Prepared Statement

of

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DEPARTMENT OF DEFENSE AND MILITARY SERVICE WOUNDED WARRIOR PROGRAM UPDATE

BEFORE THE

HOUSE ARMED SERVICES COMMITTEE
MILITARY PERSONNEL SUBCOMMITTEE

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Introduction

Chairman Heck, Ranking Member Davis, distinguished Members of the Subcommittee, thank you for the opportunity to appear before you today to discuss the Department of Defense's policies regarding care for our wounded, ill, and injured recovering Service members.

One of the Department of Defense's (DoD) highest priorities is ensuring the Nation's wounded, ill, and injured recovering Service members, their families, and caregivers receive the support they need for recovery, rehabilitation, and reintegration. The great success we have seen over the last thirteen years of war in saving lives on the battlefield has also driven the need for the Department to provide additional services, many directly relating to the support needed by our Service members and their families

To ensureour Recovering Service Members (RSM) receive the right services when they are needed, the Department provides concise policy parameters that allow the Services to deliver consistent, high quality care and support. As part of this mission, the Office of Warrior Care Policy (OWCP) develops specific policies for the Department and provides the oversight of those policies to ensure that execution delivers on both the intent and produces the outcome we need. The policy and oversight areas for OWCP include the Recovery Coordination Program, the Integrated Disability Evaluation System (IDES), the Military Adaptive Sports Program, Operation Warfighter, the Education and Employment Initiative, and the Caregiver Support Program. Each of these is briefly discussed in the sections that follow.

Recovery Coordination Program (RCP)

In 2008, Congress directed DoD to establish the Recovery Coordination Program to better assist Service members across the phases of their recovery process. This program, delivered by each Service using Recovery Care Coordinators (RCCs) and Comprehensive Recovery Plans (CRPs) individualized for each Service member, identifies resources for both the member and the family as they navigate the many transitions of healing and recovery. The Recovery Coordination Program is guided by policy which requires forty hours of standardized training for all non-medical case managers (NMCMs) in order to improve care, management, and transition services. This training includes information on roles, responsibilities, and concepts for developing a CRP. As of October 2014, 449 RCCs are providing services at 237 locations worldwide to support approximately 14,000 Recovering Service Members and all have received the required training. In compliance with policy and verified through oversight, 100 percent of RSMs enrolled in a Wounded Warrior Program have an active CRP. Furthermore, these plans are shared with the VA to ensure a smooth transition of care and services.

Disability Evaluation

In 2007, DoD and the Department of Veterans Affairs (VA) jointly fielded IDES. The IDES became fully operational in October 2011, producing a more transparent process and reducing the gap between separation from military service and receipt of VA disability compensation. While the primary objective of IDES is to determine whether a Service member is physically and mentally fit to perform their military duties, IDES also offers a number of other benefits, including eliminating duplicate disability examinations and ratings, and sharing full medical records between DoD and VA. The Department continuously reviews the IDES process and implements change to improve performance, efficiency and transparency.

The IDES population varies each month, but as of December 2014, approximately 25,500 Service members were enrolled, with several thousand Service members coming into and leaving the system each month. The amount of time Service members wait to receive VA benefits after discharge has decreased significantly, and is currently just 46 days. The IDES process itself is more streamlined as a result of iterative improvements. Currently, the Department is meeting or exceeding all timeliness goals. Furthermore, as of September 2014, 85 percent of Service members completing the IDES process have expressed satisfaction with their IDES experience.

Oversight of RCP and DES

In February 2014, WCP began site assistance visits (SAVs) with the goal of assessing compliance with established policy, including the uniformity and effectiveness of care coordination for RSMs and their families and caregivers provided by RCCs, Army Wounded Warrior (AW2) Advocates, and Navy Non-Medical Case Managers (NMCMs). These visits gauge the care, management, and transition process of RSMs, review RCC roles and responsibilities, and assess RSM and family member experiences with the support provided on each installation. Through the 27 SAVs conducted in FY 2014, WCP identified areas for improvement and best practices In October 2014, WCP formalized a DES Quality Assurance Program (QAP) to standardize disability evaluation quality assurance requirements across the Services. The QAP is designed to assess, monitor, and improve the accuracy and consistency of determinations and decisions made by medical and physical evaluation boards, and to ensure the boards and liaison officers properly perform their duties. WCP is collecting and reporting preliminary data but continues to refine and validate the procedures for the QAP with a view toward full implementation in the fourth quarter of FY 2016. This information will be included in the next Congressional report, scheduled to be delivered in mid-2015.

Military Adaptive Sports Program

MASP provides recreational activities and competitive opportunities to all RSMs to improve their physical and mental quality of life throughout recovery and transition.

Participation in adaptive sports and activities helps RSMs realize their new physical capabilities, which may be beyond what they might have previously thought possible. This experience can build confidence that helps RSMs in other parts of their recovery.

RSMs in MASP participate in activities such as wheelchair basketball, cycling, track & field, yoga, strength conditioning, swimming, golf, sitting volleyball, and archery. In FY 2014, the Services held 79 camps and clinics with approximately 1,500 RSMs participating.

DoD provides subject matter expertise, equipment, and policy guidance to the Services, and works with community-based organizations, non-governmental organizations, and the VA adaptive sports programs. Leaders from the MASP and the VA National Sports Program Office established a monthly working group to share best practices and collaborate on adaptive sports issues affecting our populations. The working group strives to create competitive events for new Veterans who have participated in MASP, incorporate non-traditional adaptive sports or activities such as art, music, and writing, increase VA involvement in MASP events, and increase the use of social media to better promote both programs to participants in both Departments.

Operation Warfighter

OWF assists RSMs' recovery process by placing them in supportive work settings as part of their rehabilitation. Through internship opportunities in the Federal government, the program provides opportunities for resume building, exploring employment interests, and developing job

skills. OWF has worked with the Services to increase RSM participation, resulting in an increase in the number of participants by 14 percent between 2013 and 2014.

Education and Employment Initiative (E2I)

As RSMs begin considering their separation from service, E2I assists them by identifying areas of expertise, matching them to related career or educational opportunities, and supporting successful transitions to education and employment. The Department's strategic partnerships with academic institutions and employers provide a resource for RSMs to hone their skills even if they are unable to perform their regular military duties. Between 2013 and 2014, E2I experienced a 52 percent increase in participation.

Conclusion

The Department continuously evaluates our wounded warrior programs and implements improvements that yield concrete results for wounded, ill, and injured Service members and their families. We are incorporating lessons-learned and best practices to update policies and programs to improve support for RSM and their families. This is an ongoing commitment of the Department and a promise to all those who serve.

Thank you for your support of the brave men and women who serve our Nation, and your dedication to ensuring DoD has the most efficient systems in place to care for wounded, ill, or injured Service members.