
Veterans Choice Program

Initial Report

Compiled by the Veterans of Foreign Wars of the U.S.

March 2, 2015



BACKGROUND:

Last spring, whistleblowers in Phoenix exposed rampant wrong-doing at their local U.S. Department of Veterans Affairs hospital through which veterans were alleged to have died waiting for care, while VA employees manipulated waiting lists and hid the truth. In the months that followed, similar problems were exposed across the country, and the ensuing scandal forced the VA secretary and many top health deputies to resign.

As the crisis unfolded, the VFW intervened by offering direct assistance to veterans seeking VA care; working with Congress to pass significant VA health care reforms; publishing a detailed report on ways to improve VA care; and working directly with VA to implement reforms.

In August, Congress passed and the President signed into law the *Veterans Access, Choice, and Accountability Act of 2014* (VACAA) with the support and insight of the VFW. This critical law commissioned the new Veterans Choice Program, which now offers critical non-VA care options to veterans who cannot be seen by VA in a timely manner (30-dayers) or who live more than 40 miles from the nearest VA medical facility (40-milers).

In order to allow veterans to take advantage of the new Veterans Choice Program, VA continues to issue Veterans Choice Cards to veterans who were enrolled in VA care as of August 1, 2014. VA is also working with two health care contractors, Health Net and TriWest, to stand up community networks of doctors who will accept patients for non-VA care, as well as operate 24-hour call centers to help veterans verify eligibility and schedule appointments.

The program became operational on November 5, 2014, meaning VA and its partners only had three months to stand up a new veterans' health infrastructure – a timeline that most health experts recognized as implausible. As a result, the VFW knew there would be issues for veterans who sought to take advantage of this new program. Regardless, VA and its partners were able to deploy the program on time, and have candidly acknowledged the issues that accompanied the roll-out.

In an effort to mitigate problems and to gauge the pulse of the veterans' community, the VFW not only continued to publicize its national veterans' help line, 1-800-VFW-1899, but also built a new web page where veterans could learn about the program, www.vfw.org/VAWatch, and commissioned a direct survey where affected veterans could share their experiences.

The following report includes highlights and data trends that the VFW identified over the first three months of Veterans Choice Program's implementation. In an effort to continue to hold VA accountable and to keep the VFW's pulse on the Veterans Choice Program, the VFW launched its second Veterans Choice Program survey on February 6, 2015 via www.vfw.org/VAWatch.

The VFW acknowledges that VA and the contractors have made progress in addressing the challenges veterans faced during the first three months of the Veterans Choice Program's implementation. Initial responses from the VFW's third survey reflect those efforts. As the program's implementation progresses and veteran experiences change, the VFW will continue to issue reports on what is working and how VA and Congress can improve this important program.

FINDINGS:

One month after VA launched the Veterans Choice Program, the VFW conducted a survey of its advocates via the VFW Action Corps, asking about their individual experiences with the new program. The VFW also made the survey available on the VFW website via www.vfw.org/VAWatch.

As expected, the VFW recognized that the program was experiencing initial implementation problems, to include clear guidance for veterans on which veterans would qualify for the program.

Fortunately, the Veterans Choice Program has succeeded in helping thousands of veterans receive timely access to care. As of February 5, 2015:

- 8.6 million Veterans Choice Cards have been issued
- 458,769 calls have been place by veterans to the call centers
- 26,662 veterans have requested non-VA care
- 24,288 veterans have received appointments

As of February 5, 2015, the VFW received 2,511 responses to the initial survey. The initial survey was logic-based, meaning veterans were directed to the next series of questions based on their initial responses. This means that only select veterans to whom each question applied were prompted to respond. Below is a by-the-numbers summary of responses from veterans who reported being enrolled in VA health care:

- 34 percent of 2,157 survey participants reported living more than 40 miles from the nearest VA medical facility
- 35 percent of the 746 survey participants who attempted to schedule an appointment after November 5, 2014, reported waiting more than 30 days for a VA appointment
- 19 percent of the 1,069 survey participants who either live more than 40 miles from the nearest VA medical facility or could not be seen by VA within 30-days were offered the option to receive non-VA care
- 92 percent of the 850 survey participants who reported that they either live more than 40 miles from the nearest VA medical facility or that they could not be seen by VA within 30-days, but were not offered the choice to receive non-VA care, indicated they were interested in non-VA care options
- 47 percent of the 198 survey participants who were offered the choice to receive non-VA care, reported that they chose to receive their care from VA
- 78 percent of 2,002 survey participants reported that they were satisfied with their VA health care experience
- 82 percent of 1,919 survey participants reported that they would recommend VA care to their fellow veterans
- 57 percent of the 97 survey participants who chose non-VA care, reported that they were satisfied with the Veterans Choice Program
- 58 percent of the 97 survey participants who chose non-VA care reported that they would recommend the Veterans Choice Program to their fellow veterans

ANALYSIS:

To the VFW, the results of this initial survey were not surprising. VA and its contractors had to quickly deploy a new program to deliver care to veterans in a timely manner. However, the survey identified several issues that the VFW immediately worked to address with VA, Health Net, and TriWest.

Participation: Prior to the roll-out of the Veterans Choice Program, the VFW was concerned that veterans would not necessarily understand the stringent criteria through which they would qualify for care – especially veterans who believed that they lived more than 40 miles from a VA medical facility. Unfortunately, the veterans who responded to the VFW’s survey reported these kinds of issues. The VFW expected this, since VACAA insisted that all veterans who were enrolled in VA care as of August 1, 2014, receive a Veterans Choice Card, but not all who received cards would be eligible for care.

Next, the VFW was concerned about the time in which 30-dayers would be referred to the contractor for non-VA care. In implementing the Veterans Choice Program, VA has chosen to rely heavily on local medical facility staff. When VA schedulers are unable to schedule a veteran within VA’s wait-time standard – 30-days from the time a VA provider deems an appointment clinically necessary, or the clinically indicated date, or if no such date exists, the date a veteran prefers to be seen – such veteran is then placed on the Veterans Choice List (VCL). During the first weeks of the program, VA facilities would only transfer VCL data to the contractors once each week. In this initial phase, veterans were being told they were eligible for the Choice Program by their facilities, but unable to schedule non-VA care appointments when they contacted the Veterans Choice Program call centers because the contractors were unable to verify their eligibility. Understandably, this was a source of great frustration for veterans who felt they were receiving conflicting information from VA and the contract call centers.

After looking into these incidents, VA and the contractors realized that the lag time between when veterans were being informed of their eligibility and when the contractors received their records was causing this confusion. The contractors have since informed the VFW that they receive records from VA facilities at least three times each week, and that facilities are instructed to inform veterans of this potential data delay before contacting the call center. However, the VFW remains concerned about possible inconsistencies in the way VA medical facilities report VCL data to the contractors.

The VFW was also concerned about VA’s ability to inform 30-dayers of their eligibility to receive non-VA care. The VFW learned that one of the major obstacles in implementing the Veterans Choice Program has been ensuring local VA medical facility staff is familiar with the program’s intricacies. Since the contractors are prohibited from conducting outbound calls to inform veterans of their eligibility, VA has relied on its local schedulers to inform veterans of their eligibility and instruct them to contact the call center. Unfortunately, limited resources for local facilities mean that this kind of proactive outreach is inconsistent across VA facilities.

The VFW survey shows that 80 percent of the 1,068 survey participants who reported that they either lived 40 miles from a VA medical facility or could not be seen by VA within 30 days said

they were not afforded the choice to receive non-VA care. The VFW is still concerned that these veterans may continue to be denied access to timely care due to VA's lack of capacity for delivering consistent training to its staff responsible for properly informing veterans of their eligibility and placing veterans on the VCL.

To mitigate this issue VA has initiated the Veterans Choice Program Outreach Campaign to contact veterans currently on the 30-day Electronic Wait List or the VCL. As of February 5, 2015, VA's Health Resource Center, Purchased Care, and Health Eligibility Center have resolved more than 104,000 calls, 37,193 of which were resolved by direct contact with a veteran. Of those calls, 21,636 veterans said they did not need an appointment, 4,667 of them had already scheduled an appointment and 10,601 of them were referred to the Veterans Choice Program call center. The VFW is encouraged to see that more than 70 percent of veterans contacted indicated they were happy with their existing appointment, whether it was with VA or through the Veterans Choice Program, or did not need an appointment. However, nearly 30 percent of the veterans who indicated they wanted an appointment were unaware of their ability to obtain non-VA care.

Data from VA's Veterans Choice Program Outreach Campaign does not allow us to determine the ratio between veterans who were eligible and those who were interested in receiving non-VA care or how many veterans chose non-VA care when given the option. The VFW's survey determined that more than 90 percent of veterans who were eligible for the Veterans Choice Program, but were not given the choice to participate, said they were interested in non-VA care options. However, only 53 percent of the veterans given the choice to participate elected to receive non-VA care. Knowing they were presented with all available options lets veterans feel like they are making informed decisions that are best for them. The VFW feels that this is critical to increasing patient satisfaction, which was one of the main goals of establishing the Veterans Choice Program.

Wait-time Standard: While basing wait times on a clinically-indicated date is a step in the right direction, VA's wait-time standard still requires veterans to wait unreasonably long and remains susceptible to data manipulation. VA's current wait-time standard requires a veteran to wait at least 30 days beyond the clinically-indicated date before being considered eligible for the Veterans Choice Program. For example, if a VA health care provider deems it clinically necessary that a veteran receive a colonoscopy within 60 days, such veteran will be required to wait for a minimum of 90 days before being given the option to see a non-VA provider through the Veterans Choice Program. The VFW is concerned that veterans' health may be at risk if they are not offered the ability to receive care within the timeframe their VA providers deem necessary, regardless if it is through the Veterans Choice Program or VA care.

The VFW has also learned that the preferred date metric VA uses when a clinically indicated date has not been identified is identical to a deeply flawed metric called desired date. The desired date metric was used by VA to measure wait times for existing patients, before it changed the wait-time standard to the preferred date metric. The desired date metric was the subject of numerous Government Accountability Office and VA Office of the Inspector General reports and intensive Congressional oversight for being easily susceptible to data manipulation. VA's own access audit, which it launched mid-April 2014 to evaluate system-wide access issue, discovered that VA medical facility staff had been using several prohibited practices to manipulate desired date data, some were ordered to do so by managers to make wait-time reports appear more favorable.

During a House Committee on Veterans' Affairs hearing last year entitled "*Oversight Hearing on Data Manipulation and Access to VA Healthcare*," Acting VA Inspector General Richard J. Griffin said that VA schedulers were inputting the medical facility's next available appointment date as the date a veteran desired to be seen in order to zero out the veteran's wait time. The preferred date metric is equally susceptible to this prohibitive practice. Although VA has asked its local medical facilities to cease the use of prohibited scheduling practices, such practices may still be used if VA's scheduling system does not preclude them from doing so. When veterans call to schedule an appointment and are asked when they prefer to be seen, the first question they logically ask is, "when is the next available appointment?" If VA schedulers are not required to input a preferred date before accessing the next available appointment, they would have the ability to input the medical facility's next available appointment as the veteran's preferred date.

Geographic Eligibility: The VFW was concerned that the eligibility requirements established under VACAA for 40-milers do not align with the realities of traveling to a VA medical facility. VACAA requires VA to use the geodesic, also known as "as the crow flies," distance between a veteran's residence and the nearest VA medical facility when determining geographic eligibility. Veterans are accustomed to reporting their driving distance in terms of miles traveled when applying for beneficiary travel benefits – one of VA health care's most popular benefits. Thus, it is illogical to veterans that they can qualify for beneficiary travel of 40 miles, but cannot qualify for the Veterans Choice Program as a 40-miler. The intent of this provision was to ensure veterans do not travel unreasonably long distances to receive VA health care. However, the geodesic distance a veteran lives from a VA facility does not accurately capture the travel burden that veterans may face. Furthermore, using a metric that veterans feel is misleading only serves to diminish overall patient satisfaction, defeating one of the main goals of the Veterans Choice Program.

Non-VA Care Authorities: The VFW is also concerned that VA may not be leveraging all of its authority to offer non-VA care. The Veterans Choice Program has been a much needed boost to VA's ability to provide non-VA care. However, the Veterans Choice Program is temporary and is not the only authority VA has to provide purchased care. Veterans must be afforded the opportunity to obtain care closer to home if VA care is not readily available, especially when veterans have an urgent medical need that can be addressed more quickly through non-VA care. This is a particular concern for veterans who live within 40 miles from a VA medical facility, but such facility does not provide the care the veteran needs. Veterans who do not qualify for non-VA care through the Veterans Choice Program may still qualify for non-VA care through VA's numerous non-VA care authorities and programs, such as the Patient-Centered Community Care, or PC3, program. PC3 is a system-wide program that should allow veterans, who do not qualify for the Veterans Choice Program, but still face wait time or travel challenges accessing VA care, to receive care closer to home.

RECOMMENDATIONS:

Fortunately, the Veterans Choice Program is succeeding in offering options to veterans. The problem, however, is that many veterans who have been determined as eligible have yet to be given the opportunity to take advantage of the program. A program of this magnitude is likely to encounter these kinds of issues in its initial roll-out, which is why the VFW makes the following recommendations to ensure consistent delivery of health care options to veterans:

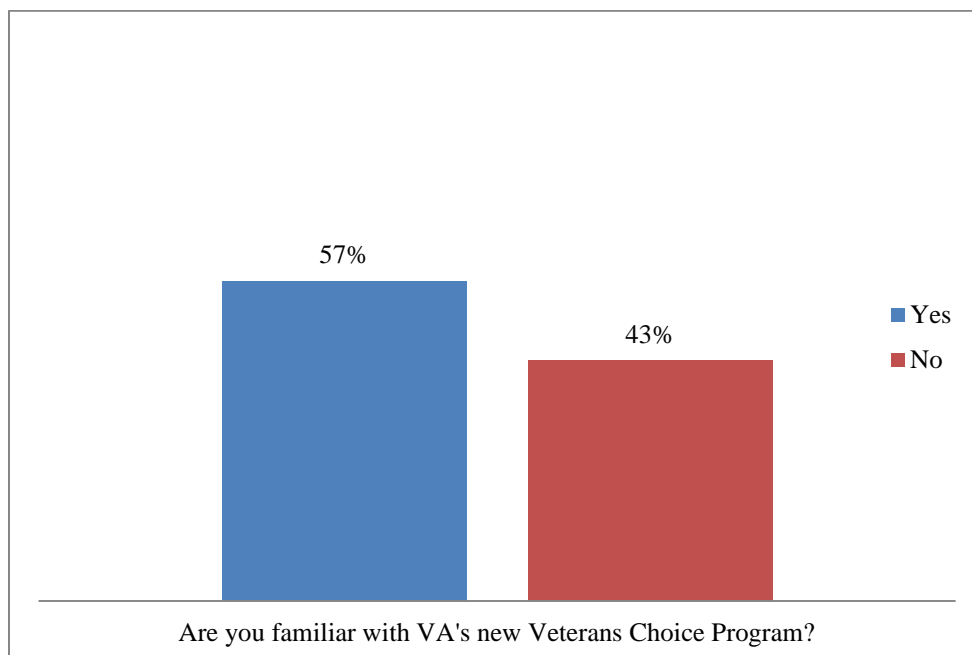
- VA must provide frontline personnel the training they need to ensure veterans who are eligible for the Veterans Choice Program are afforded the opportunity to participate.
- VA's wait-time standard must be modified to allow veterans to seek care through the Veterans Choice Program if such care cannot be provided at a VA medical facility within the clinically indicated date.
- VA must ensure the proposed Medical Appointment Scheduling System has a compliance aspect to preclude schedulers from using prohibited scheduling practices.
- Congress must amend VACAA by changing the Choice Program's geographic eligibility from geodesic distance to driving distance. In so doing, Congress would truly ensure veterans are not burdened with excessive travel to VA medical facilities.
- Congress must exercise proper oversight to ensure VA is properly utilizing all non-VA care authorities in cases where VA cannot readily provide care due to lack of available specialists, long wait times, or geographic inaccessibility.
- VA must ensure that Non-VA Care Coordination teams at all VA facilities are adequately staffed with professionals capable of handling the influx of work.

The VFW has been monitoring the Veterans Choice Program from day 1, and we will continue to monitor the program's success to identify shortcomings and work for reasonable solutions. This report is only the second in our series of reports on the state of VA health care and the implementation of the Veterans Choice Program.

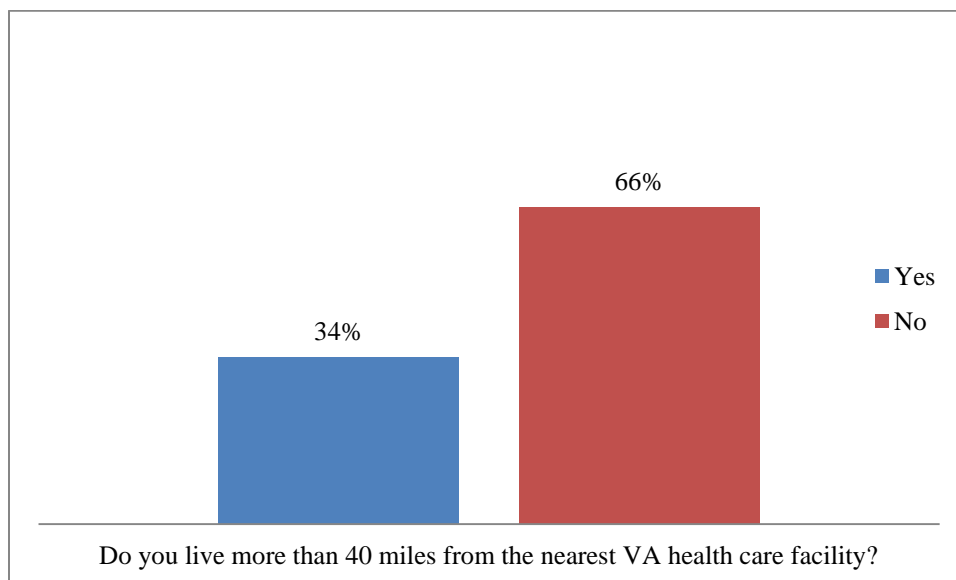
In order to continue holding VA accountable, we will need more input from veterans who interact with the VA health care system and who may be eligible for the Veterans Choice Program. To help the VFW hold VA accountable, take a few moments to complete the latest iteration of our survey at www.vfw.org/VAWatch.

APPENDIX:

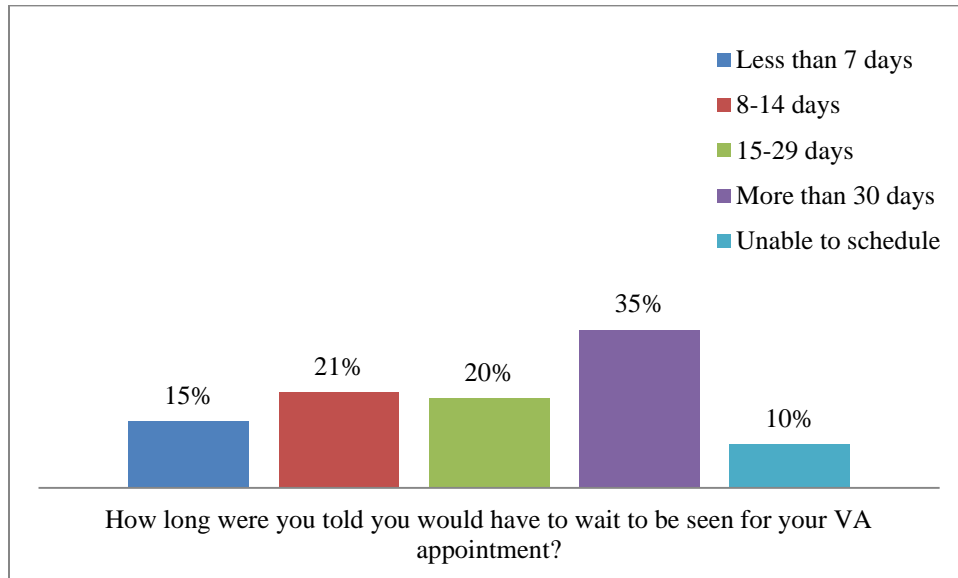
Charts of the responses the VFW received from the first Veterans Choice Program Survey. The initial survey was launched on December 5, 2014, and was closed on February 5, 2015. VFW received 2,511 responses. Enrollment in the VA health care system is a prerequisite for eligibility under the Veterans Choice Program, thus the charts below are controlled for enrollment.



Responses: 2,178 Yes: 1,243 No: 935

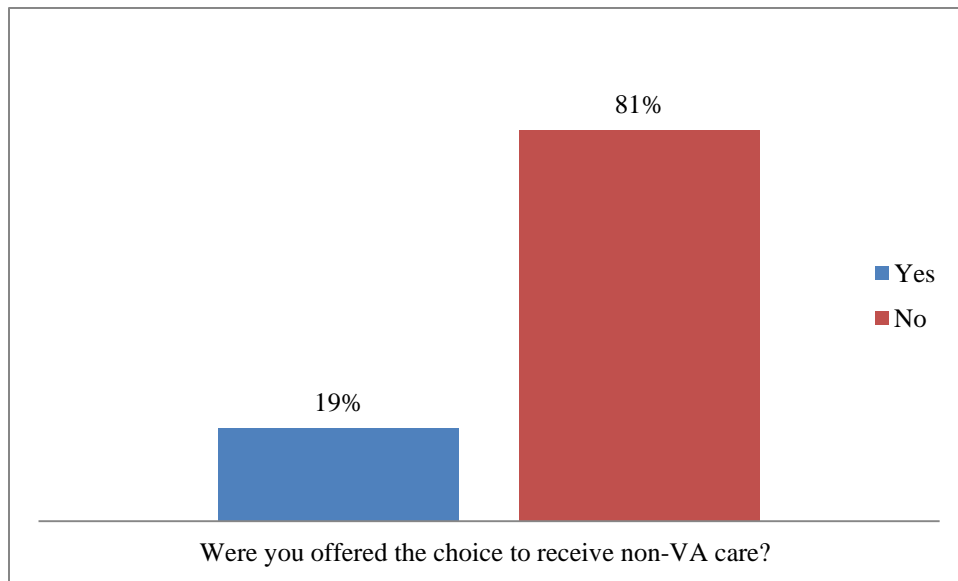


Responses: 2,157 Yes: 744 No: 1,413



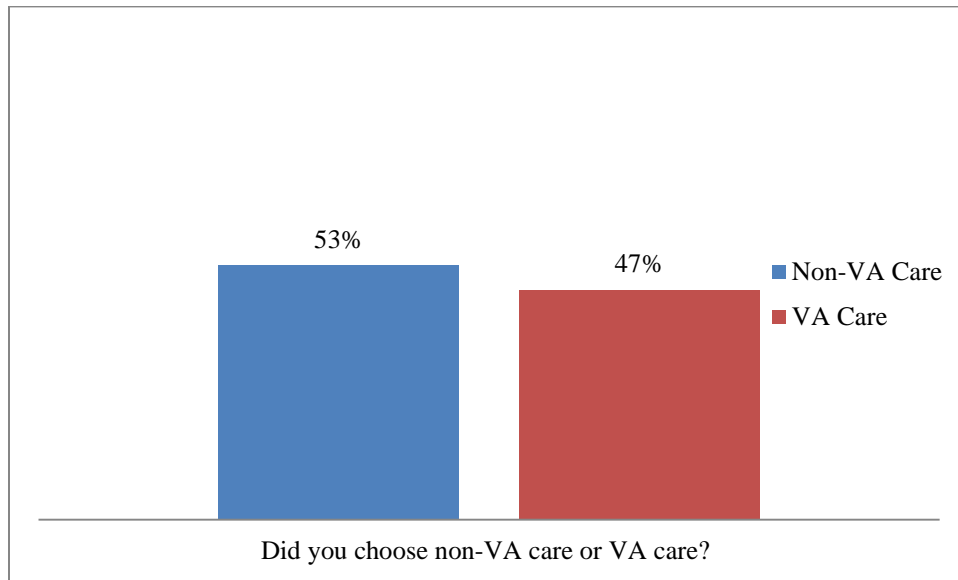
Only veterans who reported they attempted to schedule an appointment after November 5, 2014 were prompted to answer this question.

Responses: 746 < 7 days: 110 8-14 days: 157 15-29 days: 147 >30 days: 260 Unable:72



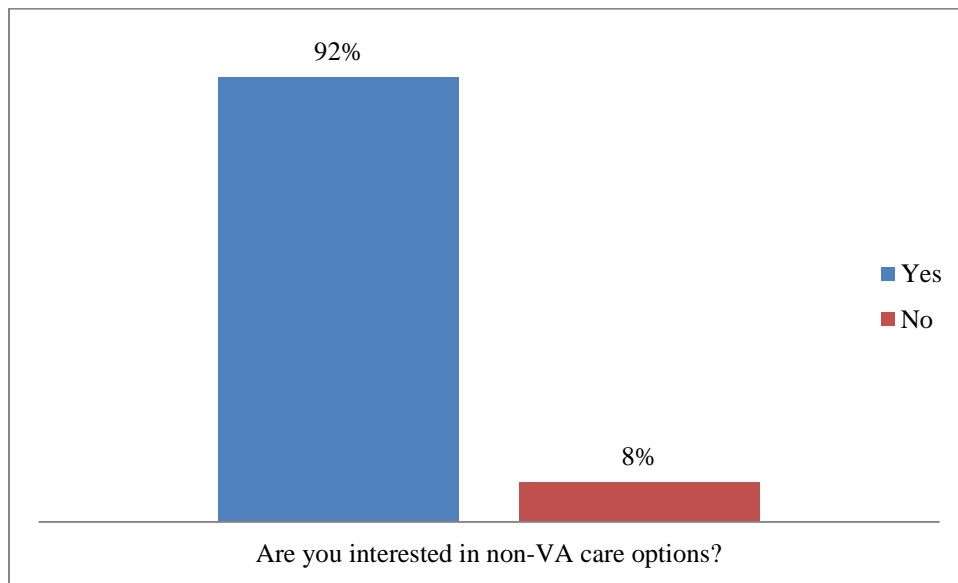
Only veterans who reported living more than 40 miles from a VA medical facility, waiting beyond 30 days for a VA appointment, or being unable to schedule a VA appointment were prompted to answer this question.

Responses: 1,069 Yes: 205 No: 864



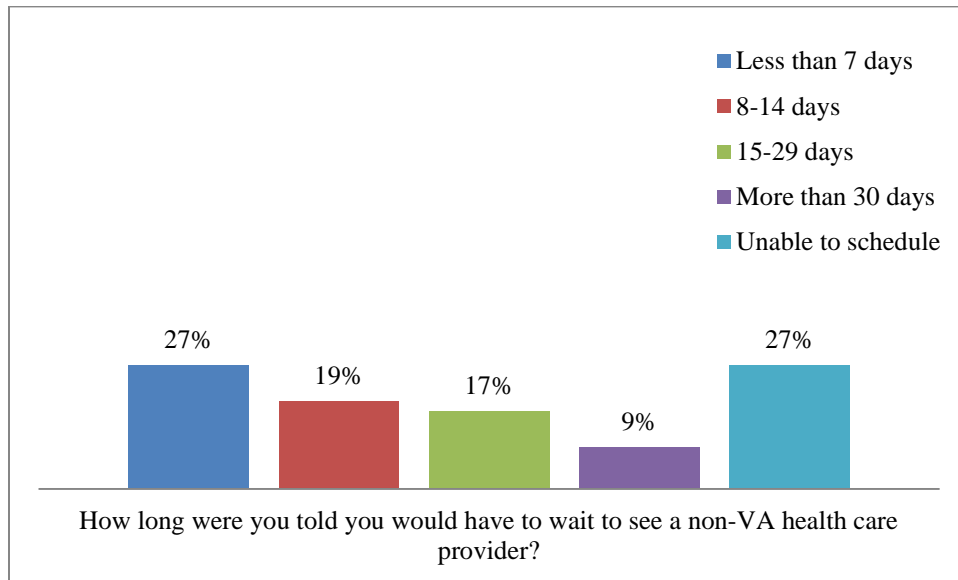
Only veterans who reported being offered non-VA care were prompted to answer this question.

Responses: 198 Non-VA: 104 VA Care: 94



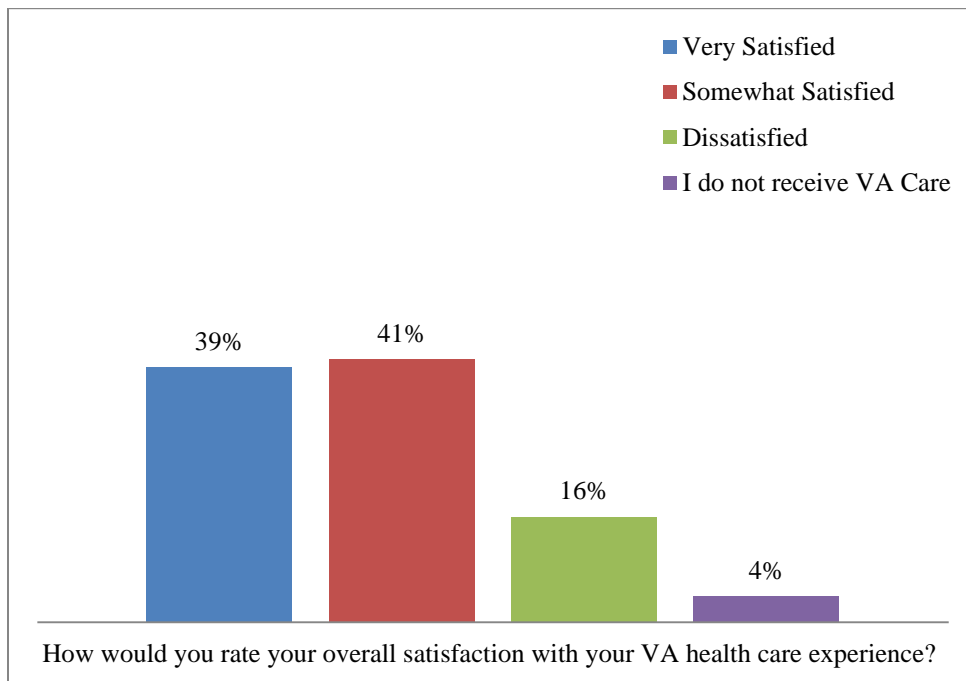
Only veterans who reported living more than 40 miles from a VA medical facility, waiting beyond 30 days for a VA appointment, or being unable to schedule a VA appointment and not offered non-VA care were prompted to answer this question.

Responses: 850 Yes: 781 No: 69



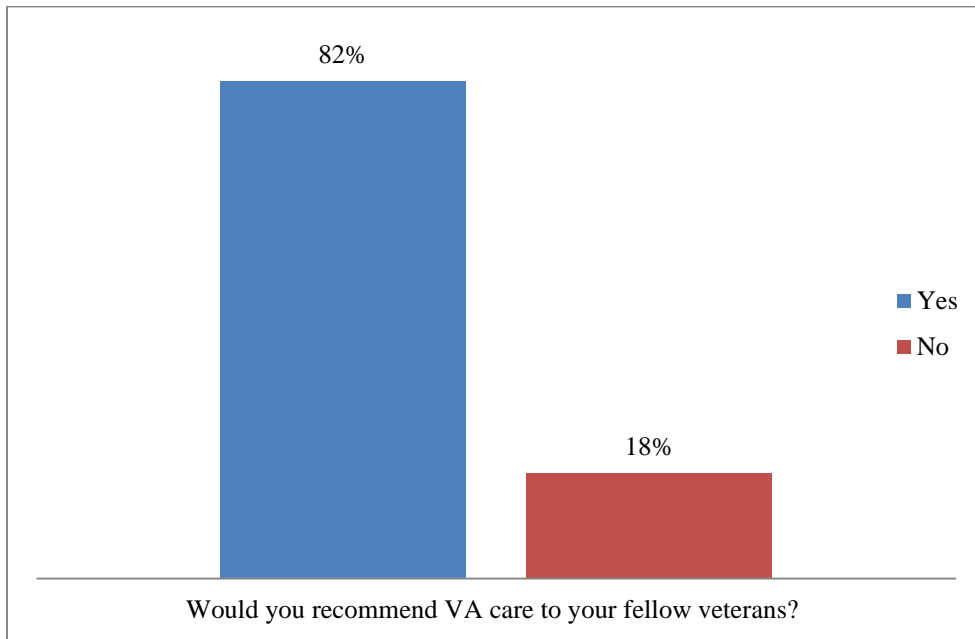
Only veterans who reported choosing non-VA care were prompted to answer this question.

Responses: 99 < 7 days: 27 8-14 days: 19 15-29 days: 17 >30 days: 9 Unable: 27



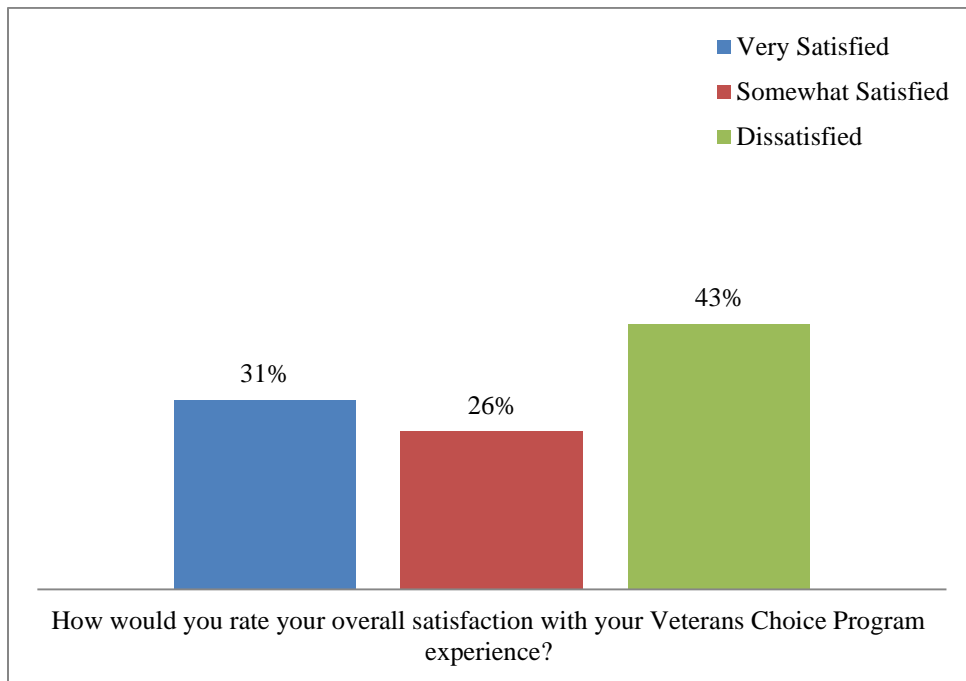
Veterans who reported choosing non-VA care were exempt from answering this question.

Responses: 2,002 Very: 785 Somewhat: 811 Dissatisfied: 325 Do not receive: 81



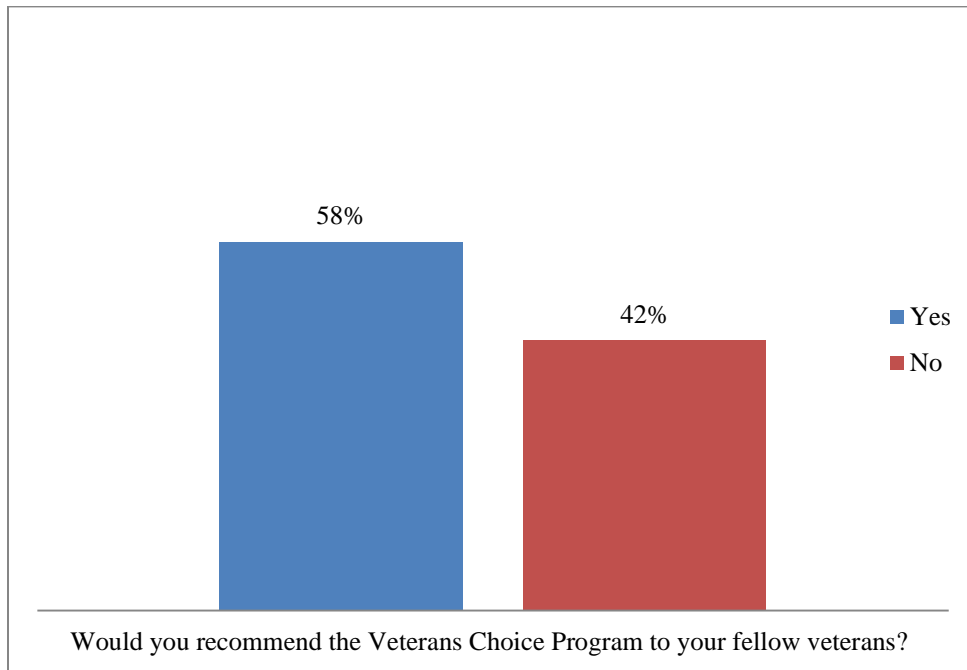
Veterans who reported choosing non-VA care were exempt from answering this question.

Responses: 1,919 Yes: 1,583 No: 336



Only veterans who reported choosing non-VA care were prompted to answer this question.

Responses: 97 Very: 30 Somewhat: 25 Dissatisfied: 42



Only veterans who reported choosing non-VA care were prompted to answer this question.

Responses: 97

Yes: 56

No: 41



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National Headquarters

406 West 34th St.
Kansas City, MO 64111
816-756-3390

Washington DC Office

200 Maryland Ave., N.E.
Washington, D.C. 20002
202-543-2239

vfwac@vfw.org