75th OREGON LEGISLATIVE ASSEMBLY - 2009 Regular Session MEASURE: HJM 3 STAFF MEASURE SUMMARY CARRIER: Rep. Komp

House Committee on Veterans & Emergency Services

REVENUE: No revenue impact FISCAL: No fiscal impact

Action: Be Adopted **Vote:** 7 - 0 - 1

Yeas: Boone, Esquivel, Freeman, Komp, Riley, Weidner, Cowan

Nays: 0

Exc.: Matthews

Prepared By: David Molina, Administrator

Meeting Dates: 2/17, 4/2

WHAT THE MEASURE DOES: Urges Congress to increase funding and eligibility for veterans living in rural and remote areas, and to review and simplify the Fee Basis statutes and regulations regarding payment eligibility for specialty care and emergency health care.

ISSUES DISCUSSED:

- The need for specialty care at the local level through Fee Basis
- The need to simplify the federal Veterans Affairs health care contract payment Fee Basis system
- Physical and economic challenges for World War II, Korean and Vietnam war veterans in rural and remote areas traveling for their specialty care appointments to Portland, Roseburg or Walla Walla
- Governor's Task Force on Veterans' Services top health care finding during 24-city tour
- Oregon Congressional delegation recognizes the problem, and has prioritized legislation to address this issue

EFFECT OF COMMITTEE AMENDMENT: No amendment.

BACKGROUND: The U.S. Department of Veterans Affairs Healthcare (VA) is the largest integrated health care system in the United States, providing comprehensive health care services to approximately 5.5 million U.S. veterans in 2008. Oregon's two major flagship VA hospitals where specialty care is managed are located in Portland and Roseburg. Veterans who live outside the urban metropolitan areas and are unable to drive over three hours to one of these two VA hospitals for specialty care rely heavily on the VA's pre-approved Fee Basis system. Governed by federal law and regulations, Fee Basis is the VA health care's contract payment system for local health care providers outside of the VA system.

Additionally, Oregon has established 10 Community-Based Outpatient Clinics (CBOCs) to improve health care access for rural veterans who live a significant distance from VA hospital-based care and improve care coordination by encouraging veterans' use of the VA as the primary source of health care service. However, CBOCs are restricted to primary care and limited mental health care.

House Joint Memorial 3 recognizes that Oregon veterans should receive the same level of care regardless of their place of residence. The measure urges Congress to provide more money for Fee Basis and to review and simplify the laws and regulations regarding payment eligibility for specialty care and emergency care for veterans who live in rural and remote areas.