



Federal Update for June 16 - 20, 2014



Walz Bill to Name Mankato Vets Facility after Late War Hero Passes House.

Washington, DC [6/17/14] – Today, Representative Tim Walz announced that the House of Representatives passed his bipartisan bill to formally name the Community-Based Outpatient Clinic (CBOC) in Mankato, MN after late war hero and local legend Lyle Pearson, formally of North Mankato, who passed away January 11, 2013. The entire Minnesota U.S. House of Representatives Congressional Delegation co-sponsored the legislation.

Pearson enlisted in the US Army Air Corps in May of 1942. After completing training as a pilot for the B-17 bomber, he was assigned to the 15th Air Force in Europe. First Lieutenant Pearson flew the equivalent of 50 combat missions over occupied territory until he was shot down over Italy in December of 1944. He spent six months as a prisoner of war until the camp was liberated in May 1945. Lyle was awarded the Distinguished Flying Cross, multiple Air Medals, and the Purple Heart for his bravery.

“Lyle Pearson was the true definition of an American hero,” Representative Walz said. “Through his lifelong dedication to service, both in and out of uniform, Lyle left a profound and everlasting impact on southern Minnesota and the country as a whole. I’m pleased this measure honoring his memory and life of service to our great nation passed the House of Representatives today.”

After the war, Lyle rejoined his wife at their family farm, but the desire to serve never left him. Beginning in 1957, Lyle administered programs for the Nicollet County Juvenile Court and Nicollet County Court Services, first as the Chief Probation Officer and then as the Director of Court Services. In 1969, he was named the Minnesota Corrections Man of the Year.

In 1961, he served as the Minnesota Department Commander of the Disabled American Veterans (DAV) and in 1975, as National Commander, presenting legislative programs on behalf of the DAV to the House and Senate Veterans Affairs Committees.

Throughout his life, Lyle served in various community leadership positions, including as a board member of the Minnesota Valley Action Council, 4-H club leader, fight judge for the Golden Gloves Boxing program, and for over 54 years as a volunteer at the St. Peter State Hospital.

VA Health Care: Further Action Needed to Address Weaknesses in Management and Oversight of Non-VA Medical Care

What GAO Found

GAO's May 2013 report on the oversight and management of the Non-VA Medical Care Program found that the Department of Veterans Affairs (VA) does not collect data on wait times veterans face in obtaining care from non-VA providers. The lack of data on wait times limits VA's efforts to effectively oversee the Non-VA Medical Care Program because it is not possible for VA to determine if veterans who receive care from non-VA providers are receiving that care sooner than they would in VA facilities. In addition, GAO found that VA cannot assess the cost-effectiveness of non-VA medical care because it cannot analyze data on all services and charges for an episode of care, which are a combined total of all care provided to a veteran during a single office visit or inpatient stay. As a result, VA cannot determine whether delivering care through non-VA providers is more cost-effective than augmenting its own capacity in areas with high utilization of non-VA medical care.

GAO's March 2014 report found patterns of noncompliance with applicable requirements for processing emergency care claims covered under the Veterans Millennium Health Care and Benefits Act (Millennium Act) at each of the four VA facilities visited. This led to the inappropriate denial of some claims and the failure to notify veterans that their claims had been denied at these facilities. The Millennium Act authorizes VA to cover emergency care for conditions not related to veterans' service-connected disabilities when veterans who have no other

health plan coverage receive care at non-VA providers and meet other specified criteria. Specifically, GAO determined that about 20 percent of the 128 claims it reviewed had been denied inappropriately, and almost 65 percent of the reviewed claims lacked documentation showing that the veterans were informed their claims were denied and explained their appeal rights. As a result of GAO's review, the VA facilities reconsidered and paid 25 claims that they initially had inappropriately denied. GAO also found that there is significant risk that these patterns of noncompliance will continue because VA's existing oversight mechanisms do not focus on whether VA facilities appropriately approve or deny non-VA medical care claims or fail to notify veterans that their claims have been denied.

GAO also reported in March 2014 that gaps exist in veterans' knowledge about eligibility criteria for Millennium Act emergency care, and communication weaknesses exist between VA and non-VA providers. Specifically, GAO found that veterans' lack of understanding about their emergency care benefits under the Millennium Act presents risks for potentially negative effects on veterans' health because they may forgo treatment at non-VA providers, and on veterans' finances because they may assume VA will pay for care in situations that do not meet VA criteria. Despite VA's efforts to improve communications, some non-VA providers reported instances in which VA facilities' claims processing staff were unresponsive to their questions about submitted claims.

Why GAO Did This Study

Due to serious and longstanding problems with the timely scheduling of veterans' appointments in VA facilities, VA recently announced that it will allow additional veterans to be treated through its Non-VA Medical Care Program.

This testimony is based on two GAO reports and addresses the extent to which (1) VA collects reliable information on wait times and cost-effectiveness of the Non-VA Medical Care Program; (2) VA facilities comply with Millennium Act claims processing requirements and VA oversees claims processing activities; and (3) VA educates veterans about eligibility for Millennium Act emergency care and communicates with non-VA providers. For both reports, GAO reviewed relevant requirements and visited 10 VA facilities. For its report on the oversight and management of the Non-VA Medical Care Program, GAO reviewed non-VA medical care spending and utilization data from fiscal year 2008 through fiscal

year 2012. For its report on the Millennium Act emergency care benefit, GAO reviewed 128 denied Millennium Act claims to determine the accuracy of processing decisions.

GAO made numerous recommendations to VA in the two prior reports related to improving (1) data on wait times and cost-effectiveness for non-VA medical care; (2) compliance with claims processing requirements; and (3) veterans' knowledge of non-VA medical care eligibility. VA agreed with these recommendations but has yet to fully implement them.

Walz Named to Bipartisan, Bicameral VA Reform Bill Conference Committee

Washington, DC [6/18/14] – Today, Representative Tim Walz (D-Minn.), was named to the bipartisan, bicameral VA Conference Committee tasked with completing legislation to increase accountability at the Department of Veterans' Affairs and helping ensure our veterans have access to the timely health care they need. Walz, the highest ranking enlisted soldier to ever serve in Congress, has long been recognized as a champion for veterans and their families by leading Veteran Service Organizations. He released the following statement:

“My number one goal as a veteran myself and a member of this conference committee is to ensure our veterans and their families are able to get the care they need, and get it in a timely manner. I'll take the thoughts and ideas I heard from local veterans in southern Minnesota, many of which were included in both the House and Senate bills, to conference as we work to finalize a bill to increase accountability and reform the VA. We must work diligently to reach an agreement in short order. Our veterans, their families, and the American people expect nothing less.”

VA Provides Guidance to Same-Sex Married Couples Seeking Benefits

WASHINGTON -- After close consultation with the Department of Justice (DOJ), the Department of Veterans Affairs (VA) is providing guidance to same-sex

married couples on the benefits and services to which they are entitled under current laws and regulations.

"VA worked closely with DOJ to develop guidance to process cases involving same-sex marriages and to implement necessary changes swiftly and smoothly in order to deliver the best services to all eligible Veterans," said Acting Secretary of Veterans Affairs Sloan D. Gibson.

The U.S. Supreme Court overturned section 3 of the Defense of Marriage Act (DOMA), which governed the definitions of "marriage" and "spouse" for all federal agencies. However, there remain certain provisions of federal law governing Veterans' benefits and services that, like DOMA, define a spouse as a member of the opposite sex. In September 2013, the U.S. Attorney General announced President Obama's directive to cease enforcement of those VA-specific definitional provisions.

However, another provision of the law governing VA – 38 U.S.C. § 103(c) – requires the Department to look to the place of residency rather than the place of celebration to determine whether a Veteran's marriage is recognized for the purposes of VA benefits. This statutory requirement to look at the laws governing marriage in the place where the Veteran or Veteran's spouse resided at the time of the marriage or at the time they filed their claim or application precludes VA from recognizing certain same-sex marriages, such as when a couple has never lived in a state that recognizes same-sex marriages. VA has worked with DOJ to develop guidance to process claims and applications for same-sex married couples while still following the statutory requirement to look to the place of residency.

VA is committed to treating all Veterans and their spouses as equally as possible under the law. Since the Windsor decision, VA has worked with DOJ to develop guidance to process claims and applications for same-sex married couples while still following the statutory requirement to look to the place of residency. Importantly, the administrations within VA will aim to apply the same level of scrutiny to all Veterans' marriages, regardless of whether it is a same-sex or opposite-sex marriage. VA will therefore process claims and applications involving same-sex marriage in the same manner that VA processes claims based on opposite-sex marriage without any additional scrutiny or development. This

means generally that VA will accept a claimant or applicant's assertion that he or she is married as sufficient evidence to establish a Veteran's marriage for the purpose of VA benefits. VA has made efforts to ensure that claimants will not be negatively impacted as a result of the time that has passed while developing this guidance.

VA is now processing all claims and applications involving same-sex marriages that were previously being held by the program offices. VA launched a new website and is continuing to update forms to inform Veterans and beneficiaries of the recent changes in the law and procedures. The new website provides important information to help Veterans and beneficiaries understand the eligibility requirements under federal law and VA regulations, and answers frequently asked questions.

"Our commitment to provide all eligible Veterans and their families with their earned care and benefits will continue to be our focus as VA begins recognizing same-sex marriages to the extent the law will allow." Gibson said. "We will work with lawmakers to address the changes that are necessary to allow all veterans and their families to access the benefits they have earned and deserve."

Veterans can learn more about VA's guidance regarding same-sex marriages at <http://www.va.gov/opa/marriage/> or by reaching out to one of our Call Centers at 1-800-827-1000.

VA Releases Latest Nationwide Data on Access to Veterans Health Care

WASHINGTON – Today, the Department of Veterans Affairs (VA) posted the second in a series of bi-monthly data updates showing progress on its efforts to accelerate access to quality health care for Veterans who have been waiting for appointments.

Acting Secretary of Veterans Affairs Sloan D. Gibson announced that VA has now contacted approximately 70,000 Veterans across the country to get them off of wait lists and into clinics for medical appointments. Gibson also announced the release of the latest updated, facility-level patient access data, which

demonstrates that the number of appointments has increased by almost 200,000 from May 15 to June 1.

“In many communities across the country, Veterans wait too long for the high quality care they’ve earned and deserve,” said Acting Secretary Gibson. “As of today, we’ve reached out to 70,000 Veterans to get them off wait lists and into clinics, but there is still much more work to be done. As we continue to address systemic challenges in accessing care, these regular data updates will enhance transparency and provide the most immediate information to Veterans and the public on Veterans’ access to quality health care. Trust is the foundation for everything we do. VA must be an organization built on transparency and accountability, and we will do everything we can to earn that trust one Veteran at a time.”

Last week, VA announced the following actions in response to the nationwide Access Audit findings and data:

Establishing New Patient Satisfaction Measurement Program- Gibson has directed VHA to immediately begin developing a new patient satisfaction measurement program to provide real-time, robust, location-by-location information on patient satisfaction, to include satisfaction data of those Veterans attempting to access VA healthcare for the first time. This program will be developed with input from Veterans Service Organizations, outside healthcare organizations, and other entities. This will ensure VA collects an additional set of data – directly from the Veteran’s perspective – to understand how VA is doing throughout the system.

Holding Senior Leaders Accountable- Where audited sites identify concerns within the parent facility or its affiliated clinics, VA will trigger administrative procedures to ascertain the appropriate follow-on personnel actions for specific individuals.

Ordering an Immediate VHA Central Office and VISN Office Hiring Freeze- Gibson has ordered an immediate hiring freeze at the Veterans Health Administration (VHA) central office in Washington D.C. and the 21 VHA Veterans Integrated Service Network (VISN) regional offices, except for critical positions to be approved by the Secretary on a case-by-case basis. This action will begin to

remove bureaucratic obstacles and establish responsive, forward leaning leadership.

Removing 14-Day Scheduling Goal- VA is eliminating the 14-day scheduling goal from employee performance plans. This action will eliminate incentives to engage in inappropriate scheduling practices or behaviors.

Increasing Transparency by Posting Data Twice-Monthly- At the direction of the Acting Secretary, VHA will post regular updates to the access data released today at the middle and end of each month at www.va.gov/health. Twice-monthly data updates will enhance transparency and provide the most immediate information to Veterans and the public on Veterans access to quality healthcare.

Initiating an Independent, External Audit of Scheduling Practices- Gibson has also directed that an independent, external audit of system-wide VHA scheduling practices be performed.

Utilizing High Performing Facilities to Help Those That Need Improvement- VA will formalize a process in which high performing facilities provide direct assistance and share best practices with facilities that require improvement on particular medical center quality and efficiency, also known as SAIL, performance measures.

Suspending Performance Awards- VA has suspended all VHA senior executive performance awards for FY2014.

Acting Secretary Gibson Initiates Monthly Site Inspections across Veterans Health Facilities to Restore Integrity to Scheduling Process

WASHINGTON – Acting Secretary of Veterans Affairs Sloan D. Gibson today directed all Department of Veterans Affairs' (VA) Medical Center and Health Care System Directors to conduct monthly in-person reviews of scheduling practices in every clinic within their jurisdiction. Site inspections will include observing daily scheduling processes and interacting with scheduling staff to ensure all policies are being followed to deliver Veterans the timely care they have earned.

“Our top priority is getting Veterans off of wait lists and into clinics,” said Acting Secretary Gibson. “We need our folks in the facilities to work directly with staff, answer all questions, and ensure our Veterans receive the timely care they have earned. Veterans must trust their health care system, and these reviews are an important step towards restoring integrity in all our scheduling activities.” In addition to monthly reviews of over 900 Veterans Health Administration facilities nationwide, Veterans Integrated Service Network Directors will also conduct similar visits to at least one medical center within their area of responsibility every 30 days, completing visits to all medical centers in their network every 90 days.

This action follows the VA’s release of results from its nationwide Access Audit, along with facility-level patient access data.