

GAO@100 Highlights

Highlights of [GAO-21-476](#), a report to congressional addressees

Why GAO Did This Study

In June 2019, VA implemented a new community care program—the VCCP—under which eligible veterans can receive care from community providers. GAO has previously reported on challenges VA has faced regarding oversight of its community care programs, including the VCCP. VA’s ability to ensure veterans have timely access to care under the VCCP is especially important as VA continues to respond to the COVID-19 pandemic.

The CARES Act includes a provision for GAO to report on its ongoing monitoring and oversight efforts related to the COVID-19 pandemic. This report describes (1) VA’s response to the COVID-19 pandemic as it relates to the VCCP and (2) challenges selected VA medical facilities experienced scheduling VCCP appointments.

GAO reviewed VA documentation, such as guidance for VCCP appointment scheduling, and reviewed VCCP referral and appointment data. GAO interviewed officials from VA and its two third-party administrators, and community care management and staff from six VA medical facilities, which were selected, in part, based on complexity, rurality, and location.

What GAO Recommends

GAO is not making new recommendations in this report but reiterates its past recommendations (1) to Congress to require VA to implement a VCCP wait-time measure and (2) to VA directing medical facility leadership to assess their community care staffing needs. VA provided general and technical comments, which GAO incorporated as appropriate.

View [GAO-21-476](#). For more information, contact Sharon M. Silas at (202) 512-7114 or silass@gao.gov.

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VETERANS COMMUNITY CARE PROGRAM

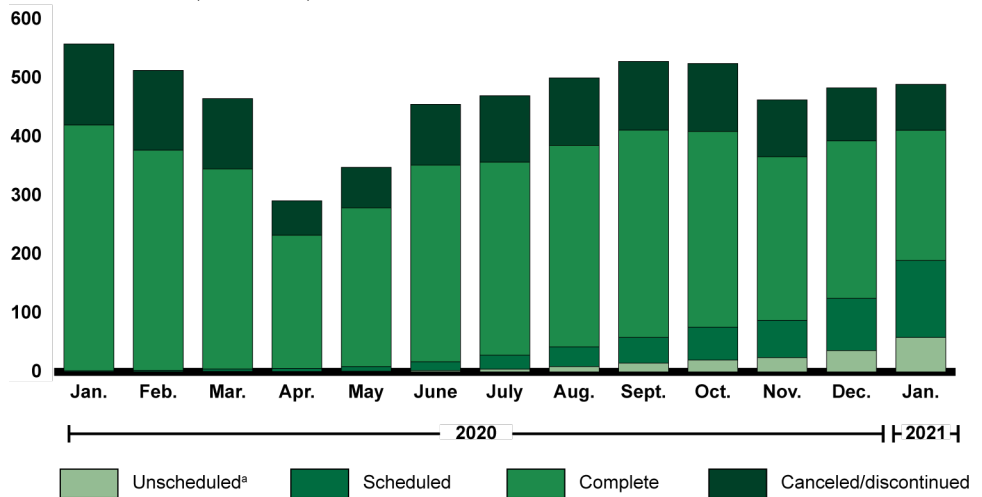
VA Took Action on Veterans’ Access to Care, but COVID-19 Highlighted Continued Scheduling Challenges

What GAO Found

During the COVID-19 pandemic, the Department of Veterans Affairs (VA) took action regarding veterans’ access to care through the Veterans Community Care Program (VCCP). For example, VA recommended that VA medical facility staff schedule telehealth appointments whenever possible in order to reduce veterans’ risk of exposure to COVID-19. VA also directed facility staff to prioritize appointment scheduling and monitor referrals. Nevertheless, for referrals created between January 2020 and January 2021, GAO’s analysis below shows that about 172,000 referrals (3 percent) remain unscheduled as of March 24, 2021.

Status of Veterans Community Care Program Referrals Created Between January 2020 and January 2021, as of March 24, 2021

Number of referrals- (in thousands)



Source: GAO analysis of Department of Veterans Affairs data. | GAO-21-476

Note: A referral is complete after the veteran attends the appointment and VA staff receive medical documentation from the provider. A canceled referral is returned to the ordering VA provider. A discontinued referral is no longer wanted or needed. Referral data from one VA facility were not reported after October 2020.

*The number of unscheduled referrals created in January 2020 through May 2020 is too small to display in this figure.

Staff at six selected VA medical facilities told GAO they faced both new and previously identified challenges scheduling VCCP appointments during COVID-19. For example, staff from all six facilities stated that community care wait times increased during the pandemic. However, as VA lacks an overall wait-time measure for the VCCP, the effect of COVID-19 on appointment timeliness is unknown. GAO previously identified, and made recommendations to address, VA’s lack of wait-time measures under its previous community care programs in 2013 and 2018. Given that VA had not implemented these recommendations over the prior 7 years, in 2020 GAO recommended congressional action to require VA to establish a VCCP wait-time measure.

Staff from all six facilities said they also faced challenges with understaffed community care offices and increased referral volume as veterans returned to seek care. GAO previously recommended in 2020 that VA direct its medical facilities to assess community care staffing needs. VA has taken some action to address these concerns but has not yet implemented this recommendation.