

**NINETY-SIXTH NATIONAL CONVENTION
OF
THE AMERICAN LEGION
Charlotte, North Carolina
August 26, 27, 28, 2014**

Resolution No. 37: Department of Veterans Affairs Rural Healthcare Program

Origin: Kentucky

Submitted by: Convention Committee on Veterans Affairs & Rehabilitation

(Consolidated with Resolution No. 286 (ID))

WHEREAS, One out of every three veterans treated by the Department of Veterans Affairs (VA) lives in rural communities; and

WHEREAS, Rural veterans have been underserved due to a lack of access to health care, which can to attributed greater travel barriers and a lack of public transportation; and

WHEREAS, Although VA has established access standards, the standards and definition of rural and highly rural veterans do not take into account the distance and driving time it takes for veterans to be provided with VA care; and

WHEREAS, Rural Health Consultants (RHCs) are located and fall under the Veteran Integrated Service Networks (VISNs), which leads to additional collateral duties, inconsistent with the schedules, ultimately distracting RHCs from needed outreach to facilities within their VISN; and

WHEREAS, The Rural Health Resource Center is advisory in nature and primarily conducts research without providing direct resources to rural veterans or outreach; and

WHEREAS, VA Medical Centers in rural areas have concerns in recruiting and retaining qualified medical and clinical providers, in many cases rural areas do not have attractive resources for medical providers; and

WHEREAS, While the development of Community-Based Outpatient Clinics (CBOCs) have increased access to healthcare for veterans in rural areas, communication between the CBOCs and medical centers have decreased, creating communication and managerial difficulties; and

WHEREAS, Telehealth services have more than doubled in the last four years, creating more access to healthcare for rural veterans, however, space and bandwidth limit the level of service and number of veterans the VA can serve; now, therefore, be it

RESOLVED, By The American Legion in National Convention assembled in Charlotte, North Carolina, August 26, 27, 28, 2014, That The American Legion urge the Department of Veterans Affairs to develop its own definition of rural and highly rural veterans, and not based on the Census Bureau's, but on access and driving times; and, be it further

RESOLVED, That The American Legion urge Office of Rural Health (ORH) to centralize and consolidate the Rural Health Consultants (RHC) under the ORH; and, be it further

RESOLVED, That The American Legion urge ORH to ensure Rural Health Resource Centers provide service to rural veterans from surveys, national hotline and connecting veterans living in rural communities with providers; and, be it further

RESOLVED, That The American Legion urge Congress to develop a recruitment and retention strategy to incentivize medical providers to practice in rural communities; and, be it further

RESOLVED, That The American Legion urge Congress to ensure each Community-Based Outpatient Clinic (CBOC) has adequate staff and direct communication between the CBOC's and medical center's RHC; and, be it finally

RESOLVED, That The American Legion urge the ORH to search for opportunities to expand telehealth services by collaborating with local offices in rural areas that can share space.