



AMERICAN ACADEMY OF
FAMILY PHYSICIANS
STRONG MEDICINE FOR AMERICA

June 3, 2014

The Honorable Barack H. Obama
President of the United States
The White House
Washington, DC 20500

Dear Mr. President:

As our nation and policy-makers work to resolve the many challenges facing access to health care services for our nation's veterans, the American Academy of Family Physicians (AAFP) and our 115,900 members stand ready to assist the Administration, Congress, and the Veterans Administration in assuring that all veterans have access to timely health care services. We are deeply troubled that so many veterans may face significant barriers accessing the health care system, especially primary care.

In its May 14 article "Veterans Affairs Secretary to Face Senate Questions on Delayed Care," the *New York Times* cited the Veterans Administration in reporting "*the number of primary care visits in the system rose by 50 percent over the past three years; the number of new nurses and other staff members increased a similar amount, but the number of full-time primary care doctors rose by only 9 percent.*" This shortage in primary care physicians is frequently cited as the primary reason so many veterans are facing lengthy delays, often over 100 days, securing an appointment with a VA primary care physician.

While the issues associated with the current and future VA physician workforce will take time and policy changes to resolve, we should not permit any additional delays in providing maximum opportunity for veterans seeking an appointment with a primary care physician. According to the VA and most media reports, the most significant challenges appear to be in accessing primary care services within the VA system. While there may be challenges accessing other physician and health care services, those appear to be less pressing than those facing the primary care structure. The AAFP recommends the following five actions as an intermediate step::

1. Allow civilian family physicians to provide primary care services to eligible veterans.
 - Payment for such services will require short-term revisions to current VA policy, but we should not allow such challenges to prevent veterans from receiving primary care services from those family physicians willing to do so.
2. Allow prescriptions prescribed by civilian family physicians to be filled at VA pharmacies.
 - Establishment of a policy that would allow veterans to fill prescriptions provided by civilian family physicians at VA pharmacies would prevent significant financial

www.aafp.org

President

Reid B. Blackwelder, MD
Kingsport, TN

President-elect

Robert L. Wergin, MD
Milford, NE

Board Chair

Jeffrey J. Cain, MD
Denver, CO

Directors

Wanda D. Filer, MD, York, PA
Rebecca Jaffe, MD, Wilmington, DE
Daniel R. Spogen, MD, Reno, NV
Carlos Gonzales, MD, Patagonia, AZ
H. Clifton Knight, MD, Indianapolis, IN
Lloyd Van Winkle, MD, Castroville, TX

Yushu "Jack" Chou, MD, Baldwin Park, CA
Robert A. Lee, MD, Johnston, IA
Michael Munger, MD, Overland Park, KS
Kisha Davis, MD, (New Physician Member), North Potomac, MD
Kimberly Becher, MD, (Resident Member), Culloden, WV
Tate Hinkle (Student Member), Brownsboro, AL

Speaker

John S. Meigs Jr., MD
Brent, AL

Vice Speaker

Javette C. Orgain, MD
Chicago, IL

Executive Vice President

Douglas E. Henley, MD
Leawood, KS

challenges for veterans and maintain some consistency with the delivery of pharmaceutical benefits to veterans.

3. Allow civilian family physicians to order diagnostic tests at VA facilities.
 - This would allow veterans to receive benefits inside the VA system and maintain some degree of continuity in care provided to veterans.
4. Allow civilian family physicians to refer patients to specialist physicians and other health care providers at VA facilities.
 - This would facilitate the continuity of care provided to veterans inside the VA system and prevent fragmentation and cost-shifts which could present barriers for many veterans.
5. Allow civilian family physicians to provide care to eligible veterans under the protections of the Federal Tort Claims Act (FTCA).

While these policy recommendations are not a solution to all the challenges facing the VA health system, they do represent an opportunity to alleviate the current backlog and facilitate access to primary care services for thousands of veterans. We believe these five actions would be beneficial to veterans and the VA health care system. While it may not be appropriate to make these changes on a national scale or permanent basis, we do support their implementation in those areas of the country facing the most significant challenges.

The AAFP stands ready to assist in the development of these or any other beneficial policies. Additionally, we are prepared to use our available resources to communicate such policy changes to our members and encourage them to assist their nation by providing care to eligible veterans.

Sincerely,



Jeffrey J Cain, MD, FAAFP
Board Chair

- C:
- The Honorable Harry Reid, Majority Leader, U.S. Senate
 - The Honorable Mitch McConnell, Minority Leader, U.S. Senate
 - The Honorable John Boehner, Speaker, U.S. House of Representatives
 - The Honorable Eric Cantor, Majority Leader, U.S. House of Representatives
 - The Honorable Nancy Pelosi, Minority Leader, U.S. House of Representatives
 - The Honorable Bernie Sanders, Chairman, Senate Veterans Affairs Committee
 - The Honorable Richard Burr, Ranking Member, Senate Veterans Affairs Committee
 - The Honorable Jeff Miller, Chairman, House Veterans Affairs Committee
 - The Honorable Michael Michaud, Ranking Member, House Veterans Affairs Committee