

▶ MAJOR BREAKTHROUGH IN VETERANS' TREATMENT BENEFITS

by Brian Forbes, Chairman of the National Council of
Veteran Associations & Executive Chair of The War Amps

THE NATIONAL COUNCIL of Veteran Associations (NCVA) has strongly recommended for many years that the immediate granting of treatment benefits for seriously disabled veterans prior to the completion of the individual Veterans Affairs Canada (VAC) adjudication process is absolutely essential to meet the urgent needs of such veterans.

The proposed draft amendments to the Veterans Health Care Regulations (VHCR) recently released by the Department will ostensibly allow veterans who apply for disability benefits for mental health conditions to automatically qualify for appropriate health/treatment benefit coverage.

As a matter of background, it is noteworthy that the 2021 Federal Budget brought down by Finance Minister Chrystia Freeland on April 19 has recognized that:

- "... [v]eterans are three to four times as likely to suffer from depressive or anxiety disorders, and over 15 times more likely to experience post-traumatic stress disorder (PTSD), than the general population. Veterans are entitled to financial support for mental health care through the Treatment Benefit Program but they can **wait up to two years to receive mental health care while waiting for their disability benefit application to be confirmed.** ...
- **"Budget 2021 proposes to provide \$140 million over five years starting in 2021-22, and \$6 million ongoing, to Veterans Affairs Canada for a program that would cover the mental health care costs of veterans with PTSD, depressive, or anxiety disorders while their disability benefit application is being processed."**

It is unfortunate that this budgetary proposal as reflected in the new VHCR amendments does not fully adopt our favoured concept of automatic entitlement/preapproval for veterans suffering serious physical and/or mental disabilities. It does, however, provide a significant step forward in recognizing that treatment benefits for mental health conditions should be granted immediately and not be dependent on the tortuous disability application process.



Thus, this provision is hopefully a springboard to expanding this principle so that incapacitated veterans with any form of serious disability are not left in a precarious situation for many months or even years before health care/treatment benefits are available to them. It is readily apparent that the Government has determined that mental health care (PTSD, depressive or anxiety disorders) should be given priority at this time. It is our continuing position that this approach should be applied to all **physical disabilities** so that veterans in serious need of health care or treatment benefits should be granted the same sense of priority.

There is little doubt that this proposed stop-gap initiative has the potential to trigger much-needed treatment benefits for those veterans suffering urgent mental health issues. At the same time, it still begs the larger question as to whether VAC is prepared in relation to the overall adjudication of disability benefits to fully operationalize the requisite systemic measures needed to mitigate the pervasive administrative and bureaucratic delays currently confronting Canadian veterans and their families.

As a preliminary observation, we would submit that it is extremely important that the disability application for mental health conditions in question is taken at face value in order for this new policy to be fully effective. We are concerned in this context that, in the body of the VAC Regulatory Impact Analysis, the following statement is found:

- "Coverage under the Mental Health Benefits would be automatic upon **validation of key information** in the disability benefits application for specified mental health conditions..."

ABOVE RIGHT: Brian Forbes, Chairman of the National Council of
Veteran Associations & Executive Chair of The War Amps.

We trust that this phraseology does not imply that substantial scrutiny is required to grant treatment benefit eligibility to the disabled veteran involved. The whole purpose of the VHCR amendments would be defeated if this apparent prerequisite presents an inappropriate procedural obstacle to the immediate granting of treatment benefits.

It is recognized that a certain degree of clarification is found later in the Regulatory Impact Analysis as to the basic information that the disabled veteran applicant must provide in order to satisfy the Department's "validation" process. In our respectful submission, however, this question as to the sufficiency of evidence should be made abundantly clear so as to ensure the fundamental intent of the policy to grant **automatic** access to specific treatment benefits is actually carried out. In effect these initial evidentiary requirements should be spelled out in the VHCR amendments and with respect to any policy guidelines issued by VAC to support this regulatory change.

Moreover, it must also be underlined that we remain extremely concerned that this helpful budgetary proposal will **not actually be implemented until April 2022 due to the detrimental impact of the "machinery of government."** NCVA has taken the position from the outset that the adoption of this program should have been expedited to meet the primary need that was identified and clearly articulated in Budget 2021. Any further inordinate

delay in the application of the treatment benefit initiative will fail to recognize the fundamental purpose behind this budgetary provision, i.e., time is of the essence for these disabled veterans waiting in the backlog of cases in the VAC adjudicative system.

NCVA would submit that VAC should therefore accelerate the implementation of this regulatory process, as was achieved by the federal government during the initial stages of COVID-19 when requisite financial measures were enacted at a rapid pace – **veterans suffering from a mental health condition should not be waiting many more months to access much-needed treatment benefits. They need the help now.**

We also believe that the Government could go further in this context. It is not without significance that over 95 percent of mental health/PTSD claims are ultimately approved by the department. Therefore, in our judgment, automatic entitlement just makes good administrative sense and would accelerate the necessary treatment benefits for the disabled veteran so as to preclude any further triggering of the bureaucracy of government.

As we have constantly posited, this form of systemic change is absolutely required to ameliorate the VAC backlog/wait times crisis – veterans deserve nothing less during these challenging times where financial and health concerns have been intensified by COVID-19! 🍁

Investigative news. Independent views. Informative history.
Every month.

ON TARGET
PERSPECTIVE
WAR SECOND WORLD
FOR CANADA FEATUR
ING COLUMNIST PE

ON THE RADAR
IN THE NEWS OF SPOT-
LIGHT
ORDER FIRST WORLD
OLD GUARD THE FIGHT
FRONT LINE REPORT-
ING INVESTIGATIVE JOURNALISM



espritdecorps
CANADIAN MILITARY MAGAZINE

Subscribe today

Toll Free 1-800-361-2791 espritdecorps.ca

Find us on Facebook

Follow us on Twitter @EDC_Mag

The one that's read!