

**The next four months of training will focus on the Four Pillars of The American Legion – Veterans Affairs and Rehabilitation, National Security, Americanism, and Children and Youth. Here is the first installment.**

**Pillar 1: Veterans Affairs & Rehabilitation**

For more than 90 years, the Legion has been the nation's leading advocate for proper health care and earned benefits for America's veterans. The Legion was instrumental in creating the Veterans Administration in 1930, and an ardent supporter of its rise to Cabinet status when it became the Department of Veterans Affairs (VA) in 1989. As the relationship between VA and veterans evolves, the Legion will help VA meet its critical mission.

As it has for decades, the Legion continues to aggressively lobby for adequate funding of the Veterans Health Administration (VHA), to provide timely access to quality health care. Additionally, the Legion seeks to ensure fair rulings on claims and other earned veterans benefits for those who have service-connected injuries and illnesses. A nationwide network of more than 2,500 American Legion accredited service officers and other professional staff works diligently to assist veterans in obtaining the benefits and care they have earned and deserve through VHA, the Veterans Benefits Administration (VBA) and the National Cemetery Administration.

Today, as the number of discharged veterans from operations Iraqi Freedom (OIF), Enduring Freedom (OEF) and New Dawn (OND) surpasses 1.2 million, the Legion's congressionally chartered role to support them could not be more relevant. However, the Legion also strongly believes that a veteran is a veteran, regardless of war era or location of service. In this way, the Legion is the only organization that works on behalf of about 23 million U.S. veterans alive today.

The Legion has tens of thousands of members who volunteer nearly a million hours annually in VA facilities to help their fellow veterans navigate the VA system (saving the department about \$20 million per year).

The Legion stands on the front line of change for veterans through its pillar of service called Veterans Affairs & Rehabilitation (VA&R). VA&R's top priorities are to:

**Protect VA from Budget Reductions:**

Last year's failure of the congressional "supercommittee" means that automatic spending cuts, known as sequestration, are scheduled to take effect in January 2013, unless Congress finds other options for federal budget reductions. Although the Obama administration has said all programs administered by VA (including veterans' medical care) are exempt from sequestration, the Legion is concerned that VA's federal administrative expenses are not covered. This lapse has the potential to affect the care that our veterans need and deserve. Hundreds of thousands of our men and women who served in Iraq and Afghanistan are now relying on VA for their health care, as are our older veterans. The administration and members of Congress must make sure that VA's entire budget is protected from the effects of sequestration.

**Boost VA Construction Projects:**

The Legion is profoundly disappointed that VA construction, both major and minor, is woefully underfunded. This failure to provide adequate, safe and up-to-date medical treatment facilities affects thousands of veterans. VA's Strategic Capital Investment Planning (SCIP) program has identified gaps in space, access, workload, safety, security, and other areas that can be fixed with construction projects, maintenance, enhanced-use leasing (EUL) or other methods.

When SCIP was launched, it identified 4,808 capital projects to be corrected over a 10-year period, costing between \$53 billion and \$65 billion. In its first year, the program was not adequately funded to correct deficiencies within the time allotted. Now - using estimates for current construction needs and maintenance - the Legion expects it will take VA 60 years to close construction gaps at current funding rates.

Additionally, VA is not able to engage in EULs because Congress did not reauthorize such privileges in November 2011. Without EULs, VA is unable to meet its construction needs or the Building Utilization Review and Repurposing (BURR) initiative. The BURR initiative was developed to meet the needs of homeless veterans. More than 100 properties were identified as potential locations for transitional housing.

The Legion backs a fully funded SCIP program, and reauthorization of the VA to engage in EULs, provided it follows a priority list set by Congress. This list can include homelessness, women veterans, mental health, geriatric care and adaptive sports.

**Stop Denying VA Health Care:**

Veterans with certain demographic characteristics are now denied VA health care. The continued budget-driven suspension of Priority Group 8 veterans from new enrollment in the VA health-care system defies the spirit and intention of the Veterans Health Care Eligibility Reform Act of 1996. The Legion believes that any eligible veteran should be able to enroll in the VA health-care system.

**Speed Up Delivery of Electronic Health Records:**

DoD and VA have multiple programs designed to help servicemembers transition to veteran status and receive their earned benefits. Of 1.2 million OEF/OIF/OND veterans who are eligible for VA health care, only about half are enrolled.

The Legion urges our nation's leadership to speed up implementation of the Integrated Electronic Health Record (iEHR), currently scheduled for completion by 2017. Failure to implement iEHR has caused significant delays in veterans' transition because VA treatment teams do not have full access to DoD health records. The Legion also advocates for the dissemination of VA benefits information at all military transition and access points, including Transition Assistance Program (TAP) briefings.

**Reduce Delays in Integrated Disability Evaluation System:**

The Legion has a Medical Evaluation Board/Physical Evaluation Board (MEB/PEB) coordinator on staff, responsible for assisting servicemembers at Washington, D.C., military installations. The Legion also has MEB/PEB representatives at Fort Sam Houston, Texas, and Joint Base Lewis-McChord, Wash., who are supervised by the MEB/PEB coordinator.

As of January 2012, about 24,000 servicemembers were participating in the Integrated Disability Evaluation System (IDES) across all branches of service, including National Guard and reserve units. The Legion provides appeal assistance to servicemembers through all phases of the IDES process, including representation at formal hearing boards.

Currently, it takes servicemembers an average of 374 days to process through the IDES program. The Legion recommends that:

DoD adheres to VA ratings, rather than using them only as guidelines.

The program is implemented uniformly across services and geographic regions.

A clear and concise explanation of the IDES program is provided to the servicemember and immediate family upon consideration of a medical evaluation board.

The Physical Evaluation Board Liaison strictly adheres to the scope of responsibilities.

Caregivers of seriously ill or injured servicemembers/veterans are provided single points of contact for any assistance regarding the patient's health and welfare.

**Improve Access to Health Care in Rural Areas:**

From October 2011 to March 2012, The American Legion's System Worth Saving (SWS) Task Force conducted a series of visits to VA medical centers, to evaluate the challenges veterans living in rural areas face with their VA health care. Two major concerns are VA's definition of "rural veteran," and its transportation network, which assists veterans traveling to and from medical appointments.

First, VA currently uses the Census Bureau's definition of "rural", which means, for instance, that if a veteran lives in a rural area but also lives close to a VA medical facility, then he or she is not considered a rural veteran. VA's current definition does not take travel time and distance into consideration. This is problematic because many veterans are incapable of driving long distances; nor do they have proper transportation to navigate the rough terrain in rural areas.

The Legion recommends that VA broaden the Census Bureau's definition to incorporate access and driving times to its facilities. Using this new definition would assist in understanding the needs of a newly structured Veterans Transportation Network.

Secondly, in highly rural areas, many veterans live hours away from their local VA facilities; therefore, voluntary transportation has been a key component in rural health care. Currently, most VA medical centers offer volunteer transportation services, which can be unreliable.

The Legion recommends that VA medical centers implement a Veterans Transportation Department. Under this plan, drivers would be paid employees (in addition to volunteers). Such a program could ensure not only reliable transportation, but also create incentives and jobs for drivers. [View the full SWS Rural Health Care Report »](#)

#### **Address Environmental Exposure Issues:**

Servicemembers have often been afflicted with illnesses related to environmental exposure, which may be caused by direct contact, testing, storage, or transportation of toxic materials, such as dioxins located in herbicides or the burn pits in Afghanistan, Iraq and even stateside. These hazards lead to lifelong complications and can even be passed on to future generations. (For example, spina bifida has been linked to Agent Orange exposure.) The American Legion urges VA to include the C-123K Provider military transport used in the Vietnam War on its presumptive list for Agent Orange locations. Additionally, the Legion wants DoD to disclose all locations of environmental hazards so that research can be conducted on the effects to servicemembers. These sites would also include stateside facilities that eliminate, test or store contaminants. The Legion also wants to extend indefinitely the presumptive period for Gulf War illnesses due to the unknown effects of service in current conflicts.

#### **Increase Staffing Levels to Reduce VA Claims Backlog:**

One of VA's most difficult challenges is providing quality decisions in a timely manner as the number of cases increases. The veteran population in fiscal year 2011 was about 22.7 million, with more than 3.3 million receiving disability compensation benefits. In the majority of those cases, the claims processed by VBA's 56 regional offices involve multiple issues that are legally and medically complex, and time-consuming to adjudicate.

As of May 25, 2012, there were 904,624 claims pending in VBA; of those, 869,083 were claims pending for compensation and pension, and 563,457 (64.8 percent) were in backlog, pending for more than 125 days. There were also 255,925 appeals pending at VA regional offices. As of March 2012, the average number of days to complete a claim from date of receipt was 240.7 days (in contrast, VA's goal is 80 days).

There has been a steady increase in VA's pending claims backlog since FY 2008, when there were 397,000. At the end of FY 2009, there were more than 563,000 rating cases pending, which increased to about 849,000 in FY 2011. As of March 2012, VA's accuracy of rating claims averaged 86.1 percent. The reported accuracy for rating claims in a three-month period averaged 87 percent, but falls to 65.8 percent accuracy for claims pending more than 125 days. Inadequate staffing levels, lack of continuing education and increased pressure to make quick decisions result in an overall decrease in the quality of work. These are among the most common complaints raised by VA employees interviewed by Legion staff during regional office quality checks.

It is an extreme disservice to veterans, not to mention unrealistic, to expect VA to continue to process an ever-increasing workload, yet still maintain quality and timeliness with current staff levels. VA has an excellent opportunity to seek returning veterans, especially those with service-connected disabilities, for employment opportunities within VBA. Despite recent hiring initiatives, regional offices will need more personnel, given current and projected workload demands.

#### **Expand Veterans Treatment Courts:**

Some veterans are not accessing quality health care after combat and are at risk of entering the criminal justice system, where they could face charges stemming from medical issues. Veterans treatment courts, similar to drug and mental-health courts, were developed in 2008 to help veterans avoid incarceration or establishing a criminal record. They ensure that veterans who have entered the criminal justice system receive specific federal, state and county benefits to help in their rehabilitation. However, if a veteran fails to comply with the treatment plan, the original sentence is reinstated.

Today, there are more than 90 veteran treatment courts established across the country, with more added every month. The Legion urges Congress to continue to fund the establishment and expansion of these courts. The Legion also urges VHA and VBA to participate in these courts. VA representatives would be working alongside

more than 2,500 American Legion service officers to help veterans gain access to health care and file for their benefits.

**Increase Funding for National Cemetery Administration:**

The National Cemetery Administration (NCA) is currently made up of 131 cemeteries. According to an independent survey, NCA ranked first for performance among government and private entities four consecutive times in the last 10 years. NCA's best practices should be replicated across other federal agencies.

NCA has a plan to address the decreasing space available at current cemeteries due to the number of World War II, Korean War and Vietnam War veterans who are passing away. NCA also intends to expand into new locations, so that families will not have to drive more than 75 miles to visit their loved ones. To do so, the Legion urges Congress to fully fund NCA at \$250 million for major and minor construction at the national and state cemetery levels. This amount would give NCA the financial support necessary to make all adjustments and meet future demands.

Also, the Legion is concerned with the eligibility and monetary awards for the burial plot allowance. The Legion urges Congress to support a bill to return the burial plot allowance to all veterans who served during a time of war or conflict.