Veterans push for better health care, experts fight to provide it

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NORTHFIELD — Dozens of men and women squeezed together in a small conference room at the VA Outpatient Clinic in Northfield on a hot summer afternoon.

The crowd, the majority veterans in their 60s, 70s and 80s, looked ready for battle as they stood shoulder to shoulder, arms crossed and some prepared with notes as they faced off with local, state and regional officials from the U.S. Department of Veterans Affairs.

It wasn’t nearly as dangerous as the situations these veterans faced while serving in the military, but it ranked high in priority as most of the South Jersey veterans voiced their demands for better localized health care while VA experts expressed their desire to give it to them.

“We believe community care is sufficient,” said Vince Kane, director at the Wilmington VA Medical Center. “We have to get out of the medical centers and get closer to where the veterans live. They can’t all go through Wilmington. As an example, we’re working in Cape May to relocate services to those people.”

An estimated 355,766 veterans live in New Jersey, according to the VA. Some areas of the state have more than others, including Cape May County, where veterans make up nearly 9 percent of the population, one of the highest rates in the state.

Many of the veterans who get health care through the VA said they are generally happy with the quality of care they receive, as the VA has some of the most advanced medical technology and experts in the country.

The issues lie in the access and delivery of it, veterans said.

“There have been attempts at the county level to make medical care more accessible and affordable to veterans,” said Frank Formica, Atlantic County freeholder chairman and an Air Force veteran. “It seems like there’s been a trend in the country to pay more attention to local communities, but we don’t have enough resources to execute those services.”

Many veterans continue to champion the federal Veterans Choice Program, which allows veterans to use private providers outside VA clinics and hospitals to get care if they live more than 40 miles from a VA center or have to wait more than 30 days for a consultation.

Funding for the program was set to run out this summer, but President Donald Trump signed a bill last month that allocated an additional $2.7 billion to keep it going.

Instead of having to travel long distances, sometimes on VA shuttles, veterans are able to go to local providers, with approval, for injury treatment, procedures and specialty care, but the service is complicated.

Veterans’ concerns included not getting choice approval, long wait times for paperwork to go through and gaps in communication between an outside provider and the VA.

“I needed emergency spine surgery and used the choice program, which was great because I got one of the best spine surgeons in the country at Penn (Medicine),” said one veteran at the Northfield meeting. “Then I needed therapy, and funding ran out. It took five weeks to get re-approved for services that I needed immediately.”
Frustration was felt by both the veterans and those who provide services in the region, as many VA officials said they want nothing more than to increase access to health care, bring more services to South Jersey clinics and reduce issues that have prevented veterans from getting care in a timely manner.

Federal regulations, rules and policies often limit the way in which they can make changes at the county level, VA officials said.

Another issue VA officials found was a lack of eligible veterans enrolling and using VA services for their physical and behavioral health needs. Among the 6,000 eligible veterans in Cape May County, fewer than half are enrolled and only 1,824 are actively using services, Kane said.

Kane said he and other VA officials need to identify how to increase participation, adding he is optimistic that changes coming down the pipeline will lead to better outcomes and satisfaction with services in South Jersey.

At the Cape May community-based outpatient clinic, officials hope to expand the physical footprint and increase the number and range of health care services at that location.

Jackie Hinker, U.S. Veteran Affairs Veteran Community Outreach Specialist, said veterans have been looking forward to an expansion “for the longest of time.”

In addition to the brick and mortar clinics, the VA runs mobile clinics that visit several sites through New Jersey every month to provide basic health care checks and tests. One such clinic regularly stops at Stockton University where William Richmann, 68, of Galloway Township gets his annual health visits.

As far as the choice program, Kane said the VA has established relationships with Shore Medical Center, Cape Regional Medical Center and Inspira Health Network, and is talking about working more with others like AtlantiCare and Bacharach Institute for Rehabilitation.

David Hughes, Shore Medical Center Chief Financial Officer, said the hospital has the ability and willingness to treat more veterans than it is currently limited to because of strict agreement contracts under the choice program.

“One of the things we’re working on is a program specifically for vets so that they can go to their local doctor and for us to provide services so that they don’t need to get on a bus for hours,” he said. “We will do whatever we need to for the needs of veterans.”

At the end of the day, both veterans and VA officials agreed they want better streamlined services, shorter wait times, increased accessibility to local care and the resources to establish and improve more programs.

Current plans for improvement are just the beginning, VA officials said.