

Landmark Legislation for Wounded Veterans & Women Veterans

Key Points:

- The New Direction Congress is committed to addressing the needs of America's service men and women as well as those of their families. We have taken historic action on behalf of our veterans, with many having served multiple tours of duty. Today, we take another critical step to salute our veterans for their courage and bravery and recognize the tremendous sacrifices of their families.
- On Wednesday, the House will consider amendments to S. 1963, Caregivers and Veterans Omnibus Health Services Act,
 - ✓ to provide support to family and others who care for disabled, ill, or injured veterans;
 - ✓ to enhance health services for the 1.8 million women veterans, including care for newborns for the 1st time in history;
 - ✓ to expand mental health services for veterans and health care access for veterans in rural areas; and
 - ✓ to prohibit copayments for veterans who are catastrophically disabled.
- To help meet the many hardships and sacrifices associated with lengthy recovery and rehabilitation from severe injuries of veterans, the bill would provide support services to family and other caregivers of veterans, including education on how to be a better caregiver, counseling and mental health services, and respite care for family and other caregivers of all veterans. It also provides health care and a stipend for caregivers living with severely wounded veterans of Iraq and Afghanistan.
- This support is vital for the wounded veterans of Iraq and Afghanistan and their families, as about 20 percent of active duty, 15 percent of reserve and 25 percent of retired and separated members have a family member or friend who has been forced to leave a job to care for the veteran full-time, according to the Dole/Shalala report.
- The bill also expands and improves VA health care services for the women who have bravely served their country, working to remove existing barriers to women veterans seeking health care, providing up to seven days of care of newborn children of women veterans for the first time in history, and enhancing treatment for sexual trauma for women at the VA.
- Touting it as "landmark" legislation that "offers bold solutions to major challenges facing service members, veterans, and their families," the bill is supported by the American Legion, Veterans of Foreign Wars, Disabled American Veterans, AMVETS, Paralyzed Veterans of America, Wounded Warrior Project and the National Military Family Association.
- This measure represents a compromise between the House and Senate and contains

provisions by Reps. Perriello, Teague, Halvorson, Rodriguez, Kirkpatrick, Giffords, Mitchell, Nye, and McNerney.

- This landmark measure builds on the significant accomplishments for veterans, troops, and military families over the last three years under the New Direction Congress – including the New GI Bill, the building of more military child care centers and better military family housing, and historic investments to strengthen quality veterans’ health care.

The Senate passed its version of the bill on November 19, by a vote of 98-0 after Sen. Tom Coburn held it up. The House passed the Caregiver Assistance and Resource Enhancement Act (H.R. 3155) by voice vote on July 27 and Women Veterans Health Care Improvement Act by a vote of 408 to nothing on June 23.

CAREGIVER ASSISTANCE

Caregivers of OEF/OIF Veterans

- Caregivers are defined as family members (parent, spouse, child, step-family member, extended family member) or non-family members who live with the veteran.
- The caregiver and eligible OEF/OIF veteran must submit a joint application and once accepted, the caregiver receives the following support services:
 - Training and education;
 - Counseling and mental health services;
 - Respite care of no less than 30 days annually, including 24 hour in-home respite care;
 - Lodging and subsistence payments when accompanying the veteran on medical care visits;
 - Health care through the CHAMPVA program (Civilian Health and Medical Program of the Department of Veterans Affairs); and
 - Monthly financial stipend as determined appropriate by the Secretary based on the amount and degree of personal care services provided, and no less than the monthly amount of a commercial home health care entity.

Caregivers of Veterans of Any Era

- Caregivers are defined in the same manner as that of the support program for caregiver of OEF/OIF veterans. However, there is no residency requirement for non-family members.
- Support services for caregivers of veterans of any era include the following:
 - Training and education;
 - Counseling and mental health services;
 - Respite care including 24 hours in-home respite care;
 - Information on the support services available to caregivers through other public, private, and non-profit agencies.

WOMEN VETERANS HEALTH CARE

The bill will expand and improve VA health care services for the 1.8 million women who have bravely served their country. It requires the VA to:

- ✓ Conduct a study of barriers to women veterans seeking health care,

- ✓ Educate and train mental health professionals caring for veterans with sexual trauma;
- ✓ Implement a reintegration and readjustment pilot program;
- ✓ Establish a child care pilot program for women receiving regular and intensive mental health care and intensive health care services, or who are in need of such services but do not seek care due to the lack of child care services;
- ✓ Provide up to seven days of post-delivery health care to a new born child of a women veteran.

RURAL HEALTH IMPROVEMENTS

- Improves health care for veterans living in rural areas, including by expanding transportation for veterans to local VA hospitals and clinics through VA grants to local Veterans Service Organizations.

MENTAL HEALTH CARE

- Provides access to counseling and other mental health centers to any member of the Armed Forces (including members of the National Guard and Reserves, who served during Operation Iraqi Freedom and Operation Enduring Freedom but who are no longer on active duty) and
- Requires the VA to conduct a veterans' suicide study.

OTHER HEALTH CARE ISSUES

- Prohibits the VA from collecting copayments from veterans who are catastrophically disabled.
- Creates a pilot program, which would provide specified dental services to veterans, survivors, and dependents of veterans through a dental insurer.
- Requires the VA to provide hospital care, medical services, and nursing home care for certain Vietnam-era veterans exposed to herbicide and Gulf-War era veterans who have insufficient medical evidence to establish a service-connected disability.
- Provides higher priority status for certain veterans who are Medal of Honor recipients.

HOMELESS VETERANS

- Expands the organizations offering transitional housing and other support for homeless veterans that can receive grants or per diems from the VA, which is particularly important to veterans in rural areas.