VA Bill Signed into Law: Ensures Access to Walk-In Care

On June 6, President Trump signed into law a bill that authorizes and expands veterans’ access to private health care, including “walk-in care” for non-emergent care — access the Urgent Care Association (UCA) has been urging lawmakers to provide.

Specifically, the MISSION ACT, requires under Section 105 that the Department of Veterans Affairs (VA) develop procedures to ensure veterans are able to access walk-in care from qualifying non-Department entities or providers. To provide care to qualifying veterans, an entity or provider would be required to enter into a contract with the VA.

The law defines walk-in care as “non-emergent care provided by a qualifying non-Department entity or provider that furnishes episodic care and not longitudinal management of conditions.” The law leaves it to the VA Secretary to further define walk-in care and to establish regulations that will govern access to walk-in care, including co-payments. The law stipulates that veterans, who are not otherwise obligated to a copayment, would have copayments waived for the first two walk-in visits.

In 2017, UCA pushed for introduction of the Veterans Emergency Room Relief Act (S. 2785, H.R. 1261), which would require the VA to provide coverage to urgent care for veterans. Concerns that the MISSION Act does not explicitly reference urgent care were assuaged when Rep. Clay Higgins (R-LA) asked Carolyn Clancy, MD, Executive in Charge of the Veterans Health Administration, whether the walk-in provision included in the MISSION Act, would include access to urgent care. Dr. Clancy replied that it would. That exchange took place during an oversight hearing before the House Veterans Affairs Health, Oversight and Investigations Subcommittee hearing on May 17, 2018.

Rep. Higgins, along with Sen. Bill Cassidy (R-LA), have led the charge in Congress to improve veteran’s access to urgent care. In a May 9, 2018 letter to House Veterans Affairs Committee Chairman Phil Roe (R-TN), Rep. Higgins expressed disappointment that the VA bill did not include explicit reference to urgent care, but stated his confidence that Section 105 “can and will” establish a mechanism for the VHA to cover the cost of certain services at urgent care centers.

The law requires the VA to issue regulations implementing Section 105 within one year of the bill’s enactment.

While the bill passed both the Senate and House with overwhelming bipartisan support, the law falls short in one fundamental way — it does not include a funding mechanism. While reports are that Republican and Democrats are working on a separate piece of legislation to cover the cost of the $50 billion law, the President is insisting that the bill be offset, or fully paid for with cuts to other programs. Differences in funding approaches between congressional lawmakers and the White House could lead to a funding showdown this summer as the Veteran’s Choice Program (VCP), which allows veterans to receive care in the community, runs out of money. According to the VA, the VCP will exhaust all of its funding as early as May 31, 2018, and possibly as late as
June 15, 2018. According to the VA, “Once the funds are exhausted, VA will no longer be able to provide services under VCP.”