In 2008, The Secretary of the U.S. Department of Veterans Affairs (VA) chartered the Veterans Rural Health Advisory Committee (VRHAC) to study and analyze the challenges rural Veterans face when accessing health care, and to advise the Secretary accordingly. VRHAC members:

- Identify barriers to providing health care services to Veterans in rural communities, and
- Recommend solutions that facilitate improved access to Veterans’ health care in rural areas.

To do this, VRHAC members request annual updates from and dialogue with subject-matter experts at the federal, state and local levels. Every year, the Committee reports directly to the Secretary of Veterans Affairs with recommendations that inform VA’s national priorities, policies and approaches on how rural Veteran receive care and services.

The Committee is a forum where appointed advisors study emerging trends and discuss new ideas in rural health and Veterans issues to increase rural Veterans’ access to health care and services. VRHAC members are led by a Committee Chair and supported by the VA Office of Rural Health (ORH). They work throughout the year to understand how the rural health landscape is changing for Veterans. Each year, members convene to collect and share information, hear national policy updates, and engage with other experts.

Additionally, they conduct an annual rural site visit to see firsthand how national policy, health care and services work at the local level. Through the site visit, the Committee seeks to identify barriers to care as well as elevate successful initiatives. During rural site visits, VRHAC members engage with Veterans in town hall meetings, tour VA and community health care facilities and mobile clinics, meet with local Veteran Service Organization (VSO) leaders, hear expert presentations, and have the opportunity to see technologies and programs at work. Past Committee visits include:

- Augusta, Maine
- Chillicothe, Ohio
- Helena, Montana
- Johnson City, Tennessee
- Morgantown, West Virginia
- Phoenix, Arizona
- Reno, Nevada
- Salt Lake City, Utah
- Uvalde, Texas

The 16 appointed VRHAC members include Veterans; leaders of local, state and national VSOs; researchers; and private sector, non-profit, state and federal rural health professionals. They come from diverse backgrounds in academe, rural health care, benefits assistance, community engagement, minority advocacy and military family issues.
A Think Tank for Veterans and Rural Health Access Issues

VRHAC’s past recommendations highlighted the importance of understanding the rural Veteran population, the potential of telehealth technology and opportunities for local collaboration. Currently the Committee is concentrating on workforce solutions due to the shortage of health professionals and providers – especially primary care, mental health and specialty care.

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<th>UNDERSTANDING</th>
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<td>VRHAC encouraged VA to study the rural Veteran population’s size, demographics, locations and unmet health needs to ensure its programs addressed the most urgent needs. This informed VA’s strategic planning and development of a rural Veterans need assessment.</td>
<td>VRHAC urged VA to implement an enterprise-wide system to coordinate telehealth appointments so rural Veterans can access the care they need. VA has since launched a smartphone appointment app, elevated care coordination as a high priority, begun the transition to a new electronic health record and developed a telehealth friendly appointment scheduling system.</td>
<td>VRHAC suggested that VA engage community mental health providers, law enforcement officers, clergy and community leaders to identify and treat the specific challenges rural Veterans face. VA has since funded Community Clergy Training to Support Rural Veterans’ Mental Health to build care capacity across the country through trained community clergy who can identify and support Veterans with posttraumatic stress disorder and other mental health challenges.</td>
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Committee Member Nominations

Appointments to VRHAC rotate, and ORH actively seeks nominations for new members throughout the year. Members serve an initial three-year term and the Secretary may reappoint members for an additional term of service. During the course of their term, Committee members are expected to attend all meetings and to contribute their time and expertise to Committee projects. Submit third-party or self-nominations, including a letter of interest, letters of recommendations and a resume to rural.health.inquiry@va.gov.

As VA’s lead advocate for rural Veterans, the Office of Rural Health (ORH) works to see that America’s Veterans thrive in rural communities. To support the health and well-being of rural Veterans, ORH establishes and disseminates Enterprise-Wide Initiatives that increase access to care for the 2.7 million rural Veterans enrolled in the U.S. Department of Veterans Affairs’ health care system. Key focus areas include programs that address workforce shortages, transportation, primary care, mental health, telehealth and specialty care. To learn more, visit www.ruralhealth.va.gov.