

Top Ten Reasons to Include USPHS Officers in GI Bill Transferability

- #10.** Existing law and statute regarding the status of the USPHS Commissioned Corps is confusing and contradictory. This is no reason to deny the benefits of the new GI Bill to this one group of uniformed service members whose role in defending the Nation against public health threats to national security is every bit as important as that of any other uniformed service member.
- # 9.** Excluding USPHS and NOAA officers from transferability is counter-productive. It drives a wedge between uniformed services. It deters recruitment and retention at a time when the USPHS Commissioned Corps is taking on increasingly demanding responsibilities at home and abroad to protect our public health security – the most fundamental component of national security.
- # 8.** USPHS officers are defined as veterans [42 USC §213(d) and 38 USC §101(21)(B)]. As veterans, they have been eligible for every GI bill program for more than 60 years.
- # 7.** HHS has identified thousands of unfilled requirements for USPHS officers in IHS, FDA, CDC, BOP, DHS, and other agencies. Public health trained physicians, pharmacists, nurses, and dentists are in particular demand.
- # 6.** Active-duty USPHS officers want to be included in transferability. COA members have made this clear. Thus, COA has sought corrections to the Post 9/11 Veterans Educational Assistance Act of 2008 (GI Bill) extending the full entitlements contained in this law, including transferability, to members of the USPHS and NOAA Commissioned Corps who have served on active duty since 10 September 2001. This has been the top legislative priority for COA for more than a year and a half.
- # 5.** In response to 9/11, the USPHS Commissioned Corps is taking on new responsibilities in the areas of emergency preparedness and disaster response; this includes creation of a surge capacity of highly trained first-responders to protect the public's health in case of a natural disaster or terrorist attack. In response to hurricane Katrina, 2000 USPHS officers (one third of the total force) were deployed. More than 800 USPHS officers were deployed in response to hurricanes Gustav and Ike. USPHS officers deploy routinely and regularly dozens of times a year in response to a broad spectrum of threats – often alongside their National Guard counterparts.
- # 4.** Two hundred USPHS mental health practitioners are being assigned to the military to improve clinical care for returning service members who have traumatic brain injuries or post-traumatic stress disorder. USPHS officers are sought in increasing numbers to serve on the staffs of DoD Combatant Commanders. Since 9/11, these joint training missions and partnerships have increased and expanded in scope, and this trend will continue.
- # 3.** USPHS officers are detailed to more than 80 foreign countries. This is recognition that health diplomacy may be one of our Nation's most potent foreign policy tools. USPHS Commissioned Corps officers routinely and regularly serve with the Armed Forces on health diplomacy missions – a key front in the Global War on Terrorism. Hundreds of PHS officers deployed in the last three years with the U.S. Navy in health diplomacy missions around the world.
- # 2.** The cost of extending transferability to USPHS officers (an active-duty force of only 6,500) would be virtually negligible, relative to the overall cost of the Post-9/11 bill.