
KEEPING THE PROMISE TO
**AMERICA'S
VETERANS**

**UPDATE ON DAV'S
KEY LEGISLATIVE
PRIORITIES**

DAV National Convention

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Update on DAV Key Legislative Priorities National Convention 2016

DAV's legislative department has continued our focus on four key legislative priorities during the second session of the 114th Congress to include enacting legislation to: authorize fully developed appeals and address the appeals backlog, improve VA services for women veterans, provide comprehensive benefits for caregivers of disabled veterans of all eras, and reform the VA health care system.

FULLY DEVELOPED APPEALS

Since our last Convention in August 2015, the Department of Veterans Affairs (VA) reports the disability claims backlog, those claims pending over 125 days, to be less than 75,000 as of May 2016, from a peak of 611,000 in March 2013. Much of VA's progress to reduce and manage the claims inventory is due in part to their ongoing transformation efforts that began in 2010. As the claims inventory has come down, the appeals pending workload has risen almost commensurately.

VA's progress toward reducing the claims backlog is commendable; however, with such emphasis placed on eliminating the claims backlog, work on processing appeals at VA's Regional Offices (ROs) had been a lower priority, leading to a growing backlog of appeals. On average, about 11 percent of all VA rating decisions are appealed. If this trend continues, based on VBA's projection to produce over 1.4 million rating decisions annually, 150,000 or more appeals could be filed this year alone. Presently, there are over 450,000 appeals pending before the VA, the vast majority of these are at various processing stages within local ROs and roughly 80,000 of these appeals are within the jurisdiction of the Board of Veterans Appeals (Board).

Toward the end of 2014, DAV, several VSO stakeholders, VA and the Board undertook serious efforts to address the growing appeals inventory. Working together over several months, we arrived at one possible solution to streamline and enhance the appeals process; ultimately what materialized from the combined efforts of this working group was the Fully Developed Appeals (FDA) pilot program. We believe veterans should have a voluntary option to speed their appeals to the Board, however, we also recognize that any new approach to change the current process must carefully balance and protect the due process rights of veterans and ensure accurate decisions.

In the FDA pilot program, veterans would have the option to bypass several preparation and processing steps in exchange for faster and more accurate Board decisions. Veterans would retain the ability to submit additional evidence, along with any arguments in support of their appeals at the time of their voluntarily election into the FDA program.

Another essential feature of the FDA pilot program is a veteran's absolute right to opt out of their election at any time, thereby preserving all appeal processing features of the current appeal format. The FDA is modeled somewhat on the existing and highly successful Fully Developed Claims program that allows veterans to take on the responsibility for gathering their private evidence in exchange for faster rating decisions.

On February 5, 2015, H.R. 800, the Express Appeals Act, was introduced. This bill contained almost all of the components of our FDA proposal. Through the combined efforts of Chairman Miller and Congressman O'Rourke, to include the efforts of DAV's members and supporters, this legislation passed the House in February 2016.

On January 28, 2016, FDA legislation took another step toward reality when several Senators introduced S. 2473, the Express Appeals Act of 2016, the companion bill to H.R. 800. In May 2016, S. 2473 was reported favorably to the full Senate, and awaits further consideration.

While FDA legislation is moving its way through Congress, DAV and other stakeholders are still hard at work addressing the delays plaguing the appeals process. What the working group values above all else is to ensure that any plan would need to preserve a veteran's rights and earned benefits, rather than simply trading them away for faster decisions. Through the course of several months beginning in March 2016, which included several full days of discussions, the working group arrived at another possible solution that has the potential to fundamentally change how VA would process claims and appeals; it is commonly referred to as the "new framework."

After many weeks of deliberations regarding this new claims and appeals processing model, DAV composed a letter expressing conditional support for this new framework that included the endorsement of several leading VSOs. A few elements of VA's proposal were troubling and needed to be addressed to ensure veterans are not adversely affected. Working together with VA, we were able to resolve most of these issues to our satisfaction.

Two relevant bills, H.R. 5083, the VA Appeals Modernization Act of 2016 and H.R. 5620, the VA Accountability First and Appeals Modernization Act of 2016, have been introduced in the House. Also, a similar draft bill is being considered in the Senate, on which DAV testified on May 24, 2016. Many of the components contained within these bills were directly influenced by our recommendations. If the legislation is enacted, it has the potential to provide veterans with a better experience and outcome during VA's adjudication of a claim or an appeal.

Although VA has made significant progress to manage the claims inventory, the appeals inventory continues to outpace VA's processing capacity. If tangible solutions are not implemented to significantly improve the appeals process, the appeals backlog could reach a true breaking point that would leave veterans facing longer and longer wait times to gain resolution of their appeals; this is an unacceptable scenario.

The FDA and other measures being considered within H.R. 5083 and H.R. 5620, hold real promise for ill and injured veterans, their dependents and survivors' seeking accurate and timely disability determinations. There is still work to be done to bring these legislative proposals to fruition, but DAV continues to work alongside our VSO counterparts, the VA, Congress and other stakeholders to ensure that any reforms being considered are balanced against the best interests of veterans.

WOMEN VETERANS

DAV has continued its commitment to meet the unique needs of women veterans and foster greater awareness of the roles of women serving in the military now and in the past. Due to a significant increase in women serving, and a change occurring in military policy allowing women to begin serving in occupational specialties traditionally held by men only, it is necessary for the Department of Defense, the VA, and other relevant federal or private institutions to be aware and prepared in order to provide quality health care and services to women. These challenges will range from not only the basic health care services provided to women, those specific to gender, but will also include a shifting age distribution to younger women utilizing VHA and those seeking benefits.

As women transition from military to veteran status, the federal government must aid them in meeting their educational goals, obtaining meaningful, gainful employment and providing support and services to help them successfully reintegrate into their families and their communities. As the DOD recognizes and begins to acknowledge the equal contribution of women by authorizing them to serve in any occupation within the military, it is the duty of our great nation to also recognize their contributions and sacrifices and treat them with the same respect and dignity that is bestowed upon their male counterparts.

In 2014 DAV commissioned and published an important study to evaluate the existing programs across the federal landscape for women transitioning from military service. The report highlights that despite a generous array of government-provided benefits to assist veterans with transition and readjustment, serious gaps are evident for women in nearly every aspect of current federal programs. Although the report was released in 2014, its findings are still valid today, and are responsible for spurring the introduction of 14 bills in the House of Representatives and the Senate, as follows.

- S. 469/H.R. 3365 Women Veterans and Families Health Services Act of 2015;
- S. 471/H.R. 1356, Women Veterans Access to Quality Care Act of 2015;
- S. 2487/H.R. 2915, Female Veteran Suicide Prevention Act (Public Law 114-188);
- S. 2210 Veterans Partners Efforts to Enhance Reintegration Act;
- H.R. 1496, to improve the access to child care for certain veterans receiving health care at a VA facility;
- H.R. 1575, to make permanent the pilot program on counseling in retreat settings for women veterans newly separated from service in the Armed Forces;
- H.R. 1948, Veterans Access to Child Care Act;
- H.R. 2054, to provide for increased access to VA medical care for women veterans;
- H.R. 423 Newborn Care Improvement Act;
- H.R. 3960 Reduce Homelessness for Female Veterans Act; and
- H.R. 5229 Improving Transition Programs for All Veterans Act.

Nearing the end of the 114th Congress, DAV is in a leading position to influence Congress to advance these bills and we are hopeful to enact into law as many of them as possible.

CAREGIVER SUPPORT SERVICES

Another group that deserves unwavering support by Congress and the American people are family caregivers of severely injured or ill veterans of all military service periods. Only with the help of their caregivers are many of these veterans able to reintegrate into their communities, remain out of institutions and achieve their highest levels of recovery and quality of life. Family caregivers are critical members of a veteran's health care team—they are unsung American heroes who often sacrifice their own health, well-being, employment, educational and other life goals and opportunities—to care for their loved ones, our nation's true heroes.

DAV believes it is only proper that family caregivers be recognized for their decades of sacrifice and dedication—and that they receive the support and assistance needed to fulfill their vital role. We were pleased to work with Congress in enacting Public Law 111-163, the Caregivers and Veterans Omnibus Health Services Act of 2010, authorizing VA to provide comprehensive support and services to caregivers of veterans injured on or after September 11, 2001.

Thousands of families are being helped by these new VA services; however, a much larger group of families carrying the same burdens receives only partial VA support, or none at all. As one of DAV's priorities, we call on Congress to continue the work it began and address this inequity by extending equal benefits, supports and services to family caregivers of veterans of all military service periods. The particular calendar date on which an injury or illness occurred should not be a reason for legislation to discriminate against one group of veterans to favor another. They are all equal in our eyes and equally deserving of our support and the support of the nation.

We acknowledge there is a significant cost for expanding this program. However, the overall cost according to the Congressional Budget Office (CBO) does not take into account the total impact of this change. Research has shown that family caregiving results in cost avoidance based primarily on delaying or avoiding long-term, high-cost nursing home placements, and home caregiving reduces use of health services in general. The amount of cost avoidance increases when accounting for lower health care utilization.

Under the leadership of Chairman Isakson and Ranking Senator Blumenthal, all members of the Senate Veterans Affairs Committee's deserve praise for their hard work in advancing S. 2921, the Veterans First Act, which contains provisions for a phased-in expansion of participation to make veterans of all eras eligible for VA's Comprehensive Caregiver Support program. The bill also includes provisions DAV recommended that would improve and enhance VA's Comprehensive Family Caregiver program, such as requiring a comprehensive study on caregivers and seriously injured veterans. We also applaud Senator Murray's unwavering support to ensure inclusion of the provision to improve and expand this important program.

The House Veterans' Affairs Committee held a hearing on VA's Comprehensive Caregiver Support program and subsequently passed H.R. 3989, the Support Our Military Caregivers Act. DAV supported this measure and made recommendations which were included in the version passed by the House. However, because legislation to expand eligibility for VA's Comprehensive Caregiver Support program had yet to be acted on, the DAV, working together with other leading veterans and military organizations sent a letter in May 2016 to leaders of the Committee urging a legislative hearing on H.R. 2894, the Caregivers Access and Responsible Expansion for All Veterans Act and H.R. 1969, the Military and Veteran Caregiver Services Improvement Act of 2015.

We will continue with determined focus to work with Congress to enact reasonable and responsible legislation to provide severely ill and injured veterans and their caregivers equality of access to comprehensive VA caregiver benefits and services.

Update on Commission on Care

As mandated by Public Law 113-146, a Commission on Care was established to make recommendations to VA, the President and Congress about how VA should improve access and delivery of veterans health care over the next 20 years. While we were pleased that former DAV Washington Executive Director Dave Gorman was appointed as one of the Commission members, the majority of the other 14 appointees had little knowledge of VA health care. In fact, only a couple had ever used VA programs or care, and none had actually worked within the VA health care system.

Last fall and winter, we prepared and delivered a number of documents to the Commission to emphasize the value that the VA health care system provides to veterans, particularly to ill and injured veterans, and testified before the Commission in December on a panel with our IB partners. However, in March we discovered that a bloc of seven Commission members had developed what they called a "strawman document" in which they proposed to completely abolish the VA system and move all veterans into the private sector over the next two decades. Knowing this would be devastating for millions of veterans, especially those who rely on VA's specialized services for serious injuries and illnesses, we organized opposition to this outrageous and dangerous proposal. We quickly drafted and delivered a swift rebuttal to the "strawman document" with a [joint letter](#) signed by leaders of the eight largest and most influential veterans service organizations. We also requested and received another opportunity to present our views before the Commission in April in order to make clear our united opposition to any proposals to dismantle the VA health care system, as well as to again promote our framework for reform. We continued to engage regularly with the professional staff of the Commission up to the release of its final report in July.

Although we are continuing to review the report and recommendations of the Commission, it is clear that the Commission moved away from its strawman document, rejecting any effort to abolish the VA health care system. We were pleased to see that

the Commission agreed with our core recommendation of creating local integrated veterans health care networks to expand access by adding community capacity to the VA health care system, rather than replacing it with private sector providers. The report contains a number of other recommendations about how to reform management and operations at VA, some of which we support, some we do not, and others that require more study. We have concerns about the recommendations to create a new board of directors to oversee VA health care, removing the oversight authority and accountability of the VA Secretary and Congress. This independent and unelected board would also lessen the influence that veterans and VSOs exert over VA health care. We also have questions about how the Commission's vision of expanding choice would affect the viability of VA medical centers and clinics nationwide.

Over the coming months we will continue to analyze the Commission's recommendations and expect to offer testimony in the fall to the House and Senate Veterans' Affairs Committees on this subject.

Relevant Links:

[Commission on Care Report](#)

[Michael Blecker Letter](#)

[Suzanne Gordon Washington Monthly Article](#)

[Article by Under Secretary for Health at the VHA from Federal Practitioner](#)

[DAV Setting the Record Straight](#)

On June 21, 2016, the Roosevelt Institute, in conjunction with the Union Veterans Council AFL-CIO, sponsored a special forum in Washington. The information below was provided to forum participants and may be of use to you in better understanding VA's current situation and the challenges we face in protecting and strengthening the system for future generations of injured and ill veterans.



KEEPING THE PROMISE: WHAT'S NEXT FOR THE VA?



Related Articles and Reports

Prospect Blog

Unfriendly Fire: Despite Ideological Attacks and Under-Funding, the Veterans Healthcare Administration is a Model Public System by Suzanne Gordon <http://prospect.org/article/why-veterans-health-system-better-you-think>

Washington Monthly

The VA Isn't Broken, Yet: Inside the Koch Brothers' Campaign to Invent a Scandal and Dismantle the Country's Most Successful Health Care System by Alicia Mundy <http://washingtonmonthly.com/magazine/maraprmay-2016/the-va-isnt-broken-yet/>

RAND Studies

RAND Study, Special Feature: The Cost and Quality of VA Mental Health Services <http://www.rand.org/health/feature/veterans-mental-health.html>

RAND Study, Quality of Care for PTSD and Depression in the Military Health System http://www.rand.org/pubs/research_reports/RR978.html

RAND Study, Perceptions of Behavioral Health Care Among Veterans With Substance Use Disorders http://www.rand.org/pubs/external_publications/EP51860.html

RAND Study, The Quality of Medication Treatment for Mental Disorders in the Department of Veterans Affairs and In Private-Sector Plans http://www.rand.org/pubs/external_publications/EP50966.html

RAND Study, Balancing Demand and Supply for Veterans' Health Care http://www.rand.org/pubs/research_reports/RR1165z4.html

RAND Study, Resources and Capabilities of the Department of Veterans Affairs to Provide Timely and Accessible Care to Veterans https://www.rand.org/pubs/research_reports/RR1165z2.html

RAND Study, Ready to Serve: Community-Based Provider Capacity to Deliver Culturally Competent, Quality Mental Health Care to Veterans and their Families
http://www.rand.org/pubs/research_reports/RR806.html

Iraq and Afghanistan Veterans of America Website

Iraq and Afghanistan Veterans of America Research java.org/research

Iraq and Afghanistan Veterans of America Campaigns java.org/campaigns

Washington Post

Obama Opposes Privatization of the Department of Veterans Affairs

<http://www.nytimes.com/2016/06/06/us/obama-opposes-privatization-of-the-department-of-veterans-affairs.html>

Federal Practitioner

Why VA Healthcare Is Different by The Honorable Dr. David J. Shulkin, MD, VA Under Secretary for Health, <http://www.fedprac.com/articles/opinion/article/why-va-health-care-is-different/3fae7045835284760974a95a8ff46193/ocregister.html>

Disabled American Veterans

Setting the Record Straight Campaign Video: www.youtube.com/profile?user=DisabledVeterans

Setting the Record Straight Campaign Video: www.dav.org/operation-keep-promise-2016

The Solution to VA Reform Isn't the Private Sector by Garry J. Augustine

<http://taskandpurpose.com/solution-va-reform-isnt-private-sector/>

Give Veterans Greater Access to Quality Care, Not Health Care Credit Cards by Garry J. Augustine

<http://taskandpurpose.com/give-veterans-greater-access-quality-care-not-health-care-credit-cards/>

Treating the Whole Veteran by Garry J. Augustine

<http://www.baltimoresun.com/news/opinion/oped/bs-ed-veterans-whole-20160310-story.html>

Op Ed: Vets Do Not Want the VA Privatized by Garry J. Augustine

<http://militaryadvantage.military.com/2016/04/veterans-do-not-want-the-va-privatized/>

'Centers of Excellence' for Veterans; Far from an Excellent Idea by Garry J. Augustine

<http://thehill.com/blogs/congress-blog/healthcare/270753-centers-of-excellence-for-veterans-far-from-an-excellent-idea>

The Hill

No, the VA Is Not Broken by J. David Cox, Sr. National President, American Federation of Government Employees and Chair, Union Veterans Council

<http://thehill.com/opinion/op-ed/280085-no-the-va-is-not-broken>

Got Your 6

Got Your 6 Website - <https://gotyour6.org/>

Got Your 6 Research - <https://gotyour6.org/programs/research/>

Got Your 6 Storytellers - <https://gotyour6.org/programs/storytellers-2015/>

The Military Advantage Blog

Care Commission Shocker: The Push to End VA Healthcare by Tom Philpott

<http://militaryadvantage.military.com/2016/03/care-commission-shocker-the-push-to-end-va-healthcare/>

Forbes

Proposed Board for a Privatized VA Would Push Vets Out in the Cold by Charles Tiefer

<http://www.forbes.com/sites/charlestiefer/2016/06/10/proposed-board-for-a-privatized-va-would-push-vets-out-in-the-cold/#4abba1844baa>

Paralyzed Veterans of America

Veterans' Health Care in Crosshairs of Privatization Forces by Roberta Wood

<http://www.peoplesworld.org/veterans-health-care-in-crosshairs-of-privatization-forces/>

Paralyzed Veterans of America Outraged Over "Caring for Our Heroes in the 21st Century Act"

<http://m.marketwired.com/press-release/paralyzed-veterans-america-outraged-over-caring-our-heroes-21st-century-act-2132771.htm>

Open Letter to the Commission on Care: Why Privatizing VA Healthcare Would be a Huge Mistake

<http://www.businesswire.com/news/home/20160324006345/en/Open-Letter-Commission-Care-Privatizing-VA-Healthcare>

Paralyzed Veterans of America Responds to Criticism Leveled by Concerned Veterans for America After Opposing Draft Bill Supporting VA Privatization

<http://www.power-eng.com/marketwired/2016/06/10/paralyzed-veterans-of-america-responds-to-criticism-leveled-by-concerned-veterans-for-america-after.html>

Vet Groups Upset with Carson's Plan to Eliminate VA by Leo Shane III

<http://www.militarytimes.com/story/veterans/2015/08/28/carson-dump-va-reaction/71312038/>

Provided to DAV courtesy of the Roosevelt Institute and the Union Veterans Council, AFL/CIO