

HOUSE COMMITTEE ON
VETERANS' AFFAIRS

February 22, 2005 Hearing Room C

8:30 A.M. Tapes 25 - 27

MEMBERS PRESENT: **Rep. Donna Nelson, Chair**

Rep. Debi Farr, Vice-Chair

Rep. Brian Boquist

Rep. Scott Bruun

Rep. Dave Hunt

Rep. Betty Komp

MEMBERS EXCUSED: **Rep. Phil Barnhart, Vice-Chair**

STAFF PRESENT: **Jim Stembridge, Committee Administrator**

Erin Seiler, Committee Assistant

ISSUES HEARD:

Veterans' Issues – Informational Meeting

U.S. Veterans' Administration Healthcare – Informational Meeting

These minutes are in compliance with Senate and House Rules. Only text enclosed in quotation marks reports a speaker's exact words. For complete contents, please refer to the tapes.

TAPE/# Speaker Comments

TAPE 25, A

002 Chair Nelson Opens the meeting at 8:38 a.m. Opens an informational meeting on Veterans' Issues.

VETERANS' ISSUES – INFORMATIONAL MEETING

051 Linda Christy Deputy Director, Coalition of Oregon Troops Support (COTS). Discusses COTS concerns as to returning Oregon National Guard Units, particularly their "veteran" status, access to mental and medical healthcare, and family assistance services.

081 Christy Submits and summarizes written testimony that details problems with the pay structure of the Oregon National Guard (**EXHIBIT A**).

134 Christy Speaks to the financial problems that her son, an Oregon National Guard soldier, incurred when he sought medical treatment for a service-connected injury.

156 Rep. Farr Asks what caused the delay in the medical treatment.

170 Christy Explains the medical issues that forced her son to sign the medical discharge waiver and allowed him to seek private medical treatment.

190 Sue Robertson Director, COTS. Explains the history and purpose of COTS.

212 Robertson Submits and summarizes COTS Issues of Concern for Our Oregon National Guard Families report (**EXHIBIT B**).

257 Robertson Addresses the post-deployment problems of Oregon National Guard soldiers, specifically the inability to access medical treatment and health care benefits, lack of decompression time, and lack of assistance at base hospitals.

281 Robertson Speaks to the vast difference in the treatment of returning active duty soldiers and returning Oregon National Guard soldiers.

340 Rep. Boquist Speaks to improvements in services for National Guard soldiers and continued efforts to pressure the federal government for further reform.

381 Paula Brown Deputy Director, Oregon Department of Veterans' Affairs (ODVA). Discusses the efforts of the ODVA to provide returning soldiers and their families with the necessary benefit information, resources, and assistance.

TAPE 26, A

038 Brown Acknowledges problems with soldiers receiving their Department of Defense 214 Certificate of Discharge.

072 Brown States that the United States Department of Veterans' Affairs has been very responsive and active in resolving demobilization problems.

098 Brown Speaks to the role of the ODVA with regards to the demobilization process of returning soldiers.

118 Rep. Bruun Asks why the ODVA chose to produce an informational brochure for returning soldiers.

127 Brown Explains that ODVA conducted focus groups with soldiers, families, and military support groups and the idea of the brochure came from the desire "to have one thing that they could hang on to, not tons of papers or even a folder."

159 Brown Discusses ODVA efforts to assess the individual needs of returning Oregon soldiers, regardless of their location.

175 Rep. Farr Asks for an explanation of the medical discharge waiver and whether restitution can be made to soldiers who seek private medical treatment for service-related injury.

179 Brown Explains the reasons why an injured soldier would sign a medical discharge waiver.

210 Rep. Komp Asks if resource information is produced in any other language.

223 Brown States that ODVA information is not currently produced in additional languages, but it can be produced.

231

- Staff Sergeant
Clinton Robinson Army Reservist, Oregon National Guard. Speaks to personal experience during demobilization process and why soldiers hesitate to acknowledge service-connected injuries.
- 294 Robinson Addresses the circumstances surrounding demobilization and the different reasons that soldiers sign medical release waivers.
- 354 Chair Nelson Asks if dental and medical vouchers are being issued to returning soldiers who are unable to access treatment because of saturation of veterans in the system.
- 360 Robinson Replies that he was unaware that medical and dental vouchers were available.
- 370 Robinson Supports producing ODVA demobilization information in various languages.

TAPE 25, B

- 014 Chair Nelson Questions if the fear of demotion is why a soldier does not indicate medical problems during demobilization process.
- 018 Brown States that it is not necessarily fear driven that causes them to not acknowledge injuries, but rather the desire to go home to their families.
- 031 Bill Kluting Legislative Affairs Representative, Western Council of Industrial Workers. Expresses concern for soldiers returning from duty with service-connected injuries and the ability to access proper medical and mental health services.
- 041 Chair Nelson Closes the informational meeting on Veterans' Issues. Opens an informational meeting on U.S. Veterans' Administration Healthcare.

U.S. VETERANS' ADMINISTRATION HEALTHCARE – INFORMATIONAL MEETING

- 058 Dr. Leslie Burger Director, Multi-State Regional Office for Veterans' Healthcare. Submits Veterans' Integrated Service Network PowerPoint Presentation (**EXHIBIT C**). Submits Memorandum of Understanding from Washington State Military Department (**EXHIBIT D**). Submits *Los Angeles Times* newspaper article titled "Program Allows for More Healing at Home" (**EXHIBIT E**).

- 074 Dr. Burger Points out that any soldier who has served “in theater” is entitled to two years of healthcare treatment and all they need to do is show up at any Veterans’ Administration (VA) medical facility.
- 092 Dr. Burger Explains how the U.S. Department of Veterans’ Affairs delivers medical services.
- 130 Dr. Burger Addresses referral pattern for the Veterans Integrated Service Networks 20 (VISN 20) **(EXHIBIT C, Page 1)**.
- 148 Dr. Burger Gives statistical over view of VISN 20 **(EXHIBIT C, Page 1)**.
- 207 Dr. Burger Reviews the statistics on the number of veterans served, VISN 20 employees, and VISN 20 Budget for 2004 **(EXHIBIT C, Page 2)**.
- 236 Dr. Burger Explains the medical and mental healthcare services provided at the VA medical centers in Oregon **(EXHIBIT C, Page 2)**.
- 294 Dr. Burger Speaks to waiting periods connected to primary care appointments and increase demand for healthcare services **(EXHIBIT C, Page 3)**.
- 373 Dr. Burger Discusses why there has been a growth in demand for medical services.

TAPE 26, B

- 002 Dr. Burger Reviews the number of veterans treated by Oregon VA facilities in 2004 **(EXHIBIT C, Page 3)**.
- 021 Rep. Bruun Asks if there is truth to the rumor that the Walla Walla Veterans’ Hospital will close.
- 026 Dr. Burger Explains the Capital Asset Realignment for Enhancement Services (CARES) process and the status of the CARES Commissions’ consideration of closing the Walla Walla Veterans’ Hospital
- 060 Dr. Burger Identifies how many soldiers are for Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF), noting how many are deployed soldiers from the Northwest **(EXHIBIT C, Page 4)**.

085	Dr. Burger	Cites the number of OIF and OEF veterans who have sought medical care at a VA hospital and what the reasons are for the care (EXHIBIT C, Page 4).
091	Chair Nelson	Verifies that there is parity for mental health treatment.
095	Dr. Burger	Addresses the availability of mental health treatment and concern for soldiers who have not been identified as having mental health issues.
132	Dr. Burger	Explains the efforts of VISN 20 to reach out to returning National Guard soldiers through reserve centers and armories.
153	Dr. Burger	Explains the Department of Defense survey designed to get soldiers to identify medical and mental issues.
170	Dr. Burger	Summarizes the Memorandum of Understanding issued by the Washington State Military Department (EXHIBIT D).
197	Dr. Burger	Summarizes the <i>Los Angeles Times</i> newspaper article (EXHIBIT E).
214	Dr. Burger	Discusses increasing problem of veteran homelessness and the need to provide job training and employment assistance.
251	Dr. Burger	Addresses the problem of Post-Traumatic Stress Disorder (PTSD) amongst returning soldiers, as evidenced by a national survey of combat infantry soldiers (EXHIBIT C, Page 5).
284	Dr. Burger	Speaks to how the military can be more proactive in identifying soldiers with PTSD.
330	Chair Nelson	Expresses appreciation for the work and concern that Dr. Burger has for veterans.
367	Rep. Hunt	Asks how the 29 PTSD outpatient clinics in Washington State are funded.
388	Dr. Burger	Explains that there are not 29 PTSD facilities, but rather 29 private physicians who have contracted with the Washington State VA to provide PTSD treatment.

TAPE 27, A

- | | | |
|-----|--------------|--|
| 022 | Dr. Burger | Speaks to difficulties that TriWest Healthcare Alliance has had establishing adequate communication pathways in Oregon. |
| 062 | Chair Nelson | Asks that Oregon Department of Veterans' Affairs provide budget information for each Department of Veterans' Affairs in the Northwest. |
| 083 | Chair Nelson | Closes the informational meeting on U.S. Veterans' Administration Healthcare. Adjourns the meeting at 10:32 a.m. |

EXHIBIT SUMMARY

- A. Veterans' Issues, written testimony, Linda Christy, 2 pp**
- B. Veterans' Issues, COTS Issues of Concern for Our Oregon National Guard Families Report, Sue Robertson, 2 pp**
- C. U.S. Veterans' Administration Healthcare, Veterans' Integrated Service Network PowerPoint Presentation, Dr. Leslie Burger, 5 pp**
- D. U.S. Veterans' Administration Healthcare, Memorandum of Understanding, Dr. Leslie Burger, 10 pp**
- E. U.S. Veterans' Administration Healthcare, *Los Angeles Times* Newspaper Article, Dr. Leslie Burger, 3 pp**