

STATEMENT FOR THE RECORD

OF

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FOR THE

SENATE COMMITTEE ON VETERANS' AFFAIRS



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CONCERNING:

LEGISLATIVE HEARING ON:

VA'S TRANSFORMATION STRATEGY:

EXANIMING THE PLAN TO MODERNIZE VA

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Serving WITH PRIDE



AMVETS

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FAX: 301-459-7924 E-MAIL: amvets@amvets.org Distinguished members of the Senate Veterans' Affairs Committee, on behalf of the 23 million American Veterans in this country, AMVETS, a leader since 1944 in preserving the freedoms secured by America's armed forces and providing support for Veterans, Active Duty military, the National Guard/Reserves, their families and survivors, it is my pleasure, to offer this 'Statement for the Record' concerning VA's Transformation Strategy.

According to a June 2015 VA Patient Access Progress Update, the VA increased the number of appointment by 2.7 million over the previous year's same time-frame, for a total of more than 51 million completed appointment between 1 June 2014 and 30 April 2015. During this same time-frame, the VA's Electronic Wait List saw an encouraging 45% reduction, going from a high of over 56,000 appointments down to 30,520.

The VA also saw a nearly 12% increase in the usage of its Telehealth services, serving more than 717,000 veterans and 2 million telehealth visits. Not surprisingly, roughly 45% of those utilizing telehealth services were rural veterans.

VA also authorized over 2.8 million Veterans, a 45% increase from the previous year, to receive care in the private sector between June 1, 2014 and May 15, 2015.

With this kind of encouraging data coming out of the VA, no one can doubt their good intentions in continuing to transform the current VA into a new and improved VA. AMVETS is encouraged and optimistic, that given time, the VA will achieve its goals.

Let me briefly touch on the 5 areas of focus of the MyVA plan:

- 1. Improving the Veteran experience
- 2. Improving the employee experience, and achieving "people excellence" so they can better serve Veterans
- 3. Improving our internal support services
- 4. Establishing a culture of continuous improvement
- 5. Enhancing strategic partnerships

The list above clearly shows that the VA is not only fully aware of its shortcomings, but is equally invested in improving the current system. AMVETS appreciates the time, effort and the of multiple data sources that went into the development of this fresh and aggressive plan to improve the VA.

I'd like to break the VA's focus areas into two groups: a. Improving the Veteran Experience and b. Improving the Employee Experience, because we believe the other three areas can be fairly treated under these two broader headings.

a. Improving the Veteran Experience:

AMVETS feels that this is the most critical facet of the VA's improvement plan, since the whole VA system was created specifically to care for and meet the needs of veterans. If veterans are not having positive and beneficial interactions with the VA, whether in healthcare, education, benefits, etc., then the system is a failure and needs to be fixed. This is where the VA's improvement plan comes into play.

The VA's previously quoted data (see above) should go a long way towards providing veterans with the world class healthcare they have earned, deserve and were promised. By increasing both internal and external access to healthcare, working towards more timely appointments and accommodating the specific needs of rural veterans should all increase overall veteran satisfaction.

Another critical area that AMVETS is pleased to see the VA address in their improvement plan is the lack of continuity across the VA system. Though the VA has a number of strengths, they seem to be found only in isolated pockets. We've all heard widely varying reports of exceptional VA service, as well as, sub-optimal service from various VA medical centers around the country.

Since every veteran is entitled to a positive experience when using the VA, it is absolutely critical that VA's operations be standardized across all of their business lines and that anyone 'doing it right' should be recognized and required to share their best practices nationally.

Perhaps the most important part of the VA's efforts to improve itself, is the creation of the MyVA Task Force. This body is meant to be nimble and quick, creative, thoughtful and ultimately will be responsible for turning ideas into reality, while simultaneously preserving those things which VA does best and ensuring interoperability of all processes. In a nutshell, their job is to 'make things happen'. Never an easy task to accomplish, the Task Force, which is comprised of both leadership and staff members, will have two years to bring the VA, and all its business lines, into the 21st century.

AMVETS applauds the VA for establishing a new system-wide customer service organization whose mission is to design and implement a superior Veteran Experience, to include integrating the mechanisms to deliver it. A Chief Veteran Experience Officer, who reports to the Secretary, will lead this organization. We believe this is a critically needed improvement, which should pay huge dividends for veterans.

Additionally, the creation of the national network of Community Veteran Advisory Councils (CVACs) to coordinate better service delivery with local, state and community

partners will play an important role in helping to rebuild trust between the VA and the veterans it serves.

Change and employees who are willing and able to effect that change are vital for the success of any business, but the best laid plans can die a slow death without the 'buy-in' of every employee at every level. Every organization has its own specialized culture and historically the VA's culture has been part of its problem. A negative or close-minded culture stifles innovation and hinders progress and merely changing the top dog alone is not enough to break through this kind of inertia. Until every VA leader and every employee is held responsible and accountable for their contributions to the organization as a whole, as well as their actions (or lack thereof), nothing will change for the better. It is for this reason that AMVETS is glad to see that this issue has been recognized by the Secretary and that the VA's improvement plan contains a framework to address this concern.

Though to some, the following features of the VA's plan to improve the veteran experience may seem somewhat trivial, in the grand scheme of things, the positive benefits are cumulative and include:

- the development of user-friendly, consistent and accurate signage at all VA facilities;
- Wi-Fi access at VHA facilities;
- Integrated (VHA, VBA & NCA), Local Town Halls;
- Improved organizational phonebook search capability;
- development of a single customer-facing website;
- implementation of "VA311" so veterans can more easily get information via phone; and
- installing a VBA presence at VHA facilities

b. Improving the Employee Experience:

While AMVETS acknowledges that without employees, there would be no VA, it is somewhat frustrating that every conversation about veterans and VA accountability generally seems to focus more on VA employees and their needs than on the needs of veterans. AMVETS is also aware that a large number of VA employees are also veterans, but VA's employees are represented by a union which advocates for them, so we believe their interests are already being addressed. In general, AMVETS believes VA employees are more than adequately compensated for the work they do. To the best of our understanding, VA employees are not required to risk their lives on a daily basis, face deployments, work in the extremes of heat or cold, leave their families, etc., yet they enjoy employment protections that non-federal workers don't.

This does not mean that AMVETS condones unfair treatment of any kind for any federal, military or civilian employees, we support equity and justice for all workers; it merely means that our specific job, as a Veteran Service Organization, is to focus only on our veterans and their needs.

AMVETS acknowledges that a fairly compensated, knowledgeable and well trained staffs that have the proper tools to accomplish their mission make the best employees. Therefore we are encouraged to see the VA reviewing their employee evaluation and hiring processes so that only the best and the brightest will be hired, which ultimately will greatly improve the veteran experience.

All this being said, AMVETS is encouraged by the VA's plan to harness the expertise of its own employees by creating 'performance improvement teams', which will help to eliminate or improve any processes that impede excellent customer service or service delivery.

Not sure where the consolidating of VA's various maps falls within these focus areas, but AMVETS is happy to see VA's many organizational maps restructured into one map with five regions. This single regional framework should make it easier for both veterans and VA employees to navigate the VA's convoluted system while simultaneously improving communications, optimizing productivity and more efficiently coordinating VA services. AMVETS also supports the downsizing of the VISNs from 21 to 18 for the same reasons.

Some of the additional employee related features that VA hopes to have in place by the end of 2016 which AMVETS fully endorses include:

- VA 101 training to improve employee knowledge and understanding of VA's history and its various services;
- improved customer service training for front line employees;
- expanded leadership development opportunities;
- improved line of communications between management and employees;
- streamlined hiring process; and
- improved evaluation and performance measures

Inevitably, these efforts will not only improve the morale and competence of VA employees, but the end result should help to improve the veteran experience.

The last thing AMVETS wants to do is to gratuitously criticize the VA, so I'd like to take this opportunity to briefly focus on some of the positives of the VA healthcare system. Those positives include the fact that:

- VA is the largest direct provider of health-care services in the nation;
- VA provides the most extensive training environment for healthcare professionals;
- VA is the nation's most clinically focused setting for specialized medical and prosthetics research;
- VA provides specialized health-care services in a number of areas that cannot be adequately duplicated in the private sector, including: spinal cord injury/dysfunction; blind rehabilitation; traumatic brain injury; prosthetic services; mental health; and war-related poly-traumatic injuries;
- VA is among the most efficient and cost-effective healthcare system in the nation;
- VA sets the standards for quality and efficiency and does so at or below the Medicare rates, while simultaneously serving a population that is older and has a higher percentage of individual health problems.

What is needed now more than ever to effect beneficial changes within the VA are cool heads and creative thinkers, to include the VA and all it stakeholders. This is where the MyVA plan comes into play.

AMVETS too has some suggestions, that some of you may have previously seen, which we would like to reiterate before closing out these remarks. I believe there are some commonalities with the MyVA plan.

AMVETS Specific Recommendations:

- Ensure that both advanced appropriations and discretionary funding for VA keeps pace with medical care inflation and healthcare demand as recommended in the IB so that all veterans healthcare needs can be adequately met;
- 2. Maximize the use of non-physician medical personnel as a way to mitigate physician shortages, while always maintaining the highest level of patient safety and reduce patient wait times especially while utilization of the VA system continues to rise;
- 3. Ensure that VA makes more realistic third-party medical care collection estimates so that Congress doesn't end up under-appropriating funds based on false expectations which in turn negatively impact veteran care. Additionally, VA needs to redouble its efforts to *increase* its medical care collections efforts, because taken together, the cumulative effects of overestimating and under-collecting only degrade the care available to our veterans. Furthermore, VA needs to establish both first- and third-party copayment accuracy performance measures which would help minimize wasted collection efforts and veteran dissatisfaction;

- 4. VA needs to incorporate civilian healthcare management best practices and include a pathway to VA hospital/clinic management for civilians as part of their succession plan requirements, so that VA will be able to attract the best and the brightest healthcare managers in the industry;
- 5. VA could immediately increase its doctor/patient (d/p) ratio to a more realistic and productive levels in order to cut wait times for veterans needing treatment and/or referrals. While the current VA (d/p) ratio is only 1:1200, the (d/p) ratio for non-VA physicians is close to 1:4200. Instituting this one change would drastically improve our veterans access to needed healthcare;
- 6. VA needs to improve its patient management system so that veterans have more appointment setting options available to them, which could reduce staffing errors and requirements. VA should also consider utilizing a hybrid system whereby half the day might consist of scheduled appointment and the other half would be for walk in or same-day appointment. The elimination of the need for non-specialty appointments would allow veterans quicker access to their primary care providers;
- 7. The current VA healthcare system appears to be top-heavy with administrative staff and short-handed when it comes to patient-focused clinical staff. This imbalance can only exacerbate veteran wait times;
- 8. The VA needs to thoroughly review its entire organizational structure in order to take advantage of system efficiencies and to maximize both human and financial resources, while also minimizing waste and redundancies;
- 9. VA needs to collaborate with HHS (Health & Human Services) so that it can utilize/share the benefits of the UDS (Uniform Data System). The UDS is a core set of information appropriate for reviewing and evaluating the operation and performance of individual health centers. The ability to track, through the UDS system, a wide variety of information, including patient demographics, services provided, staffing, clinical indicators, utilization rates, costs, and revenues would be invaluable in improving the overall VA healthcare system;
- 10.Rather than have veterans go unseen or untreated due to limited appointment or physician availability, veterans should be allowed to utilized the currently existing system of FQHCs (Federally Qualified Health Centers). FQHCs include all organizations receiving grants under section 330 of the Public Health Service Act, certain tribal organizations, and they qualify for enhanced reimbursement from Medicare and Medicaid, as well as other benefits. FQHCs are required to: serve an underserved area or population; offer a sliding fee scale; provide comprehensive

services; have an ongoing quality assurance program; and to have a governing board of directors. Allowing veterans to seek care, even on a temporary basis, until the VA appointment backlog is eliminated, would provide our veterans with immediate care and would relieve some of the pressure on the VA system;

- 11.VA should review, and consider adopting, civilian medical management best practices as a tool for improving its own healthcare operations;
- 12.VA must immediately improve its recruitment, hiring and retention policies to ensure the timely delivery of high quality healthcare to our veterans. VA currently utilizes a cumbersome and overly-lengthy hiring process which reduces its ability to deliver critical services. VA need to consider adopting a more expedient hiring/approval process which could include some form of provisional employment;
- 13.VA needs to have, and utilize, the option to terminate non-performing employees at all levels of the organization so that only dedicated, accurate, motivated employees will remain in service to our veterans; and
- 14. Finally, VA needs to reform their incentive programs so that only high-performing employees receive appropriate bonuses for their excellence in serving our veterans.

In closing, it is interesting to note that in the last couple of years, numerous entities have developed a variety of proposals for addressing the shortcomings within the VA. While no individual plan has been 'perfect', they are worth reviewing and perhaps incorporating specific recommendations on a case-by-case basis. Perhaps most importantly, the Commission of Care has not yet completed their mission and their recommendations will have to be incorporated into the VA's overall redesign.

This completes my statement at this time and I thank you again for the opportunity to offer our comments on pending legislation. Feel free to reach out to me at dzumatto@amvets.org if have any questions.



Diane M. Zumatto of Spotsylvania, VA joined AMVETS as their National Legislative Director in August 2011. Zumatto a native New Yorker and the daughter of immigrant parents decided to follow in her family's footsteps by joining the military. Ms. Zumatto is a



former Women's Army Corps/U.S. Army member who was stationed in Germany and Ft. Bragg, NC, was married to a CW4 aviator in the Washington Army National Guard, and is the mother of four adult children, two of whom joined the military.

Ms. Zumatto has been an author of the <u>Independent Budget</u> (IB) since 2011. The IB, which is published annually, is a comprehensive budget & policy document created by veterans for veterans. Because the IB covers all the issues important to veterans, including: veteran/survivor benefits; judicial review; medical care; construction programs; education, employment and training; and National Cemetery Administration, it is widely anticipated and utilized by the White House, VA, Congress, as well as, other Military/Veteran Service Organizations.

Ms. Zumatto regularly provides both oral and written testimony for various congressional committees and subcommittees, including the House/Senate Veterans Affairs Committees. Ms. Zumatto is also responsible for establishing and pursuing the annual legislative priorities for AMVETS, developing legislative briefing/policy papers, and is a quarterly contributor to 'American Veteran' magazine. Since coming on board with AMVETS, Ms. Zumatto has focused on toxic wounds/Gulf War Illness, veteran employment and transition, military sexual trauma, veteran discrimination and memorial affairs issues.

Zumatto, the only female Legislative Director in the veteran's community, has more than 20 years of experience working with a variety of non-profits in increasingly more challenging positions, including: the American Museum of Natural History; the National Federation of Independent Business; the Tacoma-Pierce County Board of Realtors; The Washington State Association of Fire Chiefs; Saint Martin's College; the James Monroe Museum; the Friends of the Wilderness Battlefield and The Enlisted Association of the National Guard of the United States. Diane's non-profit experience is extremely well-rounded as she has variously served in both staff and volunteer positions including as a board member and consultant. Ms. Zumatto received a B.A. in Historic Preservation from the University of Mary Washington, in 2005.

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