



# AMVETS LEGISLATIVE UPDATE

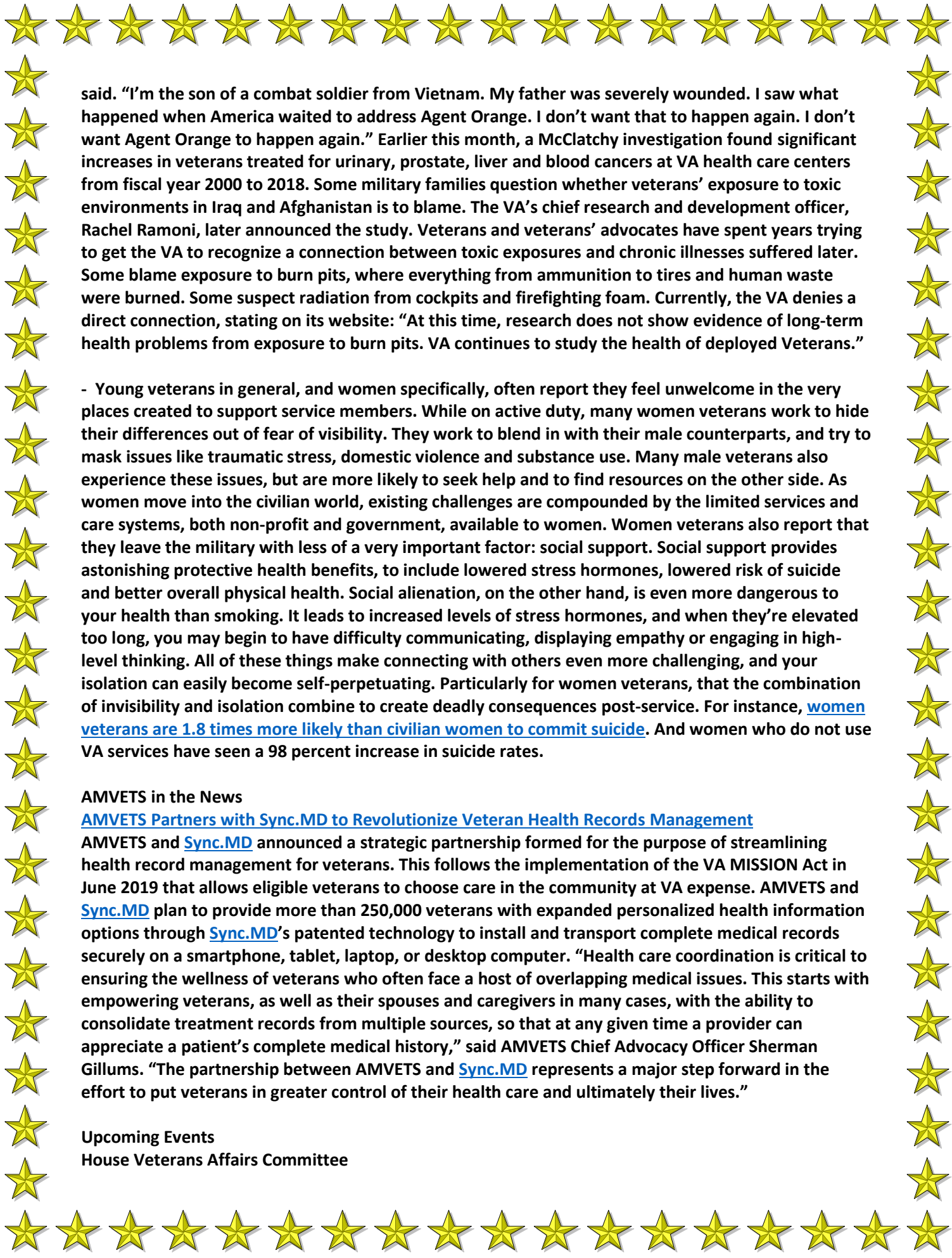
## DECEMBER 2, 2019

### News Driving the Week

- The Veterans Affairs Department reported [significant telemedicine growth for fiscal 2019](#), the first full year since implementing a policy that lifted state licensing requirements for VA providers practicing virtual care. State licensing restrictions have posed a challenge for telemedicine adoption nationwide, and some have suggested the VA's policy could be a first step toward thinking about a national medical practice licensing concept. More than 900,000 veterans used VA telemedicine services in fiscal 2019, up 17% from the previous year, the VA said. State licensing requirements have posed a major hurdle for many healthcare organizations, according to a 2017 survey conducted by law firm Foley & Lardner. State-by-state licensing often means that a physician practicing in one state can't conduct a video visit with a patient located in another state. Those licensing restrictions have made it "very complicated" for national and regional health systems to roll out telemedicine programs, since not all of the system's providers will be eligible to provide care for each of the system's patients, said Dr. Kevin Vigilante, executive vice president at consulting firm Booz Allen Hamilton. That's something the VA has been able to bypass through a federal rule finalized in May 2018, which overruled requirements for state licensing—allowing VA physicians and nurses to administer care to veterans via telemedicine across state borders.

- Calling it a crucial step to stem veterans suicide, top Veterans Affairs leaders have mounted an intense pressure campaign against a House Democratic committee leader to [force a quick vote on the IMPROVE Act](#). The effort has included personal lobbying from VA Secretary Robert Wilkie on behalf of the bill, unusual given the small, focused scope of the proposal and the high-level involvement in legislative process minutia. But Wilkie said the moves are needed because of the importance of finding new suicide prevention solutions. House Veterans Affairs Committee leaders dispute that, saying the secretary is interfering with normal negotiations over bill language and drafting. In a statement, committee Chairman Mark Takano, D-Calif., said he remains "committed to reaching a bipartisan compromise on legislation to prevent veteran suicide before the Christmas break." Both sides said after a Nov. 20 hearing that they believed a compromise was close. Two days later, Wilkie blasted Democratic leadership for making widespread changes to the legislation and ignoring Republican concerns. "They've put in a matching funds requirement," Wilkie said. "They've said these groups can no longer triage suicides unless they send veterans to a VA facility. They've cut out a lot of the smaller groups, which defeats the whole purpose of local intervention." Takano said he is committed to another mark-up in coming weeks. Both sides insist they are focused on finding a compromise, but are aware of the possibility of another walk-out, a rare display of discord among the typically bipartisan committee work. Even if the measure passes the House before Christmas, Senate members would still have to approve the legislation before it would head to the White House to become law. Without fast action in that chamber, the fight over the outside mental health grants is likely to drag on into 2020.

- A new study into whether [military toxic exposures cause cancer and other illnesses](#) could make it easier for veterans to get their medical expenses covered, the U.S. Department of Veterans Affairs secretary said. "I think it will, but it will also alleviate a great concern that I've had," Robert Wilkie



said. "I'm the son of a combat soldier from Vietnam. My father was severely wounded. I saw what happened when America waited to address Agent Orange. I don't want that to happen again. I don't want Agent Orange to happen again." Earlier this month, a McClatchy investigation found significant increases in veterans treated for urinary, prostate, liver and blood cancers at VA health care centers from fiscal year 2000 to 2018. Some military families question whether veterans' exposure to toxic environments in Iraq and Afghanistan is to blame. The VA's chief research and development officer, Rachel Ramoni, later announced the study. Veterans and veterans' advocates have spent years trying to get the VA to recognize a connection between toxic exposures and chronic illnesses suffered later. Some blame exposure to burn pits, where everything from ammunition to tires and human waste were burned. Some suspect radiation from cockpits and firefighting foam. Currently, the VA denies a direct connection, stating on its website: "At this time, research does not show evidence of long-term health problems from exposure to burn pits. VA continues to study the health of deployed Veterans."

- Young veterans in general, and women specifically, often report they feel unwelcome in the very places created to support service members. While on active duty, many women veterans work to hide their differences out of fear of visibility. They work to blend in with their male counterparts, and try to mask issues like traumatic stress, domestic violence and substance use. Many male veterans also experience these issues, but are more likely to seek help and to find resources on the other side. As women move into the civilian world, existing challenges are compounded by the limited services and care systems, both non-profit and government, available to women. Women veterans also report that they leave the military with less of a very important factor: social support. Social support provides astonishing protective health benefits, to include lowered stress hormones, lowered risk of suicide and better overall physical health. Social alienation, on the other hand, is even more dangerous to your health than smoking. It leads to increased levels of stress hormones, and when they're elevated too long, you may begin to have difficulty communicating, displaying empathy or engaging in high-level thinking. All of these things make connecting with others even more challenging, and your isolation can easily become self-perpetuating. Particularly for women veterans, that the combination of invisibility and isolation combine to create deadly consequences post-service. For instance, [women veterans are 1.8 times more likely than civilian women to commit suicide](#). And women who do not use VA services have seen a 98 percent increase in suicide rates.

#### AMVETS in the News

##### [AMVETS Partners with Sync.MD to Revolutionize Veteran Health Records Management](#)

AMVETS and [Sync.MD](#) announced a strategic partnership formed for the purpose of streamlining health record management for veterans. This follows the implementation of the VA MISSION Act in June 2019 that allows eligible veterans to choose care in the community at VA expense. AMVETS and [Sync.MD](#) plan to provide more than 250,000 veterans with expanded personalized health information options through [Sync.MD](#)'s patented technology to install and transport complete medical records securely on a smartphone, tablet, laptop, or desktop computer. "Health care coordination is critical to ensuring the wellness of veterans who often face a host of overlapping medical issues. This starts with empowering veterans, as well as their spouses and caregivers in many cases, with the ability to consolidate treatment records from multiple sources, so that at any given time a provider can appreciate a patient's complete medical history," said AMVETS Chief Advocacy Officer Sherman Gillums. "The partnership between AMVETS and [Sync.MD](#) represents a major step forward in the effort to put veterans in greater control of their health care and ultimately their lives."

#### Upcoming Events

House Veterans Affairs Committee

**OI Subcommittee**

**Technology Modernization Subcommittee**

**The status of the Department of Veterans Affairs' financial management business transformation**

**Thursday, December 5 10:00 AM**

Watch [here](#)

**AMVETS Legislative Priorities**

[H.R. 1715](#) Charitable Equity for Veterans Act of 2019 introduced by Rep. Ron Kind of WI and Rep. Brad Wenstrup of OH

[H.R. 1997](#) Veterans Posttraumatic Growth Act introduced by Rep. Tim Ryan of OH

[H.R. 3495](#) Improve Well-Being for Veterans Act introduced by Rep. Jack Bergman of MI and Rep. Chrissy Houlahan of PA

[S. 1906](#) Improve Well-Being for Veterans Act introduced by Rep. John Boozman of AR

[H.R. 4154](#) Leave No Veteran Behind Act introduced by Rep. Susie Lee of NV and Rep. Steve Watkins of KS

[H.R. 3025](#) You Are Not Forgotten Act introduced by Rep. Mark Meadows of NC and Rep. Susie Lee of NV

**Continued News**

- [Opinion](#): The Trauma From Our War on Terror Will Linger Long After It Ends



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