



Federal Update for November 10 - 14, 2014



Veterans Affairs Secretary McDonald Updates Employees on MyVA Reorganization Plans

Washington, DC – On November 10, Department of Veterans Affairs (VA) Secretary Robert McDonald sent the following message to all VA employees: In the last few months as your Secretary, I have met and heard from Veterans and family members about how we can better serve Veterans. I've also traveled to VA facilities across the country and have had the extraordinary opportunity to meet with you, the men and women who work on the front lines and behind the scenes to care for and serve Veterans every day. These opportunities have informed my thinking as we work to plan for the future of the Department. Already, more than 2,000 VA employees at 20 facilities serving 1.4 million Veterans have shared their perspectives on how we can improve this Department, and have provided insightful and thoughtful feedback about how VA should be organized to better serve Veterans. It is clear that our shared mission is important to you and your colleagues. It's also clear that you share my goal of making VA easier to navigate for Veterans. I am grateful for your contributions, and your support in this endeavor.

As we have been considering changes to VA, we have also met with Veterans, Veterans Service Organizations (VSO), NGOs, and other stakeholders. We have used your feedback, and the common themes we heard in all comments, to begin shaping the way forward for VA. Soon, we will begin implementing changes to VA, to better structure our organization to meet Veteran needs. Our new alignments may change some of our processes, but our employees remain valued members of the team.

Our shared goals are to ensure that Veterans have a clear understanding of VA and where to go for what they need within any of our facilities; that employees are empowered with the authority, knowledge and tools they need to solve

problems and take action; and that the products and services that we deliver to Veterans are integrated within the organization. The changes we plan to make are as follows:

- Establish a new **VA-wide customer service organization** to ensure we provide top-level customer service to Veterans. A Chief Customer Service Officer who reports to the Secretary will lead this effort. The mission of the new office will be to drive VA culture and practices to understand and respond to the expectations of our Veteran customers.
- Establishing a **single regional framework** that will simplify internal coordination, facilitate partnering and enhance customer service. This will allow Veterans to more easily navigate VA without having to understand our inner structure.
- Working with our partners to establish a national network of **Community Veteran Advisory Councils** to coordinate better service delivery with local, state and community partners. Expanded public-private partnerships will help us coordinate Veteran-related issues with local, state and community partners, as well as VA employees.
- Identifying opportunities for VA to realign its internal business processes into a **shared services** model in which organizations across VA leverage the same support services, to improve efficiency, reduce costs and increase productivity across VA. Right now, we're looking at options used in the private sector to enhance our rapid delivery of services, and also at our own business processes that are suited for shared services.

Please keep in mind that this is a long-term process and we are just beginning to plan how this will all unfold. As we move forward with these changes, your feedback, ideas and perspective will be invaluable. To gather your suggestions, we have launched an intranet web tool, the My VA Idea House, where employees from across VA can submit ideas online to improve services, streamline processes and solve issues for Veterans and their families. Employees can also vote on submissions from your colleagues across VA. Sponsors will select ideas and create topic-related groups to encourage collaboration and help make the ideas a reality. The Idea House website will officially open for submissions tomorrow, Veterans Day, Nov. 11. I encourage you to go to vaideahouse.ideascale.com to submit your ideas and proposed solutions to the challenges you are seeing.

I know there are a lot of questions about this effort, and I know that there will be concerns. We don't have all the answers right now, and that's why we are reaching to you for your thoughts. This will be a fair and deliberate process, and we need your help to make sure our decisions are the right ones for Veterans. As we collect input and work together to design an employee-led, Veteran-centric VA, we have a great opportunity to make significant progress toward our goals in the near term. Thank you for the work you are doing each day to make VA a stronger organization for America's Veterans.

VA's Center for Women Veterans Partners with the Center for American Women and Politics

The Department of Veterans Affairs' (VA) Center for Women Veterans (Center) entered into a memorandum of agreement (MoA) with the Center for American Women and Politics (CAWP), a unit of the Eagleton Institute of Politics at Rutgers, the State University of New Jersey, to increase women Veterans' leadership and career opportunities, which will benefit the Nation's workforce and address women Veterans growing needs.

The MoA will allow the Center and CAWP to leverage existing resources and increase coordination of activities to help women Veterans develop public service and community engagement skill sets, so they will be prepared for public and community service opportunities.

"Women Veterans often contact us for information about how they can continue serving," says Elisa M. Basnight, Director of the Center for Women Veterans. "This MoA with the Center for American Women and Politics presents a prime opportunity for the Center to help prepare them for other forms of public service as it responds to a persistent need women Veterans tell us they have, which is the desire to continue to make a difference after the uniform."

The Center, created in 1994 to monitor VA's administration of benefits and services to women Veterans and to advise the Secretary on VA policy's impact on Women Veterans, can provide advice to CAWP's on how it focuses its resource information to address women Veterans' issues.

CAWP is a source of scholarly research and current data about American women's political participation. Its mission is to promote greater knowledge and understanding about women's participation in politics and government and to enhance women's influence and leadership in public life.

“The Center for American Women and Politics is delighted to collaborate with the Center for Women Veterans to provide more information and resources for women Veterans who want to engage more fully in their communities. Women who have already put their country first by serving in the military are exactly the people we need as public leaders,” said Debbie Walsh, Director of the Center for American Women and Politics.

Women Veterans represent one of the fastest growing segments of the Veterans population—about 10 percent of the total 22 million Veterans in this country. Today there are an estimated 2.2 million female Veterans. The Center for Women Veterans participates in collaborative initiatives with Federal/state/local governmental and non-governmental stakeholders, to improve opportunities for women Veterans.

Military and Veteran Support: DOD and VA Programs That Address the Effects of Combat and Transition to Civilian Life

What GAO Found

GAO identified 99 programs provided by the Department of Defense (DOD) to help address the effects of combat on post-9/11 servicemembers, their families, or both. These programs often offer multiple types of services. The services most common are mental health and substance abuse (50), information and referral (37), and case management or care coordination (15).

GAO identified 87 programs administered either by DOD or the Department of Veterans Affairs (VA) to help post-9/11 servicemembers and veterans transition to civilian life. Some of the 87 programs offer more than one type of service, such as the Transition Assistance Program, which offers employment, education, and information on veterans' benefits, among other services (see figure).

Transition to Civilian Life: Number of DOD and VA Programs by Type of Service



Source: GAO analysis of Department of Defense (DOD) and Department of Veterans Affairs (VA) programs. | GAO-15-24

Note: The numbers of programs by type of service do not equal 87 because some programs provide more than one service. The frequency of a type of service does not necessarily indicate its utilization.

GAO identified 12 programs administered by either DOD or VA to raise public awareness and understanding of servicemembers' and veterans' experiences in combat, coming home, and transitioning to civilian life. For example, among the nine DOD programs identified, the Briefings with the Boss program convenes employers and National Guard and Reserve members to discuss issues linked to military service and civilian employment.

The lists of programs that GAO developed using its definition are not comparable with those in DOD's 2013 program inventory and have only limited comparability with VA's 2013 program inventory. This limited comparability is primarily due to differing contexts in which the lists were compiled. While GAO's lists address specific mandated questions, DOD's and VA's lists were developed following Office of Management and Budget guidance, which generally provides flexibility in how agencies define their programs. Both DOD and VA chose to identify programs at a broad level. For example, DOD's inventory is partially organized by its strategic goals. One goal is "preserving and enhancing the all-volunteer force," for which wounded warrior care is cited as a high priority. Under this goal, DOD lists "hospitals" and "regional defense facilities" as programs. In contrast, GAO identified individual programs, such as the Army Wounded Warrior Program and Warrior Transition Units, which were not listed in DOD's inventory.

Why GAO Did This Study

DOD and VA play key roles in offering post-combat support to servicemembers and veterans through various programs and activities. Congress mandated that

GAO identify DOD and VA programs designed to address the effects of combat on servicemembers who have served during recent conflicts, assist servicemembers and veterans with the transition to civilian life, and raise public awareness of these issues.

In this report GAO identified the number of programs, including the types of services offered that: 1) address the effects of combat on post-9/11 active-duty servicemembers and their families, 2) help post-9/11 servicemembers and veterans transition to civilian life, and 3) help raise public awareness and understanding of servicemembers' and veterans' combat and transition experiences. Also, GAO examined how the lists of programs identified compare with program inventories prepared by DOD and VA pursuant to law. To address these objectives, GAO established and applied its definition of “program.” In general, GAO defined programs as federally funded, organized sets of activities agencies undertake that are directed toward specific purposes or goals and are being administered in fiscal year 2014. GAO also searched publicly available sources that contain lists of programs; sent preliminary lists of programs to DOD and VA for verification; and reviewed relevant reports and 2013 program inventories for DOD and VA.

This report contains no recommendations.

Dependents’ Educational Assistance Update ► Fry Scholarship Option

The Department of Veterans Affairs (VA) announced it will begin accepting applications by mail on November 3, 2014, for the Fry Scholarship under newly expanded eligibility criteria to include surviving spouses. The expanded criteria for the Fry Scholarship is the latest in a series of VA actions to implement provisions of the Veterans Access, Choice, and Accountability Act of 2014 (“Choice Act”). Specifically, Section 701 of the Choice Act expands the Fry Scholarship to include the surviving spouses of Servicemembers who died in the line of duty after September 10, 2001. Prior to this expansion, only children of those who died in the line of duty were eligible for this benefit. “We can never fully repay the debt we owe to these families who have lost a loved one,” said VA Secretary Robert

McDonald. “It is a privilege to provide educational benefits that will make a positive difference in their lives.”

The Fry Scholarship was created to honor Sergeant John David Fry, 28, of Lorena, Texas. Sergeant Fry had one week left in his tour in Iraq in 2006, when he volunteered to continue working for seven more hours disarming explosive devices, despite having already sustained an injury to his hand. He made the ultimate sacrifice on March 8, 2006, in Anbar province, Iraq, when an improvised explosive device detonated. He left behind a widow and three young children. The Fry Scholarship will entitle eligible spouses to up to 36 months of the full, 100-percent level of the Post-9/11 GI Bill, which includes a tuition-and-fee payment, a monthly housing allowance and stipend for books and supplies. Some spouses currently eligible for or already receiving benefits under the Survivors’ and Dependents’ Educational Assistance (DEA) program may now be eligible for the Fry Scholarship. All surviving spouses eligible for DEA and the Fry Scholarship must make an irrevocable election for terms beginning on or after January 1, 2015.

VA will identify surviving spouses eligible for both programs and send them a letter with comparative information on the benefits available and instructions on how make an election. Information about these two programs is available on VA’s website and the GI Bill website (<http://www.benefits.va.gov/gibill>). The VA call center (888-GIBILL-1) also will be able to help individuals understand the differences between the two programs. [Source: VA News Release October 20, 2014 ++]

VA Choice Cards ► 90-day Deadline Will Not be Met

Congress last August gave the Department of Veteran Affairs 90 days to issue medical “Choice Cards” to 9.1 million veterans enrolled in VA care. The tight deadline of 5 NOV won’t be met, say representatives of major veteran organizations who attend periodic VA briefings on plans for rollout of the Choice Card. The card will ensure veterans have access to private sector health care if they reside more than 40 miles from a VA clinic or hospital, or if they face unacceptable waits, usually longer than 30 days, to access VA healthcare.

The simple guarantee, centerpiece of the Veterans Access, Choice and Accountability Act of 2014, is not so simple to deliver, at least in 90 days. “I have heard nothing to lead me to believe they will get any [cards] out by November 5th,” said Joseph Violante, legislative director for Disabled American Veterans. He doesn’t even think VA has picked a vendor yet to make the cards.

VA declined a request to interview the official in charge of the Choice Card rollout because key decisions are not yet final. A VA statement called the law “highly complex,” said officials are striving to implement it “as quickly and efficiently as possible,” and the “goal has always been to meet the timelines set forth in the Act.” Vet advocates didn’t disagree. Violante said he thought from the start the 90-day deadline was impossible for VA to meet. While the card program is to end in three years or when \$10 billion has been spent on care, whichever occurs first, VA still must build or buy expertise to run it, write regulations to govern it and decide how to monitor providers and care they deliver. It also must ensure health records are returned to VA to be merged with VA records for continuity of care. VA also must educate vets on who can use the card, how they can use it and when.

Roughly 700,000 to 800,000 veterans, less than 10 percent of current enrollees, will be eligible to use the card immediately if they need care. About 300,000 of those qualify because they live far from VA care. VA intends to issue cards to these two groups as soon as it can. Later, in phases, it will send cards to all other veterans enrolled in VA health care as of Aug. 1, 2014, and to those who enroll later if had active duty service in a theater of combat operations within the previous five years. This mandate in the law to give to the card to more than eight million veterans who won’t be eligible to use it worries vet advocates. Some veterans or even doctors could be confused and accept care VA won’t cover. Others will be surprised that the law makes VA payer of last resort when a Choice Card is used, said Bob Norton, deputy director of government relations for Military Officer Association of America. That means users with other health insurance or Tricare eligibility will see those plans billed for any care arranged using the card. For Tricare to be tapped, the veteran will have to be a military disabled retiree or longevity retiree. “I’m sure DoD is not going to be very happy,” Norton said.

VA already knows who lives more than 40 miles from VA care. But the law allows VA to adjust the 30-day wait threshold, and it likely will, based on type of care needed. Waits longer than 30 days might be reasonable, for example, for hearing exams with shorter waits for cardiology appointments. When vets get their cards, they will have a phone number to call to verify eligibility and begin use. VA likely will decide it must offer veterans a choice to use a VA contracted provider or find their own physician. If so, when veterans choose non-network providers, Violante predicted, "it's going to create a terrible situation for VA to try to follow that veteran's treatment."

Bob Wallace, executive director of Veterans of Foreign Wars, said VFW would prefer that eligible vets pick providers from the VA Patient-Centered Community Care (PC3) networks, run by TriWest Healthcare Alliance of Phoenix and HealthNet Federal Services of Arlington, Va. PC3 already backs up VA health care on primary and specialty care needs. Its providers also must meet VA timeliness and quality measures and make prompt transfer of medical records back to VA. "We don't want to see the veteran go to someone who's not the specialist they need," Wallace said. "We also want to make sure the records go back to the VA because that could affect their claims down the road." Some entity also needs to manage the program, from verifying eligibility to coordinating episodes of care to paying providers and collecting co-pay from vets when appropriate. Rather than build that capacity, VA leans toward hiring a third-party administrator with nationwide experience such as Aetna or Kaiser.

As Congress rushed to shape legislation to address the wait-time scandal across multiple VA facilities, it was Sen. John McCain (R-AZ) who insisted Choice Card be part of the final package. Many vet groups are wary of its potential to shift veterans' care and resources permanently to the private sector, and weaken VA's integrated health system with its unmatched array of specialty care services for the most severely ill and injured. Vet groups have argued that VA simply was underfunded, leaving it short of doctors, nurses, support staff and space as enrollments grew, leading to long waits and closed books. The Congressional Research Service in June said VA healthcare enrollment rose 78 percent since 2001. That's the effect of recent wars and of decisions tying many vet health conditions today to long ago exposures to combat stress and toxins such as Agent Orange.

Choice Card has created sky-high expectations among vets who hope for unlimited access to any type of care. Many vets also are expecting to get the card soon, a point Carl Blake, legislative director for Paralyzed Veterans of America, said he has been emphasized in meetings with VA officials. “We have impressed upon them they probably need to figure out a way to have something rolling out” by Nov. 5, Blake said. If they don’t, he said, VA could face “a public relations nightmare.” Some lawmakers who set the deadline, he quipped, probably have drafted already statements and press releases attacking VA for missing it. [Source: Stars & Stripes | Tom Philpott | October 16, 2014 ++]

VA Choice Act Update ► Congressional Criticism Frustrates McDonald

Veterans Affairs Secretary Bob McDonald says he’s working “aggressively” to fire problem employees in his department and is frustrated by congressional criticism that dismissals aren’t moving fast enough. “If somebody wants us to move faster, then they should change the law,” he said during a 14 OCT news conference in Baltimore. “We are following the law. And we are doing it as expeditiously as possible.” The comments echo pushback from other top department officials after another round of criticism from lawmakers that not enough senior administrators have been fired for problems related to VA’s recent care delay and data manipulation scandals.

In the last few weeks, McDonald has announced plans to fire five senior executives for various mismanagement and corruption allegations, using new employment authorities approved by Congress in July. Two of those administrators have retired in lieu of facing disciplinary action, frustrating lawmakers who want not just dismissal but also punishment for the failures. VA officials have said they cannot force employees to stay in their jobs to face a formal censure and firing.

McDonald said he believes he has “the tools I need as a leader to make the changes I need” and has emphasized to all employees the importance of changing the department’s culture to better respond to veterans needs. “If you look at what’s happened, you’ll see there have been a rolling series of announcements as we’ve been taking disciplinary actions against different people,” he said, promising that employees who have “violated our values” will face consequences.

VA officials also have said they cannot move to fire employees while investigations are ongoing, but will move quickly to respond to any new failings found by outside agencies. More than 100 cases related to malfeasance at VA facilities have been opened by the department's inspector general, the Office of Special Counsel, and the FBI, with most expected to be completed in coming weeks. McDonald was in Baltimore on 14 OCT as part of his nationwide recruiting tour, which includes visits to prominent medical schools and hospitals to encourage medical professionals to consider VA for their careers. The department recently announced increased pay for doctors and nurses who come on board, and has announced plans to hire thousands of new employees in coming months to help reduce patient wait times. [Source: NavyTimes | Leo Shane | October 15, 2014 ++]

VA Credibility Update ► VA is Critical to Medicine and Vets

During preparation for my confirmation as secretary of Veterans Affairs (VA), I was repeatedly asked, "Why doesn't VA just hand out vouchers allowing veterans to get care wherever they want?" For a department recovering from serious issues involving health care access and scheduling of appointments, that was a legitimate question. After nine weeks at VA, travel to 31 VA facilities in 15 cities, discussions with hundreds of veterans and VA clinicians, meetings with 75 Members of Congress, two hearings before the Senate and House Veterans' Affairs committees and dozens of meetings with Veterans Service Organizations and other stakeholders, I can answer that question. Veterans need VA, and many more Americans benefit from VA.

Almost 9 million veterans are enrolled to receive health care from VA — a unique, fully-integrated health care system, the largest in the nation. The VA stands atop a critical triad of support — three pillars that enable holistic health care for our patients: research, leading to advances in medical care; training that's essential to build and maintain proficiency of care; and delivery of clinical care to help those in need. VA's accomplishments on all three pillars and contributions to the practice of medicine are as broad, historically significant and profound as they are generally unrecognized. Almost 9 million veterans are enrolled to receive health care from VA — a unique, fully-integrated health care system, the largest in the nation. The VA stands atop a critical triad of support — three pillars that enable

holistic health care for our patients: research, leading to advances in medical care; training that's essential to build and maintain proficiency of care; and delivery of clinical care to help those in need.

VA's accomplishments on all three pillars and contributions to the practice of medicine are as broad, historically significant and profound as they are generally unrecognized. VA is affiliated with over 1,800 educational institutions providing powerful teaching and research opportunities. And our research initiatives, outcomes and honors are tremendous. Few understand that VA medical professionals:

- Pioneered and developed modern electronic medical records;
- Developed the implantable cardiac pacemaker;
- Conducted the first successful liver transplants;
- Created the nicotine patch to help smokers quit;
- Crafted artificial limbs that move naturally when stimulated by electrical brain impulses;
- Demonstrated that patients with total paralysis could control robotic arms using only their thoughts — a revolutionary system called "Braingate";
- Identified genetic risk factors for schizophrenia, Alzheimer's and Werner's syndrome, among others;
- Applied bar-code software for administering medications to patients — the initiative of a VA nurse;
- Proved that one aspirin a day reduced by half the rate of death and nonfatal heart attacks in patients with unstable angina;
- Received three Nobel Prizes in medicine or physiology; seven prestigious Lasker Awards, presented to people who make major contributions to medical science or public service on behalf of medicine; and two of the eight 2014 Samuel J. Heyman Service to America medals.

No single institution trains more doctors or nurses than VA. More than 70 percent of all U.S. doctors have received training at VA. Each year, VA trains, educates and provides practical experience for 62,000 medical students and residents, 23,000 nurses and 33,000 trainees in other health fields — people who go on to provide health care not just to veterans but to most Americans.

The 278,000 employees of the Veterans Health Administration work in a system spanning all 50 states and beyond, providing — from Maine to Manila — a high volume of quality, clinical care. Our 150 flagship VA Medical Centers are connected to 819 Community-Based Outpatient Clinics, 300 Vet Centers providing readjustment counseling, 135 Community Living Centers, 104 Residential Rehabilitation Treatment Centers, and to mobile medical clinics, mobile Vet Centers and telehealth programs providing care to the most remote veterans. That network of facilities allows VA to deliver care to veterans from the greatest generation of World War II to the latest generation from Afghanistan and Iraq. In 2013, VA provided over 90 million episodes of care; that's an average of over 240,000 each day. And since 2004, the American Customer Satisfaction Index survey has consistently shown that veterans receiving inpatient and outpatient care from VA hospitals and clinics give a higher customer satisfaction score, on average, than patients at private sector hospitals.

Finally, VA is uniquely positioned to contribute to the care of veterans with traumatic brain injury (TBI), prosthetics, PTSD and other mental health conditions, and the treatment of chronic diseases such as diabetes and hepatitis. The work we do in these areas, as well as many others, produces results and life changing improvements in care for veterans — and for all Americans and people around the world who suffer from these conditions.

Fixing access to VA care is important; we have a plan to do that and are dedicated to implementing it. That process will take time — but it must be done, and we will be successful. Those who fully understand the value of the department in research, training, and clinical care understand that veterans and all Americans need and deserve their VA to continue providing exceptional care to those we serve.

Robert A. McDonald is secretary of Veterans Affairs. His email is Bob.mcdonald@va.gov. [Source: Baltimore Sun | Robert A. McDonald | October 24, 2014 ++]

VAMC Minneapolis Update ► IG Clears Foul Play Allegation

Department of Veterans Affairs Acting Inspector General Richard Griffin has cleared the Department of Veteran Affairs' medical clinic in Minneapolis of foul

play in the case of a 25-year-old ex-Marine whose neurology appointment was mysteriously rescheduled after he died. Jordan Busman, who left military service because of complications of epilepsy, died 26 NOV, 24 days before the date he was scheduled to see a VA neurologist. But agency records show that he canceled and rescheduled his appointment four days after his death. The issue prompted members of the Minnesota congressional delegation to call for an investigation by the VA inspector general's office. The VA was known to have faked patient cancellations to hide extensive treatment delays, and Buisman's case appeared to fit that mold. However, Griffin said in letters to the Minnesota lawmakers last week that the ex-Marine called the VA's automated scheduling system from his cellphone and canceled his appointment on the same day he died, but before his passing. Griffin said the automated system transmits cancellation requests on the day after they are made. Therefore, Buisman's request went out to schedulers one day after his death, and an employee who agreed to handle his case didn't get around to making the changes until 30 NOV. "Based on this information, we have closed our investigation on the allegation that a deceased veteran had called after his death to reschedule his appointment, and plan no additional work on that issue," Griffin said in the letters. [Source: The Washington Post | Josh Hicks | Oct. 07, 2014 ++]

VA to Hold Small Business Engagement in Atlanta Next Month

Washington, DC – The Department of Veterans Affairs (VA), in collaboration with other federal agencies and partners, will sponsor the 4th annual National Veterans Small Business Engagement (NVSBE), December 9-11, 2014, at the Georgia World Congress Center in Atlanta, Ga.

The premier event for Veteran-Owned Small Businesses, the NVSBE is expected to attract as many as 3,000 attendees offering the chance to learn best practices from federal and commercial procurement decision makers. More than 400 exhibitors and 25 government agencies along with private industry partners, such as Lockheed Martin, Document Storage System, Inc. (DSS) and Boeing, will also participate in the event. The theme of this year's event, **ACCESS**, is focused on promoting and supporting small Veteran-owned business' access to economic opportunity.

“VA is committed to increasing the number of Veteran-owned small businesses,” said VA Secretary Robert A. McDonald. “The NVSBE demonstrates our commitment by offering Veteran business owners the tools they need to thrive in the federal marketplace. We want to do all that we can to help our Veterans be successful.”

The Engagement provides numerous opportunities for important relationships to start and thrive. “One of the greatest challenges for small business owners is to connect with decision makers who can help them grow their businesses,” said Thomas J. Leney, Executive Director of VA’s Small and Veteran Business Programs. “NVSBE provides small businesses a solution to meet that challenge.”