

## Veterans

Caring for those who have worn the uniform and their families has always been one of Mike's highest priorities. He remains a strong voice for the over 155,000 veterans of Maine and the millions more across our country. Mike serves as Chairman of the House Veterans' Affairs Subcommittee on Health. He is devoted to ensuring that the Department of Veterans Affairs (VA) budget meets the needs of our veterans, as well as improving rural veterans' access to health care, caring for our returning Iraq and Afghanistan veterans, and ending homelessness among veterans.

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Chairman, Veterans' Affairs  
Subcommittee on Health

Mike is dedicated to providing our veterans the respect and care that they deserve. He currently serves as the Chairman of the Veterans' Affairs Subcommittee on Health.

The Subcommittee on Health has legislative and oversight jurisdiction for VA health care system, programs, and research apparatus. From his position as Chairman, Mike successfully fought for an increase in the VA health care budget, passed legislation to improve health care for veterans, and provided oversight of the VA health care system.

The Health

Subcommittee had an ambitious schedule in the 110th Congress including hearings on Traumatic Brain Injury (TBI) and Post-Traumatic Stress Disorder (PTSD), mental health, long-term care, women and minority veterans, access to care in rural areas, and Gulf War exposures. For more information on the activities of the Health Subcommittee or the full House Veterans' Affairs Committee, click [HERE](#).

In his first term, Mike became the only freshman in the 108th Congress (2003, 2004) to serve in a committee leadership position when he became the Ranking Member on the House Veterans' Affairs Subcommittee on Benefits. He is only the second freshman to serve in this position since 1957. In the 109th

Congress (2005, 2006), Mike served as the Ranking Member of the House Veterans' Affairs Subcommittee on Health.

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## Securing VA Funding

### VA Funding for Fiscal Year 2008:

Over the past decade, the VA has transformed their health care system to include over 600 health care facilities. This includes adding medical centers, nursing homes and hundreds of community-based outpatient clinics. These facilities are organized into service networks throughout the nation. They care for an estimated 5.2 million veterans.

Mike worked hard with a bipartisan group of his colleagues in promoting increased FY2008 funding for the VA. The result of their hard work was H.R. 2642, Supplemental Appropriations Act of 2008. As a result of this legislation, the VA received \$43.2 billion in FY2008. This represents \$6.7 billion above FY2007 funding limits, and \$3.8 billion over the President's request. In fact, the level of funding for FY 2008 was the single largest budget increase for the VA in its history. The legislation covers funding for veterans' medical care, claims processing, personnel, and facility improvements within the Department of Veteran's Affairs (VA). This bill demonstrated that Congress is serious about following through on a commitment to provide veterans with the best care possible. It sends a clear message to America's servicemen and women, their families, and our veterans that the nation deeply respects their service and sacrifice.

### VA Funding for Fiscal Year 2009:

The FY 2009 VA appropriations bill built upon the achievement of FY 2008's bill. The FY 2009 bill provides \$4.5 billion in discretionary spending above last year's level, nearly \$3 billion more than the Administration requested. It is the second budget in a row that exceeds the request of the Independent Budget, which is formulated by a coalition of veterans' organizations. While Mike sees this as positive step forward for the VA, he believes that it falls short of long-term funding needs. The number of veterans seeking aid increases every year and Congress must pass a budget that will meet all of their needs.

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## Enhancing Benefits for Veterans

### Improving Job Training Opportunities for Veterans

The hardworking men and women who fight for our nation deserve affordable job training opportunities. Under the current Montgomery GI Bill, veterans receive benefits to pay for tuition, fees, books, supplies, and other expenses associated with enrollment in an array of approved education and training programs. Unfortunately, while there are plenty of accelerated benefits going towards training programs for high-tech occupations, there are fewer benefits available for training in the transportation and construction industries. These industries face a critical shortage of employees now and in the near future. Nationwide, the trucking industry needs an additional 20,000 drivers today, and expects to face a shortage of 110,000 drivers by 2014.

On March 29, 2007, Mike introduced H.R. 1824, which expands the scope of the Montgomery GI Bill benefits to include accelerated payments of educational assistance to cover commercial driver's license training programs. These programs would give veterans the training they need for jobs in the commercial trucking industry.

Mike is also a co-sponsor of H.R. 5684, the Veterans Education Improvement Act of 2008. This bill amends the Montgomery GI Bill by increasing the rates of basic educational assistance for veterans.

### GI Bill for the 21st Century

On June 19, 2008, the House passed the GI Bill for the 21st Century as part of the Iraq/Domestic Priorities Appropriations bill by a vote of 416 to 12. Mike was proud to see this bill signed into law on June 30, 2008. Current GI educational benefits pay only about 70% of a public college education and 30% of a private college education. This GI Bill provides full, four-year

college scholarships for Iraq and Afghanistan veterans. This puts future educational benefits on par with those available after World War II.

## Promoting Economic Security and Ending Homelessness

Many low income veterans and veteran families live at the financial margins. In the absence of permanent housing solutions and support services, they are at risk of becoming homeless. Currently, 1.5 million veterans have incomes that fall below the federal poverty level, including 634,000 with incomes 50% below the poverty line. According to the VA, nearly 200,000 veterans are homeless on any given night - living on the streets, in shelters or in community based organizations. More needs to be done to provide housing for homeless veterans and economic stability for other low-income veterans.

## Veteran Home Equity Conversion Mortgage Act

Promoting economic stability among veterans is one of Mike's biggest concerns. On May 24, 2007, Mike introduced H.R. 2475, the Veteran Home Equity Conversion Mortgage Act of 2007. This bill authorizes the Secretary of Veterans Affairs to institute a reverse mortgage program, through which qualified veterans may obtain a reverse mortgage loan guaranteed by the VA. VA-guaranteed reverse mortgages will offer veterans more cash out than the current Federal Housing Administration reverse mortgage loan program, and will effectively save veterans roughly 0.5% in interest rates. Expanding the VA loan program to include reverse mortgages will allow more veterans to remain in their homes longer without having to take on additional monthly bills or face the prospect of losing their home. On December 10, 2007, H.R. 2475 was referred to the Subcommittee on Financial Institutions and Consumer Credit.

## Homes for Heroes Act

Mike also joined with Congressman Al Green of Texas in introducing H.R. 3329, the Homes for Heroes Act of 2007, in August of last year. H.R. 3329 establishes an assistance program for supportive housing and services for low-income veterans. It expands the highly successful HUD-Veterans Affairs Supportive Housing (HUD-VASH) Program, authorizing 20,000 vouchers annually and making the program permanent. It authorizes \$1 million in HUD grants to assist housing and service providers execute programs for veterans. The House of Representatives passed the bill on July 9, 2007, and it became public law on October 10th, 2008 as a part of S. 2162, the Veterans' Mental Health and Other Care Improvements Act of 2008.

## Veterans' Compensation Cost-of-Living

## Adjustment (COLA) Act of 2007

Mike also helped pass H.R. 1284, the Veterans' Compensation Cost-of-Living Adjustment (COLA) Act of 2007. This piece of legislation increased the rates of veterans' benefits. Wartime disability compensation, the clothing allowance for certain disabled adult children, and dependency and indemnity compensation for surviving spouses and children were all increased under this legislation. It also creates additional compensation for dependents. H.R. 1284 became public law on November 5, 2007.

## Veterans' Compensation Cost-of-Living adjustment (COLA) Act of 2008

In addition to the COLA increase in 2007, Mike helped pass into law another increase for 2008. S. 2617, Veterans' Compensation Cost-of-Living adjustment (COLA) Act of 2008, directs the Secretary of Veterans Affairs to increase, as of December 1, 2008, the rates of veterans' disability compensation, additional compensation for dependents, the clothing allowance for certain disabled adult children, and dependency and indemnity compensation for surviving spouses and children. The bill was signed into law on September 24th, 2008.

## Providing Quality Health Care to Veterans

Upon returning home, those who have volunteered to risk their lives and defend our nation deserve the very best care. Many servicemen and women come home with injuries and disabilities that require quality assistance. Unfortunately, access to care is a significant challenge for rural veterans. Throughout Maine and elsewhere, VA hospitals are too far apart to be accessible and convenient to those they are supposed to service. Through his position as the Chairman of the Veterans' Affairs Subcommittee on Health, Mike has worked tirelessly to improve rural veterans' access to health care.

## Expanding Access to Health Care for Maine Veterans

As Chairman of the House Veterans' Affairs Subcommittee on Health, Mike has jurisdiction over the VA's health care network expansion process and has held several hearings on the issue of health care access over the years. In 2006, provisions Mike authored were included in a bill that became Public Law 109-461, which directed the VA to develop a business plan for enhanced access to outpatient care for veterans in Maine. As a result, Maine now has a new VA health care access point in Houlton and a soon-to-be community based outpatient clinic (CBOC) in the Lewiston-Auburn area. Mike is also working with a coalition that is moving forward to create a "Veterans' Campus" in Bangor that will include a Maine Veterans' Home, affordable housing for veterans, and a CBOC.

Making progress on these health care sites is critical to the well-being of our veterans. Addressing the health care access issue for rural veterans remains a high priority for Mike and his subcommittee and he'll continue to monitor the VA's progress.

#### Veterans' Health Care Improvement Act of 2007

On June 27th, 2007, Mike introduced the bipartisan bill H.R. 2874, the Veterans' Health Care Improvement Act of 2007. This legislation addresses a variety of issues facing our veterans. Through a new grant program, it supports therapeutic readjustment programs to assist veterans in their long-term physical and mental recovery. It also authorizes funding for transportation grants to rural veterans. These grants will be used to implement innovative ways of overcoming transportation challenges due to physical disabilities. It authorizes the VA to provide expanded readjustment and mental health services in under-served areas, with a special focus on peer to peer outreach services for Operation Enduring Freedom and Operation Iraqi Freedom veterans. The bill passed the House of Representatives on July 30, 2007 and now awaits action in the Senate.

#### Rural Veterans Access to Care Act

H.R. 1527, the Rural Veterans Access to Care Act, creates a pilot program to increase access to certain health care service for rural veterans. The pilot program, which includes the state of Maine, would allow a highly rural veteran who is enrolled in the VA system to elect to receive covered services through a non-VA health care provider.

Mike's Subcommittee on Health held a legislative hearing on H.R. 1527 on April 26, 2007. As a cosponsor of the bill, Mike worked closely with the sponsor in making sure that it became law. The House of Representatives passed the bill on September 10, 2008, and it became public law on October 10, 2008 as a part of S. 2162, the Veterans' Mental Health and Other Care Improvements Act of 2008.

#### VA Mileage Reimbursement Rate Increase

Mike and his colleagues have fought hard over the years to secure an increase in the mileage reimbursement rate for veterans living in rural areas who need to travel long distances for care. A major victory for rural veterans everywhere was realized when the final conference report for the

FY 2009 Military Construction and Veterans Affairs Appropriations bill was passed into law. A provision within that legislation directs the Secretary of the VA to increase the mileage reimbursement rate from the current 28.5 cents per mile to 41.5 cents per mile. This update is extremely important given the high cost of fuel and the long distances many Maine veterans must travel to get the care they need.

#### Department of Veteran's Affairs Medical Facility Authorization and Lease Act of 2008

On April 22, 2008, Mike introduced H.R. 5856, the Department of Veteran's Affairs Medical Facility Authorization and Lease Act of 2008. This legislation authorizes major medical facility projects and leases for the Department of Veterans Affairs in FY 2009. The facilities authorized in this legislation will provide much needed physical and mental health care to our veterans. H.R. 5856 was passed by the House of Representatives on May 21 and it became public law on October 10th, 2008 as a part of S. 2162, the Veterans' Mental Health and Other Care Improvements Act of 2008.

Mike has also co-sponsored veteran health care legislation. For instance, he is a co-sponsor of H.R. 2812, the Veterans' Epilepsy Treatment Act of 2008. This bill establishes six VA health-care facilities as Epilepsy Centers of Excellence. It also seeks to coordinate better access to diagnosis, research, care, and education for epilepsy and traumatic brain injury. He is also a co-sponsor of H.R. 6122, the Veterans Pain Care Act of 2008. This piece of legislation directs the Secretary of Veterans Affairs to develop and implement a comprehensive policy on the management of pain experienced by veterans.

On May 21st, 2008, Mike helped pass H.R. 3819, the Veterans Emergency Care Fairness Act of 2007, in the House of Representatives. This legislation requires the Secretary of Veterans Affairs to reimburse veterans without a service-connected disability for the cost of emergency treatment received in a non-VA facility. This legislation is especially important for rural veterans who are not always close to VA facilities. H.R. 3819 currently awaits action in the Senate.

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[Taking Care of Wounded Warriors](#)

Compelled by his strong desire to take care of those who sacrifice the most for our nation, Mike worked hard to ensure that H.R. 1538, the Wounded Warriors Act, passed Congress. HR 1538 is comprehensive legislation that improves the care, management, and transition of service members with serious injuries or illnesses. It has provisions for enhanced availability of care for service members, care and services for dependents, and traumatic brain injury and post-traumatic stress disorder. It calls for improvements in disability evaluations and patient housing facilities. It also requires VA to implement TBI rehabilitation and reintegration plans for veterans.

## Improving Long-Term Support for Traumatic Brain Injuries

Traumatic brain injury has become the signature health care issue of the Afghanistan and Iraq wars. A traumatic brain injury (TBI) occurs when a sudden trauma causes damage to the brain. Common problems associated with TBI include physical symptoms and emotional issues such as post traumatic stress disorder, depression, and anxiety disorders. Since the VA began screening veterans who fought in Iraq or Afghanistan, 11,804 (19.26%) of the veterans screened have screened positive for TBI symptoms. Many of these veterans live in rural areas.

## Traumatic Brain Injury Health Enhancement and Long-Term Support Act of 2007

After holding hearings on the subject and meeting veterans struggling with TBI, Mike took action. On May 8, 2007, he introduced the bipartisan bill H.R. 2199, the Traumatic Brain Injury Health Enhancement and Long-Term Support Act of 2007. This legislation addresses the challenges presented by traumatic brain injury and improves the quality of care available to rural veterans with TBI. H.R. 2199 requires TBI screening for all veterans and establishes a comprehensive program for long-term TBI rehabilitation. It authorizes funds for the establishment of centers for TBI research, education, and clinical activities. It forms the Committee on Care of Veterans with TBI. The legislation also creates a pilot program for delivering readjustment counseling and mental health services to rural veterans through mobile Vet Centers. This bill passed the House of Representatives on May 23rd and awaits action in the Senate.

## Treating Veterans with Substance Abuse Disorders

Of the approximately 300,000 veterans from Operations Enduring and Iraqi Freedom who

have accessed VA health care, nearly 50,000 have been diagnosed with a substance abuse disorder. Additionally, more than 70% of homeless veterans suffer from alcohol and other drug abuse problems. Mike is extremely concerned about this issue.

#### Justin Bailey Veterans Substance Use Disorders Prevention and Treatment Act of 2008

On March 6, 2008, Mike introduced H.R. 5554, the Justin Bailey Veterans Substance Use Disorders Prevention and Treatment Act of 2008. The bill was a tribute to Justin Bailey, who, after returning from service in Operation Iraqi Freedom, died in a VA domiciliary facility while receiving care for PTSD and a substance use disorder. This bill addresses this issue head on by requiring the VA to provide the full continuum of care for substance abuse disorders, and by requiring that this full spectrum of care be available at every VA medical center. The legislation also directs the VA to conduct a pilot program for internet-based substance use disorder treatment for veterans of Operations Enduring Freedom and Iraqi Freedom. H.R. 5554 passed the House of Representatives on May 20, 2008 and became public law on October 10, 2008 as a part of S. 2162, the Veterans' Mental Health and Other Care Improvements Act of 2008.

#### Suicide Prevention

Suicide is a growing problem among veterans suffering from PTSD. Veterans have an increased chance of suicide due to various increased risk factors such as combat exposure, traumatic brain injury (TBI), strained social support structures, and access to lethal means. It is estimated that veterans could account for 20% of the suicide deaths in the United States.

Mike believes that everything possible must be done to take care of our veterans suffering from PTSD and other mental health issues. He was an original cosponsor of H.R. 327, the Joshua Omvig Veterans Suicide Prevention Act, which passed the House on March 21, 2007 and was signed into law on November 5, 2007. The bill, named for an Iraq veteran who took his own life, requires a comprehensive VA program to reduce suicides among veterans, including placing suicide prevention counselors at VA medical facilities and 24-hour mental health care access for at-risk veterans. The program also requires the Department of Veterans Affairs (VA) to train staff who interact with veterans to recognize suicide, conduct a mental health assessments of all veterans, research the best practices for suicide prevention, provide mental health care for veterans who have experienced sexual trauma while in military service, and establish a toll-free hotline for veterans seeking assistance.

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