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2024 IFPTE Issue Brief

118th Congress

Protecting Our Nation's Veterans – It's the Least We Can Do

Overview – Without question, protecting the interests of our veterans should be a bipartisan priority for Congress. From providing quality healthcare through the Veterans Health Administration (VHA) to protecting the benefits that come with the GI bill, to ensuring that Veterans Preference hiring and retention protections stay in place in the federal government, policies that impact the lives of veterans should be addressed fairly and without partisanship.

Restoring Veterans Preference – Many of the veterans who currently work for the federal government are assisting our current active duty servicemembers at the Department of Defense (DOD), serving their fellow veterans at the Department of Veteran Affairs (VA), or in other federal agencies where they utilize their specialized skills and knowledge to continue serving the nation. While Veterans Preference rewards veterans for service, helps veterans transition to civilian life, and draws disciplined, diverse, and experienced people to civil service, the Fiscal Year 2016 (FY16) National Defense Authorization Act (NDAA) included language that watered down Veterans Preference in a reduction-in-force (RIF) situation. While the FY22 NDAA includes a partial remedy by giving the Secretary of Defense the authority to restore Veterans Preference in RIF situations, IFPTE continues to seek repeal of the FY16 NDAA provisions that weaken Veterans Preference.

Funding Veterans Health Services and Reversing Privatization Under VA Choice – In 2014, Congress passed the Veterans Access, Choice, and Accountability Act to address the long wait times veterans faced at some VHA facilities by temporarily allowing veterans to opt for care from private healthcare providers when wait times exceed 30 days. However, instead of reinvesting in the integrated care that VHA provides Congress expanded the privatization of VHA services in 2017 by extending the original sunset on the Choice program. Congress also passed the VA Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSION) Act in 2018, legislation that massively expands the outsourcing and privatization of VHA services. IFPTE objected to these efforts before they became law and continues to support legislative fixes to provide accountability for overbilling and fraud in privatized VHA services, reverse the privatization of VHA services, and rebuild the VHA's capacity.

Ending the Unfair 'Concurrent Receipt' Loophole Denying Veterans of Earned Benefits – Known as "concurrent receipt," Veterans with a VA disability rating below 50% who receive both military retirement income and VA disability compensation are prevented from collecting the entirety of their earned compensation. Specifically, these Veterans have their disability compensation subtracted from their retirement pay, thereby offsetting their ability to receive both retirement and disability income. This is unjust and IFPTE urges Congress to pass legislation to close the 'concurrent receipt' loophole.

Provide Full Collective Bargaining Rights to VA Healthcare Professionals – Veterans Health Administration employees who provide medical care – including physicians, dentists, nurses, nurse practitioners, physician assistants, and other clinical occupations – are currently denied collective bargaining rights. These frontline healthcare employees have a direct understanding of issues like patient care, safe working conditions, and staffing ratios. As the VA expands services and care for toxic exposure illnesses under the recently passed Honoring Our PACT Act, it is more important than ever for VA healthcare workers to have a voice at work and utilize collective bargaining to improve their workplaces and the services they provide to veterans. IFPTE urges Congress to grant VA healthcare professionals full collective bargaining rights. It's not just fair for VA federal employees, it's necessary to ensure high-quality care and services at the VA.

2023 IFPTE Legislative Requests:

- **Pass Bipartisan Legislation Similar to the Retired Pay Restoration Act (H.R. 303, S.1515), sponsored by Rep. Bus Bilirakis (R-FL) and Sen. John Tester (D-MT).** This bill would permit retired members of the Armed Forces who have a service-connected disability rated less than 50% to receive both disability compensation from the Department of Veterans Affairs for their disability and retirement pay for their military service or combat-related special compensation.

- **Include Language in House and Senate FY25 National Defense Authorization Acts (NDAA) to Provide Retirement Equity to Graduates of the United States Merchant Marine Academy.** The 2008 NDAA correctly included language (USC Title 11, Section 1115) that allows for federal employee retirement service credit for service as a cadet or midshipman at the nation's four service academies – Air Force Academy, Military Academy, Coast Guard Academy, and Naval Academy. However, one group of Academy graduates was not included – those who attended the USMMA.

- **Close the Tricare Loophole That Unfairly Limits Veterans' Health Savings Options.** Pass legislation, similar to the Veterans TRICARE Choice Act (H.R. 5458 in the 115th Congress) to close the TRICARE loophole which currently prevents veterans from concurrently participating in TRICARE and health savings accounts.

- **Oppose All Efforts to Privatize VA Services and Operations Under the VA MISSION Act of 2018.** The VA MISSION Act permitted the privatization of veteran healthcare services by expanding the VA Choice program. This law has already shifted federal resources from VHA facilities to private health facilities at a higher cost, without accountability and without providing better services. A [2021 VA Inspector General report](#) found a 500% increase in payments to private-sector providers and noted that in 2020, at least 37,900 out of a community of 218,000 care providers engaged in the “improper practice of assigning an inaccurate billing code to a medical procedure to increase reimbursement.” Before the VA MISSION Act's passage, the VA Choice program needed accountability as two contractors, TriWest and HealthNet, overcharged the government by \$140 million between 2014 and 2017. Poll after poll shows that veterans prefer the coordinated care provided to them at VA-run hospitals. In the last two years, Congress has started to abandon the pro-privatization premise behind the VA MISSION Act. Thus, the Senate Veterans Affairs Committee agreed to not confirm commission members and abandon the VA Asset and Infrastructure Review (AIR) commission, which was tasked with fast-tracking the closure of VA facilities and the privatization of VA services. Congress should defund and repeal the MISSION Act's provisions that privatize the VA and oppose efforts to codify the VA community access standards that have resulted in lower quality of care at high-cost private providers.

- **Reintroduce and Pass the VA Employee Fairness Act to Give Collective Bargaining Rights to VA Nurses, Doctors, and Healthcare Professionals.** The VA Employee Fairness Act extends the same Title 5 collective bargaining rights that federal employees at other federal agencies have to VA employees who provide care for patients. This bill (H.R.1948 in the 117th Congress) was passed by the House of Representatives in 2022 with bipartisan support. Congress should pass this legislation as granting collective bargaining will to these VA healthcare professionals will support a collaborative approach to improved quality of care and services at a time when the VA is growing and expanding care for veterans.