Physicians offer fixes to improve veterans’ access to care

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Andis Robeznieks
Senior News Writer

The AMA will continue working with the U.S. Department of Veterans Affairs (VA) to provide quality of care to veterans and advocate new funding for the Veterans Choice Program (VCP), according to actions taken by the AMA House of Delegates (HOD) at the 2017 AMA Annual Meeting.

The HOD also adopted new policy established by recommendations of a Council on Medical Service report that includes encouraging the VA to continue developing and enhancing alternative pathways for veterans to seek care outside the VA system if it cannot provide them with adequate or timely care, supporting the consolidation of VA community care programs, and making the VCP permanent.

The VCP was created in reaction to thousands of veterans experiencing excessive wait times to access health care through the VA in 2014, and had been set to expire this August. There was still about $1 billion left from the $10 billion originally appropriated for the program, and President Donald Trump signed legislation in April to continue the program using the remaining funds while Congress works on a permanent solution.

“The VCP was an admission that additional mechanisms were necessary to ensure veterans have timely access to the health care they need,” said AMA Board of Trustees member and Board Chair-elect Gerald E. Harmon, MD. “Not all of our veterans live near VA facilities, and accommodations should be made to ensure they get the care they earned and deserve. The VA has focused on improving the care it provides to veterans and has made substantial strides, but improvements are still necessary.”

To identify and address systemic barriers to care for veterans moving forward, delegates also adopted new policy from the council’s recommendations that encourages the VA to use external assessments as necessary. In addition, delegates adopted new policy supporting interventions to mitigate barriers to the VA from being able to achieve its mission.
Delegates also adopted policy encouraging the VA to engage with physicians providing care in the VA system to explore and develop solutions to improve the health care choices of veterans.

The council noted in its report that the AMA encourages physicians to participate in providing health care to veterans and it supports increasing the VA’s flexibility to improve access to services.

Providing veterans with premium support to purchase private sector health care “is not a new concept,” the council report says. But the report adds that the VA “is not a health insurance plan with a tangible amount of money to give veterans to purchase private health care.”

It was also mentioned how “adequate and prompt payments by the VA have been long-standing problems,” and the report recommended that the VA pay private physicians at 100 percent of Medicare rates at a minimum and that clean claims submitted electronically be paid within 14 days and clean claims submitted on paper be paid within 30 days.

This week the VA launched its Physician Ambassador Program that will work to recruit civilian medical volunteers to provide uncompensated care in “an opportunity to give back to the Veteran community,” according to a program description on the VA website.

The HOD also encouraged quickening the interoperability of electronic medical records to “ensure seamless, timely, secure and accurate exchange of information between VA and non-VA providers.” The new policy supports physicians who care for veterans inside and outside the VA to “exchange medical records” in a timely way to support “efficient care.”

A separate resolution calls for the AMA to encourage the VA to continue exploring telemedicine approaches to increase veterans’ access to care and that should include access to Technology-Based Eye Care Services (TECS). The resolution notes that optometrists oppose the TECS program and are lobbying Congress and the VA in stop its expansion.

Delegates also reaffirmed AMA policies on coverage and payment for telemedicine.

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