

**Written Testimony for the Record of the American College of Physicians to the
House Appropriations Subcommittee on Military Construction, Veterans Affairs, and
Related Agencies**

**Re: FY2020 Appropriations, Department of Veterans Affairs
April 2, 2019**

The American College of Physicians (ACP) is pleased to submit the following written testimony for the record on its priorities, as funded under the U.S. Department of Veterans Affairs (VA), for Fiscal Year 2020. ACP is the largest medical specialty organization and the second-largest physician group in the United States. ACP members include 154,000 internal medicine physicians (internists), related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness. As the Subcommittee begins deliberations on appropriations for FY2020, ACP is urging funding for the following proven programs to receive appropriations from the Subcommittee:

- VA, Veterans Health Administration (VHA), \$89 billion, which includes the following within the VHA;
 - VA, VHA, Medical Services, \$56.1 billion;
 - VA, VHA, Medical Community Care, \$18.1 billion;
 - VA, VHA, Medical and Prosthetic Research; \$840 million.

As the Subcommittee works to finalize the FY 2020 Military Construction and Veterans Affairs Appropriations Act in the coming weeks, we strongly urge the Subcommittee to provide the VA with sufficient resources for the VA's vital healthcare mission for all of our nation's veterans, both for our veterans receiving care through traditional VHA services, as well as for those veterans needing access to care in the community. The VHA provides high-value and critically important health care services to veterans, and that infrastructure should be adequately funded and supported going forward. There is also a demonstrated need to ensure funding for those veterans who legitimately need access to care in the community, as stipulated in the VA Mission Act of 2018, without diverting precious funds from existing VHA medical services or other vital federal health care programs.

Last year, ACP strongly supported the bipartisan "Complete the VA Mission Funding" amendment, sponsored by Senators Shelby and Leahy, which would have provided sufficient funds for implementing the VA Mission Act without diverting funds from other VA medical care programs. The Shelby-Leahy "Complete the VA Mission Funding" amendment, as proposed, included an additional \$8.6 billion in FY 2020 to address the estimated shortfall in VA funding without cutting funding for other programs.

We urged its inclusion as part of the final conference report of the Energy and Water, Legislative Branch, and Military Construction and Veterans Affairs Appropriations Act, 2019, H.R. 5895. Unfortunately, that amendment was not included in the final conference report.

The VA Mission Act is intended to streamline the VA's numerous medical community care programs into one cohesive program, an effort the College considers as admirable, but it also made transformational changes to how care is provided both inside and outside the VHA, which we believe could have unintended consequences. ACP has previously offered its [input and concerns](#) regarding that legislation.

Implementation of the Mission Act is currently underway with the release in 2019 of several proposed regulations on various aspects of the new law. In its [March 1, 2019, comment letter](#) to the VA, ACP expressed concerns that the absence of increased and dedicated funding by Congress equal to the actual costs of the new urgent care program—which may be grossly underestimated by the administration and the Congressional Budget Office—could result in funds being diverted from traditional medical services within the VHA or other VA services. We believe this would jeopardize existing medical services for our veterans, compromise the current VHA structure, and even delay the implementation of the VA Mission Act and its programs. In its [March 22, 2019, comment letter](#), ACP echoes similar concerns that without the increased and dedicated funding, such as that proposed by the Shelby-Leahy amendment, equal to the actual costs of the new Veterans Community Care Program (VCCP), funds vital to VHA medical services or other VA services could be cut.

Since the VA Mission Act, while providing transitional mandatory funding for the existing Veterans Choice Program (VCP), effectively moved the source of funding for the new VHA medical community care program, the VCCP, from mandatory funding to discretionary appropriations, congressional appropriators must respond by providing enough funding for both the VCCP within medical community care and the VA's core VHA medical services outside of medical community care.

VA, Veterans Health Administration (VHA), \$89 billion

ACP supports the recommendation by [The Independent Budget](#) for **\$89 billion** in total funding for **the VHA** in FY2020. Implementation of the VA Mission Act, which transitions the Choice program and medical community care to the new VCCP as well as increased demand for health services by veterans means increased resources for FY2020. In addition, an overwhelming number of medical students, residents, and physicians benefit from the graduate medical education (GME) training programs provided by and directed through the VHA. The VHA needs the continued resources to train the approximately 43,000 individual physician residents who receive their clinical training by rotating through about 11,000 VA-funded physician residency positions at VHA medical facilities. These valuable programs rely on a sufficient number of veterans treated at VHA facilities. With less funding, these VHA facilities would treat less veterans, jeopardizing these training programs for residents' learning and working opportunities. The impact could have a far-reaching downstream effect, not only on the nation's veterans but on the nation's healthcare system as a whole.

VA, VHA, Medical Services, \$56.1 billion

The VHA's medical services account funds traditional VA inpatient and outpatient medical treatment. According to The Independent Budget, there will be an increase of 90,000 patients across all veteran priority groups, which is estimated to result in at least \$1.3 billion in additional health care costs to care for that population. The Independent Budget also estimated that new medical services will cost over \$1.2 billion. Therefore, ACP supports the recommendation of **\$56.1 billion** in FY2020 funding for **Medical Services within the VHA**.

VA, VHA, Medical Community Care, \$18.1 billion

The medical community care account within the VHA funds health care provided outside the VA by non-VHA clinicians in the community. ACP strongly supports The Independent Budget's **\$18.1 billion** FY2020 recommendation for **VHA Medical Community Care**, which would include the regular increase in current services, funding to wind down the Choice program, and implement the VCCP in FY2020. The request for FY2020 Medical Community Care account is approximately \$8.7 billion more than the FY2019 enacted amount, which also is about the same amount contained in the Complete the VA Mission Funding amendment. ACP continues to remain greatly concerned that funding needed to fully implement the VCCP in FY2020 could potentially impact the funding levels of traditional VHA medical care services. The College strongly urges the Subcommittee to provide enough overall funding to the VHA and medical services while also adequately funding the VCCP.

VA, VHA, Medical and Prosthetic Research; \$840 million

The medical and prosthetic research program of the VHA funds research on the specialized health needs of veterans, such as mental health issues including post-traumatic stress disorder (PTSD), advancing prosthetic technology, and chronic-pain management. ACP supports **\$840 million** in FY2020 for the **VHA Medical and Prosthetic Research** account recommended by both The Independent Budget and the [Friends of VA Medical Care and Health Research \(FOVA\)](#). This funding level is needed to permit growth in these programs above inflation, investment in innovative programs such as the Million Veterans Program (MVP), and robust support for VA research on the medical needs of the nation's veterans.

Many of ACP's physician members work and provide care within the VHA and are deeply committed to the VA's mission to provide high quality, comprehensive, and timely care to veterans in their time of need and throughout their lifetime. ACP recognizes the important health care services that the VHA provides to this nation's military veterans as well as its significant overall contribution as the nation's largest health care system, the largest provider of graduate medical education, and a valuable contributor of medical and scientific research.

The College greatly appreciates this opportunity to provide input on these important VA medical care funding matters for FY2020. We look forward to continuing to provide the clinician perspective on VA funding matters and working with the Subcommittee and Congress on the FY2020 appropriations process.