

## INTRODUCTION

Chairman Smith, Chairman Rockefeller, Members of the Joint Senate-House Committee on Veterans Affairs, my fellow veterans and friends, I am Bernard Becker, the National Commander of the Jewish War Veterans of the U.S.A. JWV is Congressionally Chartered and also provides counseling and assistance to members encountering problems dealing with the Department of Defense (DOD), the Department of Veterans Affairs (VA), and other government agencies. The organization is an active participant in The Military Coalition, a group of 30 plus military associations and veteran's organizations representing over five million active duty, reserve and retired uniformed service personnel and veterans on Capitol Hill. I especially express our thanks to the leadership of this joint session, the Honorable Christopher Smith, Chairman of the House Veterans' Affairs Committee, the Honorable Jay Rockefeller, Chairman of the Senate Veterans' Affairs Committee and the Ranking Minority Members, Representative Lane Evans and Senator Arlen Specter, for their continuing efforts on behalf of veterans and the national defense of our beloved country.

I am accompanied today by JWV's National Legislative Officer, the Honorable Benjamin A. Gilman; the President of our Ladies Auxiliary, Susan Nelson, the President of our National Museum of American Jewish Military History, Neil Goldman; the President of our Descendants of JWV, Lynn Millinger, and our National Executive Director, Colonel Herb Rosenbleeth. In the audience today are those JWV members who are here to meet with their Senators and Representatives as part of JWV's Capitol Hill Action Day.

Members of the committee, it was a singular honor for me to present the JWV Medal of Merit to the Honorable Michael Bilirakis (FL), at our Congressional Reception yesterday

evening, in recognition of his many years of truly outstanding work for America's veterans. It was equally rewarding to JWV to have so many of you participate with us!

For over 100 years, JWV has stood for a strong national defense and for just and fair recognition and compensation for veterans. The Jewish War Veterans of the USA prides itself in being in the forefront among our nation's civic and veterans groups in supporting the well-earned rights of veterans, in promoting American democratic principles, in defending universal Jewish causes and in vigorously opposing bigotry, anti-Semitism and terrorism both here and abroad. Today, even more than ever before, we stand for these principles. The Jewish War Veterans of the U.S.A. represents a proud tradition of patriotism and service to the United States of America.

As the National Commander of the Jewish War Veterans of the USA (JWV), I thank you for the opportunity to present the views of our 100,000 members on issues under the jurisdiction of your committees. At the conclusion of JWV's 106<sup>th</sup> National Convention in Baltimore, MD our convention delegates adopted our resolutions for the 107<sup>th</sup> Congress. These mandates establish the legislative agenda for JWV during my year as National Commander.

JWV believes Congress has a unique obligation to ensure that veterans' benefits are regularly reviewed and improved to keep pace with the needs of all veterans in a changing social and economic environment. JWV salutes the Chairmen and Members of these Committees for the landmark veterans' legislation enacted over the past several years. Eligibility reform, patient enrollment, entitlement to long-term care, access to emergency care, enhanced VA\DOD sharing, improved preference rights of veterans in the federal government, enhancement of the Montgomery GI Bill, and other initiatives recognize the debt this country owes to those who have served our country.

We must improve access to veterans' health care, increase timeliness in the benefit claims process, and enhance access to national cemeteries and to state cemeteries for all veterans.

### VA BUDGET

The Jewish War Veterans of the USA is totally opposed to the proposal in the new Department of Veterans Affairs budget, Section 443, which calls for "...a \$1500 annual deductible for Category 7 veterans."

According to the VA's budget proposal, the goal is for veterans to pay a higher percentage of the cost for their medical care. JWV is 100% opposed to that. The timing of this proposal could hardly be more insensitive, with so many active-duty troops on assignment around the world, and maybe more call-ups to follow. Is this how the VA shows the next generation of veterans what they can expect?

Just a few weeks ago, when it appeared that category 7 would be eliminated, there was a last minute call from the White House which saved the program. Now it looks like a calculated deception. The new \$1500 deductible will virtually eliminate category 7 and decimate those on Social Security and/or pensions. Now, more than ever, there is a required need for Medicare subvention.

### FUNDING FOR VERN

JWV is urgently concerned about the need for a redistribution of VERN funds back to the medical centers in the Northeast. While it is certainly true that many veterans have relocated to the South and Southwest, there are still vast numbers of veterans in the heavily populated states of the Northeast.

JWV believes there should be a way to re-evaluate the veteran population in each state and allocate funding accordingly. JWV believes that an accurate accounting would result in increased funding for the Northeastern states.

## VA

JWV urges the President and Congress to reexamine and restructure the VA health care system so that it best serves all veterans' needs. Claims must be determined fairly and speedily; there must be a sufficient number of well-trained claims examiners to meet the needs so that unreasonable delays in determinations can be avoided. A Medicare bill for subordination must be passed. Access to medical care must be available within a reasonable amount of time.

## VETERANS HEALTH CARE

JWV seeks adequate health care for all veterans and, in that regard, strongly opposes any elimination of services for Category 7 veterans. JWV expects the Administration and the Congress to honor our nation's obligation to those whose service to their country truly reflects American ideals and values. JWV insists that VA budgets be sufficient to eliminate the rationing of health care to veterans. Those who have honorably served our country did not ration their efforts, their patriotism, their heroism, and, in many cases, their blood.

As a member of The Military Coalition (TMC), JWV is acutely aware of the issues concerning our active duty military personnel. JWV is also fully aware that it is the mission of the Department of Veterans Affairs to provide contingency support to the military medical care system in time of war or national emergency. Following the terrorist attacks on September 11<sup>th</sup>, this mission became a true reality for perhaps the first time. The threat of further mass

destruction on our own soil, and the deployment of thousands of U.S. military personnel to the far corners of the earth and to ships at sea emphasize the importance of the VA being fully capable of meeting this contingency mission. A system that is not fully funded to meet its primary mission to our nation's veterans is certainly not able to also accomplish its contingency mission as the back-up to the Department of Defense.

JWV is also vitally concerned about the issue of long term care. It is estimated that there are some two million veterans who served their country in their youth, many in World War II, who are now unable to afford health care. A number of these individuals will need a long term care.

#### VETERANS HEALTH ADMINISTRATION

Congress must continue to support increased VHA funding to maintain a strong and viable healthcare system. There are precious little additional efficiency savings expected throughout the system. Yet, those veterans now enrolled and using the system will continue to rely on VHA in the foreseeable future. JWV believes that all veterans should maintain their eligibility status and none of the category seven veterans should ever be disenrolled to enable VHA to be able to stay within the constraints of its budget.

#### VETERANS BENEFITS ADMINISTRATION

JWV recognizes and greatly appreciates the tremendous effort made by VA Secretary Anthony J. Principi to make significant improvements to the Veterans Benefits Administration (VBA). Secretary Principi is to be heartily commended for his outstanding efforts to improve the systems overall operations.

The VBA continues to be backlogged by hundreds of thousands of pending claims. Secretary Principi has issued a number of directives to address this difficult problem, a subject that he discussed in a speech at JWV's National Museum of American Jewish Military History shortly after he took office. One such initiative is the establishment of the Claims Processing Task Force with a mandate of 120 days to analyze the entire claims adjudication process and the Veterans Benefits Administration's computer systems. The Secretary's goal is to have the backlog of pending claims reduced by half and the average processing time down from 220 days to 100 days by mid-2003.

Mr. Chairman, to reach these ambitions and important goals, additional staffing is needed in the VA regional offices. VBA's workforce already contains many trainees with insufficient experience and the need for more trained personnel will continue to increase as the workload associated with new claims for diseases such as diabetes related to Agent Orange exposure, hepatitis C, and radiation-related claims increases. Veterans' benefits claims are becoming increasingly complex, both medically and legally.

In addition, there is a steady influx of newly initiated appeals as well as a high number of pending remand cases from the Board of Veterans Appeals.

The result is that disabled veterans must wait months and sometimes years for their benefit claim to be decided. In fact, many veterans die before ever receiving a decision on their claims. Many veterans believe they are dealing with a bureaucratic system that seems to be insensitive to their personal problems and needs.

Mr. Chairman, JWV believes it is critical that VBA's budgets be sufficient to ensure that progress toward its service improvement goals will continue so that veterans and their survivors will receive their benefits in a reasonable period of time.

Finally, JWV commends the VA researchers whose studies connected Lou Gehrig's disease (ALS) to the Gulf War. Although only a small number of veterans are involved, this disease is so severe that its presumption of service connection for Gulf War veterans and their survivors is most appreciated.

#### NATIONAL CEMETERY ADMINISTRATION

JWV commends the Under Secretary for Memorial Affairs, the Honorable Robin L. Higgins, for her outstanding leadership since taking over the National Cemetery System.

The rapid aging of the current veteran population has placed great demands on the operations of the VA cemetery system. Primarily because of the World War II veterans and their eligible family members, the VA internment rate is projected to increase throughout the next decade.

Due to the increasing workload demands of interments, graveside maintenance, and other areas of cemetery operations, the workload per full-time employee will grow in the coming years.

The National Cemetery Administration (NCA) is making great progress in meeting the interment needs of the nation's veterans and their dependents. Currently, 75 percent of all veterans live within 75 miles of open national or state veterans' cemeteries. The ultimate goal is to have 90 percent of all veterans living within 75 miles of open national or state veterans' cemeteries. The 90<sup>th</sup> percentile is the maximum probability of reaching veterans who reside in extreme rural areas.

A commitment of \$10 million, to the National Shrine Initiative will continue in FY 2002 for major improvements and renovations at the following national cemeteries; Long Island, NY;

Los Angeles, CA; Golden Gate, CA; Ft. Snelling, MN; and Willamette, OR. The National Shrine Initiative will continue as a NCA priority.

NCA's workload is increasing by nearly five percent per year, with cremations accounting for the majority of new interments. The peak years for the interment of World War II veterans are expected to be 2006 to 2010. Over the next decade, new national cemeteries are also planned for Atlanta, GA; Miami, FL; Pittsburgh, PA; Detroit, MI; Sacramento, CA; and St. Louis, MO. The Veterans' Millennium Act of 1998 (P.L. 106-117) required NCA to contract a study of where additional national and state veterans' cemeteries will be required through 2020.

NCA is preparing "fast track" construction projects to open new national cemeteries. This process would allow burials to occur in each section of a new cemetery as it is being constructed. Instead of taking the conventional approach to new cemetery construction, "fast track" authority would permit the planned new national cemeteries to open in less than half the normal time, which is seven years. Managing the National Cemetery Administration will be a challenge to Secretary Higgins! JWV wishes her every possible success and urges the Congress to insure sufficient funding for the work to be done.

#### THE MILITARY COALITION

JWV is proud to be a member and active participant of the Military Coalition (TMC). PNC Bob Zweiman, JWV's Chairman of the Coordinating Committee, serves on the Board of Directors of the Coalition.

Members of The Military Coalition meet each month and sometimes more frequently, to develop a legislative strategy for issues that affect the uniformed services community they represent. Representatives from the member organizations attend these meetings and serve on

one of eight committees (each usually has two chairpersons). Every committee covers a different area of interest: Guard and Reserve; Health Care; Morale, Welfare, Recreation, and Military Construction; Personnel, Compensation, and Commissaries; Retirement; Survivors' Programs; Taxes and Social Security; and Veterans.

Most issues considered by TMC are introduced by one of these committees. Others start in a full meeting and are referred to the appropriate committee, which examines the merits of each issue and makes a recommendation. The issue then comes before the entire Coalition, which decides if the initiative should be placed on TMC's legislative agenda.

Although many issues are considered by TMC, the Coalition focuses on those that have the broadest base of support, the greatest impact on the uniformed services community, or a significant impact on the services' recruiting and retention programs and readiness. TMC's decision to pursue an initiative is governed by TMC's "rule of five". If five or more organizations object to a proposal, the Coalition no longer considers the issue. However, organizations within TMC still may pursue the issue – or even oppose it – on their own.

JWV requests that the House and Senate Committees on Veterans' Affairs do everything possible to fulfill the legislative priorities of the Military Coalition. These positions are well thought out and are clearly in the best interests of our military personnel, our veterans and our nation's security.

#### VETERANS MILLENNIUM HEALTH CARE AND BENEFITS ACT

On November 30, 1999, the Veterans Millennium Health Care and Benefits Act was signed into law. The Millennium Act's long-term-care provisions made it clear that inpatient and home-and community-based services are integral parts of the benefits package that the VHA

is to provide to enrolled veterans. Two years have passed and regulations implementing the Act's long-term-care provisions have not been issued. The law also specified that, like other specialized services, VHA's long-term care is a unique national resource and its capacity must not be diminished in the process of VHA's restructuring and realignment. VHA continues to reduce its inpatient long-term-care capacity and has failed to fully implement home- and community-based programs.

### VA RESEARCH

VA medical and prosthetic research is a national asset that is a magnet for attracting high-caliber clinicians to practice medicine and conduct research in VA health-care facilities. The resulting atmosphere of medical excellence and ingenuity, developed in conjunction with collaborating medical schools and universities, benefits every veteran receiving care at VA and ultimately benefits all Americans.

VA research is clinically focused; 75% of VA researchers see patients. More effectively than any other research- funding sector, VHA provides a mechanism for the clinical application of research findings. The largest integrated medical care system in the world has a unique capability to translate progress in medical science to improvements in clinical care and the health of the population.

Research requires long-term commitment and continuity. The stability needed to push research through to results is undermined by the annual budget game in which the Administration submits a low-ball budget and counts on Congress to partially redress the shortfall. This leaves the research community in a state of perpetual uncertainty as it tries to adjust strategy and make funding decisions. We call on this Administration to break the cycle of

retrenchment and tentative implementation by committing to consistent annual incremental expansion.

JWV strongly requests that the Congress and the Administration fully fund VA research!

### MEDICAL AND PROSTHETIC RESEARCH

The contributions of VA medical research include many landmark advances, such as the successful treatment of tuberculosis, the first successful liver and kidney transplants, the concept that led to the development of the CT scan, drugs for treatment of mental illness, and development of the cardiac pacemaker. The VA biomedical researchers of today continue this tradition of accomplishment. Among the latest notable advances are identification of genes linked to Alzheimer's disease and schizophrenia, new treatment targets and strategies for substances abuse and chronic pain, and potential genetic therapy for heart disease. Many more important potentially groundbreaking research initiatives are underway in spinal cord injury, aging, brain tumor treatment, diabetes and insulin research, and heart disease.

### VA NURSING SHORTAGE

JWV is concerned that the shortage of nurses within the Department of Veterans Affairs (VA) will adversely effect patient care. Sufficient and high quality nursing care is one of the most important and necessary components of VHA's healthcare delivery system. Nurses continue to serve as the backbone of patient care.

JWV commends Congress for passing PL 106-149, which provided the framework to help revitalize VHA salaries in a number of disciplines, including nursing. While there are reports that some stations still have work to do to resolve significant salary discrepancies

between VHA and the community, this is only one component of the retention and recruitment equation.

### MEDICARE SUBVENTION

Medicare subvention for VA must be included in any planned Medicare reform legislation passed in the 108<sup>th</sup> Congress. Access to VA healthcare is an earned benefit. No Medicare-eligible veteran, treated for a non-service-connected medical condition, should be deprived of his or her federal health-care insurance dollars to pay for the care received in a VA medical facility.

Currently, approximately 10.1 million veterans are Medicare-eligible based solely on their age. Criteria for Medicare-eligibility are different than eligibility for treatment in VA. In the VA healthcare network, certain veterans are eligible for treatment at no cost for medical conditions determined to be service-connected. Medicare-eligibility is not a priority or criteria for health care at no cost in the VA healthcare system. Other veterans are eligible for treatment at no cost because they are economically indigent. All other veterans must pay for treatment received.

Medicare subvention would allow VA to seek reimbursement from the Center for Medicare and Medicaid Services (formerly known as HCFA) for treatment of non-service connected medical conditions of Medicare-eligible veterans. VA and the Center for Medicare and Medicaid Services should explore the Fee-For-Service or Medicare+Choice options. Medicare-eligible veterans should not forfeit their Medicare healthcare dollars because they prefer VA health care to health care offered in the private sector.

Since VA outperforms the private sector Medicare provider, JWV believes that veterans using Medicare at VA would be getting better quality of care than if they were using those Medicare dollars in the private sector.

### HEPATITIS C

The VA continues to do outreach to veterans to educate veterans about hepatitis C virus (HCV).

### POST TRAUMATIC STRESS DISORDER

JWV has long recognized the healing needs combat veterans have from the emotional scars of war. Post Traumatic Stress Disorder (PTSD) compensation and treatment have been on JWV's agenda for many years.

The National Center for PTSD has done remarkable work in research and the VA is the cornerstone in trauma treatment around the world. However, there seems to be a growing gap between the expertise within the VA and new employees and employees that have been downsized from one service and transferred to psychiatry to keep their jobs. The National Center for PTSD budget has been flat-lined for the last seven years. Its travel budget was larger in 1993 when there was almost half the staff than in 2001. The National Center could benefit from a budgetary increase in order to provide additional training and educational services to the field. JWV recommends a program be established that would allow the National Center for PTSD to raise funds for educational activities.

## ATOMIC VETERANS

JWV continues to be concerned that issues relating to atomic veterans and their claims for service connected disability and death benefits are still not resolved. VA has previously announced it intended to recognize additional radiation-related diseases in an effort to ensure comparability between VA disability compensation and the Department of Justice's Radiation Compensation Act programs. It stands to reason that atomic veterans should be presumed to have been exposed to some health hazards and risks from radiation and other hazardous materials as their civilian co-workers.

The list of presumptive radiation related diseases have yet to be published. JWV strongly urges the VA to complete this important task as soon as possible.

## GULF WAR VETERANS' ILLNESSES

JWV continues to actively support Gulf War veterans and their families as it has since August 1990. The American Legion created two particular programs specifically for Gulf War veterans: the Family Support Network in October 1990, and the Persian Gulf Task Force in October 1995. Today, The American Legion serves Gulf War veterans and their families at the community, state, and national levels through its 15,000 local posts an array of programs and services.

Thousands of Gulf War veterans, who suffer undiagnosed illnesses with a range of symptoms, known as "Gulf War veterans' illnesses", are not receiving adequate care or compensation from VA and/or DOD. In 1994, hallmark legislation in the form of PL 103-446 was enacted to ensure compensation for ill Gulf War veterans suffering from unexplained illnesses. Yet, to date, most Gulf War veterans who have filed a claim for undiagnosed illness

compensation have been denied service connection for those conditions. Although PL 103-446 looked good on paper, a dismal seventy-five percent denial rate is the reality for our sick Gulf War veterans trying to receive VA service connection for Gulf War-related undiagnosed illnesses.

### READJUSTMENT COUNSELING SERVICES

JWV has been a longstanding advocate of the Readjustment Counseling Services (RCS) dating back to the 1970's. RCS has remained a primary provider of PTSD counseling for combat and other traumatized men and women who served this country. As VA has shifted its focus to outpatient care, RCS has led the way in providing PTSD care. In spite of the fact that they treat more and more veterans each year, RCS has not seen a substantial budget increase in many years. JWV supports an increase for the RCS program to ensure that younger veterans who served in the Gulf War and in more recent peacekeeping missions will have the same access to care that the Vietnam veteran generation has come to know.

### EX-PRISONERS OF WAR

JWV strongly urges the Congress to correct a long standing failure to fairly compensate those military personnel who become prisoners of war. JWV urges the Congress to consider the following facts:

98% of the 42,781 POWs still alive are WWII and Korea Conflict veterans. They are dying at the rate of ten or more a day.

75,000 (65%) have already died in the 50 years since these wars; most without receiving any disability benefits.

Congress began addressing the situation in 1981 by establishing certain medical conditions as presumptives for POWs. However, because a very high level of research certainty (95%) was required before establishing presumptive status, many other medical problems common in POWs were, and still are denied this status.

Congress solved a similar problem for Vietnam veterans exposed to herbicides and Gulf War veterans exposed to unknown factors by simply mandating that a causal association is deemed to exist when credible evidence for such an association is equal to or greater than credible evidence to the contrary.

The VA POW Advisory Committee, mandated by Congress in 1981, has stated it is blatantly wrong to hold POWs to a different and more stringent standard. It has recommended POWs be held to the same standards as Vietnam and Gulf War veterans.

JWV requests that heart disease, stroke, liver disease, adult onset diabetes, and osteoporosis be considered presumptive for ex-POWs.

More detailed information on these diseases and ex-POWs are contained in H. R. 3430, which has been introduced by Congressman Michael Bilirakis of Florida. JWV supports this important legislation!

#### INTERNATIONAL CRIMINAL COURT

The Jewish War Veterans of the USA opposes subjecting the United States and American troops to the jurisdiction of the International Criminal Court or any other similar court of claim. Our country and our military must not be ordered in to any area until and unless they receive permanent immunity from such forums.

#### VOTING RIGHTS FOR MILITARY PERSONNEL

After the fiasco of the last Presidential election, it is obvious that many service members serving abroad were disenfranchised. JWV supports legislation to ensure the right to vote of America's Military and have that vote counted.

## FILIPINO VETERANS

JWV urges the President and Congress to recognize the service of WWII Filipino Veterans extending to them full and equal military and VA benefits. The Jewish War Veterans supports legislation in Congress to restore benefits to Filipino World War II veterans, Congressman Benjamin Gilman and Congressman Bob Filner have joined in a bi-partisan effort to introduce H.R. 491, the Filipino Veterans Equity Act, which would return the recognition and benefits that were taken away by Congress in the 1946 Rescissions Act.

Filipino soldiers, living in the Philippines—a territory of the United States at that time—were drafted into military service by an executive order of President Franklin D. Roosevelt. Under the command of General Douglas MacArthur, these Filipino soldiers fought side-by-side with forces from the United States mainland, defending the American flag in the now-famous battles of Bataan and Corrigidor. Thousands of Filipino prisoners died, both on the Bataan Death March and in prisoner of war camps. The Philippines endured four long years of occupation, and after its liberation, the United States used the strategically located Commonwealth as a base from which to launch the final efforts to win the war.

With the vital participation of Filipino soldiers so evident, many found it hard to believe that, soon after the war ended, Congress voted to take away benefits and recognition that Filipino World War II veterans were promised. The Jewish War Veterans supports H.R. 491 to correct this 56-year-old injustice.

## MEDAL OF HONOR

JWV supports the Defense Authorization Bill requiring the Department of Defense to review the records of all Jewish servicemen who are recipients of the Distinguished Service Cross, Air Force Cross or Navy Cross to determine if those individuals deserve the Medal of Honor. Historically, we know that the ratio of DSC, etc. to MOH is seven to one. The ratio does not hold true for persons of Jewish ancestry. Thus, this requirement represents an appropriate remedy.

## RIGHTS OF FORMER POW'S TO SUE THEIR FORMER CAPTURERS

The Jewish War Veterans of the USA supports the right of all former POW's and slave laborers to seek redress in the courts within the United States for illnesses and injuries incurred as a result of their captivity and/or slave labor. Any impediments to this right must be removed.

## CLOSING

Mr. Chairman and members of the House and Senate Veterans Affairs Committees, JWV members ask for your full support for adequate and meaningful programs and benefits for veterans, especially for the VA health care system.

Thank you for the opportunity to appear before you this morning and present JWV's year 2002 legislative priorities. I am prepared to answer any questions or clarify any remarks I have presented.