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**MARE ISLAND CEMETERY:
A Closer Look At A National Monument**

**Prepared for
U.S. Senate Committee on Veterans Affairs**

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Senate Committee Members,

We'd like to take this opportunity to thank Chairman Isakson, Ranking Member Tester and all the members of the Senate Veterans Affairs Committee, to present our position on the Mare Island Cemetery Restoration bill, **S. 2881**. This bill, offered by Senator Diane Feinstein (D - CA), will allow for the future care of this historic landmark at the discretion of the Department of Veterans Affairs (VA).

The Mare Island Naval Cemetery was established in 1856 on the grounds of the Mare Island Naval Shipyard in Vallejo, CA. It is the oldest military cemetery on the west coast. The last burial in the cemetery occurred in 1921. The following is a summary of the internments in the cemetery:

- 860 Veterans Navy and Marines, 3 Medal of Honor recipients,
- 8 Russian sailors killed fighting a fire in San Francisco in the 1860s while their ship was visiting at the invitation of President Lincoln
- 4 French sailors authorized by the US Navy for reasons lost to history
- 33 Children of Veterans buried there
- 40 Spouses of Veterans buried there (includes the daughter of Francis Scott Key)
- 7 Other civilians authorized by the US Navy for reasons lost to history

TOTAL: 952

The cemetery was turned over by the Navy to the City of Vallejo in 1996 as part of BRAC '93. There were no provisions made for the perpetual care, maintenance and restoration as part of the turnover agreement. The City of Vallejo has been unable or unwilling to provide the necessary resources to maintain the cemetery and it has fallen into disrepair. The City has also formally requested the Federal Government to take over the Cemetery. The VA, who runs the National Cemetery Administration, does not have the legal authority to take over the cemetery. Senator Feinstein's introduction of **S. 2881** will give the necessary authority to the VA. Congressman Mike Thompson has introduced a similar bill (**HR. 5588**) which is currently before the **House Veterans' Affairs Committee**.

VMFP and our partner Veteran Service Organizations (VSO's) along with the many people in California, urgently requests the Senate Veterans Affairs Committee report this bill to the floor of the US Senate and provide this historic site the perpetual care, maintenance and restoration it so justly deserves.

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LEGISLATION UNDER CONSIDERATION
August 1, 2018

H.R. 299, Blue Water Navy Vietnam Veterans Act of 2018

VMFP full supports this as an issue long overdue. There is some trepidation this will cause a large increase to the Veterans Health Administration (VHA) overhead and Veterans Benefits Administration (VBA) will have a large increase in claims. Since there are no specific numbers published on this, my belief is, MOST Veterans with issues caused by exposure to Agent Orange (AO) have already qualified for benefits, are eligible for care within another program (Tricare for Life, Medicare/Medicaid, etc.) or have some other form of health insurance.

S.____ (Sanders), Veterans Dental Care Eligibility Expansion and Enhancement Act of 2018

It has always been an objective of VMFP to improve the health of Veterans everywhere. The one thing missing in society in general is a comprehensive dental care program. In VA, unless there is extreme need for most Veterans comprehensive dental care is also missing.

We believe this legislation will help to measure the costs and needs and will help define the alternatives for Veterans for healthy teeth and gums. VMFP support this bill as a path to improving understanding the needs for this care for Veterans.

S. 3184 To amend title 38, United States Code, to modify the requirements for applications for construction of State home facilities to increase the maximum percentage of nonveterans allowed to be treated at such facilities, and for other purposes.

VMFP Strongly supports this bill. It has long been the history of other organizations (Gary Sinise Foundation; Habitat for Humanity, etc.) to have been helping with the construction of housing for deserving Veterans. We support the expansion of this as a government initiative and the inclusion of more Veterans with housing needs

S.____ (Boozman), VA Hiring Enhancement Act

For many years, VMFP has been a strong proponent of hiring qualified Veterans, trying to transition from the military to civilian life. One of the roadblocks for this transition has been certification and review of necessary qualification. We believe this bill is a good step to improving the staffing shortages at VA with highly skilled medical persons.

VMFP believes this bill will create a more "level playing field" in competition for many of the skilled people needed to fill the array of openings in the healthcare field for VA. We strongly support this legislation.



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H.R. 5418, Veterans Affairs Medical-Surgical Purchasing Stabilization Act

VMFP has no position on this legislation since there are many bills with similar clauses. We have not had enough time to review this to make a recommendation one way or the other.

S. 1596 (Peters/Rubio), BRAVE Act of 2017

The cost of a funeral has risen over the years and is now estimated to be between \$7,000 and \$10,000 in North America (according to PARTING; a funeral home rating website). Through the increase in this legislation does provide for more variable adjustments in the future and the initial suggested increase is substantial, we believe this value should be increased to a minimum level of \$3,000.00 (the average cost of a cremation funeral – Source: National Funeral Directors Association).

An argument can be made, many Veterans can be interred in a cemetery cared for by VA at substantially less, but not everyone can take advantage of this benefit. While VMFP supports this bill, we would like to see an increase in funding.

S. 2881 (Feinstein), Mare Island Naval Cemetery Transfer Act

Statement At Page 1 (separate).

S. 1952 (Tester/McCain/Manchin), VA Financial Accountability Act of 2017

With budgetary issues, financial accountability and several years of increases in VA's budget with proportional instances of overspending, cost overruns and program demands (unfunded mandates) left unfulfilled, it is VMFP's opinion this legislation would be a good step in the right direction.

S. 1990 (Tester/Blumenthal/Hirono), Dependency and Indemnity Compensation Improvement Act of 2017

VMFP takes no position on this legislation.



S. 2485 (Sullivan), Medal of Honor Surviving Spouses Recognition Act of 2018

VMFP fully support this legislation. While some believe this may have consequences in personal relationships in the future, the intent of the bill meets a need we feel is long be unfulfilled as an obligation by the government to the spouse of a Medal of Honor hero.

S. 2748 (Brown/Rounds), BATTLE for Servicemembers Act

Our group fully supports this legislation as a necessary step to full and timely access to employment and training to meet any need of a returning Veteran.

S.____ (Cassidy), to require the Secretary of Veterans Affairs to establish a program to award grants to persons to provide and coordinate the provision of suicide prevention services for veterans transitioning from service in the Armed Forces who are at risk of suicide and for their families, and for other purposes.

Suicide prevention, in all it's forms, has always been a top priority for Veterans and their families within our organization. As a person who has dealt directly with suicide (as a police officer) and directly involved with the family (my brother), I know this has horrible consequences and is a preventable tragedy; given the proper resources, awareness and education.

Any effort to help recognize the symptoms of depression, despair and hopelessness leading to a suicidal ideation is a priority for VMFP. We fully support this legislation.

S.____ (Cassidy), Modernization of Medical Records Access for Veterans Act

VMFP has no position on this legislation.

S. 514 (Perdue/Heller), No Hero Left Untreated Act

VMFP takes no position on this bill but we believe a pilot program on Magnetic EEG/EKG-guided resonance therapy could yield significant information so as to make a more informed decision on the benefits and cost of this treatment program.

Respectfully Submitted,

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