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## COMPTROLLER GENERAL OF THE UNITED STATES WASHINGTON D.C. 20548

B-204289

September 15, 1981

The Honorable G. V. Montgomery Chairman, Committee on Veterans' Affairs House of Representatives

Dear Mr. Chairman:

Your July 28, 1981, letter, asked for our views on H.R. 3971 which would amend title 38, United States Code by directing the Comptroller General to assign one employee of the General Accounting Office (GAO) to each Veterans Administration (VA) facility providing hospital care. The employee would function as an ombudsman, investigating and reporting on patients' complaints of inadequate health care or treatment. You also asked for an estimated cost of this proposal.

As you know, many organizations, both within and outside the VA, monitor and report quality of health care issues involving VA medical centers. In addition to GAO, these include

- --VA's Office of Inspector General, the Office of Medical Inspector, and the Health Services Review Organization;
- --veterans' service organizations; and
- --about 40 professional and regulatory agencies, such as the Joint Commission on Hospital Accreditation.

These organizations generally provide (1) means for identifying health care problems, (2) ways to resolve the problems, and (3) reporting either the problems or an assessment of the problems to the Administrator of Veterans' Affairs and to the Congress. For example, over the 2-year period ending March 31, 1981, the Inspector General had received 160 allegations regarding patient care of which 71 were determined to be well founded. There were 53 Systematic External Review Program surveys completed in fiscal year 1980 and numerous Systematic Internal Review surveys conducted by the medical centers. In addition, VA conducts an annual patient satisfaction survey. Participating in the 1980 fiscal year

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survey were more than 22,000 hospitalized patients and 52,000 clinic patients. These surveys provide information on individual facility performance, including comparison of similar patients in similar facilities.

Over the past several years we have conducted many extensive reviews of VA medical programs. In fiscal year 1981 alone, we conducted 12 health-related reviews during which we performed work at 30 different VA medical centers.

We believe that the foregoing coverage of patient and health care issues is adequate, and if deficiencies are noted, they can be promptly acted upon by the Administrator of Veterans' Affairs. The Administrator has the primary responsibility for establishing and maintaining adequate internal controls over operations and correcting deficiencies in program operations. H.R. 3971 would place us in the position of relieving the Administrator of what is clearly his area of responsibility—investigating complaints of patient care or treatment and taking prompt corrective action.

Our basic policy is to apply our limited resources to Federal agencies' programs, activities, and operations where they will be the most useful to the Congress, and do the most good in bringing about greater efficiency, economy, and effectiveness. H.R. 3971 would require us to place an extraordinary amount of resources in one limited area and severely impact on our ability to review other Federal programs.

If H.R. 3971 is enacted, we estimate 1/ that it would cost about:

<sup>1/</sup>For our analysis, we assumed that the bill referred to the 172 VA medical centers including 92 VA nursing homes which provide inpatient care. However, 38 U.S.C. 601(4) defines "VA facilities" to include facilities over which the Administrator has direct jurisdiction and Government and private facilities for which the Administrator contracts. The first category is the 172 medical centers; the second and third categories include 21 Federal hospitals, 7 State home hospitals, and hundreds of other governmental and private hospitals and nursing homes which provide inpatient care to veterans and are reimbursed by VA.

- --\$7.7 million annually for staff salaries or consultant fees for medical advisors, and related travel.
- --\$1.3 million to relocate 106 staff. GAO regional offices are close to 66 VA medical centers. The staff transfers would be required to cover the remaining 106 centers.

We believe that H.R. 3971 is not necessary and would result in an inefficient and ineffective use of our limited resources. Therefore, we recommend that your Committee not report favorably on the bill.

We trust this information is responsive to your needs.

Sincerely yours,

Acting Comptroller General

of the United States