March 12, 2025

In support of HB 2537

Dear Chair Rep Tran, Vice-Chairs Grayber and Lewis, and Members of the Committee:

My name is Steve Schneider, and I am a Disabled Combat Veteran. I served as a Navy Fleet Marine Force Corpsman for seven years, spending four of those overseas. I served in a variety of Marine Corps and Navy units, including a shock-trauma field hospital unit (3rd Med BN), Infantry (3/1), and Marine Special Operations command (1st MSOB, A CO, 2nd PLT). As a founding member of Marine Special Operations Battalion, I volunteered to be on the very 'tip of the spear' during which time I deployed globally, engaged in combat and training operations, treated numerous combat casualties, sustained several major blast injuries, and unfortunately lost a handful of people I care about, including to suicide. I was proud to do this work, and was humbled to stand beside so many talented warriors and dedicated service members.

However, this lifestyle takes a toll on anyone. Besides the physical and mental stress and injuries, there is a deeper component to combat and military service. It relates to being exposed and partaking in the toughest and most violent aspects of our human nature, to how these experiences are processed, and to how this affects life after the service. There is a reason why so many of my fellow Combat Veterans- despite being previously high-functioning, motivated, and very capable- come home and struggle with things that at face-value may seem simple. In short, there are burdens that come with these experiences- burdens that we chose to bear on behalf of our nation- but that require hard work to process, understand, and implement in a healthy way into life after military service. This is why we need support systems in place to support this process in a way that actually works for and meets the needs of Veterans.

As we have already come to understand, many Veterans and Service Members struggle with a range of challenges associated with military service and long-term health and social outcomes. You don't have to go to combat or do the hardest jobs to feel the deep impact of military service. In fact, the majority of Veterans who die from suicide are not Combat Veterans. What this means is that there is a lot more going on with the issue of Veteran and Service Member suicide than we are really aware of. The reality is that military service is different for everyone that serves— and we need to honor and respect these lived experiences to better understand these complex dynamics.

For many, transitioning from active duty- which essentially comprises a society separate from the civilian with many sub-groups within- is a huge challenge. Add to this the

injuries, traumas, and a host of other issues and it is easy to see why many Veterans struggle to adjust and thrive after separating from service.

Just like any population, when we really look at what is going on and think about viable solutions, we need to consider the basics and fundamentals of what provides stability in our society. Like anyone, Veterans want to have enough money, they want a good place to live, to eat a good meal, and certainly- safety and wellbeing for their family and friends. They want a sense of purpose and a place to call home. They also need quality healthcare and access to certain services that take into account the diverse needs and often complex health issues Veterans have. In short, suicide prevention requires an 'and/also' approach- with strong, smart efforts at all levels of society.

When looking at the most high-impact areas we need to always keep the user experience, or the actual experience of the individual Veteran, centered. For someone struggling with complex health issues, such as TBI and PTSD, it's a huge challenge to self-advocate and navigate confusing forms and websites. This is why we need to close gaps in access to healthcare—we need to make it as simple and easy as possible for Veterans to learn about, sign up, connect, and access the healthcare and other services they need to thrive. This includes providing options that meet their actual needs.

Background of this issue:

According to the most recent data from the U.S. Department of Veterans Affairs, Veteran and Service Member suicide rates are at a 20-year-high. In Oregon alone, 139 Veterans* died by suicide in 2021 (most recent year available), a rate of 49.6 per 100,000 [2].

Across age groups, Oregon's rate of Veteran suicide is 16 percentage points higher than the national rate of suicide for Veterans and nearly double the rate of suicide for Oregon's general population. More than 71% of Veteran suicides in Oregon involve a firearm, the most lethal and immediate method for suicide [3]. Female veterans are also at a distinct risk: suicide attempt rates for female Veterans are double those of male veterans.

While the numbers can't tell the complete story — suicide is a complex and deeply personal issue — they do point to an urgent need for support and solutions. Reducing the number of Veteran suicides requires an All-Hands approach, with coordination and collaboration among Veteran support organizations, health care professionals, state and local agencies that provide services to Oregon Veterans, as well as family and friends at the ground level.

This critical effort must begin with hearing from Veterans themselves to understand what they're experiencing now, where they aren't getting the support and services they need, and what kind of support would be most effective for them and their families.

What we are learning is that there are gaps of access to healthcare here in Oregon. Here are some facts:

- Half of all Oregon Veterans don't access Veteran Health Administration (VHA) care today.
- Over half of all Veterans who died from suicide in 2021 had not received health care from VHA in the year prior to their suicide.
- There are approximately 12,000 uninsured Veterans in Oregon (CDC, 2023).

While VHA care is an excellent choice for many, evidence shows a significant portion of Veterans are less likely to access healthcare if the care is associated with the military. *To improve outcomes, Oregon Veterans should have options.*

- Military associated healthcare can be triggering for Veterans with PTSD or traumatic military experiences, leading Veterans to avoid healthcare.
- VA care can be inadequate due to high staff turnover, lack of cultural competency and trauma-informed care, and continuing stigmatizations among different Veteran sub-groups.

A large portion of Veterans are technically VHA eligible but not accessing VHA Care (VHA Survey of Veteran Enrollees, 2022). Of those who are VHA eligible but not accessing care:

• 39.2% report of current enrollees (under 65) report the VHA is meeting none of their health care needs.

Research consistently shows Veterans face multiple barriers to accessing VHA care (VHA Survey of Veteran Enrollees, 2022).

- 36.5% said they required immediate attention and could not get an appointment.
- 30% report barriers to accessing care in their communities, in particular those in rural areas. Inconsistent access to reliable care creates barriers to getting professional support early.
- Despite improvements in community care options, many Veterans report feeling misunderstood or unable to find the care that really works for them.

The solution: Increasing Veteran Healthcare Access & Usage

Create a new Healthcare Access Program that allows Oregon Veterans to receive services through the Oregon Health Plan (OHP) to ensure all Oregon Veterans can access needed healthcare.

What Veterans Need from you

This is why I ask you to support <u>HB 2537</u>, which establishes the Veterans Waiver Program in the Oregon Health Authority to provide, beginning in 2026, medical assistance to low-income veterans who reside in Oregon. This healthcare option will help fill in a gap we see for those who do not have private insurance, for whom the VA is inadequate, and who are struggling to find support. If it leads to saving the life of a Veteran, then I believe we are doing the right thing. Veterans have fought for us, so let's fight for them to have more healthcare options.

As a Veteran with my own share of struggles after the military, I have had a variety of experiences, good and bad, getting the healthcare I need. Having lived across the US, I can tell you that VA care can vary greatly from place to place. Here in Oregon, it is the same depending on where you live and what kind of needs you have.

Finally, a lot of Veterans and VA employees are concerned about budget and staffing cuts at the Federal level. At a time when we need MORE funding and personnel, we are losing them. Oregon already has a great program in place- OHP- so let's build our capacity to support folks at the state and community levels. We take care of our people here.

Thank you for your support, your service, and your dedication to Oregon Veterans.

Sincerely, Steve Schneider