The need for respite care cannot be underestimated. A few years ago, my wife, Marie, was the primary care giver for my mother who was dying of brain cancer. We chose to take care of her in our home and my wife was the one who saw to her needs. Consequently, I know of this firsthand because I have been working with Joan McCarthy, a New Jersey resident, who lost her husband, Tom, to bronchiolo alveolar carcinoma in 1981. Tom had served as the navigator on the U.S.S. McKinley which participated in Operation Wig-wam, an underwater atomic test in the Pacific that produced a surge of mist which Tom inhaled. Twelvethirty years later, Tom died of lung cancer, a father and husband who was only in his early forties. Passage of the Veterans Millennium Health Care Act today will add this cancer to the VA’s presumption list and thus ensure that Joan McCarthy and other veterans and their widows receive the compensation which they need and deserve.

I am also proud of this bill’s long-term care provisions for our nation’s veterans. It reflects the months of heavy lifting that the House Veterans’ Affairs Committee has done on this issue as America’s veterans community gets older and consequently needs quality health care.

Another provision which I authored as free standing legislation and is now in the conference report is a respite care provision. For the first time, we are giving the VA the ability to contract out for respite care services. Until now, if a veteran’s care giver, be it his spouse or adult child, needed a short break, their only recourse was to wait for a bed to be made available at either a VA or state nursing home. The extra burden of transporting the veteran almost makes this self-defeating and it is witnessed by the fact that only 232 cases of respite care were provided by the VA during the 1998 fiscal year.

The need for respite care cannot be overstated. According to the Caregiver Assistance Network, family and volunteer caregivers provide 85% of all home care given in the United States. However, our veterans’ caregivers need our help. In a California statewide survey taken by the Family Caregiver Alliance, 58% of the caregivers showed signs of clinical depression. When asked, they responded that their two greatest needs were emotional support and respite care. On average, they are providing 10.5 hours of care per day. Providing the VA with the ability to contract with the nearest nursing home, adult day care center, or finding someone to help the veterans’ home will make a real difference in the day to day quality of life for a veteran and his or her family.

The Veterans Millennium Health Care Act also requires the VA to provide needed nursing home care for veterans who are 70% service-connected or in need of such care for a service-connected condition. It also lifts the VA’s six month limit on adult day health care and it allows the VA to expand the scope of the state home program to encompass all extended care services such as respite care, adult day health care, domiciliary care, and other alternatives to institutional care. It also guarantees emergency care for uninsured veterans and reinstates preferential eligibility for recipients of the Purple Heart. It also requires the VA to establish a policy regarding chiropractic treatment, a provision which I first introduced as legislation during my first term in Congress. And finally, it authorizes payments to the surviving spouses of former POWs who were rated totally disabled due to any service-connected cause for a period of one or more years immediately prior to death.

I urge my colleagues to join me in passing the Veterans Millennium Health Care Act.