

Congress of the United States
Washington, DC 20515

October 19, 2016

The Honorable Robert A. McDonald
Secretary of Veterans Affairs
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

Dear Secretary McDonald:

We write today to request you take immediate action to streamline and modernize the inefficient payment, authorization, and referral systems that the Veterans Choice program, under the Administration of Health Net, has been using to reimburse non-VA providers participating in the program.

In every corner of Colorado, we have received complaints about Health Net's poor management of the Choice Program. The effectiveness of the Veterans Choice Program depends on the willingness of non-VA providers to participate in the program, and Health Net's inability to reimburse these providers in a timely manner – or in some cases, Health Net's inability to reimburse these providers at all – severely undermines their willingness. Some non-VA providers in Colorado have now stopped seeing veterans altogether because of Health Net's mismanagement. As a result, veterans are not receiving the care they need when they need it.

The Choice program was intended to expand and ensure access to care for veterans who are shut out of the system due to its inefficiencies, and allow them to seek care from non-VA providers in the interim. The idea that any veteran should languish at the bottom of a VA wait list, and be unable to find alternative care due to the VA's incompetence, is an outrage, and yet these continuous complaints lead us to believe that this is exactly what is happening to our veterans in Colorado who wish to utilize the Veterans Choice Program.

We request you work with Health Net to setup a quick response team to address the provider reimbursement backlog.

In addition to taking immediate corrective action, we ask that you respond to this letter with specific improvements that have or will be taken to address the following issues non-VA providers are having with Health Net:

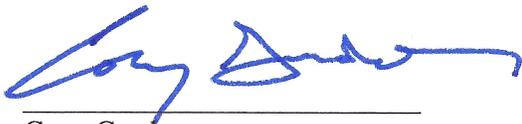
1. Lost referrals and authorizations;

2. Multiple authorization requirements for different procedures required from the same non-VA provider (Example: CT scans and MRIs require patients to return to the referring VA clinic for another referral); and
3. Payment denials with codes used that are not identifiable by the insurance provider or Health Net representatives.

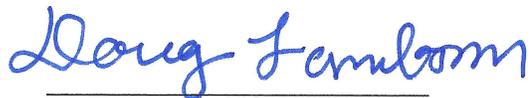
We request a response by Nov. 30, 2016. If any actions are not yet completed at the time of your response, please provide an estimated date of completion.

Our veterans have made countless sacrifices for our country, and it is our highest duty to ensure that they receive the timeliest access to the highest quality care possible.

Sincerely,



Cory Gardner
United States Senator



Doug Lamborn
Member of Congress



Ken Buck
Member of Congress



Scott Tipton
Member of Congress



Mike Coffman
Member of Congress