

Statement of

The Fleet Reserve Association

On

Pending Legislation

Submitted to

Senate Veterans Affairs Committee

By

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The Fleet Reserve Association

The Fleet Reserve Association (FRA) is the oldest and largest sea service association that serves enlisted men and women of the active duty, Reserve, retired and veterans forces of the United States Navy, Marine Corps, and Coast Guard. The Association was Congressionally Chartered in 1996 as a recognized Veterans Service Organization by the Department of Veterans Affairs (VA) serving all veterans who seek its assistance.

FRA was founded in Philadelphia, PA in October 1922 and chartered on November 11, 1924 as a permanent organization to represent the enlisted influences for pay and benefits to congress. Its name was formed from the Navy's and Marine Corps' program for personnel transferring to the Fleet Reserve or Fleet Marine Corps Reserve after 20 or more years of active duty, but less than 30 years for retirement purposes. During the required period of service in the Fleet Reserve, assigned personnel earned their retainer pay and were subject to recall by the Secretary of the Navy. In 1970, the Coast Guard enjoined with the FRA to create what is known today as the association of the sea services.

The Association regularly testifies before the House and Senate Veterans' Affairs and Armed Service Committees. The Association is an active link with the Veterans Affairs Voluntary Services (VAVS) program. A member of the National Headquarters' staff serves as FRA's National Veterans Service Officer (NVSO) and as a representative on the VAVS National Advisory Committee (NAC). FRA's NVSO also oversees the Association's Veterans Service Officer Program and represents veterans throughout the claims process and before the Board of Veteran's Appeals. In 2014, FRA Shipmates and Auxiliary members volunteered over 13,470 service hours in support at 59 VA facilities throughout the country, thus enabling FRA to achieve VAVS "Associate Service Member" status.

FRA became a member of the Veterans Day National Committee in August 2007, joining 24 other nationally recognized Veterans Service Organizations (VSO) of this all important committee that coordinates National Veterans' Day ceremonies at Arlington National Cemetery. The Association is a leading and founding organization of The Military Coalition (TMC), a group of 33 nationally recognized military and veteran's organizations collectively representing the concerns of over five million members. FRA senior staff members also serve in a number of TMC leadership positions.

The Association's motto is "Loyalty, Protection, and Service."

Introduction

Distinguished Committee Chairman Johnny Isakson, Ranking Member Richard Blumenthal and other members of the Committee; thank you for the opportunity to present the Association's views on various pending legislative proposals.

Homeless Legislation

Recently, Department of Veterans Affairs (VA) Secretary Bob McDonald addressed over 600 organizations at the annual National Coalition for Homeless Veterans (NCHV) conference held in Washington, DC. He urged attendees to keep the progressive momentum for VA's self-imposed deadline of ending veteran's homelessness for this year. In 2009, then, VA Secretary Eric Shinseki set the bold goal of ending veteran homelessness by the end of 2015. Secretary McDonald stated that the department's goal of 'zero homeless veterans' by January 2016 is less important than ensuring that the number doesn't rise again in the out years to come. He said, "The important thing is not just to get to zero, but to stay at zero". "How do we build a system that is so capable, that as a homeless veteran moves from Chicago to Los Angeles in the winter, (that) we have the ability to touch them immediately?"

According to VA, the number of homeless veterans from 2010-2013, fell by more than one-third to about 50,000 veterans. VA officials expect those numbers will decrease even further when the 2014 estimates are released later this summer. VA funding for homeless assistance and prevention programs have noticeably increased from \$2.4 billion in FY 2008 to nearly \$7 billion for FY 2016. These funds, according to homeless activists, say were nonexistent over a decade ago. Despite the downward trend, the VA's effort to end veteran's homelessness by the end of 2015 is expected to fall short.

FRA thanks Senators John Boozman (Ark.) and Jon Tester (Mt.) for introducing the "Homeless Veterans Reintegration Programs Reauthorization Act" (S. 425) that reauthorizes current programs for 5 years and clarifies for the veterans who receive housing assistance under the Department of Housing and Urban Development's Veterans Affairs Supportive Housing (HUD-VASH) program. Native American veterans participating in the Native American Housing Assistance program are in fact eligible to receive valuable assistance such as job training under the Homeless Veteran Reintegration Program (HVRP).

Currently, if a veteran qualifies for housing under one of these programs, the VA no longer considers them "homeless," and does not allow them to participate in HVRP.

The Association also thanks Senators Richard Burr (NC) and Joe Manchin (WV) for introducing the "Homeless Veterans Prevention Act" (S. 684) that allows the VA to house the children of homeless veterans in transitional housing programs. This bill will allow the VA to partner with

public and private entities to increase the availability of legal services for homeless veterans, and increases the amount of money available for supportive services to low-income veteran families in permanent housing.

Approximately 33 percent of the homeless US population are veterans, and seven percent of homeless veterans are women. According to Veterans Inc., over 529,000 to 840,000 veterans are homeless at one time during the year. On any given night, more than 300,000 veterans are living on the streets or in shelters across America. ¹

According to the National Alliance to End Homelessness, the veteran homeless populations are veterans who served or have served in past wars/conflicts, from World War II to the most recent conflicts. Though research indicates that veterans who served in the Vietnam and post-Vietnam era conflicts are at a greater risk of homelessness, veterans returning from recent conflicts in Afghanistan and Iraq often have severe disabilities, including Traumatic Brain Injuries (TBIs) and Post Traumatic Stress Disorder (PTSD), and have a closer connection with homelessness.

Since then, the Obama Administration, VA Secretary Bob McDonald, and Congress have demonstrated their support of this goal by devoting substantial and approved funding to the homelessness problem, an increase from recent years.

FRA supports the recommendations of the IB which was recently released by AMVETS, Disabled American Veterans (DAV), Paralyzed Veterans of America (PVA) and the Veterans of Foreign Wars (VFW). The IB provides detailed funding analysis of the proposed VA budget and is intended to be used as a guide for policy makers to make necessary adjustments to meet the challenges of serving America's veterans. According to the Independent Budget for FY 2016, "VA's efforts to eliminate veterans' homelessness have been impressive and are showing significant success. However, female veterans still have a higher rate of homelessness than their nonveteran counterparts, and housing support for female veterans needs to be enhanced, particularly for veteran mothers with dependent children."

Veterans Access to Health Care

FRA also thanks Senator Jerry Moran (Kan.) for introducing the "Veterans Access to Community Care Act" (S. 207), legislation cosponsored by a bipartisan group of 18 Senators, that requires the VA to implement the "Veterans Access, Choice and Accountability Act" (the Choice Act) as Congress intended. The bill requires the VA to provide veterans access to non-VA health care when the nearest VA medical facility within 40 miles drive time from a veteran's home is incapable of offering the care sought by the veteran. The FRA supported legislation that was passed in the wake of a nationwide audit of the VA that indicates that over 57,000 veterans waited more than 90 days for an appointment at a VA medical facility, and over 64,000 who

requested medical care were not even put on a waiting list. The audit also found that 13 percent of schedulers were told to falsify appointment requests to make the wait time appear to be smaller than they actually were. The VA forced thousands of veterans to choose between their traveling time to a VA medical facility, to paying out of pocket, or go without any care altogether. Since the introduction of this pending legislation the VA has announced that it will change the geographic calculation used to determine the distance between a veteran's home and the nearest VA medical facility for the Veterans Access, Choice and Accountability Act (VACAA) that was enacted on November 5, 2014. The VA has made a regulatory change from straight line distance (as the crow flies) to an actual driving distance to ensure veterans have more access to needed care. Enacting this legislation made the regulatory change permanent and in the favor of the veteran.

The Association would also like to thank Senator Mark Kirk (IL) for introducing the "Frontlines to Lifelines Act" (S. 297) that makes it easier for veterans with medical training to care for their fellow veterans. The legislation expands a pilot program to hire combat medics, medical technicians and hospital corpsmen straight from active duty service to care for their fellow veterans at VA hospitals. The Intermediate Care Technicians (ICT) pilot program facilitates the employment of these veterans straight from active duty without additional training or certifications. This common-sense measure authorizes the VA to quickly hire former Department of Defense (DoD) medical professionals by seamlessly transferring credentials between agencies. VA Secretary Bob McDonald recently identified the need for more than 26,000 new VA healthcare providers. This bill extends the pilot program for three more years and helps the VA meet its shortfall by increasing ICTs and speeding up the transfer of other healthcare providers into the VA system from DoD.

FRA supports the "Women's Veterans Access to Quality Care Act" (S. 471) sponsored by Senator Dean Heller (NV) that provides the following:

- Requires VA to establish standards in VA health care facilities to meet the specific needs
 of women veterans and integrate these standards into prioritization for construction
 projects.
- Analyzes women's health outcomes as a performance measure for VA medical center executives.
- Requires every VA medical center to have a full-time obstetrician and/or gynecologist.
- Improves outreach to veterans by requiring VA to provide state veterans agencies with contact information for veterans.
- Conducts GAO study of VA's ability to meet the needs of women veterans and their privacy and security in VA facilities.

FRA strongly supports this legislation due to the fact that women are now the fastest growing segment of eligible VA health care users. Today, nearly 2.3 million women are veterans of

military service, and that number is expected to increase as women comprise 15 percent of the U.S. military's active duty personnel and 18 percent of the National Guard and Reserve forces.

Draft Legislation

FRA wants to express its appreciation for having the opportunity to comment on draft legislation that includes provisions from other bills. FRA will support this legislation. The draft bill includes provisions from the "Veterans Affairs Research Transparency Act" (S. 114) sponsored by Senator Dean Heller (NV) that among its other provisions requires the VA-DoD Joint Executive to submit options and recommendations for establishing a program of long-term cooperation and data-sharing between VA and DOD to facilitate research on outcomes of military service, readjustment after combat deployment, and other topics of importance to veterans, members of the Armed Forces (members), their families, and members of communities that have a significant population of veterans or members. FRA has long supported efforts to ensure adequate funding for DoD and VA health care resource sharing in delivering seamless, cost effective, quality services to personnel wounded in combat and other veterans, and their families.

There is currently some acceptable cross sharing accomplishments now in place between DoD, VA and the private sector; however more is needed to meet the expectations for a wider expansion of data sharing and exchange agreements. VA, DoD and the private sector will still need to actively pursue a mutual technological advantage to serve the VA's "Blue Button" initiatives. This would permit veterans to have online access to medical history, appointments, wellness reminders and military service information, but only after permissible measures and accessible after in-person authentication.

The draft legislation that contains the provisions of the "Access to Appropriate Immunizations for Veterans Act" (S. 172) sponsored by Senator Jon Tester (Mt.) promotes a timelier and appropriate vaccinations for veterans, placing a greater emphasis on preventive care. This legislation is a win-win for veterans and the VA. The bill should in the long-term save money for the VA by preventing veterans from getting diseases and seeking health care and help to avoid certain illnesses.

The draft legislation containing provisions of the "Chiropractic Care Available to All Veterans Act" (S. 398), sponsored by Senator Jerry Moran (Kan.), requires the VA to have at least 75 of their medical centers offer chiropractic care by December 31, 2016 and in all VA medical centers by December 31, 2018.

Finally the draft legislation that includes provisions of the "Rural Veterans Travel Enhancement Act" (S. 398), sponsored by Senator Jon Tester (Mt.) will authorize the Secretary of Veterans

Affairs to transport individuals to and from facilities of the Department of Veterans Affairs in connection with rehabilitation, counseling, examination, treatment and care and for other purposes.

Joint VA-DoD Formulary

The need for a joint VA-DoD prescription drug formulary is the part of the eighth recommendation of the Military Compensation and Retirement Modernization Commission (MCRMC). The Commission's recommendation is supported by FRA. The lack of seamless transition for prescription formulary has had an impact on the treatment of PTSI. Treatment for this condition is difficult and no specific drugs have been approved for treating this condition. Finding the right combination and dosage of drugs for an individual is difficult. Often when DoD doctors identify an effective treatment, the VA with a much more limited formulary, has no access to those drugs. A big step forward in treating PTSI with creating a seamless transition would be to allow VA and DoD to use the same prescription drug formulary.

Conclusion

In closing, allow me again to express the sincere appreciation of the Association's membership for all that you and the Members of the Senate Veterans' Affairs Committees and your outstanding staff do for our Nation's veterans.

Our leadership and Legislative Team stand ready to work with the Committees and their staffs to improve benefits for all veterans who have served this great Nation.

ⁱ Veteransinc.org

NATIONAL EXECUTIVE DIRECTOR

Thomas J. Snee, M.Ed

FORCM (SW), USN, (Ret)

Thomas J. (Tom) Snee is the Twelfth National Executive Director (NED) for the Fleet Reserve Association (FRA), in Alexandria, VA. In his scope of responsibilities, he serves over 60,000 Shipmates and family members; is the managing officer of the National Headquarters with authority to endorse standing rules and regulations approved by its National Board of Directors, and serves as its Chairman for Legislative Services. Mr. Snee has testified before the Armed Services and Veterans Affairs Committees, and a recently as a panel member for Congressional Educational Reform. He has often testified as a senior enlisted representative for personnel and their families of the United States Navy, Marine Corps, and Coast Guard. He is a champion and demonstrated force in responding to Congressional inquiries affecting enlisted personnel for a vital balance of decision making policies.

Snee was born in Cleveland, Ohio and grew up in nearby Willoughby. He graduated from Willoughby South High School in June 1965. He is an Eagle Scout, delivered the *Cleveland Plain Dealer*, active in his church, a lifeguard/water safety instructor and playground supervisor in the summer months. Mr. Snee has also served with other youth activities.

After graduating from high school, Tom served in the United States Navy as a Yeoman and as a Navy Counselor from October 1965 until his retirement in September 1996. After thirty one years of naval service, he retired as a Force Master Chief, Navy Recruiting Command, in Arlington, VA. As a Master Chief and Surface Warfare specialist, his scope of leadership and managerial dimensions were on ships, staffs, and shore commands. He developed advance Counseling, Training and Education instructional venues for Career Development, Counseling, and Recruiting curriculums, plans, and measured policies. He is a graduate of the Navy's Senior Enlisted Academy, Naval War College, at Newport, RI, and a Vietnam Veteran.

Following his Navy retirement, Snee worked at the FRA Headquarters as the Veterans Service Officer and Membership/Branch Development. In 2000, he switched careers and became a Middle School Teacher in the Arlington Virginia Catholic Schools. His educational leadership and managerial practices were quickly facilitated from his military career as a Middle School Lead for curriculum development, student analytical/course assessments, high school placement, and curriculum reviews. He taught Social Studies (American History, Civics, Geography, and Economics), English and Religion classes in a 13 year career span as an educator and administrator. Snee also serves on the Accreditation/Certification Program, Design for Excellence (DFE), for schools in the Commonwealth of Virginia.

Mr. Snee holds a M.Ed in Educational Leadership from George Mason University, Fairfax VA; BS in Liberal Arts/Psychology, Excelsior College, Albany, NY; and AS in Liberal Arts, Mohegan Community College, Norwich, CT. Mr. Snee has served as mentor for the "Leadership in the New Generations Ethics for Middle School Students" at George Mason University; serves on the Board of Educators at Mt. Vernon and Gunston Hall Historical Associations, Alexandria, VA; on the Board of Directors, for Excelsior College, Albany, NY, and the United States Navy Memorial, Washington, DC.

Mr. Snee's memberships are with the Knights of Columbus, Surface Navy Association, Fleet Reserve Association, Boy Scouts of America, National Eagle Scout Association (NESA) and VETS4HIRE, a "think-tank group" in Washington, DC. His recognitions have been many within the *WHO's WHO* circuits from Strathmore and Covington. They include: *Worldwide Leadership/Achievement in Industry and Profession; Executives; American Teachers; and Business Professionals.* He was named *Teacher of the Year* in 2011 *and received the coveted Distinguish Alumni Hall of Fame Award* from the Willoughby-Eastlake Schools, in Ohio. Recently he was named the 2015 "Executive of the Year" by Covington's Who's Who.

Mr. Snee is married to the former Karen A. Habina of Willoughby, OH who works at Navy Federal Credit Union, Vienna, VA. The Snee's have four children; Janet M. Basselgia, Springfield, VA; Denise J. McCready, Kittery, ME; Commander David T. Snee, U. S. Navy, OPNAV staff Washington DC, and; Timothy F. Snee, Woodbridge, VA. They a have five grandchildren and reside in Burke, VA.

Mr. Snee subscribes to many professional "footnotes". One bestowed by parents and students alike for his classroom leadership and management style is from Robert H. Shaffer: "We must never view young people as empty bottles to be filled, but as candles to be lit". His personal life "footnotes" are, "It's always too soon to quit" and, "I am merely a gardener tilling & cultivating the 'soil of opportunity' to success for anyone who wants to engage in making a difference for others".