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OHIO

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Congress of the United States
House of Representatives
Washington, DC 20515

Statement from Congressman Sherrod Brown
CARES Commission Hearing
Aug. 12, 2003

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As the member of Congress for the 13th District, I am opposed to the proposed consolidation of the Brecksville Veterans Hospital with the Wade Park facility.

I would like to thank Secretary Principi and members of the Capital Asset Realignment of Essential Services (CARES) Commission for their service. I want to thank you for coming to Ohio.

I urge you to take the time at this hearing to listen directly to the veterans who are in attendance. On June 30, I hosted a town meeting that attracted hundreds of area veterans concerned about the rumors they were hearing regarding the fate of the Brecksville VA Hospital.

They have grave concerns about the impact of this proposal on their health services, and they have earned the right to be heard not only by the CARES Commission but by other members of the Bush administration who are supporting these proposals.

As the Senior Democrat on the Energy and Commerce Health Subcommittee, I am fully aware of the challenges health providers such as the VA are facing. There are clear parallels between the the private insurance market and the VA system.

Today, 42 million Americans are uninsured. Insurance premiums are rising on average 14 to 15 percent a year. For small employers, the average is more like 25 percent. Retiree health costs are growing at about 25 percent. Nearly five percent of small employers dropped their coverage in 2002 - that's a tremendous drop over the course of one year. Ten years ago, about 40 percent of large employers offered retiree benefits, now about 20 percent do.

It's outrageous that millions of Americans are forced to live with the anxiety that losing their jobs means losing their health benefits.

It's equally outrageous that we are seeing proposals that are undermining our country's commitment to veterans. If we move forward with proposals to close health facilities and scale back other VA-sponsored programs, we will only exacerbate the growing health care crisis in this country.

My message to Secretary Principi and members of this commission is clear: We support and believe in your agency's mission. You deserve more resources and support than the current administration is willing to give you.

My commitment is to work with you to redirect the policy priorities that President Bush and Congress have established that jeopardize the future of the VA. The examples of how these misplaced priorities hurt veterans are abundant.

For example, the Bush administration increased the co-pay veterans pay for prescription drugs from \$2 to \$7 last year and has proposed increasing it to \$15, while the President's tax cut gave the average millionaire \$93,500. This statement is not a reflection of politics. It's a reflection of the realities created by this administration when it chooses tax policies and spending priorities that shortchange the long-term solvency of essential programs such as those administered by the VA.

The veterans health care system is in crisis. More than 100,000 veterans are waiting six months or more for a medical appointment at Veterans Administration hospitals across the country. Current proposals in the VA health care system would halt enrollment in VA health care for many veterans, denying them access to any VA care. Examples of the cost shifting to veterans include a proposal that would require some of them to pay a \$250 annual enrollment fee while increasing co-payments for doctor's visits. These proposed changes could cause millions of veterans throughout the nation to be denied health care or to drop out of the VA system.

The federal final budget for 2004 allocates \$29 billion for VA health care - that's \$1 billion less than the administration's own estimates of what is needed to provide health care.

All of these cost-cutting proposals come at a time when we have asked our young men and women to serve in Iraq, Afghanistan, and other locations abroad.

The brave young men and women in uniform could return home to veterans health system so starved of resources that they will not get the level of care they earned. That's unacceptable.

Frankly, the timing of these proposals, coupled with the cutbacks in spending on veterans, are confusing to my constituents. They hear words like "restructuring" and "realignment." What they want to know is, "Will the care I earned and was promised to me be there when we need it?"

In reviewing the initial proposal, the answer to their question is clearly "no."

The Brecksville VA deserves more resources and enhancements. The 1,100 employees who work at that facility should be proud of their nationally recognized status.

The CARES Commission knows that the Brecksville VA has provided a pioneering trauma center and services for the chronically homeless. This proposal puts at risk the Brecksville hospital's ground-breaking efforts to help deeply troubled combat veterans and the well-being of homeless veterans with no other place to go.

A national leader in long term psychiatric care, the Brecksville VA was selected by the Federal Advisory Committee on Homelessness as a model program for the VA healthcare system. I have serious concerns that the this proposal jeopardizes the long-term psychiatric care for those who have answered our nation's call to duty.

Brecksville's Project Transcend has reportedly helped 300 veterans since 1992. By farming out these programs, we risk returning to the days of overcrowded, understaffed outpatient clinics that push traumatized veterans back on the streets.

While the commission's recommendation to move forward with closing the Brecksville facility is unfortunately imminent, there is no guarantee of funding to expand services and facilities at Wade Park.

If the Brecksville hospital should close, are veterans supposed to wait for the facilities and expansions while their critical needs are unmet? Are they supposed to trust the same administration and Congress that underfunded their programs to come through with the funding necessary to complete this transition?

This administration hasn't give me a good reason why veterans in my district should lose their hospital.

I ask that you take into account the objections of the veterans and reconsider the proposal to close Brecksville.

Sincerely,

A handwritten signature in black ink that reads "Sherrod Brown". The signature is written in a cursive, flowing style.

SHERROD BROWN
Member of Congress

DENNIS J. KUCINICH

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Congress of the United States
House of Representatives

Congressman Dennis J. Kucinich
Prepared Testimony for CARES Commission Hearing
Cleveland, Ohio
August 12, 2003

Committees:
Government Reform
Education and Workforce

The purpose of the Capital Asset Realignment for Enhanced Services (CARES) process is to assess proposed initiatives that address future health care needs of veterans and how the VA can best provide those services. This is about helping veterans get the best health care in the simplest manner. I believe we can accomplish this goal to help veterans in Northeast Ohio.

The proposal for the Eastern Market that is currently under consideration would close the Brecksville facility, renovate the Wade Park facility, and move the functions of the Brecksville facility to Wade Park. In my discussions with Director Bill Montague, he has agreed to add another important component to this proposal, which is to establish a primary health care clinic in Parma. The end result would not reduce hospital beds.

The reason to have a primary care health clinic in Parma is to increase access to basic health care services for veterans in that area. A significant proportion of the veterans in Northeast Ohio reside in Parma. For basic medical needs and appointments, it only makes sense to locate a health facility where it is most convenient.

I believe that the proposed addition to the Wade Park Hospital has the potential to be of great benefit to future patients. According to the proposal, current gaps in primary care, specialty care and inpatient medicine will be solved. The consolidated hospital will perform more efficient processing of veterans benefit claims that involve medical support. New rooms will be more comfortable for nursing home and mental health patients. I am working in Congress to make sure that appropriate funds are made available for veterans health care, both in terms of services and capital improvements.

In addition to the capital-intensive side of the consolidation proposal, there are other important issues related to the provision of health care, such as the status of employees. It is my hope that the employment situation for employees at Brecksville will be maintained or improved when the consolidation is complete. As the plans progress, we would expect to see a personnel plan that provides detail about the transfer of jobs. This plan should address anticipated job loss, if any, early retirement options, alternate job options and efforts to maintain pay scale if transfers to lower level positions occur.

I urge the CARES commission and others involved in the consolidation proposal to be responsive to employee requests for an improved workplace. Employees would like to have a structure of advancement in place, such as the federal employee system where employees can move up from grade to grade in order to improve their positions and pay. Union representatives



request sufficient office space for private meetings with individual union members to discuss workplace issues.

All of these issues have been relevant to the assumption that the consolidation will move forward. There are, however, current issues at Wade Park that should be addressed before consolidation, and if there are not, will only grow worse.

First, there must be sufficient medical staff on duty. Many areas of health care are experiencing shortages in nursing care staff, and this problem is not limited to the Veterans Administration's health facilities. Fewer employees are being asked to handle a growing workload. Nurses and other patient care employees have voiced concern that insufficient staffing is causing overworking and higher stress levels. These are just the first indicators of the dangers that understaffing can cause. Insufficient staffing levels lead to increased medical errors, diminished quality of care and even increased patient mortality levels. As we look toward increasing the size of the Wade Park Hospital, it may be time to re-establish appropriate staffing levels for employees involved in patient care.

Second, the available parking at Wade Park Hospital is insufficient. As the number of employees, patients and visitors grow, this shortage will become even worse. There must be plans for additional parking to accommodate more employees and patients.

I appreciate the opportunity to submit concerns at today's hearing and look forward to continued involvement in the CARES process as it moves forward.

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TIM RYAN
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COMMITTEE ON
EDUCATION & THE
WORKFORCE

COMMITTEE ON
ARMED SERVICES

COMMITTEE ON
VETERANS AFFAIRS

August 12, 2003

Richard E. Larson
Executive Director
CARES Commission
810 Vermont Ave. NW
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“Comments”

Dear Mr. Larson:

The enclosed remarks are to be submitted to the permanent record for the public hearing of 8-12-03 on the realignment of the Brecksville VA Hospital in Cleveland, OH at the request of US Congressman Tim Ryan.

Sincerely,


Tim Ryan
Member of Congress

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TIM RYAN
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HOUSE OF REPRESENTATIVES
17TH DISTRICT, OHIO

**CAPITAL ASSET REALIGNMENT FOR ENHANCED
SERVICES (CARES) HEARING**

**TESTIMONY OF
CONGRESSMAN TIM RYAN
AUGUST 12, 2003**

As a Member of Congress who represents more than 150,000 veterans and who is proud to serve on the House of Representatives Veterans Affairs Committee, I oppose the Department of Veterans' Affairs' (VA) plan to reorganize the health care delivery system for our nation's veterans. The draft proposal, now before the Capital Asset Realignment for Enhancement Services (CARES) Commission, calls for the closing of seven VA hospitals – including the VA facility in Brecksville, Ohio.

I urge the Commission to reject the VA proposal. I believe that the Department of Veterans Affairs' realignment plan is more than just bad policy, it is shameful. The veterans of our nation do not need less access to services, they need and deserve more.

Presently, there is a huge crisis in veterans' medical care. Veterans often wait six months or more to get a medical appointment. Tragically, some die before seeing a doctor. Even the Department of Veterans' Affairs (VA) estimates that there are more 110,000 veterans waiting for initial appointments for non-service related medical problems and, because of excessive delays in getting appropriate and timely treatment, the conditions are often more serious and the costs are significantly greater.

Veterans are feeling betrayed, and sadly, they have every reason to feel that way. On the heels of the largest tax cut in our nation's history, veterans are being told to wait longer, travel further, and pay more for the medical services they were promised. And now, the veterans of our nation and their families are asked to embrace a proposal that will eliminate VA facilities and, in turn, pose greater challenges to getting quality health care. Our veterans deserve better.

For northeastern Ohio, the closing of the Brecksville Veterans' Hospital will force the 48,000 veterans who are served by that facility to go elsewhere. In more immediate terms, it will mean the VA will displace 190 nursing home veterans, 175 homeless veterans and 80 inpatient veterans receiving mental health services. Under the draft

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plan, it remains unclear as to where most of these veterans will go. The proposal calls for the expansion of the Wade Park medical center complex. Yet even if construction funding materialized—which few have confidence will—the consolidation plan fails to recognize that Wade Park is already facing huge and growing patient backlogs. The draft plan also proposes to contract out some nursing home, inpatient mental health care, and homeless services to existing state and local programs. Again, the plan is flawed as it incorrectly assumes that the region has excess capacity. Like most areas of the country, such services and facilities are stretched beyond their limits.

I do not argue with the recommendation to expand the Wade Park VA facility. It makes good sense. With the veterans population expected to increase dramatically in the coming years, additional hospital capacity, more medical services, and greater treatment resources in the greater Cleveland area will be critical. But the expansion of Wade Park should not occur at the expense of the elderly, homeless and mental health patients who depend on the services of Brecksville.

I urge the Commission to hold firm to our nation's commitment to quality and accessible health care for our veterans. The men and women who served honored their commitment. We must do the same.