

## **TESTIMONY**

of

**Richard “Rick” Jones  
AMVETS National Legislative Director**

before the

**Committee on Veterans’ Affairs  
Subcommittee on Health  
U.S. House of Representatives**

on

- 1.) H.R. 1720, the Veterans Health Care Facilities  
Capital Improvement Act; a draft bill by Ranking  
Member Evans to authorize specific major medical  
construction projects; and**
- 2.) H.R. 116, a bill to authorize relocation of the Denver  
VA Medical Center**

**Wednesday, June 11, 2003  
2:00 PM, Room 334  
Cannon House Office Building**

CHAIRMAN SIMMONS, RANKING MEMBER RODRIGUEZ, AND MEMBERS OF THE SUBCOMMITTEE:

On behalf of National Commander W.G. "Bill" Kilgore and the nationwide membership of AMVETS (American Veterans), I thank you for the opportunity to present testimony to the Subcommittee on H.R. 1720, the Veterans Health Care Facilities Capital Improvement Act; a draft bill by Ranking Member Evans to authorize major medical construction projects in Las Vegas, Chicago Westside, West Haven, San Diego, and a lease at the Charlotte, NC out patient clinic; H.R. 116, a bill to authorize relocation of the Denver VA Medical Center to the old Fitzsimmons Army Hospital site; and other issues critical to the improvement of patient care facilities within the VA system.

Mr. Chairman, AMVETS has been a leader since 1944 in helping to preserve the freedoms secured by America's Armed Forces. Today, our organization, composed of a large number of Vietnam veterans, continues its proud tradition, providing, not only support for veterans and the active military in procuring their earned entitlements, but also an array of community services that enhance the quality of life for this nation's citizens.

AMVETS strongly supports the legislation subject to this hearing today. As the Subcommittee is aware, AMVETS is a partner in producing *The Independent Budget*. For the 2004 Fiscal Year, *The Independent Budget* recommends appropriations of \$436 million to meet the major construction needs of the VA. Currently, many VA medical center facilities, with an average age of over 50 years, are in critical need of repair. Improvements to these facilities will eventually pay for themselves through future savings as the entirety of VA facilities are modernized. AMVETS believes the facility improvements that would be authorized by the legislation under discussion are essential to meet these obligations.

Beginning with Fiscal Year 1994, the VA's construction appropriation for major and minor projects began a sharp decline to their current low levels. This decline, along with ongoing reconfiguration of the VA healthcare system through Capital Assets

Realignment for Enhanced Services (CARES) has prevented the VA from meeting its obligation to protect its current assets by funding needed construction, maintenance, and renovation, whether these assets are to be used in their current capacity or realigned to enhance services. The CARES process continues to be used as an excuse by appropriators for foot-dragging on most of the construction projects authorized by this Subcommittee and needed by our veterans.

This approach is shortsighted and forces the VA to endure major unmet needs throughout the system. The condition of our VA facilities is not only an infrastructure problem, but a patient and staff problem as well. Our veterans have earned their health benefits through their service. When veterans use a VA facility, they must be assured that the facilities available to them have the equipment needed to provide adequate care and their time there is made as comfortable as possible. The professionals that staff our VA facilities must also be provided facilities that offer them a safe, well-equipped workplace.

AMVETS has been supportive of the CARES process. However, we believe the efforts of the CARES process must remain separate from the urgent needs of the VA infrastructure and facilities. CARES is for tomorrow, but these facilities, and the staff and patients they house, need help today.

As noted in this year's edition of *The Independent Budget*, AMVETS recognizes that the location and missions of some VA facilities may need to change to improve veterans' access and allow more resources to be devoted to medical care. These changes are understandable to keep the VA system efficient and to provide the most state-of-the-art care possible. These concerns for the future notwithstanding, the steady decline in appropriations for VA construction has forced the VA to delay current, high priority projects, such as ambulatory care improvements, seismic corrections, and other renovations to meet basic safety standards.

With these concerns in mind, AMVETS is encouraged to see that H.R. 1720 would authorize appropriations of \$500 million for major VA construction for Fiscal Year 2004, and further increase that level by an additional \$100 million for Fiscal Years 2005 and 2006 respectively. While AMVETS applauds the Chairman's bill for including this funding, we further encourage the Subcommittee to address the needs of VA minor construction accounts. *The Independent Budget* for Fiscal Year 2004 recommends \$490 million for these minor construction needs and also recommends increasing the limit for individual minor construction projects from \$4 million to \$10 million. By increasing this cap, it would enable the VA to plan improvements in an adequate and efficient manner.

Mr. Chairman, AMVETS applauds the Subcommittee's efforts to provide the needed resources to allow the VA to maintain and modernize the over 2000 buildings in its healthcare system. Thank you again for the opportunity to present testimony to your panel on these issues of critical importance to all veterans. We sincerely appreciate your vigilance in efforts to improve veterans earned healthcare benefits and services.