

# United States Senate

WASHINGTON, DC 20510

March 25, 2016

The Honorable Johnny Isakson  
Chairman  
Senate Committee on Veterans' Affairs  
Russell Senate Office Building  
Washington, D.C. 20510

The Honorable Richard Blumenthal  
Ranking Member  
Senate Committee on Veterans' Affairs  
Russell Senate Office Building  
Washington, D.C. 20510

Dear Chairman Isakson and Ranking Member Blumenthal:

We write to express our concern about the potential sunset of the highly successful Access Received Closer to Home (ARCH) program and to urge the Committee to work with us to ensure that this program is extended.

The ARCH program has been operating at Cary Medical Center in Caribou, Maine, since 2011. According to Cary Medical Center, the program serves approximately 1,400 local veterans and has provided in excess of 17,000 medical appointments since its inception. More than 90 percent of veterans participating in ARCH are overwhelmingly satisfied with their access to care and the medical services they receive, and many veterans have contacted us to report that this program is their "lifeline." Without this partnership, many veterans in northern Maine would have to travel up to 600 miles roundtrip to access care at the Togus Veterans Affairs (VA) Hospital in Augusta.

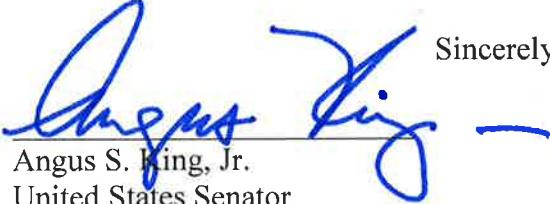
The ARCH program is scheduled to expire in August 2016, which could have unfortunate effects on veterans in our state who have come to depend on the high quality, local care that ARCH provides. While we recognize that consolidation can be an important objective, it is equally important that veterans do not experience lapses in care as the VA transitions to the new Veterans Choice Program. Therefore, we introduced a bill (S. 2672) that would extend ARCH for five years. This legislation has been referred to the Senate Committee on Veterans' Affairs, and we respectfully request an opportunity work with the Committee as it considers an omnibus veterans package this year.


In contrast to the high marks the ARCH program receives from the veterans it serves, in its current form, the Choice Program remains troubled and has proven ineffective in our state in providing many veterans the care and services they need. The failures of the program include communication gaps that exist among the VA Maine Healthcare System, Health Net Federal Services, veterans, and community care providers.

According to the VA's own data, only 48 percent of eligible Choice Program patients have received the appointments they need and have requested. Furthermore, even when veterans are able to connect with Health Net officials, referrals are not always timely or within a reasonable geographic distance. We owe it to our veterans to take the time necessary to resolve these issues and to understand fully the implications of non-VA community care consolidation

before executing a new program that will undoubtedly affect the health and well-being of veterans nationwide and especially those living in rural communities.

We look forward to working with you to ensure continuity of care for our nation's veterans, as well as to ensure that Congress's and the VA's consolidation efforts incorporate the principles of ARCH that have made the program so successful. If you have questions regarding this matter, please contact us directly or have your staff contact Margaret Williams with Senator King at (202) 228-1544 or Michele Pearce with Senator Collins at (202) 224-6329.

 Sincerely,  
Angus S. King, Jr.  
United States Senator

  
Susan M. Collins  
United States Senator