



Federal Update for October 26 - 30, 2015



VA Officials Skirt Congressional Hearing

Posted on October 22, 2015

by Donnie La Curan in Veteran News

Already deeply concerned about a recent Inspector General's report that found senior VA officials misused relocation funds, American Legion National Commander Dale Barnett expressed disappointment that VA witnesses declined to appear before a congressional committee this morning to explain their actions.

"This is not some partisan issue between Congress and the Veterans Benefits Administration," Barnett said. "It is about providing answers to the serious charges of the IG that the directors of the Philadelphia and St. Paul, Minn., VA Regional Offices (VAROs) inappropriately used their positions of authority for personal and financial benefit. Veterans deserve answers. The witnesses could have taken the easy route and explain their actions or they could have taken the evasive route. They chose the latter. Chairman Jeff Miller and the House Committee on Veterans' Affairs are to be commended for unanimously voting this morning to issue subpoenas which will require the witnesses to appear next month so that they can explain their actions. Veterans have waited long enough."

VA Deputy Inspector General Linda Halliday was the only witness to show up at the hearing, which was attended by Barnett and other Legionnaires. Her report determined that Philadelphia VARO Director Diana Rubens and St. Paul VARO Director Kimberly Graves used their prior positions to coerce the previous directors to accept reassignment and create openings that they themselves would fill, while retaining their higher salaries for their new lower-level positions.

Moreover, Rubens and Graves collected \$274,019 and \$129,467 respectively in relocation costs. According to the IG, when Rubens informed then-VA Under Secretary for Benefits Allison Hickey that she wanted "to take advantage of the Philly Director opening," Hickey responded that she would "be all in to help and make it happen."

Although Hickey resigned on Oct. 16, Barnett pointed out that VA is still seriously lacking in transparency and accountability. "It is not about one person resigning. It is about a culture at

VA that allows people to think that they can get away with waste, fraud and abuse, while veterans continue to wait for their health care and disability claims to be delivered in a timely manner. The American Legion will be at the next hearing. And the next one and the next one after that. We support the need for a strong VA health care system but we are not going to tolerate a department that puts the careers of government workers ahead of the needs of veterans. Not only should bad actors at VA be fired, in some cases they should be prosecuted.”

With a current membership of 2.2 million wartime veterans, The American Legion was founded in 1919 on the four pillars of a strong national security, veterans affairs, Americanism, and youth programs. Legionnaires work for the betterment of their communities through nearly 14,000 posts across the nation.

SOURCE The American Legion

Army Corps of Engineers Waives Day Use Fees at Recreation Areas on Veterans Day

by Donnie La Curan in Discounts

The U.S. Army Corps of Engineers (USACE) announced today that it will waive day use fees for veterans, active and reserve component service members, and their families at the more than 2,800 USACE-operated recreation areas nationwide on Veterans Day, November 11.

The fee waiver requires only verbal confirmation of service. The waiver covers fees for boat launch ramps and swimming beaches. The waiver does not apply to camping and camping-related services, or fees for specialized facilities such as group picnic shelters. Other agencies that manage recreation areas on USACE lands are encouraged, but not required, to offer the waiver in the areas that they manage.

“To honor the nation’s veterans, we will continue our Veterans Day tradition of inviting veterans, active and reserve service members, and their families to visit one of the thousands of USACE recreation sites throughout the country, free of day use charges,” said Maj. Gen. Ed Jackson, Deputy Commanding General for Civil and Emergency Operations, U.S. Army Corps of Engineers.

“We encourage people of all ages to get outdoors this Veterans Day and enjoy a day of fun and relaxation while participating in the wide variety of activities that are available at our many recreation areas,” added Jackson.

USACE is the nation’s largest federal provider of outdoor and water-based recreation hosting more than 370 million visits annually to its more than 400 lakes and river projects. It’s estimated that 90 percent of the USACE-operated recreation areas are within 50 miles of

metropolitan areas offering diverse outdoor activities for all ages close to home. To discover a USACE recreation site nearest you, please visit corpsslakes.usace.army.mil/visitors/visitors.cfm.
SOURCE U.S. Army Corps of Engineers

Electronic Health Records: VA and DOD Need to Establish Goals and Metrics for Their Interoperability Efforts

What GAO Found

As GAO reported in August 2015, the Departments of Veterans Affairs (VA) and Defense (DOD), with guidance from the Interagency Program Office (IPO) tasked with facilitating the departments' efforts to share health information, have taken actions to increase interoperability between their existing electronic health record systems. These actions have included work on near-term objectives such as standardizing certain health data and making them viewable by clinicians in both departments in an integrated format. The departments also developed plans for their longer-term initiatives to modernize their respective electronic health record systems. In accordance with its responsibilities, the IPO issued guidance outlining the technical approach for achieving interoperability between the departments' systems.

Having taken these actions, however, the departments did not, by the October 1, 2014, deadline established in the *National Defense Authorization Act (NDAA) for Fiscal Year 2014* for compliance with national standards, certify that all health care data in their systems complied with national data standards and were computable in real time. Moreover, the departments do not plan to complete the modernization of their electronic health record systems until well after the December 2016 statutory deadline by which they are to deploy modernized electronic health record software while ensuring full interoperability. Specifically, VA plans to modernize its existing system, while DOD plans to acquire a new system; but their plans indicate that deployment of the new systems with interoperable capabilities will not be complete until after 2018.

Consistent with its responsibilities, the IPO took steps to begin developing metrics to monitor progress related to the standardization of the departments' data and their exchange of health information. For example, it called for the development of tracking metrics to gauge the percentage of data domains within the departments' current systems that have been mapped to national standards. However, the office had not defined outcome-oriented metrics and related goals to measure the effectiveness of interoperability efforts in terms of improving health care services for patients served by both departments. IPO officials said that work was ongoing to develop more meaningful measures of progress, but the office had not established a time frame for completing this work or incorporating the outcome metrics and associated goals into its guidance. GAO concluded that without defining outcome-oriented metrics and related goals and incorporating them into their current approach, the departments and the IPO will not

be in a position to effectively assess their progress toward further achieving interoperability and identifying the benefits that their efforts yield.

Why GAO Did This Study

VA and DOD operate two of the nation's largest health care systems, serving millions of veterans and active duty members and their beneficiaries. For almost two decades the departments have undertaken various efforts to advance interoperability between their respective electronic health record systems. While the departments have made progress, these initiatives have also faced significant management challenges. Among their recent initiatives, the secretaries of the two departments committed to establishing interoperability between their separate electronic health record systems, which they are working to modernize. This statement summarizes GAO's August 2015 report (GAO-15-530) on VA and DOD's efforts to achieve interoperability between their health records systems.

What GAO Recommends

In its August 2015 report, GAO recommended that VA and DOD, working with the IPO, establish a time frame for identifying outcome-oriented metrics, define goals to provide a basis for assessing and reporting on the status of interoperability, and update the IPO's guidance accordingly. The departments concurred with GAO's recommendations.

VA Mental Health: Clearer Guidance on Access Policies and Wait-Time Data Needed

What GAO Found

The way in which the Department of Veterans Affairs' (VA) Veterans Health Administration (VHA) calculates veteran mental health wait times may not always reflect the overall amount of time a veteran waits for care. VHA uses a veteran's preferred date (determined when an appointment is scheduled) to calculate the wait time for that patient's full mental health evaluation, the primary entry point for mental health care. Of the 100 veterans whose records GAO reviewed, 86 received full mental health evaluations within 30 days of their preferred dates. On average, this was within 4 days. However, GAO also found

- veterans' preferred dates were, on average, 26 days after their initial requests or referrals for mental health care, and ranged from 0 to 279 days. Further, GAO found the average time in which veterans received their first treatment across the five VA medical centers (VAMC) in its review ranged from 1 to 57 days from the full mental health evaluation.
- conflicting access policies for allowable wait times for a full mental health evaluation—14 days (according to VHA's mental health handbook) versus 30 days (set in response to recent legislation) from the veteran's preferred date—created confusion among VAMC officials about which policy they are expected to follow. These conflicting policies are inconsistent with federal internal control standards and can hinder officials' ability to ensure veterans are receiving timely access to mental health care.

VHA monitors access to mental health care, but the lack of clear policies on wait-time data precludes effective oversight. GAO found VHA's wait-time data may not be comparable over time and between VAMCs. Specifically

- data may not be comparable over time. VHA has not clearly communicated the definitions used, such as how a new patient is identified, or changes made to these definitions. This limits the reliability and usefulness of the data in determining progress in meeting stated objectives for veterans' timely access to mental health care.
- data may not be comparable between VAMCs. For example, when open-access appointments are used, data are not comparable between VAMCs. Open-access appointments are typically blocks of time for veterans to see providers without a scheduled appointment. GAO found inconsistencies in the implementation of these appointments, including one VAMC that manually maintained a list of veterans seeking mental health care outside of VHA's scheduling system. Without guidance stating how to manage and track open-access appointments, data comparisons between VAMCs may be misleading. Moreover, VAMCs may lose track of patients referred for mental health care, placing veterans at risk for negative outcomes.

Why GAO Did This Study

Between 2005 and 2013, the number of veterans receiving mental health care from VHA increased 63 percent, outpacing overall growth in veterans receiving any VHA health care. In fiscal year 2014, VHA spent more than \$3.9 billion providing outpatient specialty mental health care (mental health care) to more than 1.5 million veterans.

GAO was asked to examine VHA's efforts to provide timely access to mental health care for veterans. This report examines, among other things, (1) veterans' access to timely mental health care, and (2) VHA's related oversight. GAO conducted site visits to five VAMCs selected to provide variation in factors such as location and mental health care utilization rates; reviewed a randomly selected, non-generalizable sample of 100 medical records (20 from each of the five selected VAMCs) for veterans new to mental health care who received treatment between July 1, 2014, and September 30, 2014; and interviewed VHA and VAMC officials on VHA's measures and oversight of access to mental health care. GAO evaluated VHA's oversight of access to mental health care against relevant federal standards for internal control.

What GAO Recommends

GAO recommends that VHA issue clarifying guidance on (1) access policies; (2) definitions used to calculate wait times; and (3) how open-access appointments are to be managed. VHA concurred with GAO's recommendations but disagreed with certain of its findings, for example, GAO's calculation of overall wait-times. GAO maintains its findings, as discussed in the report, are valid.

The Inaugural Veterans Awards

by Donnie La Curan in Veteran News

The Prestigious Veterans Awards, hosted by Mission Complete, will be held at The George Washington University's Lisner Auditorium on November 11, 2015.

The ceremony will include esteemed representatives from distinguished Veteran organizations, Washington dignitaries, and Veterans themselves, along with their loving families. The Veterans Awards will honor those organizations that have dedicated their work to creating an America where our nation's heroes are able to lead the lives warranted and access the assistance they deserve. The Veterans Awards celebrates the heroes of our Armed Forces, their families, and the community of organizations that salute their valor. This ceremony will be the first and only of its kind with Veterans from many generations honoring those who have kept their promise of serving them.

Presenters will include honored Military officials COL Tamara Morris (United States Army) and Rear Admiral (RET) Annie B. Andrews (United States Navy), actress Kate Walsh, actor Colin Egglesfield, Mental Health America's Vice President Debbie Plotnick, and Washington's own Miss DC 2015, Haely Jardas. Host Committee includes: Honorable John McCain, Senator (R-Arizona); Ben Affleck; Honorable Joe Barton, Representative (R-TX); Jack Black, Honorable Sherrod Brown, Senator (D-OH); Honorable Thad Cochran, Senator (R-MS), and many more.

As a military friendly university in our nation's capital, and a long standing aid to the Veteran community, George Washington University has been officially chosen to host the prestigious Veterans Awards. The institution's Lisner Auditorium has long been considered a national historical landmark ever since it opened its doors in 1946. It has held several legendary events in the past and is ideal in accommodating the high volume of service members expected to attend.

The Ceremony will begin with Veterans and celebrities arriving on the Red Carpet followed by Veteran organizations being honored for their service. Immediately following the award ceremony, VIP dinner and The Official After Party of The Veterans Awards will commence. As a university rooted in an era when America overcame a great deal, George Washington University's Kogan Plaza serves as the perfect platform in taking our Veterans and guests back in time. The After Party is an event that will be filled with many classic themes of the 1940's. Mission Complete is a non-profit organization dedicated to ensuring that every single honorably discharged United States Veteran finds gainful employment.

www.theveteransawards.com

SOURCE Mission Complete