

AMVETS fully supports your amendments to ensure that our nation's heroes have access to the quality health care they have earned.

Sincerely,

RAYMOND C. KELLEY,  
National Legislative Director.

BLINDED VETERANS ASSOCIATION,  
Washington, DC, November 6, 2009.

Hon. STEVE BUYER,  
Ranking Member, Committee on Veterans Affairs,  
Cannon House Building, Washington, DC.

DEAR RANKING MEMBER BUYER: On behalf of the Blinded Veterans Association (BVA), the only congressionally chartered veterans' service organization exclusively dedicated to serving the needs of our nation's blinded veterans and their families for sixty-four years, BVA is writing to express strong concerns about H.R. 3962, America's Affordable Health Choices Act of 2009. As currently drafted, without your amendments BVA would consider this legislation inadequate because it could limit the health care choices for veterans, and threaten veterans who currently utilize the high quality of VA health care offered to veterans through the VA health care system by forcing them into private insurance plans. Earlier this year, BVA along with five other congressionally chartered veterans service organizations wrote to support your amendments and serious concerns about provisions contained in the previous House health care reform bill, H.R. 3200 that could have had negative effects on veterans, their families, and the Department of Veterans Affairs health care system. BVA and other VSO's had been assured that key amendments by you including protection of veterans enrolled in VA would be retained as the bill moved forward and this is not the case today.

The Veterans Health Administration (VHA) provides medical care services to its 8 million enrolled veterans at more than 1,400 medical centers, outpatient clinics and other points of service. With over 270,000 employees, the VHA runs the largest integrated health care system in the United States, and over the past decade the quality of care provided has risen to amongst the finest health care systems in the nation. Under H.R. 3962, VA health care and TRICARE would be deemed "qualified" coverage but we point to this section as now written as it is ambiguous and could be interpreted to disqualify individuals enrolled in VA health care or TRICARE from participating in the exchange. This amendment was accepted at the Energy and Commerce Committee, but it failed to be included H.R. 3962.

It is critical that congress ensure in the current health care reform effort to ensure that the authority of the Secretary of VA and Secretary of DOD could never be challenged or obstructed by any provision in the bill or by a secretary or commissioner from another sector of government. As currently written, H.R. 3962, would provide for the Secretary of Defense and the Secretary of VA to retain sole authority over their respective health care systems only as it pertains to Subtitle A, the Health Insurance Exchange. The original Buyer Amendment adopted in Energy and Commerce Committee did this but the current legislation leaves this open and vague. Second key issue we support being amended is in section 342 of the bill to allow individuals enrolled in VA health care and TRICARE to be eligible for affordable tax credits. Currently, H.R. 3962 defines an "affordable credit eligible individual" as one who is not enrolled in acceptable coverage—which would exclude individuals enrolled in VA health care or TRICARE.

Unfortunately, as currently drafted, H.R. 3962 fails to adequately recognize, protect or

preserve this invaluable system for our nation's 24 million veterans. BVA once again supports Ranking Member Buyer amendments to ensure that veterans are protected. Enrollment in VA health care, especially in the case of service-connected disabled veterans, should never become a bar or obstacle to the receipt of benefits that non-veteran citizens receive in this or any other health care reform bill. Any national health reform legislation must make certain that all veterans, including all of those enrolled in VA health care, remain eligible to enroll in any Exchange-participating health benefits plan offered under H.R. 3200 through the Health Insurance Exchange, or in any other public or cooperative health insurance program.

The VHA provides a uniform medical benefits package to all enrolled veterans, regardless of their enrollment priority group, that emphasizes preventive and primary care, and offers a full range of outpatient and inpatient services and prescription medications. Accordingly, enrollment in the VHA health care program must be considered acceptable coverage in the same manner as members of the uniformed services and their dependents, including Civilian Health and Medical Program of the VA (CHAMPVA) coverage furnished under section 1781 of title 38 United States Code, so that they will not be subject to any tax or penalty for lack of health care coverage.

Finally, BVA would stress again, that it is imperative that any other health care reform legislation considered in Congress, must make clear that the health care system of the Department of Veterans Affairs shall be run by the Secretary of Veterans Affairs to meet the health care needs of veterans, dependents and survivors, and that this authority shall not be infringed by any national health care organizations or any other departments, agencies or independent organizations of the federal government.

Ranking Member Buyer on behalf of the Blinded Veterans Association membership we represent, and for the benefit of the millions of veterans living today and future veterans, we support the amendments you are offering today with your colleagues to clarify the current language in H.R. 3962 to protect the health care system of our veterans. Unless the changes and clarifications discussed above are made in the legislation, we will oppose movement of H.R. 3962 or any other legislation that could negatively impact the current health care system for our nation's veterans.

Sincerely,

THOMAS ZAMPIERI,  
Director, Government Relations.

THE RETIRED ENLISTED ASSOCIATION,  
Alexandria, VA, November 6, 2009.

Hon. STEVE BUYER,  
Ranking Member, Committee on Veterans Affairs,  
House of Representatives, Washington, DC.

DEAR CONGRESSMAN BUYER: The Retired Enlisted Association (TREA) shares the concern that H.R. 3962 does not ensure that veterans and TRICARE beneficiaries would have access to the Health Care Exchange, and that the same beneficiaries would be excluded from eligibility for "affordability credits". Thus, we do support amendments to the bill that would address these concerns.

While it is no doubt true that most veterans and TRICARE beneficiaries would not have a problem if the legislation were enacted as it currently stands, those who live in remote areas could find themselves in dire straits with regard to their health care without the changes you seek. These are precisely the people who frequently have difficulty in accessing the health care benefits

which they have earned and have just as much right to as every other veteran or TRICARE beneficiary.

Finally, we recommend that the language you propose to insert at the end of section 202 be changed from "EXCEPTION FOR VETERANS AND MEMBERS OF THE ARMED FORCES" to "EXCEPTION FOR VETERANS AND MEMBERS OF THE UNIFORMED SERVICES" NOAA and USPHS members are not considered to be members of the Armed Forces but are TRICARE beneficiaries.

Sincerely,

LARRY MADISON,  
Legislative Director.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Ms. WOOLSEY) is recognized for 5 minutes.

(Ms. WOOLSEY addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

### HEALTH CARE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from the Virgin Islands (Mrs. CHRISTENSEN) is recognized for 5 minutes.

Mrs. CHRISTENSEN. Mr. Speaker, this House and our Nation are poised for a historic vote tomorrow. That vote will determine whether tens of millions of people who are uninsured and underinsured will finally have access to health care. But beyond that, it will begin to transform the current sick care system which is draining this country, not just of its finances, but of some of its brightest and best who, because they are not able to access the fantastic health care this country has to offer, are not as productive as they would or should be.

It will enable many, those in our rural areas and our territories, those in blighted urban areas and racial and ethnic minorities who have been left out of the health care mainstream to finally have access to wellness and more productive and fulfilling lives.

Our vote tomorrow will also determine how successfully we will compete in the global community where everyone is in a race to the top, whether or not we will, through reducing the highest health care in the worlds, set our country on a more sustainable economic footing, and whether we can regain our leadership in this world by raising our health indicators, like infant and maternal mortality, to levels that match or better the other industrialized nations we now lag behind.

To me, a vote against this bill is a vote against what is best for our country.

No one ever thought we would have had a perfect bill, but what we have in H.R. 3962, the Affordable Health Care for America Act, is as near a perfect bill as anyone could have conceived when we started out this process. I applaud the outstanding leadership of our Speaker, our leader, our whip, our caucus Chair and vice Chair, the chairmen