

TESTIMONY

**Submitted by
RICHARD JONES
AMVETS NATIONAL LEGISLATIVE DIRECTOR**

**before the
COMMITTEE ON VETERANS' AFFAIRS
SUBCOMMITTEE ON BENEFITS
U.S. HOUSE OF REPRESENTATIVES**

**on
VETERANS' BENEFITS LEGISLATION**

Tuesday, July 10, 2001

MR. CHAIRMAN AND MEMBERS OF THE SUBCOMMITTEE:

AMVETS is pleased to present testimony on proposed veterans' benefits legislation. We deeply appreciate the commitment of this Subcommittee and its members to address the concerns of veterans.

The discussion today addresses a number of benefit programs affecting nearly every aspect of veterans' lives from health benefits to cost-of-living adjustments as well as making an 800-telephone call to VA.

AMVETS supports the legislative measures before this committee. We believe that approval of these bills would enhance and improve service-connected benefits and services for American veterans and their families.

H.R. 862, to add Type 2 diabetes to the list of diseases presumed to be service-connected for veterans exposed to certain herbicide agents:

AMVETS supports this legislation. Last November, the Academy of Sciences' Institute of Medicine reported a "limited" evidence between adult onset, or Type 2, diabetes and Agent Orange defoliant used in Vietnam. The Department of Veterans Affairs followed the IOM report announcing that it would accept benefits claims if a veteran served in the Republic of Vietnam during the War period, making the disease presumptively service-connected. H.R. 862 would list the disease as being associated with Agent Orange. Because the defoliant was also used along the southern boundary of the Korean Demilitarized Zone,

AMVETS reads the legislation to include U.S. personnel deployed to Korea when Agent Orange was sprayed in 1968 and 1969.

H.R. 1406, the Gulf War Undiagnosed Illness Act of 2001:

AMVETS recognizes that, ten years after driving Iraq from Kuwait, many Desert Storm veterans continue to suffer from debilitating ailments that medical science cannot accurately diagnose. Nearly 1 of every 7 military personnel who served in the Gulf has sought federal help for illnesses they think stem from exposure to prescribed drugs or chemical warfare agents used in the region. Despite enactment of legislation in 1994 to compensate veterans for unexplained multiple symptom illnesses, there exists today a seventy-five percent denial rate for Gulf War veterans seeking help. AMVETS supports America's veterans. We ask only that those men and women who were adversely affected be provided appropriate medical and psychological services. They were healthy and strong when they protected our overseas interests, now they face serious and unexplainable illness. H.R. 1406 would clarify the definition of "undiagnosed," and help provide appropriate care and just compensation for Gulf War veterans.

H.R. 1435, to award grants to provide for a national toll-free hotline to provide information and assistance to veterans:

Amvets supports the establishment of a national toll-free telephone service to VA for veterans and dependents. Making an inquiry to VA is sometimes sluggish and oftentimes frustrating. The establishment of a national information and assistance hot line could

serve to further strengthen VA's integrity for veterans' service. While we do not understand why the operation of the hotline should be conducted by "a private, nonprofit entity," 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. 1929, the Native American Veterans Home Loan Act:

AMVETS supports the extension of the Native American Veterans Housing Loan Program that provides direct loans to veterans living on trust lands. This bill would extend the pilot program that began in 1993 to December 31, 2005. Without such legislation it would expire on December 31, 2001. The program was a good idea when it was begun and it continues to serve an important segment of the veterans' community.

AMVETS supports passage of **H.R. 2359**, to authorize payment of National Service Life Insurance and United States Government Life Insurance proceeds to an alternate beneficiary when the first beneficiary cannot be identified, to improve and extend the Native American veteran housing loan pilot program, and to eliminate the requirement to provide the Secretary of Veterans Affairs a copy of a notice of appeal to the Court of Appeals for Veterans Claims. Regarding **Section 1**, AMVETS would inquire of the Subcommittee as to whether VA provides notice to the first beneficiary on entitlement to payment of the insurance proceeds following the death of the insured. Regarding **Section**

2, AMVETS agrees that it is entirely appropriate that the VA or “its authorized agent” approve assumption of the original loan. Such agreement is critical to the program’s integrity. AMVETS has no position on **Section 3**, eliminating notice of appeal to the Secretary.

AMVETS supports **H.R. 2361**, the Veterans’ Compensation Cost-of-Living Adjustment Act of 2001. This legislation would increase the rates of compensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation for certain disabled veterans and dependents. While we strongly believe that the rate adjustment should be established yearly at a more generous margin than the percentage rate increase established annually under Title II of the Social Security Act, we support this legislation. Clearly, Congress must adjust these rates to avoid eroding their value.

AMVETS sincerely appreciates the opportunity to submit our viewpoint on these issues, and we, again, thank the Subcommittee for its vigilance in improving benefits and services to veterans and their families.