

Ranking Member Richard Burr

WASHINGTON, D.C. - Good morning and welcome to our witnesses today. Thank you, Mr. Chairman, for holding an oversight hearing on a topic that every single member of this Committee understands, health care for veterans who reside in rural areas.

About one-third of all veterans enrolled for VA health care live in rural communities as defined by the Census Bureau. Many of us can point to large portions of our states that have limited access to health care, and North Carolina is no exception. I am convinced we must tackle this problem, and I am eager to hear what our witnesses from VA are doing to solve it.

I am pleased that in recent years VA has continued to expand its presence of outpatient clinics in rural communities. VA has opened over 100 new community-based outpatient clinics in the past 5 years. I've had the pleasure of attending several VA clinic openings in North Carolina over the last couple of years. We have four more that will be opened within the next two years. These clinics will cut down on lengthy travel times and hopefully encourage veterans to get the essential primary care and basic mental health services they otherwise might not seek.

Along with these new clinics is the opportunity to expand the use of telemedicine. Technology now permits remote consultation and even some medical procedures or examinations to occur in the comfort of the patient's own home.

As this technology continues to improve, it will open up doors to deliver more care to veterans in remote areas. I want to hear the progress VA is making on this front.

Finally, access to care for rural veterans raises the potential to work in coordination with health care providers in rural communities. This is an area of great interest to veterans who live in very rural areas who have to drive great distances for their care.

Last year Congress passed legislation to test this concept with a pilot program allowing VA to team up with community providers for the care of veterans who live far from any VA healthcare facility. I look forward to hearing more about the implementation of this pilot program.

Mr. Chairman, I thank you again for calling this important oversight hearing. I think it is clear that there may be a lot we share in common on how best to deliver quality care to veterans in rural communities. What I think is needed now is not just words but execution so that veterans can get the care they need and deserve. I am committed to working with the Committee and the Administration to that end.

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