



U.S. Department
of Veterans Affairs

Fact Sheet

Office of Public Affairs
Media Relations

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Optimizing Funding for VA Community Care

Overview

A top priority for VA is making sure that Veterans have access to high quality care when and where they need it. One way VA accomplishes this priority is by using VA's community care network. The Veterans Choice Program (VCP), one pathway among several for accessing the community care network, is being used at an increased rate. As a result, VA is providing its medical facilities with the flexibility needed to optimize resources locally for VA community care. Veterans that need community care will continue to be able to receive it.

Optimizing Use of Available Funds

There are two accounts to pay for VA community care—one can only be used to pay for VCP and the other for what is known as traditional VA community care. In the first quarter of FY2017, VA observed a more than 30 percent increase from the same period in FY 2016 in the number of VCP authorizations. At the same time, VA has observed a decrease in authorizations for traditional VA community care. As a result, VA is adjusting its processes to accommodate shifts in demand from these accounts.

VA staff will continue to send eligible Veterans to the VCP. This includes those Veterans eligible for VCP based on residence (40 miles from their residence to the closest VA medical facility), wait times (30 days from the clinically indicated date), or other criteria (such as special criteria for residents of Alaska, Hawaii and New Hampshire). Veterans not eligible for VCP can receive community care through the traditional community care program when care is not available in the VA.

Optimizing the use of available VA community care in this way ensures that Veterans continue to receive the care they need when and where they need it.

Frequently Asked Questions

1. Has the Veterans Choice Program (VCP) ended?

No, the VCP has not ended, as it was established by law in 2014 and funded by an appropriation by Congress. Because VCP has a limited amount of funds appropriated to it, VA is working internally and with Congress to ensure Veterans continue to receive the care they need through VA's community care network.

2. Who will be able to use the Veterans Choice Program?

VA will continue to send Veterans with eligibility for VCP as identified in the Veterans Access, Choice and Accountability Act to the VCP contractors. This includes those Veterans eligible based on residence (40 miles from their residence to the closest VA medical facility), wait times (30 days from the clinically indicated date), or other criteria (such as special criteria for residents of Alaska, Hawaii and New Hampshire).

3. Why is there more than one account to pay for VA community care?

Federal law requires VA to have multiple accounts for VA community care, to include the additional account for the Veterans Choice Program. The law also prohibits VA from moving money between these accounts. This accounting structure creates barriers to VA using VA community care fund in the most optimized way.

4. What is VA's solution for addressing multiple funding mechanisms?

VA and Congress are and will continue to be partners as VA continues to define and build an integrated healthcare network, including a community care program that is simple to understand, easy to administer and meeting the needs of Veterans and their families, community providers, and VA staff. This will include streamlining the funding on VA community care into one account or ensuring flexibility between accounts.

VA is currently working with Congress on as they evaluate and review VA's requested legislation.

5. What options does a VA medical facility have to purchase community care for Veterans?

VA medical facility staff should consider the Veteran's eligibility for VCP when reviewing options for community care. If the Veteran is eligible based on residence (40 miles from their residence to the closest VA medical facility), wait times (30 days from the clinically indicated date), or other criteria (such as special criteria for residents of Alaska, Hawaii and New Hampshire) they should continue to be sent to VCP community care providers. If the Veteran does not have one of these eligibilities, the facility should consider all available options in purchasing care based on local facility funding while ensuring seamless care for the Veteran.

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