

Cutting red tape to improve veterans' access to care

U.S. Sen. Mike Crapo

Idaho veterans and their family members have made it clear that the Veterans Choice Program (Choice program), created to make it easier for veterans to get health care, does not work for Idahoans. To address concerns raised by Idaho veterans, I introduced the Improving Veterans Care in the Community Act of 2016, S. 3401, to make it easier for the U.S. Department of Veterans Affairs (VA) to send veterans into their local communities for health care, to make it easier for veterans to access this community health care and to make it easier for veterans to access the services they need.

S. 3401 is a direct result of Idaho veterans' recommendations to improve their health care. Idaho veterans have expressed that they do not want to privatize the VA and want to maintain and improve VA health care providers. This invaluable input was shared through the 2014 and 2015 veterans surveys I conducted, my more than 200 statewide town meetings, constituent mail, casework and other interactions.

The Choice program was created in the aftermath of the 2014 wait time manipulation scandal at the Phoenix VA. The goal of the program was to make it easier for veterans to get health care if they faced excessive wait times or long travel distance to VA facilities by allowing veterans to access private care through the Choice program. Unfortunately, many Idaho veterans have still had to travel long distances for care, because they may live near a VA facility but require a service, such as x-rays and audiology, that the facility cannot provide. Because these veterans live near a VA facility, they are ineligible for the Choice program, even though the nearest VA facility is not able to provide that service.

S. 3401 would enable these veterans to use services within the local community through the following needed changes:

- Reducing delays, confusion and frustration and increasing access to health care by ending the bureaucratic maze and consolidating the as many as eight separate, non-VA care service programs, including the Choice program, into one program that would be called the "Care in the Community Program";
- Expanding and improving access to quality health care in the community by allowing veterans to choose to get care in their local communities when they face undue travel distances to VA facilities, cannot get needed services at nearby VA facilities, experience excessive appointment wait times, or have a VA doctor who feels it is in the veteran's best interest medically;
- Requiring the VA to educate veterans about the new "Care in the Community Program", what is available to them and how it would work; and
- Directing the Government Accounting Office (GAO) and an independent commission to study veterans services and report directly to Congress to inform the need for additional steps to improve veterans services.

The goal is to replace the overlapping programs with one that is easier for veterans to use and the VA to manage, which would result in easier access for the Idahoans who need non-VA care, fewer administrative hurdles for Idahoans working at the VA and less confusion for community health care providers working with the VA.

One of my top priorities is ensuring that veterans have access to the best health care possible respectful of their commitment to our nation. Thank you to the many veterans, family members, volunteers and members of service organizations who worked on these improvements that I will work to get enacted. The advice and feedback from folks in the veterans community was invaluable and helped shape this bill into something that can really make a difference for veterans.