

documents the potential physical, environmental, cultural, socioeconomic, and cumulative impacts of continued administration and operation of VA's HLP. The comprehensive HLP, which is managed by VA's Veterans Benefits Administration (VBA), administers VA-guaranteed housing loan benefits and other housing-related benefits that assist eligible Veterans, surviving spouses, active-duty personnel, Selected Reservists, and National Guardsmen (collectively referred to as Veterans) in purchasing, constructing, repairing, adapting, or improving a home. In preparing the Final PEIS, VA has considered public comments received on the Draft PEIS, which was published in July 2021.

DATES: VA will publish a Record of Decision no sooner than 30 days after publication of the U.S. Environmental Protection Agency's Notice of Availability for this Final PEIS in the **Federal Register**.

ADDRESSES: The Final PEIS is available at the VA website at the following link: https://www.benefits.va.gov/homeloans/environmental_impact.asp. Printed copies of the document may be obtained by contacting VA at VAHLPNEPA.VBAVACO@va.gov.

FOR FURTHER INFORMATION CONTACT: Erin Byrum, Lead Management Analyst, Loan Guaranty Service, Veterans Benefit Administration, Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420, 202-632-8862 (this is not a toll-free number) or VAHLPNEPA.VBAVACO@va.gov.

SUPPLEMENTARY INFORMATION: The Final PEIS was developed pursuant to the National Environmental Policy Act (NEPA) of 1969, as amended (42 U.S.C. 4321, *et seq.*), the Council on Environmental Quality's regulations for implementing the procedural provisions of NEPA (40 CFR 1500-1508), and VA's NEPA regulations titled "Environmental Effects of the Department of Veterans Affairs Actions" (38 CFR 26).

The most significant element of the HLP is the provision of housing benefits that assist eligible Veterans in financing the purchase, construction, repair, or improvement of a home for their personal occupancy. See 38 U.S.C. 3701 *et seq.* VBA provides Federal assistance in the form of loans made, insured, or guaranteed by VA. VBA is also responsible for the management, marketing, and disposition of real estate-owned properties that VA acquires following the foreclosure of certain VA-guaranteed loans and loans held in VA's portfolio. Under the HLP, VA also provides direct loans to Native American Veterans to purchase homes

on trust, tribal, or communally owned lands, and the HLP extends grants for home adaptations to Veterans with service-connected disabilities through the Specially Adapted Housing program. The HLP provides what can be, for some Veterans, their sole opportunity to obtain crucial housing loans and grants.

Through the PEIS, VA evaluated the potential physical, environmental, cultural, socioeconomic, and cumulative effects of the HLP to assist and inform future agency planning and decision making related to the HLP. Environmental topics addressed in the Final PEIS include the following: aesthetics; air quality; biological resources; cultural resources; floodplains, wetlands, and coastal zones; geology and soils; hydrology and water quality; infrastructure and community services; land use and planning; noise; and socioeconomic and environmental justice. The PEIS also identifies and analyzes potential cumulative impacts, which are the potential incremental impacts on the environment resulting from continued administration and operation of the HLP in combination with other past, present, and reasonably foreseeable future actions from other relevant Federal and non-Federal programs.

The PEIS is atypical in that it addresses an existing program, and VA has no specific or immediate need to change its operational structure or procedures to address environmental impacts. Furthermore, the making of loan guaranties, direct loans, and grants do not typically result in direct environmental impacts. In this case, the primary environmental impacts of concern for VA would be the potential indirect impacts from homeowner actions and the potentially significant, cumulative impacts of small incremental actions on local and regional resources.

The Final PEIS considers comments made on the Draft PEIS that officially began on July 16, 2021 and ended on August 30, 2021. Based on the information provided in the Final PEIS, VA has identified the continued operation and active management of the HLP as the preferred alternative.

Signing Authority

Denis McDonough, Secretary of Veterans Affairs, approved this document on June 6, 2022, and authorized the undersigned to sign and submit the document to the Office of the Federal Register for publication

electronically as an official document of the Department of Veterans Affairs.

Jeffrey M. Martin,

Assistant Director, Office of Regulation Policy & Management, Office of General Counsel, Department of Veterans Affairs.

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DEPARTMENT OF VETERANS AFFAIRS

Calculation of Average Wait Time for New and Established Patients

AGENCY: Department of Veterans Affairs.

ACTION: Notice and request for comment.

SUMMARY: Providing veterans with meaningful information to make informed decisions about their health care is a top priority for the Department of Veterans Affairs (VA). VA has published average wait times for primary care, mental health, and specialty care appointments at each of its medical centers since 2014. Since that time, VA has received feedback from veterans, caregivers, veterans service organizations, oversight authorities, and Congress, which led VA to revise the wait time metrics presented on the Access to Care website to better reflect veterans' experience. This notice describes this revised methodology. Additionally, VA is requesting public comment on the revised wait time metrics presented on the Access to Care website.

DATES: Comments must be received on or before 60 days after date of publication in the **Federal Register**.

ADDRESSES: Comments may be submitted through www.Regulations.gov. Comments received will be available at regulations.gov for public viewing, inspection, or copies.

FOR FURTHER INFORMATION CONTACT: Joseph Duran, Director, Policy and Planning, Office of Integrated Veteran Care (OIVC), Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420. VHA16IVCAccessAction@va.gov or 303-370-1637 (This is not a toll-free number).

SUPPLEMENTARY INFORMATION: Section 206 of the Veterans Access, Choice, and Accountability Act of 2014 (Pub. L. 113-146) requires the Department of Veterans Affairs (VA) to publish in the **Federal Register**, and on a publicly accessible internet website of each medical center of the Department, the wait-times for the scheduling of an

appointment in each Department facility by a veteran for the receipt of primary care, specialty care, and hospital care and medical services based on the general severity of the condition of the veteran. Whenever the wait-times for the scheduling of such an appointment changes, VA is required to publish the revised wait-times on a publicly accessible internet website of each VA medical center by not later than 30 days after such change and in the **Federal Register** by not later than 90 days after such change. This notice announces VA's updates to the definition and calculation methodology for average wait times and publication of information on the use of Third Next Available Appointment (TNAA) for those VA medical centers that have implemented the new electronic health record.

To further improve user experience, VA has also upgraded the way average wait times are calculated and displayed on the website. Importantly, average wait times are never used to determine a veteran's eligibility for community care, and none of the changes on the website, as explained in this notice, affect a veteran's eligibility for community care. Rather, the average wait times that VA displays on its website represents a guide that can assist veterans in making informed health care decisions.

Average wait times for all VA medical centers and clinics (except those that have transitioned to VA's new Electronic Health Record (EHR)) are now calculated to include additional steps in the appointment process that had not been captured in the past. As of the date of the publication of this notice, the VA medical centers and clinics that have adopted the new EHR include: Spokane, WA; Walla Walla, WA; Columbus, OH and White City, OR. Averages are representative of general performance and may not represent individual experience, but the upgraded calculation makes the average wait times that VA displays on its website more reflective of the complete process of requesting and receiving care.

For purposes of the discussion below, veterans are considered new patients if they have not been seen by a provider or a clinical service at the same medical center for the same, or a related, health care need in the past three years. If they had an appointment in a clinical service at the same medical center for the same or similar health care need in the past three years (either in person or via phone/video), they are considered an established patient.

The revised calculation includes the following changes:

- For *new patient* appointments, the average wait time is calculated from the earliest recorded date in the scheduling system, to the date the appointment is completed, or the date it is scheduled to occur if it is not yet completed.

- For example in many cases, veterans who need a new type of care will have a referral entered by their provider into the medical record during a visit, and this starts the care coordination process. For appointments with a referral, this referral date is the starting point used for measuring average wait times, and the end point is the date care is received or the date it is scheduled to occur if not yet completed.

- For appointments without a referral, the average wait time starts with the earliest recorded date in the process of receiving care, typically the date a scheduler works with a veteran to coordinate a future appointment, and it ends on the date care is received or the date it is scheduled to occur if not yet completed.

- For *established patient* appointments, average wait times are measured from the date agreed upon between a veteran and provider for future care and ends on the date care is received, or the date that care is scheduled to occur if it has not yet occurred.

VA sites that have implemented the new EHR will display information known as Third Next Available Appointment (TNAA).¹ Other major

health systems also use this measure, and it reflects availability for upcoming appointments so veterans can anticipate what their experience will be when they request care.

TNAA is a measure of appointment availability that displays the number of days between today's date and the date of the third-next appointment available in VA's scheduling system. The technology in our new EHR system allows us to use this more modern, industry standard measure at these sites. This measure is considered a more accurate measure of elective service availability than the next available appointment or second-next available appointment.

VA is transitioning to use of TNAA for several reasons, including that this measure informs veterans of their likely experience when seeking care. This will also ensure consistency in measuring appointment availability across VA medical centers as the enterprise transitions to a new EHR.

Note: As described above, averages that reflect a small number of appointments—for example, in a geographic area where only a few veterans seek a certain type of subspecialty care in any given month—may show average wait times that are skewed high or low due to the small number. The best way for veterans to find out when they can be seen is always to contact the local facility or use the online "Make an Appointment" button on www.accesstocare.va.gov.

Signing Authority

Denis McDonough, Secretary of Veterans Affairs, approved this document on July 19, 2022, and authorized the undersigned to sign and submit the document to the Office of the Federal Register for publication electronically as an official document of the Department of Veterans Affairs.

Jeffrey M. Martin,

Assistant Director, Office of Regulation Policy & Management, Office of General Counsel, Department of Veterans Affairs.

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¹ Brar, Sumeet & Hopkins, Michael & Margolius, David. (2019). Time to Next Available Appointment as an Access to Care Metric. The Joint Commission