



# **MISSING IN AMERICA VETERANS** **RECOVERY PROGRAM**

[WWW.MIAP.US](http://WWW.MIAP.US)

IRS EIN: 20-840-8832

UNITED STATES SENATE  
COMMITTEE ON VETERANS' AFFAIRS  
Hearing: Pending Legislation  
June 29, 2016, 2:30 p.m.  
Russell Senate Office Building, Room 418

Refer: S.3076 & S.3035

**The Missing in America Veterans Recovery Program is in complete support of the referenced proposed legislation under consideration (S.3076 and S. 3035).**

***S. 3076 (Cotton), Charles Duncan Buried with Honor Act of 2016, a bill to authorize the Secretary of Veterans Affairs to furnish caskets and urns for burial in cemeteries of States and tribal organizations of veterans without next of kin or sufficient resources to provide for caskets or urns, and for other purposes.***

## **Missing in America Veterans Recovery Program: Why We're Here**

The purpose of the Missing in America Project is to locate, identify and inter the unclaimed cremated remains of American veterans through the joint efforts of private, state and federal organizations. To provide honor and respect to those who have served this country by securing a final resting place for these forgotten heroes

1. **No veteran should be buried in a pauper's grave**, denied the Honor and Respect to have a casket or urn provided for their burial regardless of income as long as they are Verified by the Dept. of Veterans Affairs and meet the financial requirements as determined to become indigent or are unclaimed and forgotten.
2. The **highest priority** for those veterans classified as Unclaimed, Forgotten or as an Indigent after service in the U.S. Military to this nation.



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3. The Missing in America Program has these records available for the veterans and dependents that we have processed to date: (Nov 9, 2006, to present)

- **Total Funeral Homes Visited** - 1,987 out of 23,000+ in the U.S.\*
- **Cremains Found** - 13,311
- **Veterans Cremains Identified** - 3,072
- **Veterans Interred** - 2,765

\*multiply by remaining Funeral Homes to visit for total estimates. MIAP finds 10-35 % of unclaimed remains in funeral homes shelves are veterans or eligible dependents. Oldest Veterans have been 15 Civil War Veterans and five eligible spouses including Isaiah Mays, Buffalo, Soldier, Medal of Honor now at Arlington.

4. **No veteran penalized for the location of their burial**, Federal, State, Indian Tribal Burial. New Laws must include Cemeteries approved by the Dept. of Veterans Affairs that can record burial sites on the VA Worldwide Locator system. If it is approved or funded by the VA Caskets and Urns should be provided to all unclaimed veterans.
5. There are **some states with closed or no VA Federal Cemetery** nearby POD (place of Death) to transport or deny them the right to a Casket or Urn and to be buried close to their home is not conscionable. Hundreds of miles separate Place of Death with VA Federal Cemeteries, especially as you get further out West. VA is working diligently to correct this, but for now, not completed. Everyone should be buried as close as possible to their home, friends, and choice of place to live.



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- 6. The mission of the MIAP project is to locate, identify and inter the unclaimed cremains of veterans through the joint efforts of private, state and federal organizations. These forgotten veterans have served our country and, as such, deserve to be buried with honor and respect. The impetus for our little program began in November 2006. The Idaho State Veterans Cemetery interred 21 cremains of forgotten veterans, with full military honors and the dignity these fallen heroes so richly deserved. Recently, a state hospital announced that 3500 cremains were on shelves to be verified. On the shelf were cremains for the time span of the 1890s to 1971. It is estimated 350 to 1,000 of these cremains could be veterans. Burial without verification is happening in every state.*

*This project has just begun. We need to blanket every mortuary and cemetery in the United States and let them know there are people who desire to claim our veterans. We need to let them know it is our desire to see they are interred with the honor and respect they deserve. They served our great nation. It is now our great nation's turn to serve them.*

*The veterans languishing on shelves need us. They need America to step forward and ensure they are buried with honor. They need America to show their thanks for their service. Without them, we would not have the freedoms we enjoy today.*

*Frederick R. Salanti, Maj, US Army (USAR), MIAP Founder/Executive Director*



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## 2. MIAP fully supports S. 3035 proposed legislation as well.

**S. 3035 (Heller/Tester)**, *Maximizing Efficiency and Improving Access to Providers at the Department of Veterans Affairs Act of 2016*, a bill to require the Secretary of Veterans Affairs to carry out a pilot program to increase the use of medical scribes to maximize the efficiency of physicians at medical facilities of the Department of Veterans Affairs.

An accurate and detailed medical record is paramount for clinical history, billing, research, outcome measures, performance improvement, and patient safety. Globally, the medical record adds to aggregation of health data to health information exchanges contributing to meaningful use of data and improving population health. The Veteran Health Administration (VHA) VHA is a trailblazer in the use of electronic medical records, amassing millions of records with a plethora of health care data. Daily, VHA providers review hundreds of clinical reminders, alerts, notifications, and clinical dashboards for their patients. Unfortunately, the electronic medical record has taken away from sole purpose of VHA, caring for Veterans. The patient experience is now reduced to provider eyes glued to a computer monitor gathering and reviewing important information for clinical decision-making, ensuring patient-centered care. Most importantly, diligent and deliberate review of medical records ensures patient safety. The time it takes for data entry and documentation takes away from the patient experience. This is a bitter complaint of Veterans; the doctor is always looking at the computer and typing.

Health care is changing, and one fundamental paradigm shift is empowering patients with knowledge and engaging them in their health care plan and treatment recommendations. The use of medical scribes will enhance and develop trusted partnerships, an integral part in VHA strategic plan, and will improve patient satisfaction, patient safety, contribute to meaningful use of health care data and improve provider satisfaction, as well.

The use of scribes at medical facilities of the Department Veterans Affairs achieves a premier goal of Department of Veterans Affairs Secretary McDonald's, Blueprint for Excellence, "Grow an organizational culture, rooted in VA's core



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Values and mission, which prioritizes the Veteran first, engaging and inspiring employees to their highest possible level of performance and conduct” (Blueprint for Excellence-Fact Sheet, 2014). The benefits of medical scribes will:

- Improve Veteran experience with improvement in communication and continuity of care
  - Increase productivity of providers
  - Facilitate patient safety and reduce medical errors
  - Improve health care for Veterans and contribute to aggregation of health care data to improve overall population health and health outcomes
  - Efficient use of health data, accuracy of documentation to health information exchanges, facilitates meaningful use
- (AHIMA, 2012)

Communication is essential in physician-patient relationship. Direct eye contact, observation of body language, and active listening helps the provider assess the Veteran’s understanding of medical information and willingness to accept treatment recommendations. Veteran attitude and trust are improved when the Veteran experiences undivided attention and engagement from provider eliciting a partnership.

Productivity is increased when the medical scribe can navigate the chart for information. During a 30-minute visit the provider is expected to navigate the patient medical record for laboratory results, imaging and diagnostic results, records received from non-VA providers and hospitalization, outcome of consults, and medications. The trained medical scribe navigates the medical record collecting and compiling the information for clinical documentation leaving more time for provider and direct patient engagement. The provider spends quality time talking with patient, listening to what the patient is saying and uses the opportunity for motivational interviewing and coaching to gain trust and buy-in from patient to adhere to treatment recommendations.



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Accurate and comprehensive clinical documentation is critical for patient safety and reduction in medical errors. Scribes navigating the medical record minimizes the risk for omission of important information. For example, Veterans travel across the country and may visit multiple VA medical centers. The provider has ability to access remote data to review medical information from other facilities. Scanned documents are found in the medical record but take time to load during the visit and risk being overlooked when making medical decisions.

The use of medical scribes has proven effective in the private sector. The Joint Commission provides guidelines to ensure uniformity in roles and responsibilities such as job description, orientation and training, competency and evaluations, information management standards, HIPAA, HITECH, confidentiality, patient rights, signing and dating of entries in medical record distinguishable from physician or licensed independent practitioner, authentication, and performance improvement process (Joint Commission, 2011). The use of medical scribes in VHA is needed now to comply with a paradigm shift in health care to improve patient experience, empowers patients in health care, demands provider engagement, and ensures patient-centered care and patient safety.

AHIMA. (2012, November). Using Medical Scribes in a Physician Practice.

*Journal of AHIMA*, pp. 64-69. Retrieved from Journal of AHIMA:

<http://library.ahima.org/doc?oid=106220#.V2iUDjVdeXs>

*Blueprint for Excellence-Fact Sheet*. (2014, September). Retrieved from VA.gov:

[http://www.volunteer.va.gov/docs/blueprintforexcellence\\_factsheet.PDF](http://www.volunteer.va.gov/docs/blueprintforexcellence_factsheet.PDF)

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