the center may not have the ability to ensure VA medical facilities and regional offices utilize such best practices. For this reason, we suggest that this section include an operations and compliance mechanism to ensure the Department fully benefits from having a center of excellence that improves the benefits VA provides homeless veterans.

# S. 2013, the Los Angeles Homeless Veterans Leasing Act of 2015

The national VFW supports the position of the Department of California VFW to quickly enact S. 2013. This legislation sets the course to return the Veterans Affairs West Los Angeles Campus to a campus that meets the intent of the land grant by providing services directly to veterans in the community. We look forward to its quick passage.

# S. 2022, to amend title 38, United States Code, to increase the amount of special pension for Medal of Honor recipients, and for other purposes.

This legislation would increase the amount of special pension granted to Medal of Honor recipients from \$1,000 to \$3,000 per month, adjusted annually for inflation. Medal of Honor recipients are held in the highest esteem by the veterans and military community. These men have turned the tide of battle against overwhelming enemy forces, and saved the lives of their comrades at great risk to themselves. With only 78 Medal of Honor recipients alive today, increasing their pension would not create a significant cost, but would represent a small but meaningful token of our appreciation for their heroic actions. Accordingly, the VFW supports this legislation.

Mr. Chairman, this concludes my testimony and I will be happy to answer any questions you or the Committee members may have.