TESTIMONY

OF

TIFFANY ELLETT

VETERANS AFFAIRS & REHABILITATION DIVISION DIRECTOR

THE AMERICAN LEGION

BEFORE THE

SUBCOMMITTEE ON HEALTH
COMMITTEE ON VETERANS' AFFAIRS
UNITED STATES HOUSE OF REPRESENTATIVES

ON

"PENDING AND DRAFT LEGISLATION"

JUNE 21, 2023

EXECUTIVE SUMMARY

LEGISLATION	POSITION
H.R. 1182 – Veterans Serving Veterans Act of 2023, *pg 2*	**Support with Amendments**
H.R. 1278 – DRIVE Act, *pg 3*	**Support**
H.R. 1639 – VA Zero Suicide Demonstration Act of 2023, *pg 4*	**Support**
H.R. 1774 – VA Emergency Transportation Act of 2023, *pg 5*	**Support**
H.R. 1815 – Expanding Veterans' Options for Long Term Care Act, *pg 6*	**Support**
H.R. 2683 – VA Flood Preparedness Act, *pg 7*	**No Position**
H.R. 2768 – PFC Joseph P. Dwyer Peer Support Program Act, *pg 8*	**Support**
H.R. 2818 ― Autonomy for Disabled Veterans Act, *pg 8*	**Support**
H.R. 3520 – Veteran Care Improvement Act, *pg 9*	**Support**
H.R. 3581 ― COPE Act, *pg 10*	**Support**

TESTIMONY OF
TIFFANY ELLETT
VETERANS AFFAIRS & REHABILITATION DIVISION DIRECTOR
THE AMERICAN LEGION
BEFORE THE
SUBCOMMITTEE ON HEALTH
HOUSE COMMITTEE ON VETERANS' AFFAIRS
ON
"PENDING AND DRAFT LEGISLATION"

JUNE 21, 2023

Chairwoman Miller-Meeks, Ranking Member Brownley, and distinguished members of the subcommittee, on behalf of National Commander Vincent J. "Jim" Troiola and more than 1.6 million dues-paying members of The American Legion, we thank you for the opportunity to testify on pending legislation considered before this Subcommittee.

The American Legion is directed by active Legionnaires who dedicate their time and resources to serve veterans and their families. As a resolution-based organization, our positions are guided by more than 104 years of advocacy and resolutions that originate at the grassroots level of our organization. Every time The American Legion testifies, we offer a direct voice from the veteran community to Congress.

H.R. 1182 – Veterans Serving Veterans Act of 2023

To amend the VA Choice and Quality Employment Act to direct the Secretary of Veterans Affairs to establish a vacancy and recruitment database to facilitate the recruitment of certain members of the Armed Forces to satisfy the occupational needs of the Department of Veterans Affairs, to establish and implement a training and certification program for intermediate care technicians in that Department, and for other purposes.

The Department of Veterans Affairs (VA) Intermediate Care Technician (ICT) program was established to address the growing demand for healthcare professionals in the VA system by leveraging our service branches frontline medical specialists: medics and Navy Corpsman. Created in 2012, the scope of practice for the role of an ICT is more advanced than a traditional VA Emergency Medical Technician (EMT). ICT requirements are configured for the medic and corpsmen skill set to provide a high-level clinical support to nurses and physicians. Additionally, the position was designed as an initial entry springboard for qualified veterans to explore further

career opportunities in healthcare.[1] Unfortunately, the program is continuing to be underutilized by veterans, with only 400 ICTs hired as of 2021.[2]

Reports from our Legionnaires who are involved in VA facilities at the state level suggest that the reason for this is not a lack of quality candidates, but rather process and pipeline barriers. For a Veterans Health Administration (VHA) facility to hire one person for a clinical position it can involve up to 18 steps — from getting approval for the job posting to running credential checks — and can take from four to eight months to complete. By that time, candidates have often accepted a job elsewhere.

The *Veterans Serving Veterans Act of 2023* would provide additional resources to this program, by mandating the Department of Defense and VA establish a recruitment database of available VA vacancies corresponding to military occupational specialties with relevant skillsets to the positions. Further, this legislation would reify the ICT program in statute, mandating the Secretary establish centers at VA medical facilities to train and certify veterans to work as ICTs.

The American Legion applauds Resident Commissioner González-Colón for this legislation; still, there is concern that it may exclude qualified Coast Guard Health Services Technicians. These Guardsmen are trained in providing emergency medical care similar to their sister branch servicemembers, however, they are a part of the Department of Homeland Security (DHS). Accordingly, The American Legion recommends amending this legislation to include DHS in federal collaboration to establish a recruiting database.

Through Resolution No. 338: *Support Licensure and Certification of Servicemembers, Veterans and Spouses*[3], The American Legion supports efforts to eliminate employment barriers that impede the timely and successful transfer of military job skills to the civilian labor market.

The American Legion supports H.R. 1182 *with amendments.*

H.R. 1278 – DRIVE Act

To amend title 38, United States Code, to improve the rate of payments provided by the Secretary of Veterans Affairs for beneficiary travel.

The Department of Veterans Affairs (VA) provides reimbursement for travel to health facilities to veterans that are at least 30% service-connected disabled, receiving VA pensions, or annual income below the maximum rate for VA pensions on a per mile basis. The reimbursement rate has been historically lower than the suggested rate set forth by the General Services Administration (GSA), having been modified less than 5 times since it was enacted in law. In 2010, a change was

[1] Snyder, C. "Pathways for Military Veterans to Enter Healthcare Careers." University of Washington Center for Workforce and Health Studies. May 5, 2016. https://depts.washington.edu/fammed/chws/wp-content/uploads/sites/5/2016/05/Pathways_for_Military_Veterans_FR_2016_May_Snyder.pdf. Unless otherwise noted, all links accessed June 15, 2023.

[2] "ICT Program Brief." Department of Veterans Affairs (2022). https://www.vaforvets.va.gov/vaforvets/docs/ICT-Program-Brief-PP0122.pdf

[3] The American Legion Resolution No. 338: *Support Licensure and Certification of Servicemembers, Veterans and Spouses* https://archive.legion.org/node/486

made to require this benefit to be maintained conforming to the minimum GSA rate for reimbursement. However, in the 15 years since this change, the rate has not been updated once. The current rate paid by the VA is $0.415 per mile[4], while the GSA has risen to $0.655 per mile as of January 2023.[5]

The American Legion believes this benefit is vital to ensure our nation's veterans can seek the care needed to ensure their whole health is a priority. A simple reimbursement can determine if the veteran can access the healthcare afforded to them to treat their service-connected disabilities without any additional hardship. The lack of a consistent and reliable mechanism to periodically adjust the per mile authorization for beneficiary travel creates an injustice and an unfair economic burden that will only grow in time. It is incumbent that Congress addresses this disparity sooner rather than later.

Through Resolution No. 62: *Veterans Transportation System and Benefits Travel,*[6] The American Legion supports periodically increasing the per mile reimbursement rate at a reasonable and acceptable level.

The American Legion supports H.R. 1278 *as currently written.*

H.R. 1639 – VA Zero Suicide Demonstration Act of 2023

To direct the Secretary of Veterans Affairs to establish the Zero Suicide Initiative pilot program of the Department of Veterans Affairs.

The issue of veteran suicide has persisted as a severe and growing crisis within our communities. In 2020, an alarming 6,146 veterans tragically ended their own lives. This statistic underscores the critical need to address this problem more effectively and urgently.[7] Traditional methods of mental health support and suicide prevention within the Department of Veterans Affairs (VA) have proven less than adequate, demonstrating a dire need for innovative, robust, and research-backed approaches to address this crisis.

The American Legion started the "Be the One" campaign to encourage mental health discussions without stigma, bolstering community resources and peer-to-peer support among veterans.[8] We stand firm in our commitment to mitigate this issue and support measures that facilitate quality mental health care and suicide prevention for veterans. The *VA Zero Suicide Demonstration Act of 2023* directs the establishment of the Zero Suicide Initiative pilot program, signifying a potential

[4] "Reimbursed VA travel expenses and mileage rate." Department of Veterans Affairs (2021). https://www.va.gov/resources/reimbursed-va-travel-expenses-and-mileage-rate/#mileage-reimbursement-rate
[5] "Privately Owned Vehicle (POV) Mileage Reimbursement Rates." General Services Administration (2021). https://www.gsa.gov/travel/plan-book/transportation-airfare-pov-etc/privately-owned-vehicle-mileage-rates
[6] The American Legion Resolution No. 62 (2016): *Veterans Transportation System and Benefits Travel* https://archive.legion.org/node/313
[7] "National Veteran Suicide Prevention Annual Report." Department of Veterans Affairs (2022). https://www.mentalhealth.va.gov/docs/data-sheets/2022/2022-National-Veteran-Suicide-Prevention-Annual-Report-FINAL-508.pdf
[8] Be the One. American Legion (2023). https://www.legion.org/betheone/about

breakthrough in our collective efforts to curtail this grave issue. The program instructs the Secretary of Veterans Affairs to implement a curriculum developed by the Zero Suicide Institute of the Education Development Center. It lays out a comprehensive 10-week program that includes training at the Zero Suicide Academy, mandates data collection for continuous quality improvement, and focuses on enhancing the skills of the staff dealing with patients at risk of suicide. Furthermore, this initiative aims to be operational at five VA medical centers, extending its reach to veterans living in rural and remote areas.

The American Legion stands in strong support of this legislation. We recognize and affirm the bill's potential to deliver a robust, evidence-based, and comprehensive approach to suicide prevention. Our endorsement is founded on the program's promise to provide quality mental health services, enhance the competence of the workforce, and improve the quality of life for our veterans.

Through Resolution No. 20: *Suicide Prevention Program*, The American Legion supports legislation analyzing best practices in veteran suicide prevention not currently used by the Department of Defense or the Department of Veterans Affairs for the purpose of encouraging aforementioned government agencies to adopt them.[9]

The American Legion supports H.R. 1639 *as currently written.*

H.R. 1774 – VA Emergency Transportation Act of 2023

To amend title 38, United States Code, to reimburse veterans for the cost of emergency medical transportation to a Federal facility, and for other purposes

The passage of the MISSION Act gave eligible veterans greater access to healthcare in the community, to include covering the costs for episodes of authorizing emergency treatment under Title 38 Code of Federal Regulations (CFR) §17.4020(c). The American Legion supports the VA Emergency Transportation Act and has worked extensively with The Department of Veterans Affairs (VA) to amend its rules on medical emergency transportation, to include air emergency transportation, in the episode of care. Too often, veterans are being charged and billed for emergency transportation and services from private healthcare providers, now VA is finalizing a new rule, published February 22 and took effect April 24, 2023 that would cover those past costs and reimburse veterans going forward.[10]

The American Legion agrees VA should cover the costs of the episodes of medical emergency services, that also includes air and land transportation. The bill would amend title 38, United States Code, to reimburse veterans for the cost of emergency medical transportation by changing 'emergency transportation' to 'emergency services' so that the emergency transportation is all

[9] The American Legion Resolution No: 20 (2018): *Suicide Prevention Program* https://archive.legion.org/node/3455
[10] Miller, A. "Veterans' Emergency Room Bills Could Get Repaid by VA Thanks to Change." Military.com, March 1, 2023. https://www.military.com/daily-news/2023/03/01/veterans-emergency-room-bills-could-get-repaid-va-thanks-change.html

inclusive of the emergency services provided and The American Legion supports through Resolution No. 76: *Veterans Emergency Room or Urgent Care Facility Relief*.[11]

The American Legion supports H.R. 1774 *as currently written.*

H.R. 1815 – Expanding Veterans' Options for Long Term Care Act

To require the Secretary of Veterans Affairs to carry out a pilot program to provide assisted living services to eligible veterans, and for other purposes.

In 2019, The Government Affairs Accountability Office (GAO) testified that the number of qualifying service-connected veterans whom VA is required to cover for nursing home care is projected to double from 500,000 to 1 million between 2014 and 2024.[12] While VA is aware that the majority of veterans are not entitled to "mandatory nursing home eligibility" (i.e., 70 percent disability rating; plus around-the-clock 24-hour nursing care), VA does acknowledge that approximately 80 percent of the aging veteran population will need assistance in the form of long-term services and supports (LTSS), especially for those who were divorced, have no children, estranged from their families, or live great distances from their family.[13]

It is concerning that so many veterans will require LTSS. GAO reported that VA has extensive waiting lists and struggles to meet the ever-growing demand for its array of long-term services and supports due to systemic staffing shortages of VA nursing assistants, health technicians, and geriatric specialists.[14] It would be more compassionate and reasonable to allow VA to enter into purchased care agreements for veterans who exceed the requirements for domiciliary care yet are not debilitating enough to meet the requirements for nursing home placement. As it currently stands, VA is still restricted from covering "room and board fees" at State Veterans Homes or privately-owned Assisted Living Facilities "—a policy that precludes veterans from utilizing this long-term care option."

The *Expanding Veterans' Options for Long Term Care Act* will ensure that aging veterans in between tiers of care can be placed in a supportive assisted living setting, where they can safely remain and thrive before the transitional need of a higher, institutionalized care setting (i.e., nursing home facility).

The American Legion strongly believes that veterans, and their families, are best served when their long-term care needs are promptly met while also honoring their self-autonomy and giving them the choice to remain within their local communities. This is especially true when aging veterans get closer to needing end-of-life care.

---

[11] The American Legion Resolution No. 76 (2017): Veterans Emergency Room or Urgent Care Facility Relief," American Legion, Aug. 22-24, 2017, https://archive.legion.org/node/623

[12] Silas, S. "VA Health Care: Veterans' Use of Long-Term Care Is Increasing, and VA Faces Challenges in Meeting the Demand." United States Government Accountability Office. February 1, 2020. https://www.gao.gov/assets/gao-20-284.pdf.

[13] "Elderly Veterans." Department of Veterans Affairs. February 1, 2020. https://www.benefits.va.gov/persona/veteran-elderly.asp#top.

[14] VA Faces Challenges in Meeting Demand for Long-Term Care." United States Government Accountability Office. GAO-20-463T. March 3, 2020. https://www.gao.gov/products/gao-20-463t

Through Resolution No. 20: *Home and Community-Based Services and Veteran Choice to Age in Place*, The American Legion supports legislation to address the needs of our ever-growing and aging veteran population if an approved and accredited agency provides the long-term services and support.[15]

The American Legion supports H.R. 1815 *as currently written.*

H.R. 2683 – VA Flood Preparedness Act

To amend title 38, United States Code, to authorize the Secretary of Veterans Affairs to make certain contributions to local authorities to mitigate the risk of flooding on local property adjacent to medical facilities of the Department of Veterans Affairs, and for other purposes.

The provisions of this bill fall outside the scope of established resolutions of The American Legion. As a large grassroots organization, The American Legion takes positions on legislation based on resolutions passed by the membership or in meetings of the National Executive Committee. With no resolutions addressing the provisions of the legislation, The American Legion is researching the subject and working with our membership to determine the course of action which best serves veterans.

The American Legion has no current position on H.R. 2683.

H.R. 2768 – PFC Joseph P. Dwyer Peer Support Program Act

To authorize the Secretary of Veterans Affairs to make grants to State and local entities to carry out peer-to-peer mental health programs.

Peer support is a well-established pathway to reduce vulnerability to stress and depression by emphasizing strengths and coping resilience to overcome trauma.[16] In March 2019, The American Legion launched our national "Buddy Check" program in which we ask our Legionnaires to conduct veteran outreach as part of their daily routine.[17]

After witnessing it's positive effects in its first year and potentially life-saving in 2020, through the COVID-19 pandemic and as winter months drew near, affecting the mental health and well-being of isolated veterans, we worked with both chambers of Congress to draft legislation to bring the "Buddy Check Week" concept to the Department of Veterans Affairs (VA), which was included in the Consolidated Appropriations Act for Fiscal 2023.[18]

---

[15] The American Legion Resolution No: 20 (2021): *Home and Community-Based Services and Veteran Choice to Age In Place* https://archive.legion.org/node/3579

[16] Mercier, A. et al., (2023). Peer Support Activities for Veterans, Serving Members, and Their Families: Results of a Scoping Review. National Library of Medicine. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9964749/

[17] "Buddy Check." The American Legion. https://www.legion.org/buddycheck

[18] "American Legion welcomes 'victories for veterans' in budget agreement". American Legion. December 23, 2022. https://www.legion.org/legislative/257781/american-legion-welcomes-%E2%80%98victories-veterans%E2%80%99-budget-agreement

Just as the VA can utilize lessons from The American Legion, so to can it scale successes of smaller community programs. The PFC Joseph P. Dwyer Peer Support Program, which is currently funded by New York cities and townships, has been highly successful across the state, where the program has expanded to 11 counties.[19] One veteran who takes their own life is too many, and more must be done as a nation to make sure that no veteran feels alone when they return home. Our veterans deserve our unwavering support, and this program is an excellent step in the right direction to make sure our veterans receive the support they need.

The *PFC Joseph P. Dwyer Peer Support Program Act* will help thousands of veterans' transition by taking the best practices learned in New York and authorize the Secretary of Veterans Affairs to make grants to state and local entities to carry out their own peer-to-peer mental health programs.

Through Resolution No. 364: *Department of Veterans Affairs to Develop Outreach and Peer to Peer Programs for Rehabilitation,*[20] The American Legion supports efforts to develop a national program to provide peer-to-peer rehabilitation services based on the recovery model tailored to meet the specialized needs of current generation combat affected veterans.

The American Legion supports H.R. 2768 *as currently written.*

H.R. 2818 – Autonomy for Disabled Veterans Act

To amend title 38, United States Code, to increase the amount paid by the Secretary of Veterans Affairs to veterans for improvements and structural alterations furnished as part of home health services.

The Department of Veteran Affairs (VA) Home Improvement and Structural Alterations (HISA) grants are aimed at enhancing the independence of disabled veterans and servicemembers within their homes, facilitating medically necessary improvements and structural alterations. Regrettably, the current funding limitations constrain veterans' ability to achieve independence. For instance, veterans with service-connected and non-service-connected disabilities are eligible for only up to $6,800 and $2,000 respectively.[21] Upon exhaustion of these funds, they are left with unfinished home improvement projects, resulting in partially accessible residences.

With the last funding enhancement dating back to 2009, our economy has seen significant shifts, further exacerbated by the economic turbulence resulting from the COVID-19 pandemic. Therefore, the need to adjust the HISA grant maximums for inflation, in line with the Consumer Price Index, and increasing the cap for veterans with both service-connected and non-service-connected disabilities is more pressing than ever.

The Autonomy for Disabled Veterans Act seeks to address these issues directly. The Act is poised to elevate the HISA grant maximum amount to $10,000 for veterans with service-connected

[19] Joseph P. Dwyer Veterans Peer Support Project. http://mhaw.org/dwyer/about
[20] The American Legion Resolution No. 364 (2016): *Department of Veterans Affairs to Develop Outreach and Peer to Peer Program for Rehabilitation* https://archive.legion.org/node/511
[21] "Rehabilitation and Prosthetic Services." Department of Veterans Affairs (2022). https://www.prosthetics.va.gov/psas/HISA2.asp

disabilities, and to $5,000 for those with non-service-connected disabilities. This adjustment not only acknowledges the economic reality of our times but also underscores the critical intent of HISAs — to provide financial assistance that ensures more independence for all disabled veterans. The American Legion is resolute in its support for initiatives that aim to enhance home-based services and living conditions for veterans. This isn't merely about convenience; it's about affirming the dignity and respect of those who have selflessly served our nation.

Through Resolution No. 357: *Support Veterans Housing Repair and Modification Pilot Program*, The American Legion supports legislation seeking to modify or augment programs like the Specially Adaptive Housing Program, to allow veterans service organizations and housing nonprofits to combine their resources with other federal funding by applying for grants through the Department of Housing and Urban Development.[22]

The American Legion supports H.R. 2818 *as currently written.*

H.R. 3520 – Veteran Care Improvement Act

To improve the provision of care and services under the Veterans Community Care Program of the Department of Veterans Affairs, and for other purposes.

The Department of Veterans Affairs (VA) community care program allows veterans to receive timely and quality healthcare in the private sector. Initially, VA conducted this program with a piecemeal approach, but the system substantially expanded after Congress passed the *Veterans Access, Choice, and Accountability Act of 2014*.[23]

Since the program's inception, VA has experienced issues regarding timeliness of care. While VA maintains access standards for wait times, these standards are oftentimes not met, and Congress has no way of enforcing them. Long wait times are not only burdensome, but they are dangerous in high-risk situations where a veteran needs immediate care, such as substance abuse disorder treatment. Furthermore, VA employees must streamline the process by being informed on which veterans can access the program and under what circumstances.

The American Legion believes that VA's community care program should be standardized for both patients and providers to ensure quality care for veterans and appropriate compensation for providers. The *Veteran Care Improvement Act* would codify VA's access standards to ensure moderate wait times. It would also codify the access standard for veterans seeking residential abuse treatment and notify them of their eligibility within two business days, which is critically needed for veterans seeking help and who are confused about their access to treatment. Lastly, this legislation would further improve veteran notification regarding the care they are entitled to.

[22] The American Legion Resolution No: 357 (2016): *Support Veterans Housing Repair and Modification Pilot Program,* https://archive.legion.org/node/504

[23] Bass, Elizabeth. "The Veterans Community Care Program: Background and Early Effects." Congressional Budget Office. October 2021. https://www.cbo.gov/publication/57583

Through Resolution No. 363: *Consolidation of Department of Veterans Affairs Care*, The American Legion supports legislation that standardizes the Community Care program and ensures that veterans receive timely, quality health care.[24]

The American Legion supports H.R. 3520 *as currently written.*

H.R. 3581 – COPE Act

To amend title 38, United States Code, to modify the family caregiver program of the Department of Veterans Affairs to include services related to mental health and neurological disorders, and for other purposes.

The Department of Veterans Affairs (VA) Program of Comprehensive Assistance for Family Caregivers (PCAFC) is integral to the provision of care for veterans grappling with multifaceted medical or mental health conditions. In its current incarnation, this program often leaves those providing care — the caregivers themselves — wrestling with their own mental and physical hardships while they strive to maintain a strong front for the veterans they're caring for.

Regrettably, these caregivers, whilst navigating the mental toll of their duties, encounter their own struggles and constraints. They are eligible for limited support from the VA and, after this aid has been utilized, are often left in a state of psychological strain.[25] This challenging circumstance leaves our caregivers with partially fulfilled mental and physical health needs.

With a keen understanding of these realities, the Caregiver Outreach and Program Enhancement (COPE) Act seeks to remedy these issues in a comprehensive and efficient manner. This legislation aims to enhance the PCAFC by bolstering grants to organizations that support caregivers, ensuring they have access to mental health resources. It also stipulates that the VA must actively engage with caregivers, providing information about available resources and strategizing to improve care for underserved populations. Furthermore, this legislation calls for VA to work with the Government Accountability Office (GAO) to conduct a comprehensive evaluation of the caregiver program, measuring its impact on disabled veterans and their caregivers.

The American Legion is an adamant supporter of our nation's caregivers, advocating for legislation aimed at improving their mental and physical health. This commitment isn't just about offering support; it's about upholding the dignity and respect of those committed to caring for our nation's heroes.

Through Resolution No. 18: *Comprehensive Supports for Caregiver Support Program*, The American Legion supports legislation that provides more robust and available comprehensive

[24] The American Legion Resolution No. 363 (2016*): Consolidation of Department of Veterans Affairs Care in the Community Program* https://archive.legion.org/node/510

[25] Shepherd-Banigan et al. "Family Caregivers of Veterans Experience High Levels of Burden, Distress, and Financial Strain." National Institute of Health. November 2020. https://doi.org/10.1111/jgs.16767

home and community-based support to better alleviate the physical and mental strains of caregiving.[26]

The American Legion supports H.R. 3581 *as currently written.*

Conclusion

Chairwoman Miller-Meeks, Ranking Member Brownley, and distinguished members of the subcommittee; The American Legion thanks you for your leadership and for allowing us the opportunity to explain the positions of our 1.6 million members on the importance of these pieces of proposed legislation. Questions concerning this testimony can be directed to John Kamin at 202-263-5748, or jkamin@legion.org.

[26] The American Legion Resolution No: 18 (2022): *Comprehensive Supports for Caregiver Support Program* https://archive.legion.org/node/7902