DEPARTMENT OF VETERAN AFFAIRS
Veterans Health Administration
Washington DC 20420

December 30, 2014

UNDER SECRETARY FOR HEALTH'S INFORMATION LETTER

VETERANS TRANSPORTATION COORDINATION

1. This Information Letter provides information regarding the coordination between the Volunteer Transportation Network (VTN) and the Veterans Transportation Service (VTS).

2. VTN is designed to provide transportation services to ambulatory Veterans who are seeking benefits at Department of Veterans Affairs (VA) medical facilities, including Veterans Benefits Administration (VBA) offices. Since 1987, the Disabled American Veterans (DAV), with support of VA Voluntary Service (VAVS), has staffed and funded a nationwide volunteer-based transportation network.

3. VTS is a sub-initiative of the VA's Enhancing Veteran Experience and Access to Healthcare Transformation Initiative to help Veterans overcome transportation barriers to treatment, especially Veterans who are visually impaired, elderly, or immobilized due to disease or disability, and those living in rural and highly rural areas. In general, VTS uses Americans with Disabilities Act (ADA) compliant vehicles and paid VA staff to transport Veterans to their VA health care.

4. For a number of Veterans, the availability of VTN and VTS is the determining factor in their ability to access the VA health care system for necessary medical care. The Veterans Health Administration (VHA) seeks to coordinate VTN and VTS and manage access to care in a manner that is cost effective and ensures the programs complement each other. This letter formally clarifies three primary areas where coordination is essential: effective resource utilization, data reporting, and completion of volunteer physicals.

5. Successful coordination of the programs calls for identification of the discrete travel needs of individual Veterans and provision of the most appropriate transportation assistance to reach the care they require. Appropriateness is determined by the needs of the Veteran and availability of transportation through the particular programs. When multiple transportation options are available, the most appropriate is the least costly to the government that meets the Veteran's transportation needs, considering the Veteran's health condition. When questions arise related to the Veteran's health condition, transportation staff must consult with the Veteran's physician or other clinical staff.

6.   When providing transportation to a Veteran, VTN vehicles and volunteer drivers are usually the most cost effective solution, provided they are available and meet the needs of the Veteran. VTS vehicles and drivers should be used when needed; however, every effort must be made to use these resources in a targeted manner to ensure cost efficiencies.

7.   Volunteers may drive VTS vehicles when VTN vehicles are not an option for Veterans requiring transportation, if they have met all of the requirements to be a volunteer driver outlined in VHA Handbook 1620.02 (e.g., physicals, training, appropriate volunteer assignment description, etc.) including any additional required training, such as how to use special equipment like wheelchair lifts and how to secure and transport wheelchairs, and if local union partners are in agreement. Volunteers driving VTS vehicles must have a separate written volunteer position description for those driving assignments indicating they are driving for VTS. Separate national reporting codes exist in the Voluntary Service System (VSS) to distinguish between VTN and VTS assignments. Volunteers in a VTN assignment should be assigned the 500T code and volunteers in a VTS assignment should be assigned the 501T code. If a volunteer has dual responsibilities, they can have both codes assigned and must pick the code corresponding to their assignment on a given day.

8.   Consistent with sound business practices, VHA Fleet Management tracks utilization of fleet vehicles, including those donated to VA. At no time should VTS vehicles be used in place of VTN vehicles to increase mileage on VTS vehicles for any purpose. VTN donated vehicles should not be returned because VTS vehicles have been acquired.

9.   Improving access to care is one of the VA's highest priorities. Each time a Veteran is transported to care it improves their quality of life and their health. The primary method of measuring our transportation-related access to care efforts is through documenting rides provided. Rides are attributed based on the VTN or VTS resources used. When a volunteer drives a vehicle donated by DAV or another organization, the ride is attributed to VTN and should not be counted as a VTS ride. At no time shall such a ride be credited to VTS. Rides provided by VA employees will be accounted for appropriately. DAV and VHA will soon begin completing shared quarterly reports documenting rides provided. Working together, VA can use VTN and VTS resources to effectively and efficiently bring Veterans to care.

10. Volunteers are essential to VHA; their dedication, patience, and willingness are priceless. VHA is committed to on-boarding volunteers quickly, and every station is encouraged to examine opportunities to improve their on-boarding timeliness, such as completing driver physicals and other requirements, to ensure that when volunteers want to serve, they can do so without an extended wait. Facility leadership is responsible for tracking elapsed time for on-boarding for both employees and volunteers and should ensure such time is minimized.

11. VA medical facility leadership is encouraged to participate in the VTS program. For information regarding the schedule of implementation and the application process, contact Mr. Paul Perry at 404-828-5325.

12. Questions regarding this Information Letter may be directed to Lynne Harbin, Deputy Chief Business Officer for Member Services, Chief Business Office (10NB) at 404-828-5570.

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