

**STATEMENT OF
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VETERANS HEALTH ADMINISTRATION (VHA)
DEPARTMENT OF VETERANS AFFAIRS (VA)
BEFORE THE
COMMITTEE ON VETERANS' AFFAIRS
UNITED STATES SENATE
FIELD HEARING ON
"BREAKING BARRIERS: IMPROVING VETERANS' MENTAL HEALTH IN
LOUISIANA"
AUGUST 14, 2025**

Good morning, Senator Cassidy, and distinguished guests. Thank you for the opportunity to discuss VA's extensive efforts to enhance the mental health and well-being of Veterans in Louisiana. My name is Fernando Rivera, and I am the interim Network Director of Veterans Integrated Service Network (VISN) 16. I am accompanied today by Dr. Tina McClain, Mental Health Lead for VISN 16, and Dr. Laurel Harlin, Chief Psychologist from the Southeast Louisiana Veterans Health Care System (SLVHCS) in New Orleans. We recognize the critical role Congress plays in shaping Veteran mental health policy and appreciate your ongoing efforts to ensure access to care.

We understand that a disproportionate share of Veterans live in rural America and that they have difficulty accessing health services for reasons similar to other rural residents. Our efforts throughout VISN 16, and in particular Louisiana, continue to provide real solutions that increase access to mental health care for Veterans despite geography or availability of services. I appreciate the opportunity to discuss key initiatives within VISN 16 and the SLVHCS that demonstrate our commitment to Veterans' mental health, particularly addressing the challenges faced by Veterans in rural and underserved areas in Louisiana. Of the estimated 16.5 million Veterans living in the United States and its territories, approximately 4.2 million reside in rural areas.

Veterans in rural areas enroll in VHA health care at a higher rate (66%) than their urban counterparts (46%). Out of the 8 facilities in VISN 16, 5 serve populations where nearly or more than 50% of the enrolled Veterans are from rural areas, including the Alexandria and Shreveport VA Medical Centers (VAMCs).

In VA, we rely on collaborations, innovation, and community care to deliver mental health care to Veterans who reside in rural communities. From implementing advanced telehealth services to fostering community collaborations and supporting VHA's Office of Rural Health (ORH) enterprise-wide initiatives (EWI), VA proactively works to continually bridge the gap in mental health care access for Veterans living in rural areas.

Our goal across VA, and certainly here in VISN 16, is to ensure that no Veteran is left behind, regardless of where they live.

Veteran Health Care in Louisiana

Veterans face unique health challenges, including a high prevalence of trauma-related conditions like posttraumatic stress disorder (PTSD) and traumatic brain injury (TBI). In areas like Louisiana, severe weather events such as hurricanes compound these issues by displacing Veterans from their homes, jobs, and essential community resources. Veterans from underserved communities face disproportionate risks due to disparities in access to mental health care and social isolation in rural areas exacerbates the risk of suicide and hinders recovery. Additionally, high rates of chronic health conditions among Veterans, such as diabetes, heart disease, substance use disorder, and obesity, which often interact with mental health issues, complicate the need for comprehensive care.

While these challenges exist, we are also proud of the comprehensive range of health care services, including inpatient mental health and outpatient care, that we provide to Veterans throughout VISN 16. Our 3 Louisiana facilities (Overton Brooks VAMC in Shreveport, Alexandria VAMC in Pineville, and SLVHCS in New Orleans) have been serving the state of Louisiana for over 95 years. We employ nearly 5,800 health care professionals across our service area and deliver care to 151,000 Veterans annually who are enrolled and receiving care from VA throughout the state. We are

committed to expanding rural health access across our great state and reaching Veterans in both urban and rural areas in all 64 parishes.

Meeting Access Challenges in Rural Areas

Access to mental health care within the VA system can be a significant challenge in rural Louisiana, particularly in central counties, which lack sufficient mental health providers and integrated care approaches. In Louisiana, there are only seven VA mental health residential and rehabilitation treatment program (MH RRTP) beds, limiting Veterans' access to that level of care. MH RRTPs offer evidence-based therapies in a structured environment and are essential components of the mental health continuum of care. Given that MH RRTP services are not readily available at each of our VAMCs, VA's fiscal year (FY) 2026 President's budget request puts Veterans first by proposing a \$1.5 billion expansion of MH RRTP. This funding aims to close the care gap, ensuring timely and enhanced access to critical mental health and substance use disorder treatment for Veterans for MH RRTP care in the community. At the same time, VA will be increasing its internal capacity to deliver high quality residential care ¹ In VISN 16, implementation of centralized MH RRTP screening has helped us expedite referrals and admissions. For Veterans in Louisiana in FY 2025 to date, there has been a 6.5% increase in Veterans admitted to MH RRTPs within 72 hours of referral and a 4.7% increase in admissions within 7 days.

We understand that geographic and transportation barriers, along with insufficient broadband and technology infrastructure, hinder both in-person and virtual care services. Limited access to high-speed internet prevents effective utilization of telehealth services both within and external to VA care. That is why VA is committed to modernizing access points for rural Veterans and why we will continue to seek out collaborations, programs, and opportunities to build technology infrastructure that would extend mental health services for Veterans in hard-to-reach communities.

Additionally, to address transportation challenges, VA has launched several assistance programs, such as the Veterans Transportation Service (VTS) to help Veterans reach the care they need. Other services used in VISN 16 include virtual

¹ <https://department.va.gov/wp-content/uploads/2025/06/FY26-Mental-Health-Residential-Rehabilitation-Treatment-Programs.pdf>

mental health services that have become pivotal tools, particularly in rural and remote areas where access to care can be challenging. Significant investments in virtual health infrastructure, including VA Video Connect (VVC), enable Veterans to connect with mental health providers without the need for lengthy travel, supporting continuity of care and better management of mental health conditions. In FY 2025 to date, across our 3 main Louisiana facilities, VA has provided nearly 10,000 virtual mental health appointments. Additionally, we are working to expand mental health services at community-based outpatient clinics (CBOC) and increase the number of mental health community care providers – beyond the nearly 1,800 that currently participate in our Community Care Network in Louisiana. This network furnishes care through the Veterans Community Care Program (VCCP).

The VCCP is critical to helping meet the needs of all Veterans, particularly those in rural or underserved areas, by ensuring they receive timely, high-quality care closer to home. Using a network of over 1.4 million non-VA providers, VCCP delivers essential hospital, medical, mental health, and specialty care services to eligible Veterans. VA has taken steps to address geographic and transportation barriers, streamline referrals, improve care coordination, and enhance oversight of community providers to maintain continuity and quality of care. The integration of community care reflects VA's commitment to Veteran-centered, timely, and high-quality care.

Innovative Collaborations Making an Impact

VISN 16 has established several initiatives aimed at improving mental health care for Veterans, with a special emphasis on rural Louisiana. These programs leverage local resources and community organizations to provide comprehensive support. For example, the SLVHCS collaborates with local mental health providers, non-profit organizations, educational institutions, rural faith-based organizations, and Federally Qualified Health Centers to deliver integrated care and support services to build local capacity for mental health care delivery. These efforts are essential in overcoming geographic and socio-economic barriers to care and are part of VA's broader strategy to embrace public-private collaboration to meet Veterans where they are. Additionally, local VA facilities have strengthened community collaborations through Veteran Community

Partnerships (VCP) involving churches, shelters, and nonprofits to reach at-risk Veterans.

Effective Coordination to Meet Needs

In addition to these collaborations, effective coordination between VA, state, local entities, the Louisiana Department of Health, and local mental health authorities is crucial for helping us meet the needs of our Veterans. This coordination is also critical to helping prevent Veteran suicide – a key clinical priority for us in Louisiana and for the Department. Improved information sharing between VA, the Louisiana Department of Health, and local providers helps close service gaps and align suicide prevention strategies. Such collaboration is essential to executing Secretary Collins' vision for unified Veteran care across Federal, state, and community levels.

Coordination is also a vital part of our outreach to Veterans with elevated suicide risk, such as those who recently left active duty, are homeless, or are justice-involved. We employ shared care navigators to assist Veterans transitioning between VA and community services, particularly in areas without full-service VA facilities.

Conclusion

Thank you, Senator Cassidy, for the opportunity to discuss VA's efforts to improve mental health care for Veterans in Louisiana. Addressing access challenges, particularly through innovative collaborations, infrastructure, multi-level government coordination, and community care, is essential to this mission. With the continued support of the Committee, we are dedicated to transforming the way we serve Veterans in rural and underserved communities in Louisiana, ensuring they receive the mental health services they have earned and deserve.