



**WOUNDED WARRIOR PROJECT
STATEMENT FOR THE RECORD**

**SUBCOMMITTEE ON DISABILITY ASSISTANCE AND MEMORIAL AFFAIRS
COMMITTEE ON VETERANS' AFFAIRS
U.S. HOUSE OF REPRESENTATIVES**

**LEGISLATIVE HEARING
ON**

H.R. 1182, the Deportation Prevention and Reform Act; H.R. 1183, the Honoring the Oath Act of 2021; H.R. 5916, the Wounded Warrior Access Act; H.R. 6131, the Veterans Disability Claims Notification Improvement Act; H.R. 6064, to direct the Secretary of Veterans Affairs to seek to enter into an agreement with the National Academies of Sciences, Engineering, and Medicine for a review of examinations, furnished by the Secretary, to individuals who submit claims to the Secretary for compensation under chapter 11 of title 38, United States Code, for mental and physical conditions linked to military sexual trauma; H.R. 6165, Department of Veterans Affairs Post-Traumatic Stress Disorder Processing Claims Improvement Act of 2021; Discussion Draft, to amend 38 USC § 103(d) to add a new paragraph that would allow surviving spouses who remarry after 10 consecutive years of receipt, or entitlement to, benefits relating to Dependency Indemnity Compensation to retain 50 percent of the amount payable under such provision and those who remarry after 20 years to retain the full amount; Discussion Draft, to amend title 38, United States Code, to update certain terminology related to marriage under the laws administered by the Secretary of Veterans Affairs; Discussion Draft, to direct the Secretary of Veterans Affairs to create fact sheets, for veterans and for survivors of veterans, that compare benefits and compensation, to such individuals under laws administered by the Secretary, to monthly insurance benefits under title II of the Social Security Act, and supplemental security income under title XVI of the Social Security Act; Discussion Draft, the Department of Veterans Affairs Principles of Benefits Automation Act; Discussion Draft, the Modernizing Department of Veterans Affairs Disability Benefit Questionnaires Act; Discussion Draft, the Department of Veterans Affairs Principles of Benefits Automation Act; Discussion Draft, the Modernizing Department of Veterans Affairs Disability Benefit Questionnaires Act; Discussion Draft, the Expediting Temporary Ratings for Veterans Act; and Discussion Draft, to amend title 38, United States Code, to improve outreach by the Secretary of Veterans Affairs to dependents of deceased veterans, and for other purposes

DUTY ★ HONOR ★ COURAGE ★ COMMITMENT ★ INTEGRITY ★ COUNTRY ★ SERVICE



MARCH 29, 2022

Chairwoman Luria, Ranking Member Nehls, and distinguished members of the House Committee on Veterans' Affairs, Subcommittee on Disability Assistance and Memorial Affairs – thank you for the opportunity to submit Wounded Warrior Project's views on the legislation under consideration today.

Wounded Warrior Project (WWP) was founded to connect, serve, and empower our nation's wounded, ill, and injured veterans, Service members, and their families and caregivers. We are fulfilling this mission by providing more than 20 life-changing programs and services to more than 200,000 registered post-9/11 warriors and family members, continually engaging with those we serve, and capturing an informed assessment of the challenges this community faces. We are pleased to share that perspective for this hearing on pending legislation that directly impacts the warriors we serve, those wounded, ill, or injured while in service. Over the next several months, we are hopeful that we can assist your work to improve the lives of veterans and their families during the 117th Congress.

H.R. 5916, the *Wounded Warrior Access Act*

When a veteran submits a claim for VA benefits, a claims file – commonly referred to as a “C-File” – is created. The C-File may contain the veteran's service records, VA exam results, additional information submitted by the veteran, and anything else VA deems necessary to decide a disability claim. A veteran may want to view their C-File to ensure all the information it contains is accurate and complete before the claim is decided or, once a case has been decided, to better understand how VA reached its decision.

Unfortunately, the process for a veteran to be able to view their C-File is antiquated and inconvenient. Under current policies, a veteran who wishes to review their C-File has three options. First, the veteran can make an appointment with their VA Regional Office (RO) to physically view the C-File in person. This option is often inconvenient for veterans who do not live within a reasonable proximity to the RO and to those who struggle to find time to visit during business hours. Second, the veteran can submit VA Form 3288, *Request for and Consent to Release of Information from Individual Records*, by mail or fax. This option does not include confirmation of receipt by VA and generally includes a wait period that may last several months. Third, the veteran may submit a *Freedom of Information Act* (FOIA) request, which is difficult for veterans who are not familiar with the procedure. Such requests often take substantial processing time.

It is also noteworthy that C-Files are delivered in paper form or as a compact disc (CD). As computer manufacturers are well along with a migration away from building internal CD drives, the CD format is quickly becoming old technology which many computers do not support. Accordingly, the time has come for VA to provide the option for electronic delivery of

a C-File. VA has the technology to make information available online, and precedent has already been established by making medical records available through the My HealtheVet portal.

If enacted, the *Wounded Warrior Access Act* would modernize this process by allowing veterans to electronically request and receive their C-Files easily and securely. It would also create reasonable timeliness standards for VA to confirm receipt of the request and provide the veteran with their records. This would make the process more convenient for veterans, increase veterans' faith in VA transparency, and decrease unnecessary appeals since more veterans will have access to all the information VA used to decide their claims. WWP urges Congress to pass this legislation and we appreciate Rep. Pete Aguilar (D-CA-31) for its introduction.

H.R. 6064, to direct the Secretary of Veterans Affairs to seek to enter into an agreement with the National Academies of Sciences, Engineering, and Medicine for a review of examinations, furnished by the Secretary, to individuals who submit claims to the Secretary for compensation under chapter 11 of title 38, United States Code, for mental and physical conditions linked to military sexual trauma

Wounded Warrior Project's 2021 *Annual Warrior Survey*¹ reflects that 7 in 10 women warrior respondents and 3 in 50 male warrior respondents have experienced military sexual trauma (MST). MST continues to be one of the most complex yet widespread challenges facing Service members and veterans. While VA has made important changes over the last several years in how they care for survivors of MST, there is still a need for improvement. A 2021 VA Office of Inspector General (OIG) report indicates that more than half of denied claims related to MST contained processing errors that may have triggered premature denials. There are also several issues we frequently hear from MST survivors regarding their treatment at VA – including a lack of understanding of the issue or empathy from examiners, retraumatization during the exam process, and not having the option to select the gender of an examiner. As the cases of military sexual assault continue to rise, it is more important than ever that VA improve how it is caring and providing benefits to survivors.

H.R. 6064 would direct VA to partner with the National Academies of Sciences, Engineering, and Medicine to review examinations of individuals who submit claims for compensation for mental and physical conditions linked to MST. The review will include a determination on the adequacy of Disability Benefits Questionnaires (DBQs) and the schedule of rating disabilities, whether certain conditions linked to MST should require referral for both a mental and physical health examination and what credentialing and training is necessary for disability examiners.

Wounded Warrior Project supports H.R. 6064, and we believe this is a necessary step to continue improving the claims process for MST survivors. We are especially pleased to see the inclusion of a review on whether certain MST-related conditions should require both a mental and physical health examination, as many of these conditions do not have physical markers. We

¹ Our *Annual Warrior Survey* reference corresponds to the twelfth edition of the survey, which was published in 2022 and reflects data gathered in 2021. To learn more, please visit <https://www.woundedwarriorproject.org/mission/annual-warrior-survey>.

would like to thank Representatives Nehls (R-TX-22), Bost (R-IL-12), Luria (D-VA-02), Bergman (R-MI-01), Ellzey (R-TX-06), and Miller-Meeks (R-IA-02) for introducing this legislation and for their work to ensure MST survivors receive the care and benefits they deserve.

H.R.6131, the *Veterans Disability Claims Notification Improvement Act*

The Department of Veterans Affairs (VA) has leveraged new technologies to expedite their disability compensation claims process to include adapting its information technology (IT) infrastructure to provide timely adjudication of claims to veterans. Other reforms can be more generally characterized as updating policies and directives to better reflect modern technological capabilities. Occasionally these commonsense reforms require congressional action.

Under current law, VA has no statutory powers to use electronic means to notify veterans about the status of their claims and appeals for VA benefits. This legislation would amend the relevant parts of 38 U.S. Code Chapters 51, 71, and 72 to allow VA to use electronic means to provide notice to claimants about their claim status. These amendments would require a veteran to choose to receive such notices electronically, and that choice could be subsequently revoked if traditional written notice is later preferred.

In addition to its practicality, the option for electronic notification could eliminate delays caused by mail, which can negatively impact a veteran's claim. For instance, if a veteran is notified of a 60-day due process period for a reduction in benefits but does not receive the mailed notice until day 50, they have only 10 days to respond and act. Electronic notification would have provided the full 60-day notice. Allowing communication about these decisions and related notices to be made electronically would eliminate mail delays and represent a step towards modernizing VA's benefits system. WWP is pleased to support *the Veterans Disability Claims Notification Improvement Act* and will continue to support its inclusion as Section 708 in the *Honoring Our PACT Act* (H.R. 3967).

H.R. 6165, the *Department of Veterans Affairs Post-Traumatic Stress Disorder Processing Claims Improvement Act*

With more than one million Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn veterans having some mental health need, and approximately 11 percent to 20 percent of post-9/11 veterans presenting with PTSD in a given year², WWP is committed to a public health approach that prioritizes providing high-quality mental health resources and treatment to veterans. In addition to offering a continuum of mental health support programs, WWP's VA-accredited Benefits Services team also works closely with veterans and their families to help them obtain the benefits they have earned. Through this work, we interact directly with veterans struggling to obtain service-connection for PTSD through the VA disability claims process.

² U.S. DEP'T OF VET. AFFAIRS, *How Common is PTSD in Veterans?*, https://www.ptsd.va.gov/understand/common/common_veterans.asp (last visited March 23, 2022).

Accessing resources, service-connection, compensation, and treatment for PTSD are among the most critical needs of the population WWP represents. In our most recent *Annual Warrior Survey*, 88.5 percent of warriors reported having at least one mental health injury or condition. PTSD ranked as the most common mental health issue, with 75 percent of warriors reporting this condition. Our *Annual Warrior Survey* also finds financial stresses compound mental health challenges. Of the warriors who reported financial strain, 62.8 percent presented with PTSD symptoms.

A December 2020 report from the Office of the Inspector General (OIG) reflects the concerns warriors share with WWP's Benefits Services. The report estimates that more than 15 percent of PTSD disability claims unrelated to Military Sexual Trauma completed in Fiscal Year 2019 were inaccurately processed by VA personnel. OIG notes that claims processors did not adequately understand or follow PTSD claims processing procedures.³ This appears to impact veterans who file an initial claim for service-connection rather than claims for increased ratings. Based on its investigation, OIG made several findings, including:

- Claims processors are only required to take training on the details of PTSD stressors during their first year in the position. They found that claims processors were not voluntarily participating in regular training outside of this requirement.
- Since Regional Offices have discretion on training topics, the Veterans Benefits Administration (VBA) lacks assurance that claims processors receive the same information through station-selected training in a uniform manner that would address the types of nationwide errors the OIG review team identified. Addressing the complexity of PTSD claims processing through regular national training and other instructional aides or guidance would help ensure that claims processors bridge the knowledge gaps found during this review.
- The M21-1, Adjudication Procedures Manual does not fully align with the regulation governing service connection for PTSD, 38 C.F.R. § 3.304(f) which can cause over- or under-development through improper procedure. Additionally, the manual lacks specificity in some areas and needs to be streamlined.

If enacted, H.R. 6165, the *Department of Veterans Affairs Post-Traumatic Stress Disorder Processing Claims Improvement Act*, would address the challenges impacting veterans and improve the development and subsequent accuracy of PTSD claims decisions to ensure veterans experiencing PTSD have access to health care, treatment, service-connection, and compensation. While the OIG report speaks more often to claims that received more development than was warranted based on evidentiary records, inefficient use of limited resources threatens to reduce the time and attention that should be dedicated to veterans presenting meritorious claims based on their experiences in service. The legislation would

³ OFF. OF INSPECTOR GEN., U.S. DEP'T OF VET. AFFAIRS, VETERANS BENEFITS ADMINISTRATION: POSTTRAUMATIC STRESS DISORDER CLAIMS PROCESSING TRAINING AND GUIDANCE NEED IMPROVEMENT, <https://www.va.gov/oig/pubs/VAOIG-20-00608-29.pdf> (last visited March 25, 2022).

implement many of OIG's recommendations and would require the VBA Compensation Service to:

- Update its ongoing national training program for claims processors who review PTSD disability benefit claims, to include training on stressor development and verification. Claim processor participation would be required.
- Standardize training provided at Regional Offices.
- Establish a formal process to conducting an annual analysis of processing error trends and associated training needs, as well as annual studies on military PTSD stressors and decision-making claims for claims processors to help guide the national training program.
- Annually update VBA's procedural guidance within the M-21-1 to provide claims processors with better resources regarding best practices, including specific guidance regarding development of PTSD claims.

As an organization committed to assisting veterans with VA benefits, WWP supports the *Department of Veterans Affairs Post-Traumatic Stress Disorder Processing Claims Improvement Act* and thanks Rep. Joe Neguse (D-CO-02) for introducing the bill.

H.R. 6849, the *Supporting All Veteran Families Act*

The Department of Veterans Affairs offers an array of benefits and services, some of which depend upon a veteran's marital status, including certain benefits available to spouses and surviving spouses of veterans. These include benefits for health care, education and training, employment, home loans, life insurance, memorial affairs, survivors pension, and Dependency and Indemnity Compensation (DIC).⁴

For many years, eligibility for these spousal benefits was reserved for opposite-sex couples in line with federal law, which defined marriage as between one man and one woman under the 1996 *Defense of Marriage Act (DOMA)* (P.L. 104-199). In December 2010, Congress voted to repeal the Department of Defense's Don't Ask, Don't Tell (DADT) policy which was subsequently signed into law. The policy officially ended on September 20, 2011, which allowed members of the LGBTQ community to openly serve in the Armed Forces. Subsequently, in June 2013, the U.S. Supreme Court ruled in *U.S. v. Windsor* that *DOMA* discriminated against same-sex couples, and in June 2015, in the *Obergefell v. Hodges* decision, the U.S. Supreme Court ruled that the Fourteenth Amendment requires all states to grant same-sex marriages and recognize same-sex marriages granted in other states. In June 2015, VA announced that they would treat legally married same-sex couples identically to opposite-sex

⁴ U.S. DEP'T OF VET. AFFAIRS, *VA Benefits for Spouses, Dependents, Survivors, And Family Caregivers, Family Member Benefits*, <https://www.va.gov/family-member-benefits/> (last visited March 25, 2022).

couples.⁵ Same-sex veteran couples have since been eligible to receive spousal benefits, including pensions, benefits, VA home loans, and medical coverage.

The *Supporting All Veteran Families Act* would amend 38 USC § 101 to update certain terminology related to marriage under the laws administered by VA. This bill would formally recognize LGBTQ Americans and same-sex couples under VA marriage law for spouses or surviving spouses of veterans. This legislation seeks to ensure that same-sex married couples are treated fairly and consistently with opposite-sex married couples. Without this statutory change and its associated protection, VA benefits to legally married same-sex couples may be denied in the future. WWP supports the *Supporting All Veteran Families Act* and thanks Rep. Marie Newman (D-IL-03) for her efforts to help ensure that veterans who are part of the LGBTQ community continue to receive the benefits that they have earned.

Discussion Draft, the *Expediting Temporary Ratings for Veterans Act*

The Department of Veterans Affairs generally grants three types of temporary total disability ratings: (1) pre-stabilization ratings, (2) hospitalization ratings, and (3) convalescent ratings. Collectively, these temporary ratings are intended to compensate veterans for service-connected disabilities that render them unable to earn a living for a limited period of time. All of these avenues could theoretically be subject to procedures that make processing either automated or more efficient.

This draft legislation is narrowly focused on temporary ratings based on hospitalization, or those that fall under 38 U.S.C. § 1156 (a)(1)(C). Commonly called “Paragraph 29” ratings (because they arise under 38 C.F.R. § 4.29), these ratings are already automatically generated in the Veterans Benefits Management System (VBMS) and granted if they meet the required criteria. Typically, whenever a veteran is hospitalized overnight, the VA hospital submits a *Report of Hospital Stay* document to the Veterans Benefits Administration, no matter what the condition or how long the stay. VBA will subsequently check to see if the stay meets or exceeds the criteria of Paragraph 29 (service-connection for a condition and 21 or more days of inpatient treatment for that condition). If the criteria are met, a temporary total rating is issued without a claim being filed by the veteran.

The *Expediting Temporary Ratings for Veterans Act* would require VA to modify its IT systems to automate the process around Paragraph 29 ratings. Automation of this process may save time; however, we would also encourage adoption of more efficient processes for the other avenues to temporary total disability ratings that currently take more time to process based on our understanding of routine practice. For instance, “Paragraph 30” temporary ratings (named as such for falling under 38 U.S.C. § 1156(a)(1)(D), found in 38 C.F.R. § 3.40). Paragraph 30 is granted for a veteran who has surgery on a service-connected condition who then requires 1 or more months convalescence or immobilization with a cast. There is no hospitalization report issued to VBA, unless an overnight treatment is required. The veteran must submit additional evidence, like a surgical report, to prove entitlement to convalescence and/or use of a cast. In

⁵ U.S. DEP’T OF VET. AFFAIRS, *Important Information on Marriage*, Office of Public and Intergovernmental Affairs, <https://www.va.gov/opa/marriage/> (last visited March 25, 2022).

theory, VBA could automate a decision based on the evidence submitted, but that often does not happen. Instead, veteran service representatives may undertake burdensome evidentiary development to the detriment of the veteran, including ordering exams for a veteran still healing from surgery.

For these reasons, WWP supports the *Expediting Temporary Ratings for Veterans Act* as written but would respectfully ask the Committee to consider inclusion of additional language to support more expedited processing of other types of temporary total disability ratings that are more labor intensive than the subject of this discussion draft.

Discussion Draft, the *Modernizing Department of Veterans Affairs Disability Benefit Questionnaires Act*

In general, Disability Benefits Questionnaires (DBQs) are completed by health care providers in support of a veteran's claim for VA disability compensation benefits. DBQs typically fall within one of two varieties: (1) those ordered by VA pursuant to a claim and completed by qualified contract examiners, or (2) those obtained by the veteran, or their veteran service representatives, and completed outside of the official VA claims process (often by a private provider) and submitted by the veteran as evidence to support a claim. This legislation addresses both varieties.

In December 2021, VA launched a pilot program to begin automating the DBQ process for VA-completed forms. Although it is currently limited to claims for increased ratings for hypertension, the pilot shows great potential to significantly reduce the time it takes to process individual claims, and VA has announced plans to expand the pilot to include additional conditions. However, one of the challenges identified by the pilot is ensuring that the system can properly read the information in the claims file. DBQs are commonly submitted in PDF format which requires them to be read by character recognition software in order to be entered into the automation process. This additional software is sometimes unable to read the DBQ, which can lead to inaccuracies or rejection of the document.

If enacted, the *Modernizing Department of Veterans Affairs Disability Benefit Questionnaires Act* would require all DBQ data collected during Compensation and Pension Examinations conducted by VA contract examiners to be transmitted to VA in a machine-readable format. To ensure that this provision covers VA contractors, a technical correction should be made to Section 2 of the bill by striking "section 305," and inserting "section 504." The bill defines "machine-readable" as "...a format that can be easily processed by a computer without human intervention while ensuring no semantic meaning is lost," in accordance with 44 U.S.C. § 3502(18). VA would be required to establish standards to ensure that machine-readable DBQs are transmitted in a way that is compatible with claims automation systems. Additionally, the bill would require VA to submit a plan to the House and Senate Veterans' Affairs Committees to modify existing information technology systems to enable veterans' private physicians to submit machine-readable DBQs if they choose.

Wounded Warrior Project recognizes the potential for claims automation to reduce processing times and supports steps to allow VA to expand claims automation, should the further expansion be warranted by the results of the pilot. The *Modernizing Department of Veterans Affairs Disability Benefit Questionnaires Act* would accomplish this by requiring contract examiners to submit DBQs that are compatible with current automation efforts, while also looking ahead to how DBQs from veterans' private physicians may be processed in the future. WWP supports this draft legislation.

Discussion Draft, to direct the Secretary of Veterans Affairs to create fact sheets, for veterans and for survivors of veterans, that compare benefits and compensation, to such individuals under laws administered by the Secretary, to monthly insurance benefits under title II of the Social Security Act, and supplemental security income under title XVI of the Social Security Act.

Over the course of several decades, federal programs including VA health care and disability compensation, Department of Defense (DoD) medical care and health insurance, Social Security Disability Insurance (SSDI), Medicare, and others have emerged to support the veteran and military communities directly or indirectly. As individual circumstances may dictate, a wounded warrior may rely on one or more of these fragmented services for medical care or health insurance. For the best results, a warrior must have a clear understanding of each program's respective benefits and eligibility criteria to make informed decisions that best match their individual circumstances.

Under this draft legislation, VA would be required to coordinate with the Social Security Administration (SSA) (and others including veteran service organizations) to compare the eligibility and filing requirements of VA benefits and compensation, the Social Security disability insurance program (title II of the Social Security Act), and the Supplemental Security Income (SSI) program (title XVI of the Social Security Act). An associated fact sheet with this information would be provided to any individual that applies for VA benefits (either an initial claim or a claim for increase) or who is denied VA benefits.

Greater understanding of these programs, and how they can impact health care and finances, can have an important impact on the post-9/11 wounded warriors that WWP serves. According to 2010 Current Population Survey data, there are approximately 34,000 veterans who served on or after September 11, 2001 who are Social Security beneficiaries.⁶ More notably to severely wounded veterans who have been medically retired from military service, receipt of SSDI benefits can trigger a more complicated consideration of Medicare and TRICARE systems. In brief, a Service member recovering from catastrophic wounds may choose to receive SSDI during their convalescence which subsequently requires enrollment in Medicare Part B after 24 months. If that individual also chooses to maintain TRICARE coverage for themselves (and possibly his or her family) by virtue of eventual Chapter 61 medical retirement, and then decides to return to work and terminate SSDI coverage, then Medicare Part B – and its enrollment fees – must be paid for an additional 8.5 years to maintain TRICARE coverage. This disorderly

⁶ Anya Olsen & Samantha O'Leary, SOCIAL SEC. ADMIN., *Military Veterans and Social Security: 2010 Update*, <https://www.ssa.gov/policy/docs/ssb/v71n2/v71n2p1.html> (last visited March 25, 2022).

overlap of systems does not consider VA benefits or health care, but nevertheless is an important consideration for some veterans to keep in mind as they seek to make important care and benefits decisions.

For these reasons, we would invite the Committee to consider amending this legislation to include collaboration with the DoD to ensure that medically retired individuals are cognizant of the rare but significant issue outlined above. We further invite Committee members to review the associated report requested from DoD included in the *National Defense Authorization Act for 2021* – which should identify legislative or regulatory changes to address the issue – when it becomes available.⁷

Discussion Draft, the *Department of Veterans Affairs Principles of Benefits Automation Act*

The Department of Veterans Affairs has been considering multiple methods to expedite the adjudication of benefits and claims process. In this context, process automation plans intended to alleviate the current claims backlog and prevent future backlogs have gained more attention within this Subcommittee and around the Veteran Service Organization (VSO) community.

This legislation would require VA to submit to Congress a plan to modernize VBA information technology (IT) systems. The plan would include an identification of information systems that need to be modernized or retired, the fiscal year target dates by which VBA intends to complete the modernization of each, and cost estimates for associated modernization efforts. The report would be guided by a list of principles conveyed as Sense of Congress, including aspirational goals to increase the speed and accuracy of claims processing decisions, enhance the productivity of VA employees, and result in greater consistency in claims decisions. The Sense of Congress continues that automation should not lack intermediation, as its needed, and should not reduce or infringe upon the rights of applicants for benefits. In addition to those principles listed in the discussion draft, WWP believes it is imperative that utmost care be taken to ensure automated VA claim decisions adhere to the Benefit of the Doubt Doctrine contained in 38 C.F.R. § 3.102 and that VA claim decisions remain non-adversarial, above all else.

Many stakeholders in this space agree that VA needs to continue integrating technology to provide efficient and timely services to veterans. WWP is included in that group, and we support this legislation and its intent to ensure that veterans are provided with timely and quality care.

CONCLUSION

Wounded Warrior Project once again extends our thanks to the Subcommittee on Disability Assistance and Memorial Affairs for its continued dedication to our nation's veterans.

⁷ See House Report 116-442, Title VII (“Improving Health Care Choices for Severely Injured Service Members”) to accompany P.L. 116-283.

We are honored to contribute our voice to this important conversation, and proud to support many of the legislative initiatives under consideration that will enhance access to benefits and improve the experience of those who interact with VA's dynamic systems to support our nation's veterans. As your partner in advocating for these and other critical issues, we stand ready to assist and look forward to our continued collaboration.