

S. HRG. 116-257

JOINT HEARING ON THE LEGISLATIVE PRESENTATION OF THE AMERICAN LEGION

JOINT HEARING OF THE COMMITTEE ON VETERANS' AFFAIRS BEFORE THE U.S. SENATE AND THE U.S. HOUSE OF REPRESENTATIVES ONE HUNDRED SIXTEENTH CONGRESS SECOND SESSION

MARCH 11, 2020

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JOINT HEARING ON THE LEGISLATIVE PRESENTATION OF THE AMERICAN LEGION

WEDNESDAY, MARCH 11, 2020

U.S. SENATE,
AND U.S. HOUSE OF REPRESENTATIVES,
COMMITTEE ON VETERANS' AFFAIRS,
Washington, DC.

The Committees met, pursuant to notice, at 10 a.m., in room SD-G50, Dirksen Senate Office Building, Hon. Jerry Moran and Hon. Mark Takano, Chairmen of the Committees, presiding.

Senators present: Moran, Boozman, Rounds, Tillis, Sullivan, Tester, Brown, Manchin, and Sinema.

Representatives Present: Takano, Lamb, Brindisi, Rose, Pappas, Cunningham, Cisneros, Peterson, Allred, Underwood, Roe, and Bost.

OPENING STATEMENT OF HON. JERRY MORAN

Chairman MORAN. The hush suggests that it is time to commence our meeting, and I am happy to do that.

Over the past few weeks we have had the pleasure and the ability to learn from a number of veterans and veteran service organizations. Today we gather with The American Legion, and this is our fifth hearing and final legislative presentation by a VSO.

Commander Oxford, thank you and your fellow Legionnaires for joining us, my colleagues and I, one of which is seated next to you. We are looking forward to hearing from you and learning the Legion's top legislative priorities.

As we have done previously, only to keep up with my colleagues here, I would take a moment to recognize the Kansans who are here from my State, members of The American Legion, friends and important citizens of our State, one and all. If they would stand and be recognized, I would appreciate seeing their presence.

[Applause.]

Chairman MORAN. Thank you and thank you for the conversation we had in my office yesterday.

All of you, your willingness to join us today is a testament of your unwavering commitment to your brothers and sisters in arms.

As we all know, transforming the VA into a 21st century VA is a monumental task that requires all hands on deck. Veteran service organizations, like The American Legion and their members, play a critical role in this process. You are the front lines and see first-hand where the VA is thriving and where it faces challenges.

I have indicated many times that what I know, and my legislative priorities are in large part determined by the conversations I have in Kansas and across the country with veterans, and certainly The American Legion is a significant component of my knowledge of where attention is needed.

The American Legion gives voice to veterans who at times can feel unheard or marginalized. You also provide an annual check for our communities and help make certain that we are on the right track. My father was a member of The American Legion post in my hometown and I am the son of The American Legion and I am honored to have that distinction and honored to do so in respect for my father.

Commander Oxford, while I was reading over your written testimony I noticed the Legion and I share a number of priorities, and I am glad for that, from enhancing suicide prevention to addressing toxic exposure to improving women's health care. You have my commitment that the Senate Veterans' Affairs Committee will continue to work with you and the larger veteran community on addressing these and other priorities.

We look forward to your presentation today and will continue to work with you to make certain that veterans' voices are heard and that they receive the care and attention that they deserve.

It is my pleasure now to turn to Chairman Takano, the Chairman of the House Veterans' Affairs Committee.

OPENING STATEMENT OF HON. MARK TAKANO

Chairman TAKANO. Thank you, Chairman Moran. It is a honor to be here for the last, but certainly not the least, joint House and Senate veteran service organization hearing of the year. I would like to welcome all of The American Legion members and auxiliary members who have joined us today, and I look forward to your testimony.

Before we get started I would like to recognize all of our members from my home State of California. Would all the Californians please stand or raise their hand.

[Applause.]

Chairman TAKANO. Welcome. Welcome.

Reading today's testimony it is clear that we share many of the same priorities. We must address the national crisis of veteran suicide. Veterans must receive high quality health care. We must un-

derstand the full impacts of toxic exposures and make sure that another generation of veterans does not have to wait for the benefits and care they need and deserve.

In addition, as our veteran population grows increasingly more diverse, we must support our women, LGBTQ, minority, and Native American veterans. The legislation we passed must improve access to culturally competent care for all veterans.

As Chairman, I have made reducing veteran suicide my number one priority. It is our job to create sound, well-researched policy and not simply perpetuate approaches that are not proven to prevent suicide. We take that responsibility very seriously. Our approach to suicide prevention takes into account multiple factors that could reduce veteran suicide, everything from lowering the economic burdens on veterans to increasing access to care and improving crisis intervention for those at high risk.

One critical step toward addressing veteran suicide is to expand access to emergency mental health care for veterans in crisis. That is why I introduced H.R. 5697, the Veterans Access Act. This legislation would ensure all veterans, regardless of their discharge status or eligibility for other VA health care benefits, have access to the emergency mental health care they need. I look forward to working with The American Legion to pass this bill and save veterans' lives.

We also have a duty to ensure this administration recognizes the impact of toxic exposure during military service, and that VA takes action before it is too late. Our veterans should not have to wait 40 years for the VA to recognize that a veteran is suffering from past exposure in order to get the benefits they earned.

For example, I am urging the administration to add four diseases to the Department's presumption list that we know to be linked to Agent Orange exposure. This will ensure many more veterans can access crucial VA disability and health care benefits. I know that with the support and insight of The American Legion we can continue to hold the administration accountable and work to fulfill the promises that we have made to our veterans. Let me just emphasize, our Vietnam veterans have waited too long. Now is the time to add those conditions to the presumptive list.

I look forward to hearing your testimony and thank you all for the work that you have done and service to veterans and their families.

I now yield back, Mr. Chairman.

Chairman MORAN. Mr. Chairman, thank you, and I now recognize the Ranking Member of the House Committee, Congressman Roe.

OPENING STATEMENT OF HON. PHIL ROE

Dr. ROE. Thank you, Mr. Chairman, and good morning, Commander Oxford. It is a pleasure for me to be here with Chairman Takano, Chairman Moran, and Ranking Member Tester to welcome you and your fellow Legionnaires to Washington. This is my 12th and final year in Congress and so my final time attending this hearing, and when you leave, Commander, they send you this sheet called Departing Members. I am not planning on departing. I am just leaving Congress.

It has been an honor for me to attend the Legion's annual hearing, joint hearing, all these years. As I prepare for my retirement I can say, without a moment's hesitation, I am filled with tremendous pride and hope for our country's future, because the patriotism and the passion of Legionnaires across this country, many of whom I have had the privilege of meeting and getting to know personally.

I want to thank each and every one of you for your continued service. In particular, I want to welcome the Legion's stellar national leadership team who work tirelessly day in and day out under the direction of Commander Oxford. I thank you for your staff. They have been great to work with.

Sir, I am so grateful for your decades that you spent defending our freedoms, first in the Marine Corps and then in the Army, and now as the National Commander of The American Legion. I am glad to see you are here with us today, and I also want to acknowledge the members of The American Legion auxiliary. We know who does all the work, the auxiliary. The many hats that you wear as spouses, as volunteers, as caregivers and more, it does not go unnoticed or under appreciated, and I thank you for that.

Finally, I want to say a special hello and thanks to the Legionnaires who are here today from my great State of Tennessee. I met with you. If you would please stand so we can recognize you. I know Bob is here. Yep, there we are.

[Applause.]

Dr. ROE. Commander Oxford, you know, in your testimony, "The American Legion believes veterans have given this country far more than what is asked in return." I could not agree more with you. It would be impossible for me to detail all of the work that The American Legion has performed throughout your more than a century of service or the value that the Legion continues to bring to bear on matters of military veteran national security policy even now.

It is with the help of the Legion and working with our Committees and with our partners in the Trump administration that the Department of Veterans Affairs has undergone such a positive

transformation over the last few years. Thanks to our mutual efforts I am proud to report that veterans today have greater access to care, greater control over their care than ever before. Veterans can use their GI Bill benefits whenever they choose.

Veteran unemployment reached near record lows. Veterans getting their appeals for disability compensation decided faster and more efficiently, thanks to Mr. Bost right here, his bill. Veterans of the Blue Water Navy are receiving the benefits they have earned, and that took way too long to get done. Fewer veterans are homeless. Fewer veterans are dependent on opioids. The widows tax has been repealed. The VA has more funding, more staff, and has risen from one of the lowest-ranking agencies to one of the top six best places to work in the Federal Government.

I know in my own hometown of Johnson City, TN, I almost never hear a negative comment about the VA hospital there. I am extremely proud of that.

We should all be proud of those successes, even as we acknowledge that work remains, much of which is detailed in the commander's testimony. Looking ahead, we must remain steadfast in our efforts to prevent veteran suicide by instilling hope and purpose in all of those who have served and doing a better job of leveraging communities of care to support them and their families; to empower veterans to succeed in their civilian lives, to realign and modernize the VA health care system so that it meets our Nation's veterans where they live and serves them well; to expand VA's caregiver program so that it serves caregiver veterans of all eras; to those who have experienced toxic exposures during their time in uniform; and to continue aggressive oversight of every aspect of VA, our Nation's second-largest bureaucracy; to ensure that every veteran who walks into a VA office, facility, or clinic receives timely, quality care.

I look forward to discussing these issues and more with you today, Commander Oxford, and to building on our successes over the past 3 years on behalf of Legionnaires and veterans across the country. I salute you and I yield back my time.

Chairman MORAN. Congressman Roe, thank you very much. I am going to recognize, in just a moment, Senator Tillis. Commander, I want you to know that you are going to see me depart just momentarily, about the time that you begin to testify, and I hate that.

Dr. ROE. Please leave, not depart.

Chairman MORAN. Oh, depart. I am not departing. Thank you. [Laughter.]

Chairman MORAN. I intend to come back alive and well in just a few moments. I have a couple of bills pending another committee that are being voted on. But, I will return to make certain that we

pay significant attention to what you have to say and the questions and answers that I will learn from.

At this moment let me now turn to my colleague from North Carolina, Senator Thom Tillis. Thom is a member of our Senate Veterans' Affairs Committee, active, fully engaged, and a great ally in the effort to make sure that veterans are well cared for.

I now recognize, you, Senator Tillis.

SENATOR THOM TILLIS

Senator TILLIS. Thank you, Chairman Moran, Chairman Takano, Ranking Member Roe, and distinguished Members of the Committee. If I may, as a point of personal privilege, ask, anybody who is from North Carolina, either currently or passed through North Carolina in relation to your service, please stand up or raise your hand.

[Applause.]

Chairman MORAN. Senator Tillis, you one-upped all of us, and with that I am going to walk out on you, not the Commander.

[Laughter.]

Senator TILLIS. Well, thank you, Mr. Chairman, and first I am very proud to be sitting next to Bill Oxford. I have had the distinct pleasure of getting to work with him many times over the past several years in his many capacities, as he has continued to serve after his military service. He has virtually held every position one could hold within The American Legion, both in North Carolina and at the national level.

Bill Oxford was elected National Commander of The American Legion on August 29, 2019, during the organization's 101st national convention in Indianapolis. He has been a member of the Nation's largest veterans' organization since 1986. A native of Lenoir, North Carolina, Mr. Oxford is a paid-up-for-life member as well as the past commander of Post 29 in Lenoir. He served as the Department Commander of North Carolina American Legion from 2010 to 2011.

He is a veteran of the U.S. Marine Corps. Mr. Oxford was an aviation electronic technician for the A6 Intruder and served in Vietnam during his initial enlistment. After being discharged as a sergeant in 1970, Mr. Oxford joined the North Carolina National Guard. He subsequently attended Officer's Candidate School and transferred to the U.S. Army Reserve where he ultimately retired as colonel after more than 34 years of military service.

A former mayor and city councilmember of Cahah's Mountain, North Carolina—I think I did not think I could pronounce that right, they gave me a phonetic one—he has worked since his high

school as a high school student with most of his career choices being in maintenance and engineering field.

Mr. Oxford has also served his community by volunteering as a coach, umpire, referee, administrator in several youth athletic programs, and he has also served as the public address announcer for Post 29 American Legion baseball team.

Mr. Oxford's lifelong record of service to our Nation and to our community have prepared him well to lead The American Legion. His theme as National Commander of The American Legion is "a foundation for the future," as the organization enters its second century of service. That is a fitting theme for Mr. Oxford's tenure, given our work together on the Legion Act, a bill that expands eligibility for membership for The American Legion to veterans of all eras. I was proud to co-lead this bill with Senator Sinema and worked closely with The American Legion to successfully get the bill signed into law just last summer.

With that, it is my great privilege and honor to welcome a fellow North Carolinian, Bill Oxford, to this hearing on behalf of The American Legion. I know you are going to do us proud.

[Applause.]

Senator TILLIS. Mr. Chairman, I did tell him not to mess up.

STATEMENT OF JAMES W. "BILL" OXFORD; ACCOMPANIED BY JOSEPH SHARPE; DANIEL SEEHAFFER; MELISSA BRYANT; CHANIN NUNTAVONG; RALPH BOZELLA; AND VINCENT TROIOLA

Mr. OXFORD. I will try my best. Thank you, Senator Tillis, for the kind introduction and for your bipartisan leadership in such areas of concern to The American Legion as burn pit exposure, timely VA health care delivery, and career opportunities for veterans.

Chairman, if I might, before I proceed I would like to take a moment to recognize all of the past national commanders of The American Legion. Gentleman and lady, would you please stand?

[Applause.]

Mr. OXFORD. The American Legion Auxiliary past National President and current President, Nicole Clapp.

[Applause.]

Mr. OXFORD. And, past National Commander of the Sons of The American Legion and their current National Commander, Clint Bolt.

[Applause.]

Mr. OXFORD. Folks, we have got a great team.

I would also like to say thank you to the members of the House and Senate Committees on Veterans' Affairs for once again giving us this opportunity. The American Legion has delivered the legisla-

tive priorities of our Nation's veterans and their families to Congress in hearings just like this for more than 10 decades, and those priorities have produced impressive results—fair health care and timely benefits for veterans disabled by military service, from mustard gas to Agent Orange to IEDs; a code of respect for the U.S. flag; an arm of the Federal Government solely dedicated to the needs of veterans; veterans preference hiring; a GI Bill of Rights that changed the world and continues to do so; recognition and pursuit of effective treatment for Post Traumatic Stress Disorder among veterans; support for caregivers of disabled veterans; improved services for women.

Our journey can be traced back to the original purpose of The American Legion when World War I veterans came home to virtually no help or support from the government that sent them to fight. Our mission today is a continuation of the work they began. From World War I we learned that we needed a VA. From World War II we saw what could be accomplished for the entire nation through GI Bill benefits and veterans' preference hiring.

The Vietnam War later produced an expectation of accountability from the Federal Government that veterans exposed to toxic herbicides during their service, and those who came home with invisible wounds, would not be dismissed or forgotten.

We continue this mission on all those fronts. Between Vietnam and 9/11, The American Legion and Congress worked together to reinvent the Veterans Administration, one that is now described, and I quote, "the best care anywhere." Today so many of these issues, and new ones for a new generation, continue to occupy The American Legion's priority list.

That is because The American Legion, Congress, the VA, the Pentagon, and the White House all share in a continuous mission to ensure that these important laws and policies are effectively implemented, given critical oversight, and are constantly improved. Implementation, oversight and improvement—that triad is the prevailing theme in The American Legion legislative priority list for the second session of the 116th Congress.

Let me start with VA health care. Much has been promised, and even more is expected, from the VA MISSION Act. That legislation was borne of a deadly crisis 6 years ago when veterans whose medical appointments were not scheduled, even though some in the VA thoughtfully claimed they were. We all worked hard over the last 6 years to convert that crisis into confidence in the VA's future.

Today we are in a better place on VA accountability, but an overriding issue attached to the meltdown of 2014 persists—timely access to care. As we press forward with such innovations as Project Atlas, which aims to make good use of American Legion post homes

to provide VA telehealth services for veterans, we remain highly concerned about another issue—oversight of non-VA providers.

We understand the primary objective, delivery of care for veterans as quickly and efficiently as possible, but the long-term strategy must not lead the VA any further down the road to privatization.

In some areas where community care has been offered through the Choice program, which the MISSION Act replaces, non-VA providers are unwilling to accept VA patients, due to compensation differences or timely payments. That leaves serious concern that veterans will be forced to seek out the provider of least resistance rather than VA's best care anywhere.

We must always remember why the VA is special and must be protected. You will find these reasons in the testimony books before you today. In them you will see, for instance, how treatment for combat-caused PTSD and TBI is a VA responsibility, not one delegated to the private sector. Advances in alternative therapies for these conditions are coming from veterans and VA success stories, stories we are still discovering every day, from equine therapy to yoga to peer support to clown therapy to PTR MS. These are dots for the VA to connect in support of veterans facing PTSD, not for other providers.

When you combine the chronic pain of military injuries with PTSD or TBI, and then prescribe a pharmaceutical cocktail to blot it all out, a common result is isolation, and isolation is a major contributor and the most heartbreaking issue facing veterans today, the high suicide rate.

The American Legion conducted an online mental health survey in 2019 that showed our respondents, 30 percent, personally, knew a veteran who died by suicide. Sixty-seven percent indicated they would be willing to get formal suicide prevention training to help reduce the rate.

As more and more victims of military sexual trauma step forward to report these unthinkable violations of trust, we must stand together behind The American Legion policy on this matter—zero tolerance. But, for survivors, we call on Congress to provide emphatic oversight to ensure that VA is well resourced to install effective, discreet, and easily accessed services, administered by qualified professionals for these veterans.

Like treatment for PTSD and TBI, care for MST survivors is a VA responsibility, not a provider unlikely to understand the military dynamics involved.

Women veterans are currently over 2 million, and are increasing by nearly 18,000 per year, and represent the fastest-growing group

entering the VA system. We have found that VA medical services specific to their needs are inconsistent and lacking in many areas.

In our shared vision to provide oversight and make improvement in critical areas, we must continue to ask our Nation's VA health care facilities how they are fulfilling the needs of women veterans, hold them accountable to necessary changes, and critically measure their performance in the name of responsible oversight.

The American Legion's System Worth Saving and regional office action review site visits provide our organization important insights into the challenges and best practices of the VA medical system in local communities. Typically, these visits begin with town hall meetings where veterans openly discuss the performance of their VHA and VBA providers. I would like to invite Members of Congress and their staff to join us in these events for the most important level of oversight, first-hand from the veterans we serve. Each year, The American Legion prepares and distributes a System Worth Saving report to Members of Congress and the Veterans Administration so they can use our findings to implement changes and share success stories that can be emulated elsewhere in the system.

Significant progress has been made at VBA to reduce the backlog of undecided claims and appeals, and the Appeals Modernization Act is already exceeding expectations. We are confident this will continue as we watch the backlog shrink in the months ahead.

Significant progress has also been made to roll out the Forever GI Bill, the biggest expansion of that benefit in over a decade. But, The American Legion has some serious GI Bill concerns that need legislative attention, one of which is immediate, the other to help prevent the problem in the future.

We call on Congress to pass the Protect the GI Bill Act to reinstate benefits for student whose for-profit schools went out of business before they finished their degree programs. These veterans were often aggressively recruited by for-profit schools and are stuck with no degree and no GI Bill benefits to seek an education elsewhere.

Once that is accomplished, we further ask Congress to pass the Veterans Education and Taxpayer Spending Act to close what is known as the 90/10 loophole, which now counts VA and DOD education funding as, and I quote, "private dollars." They are not private dollars. They are government dollars, just like any other Federal student aid. This loophole has led to aggressive and even deceptive recruitment by for-profit schools, which in the worst cases have left veterans without degrees and drained of their GI Bill benefits.

If history has taught us anything, the Forever GI Bill will not, by any means, be the final GI Bill. The American Legion will always be looking to improve it.

On January 1, 2020, VBA began reviewing Blue Water Navy Act claims. We are thankful that this bipartisan legislation was finally signed into last law year on behalf of tens of thousands of Vietnam War veterans suffering from diseases related to their offshore exposure to Agent Orange. Disability benefits for those veterans were wrongly suspended many years ago, and many of them have died from their service-connected conditions, since then, so this implementation is long overdue.

More recently, the National Academy of Medicine has recommended that four new conditions be added to the list as presumptively caused by Agent Orange exposure—bladder cancer, hyperthyroidism, hypertension, and Parkinson’s-like symptoms. Science backs up the argument that these conditions need to be added now, but to our knowledge no action has been taken. We call on Congress to give those disabled veterans the care and recognition they so rightly earned—implementation, oversight, improvement.

We have, in military terms, a target-rich environment. The American Legion is firing on those targets at the community, State, and national level. One example of the Legion’s commitment to veterans and military personnel came a little over a year ago when our organization raised and delivered over \$1 million in cash grants—not loans—to junior enlisted Coast Guard families whose paychecks were delayed by the government shutdown. In addition to the grants, local posts across the country collected food, diapers, toiletries, and fulfilled other needs for these Coast Guard families with children at home.

To prevent this from ever happening again, we ask that you urge your colleagues, and appropriate committees, to pass the Pay Our Coast Guard Act. That measure will exempt members of the Coast Guard, just like any other branch of service, from pay disruption in the event of a shutdown.

Passage of the Legion Act last summer gave long-awaited recognition to more than 1,600 Americans who have died or were wounded in service outside previously designated war areas. It is fact that our Nation has been in a perpetual state of armed conflict since December 7, 1941. We owe all who have served since then the same level of respect as others who swore with their lives to protect our Nation.

We are confident that the VBA will continue to improve the VA claims and appeals processes. Like Dr. Paul Lawrence, Under Sec-

retary for Benefits at VA, we want 2020 to be—VBA’s hashtag campaign says “the best year ever.”

We stand against privatizing the VA health care system, but we continue to stand for its improvement. That kind of oversight and advocacy, we believe, can and will make the VA the best care anywhere.

We intend to work hard, arm’s length with Congress and the administration, to improve treatment of PTSD, build a better care environment for women veterans, help the homeless get on their feet, demand that VA claims are resolved faster and accurately, protect student veterans from GI Bill abuses, and continue assisting in the difficult transition from military service to civilian life.

Nearly all of our marching orders can be found in one form or another throughout the history of The American Legion’s relationship with Congress. Many of our shared accomplishments can be credited to a generation of veterans whose war ended 75 years ago this year, the men and women who turned their GI Bill benefits into a half-century of American prosperity and fought to make the VA what it is today.

In 2017, The American Legion National Convention passed a resolution to exempt from means testing all living World War II veterans not already enrolled in the Veterans Administration. This is not unprecedented. A similar measure was passed in 1996, for the last living veterans of the Spanish-American War and World War I. About 75 percent of surviving World War II veterans are already enrolled in the Veterans Administration, so this does not amount to a large number. It would be a small gesture of gratitude for these men and women to whom the world owes so much.

As we renew our vows to those who served our Nation so effectively and bravely today, let’s remember those who came before us and grant them access into the system of respect and care they helped invent.

Thank you, God bless America’s veterans, and God bless America.

[Applause.]

Chairman TAKANO [presiding]. Well, thank you, Commander Oxford, for your testimony. I am going to recognize myself for 5 minutes to begin the questioning. Actually 3 minutes.

Commander, I will begin with this question. I am very pleased you made comment about the abuse of for-profit colleges. The Department recently announced plans to halt new GI Bill enrollment at institutions that engaged in predatory practices.

In light of this decision, what are the next steps that you think Congress should take to protect student veterans?

Mr. OXFORD. I would like to turn that question over to Chairman Seehafer for his idea.

Mr. SEEHAFFER. Thank you very much, sir, for the question. You know, as the family members behind me, we always say that we are boots on the ground, and obviously preparing for your question and these things that come in front of us, I wanted to share with you something that I know you are concerned about, as well as ourselves.

This is really, I would say, hot off the press. Last year, we had a young Legionnaire, also on part of our staff, that attended the Army's Advanced Leadership Course, right, and one of his battle buddies was pursuing a doctorate in national security from a particular university. It was inspiring to him to see him stay up late, you know, those nights, extra, studying away, being in those barracks and working on his dissertation.

So, a little over a month after they graduated, this university abruptly closed its doors, back in March of last year. It was painful enough to think that, you know, all the time and effort that his friend was putting into getting his doctorate, but worse, was that he lost most of his GI Bill pursuing something that fell apart due to no fault of his own.

We are definitely looking to change that. Again, we understand, being transparent on this, of course, another university stepped in. But still, the pain and all the things that this veteran went through—and it is not just one. There are numerous. We would like that changed, and recommend that.

And, of course, there are—we do not want to punish other universities that are doing things right, obviously. So, we encourage, again, oversight. We encourage, obviously, improvement on this statement here.

Again, I hope that answers your question then.

Chairman TAKANO. Thank you very much. Have you done specific policy proposal like closing the 90/10 loophole, you know, making sure that we have borrowers' defense in place for our veterans as well who get put into debt.

Mr. OXFORD. Mr. Chairman, if I might, I would recommend and endorse the closing of the 90/10 loophole and pass the Protect the GI Bill Act.

Chairman TAKANO. Wonderful. Thank you for that. I am glad the Legion has taken that position.

My time is up. Actually, I am over. I am going to recognize ranking Member Dr. Roe for his 3 minutes.

Dr. ROE. Thank you very much, and Commander, I am a dues-paying member, Post 24, Johnson City, TN, I might add, and my dues are paid up.

[Laughter.]

Dr. ROE. A couple of things, Commander, on PTSD, that when I helped write the MISSION Act it makes this a little more difficult. I am a veteran and I saw veteran patients outside the VA. Some were for PTSD, others for other things. There are doctors inside the VA that never served, so we have got to find the best way, I think, to treat these veterans. A lot of times it may be outside the VA. I have run across veterans who will not go to the VA. We have got to reach out to them, I think. I think you guys are the ones—both ladies and gentlemen—are the ones that are critical to doing that.

The VA cannot be everywhere. I mean, there are two million members of The American Legion, and that is a huge organization that can reach out and touch people, and we need to get them into care. Because I agree with you. To me it is the most heart-breaking thing in the world—20 men and women a day committing suicide. That is 6,000 people a year, that is totally preventable. So, how do we do that? We want to work with you and work together doing that.

Another thing you did not mention in your statement was that I have asked DOD and VA, mainly DOD, to identify how many bases in Thailand got sprayed, and you were not mentioning it but we have got to work on that. There are a lot of people that are not included in Agent Orange, and we have had a hard time reconciling how many bases. So, if you would help us with that and nudge DOD a little bit to help us get that information so we can do what is right there, I would appreciate that. We need your help on that, Commander.

Mr. OXFORD. Thank you, sir. Our staff will be happy to work on that Agent Orange issue in Thailand. Melissa, if you will work with Dr. Roe's staff on that issue.

When we think about the mental health issues, and you specifically mentioned veteran suicide, there is no veteran—and that is a tragic loss that is preventable—but no veteran should die by his own hands. That is an atrocity. When we think about the 20 veterans a day who are committing suicide, only 6 of those are enrolled with the Veterans Administration. We need to do our part, and we will be doing that to help the VA do their part.

I think I agree with you, the fact that veterans' treatment at the VA for PTSD and TBI is the only way to go. That is the best source of help for VA as far as mental health goes.

I think you mentioned the fact that we are all veterans, we are all stubborn, and the willingness to move over to the VA for that kind of help is a critical part, and that is where we can come in. We all have the ability to make those people understand the VA

is the best source of help available. As we do that, we need to make sure the VA is equipped with their necessary resources. We need to make sure the VA is hiring qualified, professional, competent mental health professionals, and we need to increase our DOD funding of VA's suicide prevention program. If we do that and pass the Commander John Scott Hannon Veterans Mental Health Care Improvement Act, I think that will have an impact.

From our side, The American Legion has instituted a program called the Buddy Check program. That buddy check is to reach out from the Legion side to all Legionnaires to check and say, "Hey, how are you doing? Are you Ok? Can we help? Do you need anything? Can we help you with anything?"

So, as far as reaching out, The American Legion is doing that, but we need to continue to emphasize to society that it is Ok to ask for help. Asking for help is not—it used to be a blemish on our record but it's not anymore. It is important. It is critical. We need to make sure every veteran realizes help is out there. Let us help you.

[Applause.]

Dr. ROE. Commander, thank you for your service in the Marine Corps and in the U.S. Army, and I yield back.

Chairman TAKANO. Thank you, Dr. Roe. Senator Tester, you are recognized for 3 minutes.

OPENING STATEMENT OF SENATOR JON TESTER

Senator TESTER. Thank you, Mr. Chairman. I want to thank you, Commander Oxford, for your statement today, and I want to thank you for your answer to the question that Congressman Roe put forward. Just as a little update, you probably already know this, the Commander John Scott Hannon bill passed out of the Senate Veterans' Affairs Committee by a unanimous 17–0. We got everybody from Blackburn to Bernie to vote for that bad boy.

[Laughter.]

Senator TESTER. So, now all we have got to do is get Senator McConnell to take it up on the floor, and it will be off, and then Chairman Takano can work his magic on the House side of things, if you do not already have it passed over there. I do not know.

I just want to thank you, and I appreciate your comments on the VA MISSION Act. I appreciate your comments on gender disparity within the VA. The fastest-growing population of VA is women. We have got to figure out how to do this right, and VA is not doing it right yet. I want to thank you for your comments on Agent Orange and that exposure, and the Colmery GI Bill.

You know, we got a lot of good work done last Congress, but we really do depend on VSOs like The American Legion, with your

members, to really tell us how things are working and take our lead from your direction.

There are a lot of issues out there, from presumptives to Blue Water to the caregivers program, and it makes me want to ask your membership, how many folks served in Vietnam? Raise your hand.

[Show of hands.]

Senator TESTER. Yeah, and raise your hand if you are under the age of 60 and served in Vietnam.

[Laughter.]

Senator TESTER. Exactly. No hands went up. And so the question becomes, when it comes to Blue Water Navy, which is a Vietnam issue, and when it comes to caregiver, which is everybody's issue but we just open it up for the Vietnam vet. When it comes to presumptives, we have got to do a better job. I mean, the fact of the matter is, Commander, you know, the VA is trying to outlive you and, by God, they are getting it done. We should not do this.

The Blue Water Navy was a struggle. We finally got it done. Caregivers is a struggle. And, by the way, Blue Water is not where it needs to be, and the caregiver situation, we have got a computer program that is not doing what it needs to do. This is 21st century, and you guys are getting older, and we need to step up.

I would just say one thing, and I am going to ask you a question, I promise. But, the presumptives issue is really important, and the science is there. I will tell you that a previous Secretary of the VA was getting ready to declare these presumptives as being eligible for coverage. That was several years ago, and now we are still here.

Could you just talk, very briefly, because I talked too long, could you talk very briefly, Commander Oxford, or whoever you want to send this to, what would it mean to your members if these conditions are added? The reason I say that is because I just dropped a bill in to make sure those presumptives are included in the Care program.

[Applause.]

Mr. OXFORD. Sir, we support that bill and we would just specifically call on the VA to approve those four new presumptives—bladder cancer, hypertension, hyperthyroidism, and Parkinson-like symptoms. Those are symptoms that we face every day. So, I just want to thank you for that bill.

Senator TESTER. Thank you for your leadership.

Chairman TAKANO. Thank you, Senator Tester. I now call on Mr. Bost for 3 minutes.

REPRESENTATIVE MIKE BOST

Mr. BOST. Thank you, Mr. Chairman, and Commander, thank you. Thank you for your service. Thank you for being here. Semper fi. Not to be outdone by the Ranking Member, I also am very much up on my dues at the Paul Stout, in Murphysburo, Illinois.

But, let me also say hi to all the members out there from Illinois. If you want to just stand up, raise your hand, we would like to recognize you. Thank you for being here.

[Applause.]

Mr. BOST. It was brought up about the Blue Water Navy, and, you know, we have done a lot of things these last couple of years to improve in a lot of areas, but getting that done, I want to thank the members at this dais that were involved with that, and how long and how hard they worked on that. You know, I have been there 5 years, 6 years, and we finally got that done.

But, it is only as good as, the law itself, unless it is implemented correctly, so I need to find out what are you hearing on the ground about how quick they are reaching out to this long-overdue ability for these veterans, that were on the ships off Vietnam, there in the South China Sea, how are they being reached out and how fast is that going?

Mr. OXFORD. Sir, can I pass that over to Chairman Bozella?

Mr. BOST. You bet.

Mr. BOZELLA. Thank you, Commander. Senator Bost, that is a very important question, because since the Blue Water Navy bill was passed last year, we have been asking veterans in all of our communities to file a claim now, even though VA was not going to start adjudicating those claims until January 1, 2020. So, we are collecting that information.

The second thing we asked was that VA health care, VA hospitals would begin allowing those veterans, whether they were eligible or not, to get in their hospitals, pending the fact that they have a claim on Blue Water Navy presumptives, and so that we could get these people seen. Now some hospitals were doing that and some were not. Those that were, we have people that are actually being seen.

So, the anticipation is high and veterans are waiting now for the claims to be adjudicated. They are waiting for this.

Mr. BOST. Ok. Good. Any suggestions you have at all for speeding the process up, that we could give to the Secretary.

Mr. NUNTAVONG. Congressman, I think that the claims process needs to be done appropriately. We do not want to rush things and have things overlooked. So, we ask that they be done accurately.

Mr. BOST. On a positive note, there was a guy that I have known and have worked with, and was in the trucking business for years,

and I can remember when he had one truck, and he was a Vietnam veteran. Not knowing this, his son talked to me just the other day and said they reached out to him. He did not reach out to them. He had tried to claim several years ago and they called him up and he was getting treated, and he has had all the problems you can imagine from Agent Orange.

Thank you all for being here today. My time has expired.

Chairman TAKANO. Thank you, Mr. Bost.

I now recognize Mr. Pappas for 3 minutes.

REPRESENTATIVE CHRIS PAPPAS

Mr. PAPPAS. Thank you very much, Mr. Chairman. Commander, thank you for your testimony, and I want to thank the leadership of the Legion and the Auxiliary as well as the members who are here who have been communicating the message very powerfully to us on the Hill, about your priorities. We stand with you and want to continue to work with you all.

If there are folks here from my State of New Hampshire I would love to see you stand up and take your applause. If not—oh, here we go.

[Applause.]

Mr. PAPPAS. Thank you for your service. I like to say we support our vets as good as anywhere else in this country, if not better, and the support that exists across our State is really evident when you are out there.

One of the things that I have been focused on, in our Oversight Investigation Subcommittee is VA provider payments, and I was appreciative that you mentioned that. If we are going to see MISSION Act succeed and really see community care as a force multiplier for VA we have got to make sure we have adequate networks and make sure these bills are paid. But, we also have to stand firm against privatization, and so I am glad that you mentioned that as well.

One of the other things our subcommittee has dealt with, in a legislative hearing yesterday, is the issue of benefit overpayments, which places an undue burden on our veterans. These are vets who do everything right and are not expecting to be overpaid, and then are, you know, hit with a letter and a bill and have their credit scores dinged.

So, I know the Legion has worked directly with some of these vets, and congressional offices have as well. Could you speak to the burden that these overpayments place on our veterans?

Mr. OXFORD. Yes, sir. I would be happy to do that. We have visited many VA hospitals across the country. We continue to believe the VA is the best care anywhere. We continue to hear issues like

lack of payments and those kinds of issues that delay payments to providers.

I would like to ask Chairman Nuntavong about your question.

Mr. NUNTAVONG. Congressman, the overpayment issue, a lot of our members may be reservists or National Guard, and they go on orders, and they are receiving VA benefits as well as their Guard and Reserve pay. VA needs to advertise more about letting them know that they are being put on active duty, and stopping the process before they become indebted. We have out in all the debt management centers, Legion folks that assist veterans at no cost, to help them facilitate and navigate through this. It is a difficult problem.

Mr. BOZELLA. Mr. Representative, a very important issue with that, that we are tracking through our System Worth Saving program, is that these payments that were a huge problem under the previous Choice Act, we thought were going to go away. Well, they are still a problem with the new care in the community act. The veterans are getting collection notices as they are waiting for these payments to be processed, and then there is also an issue with the transference of records that may or may not be taking place on time.

It is a critical issue as well as a financial issue, so we are very concerned about that.

Mr. PAPPAS. Thank you very much for your comments, and best wishes in the organization's second 100 years, and I yield back, Mr. Chairman.

Chairman TAKANO. Thank you, Mr. Pappas. I now call on Senator Tillis for 3 minutes.

Senator TILLIS. Thank you, Mr. Chairman. Thanks again for being here, Commander Oxford, and your lovely wife Frances. I know we talked about—I asked you where you were going to be next, and I do not think I could keep track of the number of places that you are traveling across the country. Thank you for that service and personal sacrifice.

I want to, first off, we went through the legislative priorities with the delegation from North Carolina yesterday, and we met in my office before the hearing, and I agree with and want to help all of the legislative priorities that The American Legion has put forth. I think we have got to make progress on women's health, we have got to make progress on preventing suicide, and that progress absolutely is rooted in reaching out to veterans who are not connected to the VA.

In fact, I left my meeting with you and went to meet with the League of Municipalities, and I have done it with the Association of County Commissioners in North Carolina. I said, "Create a place

where veterans can convene, so that we can find these other men and women who need service, and we can provide—and potentially—and will save lives.”

The other thing I would like to really encourage all of the members of The American Legion is to make sure that you expect every Member of Congress to help you clear casework, instead of doing what you all do—you are stubborn and you see a task and you want to complete it—recognize many of us got elected so we could help veterans. If we are helping them, you are able to free your resources up to find the next one. Count me in, and I think every Member of Congress want to have their staff down in the State and here in Washington, helping clear casework.

Now, I want to talk about toxic exposures. I chair the Personnel Subcommittee on Senate Armed Services and I have been a member of the Veterans Committee since I have been here, and I will continue to be as long as I am in service. I think one of the things we need to do is get ahead of the next Agent Orange.

We still need to do right by those who were exposed to Agent Orange, but I think there is a whole area of information that we did not capture when men and women were serving that we have got to go back and figure out how to capture it in the VA, which will provide a better case and I think a faster track to presumptions, that age-old problem that we have when we are trying to get care to the veterans who deserve it.

We are working, in my capacity on Personnel Subcommittee. We will have a hearing on what more information we can capture and the underlying health record, when the man or woman is serving, and make sure that that gets transferred to the new health record so that we can even potentially predict a problem before the veteran does. We do not want to stop until we are at that level where we are calling them up and think that you need care, and we may be aware, just based on the data, we may be aware of a problem that we can get ahead of. That is the best standard of care that we should work toward, and I will continue to work toward as long as I am in the Senate.

[Applause.]

Senator TILLIS. The last thing I will leave you with is on May 9th, in North Carolina, we are hosting, in cooperation with the Library of Congress, a history project, where we are kind of connecting the dots on history but we are also making it a veteran's fair. We expect several hundred veterans to be there. We will get in touch with you all to make sure that you have good representation. I will have all of my caseworkers there, along with caseworkers from other congressional offices to live up to what I am

telling you. We want to clear the caseload for you so you can go after the next crunch.

Thank you all for your service in the past, your continued service, and God bless every one of you.

[Applause.]

Mr. OXFORD. Thank you, Senator Tillis.

Chairman TAKANO. Thank you, Senator Tillis. I appreciate your role on the Senate Armed Services Committee on the Personnel and Readiness Subcommittee. You are very strategically located. I hope that we can cooperate in a bicameral way, because I associate myself completely with your remarks about toxic exposure and your background in IT and how we can do that systematically. Given today's technology, I agree with you. We should be able to anticipate problems before they arise, and not repeat the 4-year delay that Vietnam veterans have experienced. I fully appreciate your remarks.

Let me now call on Mr. Lamb for 3 minutes.

Mr. OXFORD. Mr. Chairman, may I address that burn pit issue?

Chairman TAKANO. Go ahead, sir.

Mr. OXFORD. I think we have got to realize we have had millions of folks deployed in the global war on terror, and currently the DOD is working on maps of those burn pit locations. As we perceive and recognize that many people were exposed to those airborne toxins, we have got to lay the foundation for future claims, just like the Senator said. We need to presume exposure, because all of those folks were exposed to those toxins, and then just review the presumptive process as we go through that, and ensure veterans who need and deserve care get it.

Chairman TAKANO. Well, thank you for that, Commander, and I understand the VSOs have formed a working consortium on the issue of toxic exposure and that you are all working on a comprehensive bill. I want you to know that on the House side that we are working aggressively to have roundtables, to broaden our understanding. I am asking that we come up with a master plan on how to address toxic exposures of all the generations of veterans out there.

It is going to be a big bill and we need to build—I mean, by bill, I mean it is going to be a big price tag on all this. We owe this to our veterans, and we need to address this in a comprehensive way.

Mr. OXFORD. Thank you, sir. I would just like to add, we support Senators Manchin and Sullivan's Senate 2950, so that might be the bill that you are talking about.

Chairman TAKANO. Wonderful. Wonderful.

Well, I now call on Senator—Congressman Lamb for 3 minutes.
Congressman Lamb.

REPRESENTATIVE CONOR LAMB

Mr. LAMB. Thank you, Mr. Chairman. Thank you all for being here. I want to especially thank Paul Kennedy and Carl Curtis, my constituents from western Pennsylvania. I think Paul is still here. They had a great visit to my office yesterday. Both are a huge presence in the lives of veterans in western Pennsylvania and do a great job keeping me and my staff informed as to what is going on. I really appreciate their work.

I think that yesterday they really emphasized the role that the Legion plays in sitting down with veterans, especially newer members of the Legion, to just kind of talk about their experiences and do a lot of that one-on-one, guard-your-buddy type of intervention that is so important if we are ever going to get ahead of the problem of mental health and suicide and drug abuse that we still see among our veterans.

I just want to thank all of you and let you know that we do see the role that you are playing and we want to help you play it even more.

The good news, and something you can go home and tell your members, if they are asking what happened in Washington, DC, this week, yesterday the House of Representatives passed the Freed Veterans Act, which was a bill designed to make it automatic that 100 percent disabled veterans have their student loans forgiven, which is a great thing.

[Applause.]

Mr. LAMB. Absolutely, and it was a—the most important thing about how this came to be was that we had a lot of cooperation from both Republicans and Democrats and cooperation between the House of Representatives and the White House on this same policy, which is very rare down here but it does happen.

Now, you know, we found out 100 percent disabled veterans have actually been eligible for this relief for quite some time but they weren't taking advantage of it because there was all this paperwork and they had to apply. It was like 20 percent of people were taking advantage of something, and 25,000 of these veterans were in default on their student loans, so they were at real risk to their credit.

Now it is going to be the job of the government to make sure they get this relief without having to actually apply for it. It will be automatic. So, that was a big victory, and to any Senators that we have remaining here, plus Senate staffers, you will be seeing

that bill coming over from us pretty soon. I just hope you will give it a good look and maybe we can move it forward.

I wanted to revisit quickly what Senator Tester was talking about with the four presumptive conditions. He had folks in here raise their hand just if they had served in Vietnam. I would like you to raise your hand if you know anyone with one of those four conditions—hypertension, Parkinson-like syndrome, thyroid cancer, and I am blanking on the fourth.

Ms. BRYANT. Bladder cancer.

Mr. LAMB. Bladder cancer. Thank you, Melissa. She is always on the ball—related to Agent Orange.

[Show of hands.]

Mr. LAMB. Yeah, so pretty much just as many hands as we had for Vietnam service, if not more. This is such a burden on the folks who are suffering from these conditions that is unfair, and the numbers are extremely high. So, please continue to work with us in advocating to those in the administration that they should add these.

Just so you know, the VA is requesting a budget increase this year from Congress, a \$22 billion budget increase, which is more—more money than it would cost to treat people with these four conditions as presumptive. It is not a question of there being no money, or, you know, a total scarcity. It is just a question of which veterans you are going to treat for what. The money is there. We just have to enact it into law and make sure these veterans get the treatment they deserve.

Those are my only points. I am already out of time, and you all have answered any questions I had already, so thank you for coming and sharing everything with us.

Mr. Chairman, I yield back.

Chairman TAKANO. Thank you, Representative Lamb, for your advocacy on those four conditions.

I now call on Congressman Cisneros for 3 minutes.

REPRESENTATIVE GIL CISNEROS

Mr. CISNEROS. Thank you, Mr. Chairman, and Commander Oxford and everybody else, thank you for being here this morning.

I am a member of Post 277 in Placentia, California, and—well, thank you—but rather than paying my dues I actually became a lifetime member this year.

[Applause.]

Mr. CISNEROS. Just take it out of the equation there, and that way I do not have to worry about it anymore.

You know, this past weekend I was also in Brea, which is in my district. Brea, California, Post 181, celebrated their 100th anniver-

sary this year. It was a great celebration, to get over there and kind of celebrate the achievements of that post and how long it has been serving veterans in the 39th District there of California.

Commander, I want to bring up a subject about women veterans. They are the largest-growing demographic, you know, not only in the military but also become our largest demographic in the veterans. I would just really like your opinion on really what can we do to kind of get rid of some of these barriers and make sure that we are taking care of our women veterans going into the future.

Mr. OXFORD. Thank you, sir, for that question. As you mentioned, over 2 million female veterans. That is the fastest-growing population of people who participate in the Veterans Administration.

First of all, we have got to recognize the contribution that women have made to the military services, that they continue to make, and to this country. We need to make sure the VA is responsive to the specific gender requirements. That includes diagnostic and treatment. Then we would also ask you to think about passing the Deborah Sampson Act. That should embrace those things we just talked about.

But, we have got to recognize the contribution of female veterans, most of all.

Mr. CISNEROS. Thank you for that. You know, it is—I was down at the VA in Long Beach not that long ago, and really kind of talking to them, and really how they are trying to, you know, ramp up the care of the female veterans that are there. Yet, they still do not have an OB-GYN on staff. So, there is still a lot of ground that we need to make up and make sure that we are taking care of our women veterans.

So, with that I just want to thank you all for your service and for being here today, and I yield back, Mr. Chairman.

Chairman TAKANO. Thank you, Mr. Cisneros. Maybe you could consider some supplemental dues besides the lifetime.

[Laughter.]

Mr. CISNEROS. I was forgetting to pay my dues every year so I thought I would just get right at it and take it out of the question, and I just became a lifetime member.

Chairman TAKANO. Ok. You are at a place in life where you can do more, but whatever.

[Laughter.]

Chairman TAKANO. Senator Boozman, you are recognized for 3 minutes.

SENATOR JOHN BOOZMAN

Senator BOOZMAN. Thank you, Mr. Chairman, and thank all of you all for being here. Where are my Arkansas folks? Very good. Thank you all so much.

[Applause.]

Senator BOOZMAN. We appreciate you all and appreciate the great work that is going on in Arkansas, as all over the country. You know, you look out and you see so many of you here. That is a great statement in and of itself. The Committee works together in a very bipartisan way.

I have had the opportunity to serve on the House Veterans' Affairs Committee and now the Senate, and that really has been the hallmark of both of those Committees and is carrying on now. We can work hard, we can do our thing, but if you do not have the grassroots, if you do not have you all, pushing hard, it just does not work.

The other thing is we know who does all the work. A special thanks to the Auxiliary and all that you do.

I would really like you to comment on a couple of things. Recently, in the Senate, and again, a companion bill in the House, Senators Tester and Moran, the John Scott Hannon Veterans Mental Health Care Improvement Act. We appreciate the fact that you all are supporting that. That is good legislation, getting us moving forward.

One of the things that we were able to include is having some metrics. Right now we are measuring VA suicide by the amount of money that we are spending. We have greatly increased that but we are not reducing the amount of suicide. Then, access. Again, you know, greater access now but suicides are not coming down. So, we need the ability to actually measure what these programs are doing, get rid of the ones that are not working, you know, and then increase the others.

Can you or some of your folks talk to us a little bit about how we can reach those veterans that are not part of the VA system? You know, about 20 are committing suicide and only 6 or so of those are actually in the system. What do we do to get to those that are not in the system?

Mr. OXFORD. If I might address that, sir. The American Legion Buddy Check program that we have is the best way that I know of to do that. We have got Legionnaires reaching out to other Legionnaires, just to say, "Hey, how are you doing? Do you need anything? Can we help? Is there something we can do to help?"

We also need to education—and this is a public education process, I think—to identify the veterans that are not involved with the Veterans Administration, and get them to enroll. That is the big-

gest thing we can do. You mentioned 20 a day—6 are enrolled but those other 14, that has got to be a public society issue, as we reach out to those veterans and say, “It is Ok to ask for help. We need you to let us help you.”

We also have our System Worth Saving. You mentioned metrics. Our System Worth Saving reviews, are constantly visiting VA hospitals to review those kind of metrics that you are discussing. The System Worth Saving site review is not an inspection. What we want to do is identify the good things that are happening and maybe identify some things that are not going so well, and provide that information back to Congress and the Veterans Administration. The metrics we have, we are using, so please continue to provide that information.

Senator BOOZMAN. Very good. Then, I will close with thanking you for your support of the Deborah Sampson issue which was expounded on earlier. Again, I would just second that as to how important that is, which we all know.

Thank you, Mr. Chairman.

Mr. OXFORD. Thank you, sir.

Chairman TAKANO. Thank you, Senator Boozman.

I recognize Senator Sinema for 3 minutes.

SENATOR KYRSTEN SINEMA

Senator SINEMA. Thank you, Mr. Chairman, and good morning. Thank you to our witnesses for being here, and for all our veterans who have joined us today, especially those from Arizona.

Commander Oxford, it was a pleasure working with The American Legion to pass the Legion Act, and I am so excited to be working with you again to establish a pilot site for Project Atlas in Arizona. This program is an innovative partnership between the VA, Philips Health *Care Systems, and The American Legion, and it is bringing remote telehealth exam rooms that connect veterans with the VA to regions where those connections are hard to establish.

Arizona’s rural veterans will be greatly served by this partnership, and thank you for your leadership with this effort.

I share The American Legion’s position that we must continue to improve access to care for military sexual assault survivors. Research has shown that peer support specialists are a significant factor for veterans seeking help with experiences such as military sexual trauma. Can you speak about the VA’s peer support specialists and their impact on veterans seeking treatment for MST?

Mr. OXFORD. I would like to ask Director Bryant to address that question.

Senator SINEMA. Thank you.

Ms. BRYANT. Thank you, Senator. We recognize that peer-to-peer support is critical in navigating the VA, especially for survivors of military sexual trauma or assault. There is the potential of revictimization, retraumatization as you are retelling and recounting your stories repeatedly throughout that process. It is necessary for medical documentation, but we know that it can also be extremely painful to the veteran, and not just to women, but to me as well, because men are also survivors of MST.

So, those peers that help you navigate the system are vital in going forth and having your service connection annotated in a way that is safe both the veteran, and they are in an inclusive environment where they are safe to share their experiences and then also receive the desperate care that they need.

Senator SINEMA. Thank you. Ms. Bryant, a follow-up question. What are some other steps that we in Congress can take to make military sexual trauma care more available to survivors throughout the military?

Ms. BRYANT. To make it more available to those throughout the military is, one, expanding what are doing in our community partnerships. We want to ensure that the provisions that are under the House version of the Deborah Sampson Act, that those possibly can get reconciled with the Senate version that is going forward, and thank you again to Senator Boozman for your support with the Deborah Sampson Act.

But, there is a lot that we can continue to do to have our arms wrapped around those women and male survivors of military sexual trauma. We look forward to working with you and your staff on this further.

Senator SINEMA. Thank you so much. Commander Oxford, a skilled VA workforce is crucial to the delivery of care and services to veterans. Since fiscal year 2011, the VA Office of the Inspector General has listed human resources management in the top 10 nonclinical occupational shortage areas across the Veterans Health Administration. How do you think that this shortage impacts VA's ability to provide timely and quality care to our veterans?

Mr. OXFORD. As we tour the country, and we have been to several veterans hospitals, VA hospitals, we have seen several staff shortages because of lack of the ability to find and hire qualified professionals. In addition to that, I would like to ask Chairman Bozella to address the issue.

Mr. BOZELLA. Thank you, Commander. Thank you, Senator. The H.R. problem of not enough providers is one of the number 1 issues that we see within VA, but it goes beyond providers, as you suggested. The American Legion is trying to help VA with the onboarding process, for one issue, and onboarding, again, for health

care providers as well as non-providers. It could take four to 6 months for somebody who has applied for a job in the VA to be able to finally accept that position, get on board, and be working at that particular facility.

There is another problem with transference of jobs, and again, non-health care providers, it is a difficult process.

That is the number 1 thing we think, outside of recruitment, that people have to work on, is how quickly can we get somebody into that job.

Senator SINEMA. Chairman, if I might follow up, what should the VA and Congress do to address that specific issue and other personnel challenges we face?

Mr. BOZELLA. I believe there is a bill—I do not know where it is; it has not reached committee yet on the Senate side—that is looking at that as a pilot study, and I believe it is Senator Gardner who has put that forward. What we understand is that bill may be looked at soon. That is all I know about the bill at this point. But, that is a start. So, at least on a pilot you will be able to trial things to see how they are working and maybe if it becomes a well enough practice that could be replicated.

Senator SINEMA. Thank you. Commander Oxford, as the VA implements the expansion of the caregiver support program under the MISSION Act, what should it do to ensure a more holistic and inclusive support program for our caregivers?

Mr. OXFORD. Thank you for that question. I think first of all we have got to recognize the caregivers of all of the injured service men and women since the global war on terror, but we also need to recognize the caregivers from other periods, and there are several. But, these caregivers have been essential to the readjustment of those injured veterans during their time of need. As we think about caregivers we have got to realize they are saving us money. If a caregiver is providing those services at home then we do not have to pay somebody else to do it. So, it is a savings to us, and we just need to continue the oversight of that issue.

Let me turn this over to Director Nuntavong for his comments.

Mr. NUNTAVONG. Senator, thank you for your question. After a year to prepare, VA missed another mark in the MISSION Act deadline, implementing the expansion of these benefits to these caregivers. It is a shame that these individuals do not have access to the financial benefit that, by law, they deserve and they have earned, based on a technicality that VA themselves created with their IT issue.

We would like to work with both Committees to draft legislation that will guarantee effective dates for these caregivers so they can

be compensated appropriately, just like disability compensation, for these hardworking individuals.

Senator SINEMA. Thank you. Thank you all for your time being here, and, Mr. Chairman, I yield back.

Chairman TAKANO. Thank you to Senator Sinema. I now turn the meeting back over to Chairman Moran.

Chairman MORAN [presiding]. Is there someone who has not been recognized?

Chairman TAKANO. Everyone has been recognized and if we have another Senator coming in, I heard one is en route, but the question is yours, sir.

Chairman MORAN. Thank you very much.

Commander, I, of course, have not had the benefit of hearing what you had to say, and so I would not intend to ask questions that might cause either your testimony or answers to my colleagues' questions to be repeated. But, I guess I would want to give you the opportunity in my presence to make any statement or any request that you specifically would like, or to reiterate to my colleagues what you would like for me and others to know.

Mr. OXFORD. Yes, sir. Thank you for that opportunity. Before I conclude I would just like to reiterate three important issues. First of all would be Agent Orange. It is time to end the unnecessary delays and give those veterans the care they deserve, and it is imperative the Secretary approves the presumptives that we have talked about, being recommended for bladder cancer, hypertension, Parkinson-like symptoms, and hyperthyroidism.

Second of all would be the issue we just discussed, caregivers, continued oversight on the expansion of the VA program, Comprehensive Assistance for Family Caregivers, under the caregiver support program, to ensure those folks are provided the care that they need and deserve.

Our World War II veterans, The American Legion has been working with Senator Menendez's office to draft legislation to accomplish this, and we are looking for cosponsors to ensure a bipartisan bill before introduction. That would end means testing for World War II veterans to receive VA benefits. Congress has already done this for soldiers who served during the Mexican Border War and World War I, and it is only fitting that the Greatest Generation should be exempt from means testing to become enrolled.

The American Legion would urge Congress to pass a bipartisan bill to address this issue immediately.

Senator, if I might, before I leave, I would like to correct a major mistake that I made. I would like to introduce my wife before we go too far along.

[Laughter and applause.]

Mr. OXFORD. Thank you for that opportunity, Senator.

Chairman MORAN. Commander, I wanted to see how you operated under fire, and I was hoping to deny you that request—

[Laughter.]

Chairman MORAN [continuing]. So that I could learn more about the man. We are honored to have your spouse, your wife here with you, and we thank her for her service and support of you and The American Legion.

Let me ask a final question and then we will conclude. I want to know how we can—what are the criteria, the metrics that we can use to determine the long-term effect of veterans' interaction with VA? How is the VA doing, not just today but are there measures that would tell us that, in the long run, the VA is on the right path and veterans are getting the care and attention that they deserve and are entitled to?

Mr. OXFORD. Well, Senator, I am going to take a little personal privilege here. Our System Worth Saving reviews are the best way to do that. We visit VA hospitals regularly, and I think we currently have 18 visits scheduled. We visit we look for things that are going well, things that are not going well, and provide that information back to you and the VA.

As we move forward, those metrics are out there. We are looking at those kinds of things regularly, and we will continue to do so, and invite you or your staff to participate any time.

Chairman MORAN. I was waiting to see if you had instructions.

Mr. OXFORD. Well, I have just got one more piece of instruction. The veterans that we talk to really think the VA is the best care available. We prefer the VA. So, if there is a way we can continue to do that, that is the right answer.

Chairman MORAN. I thank you for that answer, and it corresponds with my view that I learn the most when I am talking to veterans at all stages of their care and treatment, all stages of their life, how they are being cared for. It is an opportunity for us to get the best information, and I thank you for that.

I certainly would make clear to you that while we were—I was fully engaged in this Committee, the Senate Committee, and the Senate passed the MISSION Act, in my view it is nothing to replace the VA. It is fully to augment the VA in providing care and services for those who, in their best interest, need another venue.

My views are often reflective of my days as a House member, although still as a Kansan my House days I represented a congressional district as large as the State of Illinois. No VA hospital. Hours and miles are a huge component of the way I look at how do we get services to people in certain circumstances.

But, despite that bias, in that regard, I want to do everything I can to make certain that veterans are cared for within the VA. Again, we are looking for the best interests and give veterans some options. I appreciate that opportunity.

Finally, I would say that I appreciate the role that The American Legion played in the original GI Bill, and I appreciate the role that a Kansan had in its creation and enactment. An American Legion member from Emporia, KS, wrote down on a napkin the ideas of a GI Bill, and we had a President named Eisenhower who made it into law, and we take great pride in that history of our State.

It may appear that I am stalling, and my stall has been successful.

[Laughter.]

Chairman MORAN. Senator Sullivan has been recognized.

SENATOR DAN SULLIVAN

Senator SULLIVAN. Mr. Chairman, thank you for stalling. Sorry. We have a number of hearings going on this morning, but fortunately one of the hearings I was just in, in the Commerce Committee, my colleague sitting next to me was Senator Moran, who happens to be the Chairman of this wonderful Committee in the Senate. When he left I said, "Hey, can you tap dance a little bit for me until I can get there?" So, thank you, Mr. Chairman, for that stalling.

I want to first do—you know, I learned that this hearing is so popular that there has to be tickets for it. It is like a rock concert or something. I want to do a shout-out. I know that there are more Alaskans here, but do we have at least two of my fellow Alaskans in the audience here? How about a thank you and a round of applause.

[Applause.]

Senator SULLIVAN. They usually get the award for the furthest travel, and we like to acknowledge our State as having more vets per capita than any State in the country, so I want to thank them for that.

Well, I want to thank our leadership here, and I do want to mention it is great to see our Commander is a fellow U.S. Marine, so Commander, thank you, sir.

I also want to just express my appreciation to The American Legion for having officially endorsed the legislation that Senator Manchin and I have introduced, S. 2950. That is the Veterans Burn Pit Exposure Recognition Act. Commander, perhaps you can say a word on that.

The whole point of this legislation, having been through, for our incredible Vietnam vets, the Agent Orange, the Blue Water Navy,

all of these issues where, let's face it, Congress was playing catch-up for way too many years, decades. Our veterans were waiting, waiting, waiting. Many died before there was direct action. What we are trying to do with this burn pit legislation is get in front of an issue that we know is going to impact the next generation of our veterans.

So, that is the goal, and I am very honored, Commander, plus the rest of the leadership here, that you are supporting the legislation. It is getting a lot of momentum, Mr. Chairman, we are hopefully going to move it out of the Committee in the Senate and House and get it passed into law here soon.

But, sir, can you comment on that?

Mr. OXFORD. Yes, sir. I would be happy to. Sir, if you need a ticket, let me know and I will get you a ticket.

[Laughter.]

Mr. OXFORD. I would also like to say *semper fi*, always and forever.

We do support S. 2950, sir, so just look forward to working with you on that as we move forward.

But, when we think about burn pits, we are facing similar questions as we did with Agent Orange. We have got to assume that the millions of people deployed to the global war on terror are facing those kinds of airborne toxins that we saw with Agent Orange, and it is primarily because of burn pits.

The DOD has started the process of drawing maps and establishing locations of those burn pits, so we will have a way to assume those presumptives. That is what we have got to do is presume the exposure to those airborne toxins and then just review the process to make sure those veterans who need and deserve care get it.

Senator SULLIVAN. Great. Mr. Chairman, if I may, one final thing on that. What we have been trying to do on this is work with, of course, the VSOs, right, all of you, but also with the VA. So, we want to make sure this is collaborative with everybody—our veterans, first and foremost, the Congress, in a bipartisan way—and the VA. That is the goal here and we are hopeful that we can move that soon.

So, thanks again for all of your great service, every member here, and it is an honor to serve all of you.

Chairman MORAN. Senator Sullivan, thank you. Thank you for your extraordinary effort to get here and to be able to spend time with The American Legion.

Commander Oxford, I would give you a final opportunity if there is anything else you forgot to say today, to do so.

Mr. OXFORD. Thank you for that opportunity, sir. It is just a privilege and a pleasure to be able to sit before you and represent the 1.8 million Legionnaires from across the country. It is just an honor to be here, and thank you for the opportunity. We so much appreciate our opportunities to work together, and continue to offer American Legion help, and anything else we can do to help you do your job because you are helping us do our job so much.

Chairman MORAN. Commander, thank you for that. Thank you for your presence here today. Thanks for your leadership team and all the members of The American Legion and the Auxiliary who are present with us. I know many traveled long distances for the purpose of making their case to Members of Congress, and we welcome that.

I also would thank you, as Congressman Roe did, for the expertise and the team that you have here on a daily basis that work with our Committees to provide us with information and input and to see that we do our jobs better. I am grateful for their help.

I would now ask unanimous consent that members have five legislative days to revise and extend their remarks and include any extraneous material.

With that, without objection, so ordered, and the hearing is now adjourned.

[Applause.]

[Whereupon, at 11:25 a.m. the Committees were adjourned.]

APPENDIX

Material Submitted for the Hearing Record

United States Senator *for* Kansas 

JERRY MORAN

Joint Hearing: Legislative Presentation of The American Legion

Opening Remarks of U.S. Senator Jerry Moran (R-Kan.)

Wednesday, March 11, 2020 | 10:00 a.m.

As Prepared for Delivery:

Over the past few weeks, we've had the opportunity to hear from a number of VSOs on a range of important legislative issues.

Today, I would like to welcome The American Legion for our fifth and final legislative presentation.

Thank you, Commander Oxford, and your fellow Legionnaires for joining us. My colleagues and I are looking forward to hearing from you on the Legion's top legislative priorities.

I want to take a moment to recognize all of the Legionnaires present— especially those joining us from Kansas.

Your willingness to join us today is a testament to your unwavering commitment to your brothers and sisters in arms. As we all know, transforming the VA into a 21st Century VA is a monumental task that requires all hands on deck.

VSOs—like The American Legion— and their members play a critical role in this process. You are on the frontlines and see firsthand where the VA is thriving and where it faces challenges.

You give a voice to veterans who at times can feel unheard or marginalized. You also provide an annual check for our committees and help us make certain we are on the right track.

Commander Oxford, while I was reading over your written testimony I noticed the Legion and I share a number of priorities—from enhancing suicide prevention to addressing toxic exposure and improving women's health care.

You have my commitment that the Senate Veterans' Affairs Committee will continue to work with you and the larger veteran community on addressing these priorities.

We look forward to your presentation today and will continue to work with you to make certain veterans' voices are heard and they receive the care they deserve.



THE AMERICAN LEGION



THE AMERICAN LEGION LEGISLATIVE AGENDA

Submitted to accompany testimony before Congress by
American Legion National Commander James W. "Bill" Oxford
March 11, 2020

A historic opportunity to build for the future

Seventy-five years ago, America prevailed over some of the most powerful military forces of the 20th century. A generation later, the United States would send men to the moon. A nation capable of such magnificent achievements is surely capable of caring for those who helped make such accomplishments possible.

Just as scripture teaches that to whom much is given, much should be required, The American Legion believes veterans have given this country far more than what is asked in return. It is in this spirit that we present our legislative agenda to the second session of the 116th Congress.

For starters, no veteran should ever die by his or her own hand. We would like to see Congress pass the Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019. The American Legion works diligently to remove stigmas that are too often associated with those seeking mental health treatment. Whether caused by post-traumatic stress disorder or military sexual trauma, every veteran suicide is a tragic loss compounded by the fact that these deaths are preventable. We must equip VA with the resources it needs to convince veterans that their lives are worth living.

One of the great legacies of World War II was the Servicemen's Readjustment Act of 1944. Just as the GI Bill dramatically improved the lives of millions of American families, the Harry W. Colmery "Forever" GI Bill enables the current generation of veterans to achieve their educational aspirations. The American Legion will adamantly oppose any diminishment of GI Bill benefits and welcomes better oversight of institutions that do not provide appropriate value for student veterans. We believe that the Protect the GI Bill Act helps accomplish this goal.

Congress has responded well to the needs of veterans in recent years. The VA MISSION Act, the expansion of Agent Orange benefits and robust defense budgets demonstrate the gratitude of a nation that values its men and women in uniform.

The American Legion recently observed the centennial of its founding. Through telehealth opportunities and strategic alliances, we believe that the United States enters this century's roaring twenties with the ability to serve veterans like never before. I look forward to working with the Congress as we build a foundation for the future.



James W. "Bill" Oxford
National Commander
The American Legion

ABOUT THE COMMANDER

- » Vietnam War veteran of the U.S. Marine Corps; aviation electronic technician for the A-6 Intruder
- » Army National Guard and Army Reserve officer, retiring as a colonel after more than 34 years of military service
- » Former mayor and city council member in Cahah's Mountain, N.C.
- » Past American Legion Department of North Carolina and Post 29 Commander

James W. "Bill" Oxford
National Commander

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President Trump signs the 2019 LEGION Act in the Oval Office on July 30. *White House*

2019 victories and looking ahead to 2020

The American Legion celebrated its 101st anniversary by closing out 2019 with several key accomplishments. From last year's Legislative Agenda for the first session of the 116th Congress, below is a sampling of legislative victories, some of which have been decades in the making:

- **Redefine "wartime service" period.** In a significant legislative victory for The American Legion, President Trump signed into law The LEGION Act (Let Everyone Get Involved In Opportunities for National Service Act) on July 30, 2019. The law declares the United States has been in a state of war since Dec. 7, 1941. The American Legion sought the declaration as a way to honor approximately 1,600 U.S. service members who were killed or wounded during previously undeclared periods of war. The bill also opened the door for approximately 6 million veterans to access American Legion programs and benefits for which they previously had not been eligible.
- **Fully fund a superior national defense.** Congress passed a defense funding bill that reversed sequestration, rebuilds U.S. military end strength and weaponry and fairly compensates military personnel. As a result, service members received a 3.1 percent pay raise in 2020, the largest increase since 2010.
- **Expand Agent Orange benefits.** Late in the evening on June 25, President Trump signed the Blue Water Navy Act into law. This bill represents the bipartisan efforts of veterans, advocacy groups, Congress and the administration to give Vietnam-era veterans the VA benefits they need.
- **Repeal unfair VA offsets.** Congress finally passed a repeal of what is referred to as the military "Widow's Tax." For decades, VA survivor benefits and Dependency and Indemnity Compensation (DIC) have been offset from military Survivor Benefit Plan annuities (SBP). The Fiscal Year 2020 National Defense Authorization Act (NDAA) completely eliminated the Widow's Tax.

Top issues The American Legion and lawmakers in both chambers of Congress expect to tackle in a bipartisan way in the second session of the 116th Congress include:

- **Supporting VA's suicide-prevention efforts.** The bill The American Legion is focusing on is S. 785 – Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019 (passed out of committee on Jan. 29, 2020). We also remain active participants in the “President’s Roadmap to Empower Veterans to End the National Tragedy of Suicide” (the PREVENTS Initiative and Task Force), which aims to empower veterans to pursue an improved quality of life, coordinate existing suicide-prevention efforts, prioritize related research activities and engender collaboration across the public and private sectors.
- **Supporting those suffering from illnesses related to toxic exposures such as burn pits.** Last year, the Burn Pits Accountability Act was passed into law in the NDAA, which increased the requirements on the Departments of Defense and Veterans Affairs to track and evaluate service members’ health when they have been exposed to burn pits. This year, S. 2950, The Veterans Burn Pit Exposure Recognition Act of 2019, is the most immediate priority, as burn pits and airborne toxins have become a major concern for the Post 9/11 generation of veterans. The act would recognize and concede exposure during deployed service. However, the bill would not automatically grant benefits or health care to veterans who served near burn pits, nor would it create a presumption of service connection, like Agent Orange. There are several proposed bills The American Legion is assisting lawmakers and fellow veterans’ organizations in crafting and refining that aim to address presumptions of service connection.
- **Enhance women’s health care at VA.** S. 514 – the Deborah Sampson Act – is the bill The American Legion is working with the majority and minority to refine. A version of the bill passed out of the House in December 2019.
- **Ensuring the Coast Guard gets paid during a government shutdown.** The American Legion championed this issue in 2019. There is a stand-alone bill that would solve the problem (S. 21 - Pay Our Coast Guard Act), but it is also included in the Coast Guard Reauthorization Act.
- **Lastly, protecting the GI Bill remains an evergreen issue.** H.R. 4625 - Protect the GI Bill Act, which has already passed the House and is awaiting action in the Senate, would create common-sense oversight of schools and give military-connected students the same rights as non-veterans if their school closes, when they face overpayment, and when a school loses eligibility to operate.

The American Legion looks forward to working with congressional leadership in the House and Senate Veterans’ Affairs and Armed Services Committees in order to achieve more victories during another productive, albeit extremely busy (due to presidential election season), legislative calendar year.

“
The American Legion has been a cornerstone of life in the United States from the local to the federal level for 100 years and serves as a constant reminder of the inestimable contributions the members of the Armed Forces have made to enrich life in the United States during and after their service.

Sen. Res. 263,
July 31, 2019, recognizing
the legacy of The American
Legion in honor of its
100th anniversary

CARE

KEY POINTS

» Modernizing the VA health-care system is an investment in VA's future and the best path forward.

It is critical that we deliver a transformed VA health-care system that puts veterans at the center of everything we do. We are on the cusp of the greatest transformative period in the history of VA.

**VA Secretary
Robert Wilkie,**
testifying at a joint
congressional hearing
Dec. 19, 2019.



The Project ATLAS display at the 2019 American Legion National Convention. Philips photo

The future of VA health care

In 2018, Congress approved and the president signed into law the most significant legislation to transform the VA health-care system since 1996 – the VA Maintaining Systems and Strengthening Integrated Outside Networks Act, or the VA MISSION Act.

On June 6, 2019, VA launched its improved Veterans Community Care Program, implementing portions of the MISSION Act, which ended the Veterans Choice Program and established the new Veterans Community Care Program. According to VA, enactment of the MISSION Act will strengthen its ability to recruit and retain clinicians, authorize telehealth across state lines, empower veterans with increased access to community care and establish a new urgent-care benefit which eligible veterans can access through VA's network of community urgent-care providers.

Many veterans in rural areas struggle to make their appointments because the distance needed to travel to the nearest VA facility makes it inconvenient and unrealistic. In an effort to ease this burden, VA has devoted many resources to improving telehealth services. In a mid-October report, the department found more than 900,000 veterans used VA telehealth services in 2019. This was a 17 percent increase over the prior fiscal year and contributed to VA's delivery of more than 2.6 million individual telehealth sessions in 2019.

Anywhere to Anywhere is a VA telehealth initiative designed to reduce the confusion around state-specific telehealth laws and licensing restrictions. In an effort to eliminate this confusion, the Department of Veterans Affairs announced a new federal rule that will allow its doctors, nurses and other health-care providers to administer care to veterans using telehealth or virtual technology, regardless where veterans or providers are located.

In an effort to support this initiative, VA teamed up with The American Legion, Veterans of Foreign Wars and Philips to bring care to veterans in a familiar setting – their local posts. Through Project ATLAS (Accessing Telehealth through



American Legion National Commander Bill Oxford visits patients at the Denver VA Medical Center. *Larry Cline*

Local Area Stations), Philips will install video communication technologies and medical devices in selected American Legion and VFW posts to enable remote examinations through a secure, high-speed internet line. Veterans will be examined and advised in real time through face-to-face video sessions with VA medical professionals, who may be located hundreds or thousands of miles away.

VA's budget for Fiscal 2020 is \$220.2 billion, 9.6 percent over that of Fiscal 2019. This budgetary increase will help VA toward obtaining the four priorities outlined in its strategic plan by VA Secretary Robert Wilkie. These priorities include improving customer service, MISSION Act implementation, replacing an outdated Electronic Health Record system and updating other business and information technology systems to a 21st century operating capability.

In December 2019, VA announced it will no longer issue star ratings for its 146 medical centers. Individual VA hospitals will instead post measures including patient satisfaction, medical services, wait times and quality assessments on their individual websites. Wilkie said in a statement: "These ratings do not provide insight as to how our hospitals stack up against nearby non-VA facilities and are therefore of little value in helping veterans make informed health-care decisions." Updating this often-misinterpreted rating system will allow veterans to more accurately compare VA facilities with other local medical centers.

WHAT CAN CONGRESS DO?

- » Urge Congress to maintain oversight on the MISSION Act implementation, ensuring that VA honors all of its commitments to the veteran community.
- » Ensure VA is accountable to deadlines proposed for various IT system upgrades and installations.

CARE

KEY POINTS

- » The American Legion's System Worth Saving program assesses the quality of care and services at select VA medical facilities throughout the United States and its territories.
- » More than 9 million veterans use VA for health care.

By many measures, VA is providing not only 'the best care anywhere' but also highly integrated treatment specific to the needs of veterans – care that is not available at any price to patients outside the VA system.

Phillip Longman,
author of "Best Care
Anywhere: Why VA Health
Care is Better"



Legionnaires conduct a System Worth Saving site visit in Washington, D.C. Tom Brenner

Protect the best care anywhere

The American Legion continues to believe that VA performs as well as, or better than, other health-care providers on quality measures like patient safety, patient satisfaction, care coordination and innovative medical practices related to veteran-specific health-care issues.

In 2019, The American Legion System Worth Saving (SWS) program visited 12 medical facilities to identify best practices and challenges of VA hospitals and community-based outpatient clinics. Site visits consist of a town-hall meeting, a visit to the local VA facility and meetings with staff and executive leadership. At the end of each SWS visit, a report is issued that is shared with the medical center, the VA secretary and under secretary of health, congressional members and the President of the United States. Those visits revealed that VA facilities continue experiencing growth in veteran populations, need improved physical and information technology infrastructure and struggle with critical staffing shortages. Many of the facilities visited in the past year have dedicated new space for women veterans' health care to ensure privacy, safety, dignity and sensitivity to their gender-specific needs.

The American Legion supports legislation that capitalizes on VA's strengths and core competencies while ensuring that veterans continue to have access to the best possible care.

WHAT CAN CONGRESS DO?

- » Attend The American Legion's town hall meetings that are kickoff events for each System Worth Saving site visit. These meetings offer elected leaders the opportunity to hear directly from veterans about their VA health-care experiences.
- » Do not sponsor nor support legislation that authorizes VA to centralize operations successfully managed by local VA medical facilities.
- » Enhance VA's ability to offer telehealth services and telemedicine to rural communities.

CARE



VA offers programs to attract and keep dedicated health-care professionals. ^{VA}

VA recruitment and retention

A 2019 VA Office of Inspector General (OIG) report surveyed medical facility directors to determine the extent of severe occupational staffing shortages that exist at Veterans Health Administration (VHA) medical facilities.

The Sept. 30, 2019, report detailed the following findings:

- Medical center directors reported widespread severe shortages in many occupations throughout VHA.
- A lack of qualified applicants and non-competitive salaries were the two most commonly cited reasons for severe staffing shortages.
- Although the numbers of reported severe shortages across facilities declined from last year, the reasons for these shortages did not change.

The OIG report also found that 96 percent of VHA facilities show at least one severe occupational shortage as of end of 2018, and 39 percent of facilities noted at least 20 severe occupational staffing shortages.

The American Legion understands that recruiting highly skilled health-care professionals to fill vacancies at VA facilities is an ambitious undertaking, given resources and regulatory constraints. Recruitment and retention solutions can be achieved, many without additional legislative action, to provide full staffing of top health-care professionals.

WHAT CAN CONGRESS DO?

- » Pass legislation addressing the recruitment and retention challenges VA has regarding pay disparities among physicians and medical specialists who are providing direct health care to veterans.
- » Monitor VHA's plan of action to address the underlying causes of severe occupational staffing shortages.

KEY POINTS

- » The American Legion, through its System Worth Saving program, continues to document staffing shortages and recruitment performance challenges at many VA health-care facilities.
- » A 2019 VA Inspector General report lists medical officer and nursing occupations as the most commonly cited positions with severe staffing shortages in the system.
- » Psychiatry is the most commonly cited medical specialty, and Human Resources Management is the most commonly cited non-clinical occupation with severe staffing shortages.

“Private hospitals use innovative and progressive solutions to address recruitment and retention challenges, and we in the VA must be creative in our approach to human capital.”

Daniel Sitterly,
VA's Assistant Secretary
for Human Resources and
Administration, before the
Committee on Veterans'
Affairs on Sept. 18, 2019

CARE

KEY POINTS

- » Over the next 10 years, VA will move to a new electronic health records system that links VA, DoD and community health-care providers to patient records and unifies all VA facilities on one system.
- » VA recently kicked off its initial operating capability for the new EHR at medical facilities in Nevada and Washington state.

It's the fact that, for the very first time, we are going to have an opportunity to exist as a single shared entity, where we all truly collaborate in the same space, in order to make sure that our EHR is working as hard as it possibly can for the veteran.

Dr. Evan Paul, Hospitalist,
VA Puget Sound
Health Care System



Clinics using MHS GENESIS have sped up consultations for DoD patients. *U.S. Navy*

Connected electronic health records

The Electronic Health Record (EHR) Modernization initiative leverages existing commercial solutions to gain interoperability within the Department of Veterans Affairs, Department of Defense and community providers. This solution will facilitate the secure transfer of active-duty service members' health data during the transition to veteran status and will provide clinicians with efficient access to a veteran's health information.

In May 2018, VA awarded Cerner a contract to replace its EHR systems with Cerner Millennium, currently deployed by the DoD. VA kicked off its initial operating capability of the new EHR at three sites, two in Washington state and one in Nevada, with the expectation to go live in March 2020. VA completed the migration of more than 23 million veteran health records and created training for key clinical front-line staff in preparation for smooth implementation.

After IOC implementation, VA will deploy the new EHR solution over a 10-year period across the entire VA enterprise. Maintenance and support of legacy EHR systems will continue until every VA medical facility has the new EHR solution. This ensures that all current patient records are accessible and no interruption of any veteran's care occurs.

WHAT CAN CONGRESS DO?

- » Ensure VA's EHR initiative remains fully funded.
- » Require VA to regularly report EHR progress to Congress.

CARE



As more women serve in the military, the need for gender-specific VA care will grow. DoD

Improving care for women veterans

Never before have so many women service members been routinely assigned to combat zones. They sustain the same types of injuries as their male counterparts. The 2017 Department of Veterans Affairs Women Veterans Report noted that the total population of women veterans is expected to increase at an average rate of about 18,000 per year for the next 10 years.

According to the Veteran Population Projection Model between 2015-2045, the women veteran population increases annually at 0.6 percent while the male veteran population declines at 2.2 percent. VA must ensure women veterans receive gender-specific health care to meet their needs across the entire network. Finding ways to ensure that these veterans are welcome and receive the services they deserve is vital to The American Legion.

The American Legion strives to improve quality of care for all women veterans. The American Legion continues to focus on:

- Visiting VA health-care systems to explore any issues that could be preventing VA hospitals from providing gender-specific care.
- Educating women veterans about the importance of identifying as veterans.
- Ensuring full-time gynecologists are available at all VA medical centers.
- Advocating for an increase of women's health providers to assist women veterans who have been victims of military sexual trauma.

WHAT CAN CONGRESS DO?

- » Enact legislation for VA facilities to implement current standards of care to women veterans, providing the latest diagnostic and treatment methods.
- » Provide child-care services at all VA medical centers.
- » Urge VA to meet the privacy needs of women veterans at its facilities.

KEY POINTS

- » Women have voluntarily served in every war since the American Revolution.
- » Women now routinely serve in combat and deserve equal benefits as their male counterparts.
- » Women are the fastest growing demographic in the veteran community.
- » Hypertension, PTSD and depression are the top three diagnostic categories for women veterans treated at VA.

Women now make up the fastest-growing group of veterans enrolling in VA health care, and many of them face challenges with the invisible wounds of war, like PTS and military sexual trauma. VA needs to adapt to the complex and unique needs of our women veterans, and that means ensuring there are specific programs and resources to support them.

U.S. Rep. Julia Brownley
(D-Calif.)

CARE

KEY POINTS

- » Data from VA's National Screening Program reveal that about one in four women, and one in 100 men say they have experienced military sexual trauma (MST).
- » Men are less likely to report MST than their female counterparts, but MST is a military issue, not a women's issue.

What do I want now? I want to be treated with the respect I deserve in the current VA system and not retraumatized.

Diane Chamberlain,
Author of "Conduct
Unbecoming: Rape, Torture, and
Post Traumatic Stress Disorder
from Military Commanders"



DoD has initiated sexual assault prevention and awareness programs. DoD

Improve access to MST care

The American Legion continues to track and monitor all issues related to military sexual trauma (MST). MST includes any sexual activity against one's will, or during a time when one is unable to consent to sexual activities, while serving in the military.

According to a VA Office of Inspector General (OIG) review and the Department of Defense 2018 Report on Sexual Assault in the Military, more than 6,000 servicemembers reported a sexual assault in fiscal 2018. The reported sexual assaults occurred during their military service and was an increase of about 10 percent from the previous year.

The American Legion is deeply concerned with the plight of MST survivors and continues to work with Congress to find the right treatment for every patient, while urging VA to be flexible and to ensure that these veterans receive the care they need.

The American Legion will work to ensure that those who have become victims are treated, while urging the U.S. Armed Forces to take steps to eradicate MST entirely.

WHAT CAN CONGRESS DO?

- » Ensure VA has all necessary resources to remain committed to providing veterans access to help they need to recover from MST.
- » Maintain oversight of VHA's MST counselors as per VHA Directive 1115 and to continue universal screening for all veterans for history of MST.
- » Maintain oversight of VBA's Women Veterans Claims and MST sensitivity training for processors.
- » Encourage better awareness training in the DoD for MST sensitivity and develop more comprehensive care options for survivors, including better availability of therapists and group therapy, along with other options to make MST care more accessible to veterans.

CARE



Improved maternity care helps support the unique needs of women veterans. DoD

Improvements for newborn care

For women veterans who are eligible and become pregnant, the Department of Veterans Affairs provides Maternity Care Coordinators (MCC) at every VA Medical Center. The MCC assists women in the process of receiving services in the Veterans Health Administration and in the community throughout pregnancy, delivery and postpartum. VA offers additional maternity care services such as lactation services and products, nursing bras, postpartum screenings and support groups. VA continues to see a significant increase of women veterans using VA maternity benefits.

Disabilities, unique stressors and exposures during service are risk factors for high-risk pregnancy among women veterans. Women veterans are 40 percent more likely than their civilian counterparts to deliver newborns requiring specialized and intensive services. A high-risk pregnancy, plus the need for neonatal intensive care, may require newborns to be hospitalized longer than the average 48 to 96 hours in adequate facilities, which could be miles away from where the child was delivered. VA's current policy covers infant care for up to seven days. VA does not cover medically necessary transportation costs for the newborn.

The American Legion has testified numerous times supporting legislation to extend post-delivery care services for newborns by extending VA coverage from seven to 14 days and covering the cost of medically necessary transportation.

WHAT CONGRESS CAN DO?

- » Hold VA accountable by promoting the maternity care program and ensuring MCCs are fulfilling their job descriptions.
- » Pass legislation to amend Title 38, U.S. Code, to improve care provided by the Secretary of Veterans Affairs to newborn children.
- » Pass legislation to authorize the Secretary of Veterans Affairs to furnish medically necessary transportation for newborn children of certain women veterans.

KEY POINTS

- » Each VA Medical Center has Maternity Care Coordinators (MCCs) to help veterans through the process, during and after pregnancy.
- » Women veterans are at a higher risk to deliver a newborn who may require additional care.

Newborn care includes, but is not limited to, inpatient care, outpatient care, medications, immunizations, circumcision, well-baby office visits, neonatal intensive care, and other appropriate post-delivery services.

Dr. Patricia Hayes,
Chief Consultant for
Women's Health Services

CARE

KEY POINTS

- » Veterans of various eras and theaters of operation are currently receiving different levels of VA caregiver benefits, based on their dates and locations of service.
- » All veterans deserve equality in terms of benefits, regardless of the era in which they served.

These hidden heroes have served as an unpaid workforce, absorbing the overwhelming challenges that can come with caring for a veteran.

Elizabeth Dole,
Elizabeth Dole Foundation
founder and former
U.S. senator



Caregivers of eligible veterans from all war eras deserve equal support. VA

Support for veteran caregivers

The American Legion has long argued that the Department of Veterans Affairs Caregiver Program must be expanded to include all generations of veterans. The American Legion believes that all veterans deserve equality in terms of benefits, regardless of era.

Policy makers are slowly recognizing the nearly 6 million caregivers who provide support for veterans in need of intensive personal assistance due to medical conditions related to military service. On June 6, 2018, President Trump signed the VA Maintaining Systems and Strengthening Integrated Outside Networks Act, or MISSION Act. Section 161 expands veteran caregiver benefits to caregivers of veterans of all eras in a phased manner.

The first phase will be for caregivers of veterans severely injured in the line of duty on or before May 7, 1975. But VA has delayed the new technology and the systems to process these new applicants to June 2020, two years after the signing of the MISSION Act. The second phase for eligible caregivers of veterans who served from 1975-2001 is pushed back to fall 2022.

The American Legion urges VA to provide the same level of benefits to all eligible enrolled veterans. VA caregiver benefits should not be limited to specific eras but expanded to assist all eligible, VA-enrolled veterans, including those who require caregiver assistance in day-to-day health-care needs, regardless of when they served.

WHAT CAN CONGRESS DO?

- » Allow all caregivers to begin the application process, therefore making them eligible for back pay when the system is up and running and they may receive acceptance into the program.
- » Maintain oversight on the expansion of VA's Program of Comprehensive Assistance for Family Caregivers (PCAFC) under Caregiver Support.

CARE



A 2019 American Legion survey revealed high interest in suicide-prevention training.

Veteran suicide prevention

In 2019, VA reported that the suicide rate among male veterans was 1.3 times the rate of other adult men in 2017. For women veterans, the suicide rate was even higher at 2.2 times the rate of their civilian counterparts. Recent statistics on suicide are shockingly high but conservative because many suicides are misclassified as death by motor vehicles, poisonings, drownings, overdoses or other accidents.

Many factors increase the risk of veteran suicides: post-traumatic stress disorder; traumatic brain injury; loss of a sense of purpose; loss of a sense of belonging; stigma surrounding mental health; access to lethal means (firearms, bridges, opioids, etc.); and substance use and abuse disorders.

The American Legion launched an online mental health survey in May as part of the organization's continuing research into mental health issues impacting veterans. The survey was created by the American Legion's TBI/PTSD Committee and was designed to collect data that will help The American Legion bring local resources related to TBI, PTSD and suicide prevention to veterans and their families.

The data collected indicated 82.47 percent of participants never received any form of suicide prevention training and 67.39 percent of participants were somewhat likely, likely or very likely to take suicide-prevention training if offered.

The survey identified that 84.23 percent of respondents never sought mental health care from VA Vet Centers, and nearly 40 percent of respondents were unsure of eligibility for VA mental health services.

WHAT CAN CONGRESS DO?

- » Urge the DoD and VA to implement an automatic flagging system to alert providers of potentially fatal prescription drug combinations.
- » Provide VA the necessary funding for complementary and alternative therapies for treating TBI, PTSD and other mental health conditions.
- » Improve VA's hiring process for mental health providers.
- » Increase funding for DoD and VA suicide-prevention programs.

KEY POINTS

» The American Legion established a suicide-prevention program in 2017 and aligned it with the TBI/PTSD Committee, which reviews methods, programs and strategies that can be used to reduce veteran suicide.

» The American Legion and VA are currently working together to adopt a public health approach to suicide prevention which looks beyond the individual to involve peers, family members and the community.

» In 2019, The American Legion conducted a Mental Health Survey to analyze treatments for TBI/PTSD, and gauge current suicide prevention readiness.

An estimated 20 veterans a day take their own lives. Every one of these instances is tragic. More veterans die from their own hands than are killed by our nation's enemies. We must do a better job of embracing and listening to these men and women.

James W. "Bill" Oxford,
American Legion
National Commander

CARE

KEY POINTS

- » The American Legion remains deeply concerned about high numbers of veterans who develop opioid/substance use disorders as a means of mitigating their physical and emotional pain.
- » The American Legion will continue to urge VA and DoD to investigate the potential harms of antidepressant medications and their apparent link to veteran suicide.



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After combat, it's common for veterans to suffer chronic pain. But now that doctors have a clearer understanding of the risks of addictive painkillers, they are wary of relying on opioids to relieve it. Plus, veterans suffer from addiction at higher rates than the general population.

Robert Wilkie,
Secretary of Veterans Affairs

Prescription drug abuse

Data collected by the Department of Health and Human Services suggest that at least 2 million Americans have opioid-use disorders involving prescribed medication. This is an issue that affects all Americans, but members of the military community may be at even greater risk. In 2017, VA Secretary Robert Wilkie stated that “more than 130 Americans died each day from a drug overdose involving an opioid, and veterans were twice as likely to die of the same. This connection may be attributed to the fact that 60 percent of veterans who have served in the Middle East, and more than 50 percent of older veterans live with ... chronic pain.”

The American Legion is deeply concerned about the prevalence of opioid use among the military community and understands the pain experience by our servicemembers is not only physical. Many members of the military and veterans are suffering from invisible wounds. The most common treatment method is pharmacological. According to a DoD study, antidepressants were prescribed to 70-80 percent of service members diagnosed with depression or PTSD.

The American Legion is extremely concerned with the effects antidepressants may have on veteran suicide, and the rate VA prescribes such medications. A study comparing suicide rates between seven different types of antidepressants, found six to have suicide rates 10 times that of even the most at-risk veteran population.

The American Legion passed Resolution No. 52: Antidepressant Harms Analysis in August 2019, urging VA and DoD to investigate the potential harms of these medications. This resolution calls for a report to be created detailing any and all findings to the President of the United States, Congress and The American Legion.

WHAT CAN CONGRESS DO?

- » Urge VA and DoD to investigate the role antidepressants have in veterans, active and reserve component servicemembers and National Guard personnel suicides.
- » Ensure VA has all necessary resources to remain committed to providing veterans access to the help needed to recover from substance abuse and opioid use disorder.

CARE



Research on donated brains helps scientists better understand effects of TBI. *Ryan Young*

The Road Home from PTSD/TBI

Approximately 6,967 servicemembers have died during overseas operations since Sept. 11, 2001, and an additional 52,802 have been wounded, according to a Congressional Research Report published in April 2019. Traumatic brain injury (TBI) and post-traumatic stress disorder (PTSD) have become known as the “signature wounds” of this war, and in recent years, thousands of studies, articles and reports have focused on their effects on veterans and active-duty personnel. With no end to the Global War on Terrorism in sight, the post-9/11 cohort will continue to grow, as will the number of veterans requiring mental health care.

At least 383,947 servicemembers were medically diagnosed with TBI between 2000 and 2018, according to the DoD. The National Center for PTSD reports that between 11 and 20 percent of Operation Enduring Freedom and Operation Iraqi Freedom veterans have PTSD in a given year. These veterans are three to five times more likely to suffer from depression than those without PTSD diagnoses. While the number of veterans diagnosed with TBI and PTSD is increasing significantly, the types of treatments offered remain limited and inadequate.

The American Legion’s TBI/PTSD Committee has spent nearly a decade studying scientific research and meeting with clinicians, policy analysts and mental health experts to understand the problem and explore potential solutions.

WHAT CAN CONGRESS DO?

- » Increase budgets for DoD and VA to improve the research, screening, diagnosis and treatment of TBI and PTSD.
- » Urge DoD and VA to closely monitor and study drugs prescribed in potentially toxic combinations, particularly involving addictive benzodiazepines and opioids, especially when prescribed by non-VA providers through the MISSION Act.
- » Improve training for DoD and VA personnel to identify and prevent suicide risks.

KEY POINTS

- » The American Legion TBI/PTSD Committee understands, evaluates, expands awareness and advances research into effective therapies and treatments for TBI and PTSD.
- » The American Legion will continue to review methods and strategies to treat TBI and PTSD in order to reduce veteran suicide.

PTSD affects the mind, body and relationships. There is no silver bullet approach.

Nicole French, Psy.D.
Military Veteran and
Clinical Director at
Veterans Bridge Home

CARE

KEY POINTS

- » As many as 60,000 veterans volunteered for medical research for the U.S. biological and chemical programs between 1942 and 1975.
- » Generations of veterans were exposed to various toxic and environmental hazards that continue to affect them and their children.
- » Veterans can access more information on military exposure and their health by visiting publichealth.va.gov/exposures/index.asp.
- » VA and DoD will conduct a long-term study that will follow veterans for decades looking at their exposures and health issues to determine the impact of deployments to Iraq and Afghanistan.

There are all sorts of toxic substances out there, many more than are imaginable to the layperson, whether it is depleted uranium, pollutants from burn pits, or nerve gas in unexploded ordnances.

Sen. Richard Blumenthal
(D-Conn.)



Studies into the effects of burn-pit exposure must be accelerated. DoD

Toxic exposures during service

"Veterans may have been exposed to a range of chemical, physical, and environmental hazards during military service," according to the VA Public Health Department. These exposures result in health concerns such as burn pit-related illnesses, Agent Orange-related diseases, Gulf War veterans' illnesses, radiation-related diseases and conditions caused by vaccinations and medications. Exposure to toxic chemicals may have happened across a range of wars and operations to include Operations Iraqi Freedom, Enduring Freedom, New Dawn; the Gulf War; and the Vietnam War.

Exposure to toxic chemicals is not limited to wartime operations. Some examples are the Camp Lejeune water-contamination issue, Blue Water Navy Agent Orange exposure, per- and polyfluoroalkyl substances (PFAS), nuclear and other radiation exposures, burn pit smoke, dust, asbestos, lead and chemical or biological weapons.

The DoD is beginning to track locations where burn pits are utilized, but its study is far from exhaustive and many years late. VA has not done sufficient studies to determine illnesses and diseases directly related to the various types of toxic chemicals, nor have they begun to develop a list of presumptive conditions. Veterans who suffer from conditions related to toxic exposure have neither the time, resources or evidence to make their cases, nor is there adequate legislation to support toxic-exposure claims.

WHAT CAN CONGRESS DO?

- » Pass legislation requiring the proper study to understand what chemicals veterans were exposed to, where the exposure occurred, and develop a list of health conditions related to various toxic chemicals.

TRANSITION, EDUCATION & ECONOMIC OPPORTUNITY



Boots 2 Business workshops help veterans transition to civilian careers. Amy C. Elliott

KEY POINTS

- » The National Defense Authorization Act changes the sequencing of transition service delivery, making the self-assessment and individualized initial counseling the first TAP events, instead of pre-separation counseling.
- » The mandatory components of TAP are applicable for all service members who have at least 180 continuous days or more on active duty, including members of the National Guard and Reserves.

A new approach to transition

With an estimated 200,000 service members leaving the military each year, the Transition Assistance Program becomes an essential step in the journey back to civilian life. The American Legion continues to assist transitioning servicemembers in obtaining gainful employment through resume/interview workshops, career fairs and entrepreneurship workshops (such as Boots 2 Business), but as the economic landscape evolves, military and veteran interests must be represented in civilian workforce initiatives. In response to previous American Legion recommendations, new changes to the TAP were introduced in the National Defense Authorization Act, and responsible oversight is required.

To support this, The American Legion has established an Employment Advisory Task Force to identify, scale and guide innovative employment solutions for transitioning servicemembers and veterans. The Employment Innovative Advisory Task Force will report to The American Legion Veterans Employment & Education Commission and provide a compelling set of innovations that will, if adopted by the Department of Defense and other related agencies, improve the quality, timeliness of services, relevance and usefulness of information shared in the TAP.

“
It is our hope that these changes will provide ample time for transitioning service members to begin thinking about their transition and begin planning accordingly.

Tamre H. Newton,
Director of DoD's
Transition to Veterans
Program Office

WHAT CAN CONGRESS DO?

- » Hold federal agencies accountable for the implementation of the John McCain National Defense Authorization Act for the Fiscal Year 2019 (NDAA) adapted provisions of the BATTLE Act, which folds these optional two-day workshops on higher education, skills training and entrepreneurship into the five-day TAP workshop.
- » Hold unit commanders or their designees accountable for ensuring all servicemembers, in particular the reserve component, are allowed to attend TAP.
- » Introduce legislation to authorize military spouses to accompany service members participating in TAP.

TRANSITION, EDUCATION & ECONOMIC OPPORTUNITY

KEY POINTS

- » Title 5, section 3310, originating from Public Law 89-554, dated Sept 6, 1966, still has guards, elevator operators, messengers and custodians as occupations reserved for veterans.
- » A Veterans Recruitment Appointment can be appointed to a position through GS-11 without having to compete with other applicants.
- » The Society of Human Resources Management Foundation has found that the most pressing need in the human-resources community is to educate employers on the cultural and occupational competency of veterans in transition.
- » Executive Order 13518, Veterans Employment Initiative, aims to boost employment of military veterans, especially from Iraq and Afghanistan, in the federal government.

Advocates for veterans and researchers point to the first year of transition as a critical period for former service members' well-being and acclimating to civilian life.

Dawn Vogt,
Research Health Scientist
with the VA's National Center
Boston Healthcare System



American Legion job fairs help put employers in touch with veteran job seekers. *Ryan Young*

Veterans Preference hiring

Veterans Preference hiring benefits assist veterans from every socioeconomic class, gender, religion, ethnicity, sexual orientation and creed. Veterans Preference is triggered when a hiring manager is deciding between two equally qualified candidates, where one is a civilian, and the other is a service member or veteran. Veterans Preference requires a veteran to be fully qualified for the position sought. The preference was never intended to force agencies to hire a veteran merely because of veteran status.

The American Legion calls on Congress to take action to reaffirm the Veterans Preference Act of 1944. In light of recent policy changes, the reorganization of the Office of Personnel Management, and expanded use of new hiring authorities for federal agencies, The American Legion supports congressional reaffirmation action in support of the continued application of veterans' preference in this new federal workforce environment.

WHAT CAN CONGRESS DO?

- » Reaffirm continued application of Veterans Preference for federal hiring and reduction-in-force actions as originally intended by the Veterans Preference Act.
- » Mandate that agencies using new hiring authorities report annually to Congress on the employment level and representation of veterans in their workforces, along with the number of veterans hired using these new hiring authorities.
- » Include in that required report a report of all veteran recruiting and applicant sourcing activities to ensure the veteran community is aware of job opportunities, regardless of hiring authority, and any other activities that demonstrate commitments to conducting affirmative outreach to veterans.
- » Require that agencies develop best practices in administrative measures and resources that educate and train human resources professionals and hiring managers on the value of hiring veterans, military spouses, as well as, facilitate the translation of military to civilian work experience.

TRANSITION, EDUCATION & ECONOMIC OPPORTUNITY



Veteran-owned small businesses benefit from SBA loan products. *Lucas Carter*

Waiver for veteran business loan fees

An obstacle facing veteran small businesses is the lack of start-up and growth capital. Recognizing that investments were needed to grow the veteran small business industrial base and develop innovative products and services, Congress made it easier for veterans to obtain loans by eliminating fees associated with SBA-guarantee loans. SBA's fees are often added to the loans. With interest, it can amount to thousands of dollars to the cost of loan repayment.

Access to capital has been marked as the leading issue affecting small businesses in previous years. Recent statistics from SBA's Office of Capital Access show veteran utilization of SBA's 7(a) loans trending downward. The 7(a) loan program's inconsistencies will continue to fuel confusion among counselors and users and dissuade its utilization. Programmatic consistency in SBA's guaranty loan program benefits veterans and also has support of all the financial institutions that make the loans.

The solution to address this issue is to reinstate the fee waiver for SBA's veteran loan products.

WHAT CAN CONGRESS DO?

- » Congress should permanently reinstate the fee waiver for veteran small business owners and support S. 2138 Small Dollar Loan and Veterans Loan Enhancement Act.
- » Raising the guaranty level of 7(a) loans will also incentivize more financial institutions to provide loans to veteran small businesses.

KEY POINTS

- » Veterans are 45 percent more likely to start their own businesses, compared to their civilian counterparts. About 9 percent of small businesses are owned by veterans, and collectively, these 2.4 million businesses employ 6 million Americans, and generate over \$1 trillion in receipts.
- » Resolution No. 313: Support Elimination Funding Fees for Government Guaranteed Loans



Historically, through their service, America's veterans endure an 'earnings penalty' compared to their non-veteran peers. Waiving SBA 7a loan fees for veteran entrepreneurs helps them secure necessary small business financing and helps the American economy as they grow.

William (Bill) Elmore, former associate administrator for the U.S. Small Business Administration's Office of Veterans Business Development

TRANSITION, EDUCATION & ECONOMIC OPPORTUNITY

KEY POINTS

- » Nine of 10 veterans experiencing homelessness are men (33,492).
- » Six in 10 homeless veterans (22,740) were staying in emergency shelters or transitional housing programs, while two in five (14,345) were found in places not suitable for human habitation.
- » Most veterans experiencing homelessness were without children (36,280). About 2 percent (805) had dependents.



Homeless veteran encampments can be seen near the West LA VA campus. Schelly Stone

Prevent veteran homelessness

Generally, the causes of homelessness can be grouped into three categories: economic hardships, health issues and lack of affordable housing. Although these issues affect all homeless individuals, veterans face additional challenges in overcoming these obstacles, including prolonged separation from traditional supports such as family and friends; stressful training and occupational demands, which can affect personality, self-esteem and the ability to communicate upon discharge; and non-transferability of military occupational specialties into the civilian workforce.

Through the U.S. Housing and Urban Development's (HUD's) annual Point-in-Time (PIT) count estimate of America's homeless population, communities across the country reported that 37,085 veterans were experiencing homelessness on a given night in January 2019. Since 2010, veteran homelessness has dropped, with 50 percent (75,756) fewer veterans experiencing homelessness in 2019.

The American Legion is focused on prevention of homelessness through the simple mantra: "get them before they get on the street." The Legion offers support to at-risk and/or homeless veterans and their families, advice and counseling, assistance obtaining care and benefits, financial help, career fairs, business development workshops and other forums.

WHAT CAN CONGRESS DO?

- » Modify the current HUD definition that would cover couch surfing.
- » Permanently authorize the Supportive Services for Veterans and Families.
- » Provide funding for dental care and legal services for homeless veterans.
- » Continue to fund the homeless veterans Grant and Per Diem Program (transitional housing) at the level of local need, incorporating per diem for family members.
- » Provide a higher allocation of project-based HUD-VASH vouchers for homeless veterans.

The recipe is deceptively simple: federal funding efficiently invested in communities. When given enough resources, and enough focus by leadership, communities are absolutely able to house every single veteran who needs help.

Kathryn Monet,
Executive Director,
National Coalition for
Homeless Veterans

TRANSITION, EDUCATION & ECONOMIC OPPORTUNITY



Troops can get a jump-start in such licensed fields as physical therapy. *Chebea Purgahn*

Licensing and credentialing

Military occupational career fields are measured and evaluated by performance standards and are highly respected by the civilian workforce. Unfortunately, these unique occupations are often not properly licensed or certified in civilian fields, thus delaying immediate civilian employment and career advancement.

To lower these barriers, The American Legion has established the Credentialing Advisory Roundtable in order to promote the transferability of military skills and experience, identify strategies and promote initiatives that will expand upon progress and promote wider awareness in the fields of licensing, certifications and credentialing.

The American Legion Credentialing Advisory Roundtable will report to the Veterans Employment & Education Commission and in 2020 will study five components of military credentialing:

- Public/private partnership models to transition military servicemembers into civilian employment
- Stackable training models and accrediting entities
- Scalable transition tools
- State funding-based pilot models
- Research gaps on military to civilian employment

WHAT CAN CONGRESS DO?

- » Pass the Incentives for Our Nation's Veterans in Energy Sustainability Technologies Act (INVEST Act) to incentivize employers to hire returning veterans who have received a professional certification of military occupational specialty or skill in renewable energy, advanced manufacturing, machining or welding, or engineering.
- » Pass the Pre-Apprenticeships to Hardhats Act (PATH Act) to foster nonprofit partnerships between industry, labor, academia, community groups, veterans associations and government for the purpose of developing pre-apprenticeship programs designed to help individuals achieve self-sufficiency.

KEY POINTS

- » The American Legion hosted its third National Credentialing Summit in 2019 and continues to organize bi-annual credentialing roundtables that include stakeholders, government, industry and credentialing authorities.
- » The DoD's United Services Military Apprenticeship Program (USMAP) reached a milestone of 100,000 active participants in 2017 and continues to grow.
- » The Navy is launching a Naval Community College as part of an effort to revamp how it credentials and arranges education for Navy and Marine Corps personnel.

The efforts in Congressman Norcross' bill not only open the pipelines of the skilled trades to underserved communities across America, they are essential to securing a strong foundation for America's middle-class and ensuring national and local economic growth.

Sean McGarvey,
President of North America's
Building Trades Unions.

TRANSITION, EDUCATION & ECONOMIC OPPORTUNITY

KEY POINTS

- » Twenty-four percent of for-profit schools are out of compliance with the 90-10 rule with GI Bill and DoD benefits factored.
- » In 2019, the Federal Trade Commission reached a \$191 million settlement with for-profit University of Phoenix to resolve charges that the school falsely promoted its education benefits and used deceptive marketing materials that targeted active-duty service members, veterans and military spouses.



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“
Our veterans have served our nation selflessly, and we made a promise to assist them as they transition to civilian life after service...this bill puts reasonable protections in place that are fair to veterans, taxpayers, and schools.”

Sen. James Lankford (R-Okla.),
on the Protect Veterans'
Education and Taxpayer
Spending Act, of which he is
an original co-sponsor

GI Bill abuse by for-profit schools

With the passage of the Harry W. Colmery Veterans Educational Assistance Act – the “Forever GI Bill” – providing the largest improvement in veterans’ education in a decade, The American Legion is now focused on ensuring that student veterans and their families receive the highest quality education when using their GI Bill benefits. Unfortunately, unscrupulous schools and programs have successfully recruited veterans through misleading advertising and market saturation. While there are many reasons these schools are poor choices for veterans, one overriding reason why veterans have been aggressively recruited is the 90-10 loophole.

Under current law, for-profit colleges may receive no more than 90 percent of their revenues from federal aid. At least 10 percent of revenue must be acquired outside of federal aid so that the Department of Education has quality assurance. If a college offers a quality education at a competitive price, someone other than the federal government, such as employers, philanthropic scholarships or students, will be willing to pay for attendance at the school.

VA and DoD education programs are statutorily counted as private dollars on the 10 percent side, allowing schools to report GI Bill and DoD Tuition Assistance as private dollars, resulting in aggressive recruitment.

The American Legion believes that legislation and federal agency action should be taken to ensure better quality and student outcomes for servicemembers and veterans, by excluding Department of Defense and VA funds from the 90-10 calculation for federal student aid.

WHAT CAN CONGRESS DO?

- » Pass the Protect Veterans’ Education and Taxpayer Spending Act, to close the 90/10 loophole that counts VA and DoD educational funds as private dollars.
- » Pass the Protect the GI Bill Act to reinstate GI Bill benefits to students whose schools have closed and require common-sense GI Bill oversight of schools.

NATIONAL SECURITY



A Coast Guard aviation survival technician trains in Michigan. U.S. Coast Guard

Ensure the Coast Guard is paid

On a daily basis, U.S. Coast Guard personnel carry out missions that are vital to national security. The Coast Guard, however, is the only military branch forced to work without pay during a government shutdown. This is unacceptable.

The repeated and all too common threat of government shutdowns brings severe hardship on U.S. Coast Guard members and their families. No member of the U.S. military service should ever live in fear of not being paid. The American Legion supports bills and provisions that will ensure the Coast Guard is paid during government shutdowns.

This situation came to a head in January 2019 during the 35-day federal government shutdown. During that time, in an effort to help junior enlisted personnel with children at home make ends meet, The American Legion issued more than \$1 million in expedited Temporary Financial Assistance grants.

WHAT CAN CONGRESS DO?

- » Pass S.21 Pay Our Coast Guard Act, and H.R. Pay Our Coast Guard Parity Act of 2019.

KEY POINTS

- » The U.S. Coast Guard is the only branch of service forced to go without pay during the federal government shutdown of January 2019.
- » Dozens of American Legion posts raised funds and collected essential items to help Coast Guard families during the shutdown.
- » The American Legion adamantly opposes any delays or stoppages of pay for members of the U.S. Armed Forces, even during a time of shutdown for other government agencies, due to the necessity of maintaining our national security.

Ultimately, I find it unacceptable that Coast Guard men and women have to rely on food pantries and donations to get through day-to-day life as service members.

Adm. Karl Schultz,
26th Commandant of the
U.S. Coast Guard, during the
2019 government shutdown
that lasted 35 days

NATIONAL SECURITY

KEY POINTS

» The Pentagon's National Defense Strategy promotes a world where great-power competition, rather than counter terrorism, will drive DoD decision-making and force structure.

» For decades, the United States has generally been able to deploy forces when, how and where desired. Today, every domain is contested. The National Defense Authorization Act of 2020 budget requests \$750 billion for national security with just over \$718 billion of that amount for the DoD. This will reverse the effects of sequestration and exceeds the defense spending caps set by the Budget Control Act of 2011.

» The 2020 defense budget goes a long way toward rebuilding the military infrastructure, size and scope that sequestration crippled. The American Legion supports strengthening the U.S. military in these uncertain times.

This nation will remain the land of the free only so long as it is the home of the brave.

Elmer Davis,
Director of the United States
Office of War Information
during World War II and a
Peabody Award recipient



Marines disembark an MV-22 Osprey on a training mission in Hawaii. U.S. Marine Corps

Strengthen the U.S. military

For decades, the United States has generally been able to deploy forces at a time and place of its own choosing. Today, every domain is contested.

The National Defense Authorization Act of 2020 requests \$750 billion for national security with just over \$718 billion of that amount appropriated for the Department of Defense. This will help offset the effects of seven years of sequestration, and exceeds the defense spending caps set by the Budget Control Act of 2011. In 2018, the Pentagon outlined a planned trajectory of the defense budget that will not be enough to rebuild the military and create separation between the United States and its strategic competitors; this budget goes a long way toward correcting that deficit.

The American Legion supports strengthening the U.S. military in these uncertain times with both highly trained personnel and state-of-the-art supportive equipment. Our military men and women deserve no less. The administration, leaders at the Pentagon and Congress must do everything possible to ensure our nation's citizens and allies are protected.

WHAT CAN CONGRESS DO?

- » Continuing to focus on rebuilding the U.S. military to reconstitute and upgrade equipment that has supported over a decade of war and ensure our fighting force has the tools and weaponry to protect the United States and global interests against all forms of aggression.
- » Consistently pass the NDAA without the need for continuing resolutions, to ensure reliable, consistent funding, and ensure that all military members, including the U.S. Coast Guard, are paid without delay.
- » Increase the budget by 2.5 percent to 3.5 percent to ensure combat effectiveness for the next five years.

NATIONAL SECURITY



Gold Star families need continued support from veteran and military communities. DoD

Support for Gold Star Families

Members of the U.S. Armed Forces do not serve alone. Their spouses, children and other loved ones also sacrifice. While every service member raises his or her hand and swears an oath to lay down their lives for freedom if necessary and to defend the nation, a disconnect often exists between the military community and surviving family members.

The American Legion supports and demands surviving families receive the highest level of support as they face heart-wrenching decisions immediately upon being notified of a loved one's death.

WHAT CAN CONGRESS DO?

- » Support a program within the Department of Defense that ensures Gold Star Families receive the benefits and support they have earned.
- » Bring awareness to the programs that support and honor the ultimate sacrifices service members have made, as well as their families.
- » Restore base privileges and readmit Gold Star wives back into the military communities with their children regardless of their future marital status.

KEY POINTS

- » Gold Star parents, surviving spouses and children each have unique issues that need to be addressed. Veteran service organizations are capable and willing to provide support to Gold Star surviving families, and that support should be referenced upon notification of death.
- » Beyond the Service Members Group Life Insurance policy, which provides a one-time lump-sum payment for those who elect to sign up, there are two different types of survivor benefits available to military spouses and children. These include Department of Defense insurance annuity and Dependency and Indemnity Compensation.

I had no choice in those words that were given to me, but I did have a choice how I responded. My choice was to put on Marc's boots, pick up his weapon and stay in the fight for you, stay in the fight for every other man and woman who serves, stay in the fight for every family that has lost a loved one.

Debbie Lee, Gold Star Mother

NATIONAL SECURITY

KEY POINTS

- » Build a more lethal force. The most effective way to prevent war is to be adequately prepared for one and displaying superior firepower. In doing so, we must continue to take a competitive approach against our enemies whether they be state actors non-state actors or cyber criminals.
- » Force size matters not only in its lethality but its maneuverability to achieve sustainable outcomes that protect the American people and vital U.S. interests.
- » America must aim for a joint force that possesses decisive advantages for any likely conflict, while remaining proficient across the entire spectrum of war.
- » U.S. assets in space must be protected.



Combat is unforgiving, and more unforgiving in armies that are not manned, trained, equipped and well-led.

General Mark A. Milley,
then U.S. Army Chief of Staff,
currently Chairman of the
Joint Chiefs of Staff



Joint training prepares forces for military interoperability. DoD

U.S. military readiness and speed

In a time of uncertainty, America stands ready to fight its battles and support U.S. allies, any time and place. The U.S. military needs to be ready to take the fight to our nation's enemies, on their shores or our own. To ensure this, the U.S. military must be ready at a moment's notice to combat adversaries and be effective in doing so.

The American Legion supports a military ready to immediately deploy, to defend the homeland, allies and way of life. This includes armed conflict, natural disaster relief and support operations.

WHAT CAN CONGRESS DO?

- » Ensure that the U.S. military is fully funded on time, every time, through the NDAA and proposed budget.
- » Support reforming the Department of Defense focus on joint force business practices for greater performance and affordability. In doing so, the United States will out-think, out-maneuver and challenge the status quo while out-partnering and out-innovating revisionist powers, rogue regimes, terrorists and other possible threats.
- » Ensure the United States maintains and supports strategic partners and allies in Europe and, specifically, the Pacific Rim. These island nations are critical to the successful defense of global trade access routes and the security of U.S. interests in the South China seas.
- » Reassure U.S. allies and strategic partners like Australia, Taiwan, New Zealand, The Federated States of Micronesia and others that the United States will not let them suffer from communist aggression.

NATIONAL SECURITY



Joint training allows coalition forces to operate as a unified multi-lateral team. U.S. Air Force

Strength through alliances

Some of the greatest triumphs of American statecraft resulted from helping fragile and developing countries become successful societies. These successes created profitable markets for American businesses, allies to help achieve favorable regional balances of power and coalition partners to share burdens and address a variety of problems around the world. Over time, the United States has helped create a network of states that advance our common interests and values.

The American Legion supports strength in U.S. alliances through diplomatic measures. This is to ensure stability in regions where our allies and partners reside, as well as the homeland and its territories.

WHAT CAN CONGRESS DO?

- » Use diplomacy and assistance to encourage states to make choices that improve governance, rule of law and sustainable development.
- » Resolve our commitment to fragile states where weakness would magnify threats to America. For instance, engagement in Afghanistan seeks to prevent the re-emergence of a terrorist haven.
- » Safeguard territories and strategic island locations that will enable us to protect our interests and launch attacks from a variety of locations throughout the South Pacific region.
- » Place a priority on economic support that achieves local and macroeconomic stability, helps build capable security forces, and strengthens the rule of law.

KEY POINTS

- » There is no arc of historical happenstance that ensures that America's free political and economic system will automatically prevail. Our success and failure depends upon actions.
- » We must assist fragile states to prevent threats to the U.S. homeland. This can include non-state actors such as ISIS, Hezbollah and Al-Qaeda or include state actors like North Korea.
- » The United States will prioritize collaborations with aspiring nations that share a common core set of values with the United States and our allies. This will include investing where the United States can have the most impact on local reformers that are committed to tackling their own economic and political challenges.

Peace is a daily, a weekly, a monthly process, gradually changing opinions, slowly eroding old barriers, quietly building new structures.

John F. Kennedy,
35th President of the
United States

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PREAMBLE TO THE AMERICAN LEGION CONSTITUTION

FOR GOD AND COUNTRY
WE ASSOCIATE OURSELVES
TOGETHER FOR THE FOLLOWING PURPOSES:

To uphold and defend the Constitution
of the United States of America;

To maintain law and order;

To foster and perpetuate a
one hundred percent Americanism;

To preserve the memories and incidents
of our associations in all wars;

To inculcate a sense of individual obligation
to the community, state and nation;

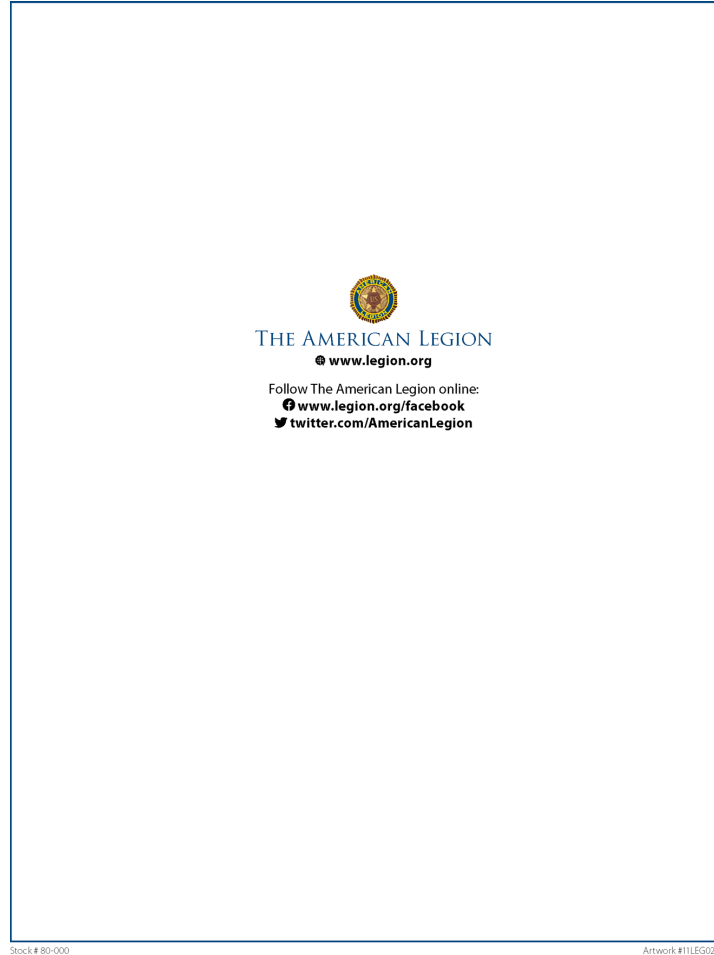
To combat the autocracy of both the classes and the masses;

To make right the master of might;

To promote peace and goodwill on earth;

To safeguard and transmit to posterity the principles of
justice, freedom and democracy;

To consecrate and sanctify our comradeship
by our devotion to mutual helpfulness.



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