

Senator Patty Murray

SVAC Hearing on Caring for Veterans in Rural Areas

Thursday, February 26, 2009

Mr. Chairman, Senator Burr, thank you very much for holding today's hearing to assess how well the VA is caring for veterans in rural areas.

Before I begin, I want to thank today's witnesses for coming here to testify. And I look forward to hearing from them shortly.

Mr. Chairman - as you know - about 40 percent of all veterans who use the VA health care system today live in rural areas. And that's true of nearly half of the service members in Iraq and Afghanistan now.

But making sure those veterans can access care is one of the many problems we're still struggling to address.

The VA has done a tremendous amount of work to increase access in rural areas by establishing:

- new Community Based Outpatient Clinics - or CBOCs,
- Vet Centers,
- and Mobile Medical Units.

But we still have gaps in our ability to reach veterans who need care.

And I can tell you that it's one of the most common complaints I hear from veterans from my home state of Washington.

Many tell me they have to drive several hours - through snowy and icy conditions in the winter time - just to see their doctor and get basic care.

As you know, many of our veterans are getting up there in age, and this is a real strain on their health - and on their finances.

Unfortunately, the result is that many of them end up putting off preventive - and sometimes even necessary - treatment. And that's taking a real toll on their health.

The VA's studies have found that rural veterans are in poorer health than those living in urban areas where care is more accessible.

Congress and the VA have recognized the problem, and we've taken some proactive steps to correct this injustice:

- We created an Office of Rural Health within the VA to improve the delivery of care to rural veterans.

- We increased the mileage reimbursement to 41.5 cents per mile so that travel is more affordable.
- We increased outreach efforts to make sure more veterans are informed about their health care and benefits.
- We're taking advantage of new technology, like telemedicine, to compensate for the shortage of providers in rural areas.
- And we've created more CBOCs. The CBOCs in my home state have made a big difference for veterans on the Olympic Peninsula and in the city of Wenatchee. And we're looking forward to the permanent opening of the Northwest Washington CBOC as well.

But while each of these steps has been a significant improvement over the past, we still have work to do.

Among other things, I want to make sure the VA's Office of Rural Health has the resources to meet its full potential.

And I also want to ensure our rural veterans can get access to the best mental health care possible.

As many of us from rural states know, it can be very difficult to access to mental health care when you live miles from the nearest big city.

And so from recruiting and retaining health care providers in rural VA facilities - to monitoring and managing the quality of care provided in non-VA facilities - the challenges are complex.

And, while I realize there simply is not a silver bullet solution, we need to keep thinking about creative solutions to this serious problem.

So today, I look forward to hearing from our witnesses about their experiences and the steps they're taking to improve the care of our veterans living in rural areas. I hope this discussion will help us develop new ideas to make sure all of our veterans can get the care they have earned.

And again, I thank you, Mr. Chairman, for holding this hearing.