

United States Senate

WASHINGTON, DC 20510

April 29, 2016

David Shulkin, M.D.
Under Secretary for Health
Veterans Health Administration
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, D.C. 20420

Dear Dr. Shulkin,

We write to seek your commitment regarding the continuity of care for veterans currently utilizing the Access Received Closer to Home (ARCH) program as contracts under the program expire in August 2016.

Since 2011, ARCH has been successfully providing medical care for veterans living in rural areas surrounding the five pilot program locations—Caribou, Maine; Farmville, Virginia; Pratt, Kansas; Flagstaff, Arizona; and Billings and Anaconda, Montana. As evidenced by recent bipartisan legislation, we support the VA's plan to consolidate community care and develop one system for veterans, community providers and the VA to furnish timely and quality medical care to our nation's heroes.

As part of this consolidation of community care, we understand the Office of General Counsel has determined that ARCH veterans can access community care under the "unusual and excessive burden" clause within the Choice Program without any interruption in their care. This is positive news. We are particularly focused on the OGC's determination that this clause under Choice prevents any interruption in their care. It is our belief that some community care providers contracted under ARCH are not contracted under Choice. This disconnect is precisely why VA's consolidation of community care must proceed, but it is also a reminder that it will take time to transition community care providers under one system and we must guarantee that veterans do not experience a lapse in their care as a result.

We request a list of ARCH community providers that would need to contract with the VA under Choice in order to continue caring for ARCH veterans beyond the August 2016 expiration of the program. We realize that some community providers under ARCH may choose to not contract with the VA under Choice. As the case may be, we request a transition plan to replace or augment the services offered by an ARCH community provider that chooses not to contract with the VA under Choice.

Relationships formed between community providers and veterans ought not to be disrupted by the transition into the New Veterans Choice Program, especially when veterans are overwhelmingly satisfied with their community provider under ARCH. We request your

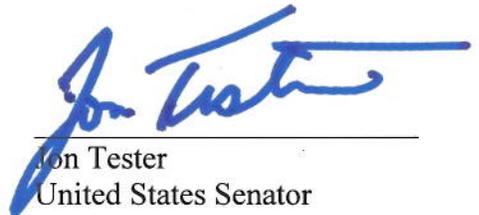
assurance that current community providers under ARCH will continue to serve an ARCH veteran if the veteran so chooses, particularly if the care sought occurs beyond August 2016. With your OGC interpretation of the “unusual and excessive burden” clause under Choice, we believe you have the authority and opportunity to guarantee ARCH veterans will not experience “any interruption in their care” with their ARCH community providers.

The ARCH program is a champion of successful community care, especially in areas where veterans have historically struggled to receive the care they need. We look forward to your response and are committed to working with you to ensure continuity of care throughout the transition to the New Veterans Choice Program.

Sincerely,



Jerry Moran
United States Senator



Jon Tester
United States Senator