

GUARANTEE THE CARE AND SERVICES PROMISED TO OUR VETERANS

VA Oversight & Expand Access to Timely, Quality Care



In 2019, the VA MISSION Act transformed health care options for millions of veterans using the VA health care system. By creating the Veterans Community Care Program (VCCP), the VA MISSION Act built new pathways for veterans to seek treatment outside the VA when wait and travel times are too high or when veterans meet one of the other eligibility criteria for community care.

THE ISSUE

Unfortunately, since 2019, the Department of Veterans Affairs has neglected and failed many of its obligations under the VA MISSION Act, leaving veterans trapped in a system in crisis. At the height of the COVID-19 pandemic, the VA canceled or delayed [over 20 million appointments](#) while simultaneously making community care choices harder to use. Delayed and denied health care has real impacts on our veterans—it can be the difference between timely treatment and permanent consequences for a veteran and their family. As the VA takes on substantial new obligations through the PACT Act, offering greater health care choices can improve the agency's capacity to keep its promises to our veterans.

POLICY SOLUTIONS

Effective VA Oversight

Ensuring proper implementation of the VA MISSION Act will save veterans and empower them to have quality care. The VA's ongoing failures to follow the VA MISSION Act and VCCP regulations since 2019 have resulted in delayed and denied care for millions of veterans. Robust VA oversight should be a top priority for policymakers in the 118th Congress. Investigating the VA's misleading wait-time calculations and efforts to undermine the VCCP, which have denied veterans their needed community care, should be oversight priorities.

WAIT-TIMES | The VA [OIG](#), the [GAO](#), and recent [FOIA lawsuits](#) have all found that the VA inconsistently calculates wait times, making VHA waits appear artificially shorter. Manipulating wait-time data [denies community care access](#) to veterans who are legally entitled to it. In December 2022, Congress [codified](#) the VA MISSION Act's wait-time calculation rules that the VA previously ignored—requiring measurement from a veteran's date of request for an appointment to the first next available appointment date for their requested treatment. [Congress must ensure the VA's public wait time measurements reflect this date-of-request standard.](#)

COMMUNITY CARE | The VA has undermined the VCCP law and regulation to keep veterans within the VHA system since the passage of the VA MISSION Act. The VA purposely leaves veterans in the dark about their eligibility for community care benefits and closed down the VA MISSION Act website itself in 2021. Reports and documentation have emerged of VA administrators overruling VA doctors' recommendations, cutting off patients access to community care. FOIA documents show that VA phone scripts even [direct schedulers to attempt to dissuade veterans](#) from seeking community care. [Congress must demand accountability from a VA that refuses to follow the VA MISSION Act, hurting veterans with denied and delayed care.](#)

Access to Timely and Quality Care

Congress should put veterans, not bureaucratic priorities, at the forefront of veterans' health care discussions. The following policy solutions can improve the number and quality of treatment options available to veterans.

CODIFY ACCESS STANDARDS | Veterans deserve certainty about what treatments options they can rely on. Congress should codify current wait and drive time access standards for

when veterans can seek community care so they are not subject to regular administrative change.

FLEXIBILITY FOR DISABLED VETERANS | Veterans with the highest disability ratings should have maximum flexibility to seek coverage that best meets their individual needs. Congress should allow veterans in priority groups 1-3 the option to enroll in TRICARE Select or TRICARE for Life, if Medicare eligible, rather than the VA system.

DATA-DRIVEN MODERNIZATION | Congress should support a comprehensive, data-driven process to modernize VHA facilities and ensure limited VA resources are spent most in line with veterans' needs, while preserving existing access to care.

FULL HEALTH CARE CHOICE | Veterans should not need to jump through complex administrative hoops to be able to choose whether to use the health benefits they've earned at VHA facilities or in the community. Congress should start this transition through a full choice pilot.

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