

Congress of the United States
Washington, DC 20510

March 1, 2019

The Honorable Robert Wilkie
Secretary of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

Mr. Secretary,

We write today concerned that some veterans are lacking the opportunity to utilize earned health care benefits and incurring significant out-of-pocket costs because they do not understand the complicated rules surrounding eligibility for non-Department of Veterans Affairs' emergency care.

For example, section 1725 of title 38, United States Code, requires, in part, that veterans receive care in VA health care facilities within the 24-month period preceding non-VA emergency care treatment to be eligible for reimbursement of their non-VA emergency treatment expenses. These are veterans who have no other health insurance and would absorb the costs of non-VA emergency care if ineligible for reimbursement of non-VA emergency treatment expenses. Complicating matters is section 1728 of title 38, which allows, in part, for reimbursement of non-VA emergency care even if the veteran has not accessed VA in-house health care services in the previous 24 months. The distinctions between sections 1725 and 1728 of title 38, are easily overlooked by veterans and lead to unexpected liability for emergency care expenses.

In Fiscal Year 2018, VA denied veterans' emergency care claims a staggering 77,432 times because they had not utilized VA in-house health care services in the previous 24 months. These avoidable denials take a financial toll on veterans and their families and leave them reluctant to access future health care services from VA. We are especially concerned that as VA broadens the rules on eligibility for community care, that some veterans will rely exclusively on private-sector care and not understand that by failing to utilize VA's in-house health care services that they are forfeiting their ability to claim emergency care benefits for which they are entitled.

As such, we suggest VA proactively reach out to veterans who have not utilized VA care in the past year and remind them that they are enrolled in VA health care, that it is important to be under the regular care of a medical professional, and that they may become ineligible for certain benefits if they do not utilize VA in-house care more regularly. We also recommend that as part of the educational program on health care options required under Section 121 of the VA MISSION Act, that the Department include information about emergency care, generally, and the 24-month rule, specifically, so that veterans can make better informed decisions on how different health care options affect their ability to access non-VA emergency care benefits.

We appreciate your attention to this important issue and look forward to working with you to ensure that veterans are better informed about how VA health care benefits work so that they can make informed decisions about their health care.

Sincerely,



Jon Tester
Ranking Member
Senate Veterans' Affairs Committee



Mark Takano
Chairman
House Veterans' Affairs Committee