

May 26, 2023

Honorable Jack Reed Chairman Senate Armed Services Committee Russell Senate Office Building, Room 228 Washington, D.C. 20510

Honorable Mike Rogers Chairman House Armed Services Committee Rayburn House Office Building, Room 2216 Washington, D.C. 20515 Honorable Roger Wicker Ranking Member Senate Armed Services Committee Senate Russell Office Building, Room 228 Washington, D.C. 20510

Honorable Adam Smith Ranking Member House Armed Services Committee Rayburn House Office Building, Room 2216 Washington, D.C. 20515

Dear Chairs Reed and Rogers, and Ranking Members Wicker and Smith:

As you start your deliberations on the Fiscal Year 2024 National Defense Authorization Act (FY24 NDAA) we ask you to remember the thousands of service members and their families your work will affect - many of those about to embark on another Permanent Changes of Station (PCS). Military families paying more out-of-pocket for their moves. Military families saddled with higher food, fuel, child care and housing costs. Military families struggling to put food on the table.

As you evaluate proposals for changes to pay and benefits, consider the cumulative impact on military families' purchasing power and financial well-being, as well as the effects on the morale and readiness of the all-volunteer force now and in the future.

Please:

- Reject benefit changes and budget proposals that threaten military family financial wellbeing as a way to save money for the government.
- Keep military pay commensurate with service and aligned with private sector wages.
- Provide oversight to ensure recently enacted military health reform efforts enhance military families' access to quality health care and that the costs of increasing military readiness are not passed along to families as cost shares or premiums which will degrade family readiness and potentially retention.

We ask Congress to make improving and sustaining the programs and resources necessary to keep military families ready a national priority.

The United States military is the most capable fighting force in the world. For two decades of war, service members and their families never failed to answer the call, steadfastly sacrificing to protect our Nation – abroad and even now at home. They make these sacrifices trusting that our government will provide them with the tools to keep them ready. Continued national fiscal challenges have left military families confused and concerned about whether the programs and

benefits contributing to their strength, resilience, and readiness will remain available to support them and be flexible enough to address emerging needs. The Department of Defense (DoD) must provide the level of programs and resources necessary to meet this standard. Service members and their families have kept trust with America through 20 years of war with multiple deployments and separations. Unfortunately, that trust continues to be tested.

Military Family Food Insecurity

It's widely understood that the many challenges of military life – including frequent moves, high levels of spouse unemployment, and housing costs that are out of step with Basic Allowance for Housing (BAH) – can result in financial instability for families. However, the notion that this financial stress can lead to military families experiencing food insecurity can be difficult to accept. Yet the evidence is growing. Food pantries operate on or near virtually every military installation. In 2021, 14 percent of applicants to NMFA's child care fee relief programs reported visiting a food pantry or charitable food distribution site in the previous year. Numerous surveys of military families by both nonprofit organizations and DoD itself show that large numbers of military families worry about not being able to put healthy food on the table.

We can all agree that even one military family struggling with food insecurity is one family too many. Thus, we are grateful that leaders in both Congress and DoD have recognized the financial challenges facing military families and are taking steps to address the problem. Secretary Austin's November 2021 directive on financial instability in the military was an important acknowledgement of the problem by senior leadership. We especially appreciate that he directed the Services to ensure commanders are trained to recognize and address food insecurity.

We also appreciate that Congress included a Basic Needs Allowance (BNA) in the FY22 NDAA and included important improvements to the program the following year. The allowance, which would provide a targeted pay boost to families whose incomes and household sizes place them below 150 percent of federal poverty guidelines, should provide valuable assistance to the most vulnerable military families. However, DoD's implementation of the program has severely limited its reach. Specifically, DoD's decision to include the entire BAH in determining eligibility for BNA except in a few select locations designated as "high cost" has led to a very small number of families qualifying for the allowance. In addition, the application process is cumbersome and a deterrent to service members. *We ask Congress to take the following steps to improve implementation of the Basic Needs Allowance:*

- Exclude all BAH in determining eligibility for BNA. Excluding only a portion of BAH in eligibility calculations risks putting this much-needed pay boost out of some struggling families' reach.
- Make BNA an "opt-out." Because stigma still surrounds the issue of food insecurity, service members are unlikely to proactively seek out BNA. DoD should identify service members who may qualify for the BNA based on income and number of dependents and alert them that they may be eligible.

If BNA is designed and implemented well, it will yield important information about military families' financial well-being. Congress gave DoD significant latitude in the design and implementation of the BNA. We ask for close oversight to ensure that the program fulfills Congressional intent to assist struggling military families.

The Basic Needs Allowance is an important first step in addressing military family food insecurity. However, our Association believes that the ultimate solution is expanding military families' access to federal nutrition support programs such as the national school meals program, the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and, especially, the Supplemental Nutrition Assistance Program (SNAP). We ask Congress to review and remove barriers that prevent military families from accessing these important programs; specifically, to exclude BAH when determining eligibility for federal nutrition assistance programs. Military families should be able to access the same federal assistance programs that their civilian neighbors benefit from.

Restore Basic Allowance for Housing

BAH — previously intended to cover 100 percent of housing and utility costs — was dropped to 95 percent in 2015. This cost-share for housing, initiated by DoD with congressional permission, has not been without critics, most notably the Government Accountability Office.

But what seemed feasible to leaders in 2015 could not survive the pandemic. Layer on top an unstable housing market and inflation, while military families continue to move every 2-3 years, and you have a perfect storm for families now on the financial edge.

While the increase in 2023 BAH rates was a significant step forward, it didn't close the gap this cost-share created. Too many families continue to struggle with no relief in sight. *We urge Congress to permanently restore service members' housing allowance to the full 100 percent making an immediate, tangible difference for families struggling to make ends meet.*

Spouse Employment

Spouse employment and education support are critical components of military family readiness and overall financial wellbeing. Much like their civilian counterparts, many military families rely on two incomes to help make ends meet. However, military spouses face barriers hindering their educational pursuits and career progression, due largely to challenges associated with the military lifestyle. Additionally, military spouses continue to face significantly lower earnings as well as high levels of underemployment, greatly impacting their families' financial stability.¹

In recent years we are gratified that Congress, DoD, the White House, and individual states have all taken steps to lessen the burden of active duty members' military careers on military spouses' educational and career ambitions. We fully support these initiatives, including DoD's Spouse Education and Career Opportunities (SECO) portfolio, which provides educational funding for select military spouses through the My Career Advancement Account (MyCAA), career counseling, employment support, and the DoD DSLO state-level initiatives. Additionally, we appreciate that Congress recognizes the valuable path to finding meaningful employment that workforce fellowships can offer by providing funding for a three-year pilot program of paid fellowships for military spouses.

Even with the financial and programmatic support in recent years, military spouses continue to face an extremely high unemployment rate of more than 20 percent over the past decade–largely due to frequent military movements. This impacts military family financial stability and overall wellbeing. While the unemployment rate among military spouses is assessed by many non-profit organizations and the DoD via the biannual Active Duty Spouse Survey (ADSS), *we ask Congress to put into place policies that will allow for the Bureau of Labor Statistics to track and report on*

¹ https://www.dol.gov/sites/dolgov/files/WB/mib/WB-MilSpouse-factsheet.pdf

military spouse unemployment rates. The ADSS data is informative, but it does not show the type of data that would allow for the most timely and responsive solutions. Quarterly fluctuations and regional differences are not tracked in the ADSS. This type of information is important as we are looking at ways to responsively and proactively solve the military spouse unemployment problem.

The DoD, through the Defense Eligibility Enrollment System (DEERS), is the only entity that houses the data needed as the foundation for this type of reporting. There is likely a need for appropriate data sharing agreements between and among DoD, the Bureau of Labor Statistics, and the Social Security Administration in order to have regular reporting on the military spouse unemployment rate. Without more regular and nuanced unemployment rate reporting, it is difficult to not only target solutions and funding, but also to understand the impact of the resources Congress appropriates. In the absence of the BLS reporting on the unemployment rate of military spouses, some states are working to find ways to assess the unemployment rate to help ensure their efforts to address the unemployment rate are targeted and effective. There is little to no coordination on these efforts, and the result is that there will be inconsistent methodologies, resulting in more data that doesn't necessarily give sound comparative data state-to-state. Pursuing a reliable method of tracking military spouse unemployment through the BLS is a top priority of our Association and one that we recognize will take coordination with and among many stakeholders.

Regarding the importance of leveraging state efforts to support military spouse employment needs, we also appreciate recent legislative action that has resulted in creating more occupational interstate compacts to ease the burden on military spouses employed in an occupation that requires a license or certification. Our Association considers this the gold standard for license reciprocity of military spouses.

While we understand that tax policy is outside of the committees' jurisdictions, we encourage Congress to create a target group for military spouses within the Work Opportunity Tax Credit (WOTC), an existing tax credit program designed to aid certain population groups that face significant barriers to employment. Adding military spouses as a target group under WOTC is an important piece of the puzzle to solving this decades-long problem. *We urge Congress to pass the Military Spouse Hiring Act (H.R.1277/S. 596) to incentivize businesses to hire military spouses - an important, necessary step toward ensuring this community has employment opportunities throughout the nation.*

Child Care

Child care issues can influence a family's decision to stay in the military and continue to be a barrier to spouse employment. Military-specific requirements such as frequent relocations, non-traditional working hours, and deployment can make securing and maintaining child care a challenge for military families.

The DoD's 2021 Active-Duty Spouses Survey (ADSS) indicates the military spouse unemployment rate sits at 21 percent, statistically unchanged since 2015, while the civilian unemployment rate declined from 5.7 percent in January 2015 to 3.4 percent in January 2023. Having children increased the odds of unemployment among military spouses, with 45 percent citing caring for children at home as the primary reason.

We were pleased that Congress has recognized the importance of this issue as one that impacts readiness and retention by affecting the financial stability of a family and a spouse's ability to seek

employment. The inclusion of several provisions in the FY23 NDAA will improve child care access to military families. However, more can be done.

The FY23 NDAA included a requirement for each Service secretary to promote "certain child care assistance." While no specifics are given, there is potential for this to become a valuable tool for the Services in helping families understand what options are available to them. An office or specialist knowledgeable about the existing child care programs assigned to educating and guiding families is one way this could be achieved. Such an office could provide resources and empower families to understand what is available at each duty station, while sharing best practices for selecting providers. We encourage Congress to expand this requirement to establish a "child care specialist" for each Service dedicated to promoting and educating families on the variety of child care options offered by DoD.

We were encouraged by the other provisions in the FY23 NDAA, which included:

- A requirement for the Service secretaries to publicly provide quarterly updates on the Military Child Care in Your Neighborhood/Plus program by state, zip code, and Service. Families have long requested a registry or similar form of public listing for community care options. We are pleased at the continued expansion of the MCCYN program and ask that the program be expanded to more regions to increase the number of eligible providers.
- Standardizing a minimum 50 percent discount for the first child of a worker at a Child Development Center (CDC), incentivizing providers to maintain employment with DoD's Child and Youth Programs. We will continue to advocate that DoD offer competitive salaries commensurate with the pay and benefits child care providers receive as civilian employees.
- A pilot program to reimburse service members for childcare costs due to a recent PCS.
- A 2-year pilot program to hire special needs coordinators at CDCs with high numbers of EFMP-enrolled school-age dependents.
- Building of additional Child Development Centers in certain locations and expansion to existing facilities.

Service members need access to as many options as possible to access affordable child care. While there is no silver bullet to solving this crisis, our Association strongly believes the following solutions will increase capacity and ease the financial burden of child care costs.

- **Fund Public Private Partnerships to Provide Community Childcare**: The Services should enter into agreements with preexisting child care providers to reserve spots for military families. Several of the Services are entering into or considering commercial leasing projects with private facilities outside the installation to increase capacity for military child care. Leasing private property means that CDCs don't have to compete for military construction funds, can increase capacity in a short period of time and reduce cost compared to building new infrastructure, hire military spouses, and contribute to the local economy.
- Increase Funding and Expand eligibility for Fee Assistance Program: The child care fee assistance program funded by the Services and administered by Child Care Aware of America is an innovative, effective approach to the problem of insufficient child care availability on base. The program helps offset the cost of child care in the civilian community, helping families access high-quality care at a more affordable price. The MCCYN-Plus program should be expanded to more regions to increase the number of

eligible providers that are quality rated by their state Quality Rating and Improvement System (QRIS). We also request a report or survey of families currently utilizing the MCCYN-Plus program to determine its effectiveness and frequency of use.

- *Expand the Child Care in Your Home Pilot Program*: Military families need options, including fee assistance to care for children in their own homes. The Child Care in Your Home (CCYH) Fee Assistance Program should be expanded to include more regions and expand eligible providers to include non-U.S. citizens. This care is extremely helpful for service members on shift work, military exercises, and long hours demanded outside the normal child development center operating hours. We also ask that the background check process be streamlined in order to have providers be approved faster and allow families to establish the in-home child care as soon as possible.
- *Report on the availability of Family Child Care (FCC) providers:* We urge Congress to consider a report detailing the availability of FCCs per installation or region as well as the portability of FCC licenses. While FCCs make up the smallest percentage of available child care options, they are an important tool not just for infant and toddler care but for spouse employment. Currently, not every state allows for the portability of the license. In states which do have laws and regulations permitting this, it can take anywhere between 60-90 days or up to several months to recertify for an FCC, a length of time which can be burdensome to the provider and discourage a spouse from the process. More information on this issue is needed in order to determine what steps states and installations can take to improve the portability of an FCC license.

We are pleased that Secretary Austin's March 22 announcement included a plan to implement Universal Pre-Kindergarten at DoD Education Activity (DoDEA) Schools. Current overseas Pre -K programs are unable to accommodate 80 percent of the eligible population of four-year-olds. Parents do not have access to similar early childhood education (ECE) options which are available to their counterparts in the continental U.S. The lack of Pre-K services impacts the number of children at installation Child Development Centers (CDCs), many of which have limited space and long waitlists, and in some cases can be a barrier to spouse employment. Establishing a Universal Pre-K program at DoDEA OCONUS locations would allow children to reap the benefits of ECEs help relieve the overburdened CDCs, and offer options for child care/child education for families currently not utilizing the child development programs overseas, allowing for work flexibility for service members and spouse employment.

We urge Congress to provide funding and appropriations for the establishment of the Universal Pre-K program at DoDEA Schools. We ask that this not negatively impact funding to the Child and Youth programs, specifically the CDCs which provide important wraparound and summertime care.

The Military Health System and the TRICARE Benefit

Ensuring that military families have access to high-quality, low-cost health care is one of our Association's top priorities. Military families deserve health coverage that is comparable to that offered under top commercial plans. However, too often TRICARE falls short. *To help ensure military families can receive the right care from the right provider at the right time, we ask Congress to:*

- Improve access to mental and behavioral health care.
- Reduce copays for mental health visits and speech, physical and occupational therapy.

- Align TRICARE with commercial insurance plans by automatically covering young adult dependents up to the age of 26, as required by the Affordable Care Act.
- Ensure the TRICARE pharmacy network can meet beneficiaries' needs, including those in rural communities, residents of long-term care facilities, and individuals with specialty pharmacy needs.

Access to Mental and Behavioral Health Care

Military families continue to report difficulty finding mental and behavioral health care, particularly for their children. We understand that the shortage of mental health care providers is a national problem and not limited to the military community. We appreciate that Congress has recognized the issue and taken steps in past NDAAs to increase the number of mental and behavioral health providers within the Military Health System (MHS). We are also pleased that the Defense Health Agency (DHA) has moved to make telemedicine more available to beneficiaries. We are hopeful that in the long term, those initiatives will address the surging demand for mental health care among service members and military families. However, in the short-term families continue to struggle.

Our 2022 Military Teen Experience survey reflects the scope of the problem. We surveyed over 2,000 military-connected teens between the ages of 13 and 19. Using the validated Warwick-Edinburgh Mental Well-Being Scale, we asked teens to assess their mental well-being. The results were sobering. Twenty-eight percent reported low mental well-being, while another 63 percent reported moderate well-being.²

We recognize that mental health challenges are not limited to the military community. Indeed, the crisis in children's mental health is so acute that the Children's Hospital Association, the American Academy of Pediatrics and the American Academy of Child and Adolescent Psychiatry have declared it a "national emergency." However, there is reason to believe that the challenges of military life can exacerbate teens' mental health concerns. Frequent military-ordered moves can make it difficult to connect with peers. They must often cope with the deployment of a parent; many are caring for service member parents who suffer from visible or invisible wounds of war.

While the increased need for mental or behavioral health care is not limited to the military community, certain TRICARE policies add to access issues faced by military families. *We urge Congress to address the following issues preventing military families from accessing mental and behavioral health care:*

- **Provider directories**: The provider directories maintained by the Managed Care Support Contractors (MCSC) are notoriously inaccurate and out of date, making it difficult for beneficiaries to identify a network provider. In addition, the entries typically don't include information about provider specialties – for example, whether a provider treats children and teens in addition to adults. This is especially problematic in the mental health field which has multiple types of providers and specializations, contributing to families' confusion.
- **Reimbursement rates**: It is not unusual for families to report that they are unable to find a mental health provider who accepts TRICARE. In part, this reflects a growing preference among mental health professionals to operate on a cash basis. However, TRICARE's low

² The National Military Family Association and Bloom: The Military Teen Experience Survey, 2022 Findings and Insights.

reimbursement rates and cumbersome policies make it difficult for providers who do want to enter the network.

• **MCSC policies**: Given the well documented issues with access to mental health care, we have been concerned by anecdotal reports of MCSCs refusing providers who wish to join the TRICARE network or requiring those already in-network to accept lower reimbursement rates. Because beneficiaries may seek mental health care without a referral from their primary care manager, there is little data on how many are unable to identify a network provider and obtain care within access standards. *We ask Congress to ensure that the MCSCs build provider networks with adequate capacity to meet beneficiaries' needs.*

Eating disorders are among the most common behavioral health conditions and are some of the most difficult to treat. There is <u>evidence</u> that the military population is more susceptible to these disorders than the general population. We appreciate that the FY22 NDAA included provisions to expand coverage of treatment for eating disorders for TRICARE beneficiaries. However, the DHA has yet to fully implement these provisions. In addition, retirees and their families were excluded from this expanded coverage. *We ask Congress direct DHA to fully implement the provisions of the SERVE Act and expand coverage of life-saving treatment for eating disorders to all TRICARE beneficiaries, regardless of age or sponsor status.*

Therapy co-pays

The reforms to the MHS directed by the FY17 NDAA included a shift from cost shares to fixed dollar copays for TRICARE services. We appreciate that fixed dollar copays allow beneficiaries to know in advance how much a covered service will cost. We also understand that this system is easier for both providers and the MCSCs to administer. However, the shift to fixed dollar copays has come with an unintended consequence: high out-of-pocket costs for therapies and mental health treatment.

The TRICARE copay construct categorizes mental health outpatient visits, as well as physical, speech and occupational therapies, as specialty care. This results in copays that are excessively high for relatively low-cost visits. For example, Group A Active Duty family members are charged \$37 per specialty care visit, including mental health treatment. For Group A Retired family members, the cost is \$49 per specialty care visit. This is not only a significant increase compared to 2017, but TRICARE copays are also higher than out-of-pocket costs for mental health care for FEHBP beneficiaries. Because therapies and mental health treatment typically require multiple visits with a provider, the out-of-pocket cost for beneficiaries can add up quickly.

We are concerned that high out-of-pocket costs are leading some beneficiaries to defer needed care. There is some evidence that this is the case. In a March 28, 2022 Report to Congress³, the Department acknowledged that retirees' utilization of mental health care decreased following the copay increases. Utilization of physical, speech and occupational therapies decreased across all beneficiary groups. In addition, when it launched the lower back pain physical therapy pilot in 2020, which allows beneficiaries in selected locations to receive physical therapy for back pain with no copay, DHA noted that PT utilization was lower in categories of beneficiaries with higher out-of-pocket costs – i.e., Select beneficiaries and retirees.

It is counterproductive for the TRICARE fee construct to dissuade beneficiaries from seeking lowcost treatment, as in many cases that will ultimately result in the need for more intensive, highercost care. Commercial insurance plans recognize this reality; value-based insurance design is built

³ Impact of Mental Health Copays Report, March 28, 2022, posted on Health.mil

on the principle of reducing cost-related non-adherence. Paradoxically, the current TRICARE policy runs counter to that principle. We are particularly concerned that high copays may be deterring military families from obtaining needed mental and behavioral health care.

We urge DoD and/or Congress to establish more reasonable copays for mental health visits and physical, speech and occupational therapies to bring them in line with high quality commercial plans and reduce the cost barrier to seeking care.

TRICARE Young Adult

While the Affordable Care Act requires employer-based insurance to cover beneficiaries' young adult children up to age 26 at no additional cost, TRICARE is not bound by this requirement. Instead, since 2011 TRICARE has offered the premium-based TRICARE Young Adult program to young adult dependents between the ages of 21 (23 if enrolled in school) and 26. Under statute, TRICARE Young Adult must operate at no cost to the government, meaning that young adult enrollees and their families must bear the entire cost. Again, commercial employer-based insurance plans automatically cover young adult dependents up to age 26 – a clear and unacceptable inequity for military families.

To make matters worse, the premiums for TRICARE Young Adult have skyrocketed. In 2023 the monthly premium for TRICARE Young Adult Prime is \$570 per month. For young people whose childhoods were marked by repeated military-ordered moves and frequent separation from their service member parent, this cost is an additional blow. We suspect that for many young people and their families, the cost is too much, forcing them to forego health insurance entirely. *We urge Congress to pass the Health Care Fairness for Military Families Act (H.R. 1045/ S. 956), which would eliminate TRICARE Young Adult and allow young adults to remain covered by their parents' TRICARE plan up to age 26.*

Retail Pharmacy Network

In October 2022, as a cost-cutting measure and with the approval of the DHA, ExpressScripts International (ESI) cut more than 15,000 independent pharmacies from the TRICARE retail pharmacy network. Following an outcry from beneficiaries and concerned inquiries by Members of Congress, ESI moved to restore several thousand pharmacies to the network. We appreciate that ESI took this step, as the original round of cuts still placed the network within the standards mandated by the TPharm5 contract. However, we continue to have concerns about the network's ability to meet beneficiaries' needs, particularly those in rural areas, residents of long-term care facilities, and patients with specialty pharmacy needs.

DHA and ESI have pointed to the number of pharmacies in the network and average drive times as evidence that the network is adequate. While we agree these are important metrics, we think it is equally important to analyze the services available through the pharmacy network. The presence of a retail pharmacy around the corner doesn't help a cancer patient who can't find an in-network specialty pharmacy to fill their chemotherapy prescription. We have asked Congress to direct an analysis of the TPharm5 retail pharmacy network in comparison to TPharm4's to determine whether and how the capabilities of the network have changed.

Spouse Education

We are pleased that the DoD recently announced in the Strengthening Our Support for Service Members and Their Families memo that it is expanding MyCAA eligibility to include military spouses of service members in ranks 0-3 and E-6.⁴ *We also urge Congress to allow MyCAA to fund all undergraduate degrees.* This programmatic element requires congressional authorization and is not something DoD can implement on its own, though it would very likely benefit military families. A 2018 RAND report entitled *Early Evidence from the My Career Advancement Account Scholarship for Military Spouses* found that MyCAA is associated with not only employment but increased earnings for the military spouses who take advantage of the scholarship.

The 2018 RAND report noted that, according to the DoD's Active Duty Spouses Surveys from 2013 and 2015, military spouses with fewer years of education were more likely to be unemployed than those with more education.⁵ This is very much in alignment with what national level data reports for the workforce at large, with college graduates being "half as likely to be unemployed as their peers who only have a high school degree," and earnings of those with a bachelor's degree are "84 percent higher than those whose highest degree is a high school diploma."⁶

Grow Our Own

As military families struggle to cope with the effects of 20 years of war, we are seeing an increasing demand for mental health services within our families and community. Unfortunately, access to high-quality care is limited. The shortage of mental health professionals nationally is mirrored in the military community, and it is even greater at military installations in remote areas. We believe our Nation must prevent, diagnose, and treat the mental health professionals, doing so will require families. In the face of a nationwide shortage of mental health professionals, doing so will require innovative solutions and strategic public-private partnerships and the ongoing engagement of Congress, DoD, the VA, and other organizations.

One of our Association's top priorities is to ensure adequate access to mental and behavioral health providers who are attuned to the unique stressors of military life for service members and their families who have endured years of repeated deployments, long separations, and possible injuries or illnesses. We support efforts to educate and employ military spouses as professionals in these fields.

Since 2004, NMFA's military spouse scholarship and professional funds program has had over 134,000 applicants and awarded more than \$8.2 million in funds to more than 8,260 applicants.

Many of our military spouse recipients pursuing careers in mental health fields intend to serve military families. Helping these spouses overcome obstacles and pursue their careers has the dual benefit of assisting the individual spouse and family while addressing the shortage of mental health

⁶ Association of Public and Land Grant Universities. (n.d.) *How does a college degree improve graduates' employment and earnings potential?* <u>https://www.aplu.org/our-work/4-policy-and-advocacy/publicuvalues/employment-</u>

⁴ U.S. Department of Defense. (2023, March 22). DOD Announces Six New Measures to Enhance Well-Being of Military Force and Their Families [Press Release].

https://www.defense.gov/News/Releases/Release/Article/3338023/dod-announces-six-new-measures-toenhance-well-being-of-military-force-and-thei/

⁵ Miller, L., Knapp, D., Best, K., Friedman, E., Gonzalez, G., Totten, M., Wenger, J., Trail, T., Posard, M., and Amaral, E. (2018). Early Evidence from the My Career Advancement Account Scholarship for Military Spouses: Work, Earnings, and Retention. RAND Corporation. https://www.rand.org/pubs/research_briefs/RB9965.html.

earnings/#:~:text=Typical%20earnings%20for%20bachelor's%20degree,million%20more%20over%20their%20lifeti me.

providers in the military community. However, these spouses face obstacles due to the unique challenges of the military lifestyle. One scholarship recipient wrote:

Despite maintaining a successful career and being licensed in two other states and having years of experience my family was still faced with several thousand dollars' worth of expenses, not including the seven months of wages lost while waiting for the licensure paperwork to be approved by the state's licensing board. My family and I are very thankful for this scholarship. Because of your scholarship I am able to continue supporting my family financially as well as provide mental health services to both active military and former members of the Armed Forces.

One of the many challenges that these spouses highlight is that of obtaining supervision hours- not only the sheer number of hours spread over years that are likely to be interrupted by a PCS, but also the cost associated with accumulating hours. One scholarship applicant writes, "The cost of each individual hour is \$70. With this financial support, I would be able to accumulate hours at a faster pace." Another spouse posted on our Association's Mental Health Professionals Network page about her experience transferring supervision hours from one state to another:

I moved from states that did not allow for transfer of supervision hours, so I started over and over and over again. I'd get close to finishing my hours, and then we'd move, and I'd have to start over again. After three times, my husband made some changes to his service so we could stay in the most recent location long enough for me to get my hours and that's the only reason I was able to do it. Unfortunately, the next move is to CA and since that's a state that does its own thing, now I'll have to take a bunch of classes and more exams to have my LCSW transferred. The challenges for military spouses never end.

In recognizing this financial strain, we offer scholarship funds to be used toward supervision hours in addition to licensure and certification costs, and we are encouraged that the Department of Veterans Affairs (VA) has a program in place that provides supervision to employees pursuing a career in mental health. Professions in this field include psychologists, social workers, professional mental health counselors, and marriage and family therapists. We encourage other federal entities, such as DoD, to explore ways to provide supervision to employees pursuing careers in the mental health field.

We offer the following recommendations for Congress to consider:

- Facilitate streamlined paths to obtaining supervision, licensure, and employment for military spouses and veterans in the mental health field when they work with service members and families; and
- Require DHA to report on the feasibility of implementing an agency policy aligned with the provisions of Veteran's Health Administration (VHA) Directive 1027 related to the supervision of psychologists, social workers, professional mental health counselors, and marriage and family therapists preparing for licensure; and
- Expand eligibility for non-medical counselors employed by the federal government to transfer a license in good standing across state lines to help fill gaps in mental health care.

Military Children's Education

Continuity in education is especially critical for military-connected children who experience disruptions in learning due to frequent moves associated with their service member parent. A military-connected student can expect to attend six or more schools before their senior year of high school. Ensuring these children have high and consistent education standards is important for military families during each PCS transition.

Public school districts serving large numbers of military-connected children rely on annual Impact Aid funding from the Department of Education (ED) to help offset lost property tax revenue due to federal property, like military installations, being located inside the school district. The federal government doesn't pay local property taxes, the major funding source for school districts, so Congress created the Impact Aid program to compensate districts for lost property tax revenue. Local district leaders determine how to spend the funds based on local needs such as instructional materials, staff, transportation, technology, and facility needs. However, ED Impact Aid continues to be underfunded, limiting education supports and services districts can provide to students. School districts do not receive all the funding for which they qualify under the program's formulas.

All school-aged children attending federally impacted schools benefit from this program. This includes more than 1.6 million military-connected students, approximately 80 percent of whom attend local public schools in their civilian communities. It is incumbent on DoD and the federal government to ensure schools charged with serving military-connected children have the support they need to provide the best possible education.

We urge Congress to pass the bicameral and bipartisan Advancing Toward Impact Aid Full Funding Act (H.R. 1591/S.871) which would establish a five-year glidepath to full funding and ensure meaningful annual increases to school districts.

Department of Defense Impact Aid

The DoD financially supports school districts that serve a significant number of military-connected students through supplemental Impact Aid assistance and Children with Severe Disabilities Funds (CWSD). We appreciate Congress's increased contributions to these funds to 20 million dollars in recent years. However, the legislative requirement for the local education agency (LEAs) to provide data that proves students exceed the per pupil expenditure by three times the state average is burdensome and time-consuming. Because states have different funding mechanisms for calculating expenditures for each student receiving special education services, this additional burden of proof can discourage LEAs who need that funding the most from applying for it.

We urge Congress to review 20 US Code 7703 – "Impact Aid for children with severe disabilities" and amend the language to only require data demonstrating the student exceeds five times the national or state per pupil expenditure. Not only would this amendment offer greater equality for any state applying for CWSD funding, but it eases the burden of proof for the LEA without compromising the integrity of the legislation to provide resources to those military-connected students who have the greatest need for exceptional special education services.

Defense Resale

The commissary and exchange benefits are essential elements of military compensation. With the ongoing issues of food insecurity and inflation, families need the commissary benefit more than ever.

We are pleased to see positive changes in recent years, including expanding eligible patrons, online exchange shopping options, and curbside pick-up options at several commissaries to meet the rising demand for contactless shopping. NMFA is glad to see the industry's efforts to hire military spouses and combat food insecurity. The importance of keeping prices low cannot be overstated when too many service members and their families are struggling to put food on the table.

However, those stationed outside the continental U.S. have consistently experienced shortages of essential grocery items and supply chain issues. *We urge Congress to work with the Defense Commissary Agency (DeCA) to determine what support is needed to address the problems with overseas delivery of commissary goods and services.*

We were pleased that last year the Secretary of Defense Memorandum "Taking Care of Our Service Members and Their Families" included a provision to fully fund the commissaries to cut prices at the register, with the goal of achieving at least 25 percent savings. However, the requirement to reduce reliance on appropriations and ability to re-impose the margin mandate would force higher prices at the commissaries and reduce the benefit for military families. Policy changes with each administration have disrupted the benefit and negatively impact military families. *We urge Congress to update Title X to reflect the current commissary model and ensure that families have access to quality food at the lowest prices.*

Like the commissary, the exchanges play a vital role in the military community, providing essential services and helping fund Morale, Welfare and Recreation (MWR) programs. That funding is especially important as the Services face increased pressure to redirect MWR funds toward readiness. We appreciate Congress continues to appropriate the necessary funds to sustain the exchanges.

We are grateful Congress has shown a commitment to preserving the commissary benefit. We request the continuation of close oversight of business practices and encourage both DeCA and the Service Exchanges to implement innovative approaches to attract patrons and meet the preferences of the modern military family. Any proposal to change the defense resale system must ensure the programs, services, and savings military families rely on are preserved.

If we can be of assistance in your efforts to support service members and their families or if you have any questions or need further information, please contact Kelly Hruska, Director of Government Relations at (703) 509-6646 or <u>KHruska@MilitaryFamily.org</u>.

The National Military Family Association is the leading nonprofit dedicated to serving the families who stand beside the uniform. Since 1969, NMFA has worked to strengthen and protect millions of families through its advocacy and programs. We provide spouse scholarships, camps for military kids, and retreats for families reconnecting after deployment and for the families of the wounded, ill, or injured. NMFA serves the families of the currently serving, retired, wounded, or fallen members of the Army, Navy, Marine Corps, Air Force, Space Force, Coast Guard, and Commissioned Corps of the USPHS and NOAA.

Sincerely,

Besa Pinchotti Executive Director & CEO