



Washington Update

Check out the [PVAAction Force](#) page to view petitions, legislative campaigns, and a list of key legislation.

PVA PRESENTS AT ACRM RESEARCH CONFERENCE

On October 15, National Legislative Director, Morgan Brown, and Lindsay Perlman, Director of Research & Education, briefed attendees at the American Congress of Rehabilitation Medicine's (ACRM) fall conference, which was held in Washington, DC. Billed as the world's largest interdisciplinary rehabilitation research event, the conference consisted of plenary sessions, instructional and development courses, awards, and networking opportunities.

Mr. Brown and Ms. Perlman's session at the conference focused on the history and purpose of PVA and explained how advocacy organizations like ours can support research studies at nearly every stage. In the past, research has often been done without input from the end user on the research question, process, or outcomes. This can result in the product or result from the research being abandoned, as it is not actually helpful to the group of people that it is targeting. Consequently, attendees were encouraged to use research advocates to move research forward in an inclusive manner.

PVA HOSTS SECOND ACCESS TO THE SKIES SUMMIT

On October 1, PVA cohosted the Access to the Skies Summit with All Wheels Up in Colorado Springs, Colorado. The Access to the Skies Summit is a half-day

hybrid event designed to update members of the disability community on efforts underway to make air travel more accessible both today and in the future. It took place following the All Wheels Up Global Forum on September 29-30. The Forum is an event for all stakeholders to come together and discuss accessible air travel and a wheelchair spot on commercial airplanes.

Access to the Skies kicked off with a fireside chat with Blane Workie, U.S. Department of Transportation, regarding the status of the Air Carrier Access Act 40 years after its passage. The fireside chat was followed by three panels focused on preparing for air travel, addressing problems that arise, and educating attendees on future improvements for passengers with disabilities. Panelists included representatives from United Airlines, Southwest Airlines, Alaska Airlines, Boeing, Airbus, Phoenix Sky Harbor Airport, the Federal Aviation Administration, and PVA. Over 50 individuals attended in person and nearly 70 participated virtually. A recording of the Summit will be available soon.

2027 COLA ANNOUNCED FOR SOCIAL SECURITY BENEFITS, FEDERAL PENSIONS

On October 14, the Social Security Administration announced that Social Security beneficiaries will receive a 3.6 percent cost-of-living adjustment (COLA) increase starting in 2027. The increase is reflective of the effects of inflation. Military and federal employment retirement



benefits will be raised by the same amount, but Congress has yet to approve the Veterans' Compensation Cost-of-Living Adjustment of 2026 (COLA) Act (H.R. 8552/S. 4487). Once they do, VA's disability compensation programs will receive the same COLA.

NEW WOMEN VETERAN REPORTING BILL INTRODUCED IN THE SENATE

In late September, S. 5464, the Veterans' Outcomes, Inclusion, Care, and Experience (VOICE) for Women Veterans Act was introduced in the Senate. The VOICE for Women Veterans Act was a collaboration between PVA, other veterans service organizations, and Senator John Boozman (R-AR). Senator Tammy Duckworth (D-IL) has signed on to the legislation as an original cosponsor to ensure bipartisan introduction.

The bill will build on previous legislation such as the Deborah Sampson Act by modernizing existing annual reports from the VA. Additionally, it will require new reporting focused on health care services, benefits delivery, and other services provided by VA to help strengthen and improve services for women across the country.

You can read the press release [here](#).

VA LAUNCHES PILOT PROGRAM TO SPEED VETERANS' ACCESS TO SERVICES, CARE, AND BENEFITS

On October 7, VA launched a new pilot program at six VA facilities to help veterans establish VA.gov accounts faster than ever before, which means speedier access to VA services, care, and benefits.

VA has worked with technology and security company CLEAR to deploy CLEAR pods at six VA hospitals across the country. Veterans who want to create a new account on VA.gov can use these pods to sign up in a matter of minutes with the assistance of VA staff. This option for setting up a VA.gov account is available at VA medical centers in Atlanta, GA; Brooklyn, NY; Orlando, FL; Palo Alto, CA; San Juan, Puerto Rico; and Washington, D.C. VA will consider expanding this system to other facilities pending the results of this pilot program.

CLEAR uses the same scanning technology deployed at airports and other secure locations to create an easier way to establish a VA.gov account for veterans who may have mobility, connectivity, or other challenges when they try to sign up at home. Here's how it works:

- Veterans can visit any participating medical center with a valid, non-expired government-issued photo ID, such as a driver's license, state ID, or passport, along with a phone number and personal email address.
- VA staff will help veterans quickly enter their information and have veterans take a photo at the CLEAR pod, which sets up the account in a matter of minutes.
- Veterans can set up face ID or other recognition tools so they can use CLEAR to access their VA accounts at home in a matter of seconds.

Using CLEAR to gain secure access to VA.gov is free and optional. Veterans can continue using existing options if they prefer. Choosing not to log in to VA.gov with CLEAR will not affect veterans' ability to access VA benefits or services. Veterans' personal health information stays with the VA. CLEAR does not receive or access it and will not sell biometric or sensitive personal data.

CASE ON SECTION 504 OF THE REHABILITATION ACT SETTLED

The federal government and a group of states recently [settled](#) a case, *Texas v. Kennedy*, arguing against the 2024 Department of Health and Human Services' (HHS) [Section 504](#) (Rehabilitation Act) [regulations](#). The case was originally filed as [Texas v. Becerra](#), and the states challenged the new regulations that clarified anti-discrimination requirements for covered medical providers, services, and programs. These new regulations include requirements for accessible medical diagnostic equipment, facility accessibility, the use of mobility assistive devices, and more. Not only did the states ask the court to get rid of these new regulations, but also Section 504 as a whole.

The complaint was later [amended](#), requesting the court remove regulations requiring services to be provided in the "most integrated setting." These provisions required

individuals with disabilities to be provided services in community-based settings to the fullest extent possible.

Under a [final order](#) and judgment, the U.S. District Court of the Northern District of Texas granted a previously filed joint motion. Specifically, the court vacated any reference to the “most integrated setting” requirements. The court did not make any decisions on other issues brought before the court and dismissed these arguments without prejudice. At this time, all other portions of the 2024 HHS regulations are preserved. Also, this action does not overturn the Supreme Court case *Olmstead v. L.C.* Thus, it is unclear how a future court case based on services not being provided in community-based settings will play out since the Supreme Court precedent still stands.

2026 NATIONAL VETERAN SUICIDE PREVENTION ANNUAL REPORT RELEASED

VA has released the [2026 National Veteran Suicide Prevention Annual Report](#). The report is based on national death data that is available through 2024. In 2024, there were 6,488 veteran suicides that kept the daily average at 17.7 veterans per day.

Within the report, VA states that the key findings are that they have expanded access to better reach veterans in need and that from 2001 to 2024, the percentage of veterans enrolled with the Veterans Health Administration (VHA) rose from 19.5 percent to 50 percent. In 2024, the year covered within the report, 62 percent of veterans who died by suicide were not receiving VA health care in the year they died or the year prior. This is critical data since veteran suicide is much higher for veterans who do not engage with VA health care.

While suicide rates for veterans enrolled in VHA fell 2.2 percent from 2001 to 2024, rates for unenrolled veterans increased by almost 71 percent during that time. Between 2023 and 2024, veteran suicide rates fell 4.8 percent for enrolled veterans and rose 3.7 percent for unenrolled veterans.

In 2024, suicide was the eleventh-leading cause of death among veterans and the fourth-leading cause of

premature mortality. Firearms continue to be heavily involved in the veteran suicide epidemic at greater numbers than their civilian counterparts. Additionally, veterans continue to die by suicide at higher rates than their civilian counterparts as well. Male veteran suicide is 56.5 percent higher than non-veteran adults and women veteran suicide rates are 99.9 percent higher than female non-veteran adults in the US.

There are many resources at your local VA if you or someone you know is struggling with mental health or suicidal ideation. Please reach out to your VA provider or call the 988 line if you are struggling.

GAO PUBLISHES REPORT ON VA PROVIDED FERTILITY CARE

A new report has been published by the Government Accountability Office (GAO). The report titled, “Action Needed to Improve Fertility Care Communications and Eligibility Determination Process,” is the first comprehensive assessment of fertility care offered by the Veterans Health Administration (VHA). The GAO asserts that infertility is a growing concern for veterans due to several factors such as service-connected injuries, exposures, military sexual trauma (MST), and other unique factors impacting veterans. However, despite the growing number of veterans experiencing infertility, the VA has not appropriately addressed the needs of veterans by establishing protocols and communication processes that can be replicated across the system.

Changes made to eligibility criteria and oversight in 2024 have led to VHA fumbling who is responsible for eligibility selection, treatment plans, and other critical components of care delivery. Further, due to staffing shortages and productivity standards set by facility leadership, it is difficult to find staff willing to participate on the fertility teams which determine care.

Two recommendations were set by GAO that cover multiple stakeholders. The first recommendation came in three parts which would require the Office of Women’s Health to implement key performance management practices to increase the effectiveness of its communication related to veteran fertility care and eligibility by (1) setting goals with quantitative targets

and time frames, (2) collecting data to measure progress towards those goals, and (3) using these data to assess performance and make adjustments as needed.

The second recommendation is that the Under Secretary for Health should determine whether the fertility eligibility determination process is working as intended and make adjustments as needed.

You can read the full report [here](#).

GAO REPORT IDENTIFIED DECREASE IN OVERSIGHT OF DISABILITY COMPLIANCE AT OFCCP

On September 29, the Government Accountability Office (GAO) released a report titled, "[Disability Employment: DOL Should Enhance Monitoring and Guidance for Federal Contractors](#)," that analyzes the current state of Section 503 enforcement and offers valuable clues about where the U.S. Department of Labor (DOL) may focus its efforts in the future. On August 21, DOL's Office of Federal Contract Compliance Programs (OFCCP) released final rules that reduce disability-related compliance obligations and update veteran hiring regulations. The final rules formally remove the underlying regulations and provide clarity regarding federal contractor obligations moving forward.

In the [final rule on Section 503 of the Rehabilitation Act](#), OFCCP rescinded the requirement that contractors invite applicants and employees to self-identify as individuals with disabilities, eliminating the related Form CC-305 and data-collection requirements, and removing the seven percent utilization goal and associated utilization analyses. The changes substantially reduced contractors' quantitative compliance obligations under Section 503; however, they do not eliminate Section 503 affirmative action or nondiscrimination obligations. Covered contractors continue to be required to take affirmative action to employ and advance qualified individuals with disabilities, maintain applicable affirmative action programs, conduct and evaluate outreach and recruitment efforts, provide reasonable accommodations, and comply with other remaining Section 503 requirements. The rule also updated the basic Section 503 contract coverage threshold from \$15,000 to \$20,000 to reflect recent inflationary

adjustments. The final rule became effective September 21.

According to the GAO report, DOL has suspended audits of selected contractors, which were a key tool for monitoring compliance. From fiscal years 2017 through 2025, 532 audits found Section 503 violations. Without resuming audits, DOL has less assurance that contractors are supporting employment of people with disabilities. Further, DOL has reduced OFCCP's workforce in response to changes in its activities. OFCCP had 484 full-time employees in the first quarter of fiscal year 2025. That number has dropped to 79 in the first quarter of 2026.

These changes made by OFCCP were not informed by strategic workforce planning consistent with key principles for such efforts. GAO reported that DOL has made changes to Section 503 regulations that could further impact OFCCP's activities. Engaging in strategic workforce planning would help DOL ensure that OFCCP's workforce composition meets its needs.

GAO made eight recommendations, including that DOL resume compliance audits, conduct strategic workforce planning for OFCCP, and provide additional information to help contractors provide reasonable accommodations to employees with disabilities and comply with Section 503. DOL agreed with six of the recommendations and neither agreed nor disagreed with the other two.

NEWS OF NOTE

Senate Confirms DOL Secretary

The Department of Labor (DOL) has a new Secretary. Keith Sonderling will officially lead DOL after a 47-41 party line vote saw him confirmed on September 30. Secretary Sonderling had been serving as the acting secretary since April, when former Secretary Lori Chavez-DeRemer stepped down.

GAO Report About Veteran Food Insecurity and Snap Benefits

The Government Accountability Office (GAO) recently released a [report](#) focused on the U.S. Department of

Agriculture's (USDA) Supplemental Nutrition Assistance Program (SNAP) and how recent cuts made to the USDA through the DOGE program made it more difficult for the VA to work with the USDA to reduce food insecurity among veterans. An estimated seven percent of veteran households rely on SNAP benefits across the country and exceptions have been made over the years to increase access to SNAP for veterans in need.

With the passage of the One Big Beautiful Bill Act (P.L. No. 119-21) those exceptions were removed and staffing within the USDA has been reduced that has had a direct impact on veterans applying for and accessing SNAP benefits. The USDA and VA signed a Memorandum of Understanding (MOU) that allows the agencies to work together to distribute information and materials to veterans who may need food assistance. In their Research, GAO found that the USDA website was out of date, particularly for veterans seeking additional information about eligibility for the benefit, and VA staff complained that decreased staff have made distributing information particularly challenging.

The GAO made several recommendations for the USDA and VA that include updating their eligibility website, particularly around exceptions for the benefit, updating and distributing materials tailored to veterans in collaboration with the VA, and ensuring a formal mechanism is in place to facilitate collaboration between USDA and VA for information and outreach materials.

SURVEYS AND COMMITTEE ACTIVITIES

FINAL REMINDER: MSKTC Seeks Survey Participants

The [Model Systems Knowledge Translation Center \(MSKTC\)](#) seeks participants for a brief survey on the need for information on spinal cord injury (SCI), traumatic brain injury (TBI), or burn injuries.

Participants must be over the age of 18 and may be a person with a TBI, SCI, or burn injury, or a caregiver, clinician, or state or federal program administrator. The information gathered will help MSKTC develop future publications and products for individuals, caregivers, and practitioners.

To learn more, click [here](#).

Veterans' Committee Activities

Please visit the [House](#) and [Senate](#) Veterans' Affairs Committee webpages for information on previous and upcoming hearings and markups.