Testimony of

Vietnam Veterans of America

Presented by

Rick Weidman
Director of Government Relations

Before the

House Veterans' Affairs Committee Subcommittee on Health

Regarding

Veterans Timely Access to Health Care Act H.R. 3094 and Rural Veterans Access to Care Act of 2003

September 29, 2003

H.R. 2379

Vietnam Veterans of America

House Committee on Veterans Affairs Subcommittee on Health H.R. 3094 and H.R. 2379 September 30, 2003

On behalf of Vietnam Veterans of America (VVA), I want to thank the Chairman and other distinguished members of this Subcommittee for affording us the opportunity to testify before you here today on an issue that has emerged as one of critical importance to veterans who use the VA for their health care. We applaud you for acknowledging the seriousness of the current situation and holding this hearing.

Now, to the issues at hand:

Among the conclusions of the President's Task Force to Improve Health Care Delivery for Our Nation's Veterans was this: "The Federal Government has been more ambitious in authorizing veteran access to health care than it has been in providing the funding necessary to match declared intentions." In its final report, the Task Force noted that, as of January 2003, "at least 236,000 veterans were on a waiting list of six months or more for a first appointment or an initial follow-up." To ameliorate this unacceptable situation, Secretary Principi invoked the enrollment authority granted him under the Veterans Health Care Eligibility Reform Act of 1996 (Public Law 104-262), prohibiting any additional enrollment of the newly created Priority Group 8 veterans.

So, has this significantly reduced the waiting list? According to reports, there are still in excess of 100,000 veterans who have to wait more than six months – in some cases, up to a year or more – to see a primary care physician or a specialist. The system is breaking. VVA believes that passage of H.R. 3094, the Veterans Timely Access to Health Care Act, and H.R. 2379, the Rural Veterans Access to Care Act of 2003 can only help force a change for the better by holding the system more accountable for its failures.

H.R. 3094 would mandate that an initial appointment with a primary care provider be no more than 30 days from the date on which a veteran contacts the VA seeking an appointment. This is entirely reasonable.

To ensure accountability, the act as currently written would require that the Secretary of Veterans Affairs submit to both the House and Senate Committees on Veterans' Affairs a comprehensive report on the experience of the Department for each calendar-year quarter. A report would be due not later than 60 days after the end of each quarter. What H.R. 3094 does not spell out is what sanctions the Committees might invoke if the VA either flouts the law or neglects to comply with its provisions. Nor does the Act require VA to hold senior managers accountable for ensuring best possible compliance.

At the same time, we fear that H.R. 3094, while attempting to "fix" one part of the system, might rupture other parts. The law of unintended consequences seems to be only immutable law on Capitol Hill. Unless there is an infusion of funding – and, as you know, Mr. Chairman, it remains questionable as to whether or not the system will get the infusion of \$1.8 billion that it desperately needs to meet the demands on its medical services – enactment of this act will ring hollow. VVA does not want, as a byproduct of

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this legislation, the system to further bar from enrollment of ever greater numbers of deserving veterans.

VVA believes that unless and until the VA's medical operations are appropriately funded, the system will suffer one problem after another. What we don't want is a situation akin to the tale of the little Dutch boy who put his finger in the dyke to plug up one hole only to have another hole spring a leak.

What really is needed in this time of war is for the Congress, with or without the active support of the President, to ensure the proper funding of veterans' health care. If funding had not been flat-lined for three successive fiscal years during the mid-1990s, we would not have to continually be playing inadequate catch-up each year. Rather than debating the need for \$1.8 billion for the new fiscal year, we would be discussing funding \$8-\$10 billion a year more, as you can see in the accompanying graph. In developing this graph, VVA must point out, we took very conservative medical inflation figures from the Centers for Medicare and Medicaid Services.

By your leave, Mr. Chairman, VVA has included copies of our "White Paper" issued in late July of 2003 that details how the veterans healthcare funding in America is now suffering a structural shortfall that only gets greater each year. We also request that this White Paper be issued into the record along with our testimony today. The base funding must be restored by going "off-budget" in a four year plan of \$3.5 Billion per year in addition to the on-budget percentage increases comparable to that which the President has requested last year and this year. The problem with those percentage increases is that the base is just too darn low.

All of the hubbub about not losing the \$1.8 billion from the VA-HUD bill, all the press releases and statements by all of the major veterans' service organizations on this issue, ties in to the purpose of this hearing today. First and foremost, we need to properly and appropriately fund the VA's medical operations *taking into account both medical inflation and per capita usage of the system*. I think that then, if a veteran has to wait more than 30 days to see a physician it will be a true example of mismanagement or worse, not a situation of an overburdened system juggling inadequate resources.

Each of these bills address important questions relating to increased accountability of the veterans health care system. Both gross underfunding AND lack of proper accountability has led us into this mess. Much greater funding accompanied by stringent accountability measures is the only way to restore our veterans health care system to a fully functioning system that properly meets the needs of every generation of American veterans

Again, VVA is grateful for having had the opportunity to present our views before you today.

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VIETNAM VETERANS OF AMERICA Funding Statement September 30, 2003

The national organization Vietnam Veterans of America (VVA) is a non-profit veterans membership organization registered as a 501(c)(19) with the Internal Revenue Service. VVA is also appropriately registered with the Secretary of the Senate and the Clerk of the House of Representatives in compliance with the Lobbying Disclosure Act of 1995.

VVA is not currently in receipt of any federal grant or contract, other than the routine allocation of office space and associated resources in VA Regional Offices for outreach and direct services through its Veterans Benefits Program (Service Representatives). This is also true of the previous two fiscal years.

For Further Information, Contact:

Director of Government Relations

Vietnam Veterans of America. (301) 585-4000, extension 127

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RICHARD WEIDMAN

Richard F. "Rick" Weidman serves as Director of Government Relations of Vietnam Veterans of America. As such, he is the primary spokesperson for VVA in Washington. He served as a 1-A-O Army Medical Corpsman during the Vietnam war, including service with Company C, 23rd Med, AMERICAL Division, located in I Corps of Vietnam in 1969.

Mr. Weidman was part of the staff of VVA from 1979 to 1987, serving variously as Membership Director, Agency Liaison, and Director of Government Relations. He left VVA to serve in the Administration of New York Governor Mario M. Cuomo as statewide director of veterans employment & training (State Veterans Programs Administrator) for the New York State Department of Labor.

He has served as Consultant on Legislative Affairs to the National Coalition for Homeless Veterans (NCHV) and served at various times on the VA Readjustment Advisory Committee, the Secretary of Labor's Advisory Committee on Veterans Employment & Training, the President's Committee on Employment of Persons with Disabilities-Subcommittee on Disabled Veterans, Advisory Committee on Veterans' Entrepreneurship at the Small Business Administration, and numerous other advocacy posts in veteran affairs. Among those other responsibilities, he is currently serving as Chairman of the Task Force for Veterans' Entrepreneurship and Chairman, Task Force for Veterans Preference & Government Accountability, both of which are mechanisms for veterans' organizations and other Americans committed to justice for veterans to coordinate efforts on these vital issues.

Mr. Weidman was an instructor and administrator at Johnson State College (Vermont) in the 1970s, where he also was active in community and veterans affairs. He attended Colgate University (B.A., (1967), and did graduate study at the University of Vermont.

He is married and has four children.