Congress of the United States Washington, DC 20515

June 4, 2014

The Honorable Sloan Gibson Acting Secretary of Veterans Affairs Department of Veterans Affairs 801 Vermont Avenue, NW Washington, DC 20420

Dear Acting Secretary Gibson,

We are deeply concerned by recent reports of secret waiting lists at Veterans Affairs (VA) medical clinics across the country. While the investigations remain open, the first priority of the VA and Congress should be to make sure that all our veterans receive the medical care that they need in a prompt and timely fashion. We know of at least 1,700 veterans in the Phoenix region alone stuck on secret waiting lists. The VA-OIG's recent admission that this is a systemic problem that exists throughout the VA healthcare system means that there are likely thousands more across our country who are unacceptably being denied the timely care they need and deserve.

In testimony to the House Veterans Affairs Committee, both on April 9, 2014, and again on May 28, 2014, Dr. Thomas Lynch, the VA's Assistant Deputy Under Secretary for Health for Operations and Management, confirmed that the VA currently has the authority and funds to pay for veterans to go see private-sector medical providers. There is absolutely no reason that veterans should be waiting months for care at VA medical facilities when the VA has a system in place for them to immediately see private-sector doctors. While Dr. Lynch testified to the House Veterans Affairs Committee that the 1,700 veterans in Phoenix would be offered immediate access to private doctors, we believe that the VA should take the next logical step. It should provide this disaster relief for veterans across the country and make fee-basis care immediately available for any veteran who has been waiting too long for care. However, the VA must remain the guarantor and coordinator of care for all enrolled veterans. Veterans should never be expected to coordinate their own care or be held responsible for record sharing when receiving care outside of the VA.

Fee-basis care can and should be used to provide medical care to veterans when the VA health system is overburdened. Unfortunately, one of the reasons that many veterans are denied access to fee-basis care is that the costs of this outsourced care is covered out of the budget of each individual VA health facility. Local and regional VA

managers are incentivized to deny veterans' requests for fee-basis care and keep them locked in the VA health system, even if that leads to longer wait times for care. Therefore, in addition to directing immediate and wide-spread access to fee-basis care for waiting veterans, we also ask you to immediately establish a budget mechanism outside of the existing model to ensure that the local and regional VA healthcare managers have no incentive to deny veterans access to fee-basis care. Creating a new funding mechanism for fee-basis care, independent of local VA facilities, will both ensure that veterans on waiting lists receive private sector medical care quickly if they so choose, and will fundamentally change the incentive structure that has led, at least in part, to these atrocious secret waiting lists.

We urge you to immediately take action to increase all veterans' ability to access fee-basis care when the VA's capacity does not allow them to provide the timely care that our veterans need.

Sincerely,

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Patrick Tiberi (OH-12)

Steve Daines (MT-At-Large)

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