

**The Hon. Anthony J. Principi
Secretary of Veterans Affairs
Remarks at National Press Club
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<Introduced by Mike Rhea of Reuters for the NPC Newsmaker Committee>

Thank you, Mr. Rhea, for your kind introduction, and thank you for your services as a Marine. Semper Fi. Good morning, everyone.

Five days from today, America and the world observes the 85th anniversary of the end of World War I -- the war to end all wars.

Nearly five million brave doughboys ensured that the candle of liberty would not be extinguished by the whirlwinds of despotism unleashed in the Balkans in 1914. Fewer than 200 of those World War I veterans survive today.

They are gone, but they are not forgotten. As the poet Stephen Spender wrote:

"What is precious is never to forget...
the names of those who in their lives fought for life,
who wore at their hearts the fire's center.
Born of the sun, they traveled a short while towards the sun,
And left the vivid air signed with their honor."

At one time, November 11 honored only those veterans whose arrival in Europe signaled the beginning of the end of four years of the deadliest warfare the world had yet to see. But the generation who fought and won the first World War was only one of many -- each of whose service to our nation in uniform left the vivid air signed with their honor.

Forty-nine years ago, Congress set aside November 11 as a day to honor not only veterans of the Great War, but all of the 50 million brave men and women who served and sacrificed in America's defense throughout our history. This year marks the 50th observance of "Veterans Day" -- a day to honor and thank all veterans, no matter where they served, for all they did to ensure our nation remains a beacon of freedom to guide the rest of the world.

In every generation throughout our history, America has found young men and women willing to put on the uniform of our country to stand between freedom and tyranny; to take up the sword of justice in defense of freedom of the press and all the liberties that we hold dear; to calm the winds of war and to preserve the peace.

Veterans may differ by gender, race, age, national origin and profession -- but they all share a common love for our great nation: a love great enough to put their lives on the line

-- if need be -- to guarantee the way of life we enjoy today, and to secure that way of life for tomorrow's generations.

The air of freedom every American breathes is signed with the honor of the men and women who have served this nation in uniform, at Argonne, Normandy, Chosin, Khe Sanh, Kuwait, Baghdad. In each of America's struggles, citizen soldiers have emerged from among us to inspire our nation to victory. And in each of those struggles, men and women in uniform stood on the ramparts of freedom between all of our struggles to keep the peace.

The young men and women now staying the course to build a peaceful Iraq, and those now returning to our shores from there and from Afghanistan are the vanguard of a new generation of those who have borne our nation's battles. They will define the course of the twenty-first century -- for the United States, and for the world.

Most of them will return home in good health with the thanks of a grateful nation, having served their combat tours and their duty in an exemplary manner.

But others return home profoundly wounded. Modern body armor and improvements to battlefield medicine -- unlike what I saw in Vietnam -- have saved countless lives in America's new wars. But many still pay a terrible cost for defending freedom.

I have often visited the Walter Reed Army Medical Center and the National Naval Hospital in Bethesda. I have talked with many of these soldiers and Marines. Their courage is every bit as great as that of their grandfathers who scaled the cliffs of Omaha Beach, or raised the Stars and Stripes above Iwo Jima. Their moral fiber is every bit as strong as that of the patriots who endured the elements at Valley Forge with only the glimmer of a dream of a new nation to warm and sustain them.

Caring for the magnificent young men and women who turn to VA for help after their return from battles defines our core mission. I promise them -- I promise America -- the Department of Veterans Affairs will not be found wanting.

In 1970, when I was in Vietnam, the organization that was then called the Veterans Administration convened a blue-ribbon panel to consider the future of veterans' health care. The panel's three-volume report accurately predicted the emerging demand for long term care for our World War II and Korean veterans; the growing demand for outpatient, not inpatient, care; and the increasing needs of my fellow Vietnam veterans.

The panel, unfortunately, made a grave mistake: the same mistake their ancestors made after World War I. They believed that Vietnam, somehow, would be the war to end all wars. They ignored the possibility that new generations of combat-tested veterans would look to VA to smooth their return to civilian life.

When President Bush entrusted me with the responsibility to keep America's promise to our veterans, he did not make the same mistake. He directed me to take whatever steps were necessary to improve VA's health care and our benefits delivery systems.

In a speech to the American Legion during the 2000 campaign, he said: "The veterans health-care system and the claims processing system need to be modernized, so that veterans are well-treated, and claims are handled in a fair and friendly way."

Our system, like any other in government, must live within its budget. And VA's discretionary budget has increased 32 percent over the last three years from \$48 billion to -- soon to be with passage of an appropriations bill I hope is imminent -- \$65 billion. This year, we will treat 1 million more veterans than we did in 2000.

Veterans will make 50 million outpatient visits to our facilities, up from 40 million in the year 2000.

We have added 194 new community based outpatient clinics to our system in the past three years, and we've increased the number of prescriptions filled per year from 86 million to 108 million prescriptions.

And we expect enrollment for VA health care to grow to 7.1 million veterans this year, up from 4.8 million in 2000; 2.3 million had been just a short time ago. In 1998, the VA was only treating about 2.9 million veterans. This year, we're about 5 million veterans.

We are continuing our transformation from a collection of inpatient hospitals often far from a veteran's home -- oftentimes, veterans have had to drive four or five hours to get to a VA medical center -- to a patient-centered health care system with more than 700 outpatient clinics, 1,300 sites nationwide where world-class health care is provided to veterans throughout our nation.

I also continued the previous administration's commitment to a comprehensive 20-year plan to update VA's legacy infrastructure -- our bricks and mortar, if you will -- to meet the needs of 21st Century veterans, to keep VA on the cutting edge of medicine, not the trailing edge of a century gone by. We call that plan CARES, the Capital Asset Realignment for Enhanced Services plan.

Many of our facilities were designed for the hospital-centric health care system of the past. A great expansion took place after World War I in the 1920s and then again, a further expansion of the VA health-care system after World War II in 1946 and 1947, rather than patient-centered modern medicine. To properly care for 21st Century veterans, for the veterans returning from Iraq and Afghanistan and future veterans, VA must be able to respond to the revolutionary advances of modern medicine, including improvements in technology, telemedicine, tele-health, digital radiology, drug therapies, and modalities of treatments.

We need to be mindful of the changing demographics of our veterans population. They are not a static population, but like the rest of America, they are moving and new communities are springing up in different parts of the country, and we need to be adaptive and in those locations as well.

A \$4.6 billion plan to modernize our facilities is now being evaluated by an independent commission I established, and I hope to make a decision on the plan by the end of this year.

While the final plan is likely to call for realignments, it will also provide for better access to more modern facilities. And we will be able to reallocate to veterans' care the \$1 million a day every day that GAO identified as unnecessary spending now maintaining empty buildings.

Today's VA is simultaneously making historic improvements to quality, providing access to care for a record number of patients, and keeping the cost of our care under control. Just weeks ago, the prestigious New England Journal of Medicine editorialized that if the rest of the American medical community followed VA's example, "we could improve quality, reduce harm, slow growth in spending, and free up resources to better meet the needs of those who are underserved."

I am proud of the progress we have made, but clearly we have challenges to meet. To ensure that veterans receive prompt decisions on their disability claims, I revamped our system to eliminate the ordeal of waiting year after year for a decision on their claims. Last year, our inventory for what we call rating-related claims -- those are claims for disability compensation, pension for wartime veterans, low-income, death gratuity -- peaked at 432,000.

Even though we receive, on average, an additional 60,000 new or reopened claims every month of the year, we were able to get the number of cases in our inventory down to 253,000. Today, the number is a little bit higher because the recent decision of the United States Court of Appeals requires us to hold certain decisions for one year, we cannot act upon them. But I am hopeful that that issue will be resolved by the Congress in short order.

A year ago, it took an average of 233 days to process a claim. Today, it takes about 150 days, even though we are deciding our oldest claims first, the ones that have been sitting on someone's desk for year after year, and they don't count against your timeliness until you decide them. I am confident that once we complete the backlog of these older claims, we will reach my goal of never having to take longer than 100 days to decide a man's or woman's claim for disability compensation or pension or other similar kind of claim.

The President also directed me from Day One to work together with Secretary Rumsfeld and the Department of Defense in new and creative ways to meet the needs of men and women making the transition from servicemember, from active-duty, to veteran. He said to the both of us, several times over, "bring the walls down."

VA has learned a great deal from the experiences of previous wars -- and now that troops, both wounded and healthy, are beginning to return home, our knowledge in saving lives and speeding recoveries for the young heroes it is our privilege to serve.

Together, VA and DoD experts are finding ways to move records more efficiently between our two agencies; to share critical medical information electronically, to process benefit claims as if we were, for all intents and purposes, one shared system, and to protect the health of troops stationed in areas where environmental hazards pose a real or possible threat.

I believe we learned a great deal from Vietnam and Agent Orange. We learned again in Desert Storm, Iraq-I. And we're beginning to apply those lessons to the current situation in Iraq and Afghanistan.

Our process did begin long before our war in Iraq -- and today, our joint planning efforts are beginning to break new ground to ensure that servicemembers and veterans -- especially those wounded on the battlefield -- are receiving the highest quality care available anywhere.

Our goals are simple: to ensure that every serviceman and woman returning from combat with a service-related condition receives priority consideration and world class service from my department, and we are working to provide seamless transition from DoD to VA for every separating veteran.

There are many areas where greater cooperation between our two agencies is necessary, and we must continue to identify those areas and make the improvements that benefit the men and women it is our joint responsibility to serve. Don Rumsfeld and I care for the same people. We care for them at different points in their lives.

As we meet together this morning, my staff are on duty full-time at Walter Reed Army Medical Center and the National Naval Medical Center at Bethesda to ensure that wounded or injured servicemembers are enrolled for VA care when they leave the military hospital, whether it be because they are being discharged or because they are going home on convalescent leave.

Our claims representatives visit with newly wounded servicemembers in the hospital, informing them of their benefits -- such as disability compensation, vocational rehabilitation if they choose to go back to school -- for which they are eligible.

And have social workers in the military hospitals helping newly wounded soldiers and sailors and Marines and airmen plan a future course of treatment for their injuries when they get back home in VA hospitals. To my knowledge, this has never been done before. If these heroes are discharged from the service because of their disabilities, we will link them and their medical records up with the VA medical center closest to their home that will continue to provide them with care after their discharge.

VA also has teams of claims representatives and social workers serving Fort Gordon, Georgia; Fort Sam Houston, Texas; Madigan Army Medical Center in Tacoma, Washington; and all key DoD processing points for seriously injured troops.

Each of our medical centers and benefits offices now has a point of contact to work with returning Enduring Freedom and Iraqi Freedom servicemembers and veterans. Many are enrolled in the VA system even before they are discharged from the military. Every VA facility has a point of contact.

We have trained tens of thousands of our hospital employees to treat the anticipated health needs of this new cohort of veterans. We've established two new research centers for the study of war-related illnesses and injuries, and we've developed new clinical practice guidelines to guide our physicians and nurses on how to best restore these heroes to their highest possible levels of functioning.

Men and women who sacrifice limbs in freedom's cause will be well-served by the world's best orthotic and prosthetic laboratories.

Every VA employee has clear guidance: when a wounded or injured veteran of Operation Iraqi Freedom or Operation Enduring Freedom contacts us for care, our question cannot be: Are you still on active duty? Do you have your discharge papers? I simply do not want to hear those kinds of questions.

The only question that should be asked of any man or woman on active duty is, "How can we help you now?" We'll sort out the paperwork later.

We know that young veterans who are injured or become ill in combat have never dealt with VA before -- and that they likely don't understand our procedures or know the benefits available to them. Our regional offices are now calling seriously wounded veterans to help them with their disability claims, with grants to adapt their homes and cars to their disabilities, which we will do for them, and with applications for their home loan, education, vocational rehabilitation or life insurance benefits.

And many disabled veterans are also eligible for our vocational rehabilitation, which is where we will help them learn a new trade or new vocation, send them back to school, pay all their tuition, and a monthly stipend.

To help separating servicemembers receive service-connected disability compensation more quickly than in the past, we have established benefits delivery at discharge programs at 136 military installations around the country. This is to make it more convenient for separating servicemembers to receive the benefits they've earned. VA rating specialists and VA physicians are actually located now on the military base, and a servicemember can literally walk across the street from his barracks or his duty assignment, file a claim for disability compensation, see a physician, and have that claim decided before they receive their DD-214, their discharge papers. They do not have to

wait until after their discharge, find out where their nearest regional office is -- maybe four or five hours away -- go all the way to that regional office, and file a claim and wait six or nine months. They can actually get all this done before they leave active duty, and I think that's the kind of service that they have earned, and we must provide to them.

Let me close with the words of my greatest hero, President Abraham Lincoln. In his State of the Union message for the critical year 1863, he wrote:

"Fellow citizens, we cannot escape history. We of this Congress and this administration will be remembered in spite of ourselves. No personal significance, or insignificance, can spare one or another of us. The fiery trial through which we pass, will light us down, in honor or dishonor, to the latest generation.... We -- even we here -- hold the power, and bear the responsibility... We shall nobly save, or meanly lose, the last best hope of earth."

Today, my department and the 226,000 employees hold the power, and bear the responsibility, to transform the words of countless Veterans Day speeches into the benefits and services our Iraqi Freedom, Enduring Freedom and really all veterans have earned while in service to our great country.

Our department has no greater mission -- no more sacred responsibility -- than to ensure we save the lives of those who have borne the battle for freedom for us and for other people;

No more important duty than to make whole again in mind and body those who are wounded and sick because of their service;

And no more pressing task than to devote all our efforts to enable ill and injured servicemen to resume their lives at the point where they were interrupted when America once again answered Saddam Hussein's challenge to peace.

I served in Vietnam. My wife was a Navy nurse during the Vietnam War. And two of my sons served in Iraq. I care very deeply and very personally about every man and woman who returns to our shores from combat. I want to assure every servicemember returning from the war against terrorism that VA will be there for them when they return to civilian life.

We must succeed if we are to leave as our legacy a vivid air signed with the honor of a redeemed promise to those who serve our nation so well.

For us, as for our troops, failure is unthinkable. Thank you very much.