

Testimony given by:

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Chairman, Ranking Member, and distinguished members of the Committee, thank you for the opportunity to provide testimony regarding the challenges Veterans in Shiawassee County, Michigan face when accessing VA healthcare.

I serve as the Director of Veterans Affairs for Shiawassee County and am also a Veteran with 27 years of Active Duty service. Through both my professional role and personal experiences, I have gained firsthand insight into the barriers Veterans encounter when seeking care through the Department of Veterans Affairs.

As a rural Michigan County, Shiawassee has a Veteran population of approximately 5,000 individuals. Many of the Veterans we serve are older adults, as our demographics suggest the average age is 75 years old. Many of these individuals have disabilities and limited transportation options. As of 2018, we have transported 4,729 Veterans to VA appointments at VA facilities or to referred health care providers. Accessing care often requires travel to VA facilities in Saginaw and Ann Arbor, which are urban, making reliable appointment scheduling and communication especially important. Please note, it takes our drivers 1 hour, 22 minutes to travel 74.5 miles to Ann Arbor or 52 minutes to travel 41.6 miles to Saginaw. (Battle Creek – 1 hour, 37 minutes at 102 miles, Detroit VA – 1 hour, 33 minutes at 87.2 miles)

Veterans frequently experience long wait times for appointments and specialized services. In some cases, they are told the next available appointment is more than a month away, leading some to seek care through emergency departments for more immediate attention.

We also encounter situations in which appointments at the Saginaw or Ann Arbor VA Medical Centers are canceled or rescheduled without timely notification. This can create unnecessary travel and strain limited transportation resources. I have experienced this personally, having driven to the Ann Arbor VA Medical Center for a scheduled appointment only to learn upon arrival that it had been canceled without prior notice.

Additionally, we have observed situations in which veterans establish successful relationships with local community care providers, only to have their care redirected back to a VA facility when the service becomes available through the VA system. These transitions can disrupt continuity of care and create frustration for veterans who must adjust to new providers or treatment plans.

From both my professional and personal perspectives, improving communication, reducing appointment delays, and supporting continuity of care would significantly enhance veterans' access to healthcare services.

The challenges we see in Shiawassee County reflect broader trends affecting veterans throughout Michigan and across the nation. More than 30 percent of Michigan's veterans live in rural communities where transportation barriers and travel distances complicate access to care. Federal

oversight agencies and independent researchers have also identified ongoing concerns regarding appointment scheduling, wait times, and coordination within both the VA and Community Care systems. These findings reinforce what we experience every day at the county level—that timely communication, efficient scheduling, and reliable care coordination are essential to ensuring veterans receive the healthcare they have earned through their service.

I appreciate Congressman Tom Barrett's leadership and collaboration on the Veterans Community Care Scheduling Improvement Act, as well as the continued utilization of the External Provider Scheduling (EPS) system. These efforts represent meaningful steps toward improving care coordination and helping veterans access the healthcare services they have earned through their service to our nation.

Thank you for your attention to this important issue and for your continued commitment to improving access to care for America's veterans. I look forward to answering any questions you may have.