

TESTIMONY

of

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before the

COMMITTEE ON VETERANS' AFFAIRS
SUBCOMMITTEE ON HEALTH
U.S. HOUSE OF REPRESENTATIVES

on legislative proposals:

H.R. 2792, the Disabled Veterans Service Dogs and Health Care Improvement Act of 2001; H.R. 1435, the Veterans' Emergency Telephone Service Act of 2001; and H.R. 1136, a bill to require Department of Veterans Affairs' pharmacies to dispense medication to veterans for prescriptions written by private practitioners.

Thursday, September 6, 2001
2:00 P.M., Room 334
Cannon House Office Building

MR. CHAIRMAN AND MEMBERS OF THE SUBCOMMITTEE:

I am pleased to be here today to present the views of AMVETS regarding H.R. 2792, the Disabled Veterans Service Dogs and Health Care Improvement Act of 2001; H.R. 1435, the Veterans' Emergency Telephone Service Act of 2001; and H.R. 1136, a bill to require Department of Veterans Affairs' pharmacies to dispense medication to veterans for prescriptions written by private practitioners.

H.R. 2792, the Disabled Veterans Service Dogs and Health Care Improvement Act of 2001:

AMVETS supports H.R. 2792, the Disabled Veterans Service Dogs and Health Care Improvement Act of 2001. It is welcomed, compassionate legislation that will help provide independence to many disabled American veterans. And, because it will change lives for the better, we encourage your subcommittee to approve this bill and ready it for full House consideration as soon as possible.

Mr. Chairman, I don't know if any on the subcommittee, other than yourself, have seen the success and direct benefits of a service dog to individuals with impaired mobility, hearing, or related disability. I am so very proud that, some time ago, AMVETS recognized the critical importance of assistance dogs and began a donor-partnership with *Paws With a Cause*, a national nonprofit group headquartered in Wayland, Michigan, that trains service dogs and matches them with disabled people.

Since 1979, *PAWS* has been one of the premier organizations in America working to explore the realistic possibilities of improving the lives of disabled individuals through assistance dogs. Like everyone else, disabled veterans want to manage their lives with as much dignity and independence as humanly possible; and, highly trained dogs can make a valuable contribution toward the miracle of independence.

While AMVETS supports the bill, we would like to make certain that it specifically authorizes payment for the cost of training service dogs. If the secretary is to provide a service dog, as outlined in new subsection (c), we presume that he is also granted the authority to pay for the trained dog; as he is granted authority under subsection (d) to pay travel and incidental expenses incurred by the client-veteran.

It should be understood that not every organization would require veterans to travel to a training center, for which, under this legislation, the veteran would be reimbursed. Some organizations deliver the service dog directly to the veteran through a field representative. These organizations first make an assessment of the individual's needs, provide training to the dog to assist with those physical needs, and deliver the dog to a field instructor in the area for further, personal "in-home-and-community" training suited to the individual's specific requirements. In effect, they work in close quarters to develop a working team, with no travel involved.

It takes different amounts of time for training, due to the nature of the placement, but it is proven that these dogs can be trained to assist people who have been challenged by any of more than 25 different disabilities, beyond those covered in the bill, including cerebral palsy, muscular dystrophy, spinal cord injuries, epilepsy and varying degrees of hearing impairment and vision loss.

AMVETS would note another potential benefit of service dogs – cost effectiveness. In an April 3, 1996, study published in **JAMA, the Journal of the American Medical Association**, the value of service dogs is measured in economic terms. The study, entitled "The Value of Service Dogs for People with Severe Ambulatory Disabilities," finds that one service dog saves an average of \$16,000 a year in costs that would otherwise go to pay for direct attended care. Extrapolated over a 10-year life span of a dog's active assistance, the value of these service dogs helps make this legislation economically sound, too.

With regard to other sections of this legislation, AMVETS supports Section 3 to maintain VA capacity for specialized treatment and rehabilitation of disabled veterans. AMVETS strongly believes that the core focus of the VA health system should be on assistance to and treatment of disabled veterans.

AMVETS supports Section 4 regarding the use of an index among geographic localities as a way to determine who is, in fact, “unable to defray the expenses of necessary care” of VA health care services. Clearly, the current use of a single, national “means test” to determine the priority classification of veterans for VA health care fails to account for variations in the cost-of-living in the area where the veteran resides. Our preference, however, is to eliminate the means test for veterans who served their country during periods of national emergency or war. A veteran is a veteran. We do not apply a means test when we send him or her into harm’s way. Why then should we impose a post service price?

AMVETS supports the goals of Sections 5 and 6. We, too, want every veteran who has an injury or illness incurred in the defense of America to receive appropriate, world-class health care. We want their access to the system improved. Our bottom line is access to care for veterans; especially for those who need specialized services or who, because of their circumstances, rely on VA as their health provider. Our veterans deserve no less.

AMVETS remains concerned, however, about the resources currently available to the VA health care system. The challenges faced by VA and the veterans it serves are not easy. Clearly, the health care system is in dire need of additional funding caused by years of inadequate budget proposals. With next year’s appropriations likely to fall short of meeting the challenges that face the system, it is difficult to see a positive effect on the quality, timeliness, and accessibility of health care received by our veterans, including those residing in your districts.

AMVETS supports Section 7 to expand counseling services for family members of veterans receiving VA treatment. We believe it is the government’s responsibility to care

for those in uniform who have served our country and to help their families and orphans. This sort of benefit is what the Department of Veterans Affairs is all about; to help not only those who gave so much on behalf of the nation but also their families who, in turn, help our heroes do what they do so the rest of us can live in freedom.

H.R. 1435, the Veterans' Emergency Telephone Service Act of 2001:

AMVETS supports H.R. 1435 to establish a national toll-free telephone hotline for veterans and their dependents. By virtue of the service and sacrifice they have rendered to the nation, our veterans deserve the very best support services we can provide. The establishment of a national information and assistance hot line could further strengthen VA's integrity for veterans' service. AMVETS believes, however, that the opportunity to provide these services should not be limited solely to America's private, nonprofit community, as outlined in this bill. The bill should be amended to allow free, open American competition, thereby giving the secretary the opportunity to choose the best provider for the job. We feel such a service would compliment a series of 800-services already available to veterans and dependents, including the following: VA Benefits 1-800-827-1000, Life Insurance 1-800-669-8477, Debt Management Center 1-800-827-0648, CHAMPVA 1-800-733-8387, Headstones and Markers 1-800-697-6947, and the Persian Gulf Hotline 1-800-PGW-VETS among others.

H.R. 1136, a bill to require Department of Veterans Affairs' pharmacies to dispense medication to veterans for prescriptions written by private practitioners:

AMVETS has no position on H.R. 1136, a bill to require Department of Veterans Affairs' pharmacies to dispense medication to veterans for prescriptions written by private practitioners without providing them primary care. We recognize that pharmaceutical costs are rising as a proportion of overall medical care expenses. And in some respects, the rising costs make it difficult for VA to carry out its other priority healthcare services. AMVETS is aware of estimates that suggest the open-filling of prescriptions would

require additional resources equal to one-third of VA's budget, a level of funding equivalent to providing VA medical care to more than one million veterans.

Clearly, if we are to come to grips with our honor and obligation to the brave and dedicated men and women who have worn this nation's uniform, we must understand their legacy as defenders of freedom. And, in this understanding, we see that freedom is not free. Its costs are measured in terms of lives lost and citizen soldiers who, together with their families, bear the scars and infirmities of their service throughout the remainder of their adult lives.

Mr. Chairman, the common theme in efforts to provide appropriate health care for our veterans today and into the future is that our veterans are indeed special. They are a unique national resource to whom we owe an enormous debt of gratitude for their service, their sacrifice, their patriotism and their unswerving dedication to America.

In sum, AMVETS firmly believes, as stated in *The Independent Budget*, that adequate funding remains the central issue challenging the future of the VA healthcare system.

This concludes my testimony. Thank you for extending AMVETS the opportunity to appear before you today, and thank you for your support of veterans. We believe the price is not too great for the value received.

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