

Vets' groups oppose contracting rural care

Proposals address long waits at VA hospitals

By Kelly Kennedy

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With a plethora of bills meant to give veterans everything from shorter waiting times for medical appointments to chiropractor options, politicians and veterans' groups battled about everything but the Department of Veterans Affairs budget at an April 26 hearing.

Veterans' advocates told the House Veterans' Affairs health subcommittee that none of the new options presented will do any good if VA doesn't get more funding to implement them.

"You know, we can find money to fight a war," said Rep. Solomon Ortiz, D-Texas, repeating an oft-voiced concern. "But ... we can't find money to take care of the promises we made."

"We'll find the money," said Rep. Phil Hare, D-Ill.

The most controversial idea offered by lawmakers was contracting out care for veterans who live far from VA facilities or can't get an appointment within 30 days.

Rep. Steve Pearce, R-N.M.,

talked about an Iraq war veteran who had to drive 18 hours a week to get to medical appointments in Albuquerque for a foot injury. Doctors said the long drive contributed to the veteran eventually losing his foot.

Pearce also would like to see new VA facilities closer to his constituents in southeastern New Mexico — and noted he's been fighting for those facilities for 24 years.

"I'm realistic that this idea is much easier said than done," he said. "We must work to find other solutions."

To him, the easiest solution is for VA to pay for veterans to go to their local hospitals, and to contract out work if a veteran lives more than 120 miles from VA care. In his district, that would include 20,000 veterans.

But VA and veterans' groups countered that contracting out care will only take money away from the specialized care veterans need and get through VA facilities.

Adrian Atizado, assistant na-

tional legislative director for Disabled American Veterans, asked Pearce not to "upset the delicate balance." He said the problems stem from a lack of resources, and that Congress should instead give VA more money to do the job properly.

The veterans' groups opposed all the bills containing a "triggering mechanism" — for example, a bill that mandates veterans be seen within 30 days or else VA must pay for those veterans to see civilian doctors.

Rep. Vic Snyder, D-Ark., said the issue had come up before.

"There's no source of funding in this bill," Snyder said. "That money's going to be pulled from someplace. We dealt with this a few years ago — at some point, it spirals into a problem with the underlying system."

Snyder noted that waiting times for some civilian specialty care is just as bad as at VA.

But lawmakers called VA officials on their claim that 96 percent of veterans are receiving medical care within 30 days.

"I don't know where the VA's getting their numbers," said Ginny Brown-Waite, R-Fla.

She said she hears far different stories out of her district.

"I called local clinics and asked for the wait times," she said. "It did not jibe with what I was being told by veterans. So then I asked for the real times. There's a big difference between the quick-and-dirty analysis and the true times."

And though she sees the need to provide veterans with specialized care, she said the bigger issue is ensuring that veterans get what they need — period.

Rep. Jerry Moran, R-Kan., said it makes no financial sense to try to provide VA care to veterans in the most rural areas. In those cases, he said, VA should pay the bill for veterans to go to local clinics and hospitals.

Lawmakers also highlighted a need for more chiropractors for veterans because the majority of injuries troops face in combat are musculoskeletal. A bill sponsored by Rep. Bob Filner, D-Calif., chairman of the House Veterans' Affairs Committee, seeks to phase chiropractic into all VA

medical centers.

Lawmakers seemed to be in agreement on another bill that calls for better screening of traumatic brain injuries for all service members returning from Iraq and Afghanistan.

"TBI is a pending crisis in this country," said Rep. Jason Altmire, D-Pa.

At Walter Reed Army Medical Center alone, he said, 65 percent of returning veterans have some form of traumatic brain injury. The bill would require VA to screen all Iraq and Afghanistan veterans for symptoms, and set up a registry to monitor them.

Gerald Cross, VA's acting principal deputy undersecretary for health, said vets are already screened for traumatic brain injuries.

When asked how VA would look different in a few years, Cross said more could be done in rural communities, as well as in homes. For example, patients could get information and their medical records over the Internet. He also talked about home-based priority care. But his testimony did not offer immediate help for veterans trying to get care now. □



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