



ISSUE BRIEF: STRENGTHENING VETERANS HEALTH CARE

The Situation

- The Department of Veterans Affairs (VA) Veterans Health Administration (VHA) has evolved into a highly integrated system specializing in the distinct health and readjustment needs of wounded, ill and injured veterans and their family caregivers.
- VA has developed centers of excellence in prosthetics, spinal cord injury and disease, blind and low vision rehabilitation, treatment for post-deployment mental health challenges and post-traumatic stress disorder, environmental exposures, and preventative evidence-based treatments for veterans with chronic and complex health conditions. These services have evolved with wartime deployments, demographic changes in the veteran population and unique readjustment needs.
- Over the last decade, VA has become increasingly dependent upon community partners to meet the rising medical care needs of veterans because of the growing misalignment between the escalating demand for care and sluggish increase in capacity of the VA health care system.
- Modernization efforts mandated in the MISSION Act of 2018 (Public Law 115-182) are underway, which will further transform veterans' health care delivery by expanding eligibility—and thus demand for care—through VA's Community Care Network of private providers, improving IT systems and a required assessment of VHA's physical infrastructure.

The Challenge

- Congress and VA continue to increase the Department's breadth and depth of responsibility caring for wounded, ill and injured veterans without appropriately matched resources.
- VA services are not evenly distributed or available across the system and require VA to enhance its internal capacity and specialized programs designed to meet the unique needs of service-disabled veterans.
- VA has struggled to address the increased need for gender-specific programming and training for health providers to meet the significant increase of service-disabled women veterans seeking VA care and specialized readjustment services.
- Veterans who use the VA health care system expect providers in its Community Care Network to meet or exceed the same access and quality standards VA clinicians meet. However, third-party administrators of the VCN are not required to meet these standards, although some are voluntarily attempting to do so.

The Solution

- VA must remain the primary provider and coordinator of care for veterans who rely upon it to efficiently and effectively support veterans' care.
- Intended as a supplementary provider network to the VA health care system, the Community Care Network must be developed to ensure it is well integrated with the VA health care system to avoid fragmented, substandard care for veteran patients.
- VA must create standards for its Community Care Network partners that ensure access to and quality of care that meets or exceeds VA's standards, and that training is mandated to ensure providers' familiarity with veterans' unique health risks and care needs.
- Congress must provide oversight to ensure the VA MISSION Act is fully and faithfully implemented, as intended, in an open and transparent manner that provides regular opportunities for meaningful participation from VSOs and veteran patients at all critical decision points.
- Congress must provide VA with sufficient and timely funding to fully implement provisions included in the VA MISSION Act, and to meet the full demand for care by enrolled veterans within VA facilities and through community providers in the Veterans Community Care Program.