

Chairman Ghanbari, Vice Chair Loychik, Ranking Member Miller. Thank you for allowing me to offer proponent testimony for House Concurrent Resolution 46.

My name is Jeremy Parkins. I am an Ohioan, and an Air Force veteran who served active duty from 1997-2005; deploying for Operation Enduring Freedom, Southern Watch and served stateside in direct support roles for Operation Iraqi Freedom. In 2005, the United States was conducting a troop draw-down; which opened the door for approximately 16,000 Airmen to leave active duty and either serve under a Guard or Reserve component or return to the civilian lifestyle. I chose to return to Ohio but as a Reservist. I had employment lined up and was ready to be around family and friends. However, upon returning the job I thought I had was lost to corporation faults, and my family and friends both offered very little support if any. The VA system at the time was a revolving door of medications and non-existent promises. State and county entities lacked knowledge and resources related to issues I was experiencing related to empathy, Mental Health, VA Benefits, and much more. After going from Chillicothe VA, Chalmers P. Wiley, Cleveland Regional VA for bloodwork, check-ups, and what seemed like a guessing game related to any diagnosis or prognosis; I stopped going altogether. Over the next eight years, I spent nights in jail, years with pain, and trying to find someone who would listen.

Fast forward to 2015. After eight years of trying to bring myself home and piecing myself back together, I had a Master's Degree in Criminal Justice and Security, a loving family, and began sharing about my own transitional issues. The same year, I was offered a job with an Adult Reentry agency. I took a job as a case manager at the agency's facility located in Chillicothe, Ohio; next door to the Chillicothe VA. As the only Veteran case manager in the facility; all Veteran Inmates or clients would eventually become part of my caseload. While working with these Veterans, they taught me more about myself than I had them, and they had shown me the VA Healthcare system was changing. Eventually as a Case Manager, Treatment Manager, Program Manager, then eventually as a Director of these facilities; I would refer Veteran Inmates and clients to the Chillicothe VA. This allowed them the opportunity to know for sure any eligibility to services and benefits. After about one year of doing this, an Eligibility Department Employee at the Chillicothe VA named Jerry Carpenter said "Jeremy, you are doing great at getting these guys enrolled, but when am I going to see you here?" I shared my concerns about the VA with Jerry. Jerry was a Veteran as well and utilized the same system; so I trusted him. He got me to go back. Since then, I have worked with Pain Management, my Primary Care Physician, as well as utilized services associated with Podiatry, Optometry and several specialists that knew my symptoms. I have received adequate if not top-notch care from the Chillicothe VA employees who are also Veterans and local citizens of Chillicothe. When I walk the halls I talk to people who I know on a personal level, and many who have worn the same boots as me.....as a Veteran.

So why am I here? People are often confused at why someone who publicly and adamantly scrutinizes the VA would be one of the first to defend it, but here is my reasoning. I scrutinize the VA not because of the local care I receive but because of the bad policies and procedures adopted by its leadership. This leadership is often made up of non-Veteran components or does not understand local "markets" or populations. Therefore, when I learned about the Mission Act and the AIR Committee as it relates to a possible closure in 2021; I became immediately involved through Dress, Right, Dress and as a local Veteran. In 2022, prior to public announcements, our organization was made aware that the recommendations were to close the Chillicothe VA. Our organization and myself got to work.

We talked to hundreds of Veterans who did not qualify for Medicaid or could not afford the cost of their employer's insurance plans; they simply rely on VA Care. We found that VA Care was specific to Veteran needs and diagnosis; something that lacks in the public sector. Not to mention, that many of us, Veterans, feel a sense of empathy and understanding by the majority of the staff. Staff who are Veterans or are related to a Veteran. According to the American Federal Government Employees Union, One-third of all VA staff are Veterans. In Appalachia Ohio, in which the Chillicothe VA serves, there is little public resources related to Veteran specific care and diagnosis, as well as being acknowledged as a Mental Health provider desert. Simply put, the staff at the Chillicothe VA are simply our Veterans brothers and sisters, our neighbors, our friends, our family who understand what is needed. To close such a facility, is like asking Veterans to sacrifice once again, and to leave home.

If my story does not suit an effort to keep the Chillicothe VA open, maybe this will. The simple fact is that Ohio is number 6 out of 50 for the most Veterans per state. According to Veteran Affairs, the Chillicothe VA serves 17 Ohio counties; approximately 20,000 veterans. The region has 6 CBOCs; which is essentially an urgent care station with approximately 25 staff members per facility. Simple math shows that the VAMC-Chillicothe provides direct and in-direct support for the remaining 11 counties with no CBOC. Furthermore, there are 1,400 people employed at the Chillicothe VA. Remember I said that the AFGE Union states One-Third of the employees are Veterans; according to local AFGE Union President Jessica Fee that number is greater than the national average. According to the Market Assessment, the recommendation is to replace this infrastructure with 1.8% of the staff while running at full capacity. Additionally, as seen with the current economical climate, has anyone stop to consider what this would do on the following issues:

- Decrease access to Veteran Health and Mental Health Care
- Lack of resources related to Mental Health Care and additional resources in Appalachia Ohio
- Increase in related Veteran Mental Health issues specifically due to lack of local resources, and additional strain on the Veteran and/or their family
- Increase in Medicaid due to lack of employment opportunities
- Increase in SNAP benefits due to lack of employment opportunities
- Loss of local income tax revenue
- Loss of employment opportunities

In closing, I am from Ohio. Born in Tiffin, and enlisted in Chillicothe. I watched as American Standard left Tiffin and what it did to the local economy. The VA has offered no plan and no guarantees for Veterans, staff, Ohio, or any other. The VA is stating this is to save money, but the AIR Report outlines the monetary cost would be more to close and build new then refurbish the current grounds. The report outlines recommendations to diminish access to care, when recommendations should support access to care. What the report does not show, is the affects of such recommendations outside those 308 acres in Ross County. The recommendations were made by "crunching the numbers" but the math does not lie. This is a bad deal for Chillicothe, Ross County, Appalachia, and Ohio. Simply defend those who have served by showing support for this resolution.

Thank you.