



Paralyzed Veterans
of America

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UPDATE

Recent news regarding legislation and regulatory actions affecting veterans and people with disabilities.

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*****PRIORITY*****

The Government Relations staff is still looking for stories about problems that our members have experienced during air travel. Please visit www.AirAccess30.org and share your story.

House VA Committee Conducts Roundtable on BRAC Process for VA

Following the August recess, the House Committee on Veterans' Affairs held a roundtable to discuss draft legislation that is being developed to impose a BRAC-style process on the VA. The House VA Committee presented the major VSO's with a draft bill in July that would require the VA to undertake an asset review process that mirrors the BRAC process previously used in the Department of Defense (DOD). After serious concerns were raised by the major VSO's, the proposal was tabled until this fall. The measure is being pushed by the fiscal conservatives in the House who want to reduce spending in VA and see this as a way to achieve that goal.

During the round table, PVA expressed our support for the notion of rightsizing the VA's infrastructure footprint. However, we emphasized that a BRAC-style process is not necessarily the optimal process to achieve that end. Moreover, representatives from the Government Accountability Office (GAO) and the Congressional Research Service (CRS) explained that the key to making the process work is spending all the time necessary to do advance planning, laying out the desired end goals and the processes needed to analyze the complete VA health care system. DOD had fully three years to prepare for the BRAC process. Unfortunately, some members of the House leadership and the VA Committee do not appear to have the patience to allow the process to proceed slowly.



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**House Committee on Veterans Affairs Holds Roundtable on
Telehealth**

On September 12, 2017, the House Committee on Veterans' Affairs, Subcommittee on Health, held a roundtable discussion to examine the use of telehealth within the VA healthcare system. At the table were a range of stakeholders—from broadband providers, physician groups, VA representatives and several veterans' service organizations (VSOs).

Telehealth has been a feature of VA healthcare for years. It averts traditional barriers to care such as transportation, distance, and provider shortages. In FY 2016, 12 percent of veterans used telehealth in some form. According to VA surveys, telehealth has consistently high satisfaction outcomes. These services have reduced cost as well. Veterans with chronic care management needs saw a 35 percent reduction in hospital admissions.

Members of the Subcommittee engaged the attendees on the challenges VA faces to provide telehealth, such as a missing structure for reimbursement, and a great deal of confusion surrounding the ability of VA providers to offer telehealth to a veteran in a state in which they are not licensed. VA is allowed to waive these requirements if the veteran and provider are both located in a federal facility. Beyond these issues for VA, there is a structural barrier to contend with—40 percent of rural America does not have access to high speed broadband. Twenty-five percent of rural veterans never access the internet. Until broadband providers see fit to lay fiber optic cable in rural America, rural veterans will continue to rely on brick and mortar healthcare from VA.

However, while telehealth is an exceedingly valuable tool, PVA believes it must not be seen simply as an alternative to hiring nurses and doctors within the VA. PVA hopes telehealth will not appear to those at VA and in Congress to be a false solution to the provider shortage.

In August, 2017, Secretary Shulkin announced VA is issuing a proposed rule to address the licensure issue in regulation. The goal is “anywhere to anywhere” in order to allow a VA provider and patient to connect regardless of state lines or being in a federal facility. The proposed rule is currently under review at the Office of Management and Budget.

PVA Provides Testimony to House Subcommittee on Veterans Affairs

On September 13, 2017, PVA testified before the Subcommittee on Disability Assistance and Memorial Affairs (DAMA) of the House Committee on Veterans' Affairs on several pieces of legislation. Some of the legislation addressed issues that are not particularly complex or controversial, such as H.R. 1721, which designated specific cities as American World War II cities for their contributions during the war as well as their efforts to preserve structures and relics from that time, and H.R. 1900, to designate a museum in Columbus, Ohio the National Veterans Memorial and Museum. However, there were a couple of measures that were more important to PVA.

Most importantly, H.R. 3122, the "Veterans Care Financial Protection Act of 2017," would require the VA Secretary to work with federal and state officials to establish standards to protect against unscrupulous financial actors. Likewise, a draft bill titled the "Veterans Fair Debt Notice Act of 2017" will protect veterans by ensuring that veterans are not going into default on a debt caused by the VA by making it essential that the Veterans Benefits Administration (VBA) know whether or not the notice of debt actually reached the veterans. Both of these legislative approaches will help keep veterans financially secure.

The final bills dealt with headstones and markers for cemeteries. PVA supported both H.R. 3656, to provide consistent eligibility dates for headstones and markers and H.R. 3657, to authorize provision of headstones and markers in tribal cemeteries. This will provide a level of comfort and consistency to the families of deceased veterans during a difficult time of loss.

PVA continues to monitor veterans' legislation in Congress that affects our members, veterans as a whole and the disabled community in general.

House Judiciary Committee Passes ADA Notification Legislation

On September 7, 2017, the House Judiciary Committee passed H.R. 620, the "ADA Education and Reform Act of 2017," on a party-line vote, 15-9. This legislation, sponsored by Rep. Ted Poe (R-TX), would require a person with a disability to give notice to a public accommodation of an architectural barrier under the Americans with Disabilities Act (ADA) and provide the business with an opportunity to "cure" the violation prior to filing a lawsuit. During the committee markup, the bill's proponents touted the bill as a bipartisan solution to ADA lawsuits under Title III (public accommodations). The disability community, including PVA, strongly opposes this bill.



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During the markup, Democratic members of the Committee offered five amendments to H.R. 620. Ranking Member John Conyers (D-MI) sponsored an amendment that would amend Title III to allow for compensatory and punitive damages. Rep. Steve Cohen (D-TN) offered an amendment that would amend the legislation to provide for damages in the event of bad faith non-compliance during the cure period. Rep. David Cicilline's (D-RI) amendment would have limited the notice provisions to businesses with fewer than five employees. Rep. Eric Swalwell's (D-CA) amendment took a different approach by striking the notice requirement and replacing it with provisions targeted at attorneys who file frequent lawsuits. All of these amendments were rejected. Rep. Jamie Raskin (D-MD) offered an amendment that would have loosened the type of information required in a notification. Republicans expressed interest in exploring Rep. Raskin's amendment further and it was withdrawn.

Notification laws put the onus on the person with a disability to find ADA violations and notify a public accommodation of those violations. Instead of protecting and promoting the ADA, this legislation would actually force people with disabilities, including veterans, to wait in line for access to restaurants, grocery stores, and other places of public accommodation. Due to the legal remedies available under Title III of the ADA [injunctive relief (remove the barrier) and attorney's fees], implementing a notice requirement would remove any incentive for businesses to proactively comply with the ADA. If this bill becomes law, it would effectively gut the accessibility requirements for public accommodations because businesses, large and small, would have little fear of enforcement.

At this time, we do not know when, or if, this legislation will go to the House floor. In the meantime, please continue to contact your House Member to let him or her know that you oppose H.R. 620. It is important for House Members to know that the disabled veteran community does not support this legislation.

PVA Presents at Annual ADA Regional Conference

The Mid-Atlantic ADA Center's 24th Annual ADA Update took place September 13-15, 2017, in the greater Washington, DC area. Attendees had the opportunity to attend both plenary and workshop sessions regarding a wide-range of ADA and disability-related issues. Workshops addressed Title I, employment; Title II, state and local government; and Title III, businesses welcoming customers. Other topics included service animals, accessibility in rail facilities, and reasonable accommodations for college students.

On September 14, Heather Ansley, PVA's Associate General Counsel for Corporate and Government Relations, and Susan Prokop, PVA's Senior Associate Advocacy



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Director, presented a workshop titled, “Veterans with Disabilities as People with Disabilities.” The workshop focused on what veterans with disabilities need to know about the ADA, as well as other disability civil rights laws in the areas of employment, housing, and transportation. The workshop also introduced attendees to VA benefits and services.

The ADA Centers are a good source of information for state and local governments, as well as businesses, large and small, regarding their responsibilities and requirements under the ADA. In addition to the Mid-Atlantic Center, there are nine other regional centers across the country. More information about the ADA National Network is available at: <https://adata.org/>.

Disability Equality Index Released

The 2017 Disability Equality Index (DEI) was announced on August 23, 2017. A joint initiative of the American Association of People with Disabilities (AAPD) and the US Business Leadership Network (USBLN), the Index offers a unique snapshot of the sustainable progress many companies have made to achieve equality and inclusion for workers with disabilities. Companies that take the DEI self-report on a wide variety of criteria within four categories: Culture & Leadership, Enterprise-Wide Access, Employment Practices, and Community Engagement & Support Services.

First introduced in 2012 and piloted from 2013 to 2014 with 48 companies, a record 110 corporations undertook the self-evaluation in 2017. Released along with the results of the DEI was a report analyzing the efforts of U. S. business leaders over the past three years in making disability inclusion part of their workforce diversity efforts.

The companies represented in the 2017 DEI cover diverse business sectors, are of significantly varied sizes, and have workforces across the world. These Fortune 1000-scope companies are from 21 different sectors of the economy, and 69 of the reporting companies are ranked in the 2017 Fortune 500.

Remarkably, the corporations taking part in the 2017 DEI have a total U.S. workforce of roughly 7.2 million workers—or 5 percent of all of American workers. In addition to the large number of employees, the publicly held corporations in the 2017 DEI today total \$6 trillion in market value—showing their significant influence on the American and global economies.

PVA is pleased that many of its corporate supporters took part in the DEI, achieving scores between 80 percent and 100 percent.

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Among PVA supporting companies that scored 100 percent on the DEI are **3M, Accenture, Aetna, American Airlines, Anthem, Inc., Aramark Corp., AT&T, BAE Systems, Inc., Bank of America, Blue Cross Blue Shield, Booz Allen Hamilton, Boston Scientific Corporation, Capital One, Cigna, Comcast, CVS Health , DuPont, Express Scripts, EY Financial, General Motors, Goldman Sachs & Co, GSK Health Care Service Corporation, Hewlett Packard Enterprise, HP Inc., JPMorgan Chase & Co, Kaiser Permanente , KPMG, Lockheed Martin Corporation, Microsoft, Northrop Grumman Corporation, Pacific Gas and Electric Company, PNC Financial Services Group, Prudential Financial, Southern Company, Sprint, Starbucks, T-MOBILE USA, The Boeing Company, The Dow Chemical Company, The Hartford Financial Services Group, The Procter & Gamble Company, Verizon, Walgreens, Walmart, Wells Fargo, Whirlpool Corporation.**

For more information about the Disability Equality Index and the companies that participated in the 2017 survey go to <http://usbln.org/what-we-do/disability-equality-index/2017-dei-report>.



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