



December 14, 2022

**Letter of support for the Joseph Maxwell Cleland and Robert Joseph Dole
Memorial Veterans Benefits and Health Care Improvement Act of 2022**

Dear Senators,

On behalf of Concerned Veterans for America (CVA) and the thousands of veterans and military families around the country we represent, we would like to offer our support for the Joseph Maxwell Cleland and Robert Joseph Dole Memorial Veterans Benefits and Health Care Improvement Act of 2022 (Cleland-Dole).

Cleland-Dole contains a majority of the text of the Guaranteeing Healthcare Access to Personnel Who Served (GHAPS) Act, which CVA has endorsed since its introduction in 2021. Significant parts of the GHAPS Act within Cleland-Dole include provisions to pilot community care self-scheduling and a strategic plan for improving access to telehealth services. Additionally, Cleland-Dole contains measures to improve the transparency the VA offers the public.

Most importantly, Cleland-Dole codifies VA regulations on wait-time calculations, ensuring the veterans' actual experience as a patient is captured when determining community care eligibility. The VA's ongoing refusal to follow its own regulations, established under the MISSION Act, to calculate wait times between the veterans' date of request for an appointment and the first available opening makes codification imperative.

Outside of this legislation, Senators should continue to support efforts to codify the VA MISSION Act's access standards established in 2019 for the Veterans' Community Care Program. Access standard codification, originally included in the GHAPS Act, would provide veterans certainty about their future eligibility for community care options and prevent access to health care choices from becoming subject to regular administrative whim. Secretary McDonough's stated interest in tightening access standards call for their proactive protection.

Overall, however, Cleland-Dole's makes important progress to improve the quality of care available to veterans and their access to it, combined with

- **Secs. 121, Codifying wait-time calculations:** The bill codifies VA regulations for measuring community care eligibility, ensuring that wait times are measured, as intended, from the date a veteran requests an appointment to the first next available appointment date. The VA Office of the Inspector General, the Government Accountability Office, and a FOIA lawsuit by the Americans for Prosperity Foundation all reveal that VA wait-time calculations are internally inconsistent, regularly violate current regulations, and artificially shorten public wait-time statistics, denying veterans access to community care who would otherwise be eligible. Because the VA will not follow its own regulations, codifying wait-time calculation standards is the only way to ensure veterans have accurate expectations of the care they can expect to receive and are not denied access to community care alternatives.

- **Secs. 131-134, Community care self-scheduling pilot:** The bill pilots self-scheduling for veterans to access local providers. This is a commonsense reform that is already available for most in the private sector. Veterans should have the same ease of access when using the VA system.
- **Sec. 151, Telehealth strategic plan:** Telehealth options have changed the face of health care delivery and are an important option for veterans to be able to consider when accessing their care. This bill requires the VA to conduct a comprehensive study of telehealth and outline how barriers to its greater utilization, where appropriate, can be removed. This report will give policymakers and the VA vital information to inform further expansion of telehealth, particularly for rural veterans.
- **Sec. 195, Data Transparency:** The bill requires a review of data publicly available on the VA's Access to Care website, as well as a report and consultation on opportunities to improve what data is provided. This is a common-sense measure that can improve veterans' user experience when determining which care options work best for their needs.
- **Sec. 406, Plan for reduction of FOIA request backlog:** The bill requires the VA to submit a plan to reduce its significant Freedom of Information Act (FOIA) request backlog, along with a report on its compliance with the plan. Given the alarming details about manipulative VA wait-time calculation practices that the Americans for Prosperity Foundation's recent FOIA suit has uncovered, it is clear FOIA requests continue to be a valuable tool for VA oversight, and the agency must be held to account to answer them.

America's veterans deserve greater access to higher quality health care options. Cleland-Dole will improve veteran's experiences as patients by experimenting with community care self-scheduling and laying the groundwork for wider telehealth options. The bill will also codify realistic wait-time calculations and improve the VA's public transparency. Though it should only be the start of further progress to protect and expand veterans' health care choices, Cleland-Dole is an important step forward. **For these reasons, I urge you to support the Joseph Maxwell Cleland and Robert Joseph Dole Memorial Veterans Benefits and Health Care Improvement Act of 2022.**

Sincerely,

A handwritten signature in blue ink, appearing to read "Russ D", with a stylized flourish at the end.

Russ Duerstine
Executive Director
Concerned Veterans for America