



**American Hospital
Association®**

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July 30, 2014

The Honorable Bernie Sanders
Chairman
Committee on Veterans' Affairs
United States Senate
412 Senate Russell Building
Washington, DC 20510

The Honorable Jeff Miller
Chairman
Committee on Veterans' Affairs
United States House of Representatives
335 Cannon House Office Building
Washington, DC 20515

Dear Chairman Sanders and Chairman Miller:

On behalf of the American Hospital Association's (AHA) nearly 5,000 member hospitals, health systems and other health care organizations, and our 43,000 individual members, I am writing to express our strong support for the conference agreement on H.R. 3230, the *Veterans Access, Choice, and Accountability Act of 2014* and to urge its quick passage by Congress.

The goal of every hospital in America, including those operated by the Department of Veterans Affairs (VA), is to ensure patients get the right care at the right time, in the right setting. For decades, the VA has been there for our veterans in times of need, and it does extraordinary work under very challenging circumstances for a growing and complex patient population. VA patients are generally older and sicker with more limited resources, in many cases requiring greater care coordination. The VA also is the definitive source of care for the treatment of conditions related to the occupational health risks associated with military service; for example traumatic brain injury, polytrauma, spinal injury and post-traumatic stress disorder. In addition, the VA is a leading expert on helping patients who require prostheses navigate life post-amputation. The nation's hospitals have a long-standing history of collaboration with the VA and stand ready to assist them, and our veterans, in any way they can. We believe the final conference agreement will help improve veterans' health by enabling them to more easily secure the care that they need in the health care setting of their choice.

The AHA appreciates conferees retaining language in the final agreement that enables hospitals to contract directly with their local VA facilities rather than requiring hospitals to go through a managed care contractor. Many hospitals have ongoing and cooperative relationships with their local VA facilities, which can be built upon to enable veterans to readily secure needed care. Allowing hospitals to contract directly with the VA allows hospitals to meet the needs of their local veteran community and provides the quickest route for veterans to be seen by a primary care provider.



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The AHA also appreciates the retention of language that establishes adequate reimbursement rates for non-VA providers, as well as provisions to requiring the VA Secretary to implement a system to ensure prompt payment of claims. We believe these provisions will increase veterans' access to care and encourage broad participation by non-VA providers.

Lastly, the AHA is pleased that conferees have minimized the administrative burden on non-VA health care providers furnishing care to veterans by exempting them from federal contractor or subcontractor obligations imposed by the Department of Labor's Office of Federal Contract Compliance Programs for the limited duration of this legislation.

The AHA applauds Congress for the speed with which it has moved to allow veterans to more easily secure care from civilian providers. We strongly support the conference agreement on H.R. 3230 and urge Congress to act swiftly to enact it into law.

Sincerely,

Rick Pollack
Executive Vice President