VETERANS

ONE HUNDRED THIRD CONGRESS

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<u>Principles that should govern the development of VA's role under national health care reform:</u>

1. Preserve the independence and viability of the VA health care system as a resource to serve the particular needs of veterans;

2. Maintain the VA health care system as a provider that offers a full range of services (rather than narrowing VA's role to providing simply long-term and specialized care, for example);

3. Recognize the strengths of the VA health care system and its ability to compete as an enrollment option for veterans;

4. Enable VA to assure core-eligible veterans (primarily service-connected and lower income veterans) a continuum of services based on a reform of eligibility;

5. Preserve the principle that those with the highest priority to VA care would continue to receive essentially cost-free care as under existing law;

6. Provide for <u>assured</u>, adequate financing for VA health care (to include an "investment" of monies for needed construction, modernization, and replacement equipment) that does not place VA at a disadvantage relative to entities with which it may be competing;

7. Give higher-income veterans the opportunity to choose VA as a care-provider and have their care financed through insurance and other reimbursements;

8. Assure and foster continuation of VA's education, research, and backup-to-DoD missions; and

9. Encourage needed system reforms, and commit to expanded funding support for needed improvements (such as construction to facilitate a shift in emphasis from inpatient to outpatient care, modernization of plant and equipment, and expanded information systems).

FOR RELEASE:
July 16, 1993

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202/224-6101

STATEMENT OF SEN. JAY ROCKEFELLER

WASHINGTON -- I regret that the issue of abortion may overshadow an important effort of the Senate Veterans' Affairs Committee to make the VA health care system more responsive to America's 1.2 million women veterans.

I am proud of our committee's approval of legislation to direct the VA to provide better health care services and carry out research to meet the health care needs of women veterans. The Womens Veterans Health Care Act of 1993 ensures access for women veterans to reproductive health services, including maternity care. Among the services we authorize are mammographies and Pap smears.

Our legislation does not even mention abortion. The committee did reject an amendment to prohibit veterans hospitals from providing abortions, and leaves that medical decision to women and their doctors.

The purpose of this legislation is to respond to the neglected health care needs of women veterans, who have earned the right through their military service to turn to the VA for the highest quality health care.

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The Health Security Plan

VETERANS

Health care reform will honor the nation's commitment to continue providing comprehensive health care to its veterans. Reform will give veterans more choices about how and where they receive care. The Health Security plan will preserve veteran benefits, increase veteran health care system flexibility, and maintain specialized services.

Special Populations

- Low income Veterans and those with service connected disabilities currently served by the Department of Veteran Affairs will receive the benefits they do today.

- Congress will continue to fund specialized services, such as treatment for post-traumatic stress disorder. Low-income veterans and those with service-connected disabilities will have access to these specialized services whether or not they enroll in a VA health plan.

New Eligibility

- In areas where Veterans' plans exist, Veterans who are not currently eligible for care through the VA will have the option of enrolling in Veterans' plans to receive the comprehensive benefits package.

- Veterans who enroll in a fee-for-service plan may obtain health care through the VA system. Under that arrangement, they will be responsible for any contributions required.

Competitiveness

- The Department of Veteran Affairs will have the opportunity to organize health plans to compete with other health plans for Veteran enrollment in alliances.

- VA hospitals and clinics also will be provided with broad authority to enter into contract with other health plans to provide services to veterans.

Less Paperwork

- Under health reform, unnecessary reporting requirements and inspections that currently burden VA institutions and providers will be reduced, freeing VA providers to concentrate on patients rather than paperwork.

Funds

- Under the plan, the VA will be permitted to retain funds recovered from third-party payers.

- VA managers will be allowed to control budgets without traditional restrictions of line-items or earmarked funds, and delegate more flexibility to VA clinics and hospitals .

October 8, 1993