

STATEMENT FOR THE RECORD
PARALYZED VETERANS OF AMERICA
FOR THE
SENATE COMMITTEE ON VETERANS' AFFAIRS
CONCERNING
PENDING LEGISLATION

SEPTEMBER 16, 2015

Chairman Isakson, Ranking Member Blumenthal, and members of the Committee, Paralyzed Veterans of America (PVA) would like to thank you for the opportunity to submit our views on legislation pending before the Committee. We appreciate the Committee focusing on these critical issues that will affect veterans and their families.

S. 290, the “Increasing the Department of Veterans Affairs Accountability to Veterans Act”

PVA understands the intent of S. 290, the “Increasing the Department of Veterans Affairs (VA) Accountability to Veterans Act of 2015.” This legislation would presumably give the Secretary more leverage as he continues his campaign to improve the VA health care system. This legislation would allow the Secretary to reduce benefits of Senior Executive Employees that have been convicted of certain crimes.

However, we believe that Section 3, the Reform of Performance Appraisal System for Senior Executive Service Employees, establishes a troublesome precedent. This section limits the recognition of employees that have contributed more than a position requires while maintaining a personal goal of improving service to veterans. While the forced distribution of the various levels in performance evaluations would seemingly limit the number and amount of bonuses paid to senior employees, we believe these provisions would punish those employees that are overachievers. Similarly, we believe that mandating that no more than a certain percentage of SES employees receive a given rating in a year ignores the important work that these individuals produce on a daily basis. We believe this circumstance will severely limit the number of individuals who are willing to consider SES employment at VA. Lastly, we believe that forcing SES employees to move every five years is unnecessarily punitive. We do not believe it makes sense to move management employees simply for the sake of doing it, particularly if they are doing an outstanding job.

S. 563, the “Physician Ambassadors Helping Veterans Act”

PVA has no official position on S. 563, the “Physician Ambassadors Helping Veterans Act.” As we understand it, this bill would presumably direct the VA to allow volunteer physicians to serve in VA medical facilities struggling with wait times or staff shortages. It is our understanding that this is an authority the VA already exercises and that in areas where volunteer support is limited, physicians have chosen not to navigate the cumbersome administrative process that allows them to become a volunteer physician. The VA also often fills gaps through direct hire authority rather than rely upon volunteer support. We appreciate the interest of those physicians who are willing to volunteer to cover the access gaps that may exist in VA facilities.

S. 564, the “Veterans Hearing Aid Access and Assistance Act”

PVA supports S. 564, the “Veterans Hearing Aid Access and Assistance Act.” This legislation would amend title 38, United States Code, to clarify the qualifications of hearing aid specialists of the Veterans Health Administration of the Department of Veterans Affairs. Hearing loss and tinnitus are the most common service-connected

disabilities treated by VA healthcare. Demand for hearing services has increased, dramatically, over recent years. This is due to the large cohort of aging veterans compounded by a newly returned veteran population from the most recent conflicts. With limited resources VA cannot meet the demand in a timely manner. Currently, hearing aid specialists are not authorized by VA as an approved care provider, and as such, VA can only procure hearing services from an audiologist. Authorizing hearing aid specialists would expand VA's network of providers and reduce veterans' need to travel long distances.

S. 1450, the “Department of Veterans Affairs Emergency Medical Staffing Recruitment and Retention Act”

PVA also supports S. 1450, the “Department of Veterans Affairs Emergency Medical Staffing Recruitment and Retention Act.” This bill would allow the Secretary to modify the hours of employment of physicians and physician assistants employed on a full-time basis by the Department of Veterans Affairs. Currently, VA emergency room physicians work inflexible 12-hour shifts within the required 80 hours per pay period that denote full-time status. This rigidity does not exist in the private sector. Irregular work schedules are needed to provide high quality patient care. Additionally, the Veterans Health Administration (VHA) antiquated system interferes with recruitment and retention efforts.

S. 1451, the “Veterans’ Survivors Claims Processing Automation Act of 2015”

PVA supports S. 1451, the “Veterans’ Survivors Claims Processing Automation Act of 2015.” The legislation allows VA to pay benefits to a survivor who for whatever reason didn't file a claim as long as sufficient evidence of record existed to grant the claim. For example, in the case of a veteran who was known to have been exposed to Agent Orange and died of lung cancer, the VA could establish entitlement to DIC in the absence of a properly filed claim. In such a case the notification of death would become the date of claim. While this may not be the intent of the legislation, this could protect a date of claim which could otherwise be untimely and will ensure the survivor receives benefits their loved one earned. This is appropriate legislation that will pay benefits to a

veteran's survivor as quickly as possible and streamline the process. In many cases, the benefits a disabled veteran receives may be the only family income.

One change that PVA would like to see in the language is in Section 2(B)(ii) that states "...the date on which a survivor of a veteran notifies the Secretary of the death....." As in many cases with legislation, PVA believes this should read "survivor or duly appointed representative" to ensure it is clear that veteran service officers or others that may be assisting the survivor can act on their behalf. It may also be appropriate to include language referencing VA learning of the death from another federal agency such as the Social Security Administration or the Internal Revenue Service before a survivor may notify VA. Limiting notification to the survivor strikes PVA as being too narrowly defined. However, this being said, VA has already initiated a process to automatically begin payment of DIC to the spouse of record in cases where the veteran has been rated at 100% for ten years, without a requirement for the widow to file a claim. This legislation would better establish that process into law.

S. 1460, the "Fry Scholarship Enhancement Act of 2015"

PVA strongly supports S. 1460, the "Fry Scholarship Enhancement Act of 2015." The Marine Gunnery Sergeant John David Fry Scholarship provides Post-9/11 GI Bill benefits to the surviving spouses and children of servicemembers who have died in the line of duty while on active duty after September 11, 2001. This legislation would also expand eligibility for the Department of Veterans Affairs' Yellow Ribbon Program, which helps students avoid out-of-pocket tuition and fees for education programs that cost more than the allowance set by the Post-9/11 GI Bill.

S. 1693

PVA supports S. 1693, a bill "to amend title 38, United States Code, to expand eligibility for reimbursement for emergency medical treatment to certain veterans that were unable to receive care from the Department of Veterans Affairs in the 24-month period preceding the furnishing of such emergency treatment, and for other purposes." Currently, a veteran who receives emergency care at a non-VA facility can be

reimbursed for those costs only if the veteran had also received care at a VA facility in the preceding 24 months. This legislation would authorize VA to reimburse veterans for emergent non-VA care who were unable to receive care at VA within the 24-month period because of wait times. The strict 24-month requirement is an unfair burden for rural veterans and those near facilities with long wait times. For newly separated veterans, should they have a medical emergency prior to being seen at a VA facility, their claim for reimbursement will be denied. Veterans are then burdened with crushing medical bills through no fault of their own. No veteran should have to choose between receiving care and financial hardship.

S. 1856

PVA understands the intent of S. 1856. This legislation is meant to provide greater employment and due process protections for employees who are suspended for performance. The bill targets individuals whose actions represent a “threat to public health or safety.” We find it hard to believe that the VA does not currently have the authority to remove individuals when the conditions covered by “threat to public health or safety” are met. We also believe that the language in Section 2 should at the very least cover removal for malfeasance or misconduct that is “detrimental to the operations of the Department,” assuming such a circumstance does not already exist. Ultimately, we are not wholly convinced that this legislation will achieve actual accountability that ensures that health care is delivered better or more efficiently.

We appreciate the focus on improving management training. Too many of the problems identified across the VA health care system in recent years have stemmed from ineffective, or simply poor, management. This is not to suggest that all of the problems have been the fault of bad management. We know that there has been substandard performance at every level of the employee ladder in the VA. Change begins at the top with management, but it also requires a commitment to doing the right thing from all employees, a proposition that we believe has not been enforced strong enough across the VA.

S. 1938, the “Career Ready Student Veterans Act”

PVA supports S. 1938, the “Career Ready Student Veterans Act.” This legislation would provide protection for veterans using their GI Bill benefits as they prepare for a career. Since the passage of the Post-9/11 GI Bill, hundreds of training programs and career schools have appeared in every state with the intention of securing the veterans GI Bill funds with little concern for producing a qualified career-ready prospect. These institutions rely on deceptive marketing and false promises to recruit veterans. S. 1938 provides protection for veterans by prohibiting schools lacking appropriate programmatic accreditation from receiving GI Bill benefits. Although some schools may have developed a complete training program, the program they promote may lack appropriate programmatic accreditation, or fail to meet state-specific criteria required for certification or licensure. This legislation will protect veterans from squandering their GI Bill benefits while being misled about future career possibilities.

Draft Legislation on Educational Assistance

PVA supports the changes provided in this draft legislation which makes adjustments, modifications and some necessary limitations of the benefits provided to veterans within the educational programs provided by the VA. Most changes have been previously discussed and approved in the House Committee on Veterans Affairs.

Once again, we thank you for the opportunity to submit for the record. We look forward to working with the Committee to see these proposals through to final passage. We would be happy to take any questions you have for the record.