

January 21, 2014

Director
Regulation Policy and Management
Department of Veterans Affairs
810 Vermont Ave., NW
Room 1068
Washington, DC 20410

Re: RIN 2900-AO17

The following comments are submitted by the Consortium for Citizens with Disabilities Veterans and Military Families Task Force pursuant to the Notice of Proposed Rulemaking concerning the Home Improvements and Structural Alterations [HISA] benefits program published on November 20, 2013. CCD is a coalition of national disability rights, advocacy, consumer and provider organizations representing the over 50 million Americans with disabilities.

We commend the Department of Veterans Affairs [VA] for the steps taken in the NPRM to streamline the application process for HISA benefits and reduce administrative burdens on beneficiaries. In particular, we applaud the elimination of the requirement for multiple bids for a construction project and the specific inclusion of medical foster homes in the definition of "home" for HISA eligibility since these residences are very often used by veterans with significant disabilities. We agree with the Department's interpretation of the law in 17.3102(b) to provide HISA benefits to service members undergoing medical discharge so as to speed their access to the benefit. We also agree with the VA's decision to make the greater lifetime HISA benefit amount available for all service members who qualify under 17.3102(b). It stands to reason that a service member who has sustained an injury severe enough to warrant medical discharge will qualify for the higher level of benefit once he or she becomes a veteran. The NPRM also sets out a number of improvements in its explanation of benefit limitations and eligibility criteria.

We differ with the statement in the proposed rule that the HISA benefit is "not a construction benefit" and, therefore, the agency has no responsibility for ensuring the structural integrity or code compliance of the alterations made with the funds. While we recognize that the VA does not have the expertise in such matters, we do believe that the Department could, at the very least, advise the service member or veteran as to existing standards that should be followed in making these home modifications so that he or she might provide these guidelines to their

contractor. We would argue that, since these are federally-financed home alterations, the criteria to be used should be those stipulated by Section 504 of the Rehabilitation Act. In other words, the accessibility guidelines outlined in the Americans with Disabilities Act [ADAAG] would be the governing standards. Alternatively, the Department could direct the veteran or service member to use the agency's own guidebook for construction projects under the Specially Adapted Housing grant program. In order to ensure that government funds are expended in an appropriate fashion, some reference to a legal standard should be used by the beneficiary and VA inspectors, however inexpert they may be.

Finally, proposed section 17.3130(b) requires the beneficiary to submit a complete final payment request within 60 days after application is made for the HISA grant. Such request must include a statement of completion, color photograph of the completed work and documentation of the itemized actual costs for construction of the improvement or alteration. VA does indicate that the beneficiary may submit a written explanation of reasons for delay in the final payment request. However, we believe that 60 days may be too short a time interval overall for the completion of many construction projects and would recommend that the Department consider a 90 day deadline at the very least.

Thank you for your attention to these comments.

Heather Ansley Co-Chair VetsFirst, a program of United Spinal Association

Maynard Friesz Co-Chair Easter Seals, Inc.

Susan Prokop Co-Chair Paralyzed Veterans of America