

GRANTING HOSPITALIZATION, DOMICILIARY CARE AND BURIAL BENEFITS IN CERTAIN WORLD WAR II CASES

MARCH 2 (legislative day, MARCH 1), 1943.—Committed to the Committee of the Whole House on the state of the Union and ordered to be printed

Mr. CLARK of Missouri, from the Committee on Finance, submitted the following.

REPORT

[To accompany S. 230]

The Committee on Finance, to whom was referred the bill (S. 230) entitled "A bill to amend Veterans Regulation No. 10, as amended, to grant hospitalization, domiciliary care, and burial benefits to certain World War II cases," having considered the same report thereon with the recommendation that the bill do pass with the following amendments:

Amend the title by striking the word "to" appearing after the word "benefits" and substitute therefor the word "in".

After the colon in line 6 strike all of the language in the bill appearing after the colon in line 6 and substitute therefor the following:

World War II—Any person who served in the active military or naval service of the United States on or after December 7, 1941, and before the termination of hostilities in the present war as determined by proclamation of the President or by concurrent resolution of the Congress: *Provided*, That the term "active military or naval service," as used herein shall include active duty as a member of the Women's Army Auxiliary Corps, Women's Reserve of the Navy and Marine Corps and the Women's Reserve of the Coast Guard.

The bill has for its purpose the granting of medical and hospital treatment, domiciliary care and burial benefits under laws administered by the Veterans' Administration to certain veterans of World War II regardless of the nonexistence of a service-incurred disability on a parity with veterans of World War I. The existing law provides such benefits for veterans other than those of World War I and prior wars, only if the veteran has been discharged for disability incurred in service in line of duty or is in receipt of pension for service-connected disability.

Your committee conducted hearings on S. 230, February 25 and March 1, 1943. Representatives of the American Legion, Veterans of Foreign Wars, and the Disabled American Veterans of the World

War appeared during the hearings and strongly endorsed enactment of this measure. The amendments approved by your committee are for the purpose of clarification by utilizing the existing definitions in the law (Veterans Regulation No. 10) which is amended by the bill and by specifically including within the term, "active military or naval service," active duty as a member of the Women's Army Auxiliary Corps, Women's Reserve of the Navy and Marine Corps, and the Women's Reserve of the Coast Guard.

All of these women's reserve units have active service status under the existing laws when on active duty except the Women's Army Auxiliary Corps and legislation is now pending in the Congress, which is understood to be in accord with the program of the President, which will make active duty status available to the Women's Army Auxiliary Corps as a recognized branch of the Army Reserve. Those having active service status at the present time are eligible to apply for national service life insurance, although for monetary benefits and hospitalization the benefits are provided under the employees' compensation laws. The amendment therefore will authorize the furnishing of medical and hospital treatment, domiciliary care and burial benefits under laws administered by the Veterans' Administration for these groups on a parity with other veterans of World War II.

Many cases have been brought to attention for immediate action of the Congress, where veterans, after being accepted for active service, have by change of environment and due to active service become seriously disabled and in need of treatment but the disability is determined as not incurred in line of duty. In some instances they have been sent home without necessary care and, not infrequently, in mental cases retained in a jail pending transfer to a State institution. In some cases adequate care is not available, bearing in mind that the States do and may well look upon this matter as a Federal obligation.

The Federal Government must assume its just obligation to care for these distressing cases, having taken the man into the active service in the first instance. While suggestion has been made to limit the benefits of this legislation to neuropsychiatric and tubercular cases, your committee does not believe that the relief to be afforded can justifiably be restricted to any particular type of condition such as neuropsychiatric or tubercular diseases. Further, the fact that this type of care was granted World War I veterans 5½ years after the armistice or 3 years after the close of the war, in the opinion of your committee, would not justify failure to meet this just Federal obligation promptly in the present emergency, bearing in mind the available facilities of the Veterans' Administration and the marked progress since 1924 in the development of facilities for the care of disabled veterans.

It is fully realized that under present conditions hospitalization afforded by this legislation must be subject to limitations of existing facilities, and that ultimately the increased demands hereunder will require additional construction.