Veteran Rural Health News: September 13, 2012

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Health and Human Services Department Documents and Publications

September 12, 2012

Veterans in rural areas to get expanded access to health care

SECTION: PRESS RELEASES, FACT SHEETS, PUBLIC MATERIALS

LENGTH: 532 words

Contact: HHS Press Office, (202) 690-6343

Veterans in rural areas to get expanded access to health care

Department of Health and Human Services (HHS) Secretary Kathleen Sebelius and Secretary of Veterans Affairs (VA) Eric K. Shinseki today announced a joint effort to expand health care delivery to veterans living in rural areas. The agreement between the two agencies promotes collaboration between VA facilities and private hospitals and clinics, and is supported by \$983,100 in grants to improve access and coordination of care through telehealth and health information exchanges in rural areas.

"The Obama administration is committed to doing all that we can to provide rural veterans the care they need closer to home," said Secretary Sebelius. "As more combat veterans return home, HHS and VA are partnering to provide vital health care and treatment to reduce the distance some veterans have to travel."

Three states with the highest density of veteran residents-Virginia, Montana and Alaska-will each receive approximately \$300,000 to implement or upgrade telehealth capabilities for veterans who must otherwise travel long distances to access medical, mental and behavioral health care. The grants will be used for telehealth equipment and to develop electronic health records that are compatible with the VA's Veterans Health Information Systems and Technology Architecture (VISTA) system. The Department of Veterans Affairs Telehealth Expansion Initiative, launched in May 2011, is growing VA's telehealth workforce across the country, and will provide a potential capacity of 1.2 million telehealth consultations annually when fully implemented.

"This is an outstanding example of a partnership that expands access to care and improves quality of life for rural veterans," said Secretary Shinseki. "Working with partners like HHS, VA will continue to increase the reach of our services beyond our 152 major medical centers to ensure veterans receive the care they have earned and deserve."

Administered by the Health Resources and Services Administration, the grants are part of a pilot program to spur collaborative telehealth networks and virtual linkages among rural health providers and the VA to help meet the needs of rural veterans. The HHS Office of the National Coordinator for Health IT is working to implement health information exchange among VA hospitals and rural hospitals to make high-quality, safe and affordable health care more available to returning veterans living in rural areas.

The joint effort between HHS and VA is a result of the ongoing work of the White House Rural Council, established by Executive Order last year. The White House Rural Council aims to address challenges in Rural America by streamlining and improving the effectiveness of federal programs serving rural America and coordinating private sector partnerships

The Health Resources and Services Administration (HRSA), part of the U. S. Department of Health and Human Services, is the primary Federal agency for improving access to health care services for people who are uninsured, isolated, or medically vulnerable. For more information about HRSA and its programs, visit http://www.hrsa.gov/.

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States News Service

September 12, 2012 Wednesday

IMPROVING VETERANS' PROGRAMS

BYLINE: States News Service

LENGTH: 775 words

DATELINE: WASHINGTON

The following information was released by Arkansas Senator John Boozman:

Today the Senate Committee on Veterans Affairs marked up several bills to improve veterans mental health and suicide prevention programs, protect veterans rights while deployed, improve access to VA programs for women veterans, increase veterans service connected disability compensation, and protect the Second Amendment Rights of our veterans.

Included in the Omnibus Healthcare package (S.3340) were two bipartisan provision I have been working on with my Senate Colleagues. The text of S. 3049, of which I am the lead Republican Cosponsor with Sen. Mark Begich (D-AK), was included as Sec. 307, and will ensure that women veterans fleeing domestic violence or abusive relationships, including those that threaten the safety of their children, will have access to VA Homeless assistance programs before their situation worsens. The text of S. 1849, the Rural Veterans Health Care Improvement Act, of which I am the lead Republican Cosponsor with Sen. Al Franken (D-MN) was included in Sec. 407, and will improve the access and quality of care for our veterans living in rural areas.

Also passed by the committee was S. 1707, the Veterans Second Amendment Protection Act, legislation introduced by Sen Richard Burr (R-NC), of which I am an original cosponsor.

The following are my opening remarks.

Madame Chair - Ranking Member Burr,

Thank you for holding this mark-up today so that we may discuss ways in which this body can further improve many of the benefits that serve our veterans, particularly regarding mental health care and homeless veterans.

I very much appreciate you including several provisions that I have been working on with my colleagues on both sides of the aisle.

Included in the Chairs omnibus bill, or the ACCESS Act, are a couple of important proposals we have been working on, and I appreciate the committee leadership for including them in that package. Sec. 307 of this bill includes an important provision that reflects the work of Senator Begich and me. This provision would ensure that women veterans who are fleeing domestic violence, and find themselves with no place to go, do not have to wait for an even greater crisis before they and their families have access to VA homeless services. This is a common sense provision and I thank the Chair and Ranking member for including it.

Sec. 407 includes a provision that Senator Franken and I have been working on to ensure that we are getting a good return on the investments we have been making in the VAs Office of Rural Health. With so many of our veterans living in rural areas, our nation has seen fit to invest a significant amount of money to improve the accessibility and quality of the health care they receive. I think it is so important for us to have a clear path forward to improve health care for our rural veterans. This provision will ensure that this occurs and I appreciate Senator Frankens work and leadership on this issue and am pleased that it is included in the bill.

I would also like to express my strong support for Senator Burrs legislation, S. 1707, of which I am an original cosponsor. I have been strongly advocating for this legislation for the past few Congresses and it is high time we got this thing done. This bill would protect the 2nd Amendment rights of our veterans who have served in uniform. I would also express my support for the additional amendments that Senator Burr has offered in response to recent developments that would further protect our veterans second amendment rights.

Finally, I would like to express my concerns about some of the provisions included in GI Bill Consumer Awareness Act that will be discussed here today. We all want to see veterans use their benefits wisely, and all consumers should be protected from fraud. However, I believe there are better ways to accomplish this with tools already at our disposal and do not require the creation of myriads of bureaucratic reports and hoops to jump through that could place an undue burden on the VA and educational institutions. We want to protect veterans and we can do so by empowering them, but we should be careful not to burden them with bureaucracy and limit their choices. We must remember that this benefit belongs to the veteran, or their beneficiary, because they have earned it through their service and sacrifice and we should be careful not to limit their ability to use it as they wish or further limit their educational options.

Again, Madame Chair and Ranking Member, thank you for holding this Mark-up today and for your continued commitment to our servicemembers and their families.

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September 13, 2012 Thursday 12:57 AM EST

Veterans Could Soon Be Getting a Big Benefits Package

LENGTH: 577 words

A major benefits package for veterans is just a presidential signature away from passage. H.R.1627, the Honoring America's Veterans and Caring for Camp Lejeune Families Act of 2012, will provide healthcare benefits for families who lived at Camp Lejeune, improve access to VA home loans, and expand other social resources for veterans.

Healthcare and Critical Services

A major portion of the package concerns healthcare and includes health benefits for families who were exposed to toxic drinking water at Camp Lejeune, North Carolina. Health officials have stated that up to 1 million people may have been exposed to very high levels of carcinogens from 1957 to 1987. Other health provisions expand services for rural, elderly and disabled veterans. The package also adds care and housing services for homeless veterans and extends VA education assistance to 81 months for veterans' families. Other provisions streamline the disability claims process and call for greater accountability and transparency on the part of the Department of Veterans Affairs.

VA Home Loan Benefits for Families

Veterans looking to purchase a home will benefit from several provisions designed to improve access to VA home loans. Some changes directly affect family members, including surviving spouses, seeking a loan. Last year, the VA backed fewer than 1,300 loans for surviving spouses. Under current rules, the deceased veteran must have died in the line of duty or from a disability received in the line of duty. This year, more families may finally attain home ownership, as qualifications expand to include veterans with other types of disabilities.

As with many home loans, the VA requires that buyers live in the home as their primary residence. Buyers on active duty can qualify with a spouse as occupant, but the rules are narrower for veterans. If the borrower cannot occupy the home shortly after closing, a spouse may qualify within certain guidelines. If a spouse is not available, as in the case of active deployment or separation, no other relative can step in. The new law would allow dependent children to fulfill the occupancy requirement and thus would remove a barrier for borrowers with a variety of personal situations.

Easier VA Home Loan Financing

The VA will waive the loan funding fee for veterans who qualify for pre-discharge disability compensation but have not yet received an official rating. Currently, recent veterans must wait for completion of the official process. With bill passage, veterans will be able to purchase a home when the time is right for them-not the paperwork.

This change applies to refinancing as well as purchases. The new rules also allow the VA to guaranty ARM loans indefinitely. VA home loan limits will be raised for the most costly U.S. counties after dropping back to pre-2009 levels this year. Most veterans buy homes for less than \$250,000, but some borrowers live in counties where even a modest home costs far more. If that sounds farfetched, consider that the price of an average home in San Francisco is about \$788,000. Under the current VA limit of \$625,000, the borrower needs to come up with a \$40,750 down payment on the difference of \$163,000. Restoring the higher limit would keep the down payment at 0.

If signed, the Honoring America's Veterans and Caring for Camp Lejeune Families Act of 2012 will mark a victory for veterans and their families on several fronts ranging from healthcare to home ownership.

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