



AMVETS' Comments on VA Healthcare & A Roadmap for Improvements

Introduction & Background:

AMVETS, one of the preeminent Congressionally Chartered Veteran Service Organizations in the country, offers the following observations and recommendations to address some of the current problems within the VA healthcare system. Now is the time and opportunity to reform the VA to make it effective and efficient to best serve the needs of all veterans. Without cool heads and creative thinkers we'll never be able to move beyond the recent hysterics and put into effect viable workable solutions.

VA healthcare *is* the true cost of war. The cost of war has always been extremely high. The major burden of that cost has been borne by the men and women who have served their country in the military, especially during times of armed combat. Their healthcare needs differ from their civilian counterparts, a realization that originally led to the development of the VA healthcare system.

All American Veterans are keenly aware of the disconcerting allegations that numerous VA Medical Centers created 'secret wait lists,' falsified health records, and destroyed evidence to hide the fact they were not providing timely and appropriate health care to our nation's veterans. The scores of stories are shocking and disappointing. The cold hard fact that Veterans wait months for treatment, suffer terrible ailments and chronic pain, even death, can only be deemed as purposeful neglect.

The VA compares to the mythical hydra – an isolated problem arises and we either throw money at it or chop it off. Before we know it more problems pop up to take its place. This insanity of doing the same things the same way and expecting a different outcome is historically how the VA has operated. Now is the time to slay the #VAHydra by effectively changing its culture.

The spate of current problems within the VA healthcare system are neither new nor unusual. Throughout its history, even back to the predecessor Bureau of Pensions, there have been difficulties within the VA, the very system created to minister to their unique healthcare needs. A series of Congressional hearings at the end of World War I identified a nightmare of red tape, inefficiency and neglect and determined VA hospitals couldn't adequately meet the needs of our veterans. Various government officials have been aware of these problems for years, but failed to take action. There can be no doubt the VA suffers from deep seated, systemic problems and neither the department nor its employees believe that they are actually accountable to either the veterans they serve, or the American people who pay their generous salaries.

It's also critical for the positives of the VA healthcare system to move into the limelight. Those positives outlined in the *Independent Budget (IB)* include that VA:

- Is the largest direct provider of health-care services in the nation;
- Provides the most extensive training environment for healthcare professionals;
- Is the nation's most clinically focused setting for specialized medical and prosthetics research;
- Provides specialized health-care services in a number of areas that cannot be adequately duplicated in the private sector (e.g., spinal cord injury/dysfunction; blind rehabilitation; traumatic brain injury; prosthetic services; mental health; and war-related poly-traumatic injuries);
- Is among the most efficient and cost-effective healthcare system in the nation;
- Sets the standards for quality and efficiency at or below Medicare rates, while simultaneously serving a population that is older and has a higher percentage of individual health problems

We cannot overemphasize one crucial point, VA healthcare is the nation's largest integrated health care network with millions of participants, countless medical centers and community based outpatient clinics worldwide. Like any large system, it will have problems. Not to say that problems shouldn't be addressed, but they shouldn't be unexpected either. Problems, up to and including preventable deaths, are not the exclusive domain of VA hospitals. The vast majority of our veterans receiving healthcare from the VA receive excellent, cutting-edge care and [VA's approval rating](#) is well above that of most any civilian hospital.

A complete top-to-bottom culture change is needed to renew the nation's commitment to our veterans, not a new system. The problems are not going to be fixed by merely appointing a new Secretary or other chiefs. With drastic changes needed at each and every level of the organization, no one should be excluded from this much overdue 'spring cleaning,' up to and including VA contractors.

It is our responsibility to vigorously defend a system that has set itself above all other major health-care systems in this country. In spite of all of the criticism that the VA health-care system receives, it continues to outperform every other health-care system in America, both in quality of care and patient satisfaction. The one main focus moving forward is the health and well-being of our veterans. AMVETS offers these recommendations to help save and improve our VA healthcare system, not eliminate it:

Specific Recommendations:

1. Ensure both advanced appropriations and discretionary funding for VA, as recommended in the IB, keeps pace with medical care inflation and healthcare demand so that all veterans healthcare needs can be adequately met;
2. Maximize the use of non-physician medical personnel to mitigate physician shortages and reduce patient wait times especially while utilization of the VA system continues to rise;
3. Ensure VA makes more realistic third-party medical care collection estimates so that Congress doesn't under-appropriate funds based on false expectations which in turn negatively impact veteran care

- a. VA needs to redouble its efforts to *increase* its medical care collections efforts (the cumulative effects of overestimating and under-collecting only degrade the care available to our veterans)
 - b. Establish both first- and third-party copayment accuracy performance measures which would help minimize wasted collection efforts and veteran dissatisfaction;
4. Incorporate civilian healthcare management best practices to attract the best and the brightest healthcare managers in the industry
 - a. Include a pathway to VA hospital/clinic management for civilians as part of their succession plan requirements
 - b. Adopt proven recruitment, hiring and retention policies to ensure the timely delivery of high quality healthcare to our veterans. (VA's current cumbersome and overly-lengthy hiring process reduces its ability to deliver critical services. Adopting a more expedient hiring/approval process could include some form of provisional employment;
5. Immediately increase doctor/patient (d/p) ratio to realistic and productive levels; this one change would drastically improve access to needed healthcare by cutting wait times for veterans needing treatment and/or referrals
 - a. Current VA (d/p) ratio is only 1:1200, the (d/p) ratio for non-VA physicians is close to 1:4200;
6. Improve the patient management system to provide veterans more appointment setting options and reduce staffing errors and requirements
 - a. Utilize a private sector best practice hybrid system whereby a portion of the day consists of scheduled appointments and the other portion for walk in or same-day appointments
 - b. Eliminate the need for non-specialty appointments to allow veterans quicker access to their primary care providers;
 - c. Expand primary care appointment hours to include evening/after hours and Saturdays to help reduce wait times and improve access to needed healthcare
7. Bring in outside advisory/consulting expertise to reassess VA's organizational structure and improve its healthcare operations
 - a. Adopt private sector best practices for system efficiencies, maximizing human and financial resources, and minimizing waste and redundancies;
 - b. Incorporate private sector best practices to rebalance the administrative staff to patient-focused clinical staff ratios
 - c. Reduce administrative staff by implementing monitoring and patient advocacy positions at VA Medical Centers to be resourced by trained volunteers from Veteran and Military Service Organizations
8. Collaborate with HHS (Health & Human Services) to utilize/share the benefits of the Uniform Data System (UDS)
 - a. The UDS is a core set of information appropriate for reviewing and evaluating the operation and performance of individual health centers. The ability to track,

through the UDS system, a wide variety of information, including patient demographics, services provided, staffing, clinical indicators, utilization rates, costs, and revenues would be invaluable in improving the overall VA healthcare system;

9. Collaborate with HHS (Health & Human Services) to allow veterans to utilize the existing system of Federally Qualified Health Centers (FQHC):
 - a. FQHCs include all organizations receiving grants under section 330 of the Public Health Service Act, certain tribal organizations, and they qualify for enhanced reimbursement from Medicare and Medicaid, as well as other benefits.
 - b. FQHCs are required to serve an underserved area or population; offer a sliding fee scale; provide comprehensive services; have an ongoing quality assurance program; and have a governing board of directors
 - c. Rather than going unseen or untreated due to limited appointment or physician availability, veterans could seek immediate care on a temporary basis until the VA appointment backlog is eliminated;
10. Exercise the option to terminate non-performing employees at all levels of the organization so that only dedicated, accurate, motivated employees will remain in service to our veterans; and
11. Reform incentive programs so that only high-performing employees receive appropriate bonuses for their excellence in serving our veterans

Closing Remarks:

Recognition of any problems within the VA healthcare system should not be taken as a need or desire to completely dismantle or replace our existing veterans' healthcare system, but only to improve it. The cultural and healthcare needs of our veterans are unique and the VA alone is uniquely qualified to meet those important needs. The basic framework for success is already in place and immediate results are achievable with prompt, effective and culture-changing best practices; let's not throw out one of the premier healthcare systems in the world in our haste to fix these current problems or achieve political goals.

Every American Veteran who has worn the uniform of this country has had to fight to secure and retain this most important earned benefit. AMVETS' recommendations are intended to serve and honor the men and women who are America's Veterans by assisting VA in fulfilling its stated mission, 'To care for him who shall have borne the battle and for his widow, and his orphan.'