

2022 Survey of Veteran Enrollees' Health
and
Use of Health Care
Findings Report

CONTRACT NUMBER: 36C10X21N0115

December 2022

Prepared by Westat, Inc. under contract with Trilogy Federal, LLC for the
Office of Strategic Planning and Analysis (OSPA), VHA Chief Strategy Office
Veterans Health Administration (VHA), U.S. Department of Veterans Affairs (VA)

Table of Contents

Executive Summary.....	x
1 Overview of the Survey of Enrollees	1
1.1 Background of the Survey of Enrollees.....	2
1.2 Methodology.....	2
1.3 Weighting	7
2 Demographic and Socioeconomic Characteristics	8
2.1 Demographics	8
2.1.1 Priority Groups	8
2.1.2 Age.....	11
2.1.3 Sex by Age	12
2.1.4 Marital Status and Dependents.....	12
2.1.5 Ethnicity and Race.....	13
2.1.6 Active-Duty Period of Service/Combat Experience	14
2.2 Employment Status.....	16
2.3 Income.....	19
3 Public and Private Health Insurance	21
3.1 Insurance Status	22
3.2 Medicare Coverage.....	24
3.2.1 Medicare Part D Coverage	25
3.3 Medicaid Coverage.....	27
3.4 TRICARE Coverage.....	28
3.5 Private Individual or Group Health Plans.....	29
4 Health Status	31
4.1 Perceived Health Status.....	31
5 Smoking and Tobacco Use	33
5.1 Cigarette Smoking Status Overview.....	34
5.2 Cigarette Smoking by Age, Priority Group, and Sex	37
5.3 Tobacco Cessation.....	43
5.3.1 Awareness of Tobacco Cessation Resources.....	44
5.3.2 Use of Tobacco Cessation Resources.....	45

Table of Contents (continued)

5.4	Use of Smokeless Tobacco and e-Cigarettes	48
6	Health Care and Prescription Drug Use	51
6.1	Current and Planned Future Use of VA.....	51
6.2	Prescription Medication Use	54
6.3	VA Prescription Medication Use.....	56
7	Enrollees’ Views of VA Health Care	57
7.1	Experience Using VA, Community Providers, and Non-VA Facilities.....	59
7.2	Satisfaction with VA, Community Providers, and Non-VA Health Care.....	65
7.3	Reasons for Using Health Care Services Other Than VA’s	70
8	Digital Access to VA Information and Resources.....	74
8.1	Access to the Internet and Text Messaging	75
8.2	Places Where Enrollees Access the Internet.....	76
8.3	Readiness and Willingness to Use Internet for VA Information and Activities.....	79

List of Appendixes

A	Supporting Tables for Figures	A-1
B	VISN Tables	B-1

List of Tables

1-1	U.S. Department of Veterans Affairs (VA) eligibility categories and priority groups	4
1-2	Number of enrolled sampled Veterans	6
1-3	Number of respondent enrollees, by priority group, age, and sex	6
1-4	Number of completed surveys by mode.....	6
1-5	Comparison of Survey of Enrollees design, 2020, 2021, and 2022.....	7
2-1	Ethnicity and race of enrollees, by age group (mutually exclusive).....	14
2-2	Employment status of enrollees, by age group	17
2-3	Enrollee unemployment rates, by demographic characteristics.....	18

Table of Contents (continued)

List of Tables (continued)

3-1	Percentage of enrollees reporting each type of insurance coverage.....	23
3-2	Among enrollees with Medicare, the percentage with Medicare Part D coverage	27
4-1	Perceived health status of enrollees, by priority group, age, and sex	32
5-1	Enrollee smoking status, by year.....	37
5-2	Enrollee smoking status, by priority group, age, and sex	40
5-3	Current smoker status, by special populations.....	41
5-4	Change in current smoking rates from 2021 to 2022, by Veterans Integrated Services Network (VISN).....	43
5-5	Among current smokers, use of either non-nicotine prescription medications or nicotine replacement therapy during recent quit attempt by priority group, age, and sex.....	46
5-6	Among current smokers, percentage of enrollees willing to use U.S. Department of Veterans Affairs (VA) tobacco cessation resources to quit smoking, by priority group, age, and sex	47
5-7	Among enrollees, use of smokeless tobacco products by priority group, age, and sex	50
6-1	Percentage of enrollees’ current use of U.S. Department of Veterans Affairs (VA) services to meet health care needs, by year.....	51
6-2	Percentage of enrollees reporting on current use of U.S. Department of Veterans Affairs (VA) services to meet health care needs, by priority group, age, and sex.....	52
6-3	Enrollees planned future use of U.S. Department of Veterans Affairs (VA) Health Care, by Priority Group, age, and sex.....	54
6-4	Number of prescription medications used in the last 30 days, all enrollees	55
6-5	Among enrollees who used prescription medications in the past 30 days, the number of prescription medications from U.S. Department of Veterans Affairs (VA).....	55

Table of Contents (continued)

List of Tables (continued)

7-1	Among enrollees, use of any U.S. Department of Veterans Affairs (VA) health care services at a community provider by priority group, age, and sex	59
7-2	The percentage of enrollees who responded favorably about their healthcare utilization experience at a U.S. Department of Veterans Affairs (VA) facility or a VA-paid non-VA facility, by facility type, priority group, age, and sex	61
7-3	The percentage of enrollees who responded favorably about access to the facility and interaction with provider personnel, by type of facility, priority group, age, and sex	64
7-4	The percentage of enrollees reporting satisfaction with interaction with provider personnel at a U.S. Department of Veterans Affairs (VA) facility or a VA-paid non-VA facility, by facility type, priority group, age, and sex	67
7-5	Percentage of enrollees reporting satisfaction with decision making and referrals received at a U.S. Department of Veterans Affairs (VA) facility or non-VA facility, by facility type, priority group, age, and sex	69
7-6	Percentage of enrollees reporting on reasons for using other health care services, by priority group, age, and sex	72
7-7	Percentage of enrollees reporting on reasons for using other health care services, by priority group, age, and sex (negative factors)	73
8-1	Places where enrollees access the internet, by priority group, age, and sex	78
8-2	Percentage of enrollees willing to perform virtual health-related tasks by priority group, age, and sex	82
8-3	Percentage of enrollees willing to share health information or receive medical opinions as part of a virtual consultation or appointment	84
A2-1	Comparison of Priority Group 1 to Priority Groups 2-8 by OEF/OIF/OND, age, sex, and combat service	A-1
A2-2	Enrollees by age group	A-1

Table of Contents (continued)

List of Tables (continued)

A2-3	Enrollees by sex of enrollees, by age and priority group	A-1
A2-4	Enrollees by marital status and dependents.....	A-2
A2-5	Number and percentage of enrollees by race and Hispanic origin	A-2
A2-6	Enrollees by income group	A-2
A2-7	Age by income.....	A-3
A2-8	Sex by income	A-3
A3-1	Percentage of enrollees with no insurance, by priority group, age, and sex.....	A-3
A3-2	Percentage of enrollees with Medicare coverage, by priority group, age, and sex	A-4
A3-3	Percentage of enrollees with Medigap and Medicare Advantage coverage	A-4
A3-4	Among enrollees with Medicare, the percentage with Medicare Part D coverage by priority group, age, and sex	A-5
A3-5	Percentage of enrollees with Medicaid coverage, by priority group, age, and sex	A-5
A3-6	Percentage of enrollees with TRICARE coverage, by priority group, age, and sex	A-6
A3-7	Percentage of enrollees with private or group health plans, by priority group, age, and sex	A-6
A3-8	Percentage of enrollees with private insurance, by primary source of coverage.....	A-7
A8-1	Enrollee use of the internet, by age, priority group, and sex	A-7
A8-2	Use of text messages, by priority group, age, and sex	A-8
A8-3	Percentage of enrollees willing to schedule virtual consultations or appointments, at least occasionally, with provider, by priority group, age, and sex	A-8
B1-1	Enrollees by priority group and VISN	B-1

Table of Contents (continued)

List of Tables (continued)

B1-2	Enrollees by age and VISN	B-2
B1-3	Enrollees by sex and VISN	B-3
B1-4	Enrollees by service and VISN.....	B-4
B1-5	Enrollees by employment status and VISN.....	B-6
B2-1	Enrollees by health insurance coverage, priority group, and VISN.....	B-8
B2-2	Enrollees by health insurance coverage, age, and VISN.....	B-11
B2-3	Enrollees by health insurance coverage, sex, and VISN.....	B-14
B3-1	Enrollees with Medicare Part D drug coverage, by priority group, age, sex, and VISN	B-16
B3-2	Enrollee use of prescription medications, by VISN.....	B-18
B3-3	Enrollee use of prescription medications obtained from VA, by VISN.....	B-19
B4-1	Enrollees who ever smoked, by priority group, age, sex, and VISN.....	B-20
B4-2	Enrollees who are current smokers, by priority group, age, sex, and VISN	B-22
B4-3	Enrollees who are former smokers, by priority group, age, sex, and VISN	B-24
B4-4	Enrollees who are unsuccessful quitters, by priority group, age, sex, and VISN	B-26
B5-1	Enrollees’ perceived health status, by priority group and VISN	B-28
B5-2	Enrollees’ perceived health status, by age and VISN.....	B-29
B5-3	Enrollees’ perceived health status, by sex and VISN	B-30
B6-1	Enrollees who access the internet, at least occasionally, by priority group, age, sex, and VISN.....	B-31
B6-2	Enrollees who send or receive text messages on their cell phone, by priority group, age, sex, and VISN	B-33

Table of Contents (continued)

List of Tables (continued)

B6-3	Enrollees’ readiness to use Internet for VA information and (tele) health-related activities, by VISN.....	B-35
B7-1	Enrollees’ perceptions of VA health care services at a VA facility, by VISN	B-38
B7-1a	Enrollees’ perceptions of health care services at non-VA facility, by VISN	B-40
B7-2	Enrollees who indicated “satisfied” or “very satisfied” about the health care services received at a VA facility, by VISN	B-42
B7-2a	Enrollees who indicated “satisfied” or “very satisfied” about the health care services received at non-VA facility, by VISN.....	B-44
B7-3	Enrollees’ planned future use of VA health care services, by VISN.....	B-46
B7-4	Enrollees’ use of VA services to meet their health care needs, by VISN.....	B-49

List of Figures

2-1	Percentage of enrollees by priority group	9
2-2	Percentage of enrollees by priority group and year, 2018-2022.....	10
2-3	Percentage of enrollees by collapsed priority group and demographic group	11
2-4	Percentage of enrollees by age and year, 2018-2022	11
2-5	Percentage of enrollees by sex, priority group and age group	12
2-6	Percentage of enrollees by marital status and dependents.....	12
2-7	Percentage of enrollees by race and ethnicity (mutually exclusive).....	13
2-8	Percentage of enrollees by period of active-duty service and combat service (not mutually exclusive).....	15
2-9	Percentage of enrollees by employment status.....	16
2-10	Unemployment rates by population, 2018 to 2022	17

Table of Contents (continued)

List of Figures (continued)

2-11	Percentage of enrollees by income group	19
2-12	Percentage of enrollees by collapsed income group.....	20
3-1	Percentage of enrollees with no insurance coverage, by year	23
3-2	Percentage of enrollees with no insurance.....	24
3-3	Percentage of enrollees with Medicare coverage	24
3-4	Percentage of enrollees with Medigap and Medicare Advantage coverage	25
3-5	Among enrollees with Medicare, the percentage with Medicare Part D coverage	27
3-6	Percentage of enrollees with Medicaid coverage	28
3-7	Percentage of enrollees with TRICARE coverage	28
3-8	Percentage of enrollees with private or group health plans	29
3-9	Among enrollees covered by any other individual or group health plan, the provider of the coverage	30
4-1	Perceived health status of enrollees	32
5-1	Smoker status classification.....	36
5-2	Percentage of current smokers by recent utilization of U.S. Department of Veterans Affairs (VA) services from 2018 to 2022.....	38
5-3	Percentage of enrollees who are current smokers, by Veterans Integrated Services Network (VISN) map.....	42
5-4	Recent unsuccessful tobacco cessation attempts among current smokers and use of non-nicotine prescription medications or nicotine replacement therapy	44
5-5	Among current smokers, percentage of enrollees by their awareness of and willingness to use VA tobacco cessation resources	45
5-6	Among enrollees, prevalence of smokeless tobacco and e-cigarette use	49

Table of Contents (continued)

List of Figures (continued)

6-1	Percentage of enrollees by planned future use of U.S. Department of Veterans Affairs (VA) Health Care	53
6-2	Percentage of enrollees who use filled prescriptions U.S. Department of Veterans Affairs (VA) pharmacy, 2022.....	56
7-1	The percentage of enrollees who responded favorably about their U.S. Department of Veterans Affairs (VA) health care experiences at a VA facility or a VA-paid non-VA facility with appointments, access, and interactions with provider personnel	60
7-2	The percentage of enrollees who responded favorably about access to a U.S. Department of Veterans Affairs (VA) facility and interaction with VA provider personnel, by sex	63
7-3	The percentage of enrollees who responded favorably about their interactions and decision-making process with providers, and referrals received at a U.S. Department of Veterans Affairs (VA) facility or non-VA facility	66
7-4	Among U.S. Department of Veterans Affairs (VA) health care users, reasons for using other health care services and barriers to using VA services.....	71
8-1	Percentage of enrollees who use the internet, at least occasionally, by priority group, age, and sex.....	75
8-2	Percentage of enrollees who use text messages, by priority group, age, and sex.....	76
8-3	Among enrollee internet users, the places where they accessed the internet	77
8-4	Among enrollee internet users, percentage willing to perform telehealth-related tasks by year	80
8-5	Percentage of enrollees willing to schedule virtual consultations or appointments, at least occasionally, with provider, by priority group, age, and sex	83

Executive Summary

The U.S. Department of Veterans Affairs (VA) operates the country's largest and most comprehensive integrated health care system through the Veterans Health Administration (VHA). The Survey of Veteran Enrollees' Health and Use of Health Care (Survey of Enrollees) provides an overall characterization of Veterans who are enrolled in VA's health care system (enrollees). The main topics addressed in the survey include enrollees' health insurance coverage, prescription drug use, health and smoking status, readiness to utilize digital health care platforms, and enrollees' perceptions of VA and non-VA health care facilities. This report presents the findings from the 2022 Survey of Enrollees. Data were analyzed in relation to demographic factors that were relevant to enrollees when determining their use of VA health care services.

Overview of the Survey of Enrollees

The Survey of Enrollees is an annual survey that seeks input from enrolled Veterans to better understand their health care needs. The VHA Chief Strategy Office conducts the annual Survey of Enrollees with more than 42,000 Veterans who are enrolled in VA's health care system and collects annual data on enrollees' health status, insurance, VA and community health care use, prescription drug use, attitudes and perceptions about VHA services, socioeconomic demographics, trends in smoking, digital access, and other pertinent data not available through any other VHA databases. The findings from the survey support annual VHA projections of enrollment, utilization, and expenditures, as well as a variety of high-level VHA budget- and policy-related analyses.

The VHA has been conducting the Survey of Enrollees since 1999, and the 2022 Survey of Enrollees marked the 20th iteration of the survey. The first nine iterations of the survey were conducted as telephone interviews. In 2012, VA implemented a multimode approach to the survey involving telephone, mail (paper), and web data collection. The two modes of data collection for the 2022 Survey of Enrollees were paper and web data collection.

Methodology

The VHA's 2022 Survey of Enrollees' target population included all Veterans enrolled in VA Health Care as of September 30, 2021, who reside in the 50 U.S. states, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands. The sampling frame for the 2022 Survey of Enrollees was constructed using the VHA enrollment file and it excluded Veterans with incomplete contact or stratification information, such as those with invalid addresses, those missing sex data, and those with a listed age greater than 110 or less than 17 years old.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

The survey team stratified the sample by the Veterans Integrated Services Network (VISN), market, priority group, and date of enrollment. VA is divided into 18 geographical administrative areas called VISNs which are further divided into health care markets. Enrollee type is defined by the Veteran's date of enrollment in the VA health care system. If a Veteran enrolled in VA Health Care on or prior to the enactment of the current enrollment system (March 31, 1999, the date reform was enacted), the Veteran was identified as a pre-enrollee. Priority groups define a Veteran's priority for VA health care services. Priority groups range from one to eight, with Group 1 being the highest priority. For the purposes of analysis, Priority Groups 1-3 were classified into one stratum, Priority Groups 4-6 into a second stratum, and Priority Groups 7-8 into a third stratum.

The survey team implemented two waves of data collection for the 2022 Survey of Enrollees: a web survey and mail (paper) survey. Wave 1 began on April 27, 2022, and Wave 2 began on June 15, 2022. A total of 188,177 enrollees were invited to participate in the survey, and 44,248 enrollees returned a completed survey. Survey data were weighted so that the findings were representative of the entire enrollee survey sampling frame which totaled 8,629,536 Veterans enrolled in the VA Health Care system.

Demographic and Socioeconomic Characteristics

In 2022, the largest proportion of enrollees was in Priority Groups 1-3 at 57.5 percent, an increase from 55.5 percent in 2021. From 2018 to 2022, Priority Group 1 increased from 26.7 percent of the enrollee population to 34.9 percent, and the percentage of enrollees in Priority Group 5 decreased from 19.7 percent in 2018 to 15.2 percent in 2022. Women represented 9.8 percent of the total enrollee population, and two-thirds of them are in Priority Groups 1, 2, or 3. Half of male enrollees are age 65 or older, compared to only 17 percent of females age 65 or older. The percentage of enrollees who were younger than 45 has increased slightly over the past 4 years, whereas the percentage of enrollees age 45 to 64 has declined over the same period.

About three in five enrollees (61.1%) reported being married, followed by 14.7 percent who reported being divorced, 10.1 percent who reported they were never married, and 7.1 percent who reported being widowed. Over half (55.4%) of the enrollees reported having at least one dependent. The most commonly reported ethnicity and race were non-Hispanic and White. Overall, about four in five enrollees (79.5%) self-identified one or more of their races as White, regardless of Hispanic origin, and 13.9 percent self-identified one or more of their races as Black or African American, regardless of Hispanic origin.

A total of 35 percent of enrollees served during the Vietnam era, the most frequently reported period of service, and 32 percent of enrollees reported serving after September 2001. Combat exposure rates have remained consistent across the years (in 2019, 2020, 2021, and 2022, a total of 47.1%, 48.3%, 48.3%, and 47.8% reported combat exposure, respectively). The 2022 survey estimates indicated that of 2,674,949 enrollees who served

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

post-September 2001, 70.8 percent have Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn (OEF/OIF/OND) status. In addition, 22.6 percent of the total enrollee population served in the OEF/OIF/OND conflicts, representing a slight increase over previous years (21.4% for 2021, 20.5% for 2020, 18.8% for 2019, and 17.8% for 2018).

Of all enrollees in 2022, 40.6 percent were in the labor force (employed full-time or part-time or unemployed looking for work), 58.0 percent were not in the labor force (retired or not currently looking for work), and 48.6 percent were retired. Over half (57.6%) of enrollees reported a household income of \$35,000 or higher. Nearly three out of four enrollees (71.8%) age 30-49 had a household income of \$35,000 or higher. Among the youngest and oldest age groups (age <30 and age 65+), less than half had a household income greater than \$35,000 (44.5% and 48.2%, respectively).

Public and Private Health Insurance

The large majority of enrollees (81.2%) reported that they had some type of public or private insurance coverage. Almost half of enrollees (48.6%) reported Medicare coverage, compared to 6.4 percent who reported Medicaid coverage, and 28.2 percent reported private insurance coverage. TRICARE coverage was reported by 22.9 percent of enrollees, down less than one percentage point compared to 2021. Among those with Medicare, 32.5 percent reported Medicare Part D Coverage, 34.0 percent reported Medicare Advantage coverage, and 21.3 percent reported that they purchased Medigap coverage, up 2.3 percentage points from 2021. In 2022, 18.8 percent of enrollees reported no public or private insurance coverage.

Health Status

The 2022 Survey of Enrollees gathered information about enrollees' perceived health status by asking them to rate it as "excellent," "very good," "good," "fair," or "poor." A total of 73.3 percent of enrollees reported their health status as "excellent," "very good," or "good." While the majority of enrollees reported being in "good" health, those in Priority Groups 1-3 were less likely than those in other priority groups to perceive themselves in "excellent," "very good," or "good" health. About seven out of ten enrollees reported being in at least "good" health across age groups (75.4% of those younger than 45, 72.4% of those 45 to 64 years of age, and 72.9% of those age 65 and older).

Smoking and Tobacco Use

The 2022 survey included a series of questions asking enrollees about cigarette smoking behaviors and their awareness and willingness to use tobacco cessation counseling and medications offered at VA medical centers. Responses to the survey questions allowed the survey team to classify respondents into six groups: (1) never smokers, (2) ever smokers, (3) current smokers, (4) recent unsuccessful quitters, (5) former smokers, and (6) recent successful quitters. In 2022, a total of 55.7 percent of enrollees were classified as ever smokers. Using all enrollees as the denominator, current smokers made up 12.7 percent of

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

the total enrollee population, 41.9 percent were considered former smokers, and 1.7 percent of the enrollee population successfully quit smoking in the past year. Survey data shows a decline in current smokers among VA enrollees, from 14.6 percent in 2018 to 12.7 percent in 2022.

Priority Groups 1-3 had the highest percentage of enrollees who had never smoked, 45.9 percent. Priority Groups 4-6 had the highest percentage of current smokers (17.1% of all enrollees in Priority Groups 4-6, compared with 12.3% in Priority Groups 1-3 and 9.3% in Priority Groups 7-8). Priority Groups 7-8, those who are least affected by service-related conditions, had the highest percentage of former smokers (46.2% of all enrollees in this group). A higher percentage of female enrollees (59.5%) than male enrollees (41.7%) indicated that they have never smoked. However, both groups had similar rates of current smokers as a percentage of their respective groups: 12.6 percent for females and 12.8 percent for males. Male enrollees had a 1.8 percent recent successful quit rate, while female enrollees had a 1.3 percent recent successful quit rate.

Almost three-quarters of the former smokers (70.3%) reported successfully quitting smoking 10 or more years ago. Just over half (52.3%) of current enrollee smokers had made a recent quit attempt but were unsuccessful. Of these recent unsuccessful quitters, 31.5 percent used non-nicotine prescription medications or nicotine replacement therapy to help with their tobacco cessation attempt. Current smokers were asked about awareness of and willingness to use the major tobacco cessation resources offered by the VA. Nicotine replacement therapy was the best known among current enrollee smokers, followed by non-nicotine prescription medications, tobacco cessation counseling services, the 1-855-QUIT-VET quitline, the SmokefreeVET text messaging program, and the Stay Quit Coach application.

Younger enrollees were more likely to engage in smokeless tobacco and e-cigarette use, with the highest prevalence among enrollees younger than 45 years of age (7.1% for smokeless tobacco use and 11.6% for e-cigarette use). The use of e-cigarettes and other vaping products among enrollees in the youngest age group (less than 45 years old) increased by 1.6 percentage points compared to 2021. Moreover, analysis indicates that males are more likely than females to use smokeless tobacco products (4.8% compared to 0.6%, respectively) and more likely to use e-cigarette or other vaping products (7.7% compared to 4.0%, respectively).

Health Care and Prescription Drug Use

Responses from the 2022 survey showed that 33.2 percent of enrollees currently use VA services to meet all of their health care needs, and 18.7 percent of enrollees use VA services to meet most of their health care needs. Enrollees in Priority Groups 1-3 and 4-6 were more likely to report that they used VA for all of their health care needs than those in lower priority groups (Priority Groups 7-8). Enrollees who were age 65 or older were the least

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

likely of all the age groups analyzed to report that they used VA services to meet all of their health care needs. Male enrollees were also somewhat less likely to use the VA for all of their health care needs (32.8%) compared to female enrollees (37.5%).

When asked to predict how they plan to use VA Health Care in the future, 45.2 percent of enrollees said that they planned to use VA Health Care as their primary source of health care, 12.9 percent said that they would use it as a safety net, and 12.8 percent said they would use it for a service-related disability or mental or physical health conditions.

Enrollees were asked the number of prescription medications they had used in the last 30 days, and the number they had obtained from VA pharmacies. Almost half (46.9%) reported using five or more prescription medications in the past month, 18.7 percent reported taking three to four prescription medications in the past month, and 17.5 percent reported taking one to two prescription medications. Of those who reported taking at least one prescription medication in the past 30 days, 34.0 percent obtained five or more of their prescription medications from VA pharmacies, 16.7 percent obtained one to two prescription medications from VA , and 14.4 percent obtained three to four prescription medications from VA. Just over one-third (33.9%) of those enrollees taking prescription medications obtained none of those medications from the VA.

Enrollees' Views of VA Health Care

The 2022 Survey of Enrollees included a series of questions asking enrollees about their general experience and satisfaction with VA health care services used on or after January 1, 2021. A total of 61.8 percent of enrollees reported using VA health care services at a VA facility on or after January 1, 2021, and 29.0 percent reported using VA-paid health care at a non-VA facility during the same period. Among enrollees who used any VA health care services, a large majority responded favorably about their experiences with scheduling appointments, access, and interactions with provider personnel. Compared to those who received health care at a VA facility, enrollees who received VA-paid health care at a non-VA facility reported a slightly more positive experience on all measures related to appointments, access, and interaction. The biggest differences in enrollees' experiences at VA and non-VA facilities concerned the appointment taking place as scheduled, easy access to the facility, and availability of appointments at convenient hours and days.

The survey assessed enrollees' general levels of satisfaction with the health care they received at VA and non-VA facilities. Satisfaction was slightly higher for non-VA facilities than VA facilities. Enrollees were most satisfied with the way in which the health care providers interacted with them. The vast majority of enrollees also expressed satisfaction with participation in decision making about their health issues, with satisfaction ratings ranging from 82.3 percent to 85.4 percent for VA facilities and from 84.4 percent to 87.7 percent for non-VA facilities. Enrollees were least satisfied with their ability to get referrals for specialist

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

care or special equipment. Satisfaction ratings for this aspect of their health care was higher for non-VA facilities (77.6%) than VA facilities (74.7%).

The survey asked enrollees about why enrollees used other health care services for some or all of their health care needs. Findings show that 48.9 percent of enrollees had used health care services other than those provided or paid for by VA on or after January 1, 2021. Among the positive aspects of using non-VA facilities, the top two reasons reported by enrollees were that they had an existing provider outside VA they really liked and trusted (72.7%) and they found these facilities provided easier access to care (72.0%). More than half of enrollees who responded to this question indicated that they used other health care services because appointments were available at more convenient times (55.5%), and 57.1 percent indicated that non-VA facilities provided better quality of care than VA health facilities.

When asked about barriers to using VA services, 41.3 percent said they needed information on eligibility for VA services, 36.5 percent said they required immediate attention and could not get an appointment at VA, 28.7 percent said they had been dissatisfied with prior VA care experiences, and 23.2 percent of enrollees believed that they were ineligible to receive the needed services at VA.

Digital Access to VA Information and Resources

Respondents were asked questions about use of the internet as well as interest in using computer or mobile devices for their own health care. More than four in five enrollees (83.4%) reported using the internet, at least occasionally. Internet usage was most prevalent among enrollees who were younger, female, and were in Priority Groups 1-3. Nearly all enrollees under the age of 45 (98.6%) reported that they used the internet, compared with 70.7 percent of enrollees 65 years of age or older. More than four in five enrollees overall (83.4%) indicated that they sent or received text messages, an increase from the rate in 2021 (83.0%). Use of text messages varies with age, priority group, and sex. Whereas almost all enrollees under the age of 45 reported that they used text messaging (98.4%), only 68.3 percent of enrollees who were 65 years or older did so (although that is up from 61.8% in 2021).

The most common place where enrollees accessed the internet was at home (93.1%). Enrollees also reported accessing the internet through mobile devices such as a cellphone or tablet (48.9%) and at work (31.0%). A much smaller share of enrollees reported accessing the internet at someone else's house (6.6%), a public library (5.6%), some other place (4.1%), a school (3.2%), or a community center (1.3%).

When asked if they would be willing to perform a series of health-related tasks using a computer or mobile device, most internet-using enrollees said that they were "somewhat" or "very willing" to go online to access their personal health record (85.5%), access laboratory

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

or X-ray test results (84.9%), communicate with their health care provider over secure email (84.9%), fill out health forms (80.5%), schedule medical appointments (84.4%), refill a medication prescription (83.9%), and sign up for health-related text messages (81.1%). More than seven in ten internet-using enrollees said they were “somewhat” or “very willing” to use the internet to watch educational health videos online (72.6%) and use an “app” to track health measures such as blood pressure or weight (72.9%). More than two-thirds of enrollee internet users were willing to complete an online health assessment to measure stress or anxiety (68.5%). Less than half of enrollees who access the internet were “somewhat” or “very willing” to join an online support group for people with similar health issues (46.8%).

1. Overview of the Survey of Enrollees

The U.S. Department of Veterans Affairs (VA) operates the country's largest and most comprehensive integrated health care system through the Veterans Health Administration (VHA). Given that more than 13 million Veterans currently are eligible to receive care from the VA, it is important for VHA to understand their health care needs. The intent of the Survey of Veteran Enrollees' Health and Use of Health Care (Survey of Enrollees) is to collect information about enrollees' health care needs, along with demographic and socioeconomic factors that affect usage patterns, to help inform VHA's health care planning and future projections.

VHA provides primary and specialty care, a comprehensive pharmaceutical benefits package, and ancillary services to its enrollees through a geographically dispersed network of 171 medical centers and 1,113 outpatient sites.¹ For administrative purposes, VA is divided into 18 geographical administrative areas called Veterans Integrated Services Networks (VISNs)² and VISNs are further divided into health care markets. Markets are health care areas within each VISN that have a sufficient population and geographic size to benefit from the coordination and planning of health care services and to support a full health care delivery system.

The VA Health Care system has approximately nine million enrolled Veterans, with approximately half of that population over the age of 65. At the same time, younger enrollees are more diverse in sex, race, and ethnicity; more affluent; and experience health care differently than their over-65 counterparts. VA Health Care must continue to be prepared to serve both aging Veterans and the rapidly growing, relatively young and diverse group of Veterans who have served in more recent conflicts.

In order to better anticipate health care needs of all enrolled Veterans, the VHA Chief Strategy Office conducts an annual survey, the Survey of Enrollees, seeking responses from more than 42,000 Veterans who are enrolled in VA's Health Care system. The purpose of this report is to present the findings from the 2022 Survey of Enrollees.

¹ U.S. Department of Veterans Affairs. (2022). *Veterans Health Administration*. Washington, DC: Author. Available at: <https://www.va.gov/health>. Retrieved on: September 13, 2022.

² U.S. Department of Veterans Affairs. (2022). *Veterans Integrated Services Networks (VISNs)*. Washington, DC: Author. Available at: <https://www.va.gov/HEALTH/visns.asp>. Retrieved on: September 13, 2022.

1.1 Background of the Survey of Enrollees

The Survey of Enrollees collects data annually on enrolled Veterans' health status, insurance coverage, VA and non-VA health services use, current and planned future use of health care, and overall demographics. This information supports annual VHA projections of enrollment, utilization, and expenditures, as well as a variety of high-level VHA budget- and policy-related analyses. The VHA has been conducting the Survey of Enrollees since 1999 when the current enrollment system was established. Each year they survey a nationally representative sample of enrolled Veterans, with sufficient corpus in identified geographic areas and key stratification categories. In 2022, the final weighted estimate of enrolled Veterans in the survey sample was 8,629,536.

The 2022 Survey of Enrollees marked the 20th iteration of the survey dating back to 1999. Beginning in 2012, VA implemented a multi-mode approach to the survey involving telephone, mail (paper), and web data collection. The 2022 data collection plan included paper and web data collection, with a contingency for Computer Assisted Telephone Interviews (CATI) should the minimum response goals not be met at the close of survey fielding. Ultimately, the survey team did not conduct CATI interviews in 2022 because all response goals were satisfied using paper and web survey modes.

Trilogy Federal, LLC (Trilogy), a Service-Disabled Veteran-Owned project management and consulting firm, teamed with Westat, Inc. (Westat), a large research firm, to facilitate the 2022 Survey of Enrollees, including survey methodology and design, management of the Help Center, and data analysis. BigEye Direct, Inc. (BigEye) provided personalization, printing, and mailing services. Subsequently, "the survey team" refers to the joint Trilogy and Westat team.

1.2 Methodology

The VHA's 2022 Survey of Enrollees' target population included all Veterans enrolled in VA Health Care as of September 30, 2021, who reside in the 50 U.S. states, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands.

The survey team constructed the sample using the VHA enrollment file which contains the records of all Veterans enrolled in VA Health Care. The survey team used the variables available to stratify the sample, including the VISN market, priority group, and date of enrollment. Date of enrollment defines the enrollee type as pre-enrollee or post-enrollee.³

³ In 1999, Congress enacted VA Health Care reform that affected Veteran enrollment status. If a Veteran was enrolled on or prior to March 31, 1999, the date the reform was enacted, the Veteran was identified as a pre-enrollee. Veterans with enrollment dates after March 31, 1999, were defined as post-enrollees.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

As was done in previous years, the survey team excluded enrolled Veterans with incomplete information from the sampling frame, such as:

- Enrollees with missing or incomplete stratification information (i.e., VISN, market, priority group, and/or enrollee type);
- Enrollees with a missing street address, city, state, or ZIP Code;
- Enrollees with street address values that are not actual street addresses;⁴
- Enrollees with missing sex data; and
- Enrollees with a listed age greater than 110 or less than 17 years old.

After these adjustments, the final sampling frame total came to 8,629,536.

Lastly, the survey team excluded enrolled Veterans who were contacted for the 2021 Survey of Enrollees or who informed VA in the past that they did not want to participate in future surveys. However, the survey team included these enrolled Veterans in the overall sampling frame for purposes of weighted response estimates.

To ensure an adequate number of completed surveys per domain, the survey team stratified the sampling frame into 570 strata by market, priority group, and enrollee type. The analytic domains were as follows:

- Individual VISN markets (n=95);
- Priority groups (n=3) primarily based on enrolled Veteran level of disability, with priorities 1, 2, and 3 being one group; priorities 4, 5, and 6 being a second group; and priorities 7 and 8 being the third group; and
- Enrollee type (n=2) based on date of enrollment, with enrollment prior to March 31, 1999 (pre-enrollee) versus enrollment after this date (post-enrollee).

Priority groups define an enrolled Veteran's priority for VA health care services. Priority groups range from 1 to 8, with Priority Group 1 being the highest priority. Priority groups are based on multiple factors, including the enrolled Veteran's service-connected disabilities, income, and other factors such as Prisoner-of-War status or receipt of a Purple Heart. Table 1-1 defines priority groups and eligibility requirements.

⁴ Examples of such street address values are "GENERAL DELIVERY," "NEED ADDRESS," "NO KNOWN ADDRESS," "STREET ADDRESS UNKNOWN," "ADD ADDRESS," "DELETE," "NULL," and "NONE."

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 1-1. U.S. Department of Veterans Affairs (VA) eligibility categories and priority groups

Priority Group	Eligibility Requirements
Group 1	<ul style="list-style-type: none"> • Veterans with VA-rated service-connected disabilities that are 50% or more disabling • Veterans determined by VA to be unemployable due to service-connected conditions • Veterans awarded the Medal of Honor (MOH)
Group 2	<ul style="list-style-type: none"> • Veterans with VA-rated service-connected disabilities that are 30% or 40% disabling
Group 3	<ul style="list-style-type: none"> • Veterans who are former Prisoners of War (POWs) • Veterans awarded a Purple Heart medal • Veterans whose discharge was for a disability that was incurred or aggravated in the line of duty • Veterans with VA-rated service-connected disabilities that are 10% or 20% disabling • Veterans awarded special eligibility classification under Title 38, U.S.C., § 1151, "benefits for individuals disabled by treatment or vocational rehabilitation"
Group 4	<ul style="list-style-type: none"> • Veterans who are receiving aid and attendance or housebound benefits from VA • Veterans who have been determined by VA to be catastrophically disabled
Group 5	<ul style="list-style-type: none"> • Nonservice-connected Veterans and non-compensable service-connected Veterans rated 0% disabled by VA with annual income below the VA's and geographically adjusted income limits (based on resident ZIP Code) • Veterans receiving VA pension benefits • Veterans eligible for Medicaid programs
Group 6	<ul style="list-style-type: none"> • Compensable 0% service-connected Veterans • Veterans exposed to ionizing radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki • Project 112/SHAD (Shipboard Hazard and Defense) participants • Veterans who served in the Republic of Vietnam from January 9, 1962, to May 7, 1975 • Persian Gulf War Veterans who served from August 2, 1990, to November 11, 1998 • Veterans who served on active duty at Camp Lejeune for at least 30 days between August 1, 1953, and December 31, 1987 • Currently enrolled Veterans and new enrollees who served in a theater of combat operations after November 11, 1998, and were discharged less than 5 years ago
Group 7	<ul style="list-style-type: none"> • Veterans with gross household income below the geographically adjusted income limits for their resident location and who agree to pay co-payments
Group 8	<ul style="list-style-type: none"> • Veterans with gross household income above the VA and the geographically adjusted income limit for their resident location and who agree to pay co-payments

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

The survey team classified enrolled Veterans into three selection groups to support sample selection:

- Group 1: Enrollee was in Wave 1 or Wave 2 of the 2021 Survey of Enrollees;
- Group 2: Enrollee was in neither Wave 1 nor Wave 2 of the 2021 Survey of Enrollees but was in the sampling frame; and
- Group 3: Enrollee was not in the sampling frame for the 2021 Survey of Enrollees (i.e., enrolled Veterans new to VA).

The survey team did not sample enrolled Veterans in Group 1 in order to reduce the survey burden on those enrolled who completed the survey the previous year. Those in Group 2 were over-sampled, permitting Group 2 to represent both Group 1 and Group 2.

The survey team implemented a sampling strategy to meet the following VHA strata requirements:

1. Ensure at least 350 completed cases by market;
2. Ensure at least 350 completed cases by VISN and priority group;
3. Ensure at least 2,000 completed cases by VISN;
4. Ensure at least 20 percent of the completed cases are pre-enrollees (compared to 13.9% in the population);
5. Ensure that no cases from Selection Group 1 are included;
6. Ensure that the sample size in Selection Group 2 represents the population size in Selection Groups 1 and 2; and
7. Ensure a total of 42,000 completed cases.

The 2022 Survey of Enrollees initially invited all sampled enrollees to complete a web-based survey. Approximately 1 month later, the survey team mailed paper surveys to all non-respondents in the sample. The survey team implemented data collection for the 2022 survey in two waves. The survey team developed the first wave sample based on strata completion requirements and an estimated 29.4 percent response rate. The second wave sample was developed using an adaptive design based on Wave 1 response rates and remaining strata requirements. Wave 1 fielding began April 27, 2022, and Wave 2 began June 15, 2022. Fielding ended August 10, 2022. Table 1-2 lists the number of sampled enrolled Veterans derived from the sampling design, the number of changed or invalid addresses, and the resulting number of enrolled Veterans who received a letter inviting them to participate in the survey. A total of 174,362 enrollees were invited to participate in the survey.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 1-2. Number of enrolled sampled Veterans

	Wave 1	Wave 2	Total
Sampled Enrolled Veterans	102,606	85,571	188,177
Changed or Invalid Addresses	7,433	6,382	13,815
Invited Enrolled Veterans	95,173	79,189	174,362

The 2022 survey administration yielded a total of 44,248 completed surveys. Table 1-3 shows the distribution by priority group, age, and sex. A summary of completed surveys by mode is shown in Table 1-4. The percentage of completed web surveys decreased from 42.1 percent in 2021 to 36.4 percent in 2022, while the number of completed paper surveys increased from 57.9 percent in 2021 to 63.6 percent in 2022. Table 1-5 provides a comparison of the 2020, 2021, and 2022 designs.

Table 1-3. Number of respondent enrollees, by priority group, age, and sex

Demographic Group	Number of Respondents
Priority Group	
1 - 3	14,891
4 - 5	15,270
7 - 8	14,087
Age	
< 45	1,434
45 - 64	9,109
65 +	33,705
Sex	
Male	39,291
Female	4,957
All Enrollees	
44,248	

Table 1-4. Number of completed surveys by mode

	Web	Paper	Telephone	Total
Number	16,113	28,135	0	44,248
Percentage	36.4%	63.6%	0%	100%

Table 1-5. Comparison of Survey of Enrollees design, 2020, 2021, and 2022

	2020	2021	2022
Weighted population of enrolled Veterans	8,725,547	8,680,525	8,629,536
Weighted population as of:	September 2019	September 2020	September 2021
Stratified sample size	138,787	139,167	188,177
Sample stratified by:	Veterans Integrated Services Network (VISN), market, priority group, pre- and post-enrollee	VISN, market, priority group, pre- and post-enrollee	VISN, market, priority group, pre- and post-enrollee
Number of completed surveys/interviews	44,315	42,351	44,248
Response rate	32.0%	29.4%	23.6%
Data collection timeframe	April 2020 to August 2020	March 2021 to July 2021	April 2022 to July 2022
Mode of data collection	Web, mail, and computer-assisted telephone interview (CATI)*	Web, mail, and CATI*	Web, mail, and CATI*

* No CATI interviews were required for 2020, 2021, or 2022.

1.3 Weighting

The survey team calculated the stratum base weight based on the total target population and number sampled. The base weight for a sampled enrolled Veteran was the reciprocal of the probability that the enrolled Veteran was selected to participate in the 2022 survey (1 / probability of selection). For instance, if all of the enrolled Veterans in a stratum were selected, then the probability of selection would be 1, as would be the base weight. If some in the stratum were not selected, the sampling probabilities would be less than 1. When the probabilities are less than 1, the base weights are greater than 1. This indicates that sampled enrolled Veterans would represent themselves plus additional enrolled Veterans who were not sampled.

The survey team selected enrolled Veterans without replacement so that each enrolled Veteran in the sampling frame could be selected only once. The base weights for the responding enrolled Veterans were adjusted for nonresponse so that responding enrolled Veterans not only represent themselves and enrolled Veterans who were not sampled, but also sampled enrolled Veterans who did not respond. To account for nonresponse bias, the survey weights were adjusted for differential rates of response among various subgroups, and thereby reduced the potential for bias. Applying a weighting scheme in this manner enables survey results to be generalized to the entire enrollee population.

2. Demographic and Socioeconomic Characteristics

Demographic and socioeconomic information provides insights into the Veteran enrollee population and their potential health care needs. The Survey of Enrollees asked enrolled Veterans several demographic and socioeconomic questions to better understand their status related to health care. This chapter examines the key characteristics of U.S. Department of Veterans Affairs (VA) enrollees and compares the 2022 results to prior years.

2.1 Demographics

The survey team weighted results of the 2022 Survey of Enrollees to represent the population of Veterans enrolled in the VA health care system. As such, all references to enrollee counts and percentages in this report are derived entirely from weighted survey frequencies and not from the actual populations being discussed. The weighted total for analyses presented in this report is 8,376,015, a decrease of 304,510 enrollees from the 2021 report. All results in this report are based on this weighted total, unless otherwise stated. Below are notable statistics about the 2022 enrollees.⁵

- Women represented 9.8 percent of the total enrollee population and comprised 16.1 percent of enrollees who reported active-duty service since 2001.
- The majority of enrollees were married (61.1%), had at least one dependent (55.4%), and lived in an urban area (66.5%).
- Among all enrollees, more than one-third (35%) served during the Vietnam era, the most frequently reported period of service. The second most frequently reported period of service were those enrollees who reported serving after September 2001 (32%).

2.1.1 Priority Groups

The Veterans' Health Care Eligibility Reform Act of 1996 mandated that VA establish and implement a priority-based enrollment system to ensure each Veteran is enrolled based on the enrollee's specific eligibility status. For sampling and stratification purposes, the survey team collapsed the eight VA health care priority groups into three separate strata:

1. Priority Groups 1-3 (generally Veterans with service-connected disabilities);

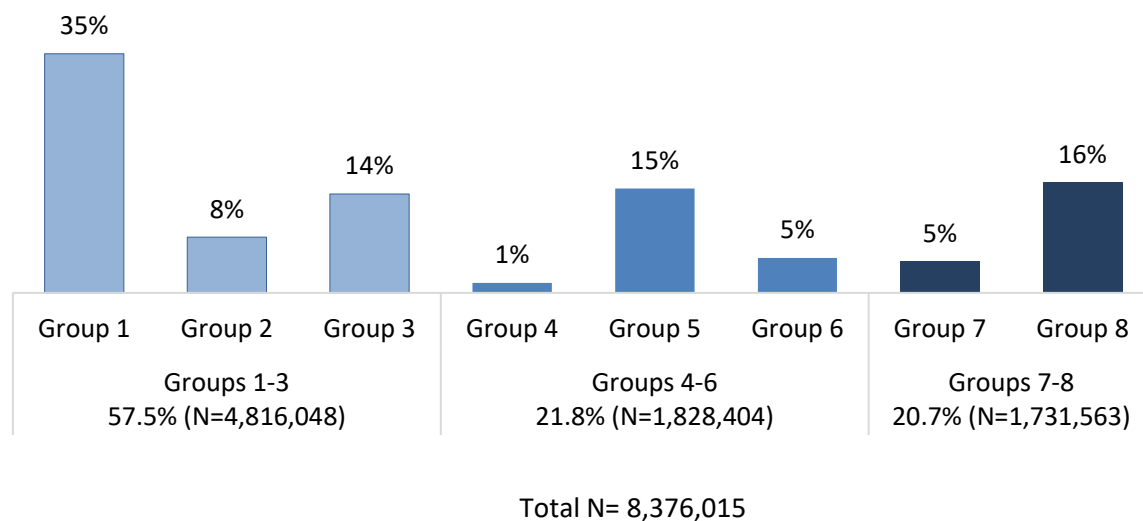
⁵ Sex, urban/rural, age, and priority group came from the VA administrative data file. Otherwise, results are from survey response data.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

- Priority Groups 4-6 (Veterans with catastrophic disabilities [Priority Group 4], Veterans with nonservice-connected disabilities or Veterans who have an annual income below the established VA Means Test (MT) threshold [Priority Group 5], or Veterans who have had exposure to environmental hazards [Priority Group 6]); and
- Priority Groups 7-8 (generally Veterans with no service-connected disability and who have an annual income above the MT threshold).

In 2022, the largest proportion of enrollees was in Priority Groups 1-3 at 57.5 percent, an increase from 55.5 percent in 2021. Figure 2-1 shows enrollees and percentages by individual and collapsed priority groups.⁶

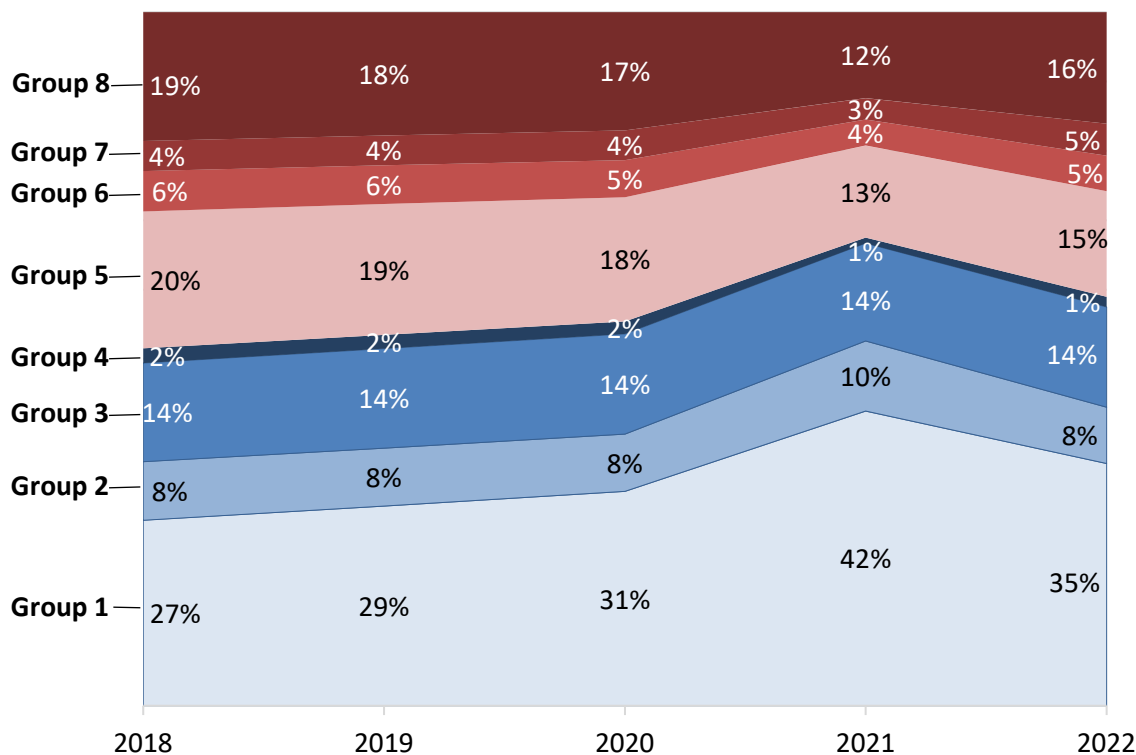
Figure 2-1. Percentage of enrollees by priority group



Changes in Priority Groups. Between 2018 and 2022, the percentage of enrollees in Priority Group 5 steadily decreased from 19.7 percent in 2018 to 15.2 percent in 2022. Compared to 2021, Priority Group 1 got smaller, decreasing from 42.4 percent to 34.9 percent, while Priority Group 5 grew from 13.3 percent to 15.2 percent and Priority Group 8 grew from 12.4 percent to 16.1 percent. All other priority groups have remained fairly stable over the past 5 years. Figure 2-2 illustrates percentages of enrollees by priority group from 2018 to 2022.

⁶ Throughout this report, all figures have values rounded to the nearest whole number for ease of reading. As a result, summing totals from figures may not match summing of values in the text and tables that use one decimal place.

Figure 2-2. Percentage of enrollees by priority group and year, 2018-2022

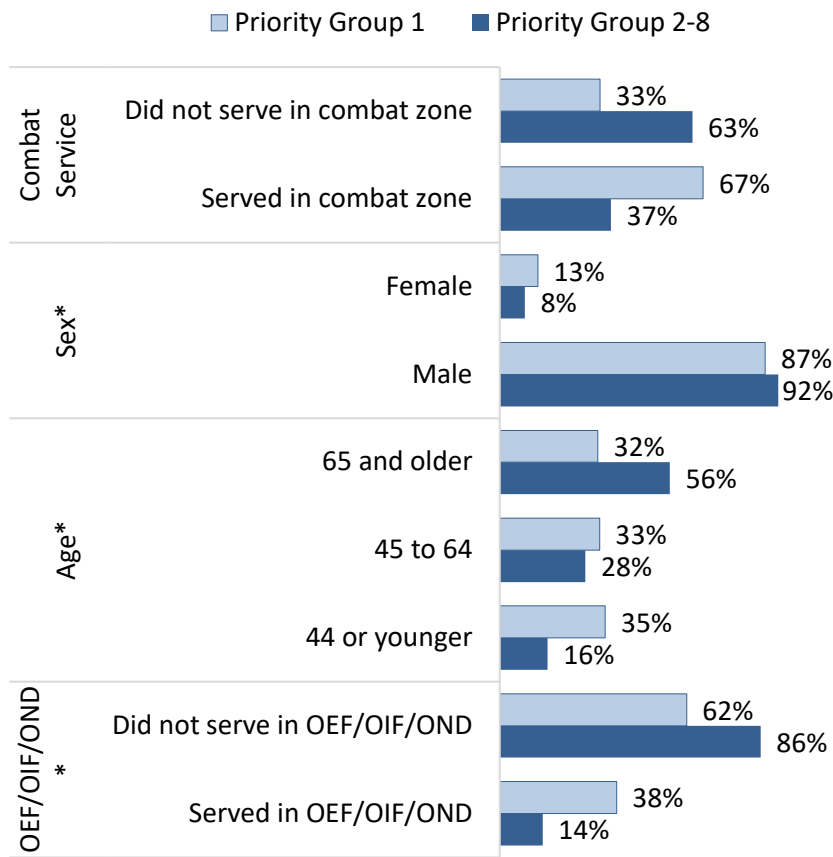


The survey data indicate that individuals in Priority Group 1 are more likely than those in Priority Groups 2-8 to be younger, female, have served in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), and/or Operation New Dawn (OND) (collectively referred to as OEF/OIF/OND),⁷ and to have served in a combat zone. According to the National Center for Veterans Analysis and Statistics, while the Veteran population has been declining since 1990, the number of Veterans with a service-connected disability has been on the rise, increasing 117 percent from 1990 to 2018.⁸ Figure 2-3 and Appendix Table A2-1 compare Priority Group 1 to the other priority groups in terms of age, sex, combat service, and service in OEF/OIF/OND.

⁷ Operation Enduring Freedom spans October 7, 2001 through December 28, 2014; Operation Iraqi Freedom spans March 19, 2003, through August 31, 2010; Operation New Dawn spans September 1, 2010, through December 15, 2011. For more information, see Salazar Torreon, B. (2019). *U.S. periods of war and dates of recent conflicts*. Washington, DC: Congressional Research Service. Available at: <https://fas.org/sgp/crs/natsec/RS21405.pdf>.

⁸ U.S. Department of Veterans Affairs. (2019). *Statistical trends: Veterans with a service-connected disability, 1990 to 2018*. Washington, DC: National Center for Veterans Analysis and Statistics. Available at: https://www.va.gov/vetdata/docs/Quickfacts/SCD_trends_FINAL_2018.pdf.

Figure 2-3. Percentage of enrollees by collapsed priority group and demographic group

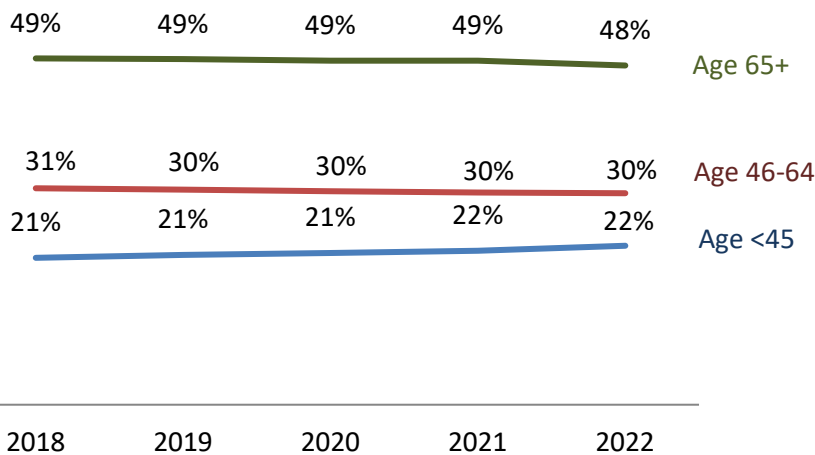


2.1.2 Age

Almost half (47.8%) of 2022 enrollees were age 65 or older, 29.8 percent were between 45 and 64 years of age, and 22.4 percent were younger than 45. The percentage of enrollees who were younger than 45 increased slightly over the past 4 years, whereas the percentage of enrollees age 45 to 64 has declined over the same period. See Appendix Table A2-2 for numbers and percentages of enrollees by age group. See Figure 2-4 for a distribution of enrollee ages from 2018 to 2022.

*Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn (OEF/OIF/OND), age, and sex data come from the U.S. Department of Veterans Affairs (VA) administrative data file.

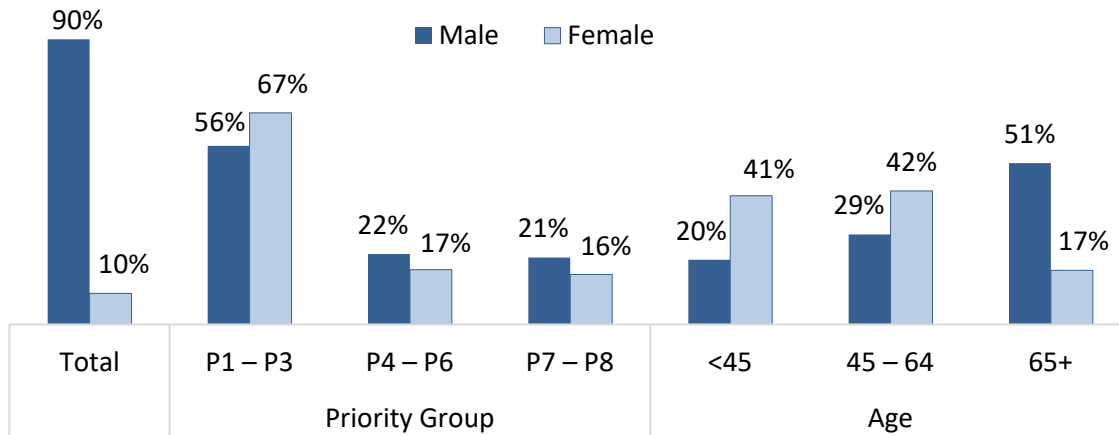
Figure 2-4. Percentage of enrollees by age and year, 2018-2022



2.1.3 Sex by Age

Women represented 9.8 percent of the total enrollee population, and two-thirds of them are in Priority Groups 1, 2, or 3. Half of male enrollees are age 65 or older, compared to only 17 percent of females. See Figure 2-5 and Appendix Table A2-3.

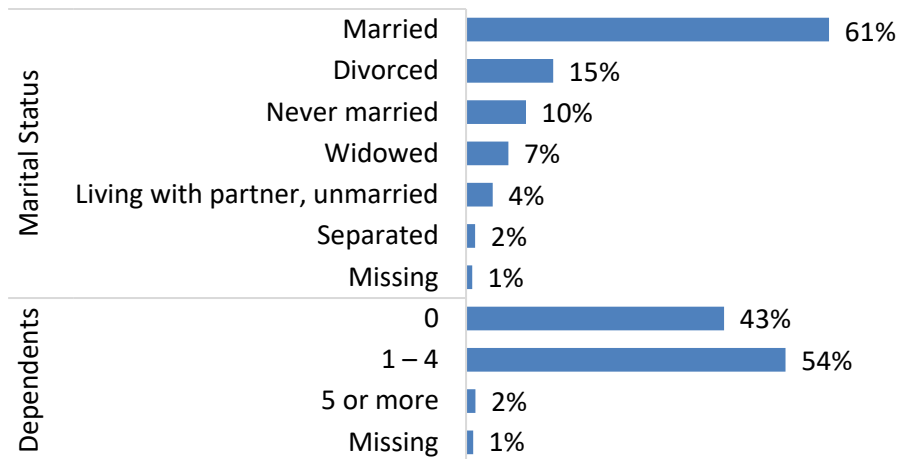
Figure 2-5. Percentage of enrollees by sex, priority group and age group



2.1.4 Marital Status and Dependents

In 2022, married enrollees continued to represent a majority of the enrollee population. About three in five enrollees (61.1%) reported being married, followed by 14.7 percent who reported being divorced, 10.1 percent who reported they were never married, and 7.1 percent who reported being widowed. See Figure 2-6.

Figure 2-6. Percentage of enrollees by marital status and dependents



The survey asked enrollees to report the number of dependents they currently support, defined as anyone who relied on the enrollee for at least half of that person's

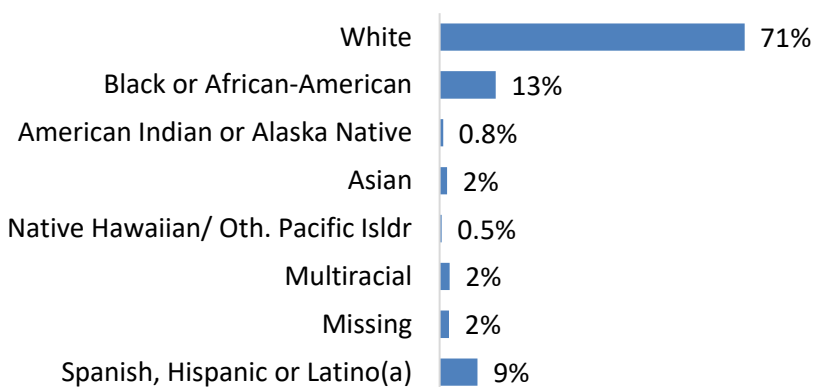
financial support. Over half (53.8%) of the enrollees reported having at least one dependent. Of those with dependents, 33.8 percent have one or more dependents under 18 years of age. See Appendix Table A2-4 for numbers and percentages of enrollees by marital status and by number of dependents.

2.1.5 Ethnicity and Race

The most commonly reported ethnicity and race were non-Hispanic and White, respectively. Two survey questions were designed to ascertain the ethnicity and race of the enrollee. The first question asked whether enrollees identified themselves as being of Hispanic or Latino origin. A total of 8.8 percent responded “Yes” to this question. The next question asked enrollees to identify their race by selecting all of the racial categories provided that applied. Among these responses, 1.5 percent of enrollees self-identified with two or more races (i.e., multi-racial). Overall, 79.5 percent self-identified one or more of their races as White, regardless of Hispanic origin, and 13.9 percent self-identified one or more of their races as Black or African American, regardless of Hispanic origin. See Appendix Table A2-5 for response frequencies for each race and Hispanic origin.

Looking at racial and ethnic identity as a single measure, 70.7 percent self-identified as White and non-Hispanic. Another 13.0 percent self-identified as Black or African American and non-Hispanic. Figure 2-7 show the mutually exclusive percentage of enrollees by race.

Figure 2-7. Percentage of enrollees by race and ethnicity (mutually exclusive)



Note: Missing values represent those enrollees who did not answer whether they were of Hispanic origin or answered that they were not Hispanic but did not answer the race question. Respondents who selected more than one race were categorized as multiracial. Hispanic includes anyone who self-identified as Hispanic, regardless of race.

Race and Ethnicity by Age. As indicated in Table 2-1, the racial and ethnic mix of enrollees varied by age. Enrollees age 65 or older were predominantly White non-Hispanic (81.1%), with only 8.8 percent being Black non-Hispanic and 5.5 percent being Hispanic. In comparison, younger enrollees were more racially and ethnically diverse. For example, the proportion of White non-Hispanic enrollees drops to 61.9 percent among those age 45-64 and 60.2 percent among those younger than age 45. At the same time, the proportions of Black non-Hispanic enrollees and Hispanic enrollees increased to 20.8 percent and 9.3 percent, respectively, in the 45-64 age group, and increased to 11.7 percent and 15.4 percent, respectively, among those younger than age 45. The proportion of Hispanic-identifying enrollees in the youngest group (15.4%) was more than twice as high as in the oldest group (5.5%).

Table 2-1. Ethnicity and race of enrollees, by age group (mutually exclusive)

Category	Age					
	<45		45-64		65+	
	N	%	N	%	N	%
Total	1,876,477	22.4	2,499,629	29.8	3,999,909	47.8
Age						
White, non-Hispanic	1,128,805	60.2	1,547,009	61.9	3,243,515	81.1
Black or African American, non-Hispanic	219,404	11.7	518,549	20.8	352,806	8.8
American Indian or Alaska Native, non-Hispanic	NA	NA	22,996	0.9	24,281	0.6
Asian, non-Hispanic	66,999	3.6	40,100	1.6	33,800	0.9
Native Hawaiian or Other Pacific Islander, non-Hispanic	NA	NA	16,228	0.7	8,882	0.2
Multiracial non-Hispanic	87,642	4.7	63,936	2.6	44,906	1.1
Spanish, Hispanic or Latino(a)	289,351	15.4	231,482	9.3	219,546	5.5
Missing	52,392	2.8	59,330	2.4	72,174	1.8

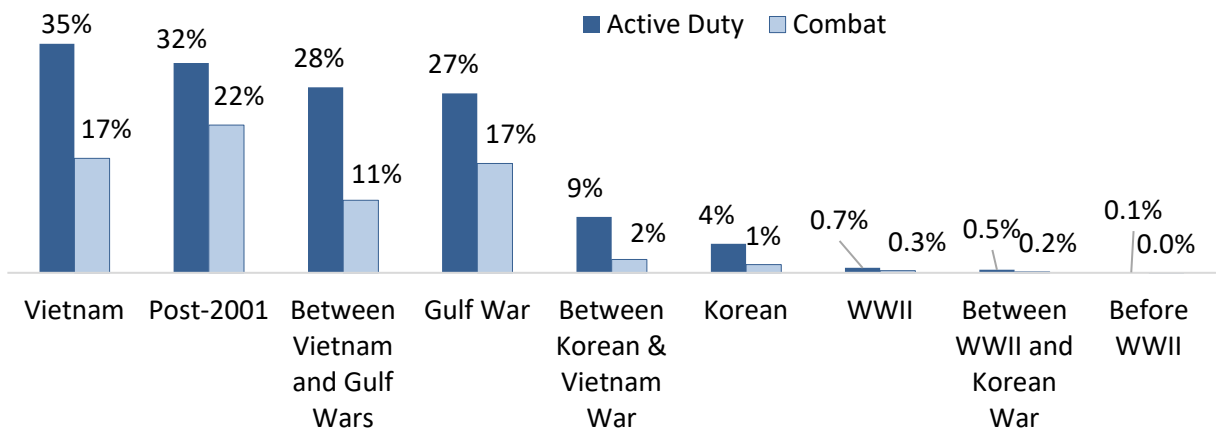
Note: "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate. Hispanic includes anyone who self-identified as Hispanic, regardless of race. Missing values represent those enrollees who did not answer whether they were of Hispanic origin or answered that they were not Hispanic but did not answer the race question.

2.1.6 Active-Duty Period of Service/Combat Experience

The survey asked enrollees to provide information on the period(s) of their active-duty military service. Respondents could select multiple periods, if applicable. The largest proportion of the enrollee population served during the Vietnam War (34.8%), followed by the post-2001 period (31.9%), and the period between the Vietnam and Gulf Wars (28.2%). Another 27.3 percent served during the Gulf War. See Figure 2-8 for the percentage of enrollees by period of service and type of service. Most enrollees (68.1%) reported just one period of service, followed by 19.9 percent who reported two periods and 9.2 percent who reported three or more periods.

Figure 2-8 also shows the percentage of enrollees that were in combat during their period of service. Enrollees who served during post-2001 had the highest combat exposure, 22.5 percent, followed by enrollees in Vietnam (17.4%) and the Gulf War (16.7%). Combat exposure rate of the enrollees has remained consistent. In 2018, a total of 47.8 percent of enrollees reported that they had been involved in, or exposed to, combat during their active-duty service. In 2019, 2020, 2021, and 2022, a total of 47.1, 48.3, 48.3, and 47.8 percent reported combat exposure, respectively (not shown).

Figure 2-8. Percentage of enrollees by period of active-duty service and combat service (not mutually exclusive)



Note: Percentages sum to more than 100 percent because enrollees may select multiple periods of service. World War II (WWII) – December 1941 to December 1946. Between WWII and Korean War – January 1947 to June 1950. Korean War – July 1950 to January 1955. Between Korean War and Vietnam War – February 1955 to July 1964. Vietnam War – August 1964 to April 1975. Between Vietnam War and Gulf War – May 1975 to July 1990. Gulf War – August 1990 to August 2001. Post-2001 – September 2001 or later.

OEF/OIF/OND Enrollees. Operation Enduring Freedom (OEF) in Afghanistan took place between October 2001 and December 2014. Operation Iraqi Freedom (OIF) began in March 2003 and ended in August 2010 when Operation New Dawn (OND) began. OND represents a shift from a predominantly U.S. military presence to one that is predominantly civilian and spanned the period from September 2010 through December 2011. Given that enrollment of post-2001 Veterans continues to increase with the withdrawal of U.S. service members and their release from active duty, a distinct subset of that population includes the OEF/OIF/OND Veterans. VA administrative data files reveal these notable statistics about the 2022 OEF/OIF/OND enrollee population:

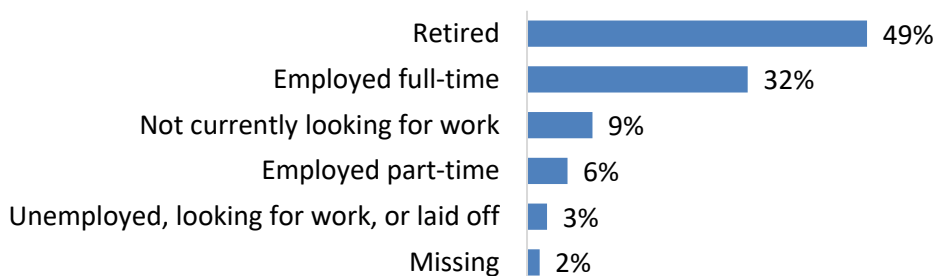
- The 2022 survey indicates that of 2,674,949 enrollees who served post-September 2001, 70.8 percent have OEF/OIF/OND status.
- Fully 22.6 percent of the total enrollee population served in the OEF/OIF/OND conflicts, a slight increase over previous years (21.4% for 2021, 20.5% for 2020, 18.8% for 2019, and 17.8% for 2018).
- More than 1 in 10 (13.9%) of the OEF/OIF/OND enrollee population is female, which is higher than the 9.8 percent of the total enrollee population that is female.
- Enrollees with OEF/OIF/OND status are most likely to be in the youngest age group (younger than 45), making up to 68.5 percent of the enrollees under the age of 45.

- While the majority (62.2%) of the OEF/OIF/OND enrollees are White non-Hispanic, 13.9 percent identified themselves as Hispanic. By comparison, Hispanics account for just 7.4 percent of the non-OEF/OIF/OND enrollee population.
- OEF/OIF/OND enrollees self-reported an unemployment rate of 6.3 percent, which is about 1 percentage point less than the unemployment rate of the total enrollee population (7.2%).

2.2 Employment Status

The U.S. economic and employment climates likely affect the number of enrollees seeking health care benefits from the VA, given that most Americans with health insurance get coverage from their employers.⁹ The survey team calculated employment status from the entire enrollee population. Of all enrollees in 2022, 40.3 percent were in the labor force (employed full-time or part-time or unemployed looking for work), 58.0 percent were not in the labor force (retired or not currently looking for work), and nearly half (48.6%) were retired. Employment rates were slightly higher in 2022 as compared to 2021. In 2021, a total of 36.9 percent of enrollees were employed (full-time or part-time), while in 2022 a total of 37.3 percent of enrollees were employed (full-time or part-time). Unemployed enrollees decreased from 3.7 percent in 2021 to 2.9 percent in 2022. Figure 2-9 shows the percentage of enrollees by employment status.

Figure 2-9. Percentage of enrollees by employment status



Employment Status by Age. Employment status varies across age groups. Enrolled Veterans over the age of 65 are generally not in the labor force (85.6%). The youngest age group (<45) is more likely than other age groups to be employed full-time (67.5%) or part-time (7.2%). Table 2-2 shows employment status by age group.

⁹ Frakt, A.B., Hanchate, A., and Pizer, S.D. (2015). The effect of Medicaid's expansions on demand for care from the Veterans Health Administration. *Healthcare*, 3(3), 123-128. As cited in Yee, C., Frakt, A., and Pizer, S. (2016, March). *Economic and policy effects on demand for VA care* (policy brief). Washington, DC: Partnered Evidence-Based Policy Resource Center.

Table 2-2. Employment status of enrollees, by age group

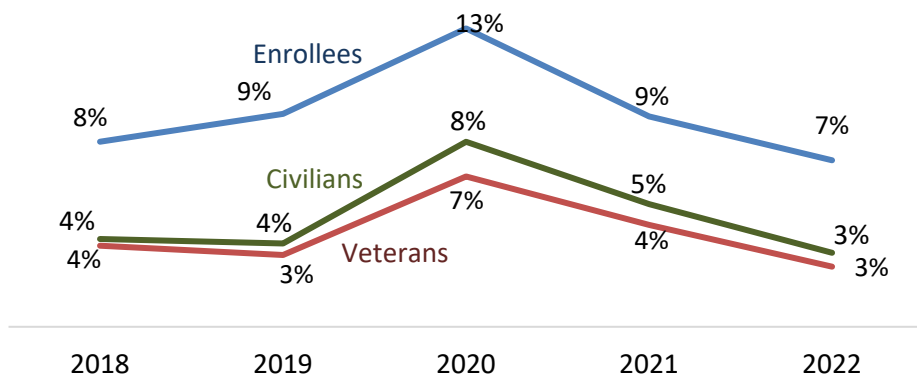
Category	<45		45 - 64		65+		Total
	#	%	#	%	#	%	
Employed full-time	1,266,399	67.5	1,224,632	49.0	151,648	3.8	2,642,679
Employed part-time	134,715	7.2	167,528	6.7	181,904	4.6	484,148
Unemployed, looking for work	115,514	6.2	102,846	4.1	23,094	0.6	241,454
Retired	77,701	4.1	574,043	23.0	3,422,245	85.6	4,073,989
Not currently looking for work	259,476	13.8	377,598	15.1	146,507	3.7	783,580
Missing	22,673	1.2	52,982	2.1	74,511	1.9	150,166
Employment total	1,876,477	100.0	2,499,629	100.0	3,999,909	100.0	8,376,015

Note: Percentages may not sum to 100 percent due to rounding.

Unemployment Rate. The Bureau of Labor Statistics (BLS) of the U.S. Department of Labor calculates the unemployment rate by dividing the number of individuals who do not have a job but are available for work and have actively sought work by the total number of people in the labor force.¹⁰ The labor force comprises those who are either employed or not employed but actively looking for a job.

In the 5 years between 2018 and 2022, the unemployment rate for enrollees was nearly double that of both civilians and Veterans. In 2022, the unemployment rate continued to fall for all three groups, with enrollees experiencing a nearly 2 percent drop, from a 9.1 percent unemployment rate in 2021 to 7.2 percent as of September 2022. Figure 2-10 shows unemployment rates for civilians, all Veterans, and enrollees over the past 5 years.

Figure 2-10. Unemployment rates by population, 2018 to 2022



Note: Data for 2018 through 2021 represent annual estimates. Data for 2022 civilians and Veterans represent unemployment rates as of September 2022. Veterans include enrolled Veterans. Sources: Civilians and Veterans data, 2018-2021: *Employment Situation of Veterans Summary Table A*. Available at: <https://www.bls.gov/news.release/vet.a.htm>. Civilians and Veterans, 2022: Economic News Release, Table A-5, October 2022. Available at: <https://www.bls.gov/news.release/empst.t05.htm>.

¹⁰Available at: <https://www.bls.gov/cps/lfcharacteristics.htm#unemp>.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 2-3. Enrollee unemployment rates, by demographic characteristics

Demographic Group	In Labor Force (#)	Unemployed (#)	Unemployment Rate (%)
Total	3,368,280	241,454	7.2
Sex			
Female	456,221	33,089	7.3
Male	2,912,059	208,364	7.2
Age Group			
<30	188,778	NA	NA
30 – 49	1,615,172	103,412	6.4
50 – 64	1,207,684	86,338	7.1
65+	356,646	23,094	6.5
Priority Group			
Priority Group 1	1,235,213	94,218	7.6
Priority Group 2	352,539	14,522	4.1
Priority Group 3	563,402	19,107	3.4
Priority Group 4	9,336	1,922	20.6
Priority Group 5	375,443	61,789	16.5
Priority Group 6	157,232	5,913	3.8
Priority Group 7	143,077	7,839	5.5
Priority Group 8	532,038	36,145	6.8
Period of Service			
Prior to Vietnam War	38,726	NA	6.8
Vietnam War	273,524	17,109	6.3
Between Vietnam and Gulf War	950,263	67,117	7.1
Gulf War	864,848	36,881	4.3
Post-2001	1,181,320	104,597	8.9
Ethnicity			
Hispanic	397,583	39,668	10.0
Non-Hispanic	2,916,932	192,924	6.6
Urban/Rural			
Urban	2,351,503	1,725,223	7.3
Rural and High Rural	1,016,777	68,931	6.6
Race and Ethnicity (mutually exclusive)			
White non-Hispanic	2,189,013	116,932	5.3
Black non-Hispanic	495,485	51,114	10.3
American Indian/Alaska Native non-Hispanic	25,371	NA	23.6
Asian non-Hispanic	80,795	NA	12.8
Native Hawaiian or Other Pacific Islander non-Hispanic	22,579	NA	14.9
Multiracial non-Hispanic	100,692	NA	10.5
Hispanic	397,583	39,668	10.0

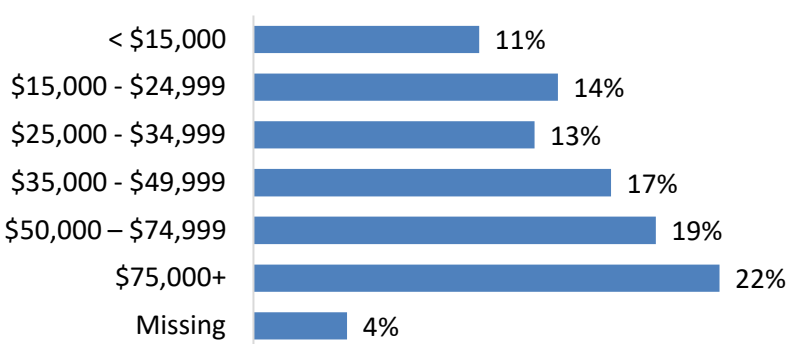
Note: “Prior to Vietnam War” includes all enrollees who served before August 1964. Categories are not mutually exclusive, and enrollees can be counted in more than one category. “NA” denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate. Respondents who selected more than one race were categorized as multiracial. Hispanic includes anyone who self-identified as Hispanic, regardless of race.

Unemployment Rate by Enrollee Demographic Characteristics. The unemployment rate is highest among Priority Group 4 enrollees (20.6%) and American Indian or Alaska Native non-Hispanic enrollees (23.6%). Table 2-3 shows the unemployment rates for enrollees by various demographic characteristics. The unemployment rate for those age 65 and older decreased to 6.5 percent in 2022 compared to 10.9 percent in 2021.

2.3 Income

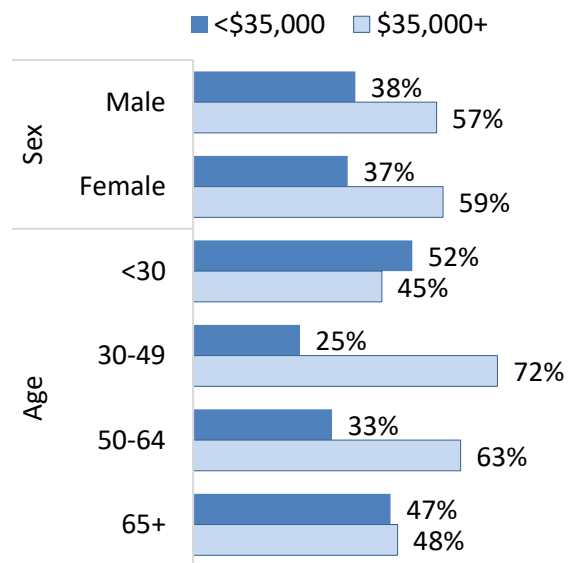
The survey team defined income as an enrollee's total annual household income. To report income, respondents selected from a series of income ranges. Results of the 2022 Survey of Enrollees showed that over half (57.6%) of enrollees reported a household income of \$35,000 or higher (see Figure 2-11). Appendix Table A2-6 shows the number and percentage of enrollees with incomes above and below the \$35,000 threshold.

Figure 2-11. Percentage of enrollees by income group



Nearly three out of four enrollees (71.8%) age 30-49 had a household income of \$35,000 or higher (Figure 2-12 below and Appendix Table A2-6). Among the youngest and oldest age groups (age <30 and age 65+), less than half had a household income greater than \$35,000 (44.5% and 48.2%, respectively; see Appendix Table A2-7). The percentage of males with household incomes of \$35,000 or more was similar to that of females (57.4% vs. 59.0%; see Appendix Table A2-8).

Figure 2-12. Percentage of enrollees by collapsed income group



3. Public and Private Health Insurance

Enrolled Veterans have varied health insurance options, ranging from private insurance to TRICARE, Medicare, or Medicaid. Having insurance coverage has been found to be associated with less reliance on U.S. Department of Veterans Affairs (VA) Health Care.^{11,12} Enrolled Veterans with dual or triple coverage could experience challenges in continuity and coordination of care. It is therefore important to understand the insurance coverage of VA enrollees and how it has changed over time. This chapter discusses insurance options available to VA enrollees and how the options interact with VA Health Care.

TRICARE. TRICARE is the Department of Defense's (DoD's) health care program that serves active-duty military and active members of the reserves and National Guard. Veterans are eligible for TRICARE if they are military retirees who have served for at least 20 years. Family members of active-duty military and service members are enrolled in TRICARE at no cost. Retirees and their dependents must pay an annual premium. In 2001, enrollment was extended to retirees over the age of 65 with the advent of TRICARE for Life, which is wraparound coverage for those in Medicare. TRICARE for Life pays for costs not covered by Medicare.

Medicare. Medicare is a Federal health insurance program for individuals 65 years or older and those under the age of 65 with certain disabilities. There are two ways to enroll in Medicare: Original Medicare and Medicare Advantage. Original Medicare is a fee-for-service program that includes Part A (hospital) and Part B (medical) coverage. Part A covers hospital stays but not doctor's care. Beneficiaries are automatically enrolled in Part A when they enroll in Medicare. Part A beneficiaries do not pay a premium but must meet a deductible before Medicare will cover hospitalization costs. Part B is optional and requires a monthly premium and deductibles. Individuals under the age of 65 who receive disability benefits from Social Security for 2 years are automatically enrolled in Medicare Part A and Part B. Medicare Advantage (Part C) is a managed care option consisting of plans offered by private companies that contract with Medicare to provide Part A and Part B coverage.

Individuals have the option to augment Medicare by purchasing Medicare Supplemental Insurance, or Medigap, which is bought from private insurers to pay health care costs not covered by Medicare, such as co-payments, deductibles, and health care for travel outside the United States. Some individuals prefer to purchase Medicare Advantage, which is

¹¹Borowsky, S.J., and Cowper, D.C. (1999). Dual use of VA and non-VA primary care. *Journal of General Internal Medicine*, 14(5), 274-280. <https://doi.org/10.1046/j.1525-1497.1999.00335.x>.

¹²Shen, Y., Hendricks, A., Wang, F., Gardner, J., and Kazis, L.E. (2008). The impact of private insurance coverage on Veterans' use of VA care: Insurance and selection effects. *Health Services Research*, 43(1 Pt 1), 267-286. [The Impact of Private Insurance Coverage on Veterans' Use of VA Care: Insurance and Selection Effects - Shen - 2008 - Health Services Research - Wiley Online Library](#).

usually provided by Health Management or Preferred Provider Organizations that are approved by Medicare to provide Part A and Part B coverage.

Prescription drug coverage is available separately under Medicare Part D which is a voluntary prescription drug benefit program available to anyone enrolled in both Medicare Part A and Part B. Since 2006, Medicare beneficiaries have been able to receive coverage for their prescription medications through these private plans. Some Medicare Advantage plans may also provide Medicare Part D coverage. Medicare Part D is discussed in greater detail under Prescription Drug Coverage and Use in Chapter 4.

Medicaid. Medicaid is a state-administered health plan for individuals and families with low incomes and limited resources. Veterans who qualify for Medicaid do not pay co-payments for VA Health Care. Prior to the Affordable Care Act (ACA), Medicaid coverage for adults was limited. However, the ACA provides states with additional funding to expand Medicaid to adults with incomes up to 138 percent of the Federal Poverty Level (FPL). This accounts for nearly half of all uninsured Veterans and about one-third of their family members who are eligible for Medicaid coverage under the ACA in states with the expanded coverage.¹³ In most states, individuals with disabilities who receive Supplemental Security Income (SSI) automatically qualify for Medicaid coverage.

Private Insurance. Private insurance is available when provided through a Veteran's employer, spouse, or other non-Federal source, including state marketplaces established under the ACA.

3.1 Insurance Status

The availability of public or private insurance coverage is likely the most important factor related to enrollee use of VA health care services. As in previous years, the survey asked enrollees whether they are covered by various public and private insurance plans. Most enrollees (81.2%) reported that they had some type of public or private insurance coverage.

Just less than half of enrollees (48.6%) reported Medicare coverage, compared to 6.4 percent who reported Medicaid coverage and 28.2 percent who reported private insurance coverage. TRICARE coverage was reported by 22.9 percent of enrollees, down less than 1 point compared to 2021. Among those with Medicare, 32.5 percent reported Medicare Part D Coverage, 34.0 percent reported Medicare Advantage coverage, and 21.3 percent reported that they purchased Medigap coverage, up 2.3 percentage points

¹³Haley, J., and Kenney, G.M. (2012, May). *Uninsured Veterans and family members: Who are they and where do they live? (Timely analysis of immediate health policy issues)*. Washington, DC: Robert Wood Johnson Foundation/Urban Institute. Available at: <https://www.urban.org/sites/default/files/publication/25446/412577-Uninsured-Veterans-and-Family-Members-Who-Are-They-and-Where-Do-They-Live-PDF>.

from 2021. Generally, these coverage rates are similar to 2021. Table 3-1 shows the percentage of enrollee coverage by various insurance types.

Table 3-1. Percentage of enrollees reporting each type of insurance coverage

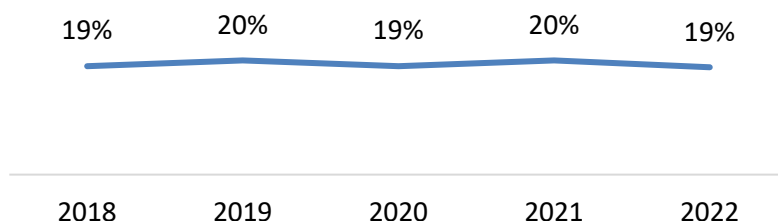
Type of insurance	#	%
Medicare ^a	4,073,479	48.6
Medicare Advantage ^b	1,384,920	34.0
Medigap ^b	869,232.4	21.3
Medicare Part D ^b	1,324,828	32.5
Medicaid ^a	536,020.2	6.4
TRICARE ^a	1,917,666	22.9
Private coverage ^a	2,362,597	28.2
No coverage ^a	1,577,977	18.8

^a Denominator is all enrollees. Weighted N = 8,376,015 enrollees.

^b Denominator is enrollees with Medicare. Weighted N = 4,073,479 enrollees.

In this report, “uninsured” refers to the lack of any alternative insurance coverage, either public or private. Enrollees who did not report that they had Medicare, Medicaid, TRICARE, or private insurance coverage are considered to be uninsured.¹⁴ In 2022, 18.8 percent of enrollees reported no public or private insurance coverage. The proportion of enrollees who do not report insurance coverage has remained fairly stable at about 20 percent since 2018. (Figure 3-1).

Figure 3-1. Percentage of enrollees with no insurance coverage, by year



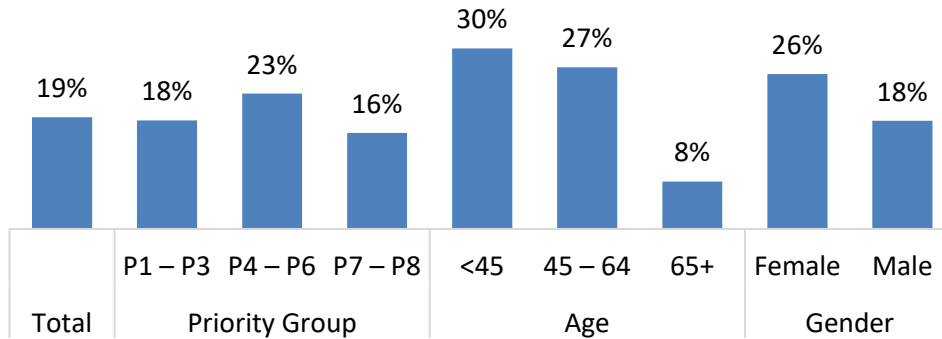
Note: Denominator is all enrollees. Weighted N = 8,376,015 enrollees.

Insurance Coverage by Demographic and Socioeconomic Characteristics. As shown in Figure 3-2 and Appendix Table A3-1, enrollees in Priority Groups 4-6 were more likely to be uninsured than those in Priority Groups 1-3 or Priority Groups 7-8 (22.8% compared to 18.3% and 16.2%, respectively). Uninsured rates were also highest among younger enrollees. Compared with 8.2 percent of enrollees age 65 or older and 27.2 percent of 45- to 64-year-olds,

¹⁴Enrollees who did not answer the questions about insurance were considered to be uninsured as they did not report alternative insurance coverage. This includes enrollees who did not answer any of the questions or who answered “No” to some of the questions and did not answer other questions as insurance could not be determined. This was done to be consistent with the definition of no insurance coverage in previous years’ reports so that trends could be examined. Approximately 0.2 percent of enrollees did not answer the questions on insurance status. Excluding these enrollees would decrease the percentage with no coverage from 18.8 percent to 18.6 percent.

30.4 percent of enrollees younger than age 45 lacked public or private insurance coverage, down nearly 8 percentage points from last year.

Figure 3-2. Percentage of enrollees with no insurance



3.2 Medicare Coverage

The 2022 survey identified 48.6 percent of enrollees as having Medicare coverage (see Table 3-1 above). The survey asked respondents whether they were enrolled in Medicare and, if so, whether they were enrolled in a Medicare Advantage plan. For those not in a Medicare Advantage plan, the survey asked about enrollment in Medigap. Figure 3-3 and Appendix Table A3-2 shows the percentage of enrollees in Medicare by demographic groups. Medicare enrollees were more likely to be those in Priority Groups 4-8. As expected, enrollees age 65 years or older were much more likely to have Medicare than younger enrollees.

Figure 3-3. Percentage of enrollees with Medicare coverage

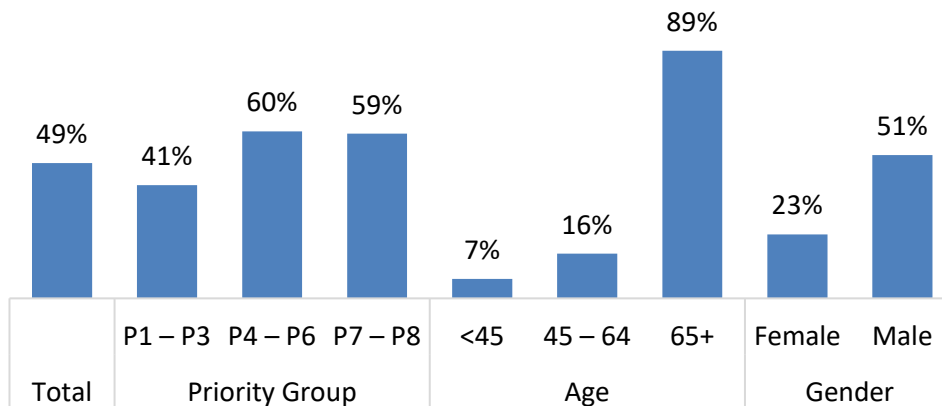
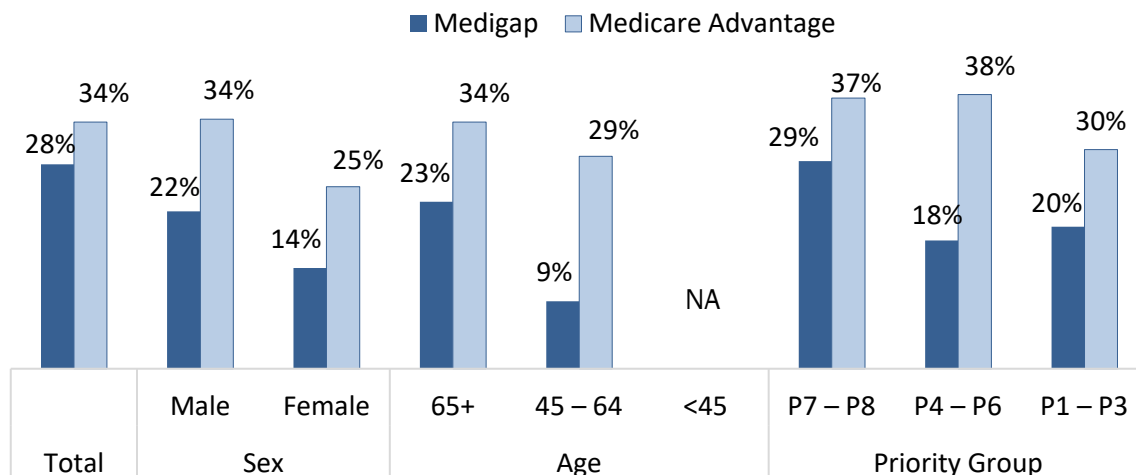


Figure 3-4 and Appendix Table A3-3 shows the specific type of Medicare coverage for those who were covered by Medicare. VA enrollees with Medigap coverage tended to be those in Priority Groups 7-8 (28.6%) and those age 65 or older (23.5%). Enrollees who were age 45

to 64 were less likely to obtain Medicare Advantage coverage than those age 65 or older (29.3% vs. 34.4%).

Figure 3-4. Percentage of enrollees with Medigap and Medicare Advantage coverage



3.2.1 Medicare Part D Coverage

The Medicare Prescription Drug, Improvement, and Modernization Act of 2003, otherwise known as the Medicare Modernization Act (MMA), expanded the Federal Medicare program by creating the prescription medication benefit called Part D. Prior to this law, Medicare did not offer a prescription drug benefit. Medicare Part D is a voluntary program available to anyone enrolled in Medicare Part A and/or Part B. Although most Medicare Advantage plans contain a prescription coverage plan, Part D is available to those whose plans do not cover prescriptions. There are numerous Part D plans available, depending on the recipient's specific needs, income, and region. Since 2006, Medicare beneficiaries have been able to receive coverage for their prescription medications through Medicare Part D. As of November 2022, a total of 49 million Medicare beneficiaries were enrolled in Medicare Part D.¹⁵

The VA prescription drug benefit is considered to be “creditable” coverage, which means that, on average, it provides benefits that meet or exceed those provided by Medicare Part D. Enrollees can have both VA prescription drug benefits and Medicare Part D coverage. However, VA prescription benefits and Medicare Part D do not work together. VA prescription drug benefits cover medications obtained through VA providers, whereas Medicare Part D coverage generally does not cover medications obtained through VA providers. Although the

¹⁵Available at: [https://www.kff.org/medicare/fact-sheet/an-overview-of-the-medicare-part-d-prescription-drug-benefit/#:~:text=Part%20D%20and%20Low%2DIncome%20Subsidy%20Enrollment&text=In%202022%2C%2049%20million%20Medicare,alone%20PDPs%20\(Figure%206\)](https://www.kff.org/medicare/fact-sheet/an-overview-of-the-medicare-part-d-prescription-drug-benefit/#:~:text=Part%20D%20and%20Low%2DIncome%20Subsidy%20Enrollment&text=In%202022%2C%2049%20million%20Medicare,alone%20PDPs%20(Figure%206)) and <https://www.kff.org/medicare/issue-brief/key-facts-about-medicare-part-d-enrollment-premiums-and-cost-sharing-in-2021/>.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

VA pharmacy benefit is deemed equivalent to Medicare Part D, Enrolled Veterans who meet low-income assistance thresholds under Medicare Part D may reduce out-of-pocket expenses more by using Medicare Part D than by using the VA pharmacy, thereby making Medicare Part D more attractive.¹⁶

Some Medicare Part D beneficiaries whose cost-sharing expenses exceed a certain threshold enter the coverage gap, colloquially called the “donut hole.”¹⁷ To get out of the coverage gap, beneficiaries had to pay a greater portion out of pocket until they reached the gap ceiling, after which they are covered under Part D again. The ACA endeavored to phase out the gap in coverage by requiring manufacturers to maintain a discount on the price of covered brand-name drugs in the coverage gap, reducing co-payments for brand-name and generic drugs in the gap, and gradually lowering co-payments to the level that applied before the gap. In 2020, Medicare considered the coverage gap in Part D benefits “closed,” as the coinsurance rates had been lowered to 25 percent for both brand-name and generic drugs, meaning that based on the Centers for Medicare and Medicaid Services (CMS) Standard Model Medicare Part D plan, beneficiaries were paying the same cost-sharing in both the initial coverage phase and in the coverage gap.¹⁸ Though the gap has closed, in 2021, Medicare Part D beneficiaries still pay out-of-pocket costs once they pass the initial benefit period threshold of \$4,130 spent on prescription medications.¹⁹ When total out-of-pocket costs reach \$6,550, the beneficiary will reach the Catastrophic Benefit Period and pay minimal coinsurance or co-payment costs.²⁰

Enrollees who had Medicare coverage, whether through the Original Medicare Plan or through a Medicare Advantage plan, were asked if they had Medicare Part D. Just about one-third (32.5%) of enrollees with Medicare coverage in 2022 reported that they had Medicare Part D coverage (Table 3-2). Figure 3-5 shows that that Priority Groups 1-3 were less likely than enrollees in the other priority groups to have Medicare Part D coverage, and females were less likely than males to have Medicare Part D coverage (also see Table A3-4 in the appendix).

¹⁶Available at: <http://www.ncbi.nlm.nih.gov/pubmed/17909387>.

¹⁷Available at: <https://medicare.com/medicare-part-d/coverage-gap-donut-hole-made-simple/>.

¹⁸Available at: https://q1medicare.com/PartD-MedicarePartD_DonutHole_Discount.php.

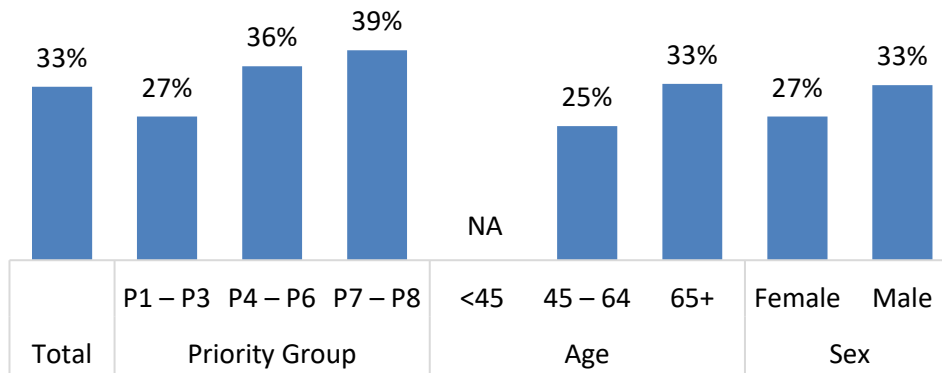
¹⁹Available at: <https://www.ncoa.org/article/donut-hole-part-d>.

²⁰Available at: <https://fe.qa.ncoa.org/article/what-is-medicare-part-d>.

Table 3-2. Among enrollees with Medicare, the percentage with Medicare Part D coverage

Medicare Part D coverage	#	%
Yes	1,324,828	32.5
No	2,399,435	58.9
Missing	349,217	8.6
Total	4,073,480	100.0

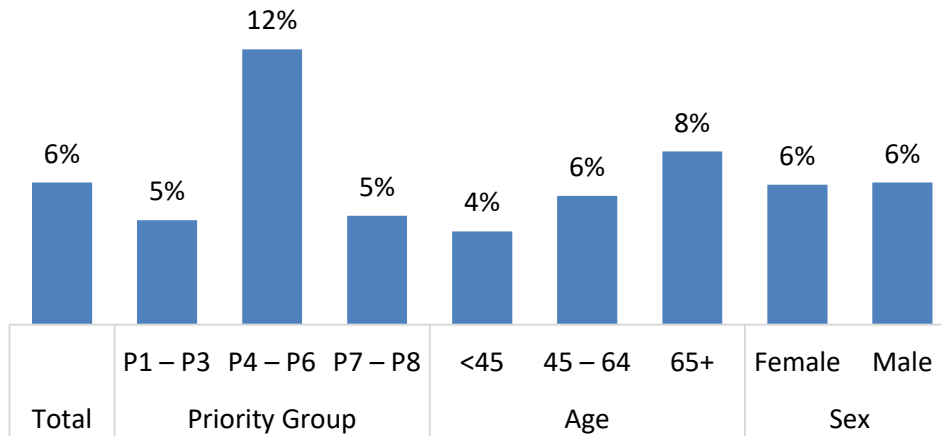
Figure 3-5. Among enrollees with Medicare, the percentage with Medicare Part D coverage



3.3 Medicaid Coverage

The 2022 survey identified 6.4 percent of enrollees as having Medicaid coverage (see Table 3-1 above). Figure 3-6 and Appendix Table A3-5 show a strong relationship between the percentage of enrollees with Medicaid coverage and priority group. Enrollees in Priority Groups 4-6 were more than twice as likely to report Medicaid enrollment compared to those in other priority groups. One possible explanation for the high Medicaid enrollment among Priority Groups 4-6 is that Priority Group 5 includes enrollees with nonservice-connected disabilities who are eligible for Medicaid. The percentage of enrollees on Medicaid did not differ by sex. Enrollees age 65 or older were more likely than those in younger age groups to report enrollment in Medicaid.

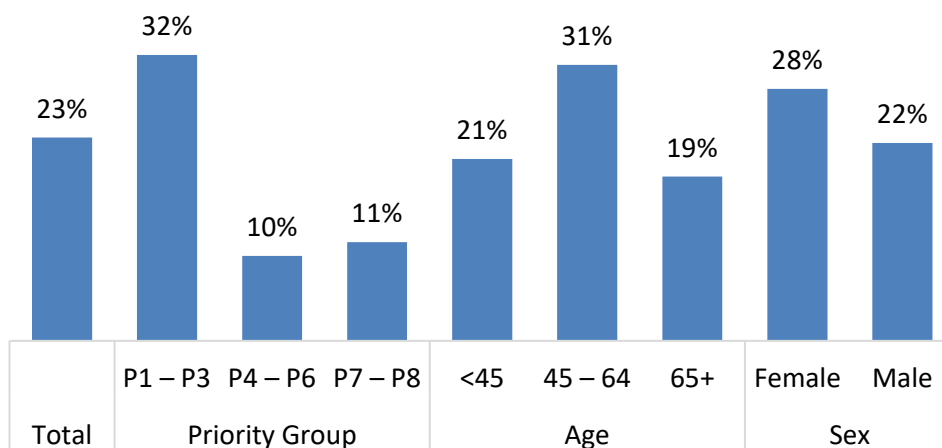
Figure 3-6. Percentage of enrollees with Medicaid coverage



3.4 TRICARE Coverage

The 2022 survey identified 22.9 percent of enrollees as having TRICARE or TRICARE for Life coverage (see Table 3-1 above), a drop of 0.3 percentage points from 2021. Figure 3-7 and Appendix Table A3-6 show that TRICARE coverage was most common among enrollees in Priority Groups 1-3. These enrollees generally have service-connected disabilities and were about three times as likely as other priority groups to have this coverage. Female enrollees were slightly more likely to have TRICARE than males (28.4% vs. 22.3%, respectively). Those between the ages of 45 and 64 were more likely than younger and older enrollees to report having TRICARE coverage.

Figure 3-7. Percentage of enrollees with TRICARE coverage



3.5 Private Individual or Group Health Plans

The 2022 survey identified 28.2 percent of enrollees as having private health insurance coverage (see Table 3-1 above), down 4.4 percentage points from 2021. Enrollees were also asked whether they were covered by individual or group health plans through an employer, spouse or domestic partner's employer, union, or through some other source. Figure 3-8 and Appendix Table A3-7 show that enrollees younger than 45 years of age were more likely than their respective counterparts to have private insurance. Among priority groups, those in Priority Groups 4-6 were the least likely to be covered by private individual or group health plans.

Figure 3-8. Percentage of enrollees with private or group health plans

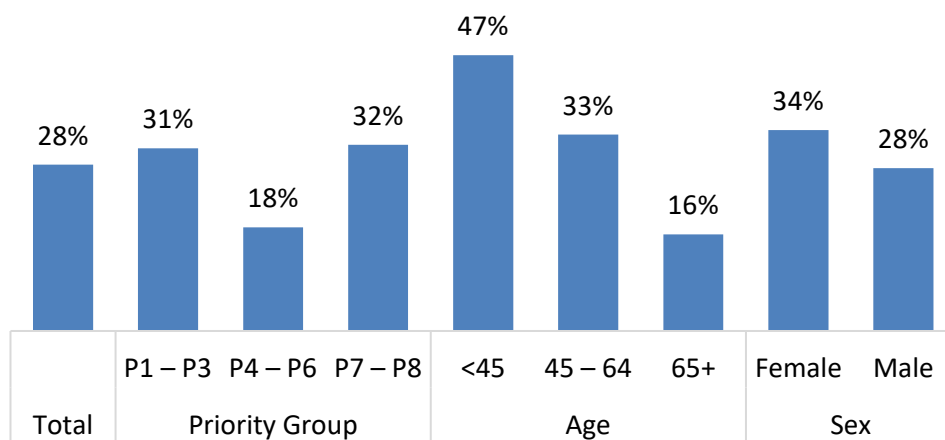
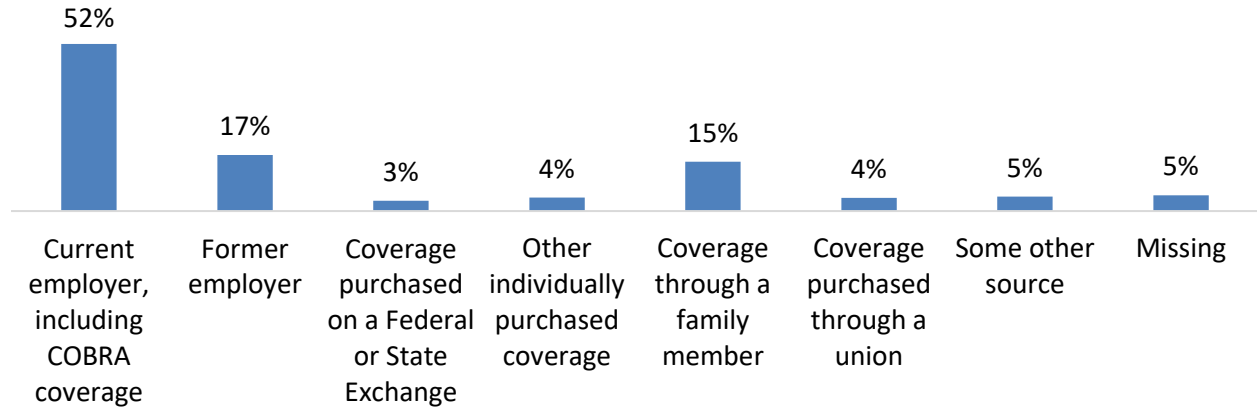


Figure 3-9 and Appendix Table A3-8 show that among enrollees covered by a private or group health plan, just over half (51.6 %) were covered by their current employer (including COBRA coverage). The next two most prevalent provider types include former employers (17.3%) and coverage through a family member (15.2%).

Figure 3-9. Among enrollees covered by any other individual or group health plan, the provider of the coverage



4. Health Status

Self-reported health status is an important determinant of enrollees' use of U.S. Department of Veterans Affairs (VA) health care services. The Centers for Disease Control and Prevention (CDC) has noted that well-being is associated with numerous health-, job-, family-, and economic-related benefits. Further, higher levels of well-being have been associated with decreased risk of disease.²¹ Previous research indicates that enrolled Veterans who use the VA for all of their health care are more likely to be in poor health than enrolled Veterans who use the VA for only some or none of their health care.^{22,23} Health issues for Veterans newly separated from the military are viewed as a bigger problem than finding work or social relationships.²⁴ The research also suggests that Veterans who use the VA have a substantially elevated health burden compared to other Veterans.^{25,26}

The 2022 Survey of Enrollees gathered information about enrollees' perceived health status. The survey team assessed health status with a question that asked enrollees to rate their health relative to other people their own age. This is a standard measure in socioeconomic and health interview surveys used to predict potential health care needs.

4.1 Perceived Health Status

Enrollees rated their perceived health status as “excellent,” “very good,” “good,” “fair,” or “poor.” Figure 4-1 displays responses to the perceived health status question by each of the response choices. Overall, 73.3 percent of enrollees reported their health status as excellent, very good, or good. Around one-fourth (25.9%) reported being in fair or poor health.

²¹Available at: <https://www.cdc.gov/hrqol/wellbeing.htm#nine>.

²²Nelson, K.M., Starkebaum, G.A., and Reiber, G.E. (2007). Veterans using and uninsured Veterans not using Veterans Affairs (VA) health care. *Public Health Reports*, 122(1), 93-100.

²³Landes, S.D., London, A.S., and Wilmoth, J.M. (2018). Mortality among Veterans and non-Veterans: Does type of health care coverage matter? *Population Research and Policy Review*, 37(4), 517-537.

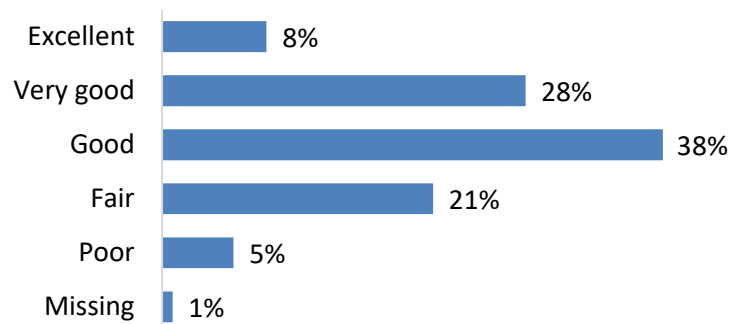
²⁴Vogt, D.S., Tyrell, F.A., Bramande, E.A., Nillni, Y.I., Taverna, E.C., Finley, E.P., Perkins, D.F., and Copeland, L.A. (2020). U.S. military Veterans' health and well-being in the first year after service. *American Journal of Preventive Medicine*, 58(3), 352-360.

²⁵Meffert, B.N., Morabito, D.M., Sawicki, D.A., Hausman, C., Southwick, S.M., Pietrzak, R.H., and Heinz, A.J. (2019). U.S. Veterans who do and do not utilize VA health care services: Demographic, military, medical, and psychosocial characteristics. *The Primary Care Companion for CNS Disorders*, 21(1).

²⁶Howren, M.B., Cai, X., Rosenthal, G., and Vander Weg, M.W. (2012). Associations of health-related quality of life with healthcare utilization status in Veterans. *Applied Research in Quality of Life*, 7(1), 83-92.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Figure 4-1. Perceived health status of enrollees



Note: Denominator is all enrollees.

Table 4-1 shows enrollee health status by demographic characteristics. While the majority of enrollees reported being in “good” health, those in Priority Groups 1-3 were less likely than those in other priority groups to perceive themselves in “excellent,” “very good,” or “good” health (70.9% compared to 73.0% for Priority Groups 4-6 and 80.4% for Priority Groups 7-8). Enrollees younger than 45 were more likely to report being in good health than those age 45-64 and those age 65 and older. Females were more likely to report being in good health compared to males (76.0% compared to 73.0%).

Table 4-1. Perceived health status of enrollees, by priority group, age, and sex

	Excellent/Very Good/Good		Fair/Poor		Missing		Total
	#	%	#	%	#	%	
Priority Group							
P1 – P3	3,414,442	70.9	1,362,567	28.3	39,039	0.8	4,816,048
P4 – P6	1,334,659	73.0	479,386	26.2	14,359	0.8	1,828,404
P7 – P8	1,392,814	80.4	325,946	18.8	12,803	0.7	1,731,562
Age Group							
<45	1,415,616	75.4	446,851	23.8	14,010	0.7	1,876,477
45 – 65	1,810,458	72.4	675,884	27.0	13,288	0.5	2,499,629
65+	2,915,842	72.9	1,045,164	26.1	38,903	1.0	3,999,909
Sex							
Female	624,713	76.0	194,419	23.7	2,367	0.3	821,499
Male	5,517,203	73.0	1,973,480	26.1	63,834	0.8	7,554,517
All Enrollees	6,141,916	73.3	2,167,899	25.9	66,201	0.8	8,376,015

Note: Denominator is all enrollees. Percentages may not add to 100 percent due to rounding.

5. Smoking and Tobacco Use

The Survey of Enrollees serves as an important source of data on the prevalence of smoking among the enrollee population. Smoking is a significant health problem for Veterans and remains an important measure in assessing the health of U.S. Department of Veterans Affairs (VA) enrollees. The Centers for Disease Control and Prevention (CDC) states that smokers are more likely than nonsmokers to develop heart disease, stroke, and lung cancer, and estimates that cigarette smoking causes nearly one in five deaths each year in the United States. The CDC also states that smoking continues to be the leading cause of preventable death and disease in the United States.²⁷ Although most young smokers start smoking prior to age 18, many in the military begin during their period of service.²⁸

VA recognizes the importance of providing support to enrollees who desire to quit smoking and offers a wide range of evidence-based tobacco use treatments to support Veterans in quitting. VA offers Veterans the opportunity to participate in individual or group counseling sessions where health care providers can help develop personalized strategies to quit tobacco and assist with making behavioral changes necessary to quit smoking or tobacco use and stay tobacco-free. VA health care providers can also prescribe all of the Food and Drug Administration (FDA)-approved medications available to help manage withdrawal symptoms or cope with the urge to smoke, including nicotine replacement therapy (NRT) treatments such as nicotine patches, gums, and lozenges, as well as other non-nicotine-based medications like bupropion and varenicline.²⁹

VA has also developed clinical resources that Veterans can access in addition to the care provided at VA medical centers. Quit VET (1-855-QUIT-VET) is the VA's national tobacco cessation quitline, offering counseling services and support from trained Quit VET counselors over the phone to Veterans who may be unable to attend in-person counseling sessions available at VA medical centers.³⁰ SmokefreeVET is a text messaging program designed to text daily tips, encouragement, and support messages to Veterans looking to quit tobacco. Veterans can expect three to five messages per day in addition to real-time automated text support if they require an immediate tip or assistance.³¹ The Stay Quit Coach is a mobile application developed to help Veterans quit smoking and stay tobacco-free. The application is designed to assist Veterans in creating a personalized plan that incorporates their personal reasons for quitting. The application also provides additional

²⁷Available at: http://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/.

²⁸Available at: <https://www.ncbi.nlm.nih.gov/books/NBK215338/>.

²⁹Available at: <https://www.mentalhealth.va.gov/quit-tobacco/how-to-quit.asp>.

³⁰Available at: <https://www.mentalhealth.va.gov/quit-tobacco/quit-vet.asp>.

³¹Available at: <https://www.mentalhealth.va.gov/quit-tobacco/smokefreevet.asp>.

information about smoking and quitting, interactive tools to help Veterans cope with urges to smoke, and additional support to help them stay tobacco-free.³² Given the supports that VA provides, the 2022 survey included a series of questions asking enrollees about their awareness and willingness to use tobacco cessation counseling and medications offered at VA medical centers.

5.1 Cigarette Smoking Status Overview

As in past enrollee surveys, the survey team modeled 2022 survey questions about cigarette smoking after the Behavioral Risk Factor Surveillance System (BRFSS), a national health survey conducted by the CDC. The survey asked enrollees whether they smoked at least 100 cigarettes in their lifetime. Enrollees who indicated that they had not smoked 100 cigarettes in their lifetime were not asked any further questions about smoking. Enrollees who indicated that they had smoked at least 100 cigarettes were asked six additional questions about their smoking history. Specifically, the survey asked whether they currently smoked every day, some days, or not at all. Those who indicated that they smoked at least some days were considered to be current smokers. The survey asked current smokers about any quit attempts in the past 12 months³³ and the types of VA tobacco cessation resources they were aware of and willing to use. Those who were not current smokers were asked about the length of time since they last smoked regularly. All enrollees, regardless of their cigarette smoking status, were also asked whether they currently used chewing tobacco, snuff, or snus, and whether they currently used e-cigarettes or other electronic nicotine delivery systems such as vaping products.

Based on their responses to the series of questions, enrollees were classified into six groups: (1) never smokers, (2) ever smokers, (3) current smokers, (4) recent unsuccessful quitters, (5) former smokers, and (6) recent successful quitters. The survey team defined the six groups as:

Have you smoked at least 100 cigarettes in your entire life?

1. Enrollees who answered “No” were **“never smokers.”**
2. Enrollees who answered “Yes” were **“ever smokers.”**

³²Available at: <https://mobile.va.gov/app/stay-quit-coach>.

³³In the 2010-2015 survey cycles, all “ever smokers” were asked the question about recently quitting (“During the past 12 months, have you stopped smoking for more than 1 day because you were trying to quit smoking?”). In 2016-2021, only “current smokers” were asked this question, which translates to the percentage of “current smokers” who made a recent quit attempt or are “unsuccessful quitters.”

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Of “ever smokers”: *Do you now smoke cigarettes every day, some days, or not at all?*

3. Enrollees who answered “every day” or “some days” were “**current smokers.**”

4. Enrollees who answered “not at all” were “**former smokers.**”

Of “current smokers”: *During the past 12 months, have you stopped smoking for more than 1 day because you were trying to quit smoking?*

5. Enrollees who answered “Yes” were “**recent unsuccessful quitters.**”

Of “former smokers”: *How long has it been since you last smoked cigarettes regularly?*

6. Enrollees who answered “Less than a year ago” were “**recent successful quitters.**”

In 2022, a total of 55.7 percent of enrollees were classified as ever smokers. Using all enrollees as the denominator, current smokers made up 12.7 percent of the total enrollee population, which is similar to the 2021 estimate (12.9%). Matching last year’s estimate, 41.9 percent of enrollees were considered former smokers. In the past year, 1.7 percent of the enrollee population successfully quit smoking. Figure 5-1 (next page) depicts the smoker status classification of enrollees in the six groups, along with percentages of each group.

Current smokers include both enrollees who reported smoking every day and those who reported smoking some days. The 2022 survey identified 3.9 percent as some-days smokers in the enrollee population and 8.8 percent as every-day smokers. Compared to 2021, there was a 0.3 percentage point decrease in the every-day smoker rate for 2022.

Table 5-1 shows smoking status over the past five survey cycles. The table shows the decline in current smokers among enrollees, from 14.6 percent in 2018 to 12.7 percent in 2022. This follows a similar decreasing trend among current smokers in the general U.S. adult population, which dropped from 20.9 percent in 2005 to 12.5 percent in 2020.³⁴ In 2020, 12.5 percent (about 13 out of every 100) of adults 18 years or older currently smoked,³⁵ which means an estimated 30.8 million adults in the United States currently smoke cigarettes.³⁶

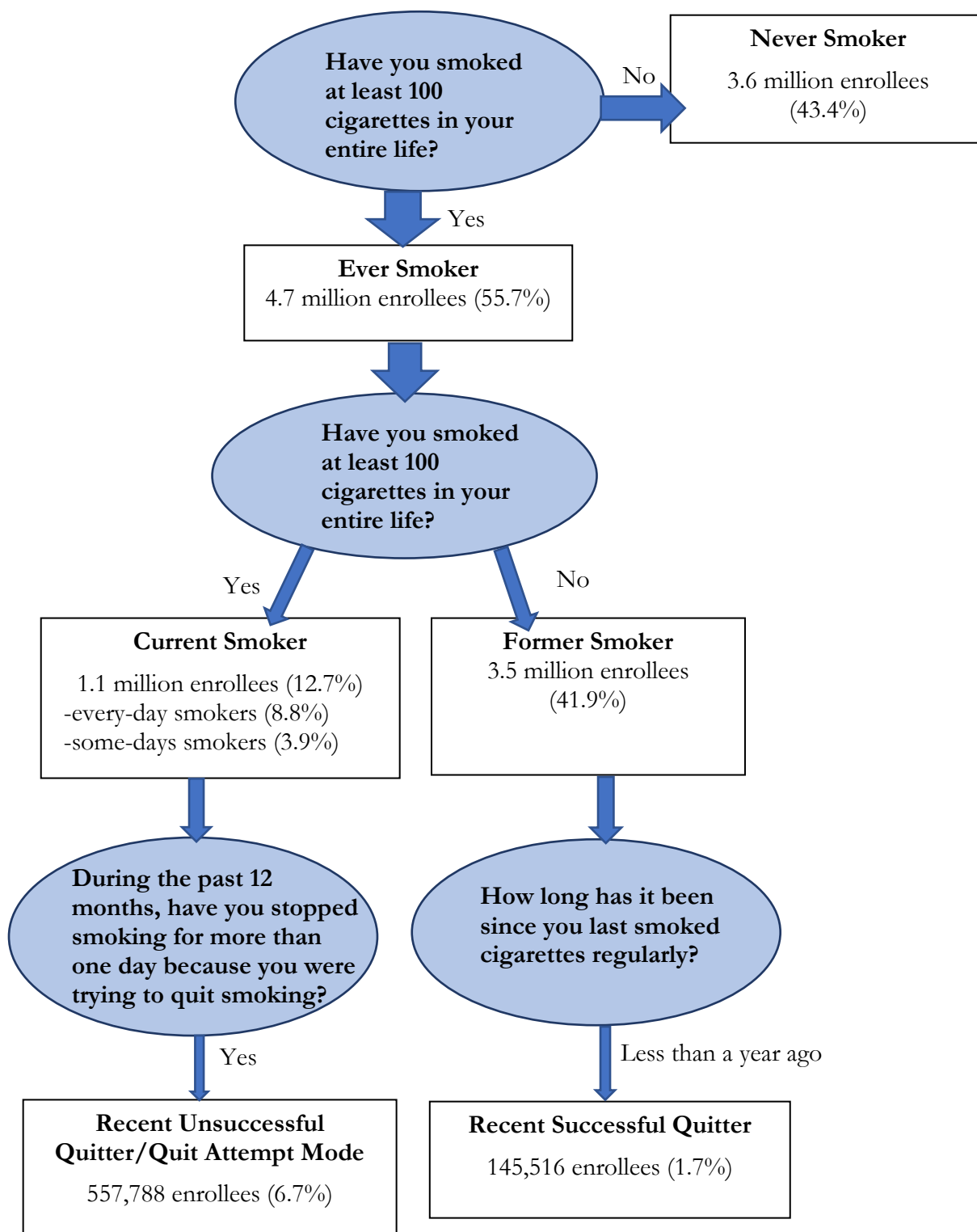
With the 2022 estimate of ever smokers as a percentage of the enrollee population slightly higher than the 2021 estimate, the 2022 survey results suggest a possible flattening in the downward trend since 2018. Similarly, the 2022 estimate of the percentage of enrollees who never smoked is down slightly—0.5 percentage points—from the 2021 estimate. Though the change is small, the 2022 estimate of recent successful cessation efforts among enrollees (1.7%) continued its downward trend since 2018.

³⁴Available at: https://www.cdc.gov/tobacco/data_statistics/fact_sheets/adult_data/cig_smoking/index.htm.

³⁵Current smokers are defined as people who reported smoking at least 100 cigarettes during their lifetime and who, at the time they participated in a survey about this topic, reported smoking every day or some days.

³⁶Available at: https://www.cdc.gov/tobacco/data_statistics/fact_sheets/adult_data/cig_smoking/index.htm.

Figure 5-1. Smoker status classification



Note: Denominator is all enrollees. Percentages do not add to 100 percent due to missing values.

Table 5-1. Enrollee smoking status, by year

Smoking status	2018	2019	2020	2021	2022
Never smokers	3,324,089	3,514,568	3,711,467	3,812,622	3,634,702
% Enrollee population	38.6%	40.4%	42.5%	43.9%	43.4%
Ever smokers	5,188,004	5,080,934	4,941,589	4,816,256	4,662,363
% Enrollee population	60.2%	58.4%	56.6%	55.5%	55.7%
Current smokers*	1,255,216	1,273,362	1,161,301	1,116,112	1,067,431
% Ever smoker population	24.2%	25.1%	23.5%	23.2%	22.9%
% Enrollee population	14.6%	14.6%	13.3%	12.9%	12.7%
Recent unsuccessful quitters	668,228	670,692	629,755	550,451	557,788
% Current smoker population	53.2%	52.7%	54.2%	49.3%	52.3%
% Enrollee population	7.8%	7.7%	7.2%	6.3%	6.7%
Former smokers	3,797,716	3,731,620	3,711,495	3,637,363	3,512,796
% Ever smoker population	73.2%	73.4%	75.1%	75.5%	75.3%
% Enrollee population	44.1%	42.9%	42.5%	41.9%	41.9%
Recent successful quitters	181,435	166,239	164,221	154,980	145,516
% Former smokers	4.8%	4.5%	4.4%	4.3%	4.1%
% Enrollee population	2.1%	1.9%	1.9%	1.8%	1.7%
Enrollee population	8,614,563	8,704,243	8,725,547	8,680,525	8,376,015

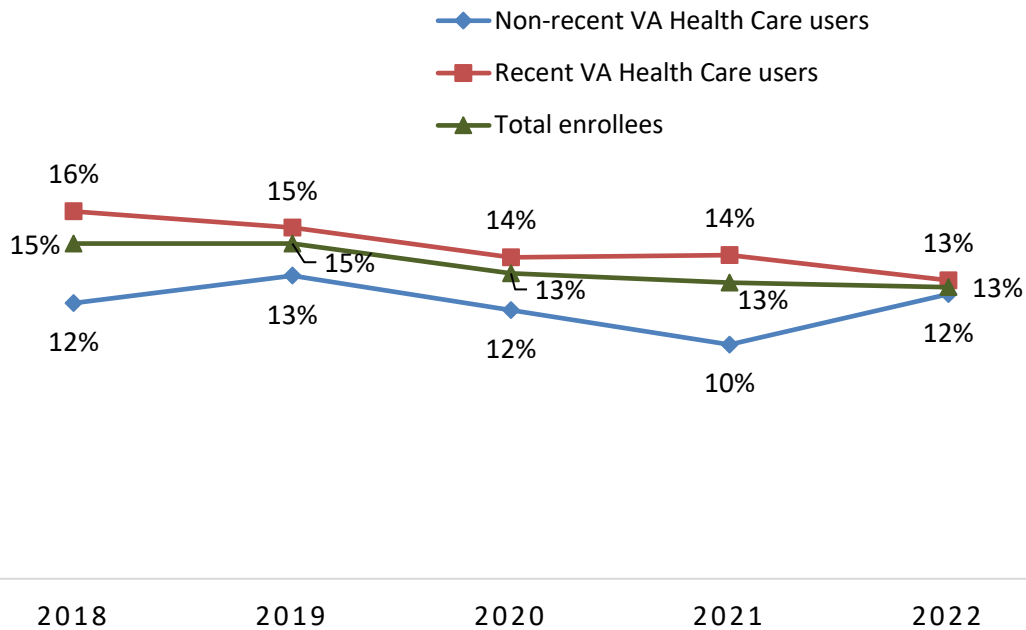
*“Current smokers” include enrollees who also reported that they are currently smoking every day or some days.

Note: Those missing information on smoking status are included in the enrollee population for percentage calculations.

5.2 Cigarette Smoking by Age, Priority Group, and Sex

Based on 2022 survey responses, 61.8 percent of enrollees used VA Health Care on or after January 2021. The chart in Figure 5-2 shows the trend over time in the percentage of current enrollee smokers by whether or not they recently utilized VA Health Care. As illustrated, the current smoking rate among recent users of VA services has been consistently higher than that among the non-recent users and among the total enrollee population. The current smoking rate among recent users has declined steadily from 16.0 percent in 2018 to 13.0 percent in 2022. The current smoking rate among non-recent users ticked up 2.2 percentage points from last’s year’s estimate to 12.4 percent, almost closing the gap between it and the estimate for the total enrollee population (12.7%).

Figure 5-2. Percentage of current smokers by recent* utilization of U.S. Department of Veterans Affairs (VA) services from 2018 to 2022



*Based on FY21EOFY Patient Indicator.

There were notable differences in smoking rates across different priority groups, age groups, and sex (Table 5-2). Similar to findings from the 2021 Survey of Enrollees, among the priority groups analyzed, Priority Groups 1-3 had the highest percentage of enrollees who had never smoked, 45.9 percent. Priority Groups 4-6 had the highest percentage of current smokers (17.1%) compared to 12.3 percent in Priority Groups 1-3 and 9.3 percent in Priority Groups 7-8. Priority Groups 7-8, those who are least affected by service-related conditions, had the highest percentage of former smokers (46.2% of all enrollees in this group).

Analyses by age group indicates that over half of the younger two groups have never smoked: 52.3 percent of enrollees under the age of 45 years and 51.0 percent of enrollees between the ages of 45 and 64. The younger two groups each had 15.9 percent of their respective members currently smoking. Among the youngest enrollees—those under 45 years—there was an increase in the rate of recent unsuccessful attempts to quit, from 7.7 percent in 2021 to 9.5 percent in 2022.

Analyses of smoking questions by sex is new to the report this year. A higher percentage of female enrollees (59.5%) indicated that they have never smoked than male enrollees (41.7%). However, both groups had similar rates of current smokers as a percentage of their respective groups: 12.6 percent for females and 12.8 percent for males. Male enrollees had a 1.8 percent recent successful quit rate, while female enrollees had a 1.3 percent recent successful quit rate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

When comparing current smoker status among VA enrollees by specific demographic characteristics, notable differences across groups emerged (Table 5-3). As noted above, male and female enrollees had similar rates of smoking (12.8% and 12.6%, respectively). Across all racial and ethnic groups, American Indian/Alaska Native non-Hispanics, Multi-racial non-Hispanics, and Black non-Hispanics had the higher current smoking rates than White non-Hispanics. In terms of health status, enrollees who reported being in fair or poor health were more likely to be current smokers than those who reported being in good/very good/excellent health. The proportion of current smokers was slightly higher among those who reported recently accessing the VA health system (13.0%) than among those who did not report using the VA health system recently (12.4%). The proportion of current smokers was much higher among uninsured (18.1%) or unemployed (20.5%) enrollees than those who had health insurance (11.5%) and those who were employed either full-time or part-time (12.0%). With the exception of a 4.1 percentage point increase in smoking rates for non-Hispanic American Indian/Alaska Native enrollees, the 2022 rates are similar to those in 2021.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 5-2. Enrollee smoking status, by priority group, age, and sex

	Priority Group			Age Group			Sex	
	1-3	4-6	7-8	<45	45-64	65+	Male	Female
Never smokers	2,211,831	688,004	734,867	981,600	1,292,934	1,360,168	3,146,085	488,617
% Enrollee population	45.9%	37.6%	42.4%	52.3%	51.7%	34.0%	41.7%	59.5%
Ever smokers	2,559,307	1,123,879	979,178	879,425	879,425	2,593,435	4,336,292	326,071
% Enrollee population	53.1%	61.5%	56.6%	46.9%	46.9%	64.8%	57.4%	39.7%
Current smokers	594,329	311,897	161,204	299,375	393,978	380,376	963,563	103,868
% Ever smoker population	23.2%	27.8%	16.5%	34.0%	33.1%	14.7%	22.2%	31.9%
% Enrollee population	12.3%	17.1%	9.3%	16.0%	15.8%	9.5%	12.8%	12.6%
Recent unsuccessful quitters	324,502	160,612	72,674	177,618	203,559	177,600	503,969	53,819
% Current smoker population	54.6%	51.5%	45.1%	59.3%	51.7%	46.7%	52.3%	51.8%
% Enrollee population	6.7%	8.8%	4.2%	9.5%	8.1%	4.4%	6.7%	6.6%
Former smokers	1,926,412	786,957	799,428	576,446	781,448	2,154,902	3,294,524	218,273
% Ever smoker population	75.3%	70.0%	81.6%	65.6%	65.7%	83.1%	76.0%	66.9%
% Enrollee population	40.0%	43.0%	46.2%	30.7%	31.3%	53.9%	43.6%	26.6%
Recent successful quitters	99,683	25,977	19,856	66,224	44,959	34,333	134,799	10,717
% Former smokers	5.2%	3.3%	2.5%	11.5%	5.8%	1.6%	4.1%	4.9%
% Enrollee population	2.1%	1.4%	1.2%	3.5%	1.8%	0.9%	1.8%	1.3%
Enrollee population	4,816,049	1,828,404	1,731,562	1,876,477	2,499,629	3,999,909	7,554,517	821,499

Note: Missing values for smoking variables are included in denominators for percentage calculations involving all enrollees. There are no missing values for age and priority group.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 5-3. Current smoker status, by special populations

	Current smoker		Total enrollees
	#	%	#
Sex			
Male	963,563	12.8%	7,554,517
Female	103,868	12.6%	821,499
Race and ethnicity (mutually exclusive)			
White non-Hispanic	720,828	12.2%	5,919,328
Black non-Hispanic	169,095	15.5%	1,090,758
American Indian/Alaska Native non-Hispanic	14,016	22.1%	63,401
Asian non-Hispanic	15,375	10.9%	140,899
Native Hawaiian non-Hispanic	NR	NR	NR
Multiracial non-Hispanic	38,062	19.4%	196,484
Hispanic	80,162	10.8%	740,379
Missing	25,460	13.8%	183,896
Insurance status			
Insured	782,351	11.5%	6,798,038
Not insured	285,080	18.1%	1,577,977
Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn (OEF/OIF/OND) status			
Yes	256,909	13.6%	1,894,353
No	810,522	12.5%	6,481,663
Health status*			
Good/Very good/Excellent	680,533	11.1%	6,141,916
Fair/Poor	384,808	17.8%	2,167,899
Employment status			
Employed, full-time or part-time	375,800	12.0%	3,126,826
Unemployed	49,552	20.5%	241,454
Recent patient status (used U.S. Department of Veterans Affairs [VA] within the past year)			
Recent VA patient	671,569	13.0%	5,179,021
Not a recent VA patient	378,821	12.4%	3,053,236

Note: Denominator is all enrollees in the group, including those missing information on smoking. "NR" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate. Respondents who selected more than one race were categorized as multiracial. Missing values for race and ethnicity represent those enrollees who did not answer whether they were of Hispanic origin or did not answer the race question.

*Health status was based on self-reported survey data.

Figure 5-3 shows the percentage of total enrollees who are current smokers by Veterans Integrated Services Network (VISN). The percentages of current smokers range from 9.6 percent (VISN 22) to 18.9 percent (VISN 16) of the enrollee population. In half (9) of the 18 VISNs, the rate of current smokers among enrollees is lower than the overall national average of adult current smokers (12.7%).

Figure 5-3. Percentage of enrollees who are current smokers, by Veterans Integrated Services Network (VISN) map

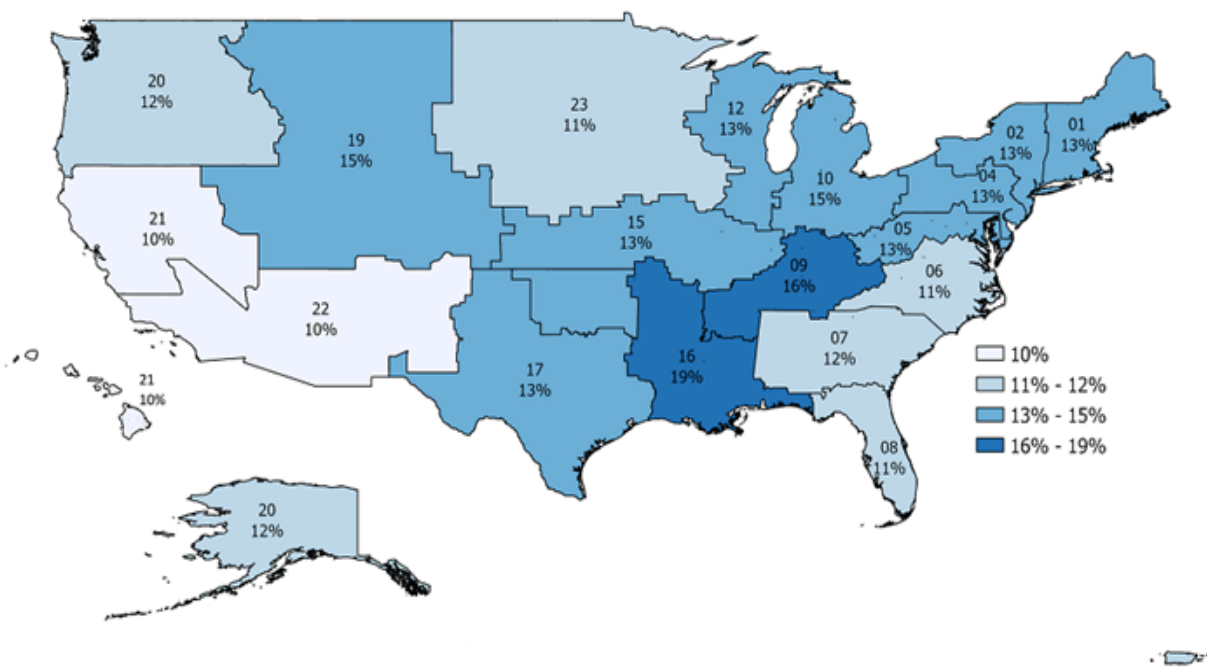


Table 5-4 compares the 2021 and 2022 smoking rates by VISN. The current smoking rate decreased between 2021 and 2022 in half (9) of the 18 VISNs. The biggest drops occurred in VISN 9, VISN 6, and VISN 23. VISN 16 saw the largest increase in its current smoking rate, a 5.1 percentage point increase between 2021 and 2022.

Table 5-4. Change in current smoking rates from 2021 to 2022, by Veterans Integrated Services Network (VISN)

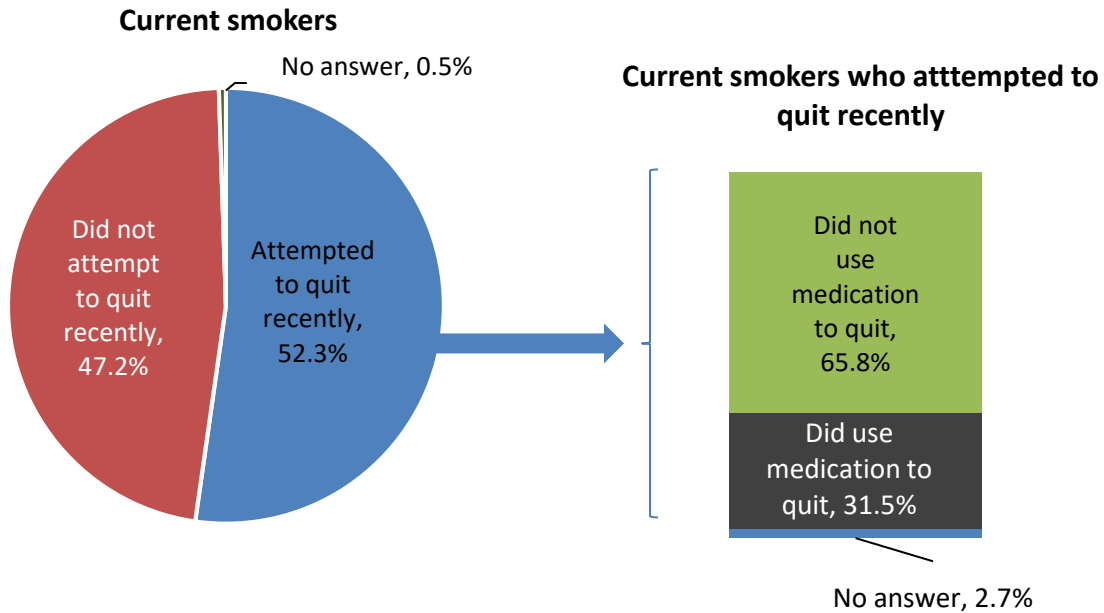
VISN	Percentage of enrollees who are current smokers		
	2021 (%)	2022 (%)	Change (in percentage points) from 2021 to 2022
1	12.0%	12.7%	0.7
2	12.4%	12.6%	0.2
4	12.2%	13.4%	1.2
5	10.9%	13.3%	2.4
6	13.5%	11.2%	-2.3
7	13.5%	11.8%	-1.7
8	11.2%	10.6%	-0.6
9	18.4%	15.9%	-2.5
10	16.2%	14.8%	-1.4
12	13.2%	13.1%	-0.1
15	15.4%	13.3%	-2.1
16	13.8%	18.9%	5.1
17	12.6%	12.6%	0
19	11.8%	15.1%	3.3
20	11.1%	11.6%	0.5
21	9.8%	10.1%	0.3
22	11.0%	9.6%	-1.4
23	13.4%	11.2%	-2.2

5.3 Tobacco Cessation

Table 5-1 indicates that 41.9 percent of enrollees are former smokers. Most former smokers (70.3%) reported successfully quitting smoking 10 or more years ago (not shown). An additional 9.6 percent have not smoked for more than 5 years but less than 10 years (not shown). Another 9.0% have not smoked for at least 1 year but less than 5 years (not shown). An estimated 4.1 percent (Table 5-1 above) of former smokers, or 1.7 percent of the enrollee population (Table 5-1 above), reported having successfully quit smoking in the previous 12 months.

As shown in Figure 5-4, just over half (52.3%) of current enrollee smokers had made a recent quit attempt but were unsuccessful. Of these recent unsuccessful quitters, 31.5 percent used non-nicotine prescription medications or nicotine replacement therapy (e.g., nicotine patch, gum, lozenge, inhaler, or nasal spray) to help with their tobacco cessation attempt.

Figure 5-4. Recent unsuccessful tobacco cessation attempts among current smokers and use of non-nicotine prescription medications or nicotine replacement therapy



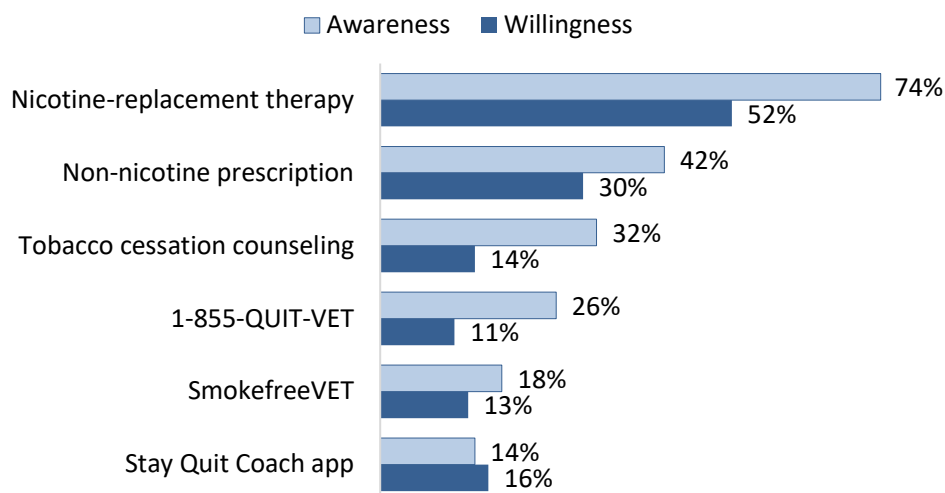
Note: Denominator for the pie chart is the total number of current smokers: weighted N = 1,067,431. Denominator for the bar chart is the total number of current smokers who attempted to quit recently: weighted N = 557,788.

5.3.1 Awareness of Tobacco Cessation Resources

Figure 5-5 shows the awareness among current smokers of and willingness to use the major tobacco cessation resources offered by the VA. Nicotine replacement therapy was the best known among current enrollee smokers, with 73.5 percent reporting awareness, followed by non-nicotine prescription medications (42.4%), tobacco cessation counseling services (32.3%), the 1-855-QUIT-VET quitline (25.6%), the SmokefreeVET text messaging program (17.7%), and the Stay Quit Coach application (14.4%).

Among enrollees who currently smoke, nicotine replacement therapy, non-nicotine prescription medications, and the Stay Quit Coach application were the top three resources that they were most willing to use to help them quit smoking (52.1%, 29.9%, and 15.6%, respectively). Current smokers were least likely to show interest in tobacco cessation counseling (13.8%), SmokefreeVET text messaging (12.6%), and the 1-855-QUIT-VET quitline (10.8%).

Figure 5-5. Among current smokers, percentage of enrollees by their awareness of and willingness to use VA tobacco cessation resources



Note: Denominator is current smokers for both awareness and willingness. Weighted N = 1,067,431.

5.3.2 Use of Tobacco Cessation Resources

Table 5-5 displays the percentage of current smokers who indicated that they used either non-nicotine prescription medications or nicotine replacement therapy when attempting to quit smoking by priority groups, age groups, and sex. Current smokers in the Priority Groups 7-8 indicated the lowest likelihood of having used these products to quit (9.9%) compared with those in Priority Groups 1-3 or 4-6. Similarly, current smokers age 65 and older had a lower likelihood of using these therapies than their younger counterparts: 14.5 percent for those 65 years and older compared with 18.1 percent for those between the ages of 45 and 64, and 16.8 percent for those younger than 45. Female smokers were slightly more likely than male smokers to have used these therapies (17.2% compared to 16.4%, respectively).

Table 5-5. Among current smokers, use of either non-nicotine prescription medications or nicotine replacement therapy during recent quit attempt by priority group, age, and sex

	Use of non-nicotine prescription medications or nicotine replacement therapy		
	#	%	Total
Priority group			
P1 - P3	106,533	17.9%	594,329
P4 - P6	52,981	17.0%	311,897
P7 - P8	16,019	9.9%	161,204
Age group			
<45	50,123	16.8%	299,143
45 - 65	71,049	18.1%	392,086
65+	54,361	14.5%	376,202
Sex			
Male	157,654	16.4%	963,563
Female	17,879	17.2%	103,868

Analysis of enrollees' willingness to use smoking cessation resources offered by VA indicated that nicotine replacement therapy was the most popular treatment option across priority groups, age groups, and sex. With the exception of smokers in Priority Group 7-8 and the oldest age group, more than half of each subgroup was willing to use nicotine replacement therapy. In general, the oldest smokers (age 65 and older) were less willing than their younger counterparts to use any of the supports for quitting. Except for counseling, female smokers were slightly more likely than male smokers to use cessation resources. Table 5-6 presents the percentage of current smokers indicating a willingness to use VA cessation resources by priority group, age group, and sex.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 5-6. Among current smokers, percentage of enrollees willing to use U.S. Department of Veterans Affairs (VA) tobacco cessation resources to quit smoking, by priority group, age, and sex

	Priority group			Age group			Sex		Current ~smokers
	1-3	4-6	7-8	<45	45-64	65+	Male	Female	
Nicotine replacement therapy	55.0%	50.1%	45.7%	56.8%	55.5%	44.3%	51.9%	54.0%	52.1%
Non-nicotine prescription medication	31.6%	29.7%	24.2%	33.8%	33.6%	22.8%	29.4%	34.5%	29.9%
1-855-QUIT-VET	10.4%	11.5%	10.7%	NR	14.1%	8.9%	10.5%	13.3%	10.8%
SmokefreeVet	13.7%	10.9%	11.9%	14.3%	15.2%	8.5%	12.0%	18.3%	12.6%
Stay Quit Coach app	17.5%	11.4%	16.8%	21.0%	17.6%	9.1%	15.0%	21.5%	15.6%
Counseling services	14.2%	14.1%	12.0%	13.0%	16.2%	12.0%	16.3%	13.6%	13.8%
All enrollees	594,329	311,897	161,204	299,375	393,978	380,376	963,563	103,868	1,067,431

5.4 Use of Smokeless Tobacco and e-Cigarettes

While smoking rates have been on the decline among the general adult population, the overall usage rates of smokeless tobacco products (e.g., chewing tobacco, snuff, snus) and e-cigarettes have declined at much lower rates.³⁷ E-cigarettes is a general term referring to e-cigs, vapes, e-hookahs, vape pens, and electronic nicotine delivery systems (ENDS). Among younger demographic groups, such as middle and high school students, usage of e-cigarettes has even increased significantly in recent years thanks to efforts by manufacturers to advertise vaping as an alternative to cigarette smoking.^{38,39} Little is known about the use of e-cigarettes among Veterans, but recent studies have suggested that use of e-cigarettes or vaping products has already passed cigarette smoking in popularity among active military members.⁴⁰

Even though smokeless tobacco and e-cigarettes are often perceived as safer and healthier alternatives to smoking, both still contain significant quantities of nicotine and pose a number of serious health risks to the user. According to the FDA, smokeless tobacco products contain a mix of 4,000 chemicals, including as many as 30 that are linked to cancer.⁴¹ Smokeless tobacco products also are linked to increased risk of developing oral, esophageal, and pancreatic cancers, and can cause stained teeth and damaged gum tissue.⁴² E-cigarettes may also contain aerosols that can introduce cancer-causing chemicals, volatile compounds, and heavy metals into the lungs. Chemicals used to flavor the vapor, such as diacetyl, have also been linked to serious lung diseases. Lastly, many young people use both e-cigarettes and traditional cigarettes, and there is some evidence that using e-cigarettes increases the likelihood of smoking cigarettes in the future.⁴³

To measure the prevalence of smokeless tobacco use and e-cigarette and/or other vaping product use among enrollees, two questions were asked of enrollees: whether they currently use smokeless tobacco products such as chewing tobacco, snuff, or snus, and whether they use e-cigarettes or other vaping products (“Every day,” “Some days,” or “Not at all”).

³⁷Available at: https://progressreport.cancer.gov/prevention/adult_smoking.

³⁸Available at: <https://www.drugabuse.gov/news-events/news-releases/2019/09/teen-e-cigarette-use-doubles-2017>.

³⁹Available at: https://www.cdc.gov/mmwr/volumes/68/wr/mm6806e1.htm?s_cid=osh-vs-mmwr-full-001.

⁴⁰Available at: <https://www.militarytimes.com/pay-benefits/2019/02/03/among-troops-vaping-is-now-more-popular-than-cigarettes/>.

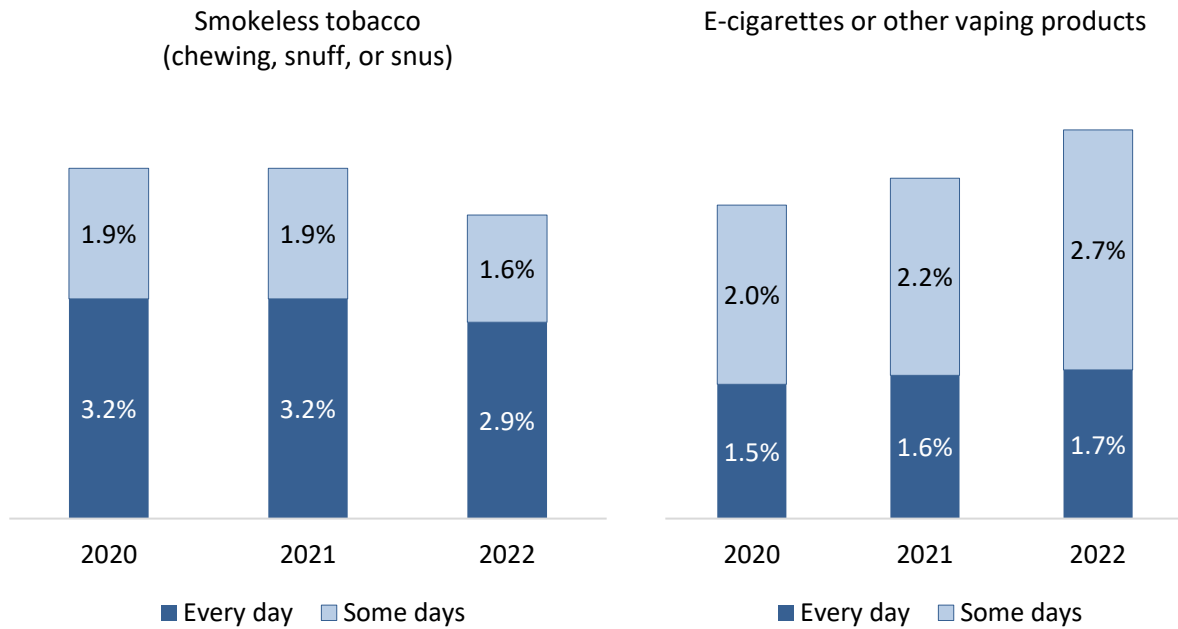
⁴¹Available at [Chemicals in Tobacco Products and Your Health | FDA](#)

⁴²Available at: <https://www.cancer.org/cancer/cancer-causes/tobacco-and-cancer/smokeless-tobacco.html#references>.

⁴³Available at: https://www.cdc.gov/tobacco/basic_information/e-cigarettes/Quick-Facts-on-the-Risks-of-E-cigarettes-for-Kids-Teens-and-Young-Adults.html.

Between 2021 and 2022, there was a small decline in the prevalence of smokeless tobacco use. Over the same period, there was a small increase in the prevalence of e-cigarette or other vaping product use.

Figure 5-6. Among enrollees, prevalence of smokeless tobacco and e-cigarette use



Note: Denominator is all enrollees. Weighted N = 8,376,015.

Table 5-7 shows that the use of other tobacco products varies across enrollee socioeconomic and demographic groups. Enrollees in Priority Groups 1-3 had the highest rate of using smokeless tobacco products (4.8%) and e-cigarettes or vaping products (5.3%) compared to those in Priority Groups 4-6 (3.9% and 3.5%, respectively) and those in Priority Groups 7-8 (3.9% and 2.5%, respectively).

Smokeless tobacco use and e-cigarette use appeared to be strongly correlated with age. Younger enrollees were more likely to engage in both behaviors, with the highest prevalence among enrollees younger than age 45 (7.1% for smokeless tobacco use and 11.6% for e-cigarette use). Further, the use of e-cigarettes and other vaping products among enrollees in the youngest age group (less than 45 years) increased by 1.6 percentage points compared to 2021. Changes between 2021 and 2022 in rates of either smokeless tobacco products or e-cigarettes among enrollees over the age of 45 were minimal. Analysis by enrollee sex indicated that males were more likely than females to use smokeless tobacco products (4.8% compared to 0.6%, respectively) and more likely to use e-cigarette or other vaping products (7.7% compared to 4.0%, respectively).

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 5-7. Among enrollees, use of smokeless tobacco products by priority group, age, and sex

	Use of chewing tobacco, snuff, or snus			Use of e-cigarettes or other vaping products		
	#	%	Total	#	%	Total
Priority group						
P1 – P3	230,512	4.8%	4,816,049	255,032	5.3%	4,816,049
P4 – P6	71,811	3.9%	1,828,404	64,443	3.5%	1,828,404
P7 – P8	68,024	3.9%	1,731,562	43,816	2.5%	1,731,562
Age group						
<45	132,805	7.1%	1,731,562	216,939	11.6%	1,876,477
45 – 65	151,485	6.1%	1,876,477	98,293	3.9%	2,628,146
65+	86,056	2.2%	2,628,146	48,059	1.2%	3,871,392
Sex						
Male	365,339	4.8%	7,554,517	300,085	7.7%	7,554,517
Female	5,008	0.6%	821,499	63,207	4.0%	821,499
All enrollees	370,347	4.4%	8,376,015	363,291	4.4%	8,376,015

Note: Total enrollees across priority groups, age groups, or sex may not sum to 8,376,015 due to rounding weighted values.

6. Health Care and Prescription Drug Use

6.1 Current and Planned Future Use of VA

According to the Fiscal Year (FY) 2018-2024 Strategic Plan, U.S. Department of Veterans Affairs (VA) projects that the Veteran population will change dramatically by sex, race/ethnicity, and age in the coming decades.⁴⁴ To understand the needs of a changing enrollee population, it is crucial to examine enrollees' reasons for current and future use of VA care. The 2022 Survey of Enrollees asked enrollees to identify ways they currently use and plan to use VA services to meet their health care needs.

Table 6-1 shows the trends in enrollees' current use over a 5-year period. Responses from the 2022 survey showed that 33.2 percent of enrollees currently use VA services to meet all of their health care needs, and 18.7 percent of enrollees use VA services to meet most of their health needs. For all levels of current use, trends from 2018 to 2022 showed minimal fluctuation. The 2.1 percentage point change in the percentage of all enrollees planning to use VA services to meet all their health care needs between 2021 and 2022 is noteworthy, as all other (non-missing) response options evidenced small declines.

Table 6-1. Percentage of enrollees' current use of U.S. Department of Veterans Affairs (VA) services to meet health care needs, by year

	2018	2019	2020	2021	2022
All of my health care needs	28.7	31.5	31.2	31.1	33.2
Most of my health care needs	18.4	18.3	19.1	19.0	18.7
Some of my health care needs	26.7	25.1	24.6	26.1	25.2
None of my health care needs	22.3	22.0	21.1	20.3	19.7
I have no health care needs	2.7	2.1	2.9	2.6	1.8
Missing	1.3	0.9	1.0	0.9	1.3
All enrollees	8,614,536	8,704,243	8,725,547	8,680,525	8,376,015

Note: Percentages in columns may not sum to 100 due to rounding.

⁴⁴Available at: <https://www.ea.oit.va.gov/EAOIT/docs/VA2018-2024strategicPlan.pdf>.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 6-2 shows the results of current use of VA services when examined by demographic groups. Enrollees in Priority Groups 1-3 and 4-6 were more likely to report that they used VA for all of their health care needs than those in lower priority groups (Priority Groups 7-8). Enrollees who were age 65 or older were the least likely of all the age groups analyzed to report that they used VA services to meet all of their health care needs. Male enrollees were also somewhat less likely to use the VA for all of their health care needs (32.8%) compared to female enrollees (37.5%).

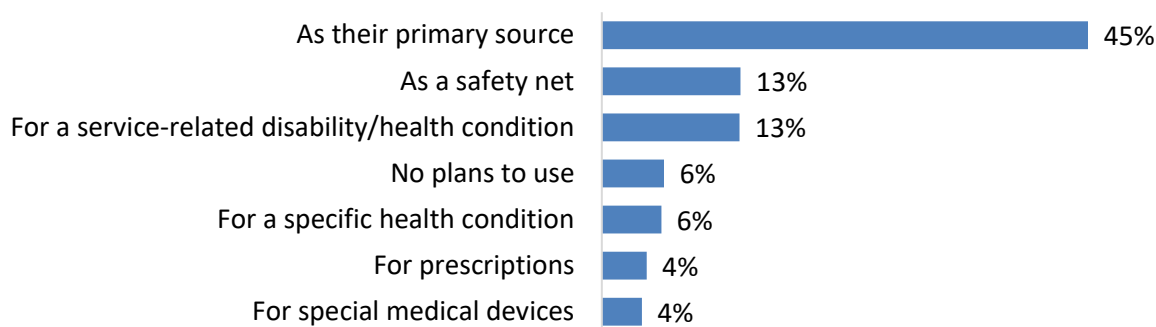
Table 6-2. Percentage of enrollees reporting on current use of U.S. Department of Veterans Affairs (VA) services to meet health care needs, by priority group, age, and sex

	Have no needs (%)	None of needs (%)	Some needs (%)	Most needs (%)	All needs (%)	Total
Priority group						
P1 – P3	0.8	16.4	26.4	21.3	34.1	4,816,049
P4 – P6	3.0	18.8	19.4	15.9	41.3	1,828,404
P7 – P8	3.3	29.8	28.8	14.8	22.3	1,731,562
Age group						
<45	2.1	17.8	21.9	24.8	33.2	1,876,477
45 – 64	1.9	21.4	19.2	17.3	39.1	2,499,629
65+	1.6	19.5	30.6	16.8	29.6	3,999,909
Sex						
Male	1.9	19.9	25.7	18.5	32.8	7,554,517
Female	1.1	17.9	21.2	21.2	37.5	821,499
All enrollees	1.8	19.7	25.2	18.7	33.2	8,376,015

Note: Denominator is all enrollees. Row percentages do not add to 100 percent because some survey respondents did not answer the question.

The 2022 Survey of Enrollees asked enrollees to select one option that best represented how they planned to use VA Health Care in the future. Items included in this question are displayed in Figure 6-1, ordered by the most- to the least-planned use. A total of 45.2 percent of enrollees said that they planned to use VA Health Care as their primary source of health care. This was followed by 12.9 percent who said that they would use it as a safety net and 12.8 percent who said that they would use it for a service-related disability or mental or physical health conditions. Less than 6 percent of enrollees planned to use VA Health Care for specific medical conditions (such as hearing or vision loss, diabetes, or cancer), prescriptions, or special medical devices (such as hearing aids, prosthetics, or orthotics).

Figure 6-1. Percentage of enrollees by planned future use of U.S. Department of Veterans Affairs (VA) Health Care



Note: Denominator is all enrollees, Weighted N = 8,376,015 enrollees. The percentage of enrollees who did not answer the question is not shown.

Table 6-3 shows that planned future use is related to enrollee demographic characteristics. Enrollees in Priority Groups 7-8, those who were age 65 years or older, and male enrollees were less likely to say that they would use VA as their primary source of health care. Enrollees in Priority Groups 4-6 were most likely to use VA Health Care as their primary source of care (51.7%), as compared to the other priority groups analyzed. Enrollees in Priority Groups 7-8 were most likely to report that they planned to use VA Health Care as a safety net (21.1%). Older enrollees (age 65 or older) were more likely than younger enrollees to report that they would use VA Health Care for prescriptions, specific health conditions, and special medical devices.

Table 6-3. Enrollees planned future use of U.S. Department of Veterans Affairs (VA) Health Care, by Priority Group, age, and sex

	Primary source (%)	Safety net (%)	Service-related health condition (%)	Prescriptions (%)	Specific health condition (%)	Specific medical devices (%)	No plans to use (%)	Total
Priority group								
P1 - P3	46.2	9.3	19.6	3.2	4.9	3.2	4.5	4,816,049
P4 - P6	51.7	14.7	3.4	4.2	6.1	3.4	5.9	1,828,404
P7 - P8	35.4	21.1	3.9	6.8	6.6	5.5	9.3	1,731,562
Age group								
<45	51.9	11.2	23.4	NR	NR	NR	3.8	1,876,477
45 - 64	51.9	13.3	15.1	1.9	3.8	1.3	4.8	2,499,629
65+	37.8	13.6	6.4	6.4	8.5	6.8	7.3	3,999,909
Sex								
Male	44.3	13.1	12.5	4.3	5.9	4.0	5.9	7,554,517
Female	53.4	11.8	15.6	2.7	2.3	0.8	5.3	821,499
All enrollees	45.2	12.9	12.8	4.2	5.5	3.7	5.8	8,376,015

Note: Denominator is all enrollees. Percentages of respondents who did not answer the question are not shown; neither are percentages of those who responded that they would use VA health care in “some other way.”

6.2 Prescription Medication Use

The survey asked enrollees the number of prescription medications they had used in the last 30 days and the number they had obtained from VA pharmacies. As shown in Table 6-4, among all enrollees, 46.9 percent reported using five or more prescription medications in the past month, an uptick from last year’s estimate of 43.7 percent. An additional 18.7 percent reported taking three to four prescription medications in the past month, and another 17.5 percent reported taking one to two prescription medications. Slightly less than one in six enrollees (14.3%) reported taking no prescription medications in the past month. The average (mean) number of prescription medications taken by enrollees in the past 30 days was 5.2 prescriptions. The mean includes those who took zero prescription medications.

Table 6-4. Number of prescription medications used in the last 30 days, all enrollees

Number of prescriptions in last 30 days	#	%
0	1,200,740	14.3
1 - 2	1,464,375	17.5
3 - 4	1,566,737	18.7
5 or more	3,925,448	46.9
Missing	218,715	2.6
All enrollees	8,376,015	100.0
Mean = 5.2		

Note: The total and the mean include enrollees who used zero prescriptions in the last 30 days as well as enrollees who had missing data (assumed to be 0).

Enrollees who reported taking at least one prescription medication in the past 30 days were asked about the number of prescription medications they obtained from VA pharmacies. Table 6-5 shows that among these enrollees, 34.0 percent obtained five or more of their prescription medications from VA pharmacies, an uptick from 30.7 percent last year. Another 16.7 percent obtained one to two prescription medications from VA, and 14.4 percent obtained three to four prescription medications from VA. Just over one-third (33.9%) of those enrollees taking prescription medications obtained none of those medications from the VA. For enrollees who reported using one or more prescription drugs in the last 30 days, an average of 3.9 prescriptions were obtained from the VA, up slightly from 2021 when the mean was 3.5. The next section explores the topic of VA prescription medication reliance in greater detail.

Table 6-5. Among enrollees who used prescription medications in the past 30 days, the number of prescription medications from U.S. Department of Veterans Affairs (VA)

Number of prescriptions from VA in last 30 days	#	%
0	2,354,470	33.9
1 - 2	1,163,568	16.7
3 - 4	1,003,817	14.4
5 or more	2,362,793	34.0
Missing	71,913	1.0
Total	6,956,561	100.0
Mean = 3.9		

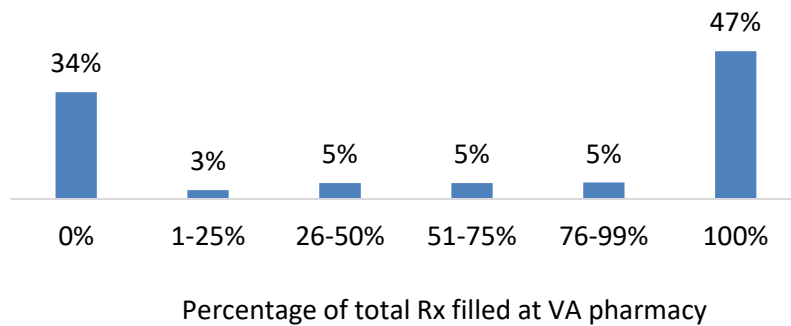
Note: The total and the mean exclude enrollees who used zero prescriptions in the past 30 days as well as enrollees who had missing data. The denominator for the percentages shown includes enrollees who had missing data (assumed to be 0) on the question about the number of prescriptions obtained from VA.

6.3 VA Prescription Medication Use

To better understand the utilization of the VA for prescription medications, a measure of VA prescription drug utilization was calculated as the number of prescription medications obtained from the VA in the past 30 days, divided by the total number of prescriptions obtained in the past 30 days.

Figure 6-2 shows a bimodal distribution of VA prescription medication utilization. Namely, enrollees tended to obtain either all of their prescription medications from the VA or none of their prescription medications from the VA. While 47.4 percent of enrollees reported fully utilizing the VA for their prescription medications in the past 30 days, 34.2 percent of enrollees obtained none of their prescription medications from the VA. Less than one in five enrollees (18.4%) can be described as “dual” users, obtaining some of their prescription medications from VA pharmacies and some from non-VA sources.

Figure 6-2. Percentage of enrollees who use filled prescriptions U.S. Department of Veterans Affairs (VA) pharmacy, 2022



Note: Weighted N = 6,884,647 enrollees who used prescription medication in the past 30 days and had non-missing data on both the number of prescriptions from VA sources and non-VA sources.

7. Enrollees' Views of VA Health Care

Key Points

- Among enrollees who used any U.S. Department of Veterans Affairs (VA) health care services, whether at a VA or non-VA facility, a large majority reported positive experiences and high satisfaction with the services they received.
- Compared to those who received care at a VA facility, enrollees who received health care at a non-VA facility reported slightly more positive experiences on nearly all measures related to scheduling, access to the facility, interactions with their provider, as well as decision making and referrals.
- Veterans age <45 were less likely than other age groups to have positive experiences, both at VA and non-VA facilities. They also experienced bigger differences in favorability between VA and non-VA facilities compared to other age groups.
- Males were more likely than females to have positive experiences with both VA and non-VA facilities. They also experienced a smaller difference in favorability between VA and non-VA facilities compared to females.
- Priority Groups 7-8 were more likely than other priority groups to have positive experiences with both VA and non-VA facilities.

In 2014, Congress enacted the Veterans Access, Choice, and Accountability Act (Choice Act), which provided \$15 billion in new funding for U.S. Department of Veterans Affairs (VA) health care.⁴⁵ In general, this law requires VA to offer enrolled Veterans the option to receive hospital care and medical services from a non-VA provider when a VA facility cannot provide an appointment within 30 days or when enrolled Veterans reside more than 40 miles from the nearest VA facility.⁴⁶

In 2018, Congress passed the Maintaining Internal Systems and Strengthening Integrated Outside Networks Act (MISSION Act) to provide Veterans with better access, faster service, and greater choice in their health care options, whether received from VA medical facilities or from community providers.⁴⁷ The MISSION Act consolidated several previous health care

⁴⁵Available at: http://www.gao.gov/highrisk/managing_risks_improving_va_health_care/why_did_study.

⁴⁶Available at: [Choice Act Summary \(va.gov\)](#).

⁴⁷Office of Public and Intergovernmental Affairs. (2019, June 6). *VA launches new health care options under MISSION Act* (press release). Washington, DC: U.S. Department of Veterans Affairs. Available at: <https://www.va.gov/opa/pressrel/pressrelease.cfm?id=5264>.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

programs into a streamlined Veterans Community Care Program in June 2019. An important feature of this new program is that eligible Veterans have more options to receive health care services from providers in their local communities, which are still paid for by VA, although they usually still have the option of choosing to receive care at a VA medical facility.⁴⁸ Enrolled Veterans must receive approval from the VA before obtaining community care from providers, and they must meet at least one of six eligibility criteria to receive community care.⁴⁹

Given the expanding number of health care options and community providers serving enrolled Veterans since the MISSION Act, it is important to assess enrollees' perceptions of their experiences at both VA and non-VA facilities, their satisfaction with the quality of health care services received, and how measures of experience and satisfaction vary among different groups of enrolled Veterans. This information will help VA plan and coordinate care for enrollees with a wide range of health care needs. As noted in the *New York Times*, a major challenge for the VA has been "to keep up with patient loads as service members returning from Iraq and Afghanistan—many with complex injuries and post-traumatic stress—hit the system at the same time that aging and increasingly ill older Veterans made more use of it."⁵⁰

To help assess enrollees' views of VA Health Care, the 2022 Survey of Enrollees included a series of questions asking enrollees about their general experience and satisfaction with VA health care services used on or after January 1, 2021. Similar to the 2021 survey, the 2022 survey included experience and satisfaction questions with regard to health care paid for by VA, but received from a provider other than VA. The 2022 survey also asked enrollees to identify specific barriers to accessing health care. Additionally, the 2022 survey asked enrollees about their current and planned future use of VA Health Care.

Table 7-1 provides the percentage of enrollees who report using any VA health care services at a community provider by priority group, age, and sex. Those in Priority Groups 1-3 were more likely to use services at a community provider, and Priority Groups 7-8 were least likely. There was little difference in age. Females were more likely than males to use services at a community provider (39.2% compared to 27.9%).

⁴⁸U.S. Department of Veterans Affairs. (n.d.). *Community care: Veterans overview*. Washington, DC: Author. Available at: <https://www.va.gov/COMMUNITYCARE/programs/veterans/index.asp#types>.

⁴⁹Vantage Point Contributor. (2019, April 9). *New eligibility criteria a major improvement over existing rules*. Washington, DC: Vantage Point. Available at: <https://www.blogs.va.gov/VAntage/58621/new-eligibility-criteria-a-major-improvement-over-existing-rules/>.

⁵⁰Steinhauer, J. (2019, January 30). Veterans will have more access to private health care under new V.A. rules. *New York Times*. Available at: <https://www.nytimes.com/2019/01/30/us/politics/veterans-health-care.html>.

Table 7-1. Among enrollees, use of any U.S. Department of Veterans Affairs (VA) health care services at a community provider by priority group, age, and sex

Use of any VA health care services at community providers	Priority group			Age group			Sex	
	1-3	4-6	7-8	<45	45-64	65+	Male	Female
Yes	33.0	28.0	18.9	29.5	30.8	27.7	27.9	39.2
No	64.8	68.7	78.5	69.5	67.4	68.7	69.5	59.3
Missing	2.2	3.3	2.6	1.0	1.8	3.6	2.6	1.5

7.1 Experience Using VA, Community Providers, and Non-VA Facilities

A total of 61.8 percent of enrollees reported using VA health care services at a VA facility on or after January 1, 2021, a 1 percentage point increase from 2021 (60.8%). Research indicates that the number of in-person visits decreased, while telephone and video visits at VA outpatient facilities increased during the initial 10 months of the COVID-19 pandemic.⁵¹ More than one in four enrollees (29.0%) reported using VA-paid health care at a non-VA facility during the same period, which is a 6.1 percentage point increase compared to 2021 (22.9%).

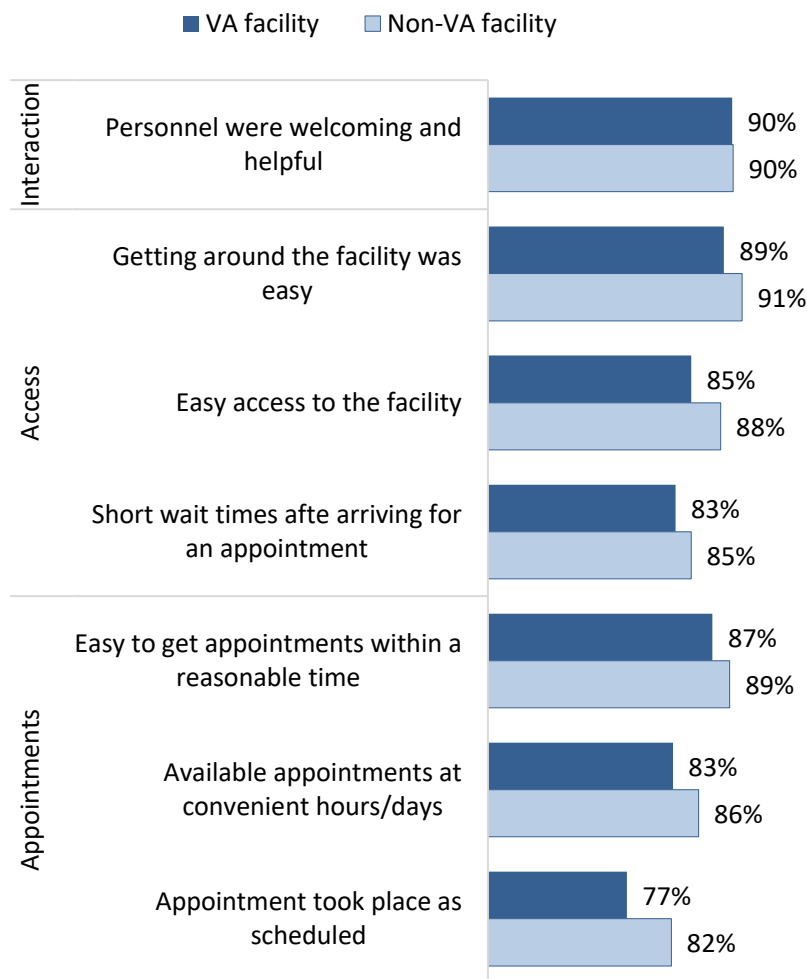
To assess enrollees' experiences at VA and non-VA facilities, the 2022 survey asked seven questions about their perceptions of availability and accessibility of health care at these facilities and enrollees' interactions with the health care providers. The questions ranged from scheduling the appointment to their experience on the actual day of the visit. The questions were worded in such a way that an experience would be considered favorable if an enrollee responded that they had this experience "most of the time" or "always/nearly always." Statements were categorized into three domains: interactions, access, and experience scheduling appointments.

Figure 7-1 shows that among enrollees who used any VA health care services, whether at a VA or non-VA facility, a large majority responded favorably about their experiences with scheduling appointments, access, and interactions with provider personnel. Compared to those who received health care at a VA facility, enrollees who received VA-paid health care at a non-VA facility reported a slightly more positive experience on all measures related to appointments, access, and interaction.

⁵¹Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7429994>.

The biggest differences in enrollees' experiences at VA and non-VA facilities concerned appointments taking place as scheduled, easy access to the facility, and availability of appointments at convenient hours and days. The proportions of enrollees who responded favorably about these aspects of their care were 5.4, 3.6, and 3.1 percentage points higher, respectively, for non-VA facilities than for VA facilities.

Figure 7-1. The percentage of enrollees who responded favorably about their U.S. Department of Veterans Affairs (VA) health care experiences at a VA facility or a VA-paid non-VA facility with appointments, access, and interactions with provider personnel



Note: Favorable responses are a combination of enrollees who answered “Always or nearly always” and “Most of the time.”

Table 7-2 presents important differences among enrollees regarding their experience scheduling appointments at VA and non-VA facilities by socioeconomic and demographic group. As shown, perceptions about scheduling appointments at VA facilities were most positive for older enrollees (age 65 or older) and those in Priority Groups 4-6 and 7-8.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Similarly, older enrollees (age 65 or older) and those in Priority Groups 4-6 and 7-8 were more positive about getting appointments easily within a reasonable time at non-VA facilities. Male enrollees were more positive about getting appointments easily within a reasonable time at VA facilities and non-VA facilities compared to females.

Table 7-2. The percentage of enrollees who responded favorably about their healthcare utilization experience at a U.S. Department of Veterans Affairs (VA) facility or a VA-paid non-VA facility, by facility type, priority group, age, and sex

	Easy to get appointments within a reasonable time (%)		Available appointments at convenient hours/days (%)		Appointments took place as scheduled (%)		Total weighted N	
	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities
Priority group								
P1 - P3	73.1	80.5	79.7	84.3	86.3	89.5	3,190,526	1,591,277
P4 - P6	83.5	84.9	87.8	87.5	88.8	87.9	1,102,528	511,793
P7 - P8	82.6	86.6	86.2	89.2	89.0	91.1	885,967	326,941
Age group								
<45	62.6	75.4	69.2	77.3	81.6	87.9	1,196,828	554,073
45 - 64	76.2	82.9	83.0	86.9	88.4	90.0	1,483,097	768,918
65+	84.2	85.3	88.6	89.0	89.4	89.7	2,499,096	1,107,019
Sex								
Male	77.8	83.1	83.4	86.1	87.9	89.3	4,621,722	2,107,846
Female	69.3	77.0	74.9	82.6	82.4	89.6	557,299	322,165
All enrollees	76.9	82.3	82.5	85.6	87.3	89.4	5,179,021	2,430,011

Note: Favorable responses represent a combination of enrollees who answered "Always or nearly always" and "Most of the time."

Denominator is enrollees who used any VA health care services on or after January 1, 2021, at a VA facility. Weighted N = 5,179,021 enrollees.

Denominator is enrollees who used health care services on or after January 1, 2021, at a non-VA facility. Weighted N = 2,430,011 enrollees.

The greatest disparities in perceptions about scheduling appointments at VA and non-VA facilities can be seen across age groups. The proportion of enrollees younger than age 45 who responded favorably to getting appointments easily within a reasonable time was 12.8 percentage points higher for non-VA facilities than for VA facilities. Similarly, the proportion of enrollees in this age group who responded favorably about appointments being at convenient hours and days was 8.1 percentage points higher for non-VA facilities than for VA facilities.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

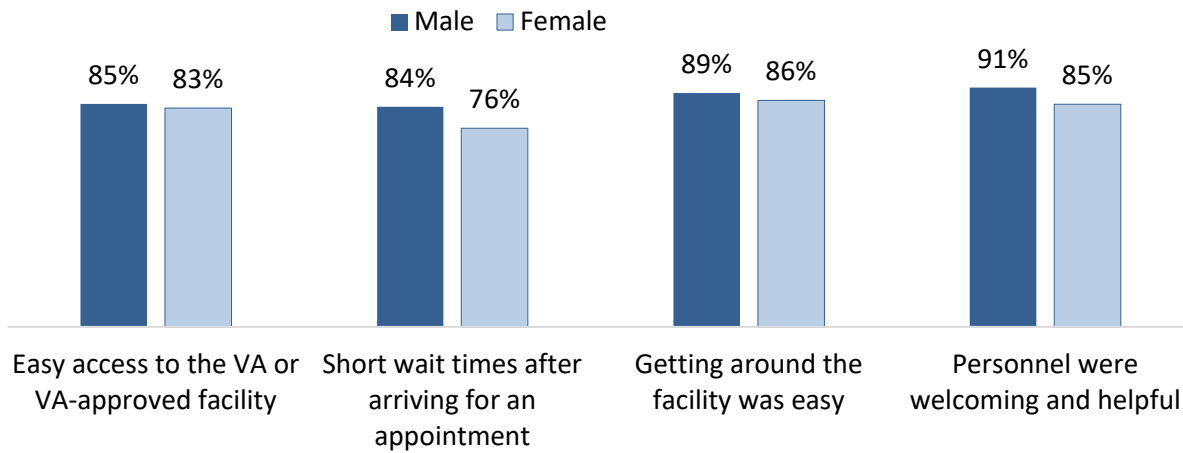
Similar disparities are evident for Priority Groups 1-3, though the differences are not as dramatic. The proportion of enrollees in Priority Groups 1-3 who responded favorably to getting appointments easily within a reasonable time was 7.4 percentage points higher for non-VA facilities than for VA facilities. The proportion who responded favorably that appointments were available at convenient hours and days was 4.6 percentage points higher for non-VA facilities than for VA facilities.

Table 7-3 shows the perceptions of accessibility and interactions with provider personnel among VA health care users at VA and non-VA facilities by demographic groups. Enrollees younger than age 45 responded less favorably about VA facilities regarding experiences with easy access to the VA facility, wait times after arriving for an appointment, getting around the facility, and interactions with provider personnel, compared to those in older age groups. All age groups responded more favorably about non-VA facilities than VA facilities regarding easy access to the VA facility, wait times after arriving for an appointment, getting around the facility, and interactions with provider personnel.

Similar disparities in perceptions about accessibility of facilities and experiences with provider personnel can be seen across priority groups. Enrollees in Priority Groups 1-3 were more likely to report that their experiences were consistently (mostly or always) positive with wait times after arriving for an appointment at non-VA facilities compared to VA facilities.

Females consistently had more favorable responses for non-VA facilities than for VA facilities. This was also the case for males, except for no difference between facilities on interactions with provider personnel. Looking at VA facilities only, males had more favorable responses than females on interactions with VA facility personnel (91.1% compared to 84.7%), on getting around the VA facility (89.0% compared to 86.2%), and on wait times after arriving for an appointment (83.7% compared to 75.6%; see Figure 7-2, next page).

Figure 7-2. The percentage of enrollees who responded favorably about access to a U.S. Department of Veterans Affairs (VA) facility and interaction with VA provider personnel, by sex



Notes: Favorable responses represent a combination of enrollees who answered “Always or nearly always” and “Most of the time.”

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 7-3. The percentage of enrollees who responded favorably about access to the facility and interaction with provider personnel, by type of facility, priority group, age, and sex

	Easy access to the VA or VA-approved facility (%)		Short wait times after arriving for an appointment (%)		Getting around the facility was easy (%)		Personnel were welcoming and helpful (%)		Total weighted N	
	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities
Priority group										
P1 - P3	83.6	88.2	80.2	84.0	87.2	91.0	87.6	89.5	3,190,526	1,591,277
P4 - P6	84.5	87.4	86.5	84.9	90.9	90.1	92.9	89.8	1,102,528	511,793
P7 - P8	88.5	90.0	87.5	88.0	91.4	91.5	93.2	91.1	885,967	326,941
Age group										
<45	80.6	85.9	71.7	79.3	81.6	89.1	83.0	87.1	1,196,828	554,073
45 - 64	85.5	90.4	83.7	85.7	90.8	92.8	89.9	90.6	1,483,097	768,918
65+	86.1	88.0	87.7	86.8	90.9	90.5	92.8	90.5	2,499,096	1,107,019
Sex										
Male	84.8	88.3	83.7	85.4	89.0	91.1	90.3	90.0	4,621,722	2,107,846
Female	83.2	87.9	75.6	80.0	86.2	89.3	84.7	88.0	557,299	322,165
All enrollees	84.7	88.3	82.8	84.7	88.7	90.9	89.7	89.8	5,179,021	2,430,011

Note: Favorable responses represent a combination of enrollees who answered “Always or nearly always” and “Most of the time.”

Non-VA facilities denominator = enrollees who used any VA health care services on or after January 1, 2021, at a VA facility.

VA facilities denominator = enrollees who used health care services on or after January 1, 2021, at a non-VA facility.

7.2 Satisfaction with VA, Community Providers, and Non-VA Health Care

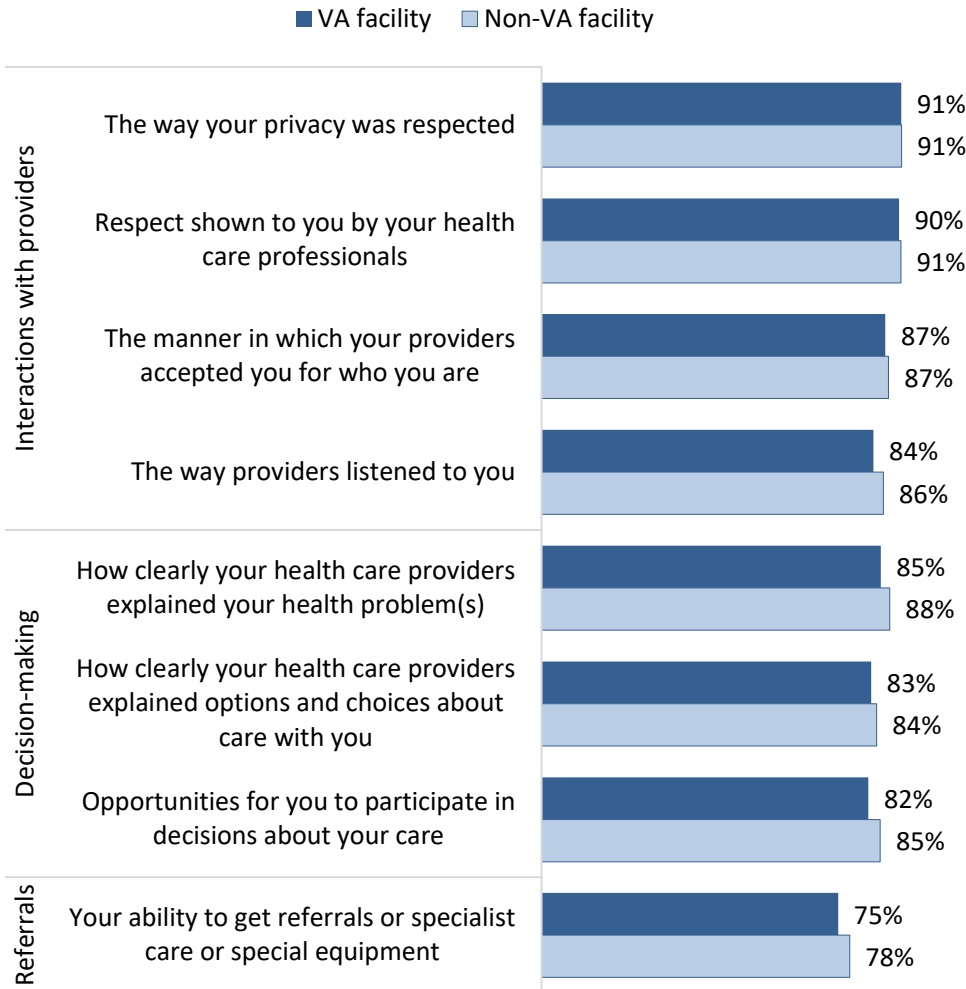
The 2022 Survey of Enrollees also assessed enrollees' general levels of satisfaction with the health care they received at VA and non-VA facilities. As displayed in Figure 7-3, statements were categorized into three domains and ranked from highest to lowest levels of satisfaction within each domain. The first domain included four statements that asked about the interactions between providers and enrollees during their visits, the second included three statements that asked about clarity of explanations and participation in decision making, and the third included one question about the ability to get referrals for specialist care or special equipment. In the subsequent sections, satisfaction refers to response choices of "satisfied" or "very satisfied."

Enrollees' satisfaction was slightly higher for non-VA facilities than VA facilities across all measures in each of the three domains. The differences were relatively small, and it is important to note that enrollees were highly satisfied with the measures in all three domains regardless of whether they were treated at VA or non-VA facilities (shown in Figure 7-3).

Enrollees were most satisfied with the first domain: the way in which the health care providers interacted with them. Across the four measures within this domain, enrollees' satisfaction ratings ranged from 83.6 percent to 90.9 percent for VA facilities and from 86.1 percent to 90.7 percent for non-VA facilities.

The vast majority of enrollees also expressed satisfaction with participation in decision making about their health issues, with satisfaction ratings ranging from 82.3 to 85.4 percent for VA facilities and from 84.4 percent to 87.7 percent for non-VA facilities. Enrollees were least satisfied with their ability to get referrals for specialist care or special equipment. Satisfaction ratings for this aspect of their health care was higher for non-VA facilities (77.6%) than VA facilities (74.7%).

Figure 7-3. The percentage of enrollees who responded favorably about their interactions and decision-making process with providers, and referrals received at a U.S. Department of Veterans Affairs (VA) facility or non-VA facility



Note: Responses represent a combination of enrollees who answered “Satisfied” and “Very satisfied.”

Table 7-4 shows the level of satisfaction (satisfied or very satisfied) regarding provider interactions, examined by demographic groups. The results show that older enrollees (age 65 or older) had higher levels of satisfaction than enrollees under the age of 45 on interactions with provider personnel at VA facilities on all four categories of interaction. Enrollees age 65 and older had slightly higher levels of satisfaction than enrollees under the age of 45 at non-VA facilities with providers accepting them for who they are and the way providers listened to them. Enrollees in Priority Groups 7-8 had higher levels of satisfaction at VA facilities than enrollees in Priority Groups 1-3 in all four categories of interaction. In contrast, there was little difference across priority groups at non-VA facilities.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 7-4. The percentage of enrollees reporting satisfaction with interaction with provider personnel at a U.S. Department of Veterans Affairs (VA) facility or a VA-paid non-VA facility, by facility type, priority group, age, and sex

	Your privacy was respected (%)		Respect shown to you (%)		Accepted you for who you are (%)		The way providers listened to you (%)		Total weighted N	
	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities
Priority group										
P1 - P3	89.2	91.0	88.2	90.6	84.5	87.1	81.3	86.2	3,190,526	1,591,277
P4 - P6	92.7	89.3	92.6	89.5	89.5	87.0	86.5	85.1	1,102,528	511,793
P7 - P8	93.0	91.7	93.4	91.7	90.6	89.4	88.2	87.6	885,967	326,941
Age group										
<45	85.1	89.6	82.4	88.3	78.7	84.6	73.9	84.2	1,196,828	554,073
45 - 64	90.6	92.0	90.5	91.6	86.5	87.6	83.3	86.4	1,483,097	768,918
65+	93.2	90.4	93.4	90.9	90.5	88.6	88.4	86.9	2,499,096	1,107,019
Sex										
Male	91.1	91.0	90.7	90.7	87.4	87.5	84.4	86.4	4,621,722	2,107,846
Female	86.2	89.2	84.5	89.7	80.4	87.0	76.8	84.4	557,299	322,165
All enrollees	90.6	90.7	90.0	90.5	86.6	87.4	83.6	86.1	5,179,021	2,430,011

Note: Responses represent a combination of enrollees who answered "Very satisfied" and "Satisfied."

Non-VA facilities denominator = enrollees who used any VA health care services on or after January 1, 2021, at a VA facility. VA facilities denominator = enrollees who used health care services on or after January 1, 2021, at a non-VA facility.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Male enrollees had higher levels of satisfaction than female enrollees on all four categories of interactions with provider personnel at both VA facilities and non-VA facilities. The differences were larger at VA facilities. For all enrollees, 90 percent were satisfied or very satisfied with how their privacy was respected and the respect shown to them by facility personnel.

Marked differences were also found with levels of satisfaction with decision making and referrals by demographic groups. Table 7-5 shows the responses for statements about understanding health care decisions and referrals at VA and non-VA facilities. Older enrollees (age 45 or older) and those in lower priority groups (Priority Groups 4-6 and 7-8) had higher levels of satisfaction with the decision-making process and referral services than their counterparts when they received health care at a VA facility. Similarly, with regard to services provided at non-VA facilities, older enrollees (age 45 or older) expressed a higher level of satisfaction with the decision-making process and referral services than enrollees who were younger than the age of 45. Little difference was found among priority groups with the decision-making process when they received health care at a non-VA facility, with the exception of referrals for specialist or special equipment (80.7% among Priority Groups 7-8 compared to 76.6% among Priority Groups 1-3).

When examined by priority group, the biggest differences in satisfaction with decision making between VA and non-VA facilities were found among enrollees in Priority Groups 1-3. Satisfaction levels for Priority Groups 1-3 were higher among health care users at non-VA facilities rather than VA facilities when asked how clearly their health care providers explained their health problems, about opportunities for them to participate in decisions about their care, how clearly health care providers explained options and choices about care to them, and referrals for specialists or special equipment (4.4, 3.0, 5.3, and 4.2 percentage point differences, respectively).

The greatest disparities in levels of satisfaction with decision making and referrals at VA and non-VA facilities were found among the youngest group of enrollees (younger than age 45). The proportions who reported positive satisfaction levels were higher among health care users at non-VA facilities rather than VA facilities when asked how clearly their health care providers explained their health problems, about opportunities for them to participate in decisions about their care, how clearly health care providers explained options and choices about care to them, and referrals for specialists or special equipment (9.8, 7.7, 11.8, and 8.3 percentage point differences, respectively).

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 7-5. Percentage of enrollees reporting satisfaction with decision making and referrals received at a U.S. Department of Veterans Affairs (VA) facility or non-VA facility, by facility type, priority group, age, and sex

	Explanation of health problems (%)		Participation in decisions about your care (%)		Explanation of options about care (%)		Referrals for specialist or special equipment (%)		Total weighted N	
	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities	VA Facilities	Non-VA Facilities
Priority group										
P1 - P3	83.6	88.0	81.1	84.1	80.2	85.5	72.4	76.6	3,190,526	1,591,277
P4 - P6	88.1	85.9	85.7	83.5	85.5	84.1	78.9	78.9	1,102,528	511,793
P7 - P8	88.6	88.8	86.3	87.2	85.7	86.7	77.6	80.7	885,967	326,941
Age group										
<45	75.8	85.6	74.6	82.3	72.2	84.0	66.3	74.6	1,196,828	554,073
45 - 64	86.1	88.8	83.9	85.1	82.5	85.8	74.9	77.1	1,483,097	768,918
65+	89.6	87.9	86.5	84.9	87.0	85.7	78.5	79.5	2,499,096	1,107,019
Sex										
Male	86.0	87.7	83.7	84.6	82.9	85.4	75.2	78.2	4,621,722	2,107,846
Female	80.4	87.3	77.4	83.0	77.4	84.8	70.2	73.8	557,299	322,165
All enrollees	85.4	87.7	83.0	84.4	82.3	85.3	74.7	77.6	5,179,021	2,430,011

Note: Responses represent a combination of enrollees who answered "Very satisfied" and "Satisfied."

Non-VA facilities denominator = enrollees who used any VA health care services on or after January 1, 2021, at a VA facility. VA facilities denominator = enrollees who used health care services on or after January 1, 2021, at a non-VA facility.

Male enrollees had higher levels of satisfaction with the decision-making process and referral services than female enrollees at both VA facilities and non-VA facilities. The differences were larger at VA facilities. Females had consistently higher levels of satisfaction at non-VA facilities than at VA facilities. For all enrollees, over 80 percent were satisfied or very satisfied with explanation of health problems, participation in decisions about their care, and explanation of options. About 75 percent were satisfied or very satisfied with referrals

7.3 Reasons for Using Health Care Services Other Than VA's

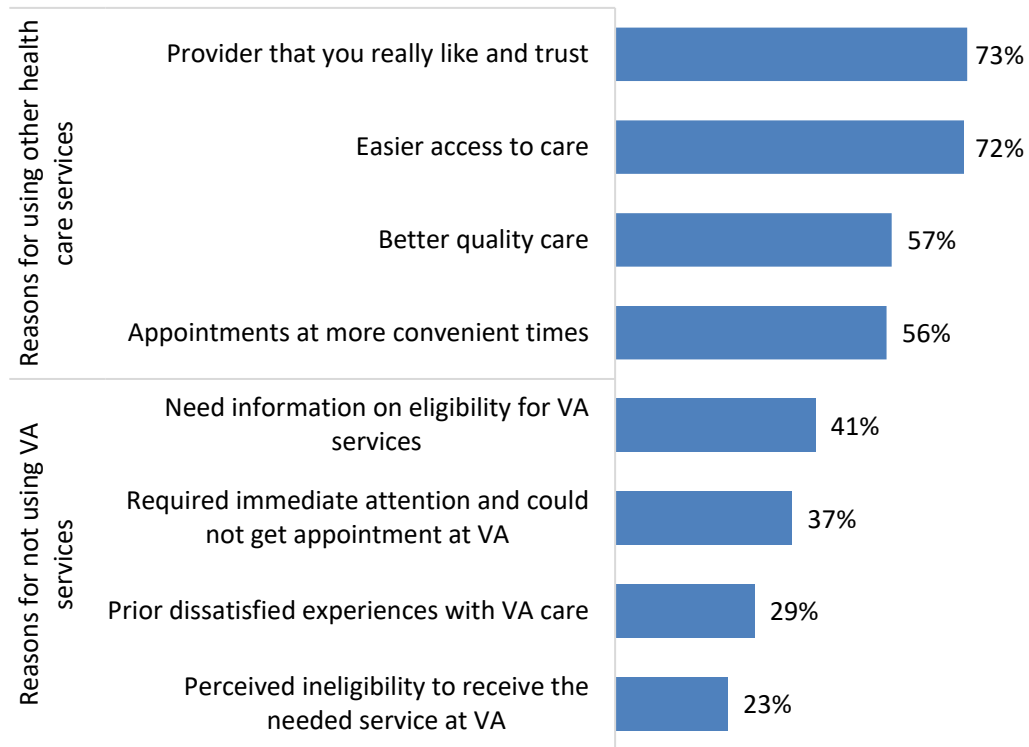
With more than 80 percent of enrolled Veterans reporting some type of insurance coverage outside of their VA benefits, it is clear that enrollees use other health care providers, either for part of their health care needs or instead of VA Health Care. For planning purposes, it is important for VA to understand why enrollees use other health care services, their current dependence on VA Health Care, and their planned future use of VA Health Care.

The 2022 Survey of Enrollees included eight statements to assess reasons why enrolled Veterans used other health care services for some or all of their health care needs. The 2022 findings indicate that 48.9 percent (not shown) of enrollees had used health care services other than those provided or paid for by VA on or after January 1, 2021. These enrollees were asked about possible reasons they chose to use other health care services.

Figure 7-4 shows that the responses to these statements ranged from 72.7 percent agreement to a low of 23.2 percent agreement. Among the positive aspects of using non-VA facilities (blue bars), the top two reasons reported by enrollees were that they had an existing provider outside VA they really liked and trusted (72.7%) and they found these facilities provided easier access to care (72.0%). More than half of enrollees who responded to this question indicated that they used other health care services because appointments were available at more convenient times (55.5%), and 57.1 percent indicated that non-VA facilities provided better quality of care than VA health facilities.

Four additional statements were phrased as perceived barriers (orange bars) to using VA services. Two in five (41.3%) said they needed information on eligibility for VA services, 36.5 percent said they required immediate attention and could not get an appointment at VA, 28.7 percent said they had been dissatisfied with prior VA care experiences, and 23.2 percent believed that they were ineligible to receive the needed services at VA.

Figure 7-4. Among U.S. Department of Veterans Affairs (VA) health care users, reasons for using other health care services and barriers to using VA services



Note: Denominator excludes enrollees who never used health care services other than those provided or paid for by VA on or after January 1, 2021. Weighted N = 5,179,021 enrollees.

As shown in Table 7-6, of those enrollees who reported using other health care services, a greater proportion of enrollees in Priority Groups 1-3 agreed with all of the reasons listed in the survey for using non-VA services, compared to enrollees in lower priority groups. Those in the youngest enrollee group (under the age of 45) were more likely to select all reasons for using other health care services (with the exception of having a provider they really like and trust). Enrollees who were age 65 or older placed a higher importance on having a provider they really like and trust as a reason for using other health care services. Female enrollees were more likely than male enrollees to cite each of the listed reasons for using other health care services. Just over half of all enrollees cited better quality of care and convenient appointment times as reasons, and over 70 percent gave reasons of easier access to care and having a provider they really like and trust.

Table 7-6. Percentage of enrollees reporting on reasons for using other health care services, by priority group, age, and sex

	Easier access to care (%)	Provider that you like and trust (%)	Appointments at more convenient times (%)	Better quality of care (%)	Total weighted N
Priority group					
P1 - P3	74.5	74.6	59.6	61.6	2,418,640
P4 - P6	65.9	67.5	46.3	48.2	769,815
P7 - P8	70.7	72.3	51.4	52.4	912,569
Age group					
<45	78.5	67.0	65.8	68.5	826,268
45 - 64	72.4	71.9	57.9	58.7	1,167,377
65+	69.3	75.5	49.7	51.7	2,107,379
Sex					
Male	71.8	72.6	54.6	56.2	3,702,226
Female	74.5	73.9	61.4	65.1	398,798
All enrollees	72.0	72.7	55.3	57.1	4,101,024

Note: Excludes enrollees who never used health care services other than those provided or paid for by U.S. Department of Veterans Affairs (VA).

A more varied pattern emerged regarding reasons for not using VA health care services. Table 7-7 shows that lower priority groups (Priority Groups 4-6 and 7-8) were more likely than higher priority groups to identify the need for more information on eligibility for VA services and their perceived ineligibility to receive needed services at the VA. Enrollees in the highest priority groups (Priority Groups 1-3) were more likely than lower priority groups to say that prior dissatisfaction with VA care and inability to acquire immediate attention at VA were important reasons for using other health care services. Enrollees younger than age 65 were more likely than older enrollees to identify the need for more information on eligibility, dissatisfaction with prior VA care experiences, perceived ineligibility, and inability to get an appointment at VA for a condition that required immediate attention as reasons for using non-VA health services. Female enrollees were more likely to identify prior dissatisfaction with VA care than male enrollees (38.8% compared to 27.6%) and inability to get an appointment at VA for a condition that required immediate attention than male enrollees (49.2% compared to 35.2 percent).

Table 7-7. Percentage of enrollees reporting on reasons for using other health care services, by priority group, age, and sex (negative factors)

	Need information on eligibility for VA services (%)	Prior dissatisfied experiences with VA care (%)	Perceived ineligibility to receive needed services at VA (%)	Required immediate attention and could not get appointment at VA (%)	Total weighted N
Priority group					
P1 - P3	41.0	34.1	21.0	42.1	2,418,640
P4 - P6	42.7	22.6	26.4	30.6	769,815
P7 - P8	41.1	19.5	26.4	26.8	912,569
Age group					
<45	47.9	47.8	25.2	55.0	826,268
45 - 64	46.0	30.4	24.8	36.9	1,167,377
65+	36.2	20.2	21.5	29.1	2,107,379
Sex					
Male	41.1	27.6	23.1	35.2	3,702,226
Female	43.1	38.8	23.9	49.2	398,798
All enrollees	41.3	28.7	23.2	36.5	4,101,024

Note: Excludes enrollees who never used health care services other than those provided or paid for by VA.

8. Digital Access to VA Information and Resources

Since the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH Act), the Federal Government has made significant investments in the adoption of health information technology (HIT), with the aim of transforming health care delivery and promoting person-centered and self-managed health. Health providers and hospitals have followed suit by improving their existing electronic systems and services. For example, U.S. Department of Veterans Affairs (VA) has been modernizing its electronic health record (EHR) system to provide enrolled Veterans with seamless care as they transition from military service to Veteran status and when they choose to use community care.⁵²

In support of the modernization effort, VA released an online feature that allows enrolled Veterans to access their medical images and associated study reports online. This feature, called the VA Medical Images and Reports, allows enrolled Veterans with a premium account to view, download, and share copies of their radiology studies, such as X-rays, mammograms, magnetic resonance imaging (MRI) scans, and computerized tomography (CT) scans from the VA EHR.⁵³ The VA Medical Images and Reports feature is available through My HealthVet, an online personal health record portal for enrolled Veterans and active-duty service members, their health care providers, and dependents. Another effort to make medical records more accessible is through the Blue Button Initiative which enables enrolled Veterans to access their health records electronically and share with doctors, trusted family members, or caregivers.⁵⁴

As more providers adopt health information technologies and make health care available through remote means (e.g., email, phone consultations, mobile applications, video), understanding how enrollees access the internet, the frequency of internet use, and reasons for internet use across enrollee subgroups becomes increasingly important. Barriers to electronic health platforms affect both providers and patients. Barriers to providers include cost pressures, time limitations, cultural differences, poor usability, and lack of steady and consistent access for patient users.⁵⁵ To help understand patient barriers to online usage, VA conducted a study of VA patient portal usage at a large VA health care facility. Results

⁵²Available at: <https://www.healthit.gov/sites/default/files/page/2018-12/2018-HITECH-report-to-congress.pdf>.

⁵³Available at: <https://www.va.gov/opa/pressrel/pressrelease.cfm?id=4046>.

⁵⁴Available at: <https://www.va.gov/bluebutton>.

⁵⁵The Office of the National Coordinator for Health. (n.d.). *Federal Health IT Strategic Plan 2015-2020*. Washington, DC: Author.

showed that short-term and long-term portal usage was associated with having broadband at home, high self-rated ability to use the internet, and overall online behavior. Digital inclusion, or ready access to the internet and digital skills, appears to be a social determinant in patient exposure to portal services.⁵⁶

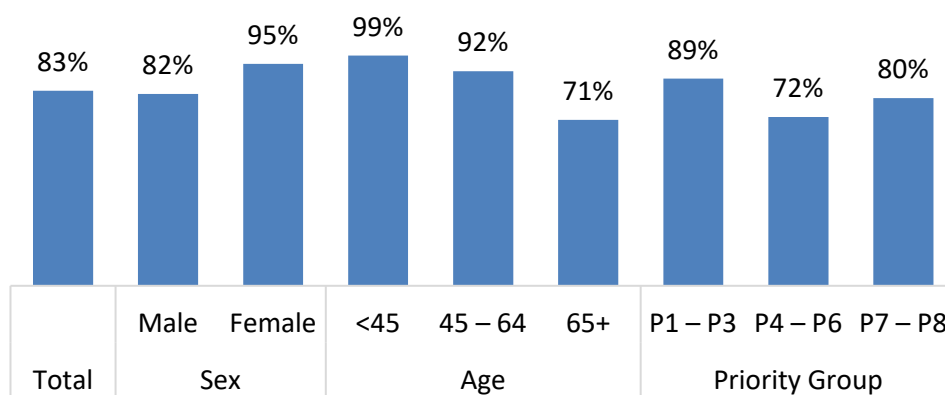
As in previous years, the 2022 Survey of Enrollees included questions about enrollees' use of the internet as well as enrollees' interest in using computer or mobile devices for their own health care.

8.1 Access to the Internet and Text Messaging

A recent study suggests that internet use for health resource access is critical for Veterans and their caregivers, with those feeling most technologically comfortable benefiting most from online resources.⁵⁷ Similar to the 2021 survey results (83.2%), more than four in five enrollees (83.4%) in the 2022 survey reported using the internet, at least occasionally.

Figure 8-1 below and Table A8-1 (see Appendix A) shows the percentage of enrollee internet users by enrollee demographic groups. Internet usage was most prevalent among enrollees who were younger, female, and were in Priority Groups 1-3. Nearly all enrollees under the age of 45 (98.6%) reported that they used the internet, compared with 70.7 percent of enrollees 65 years of age or older.

Figure 8-1. Percentage of enrollees who use the internet, at least occasionally, by priority group, age, and sex



Note: Denominator is all enrollees in each demographic group. Weighted N = 8,376,015 enrollees.

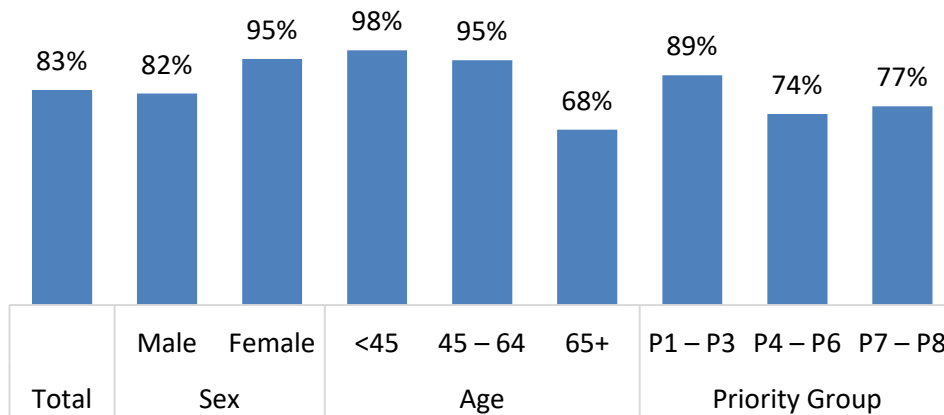
⁵⁶Woods, S.S., Forsberg, C.W., Schwartz, E.C., Nazi, K.M., Hibbard, J.H., Houston, T.K., and Gerrity, M. (2017). The association of patient factors, digital access, and online behavior on sustained patient portal use: A prospective cohort of enrolled users. *Journal of Medical Internet Research*, 19(10), e345.

⁵⁷Duan-Porter, W., Van Houtven, C.H., Mahanna, E.P., Chapman, J.G., Stechuchak, K.M., Coffman, C.J., and Hastings, S.N. (2018). Internet use and technology-related attitudes of Veterans and informal caregivers of Veterans. *Telemedicine and e-Health*, 24(7). <https://doi.org/10.1089/tmj.2017.0015>.

Acceptability of mobile phone text messaging as a means of asynchronous communication between health care systems and patients is growing. VA has adopted an automated texting system (aTS) for national rollout. The aTS allows providers to develop clinical texting protocols to promote patient self-management and allows clinical teams to monitor patient progress between in-person visits.

The 2022 Survey of Enrollees asked about use of text messaging. Figure 8-2 below and Table A8-2 (see Appendix A) shows the rate of text message use by enrollee demographic groups. More than four in five enrollees overall (83.4%) indicated that they sent or received text messages, an increase from the rate in 2021 (83.0%). Use of text messages varies with age, priority group, and sex. Whereas almost all enrollees under the age of 45 reported that they used text messaging (98.4%), only 68.3 percent of enrollees who were 65 years or older did so (although that is up from 61.8% in 2021).

Figure 8-2. Percentage of enrollees who use text messages, by priority group, age, and sex



Note: Denominator is all enrollees in each demographic group. Weighted N = 8,376,015 enrollees.

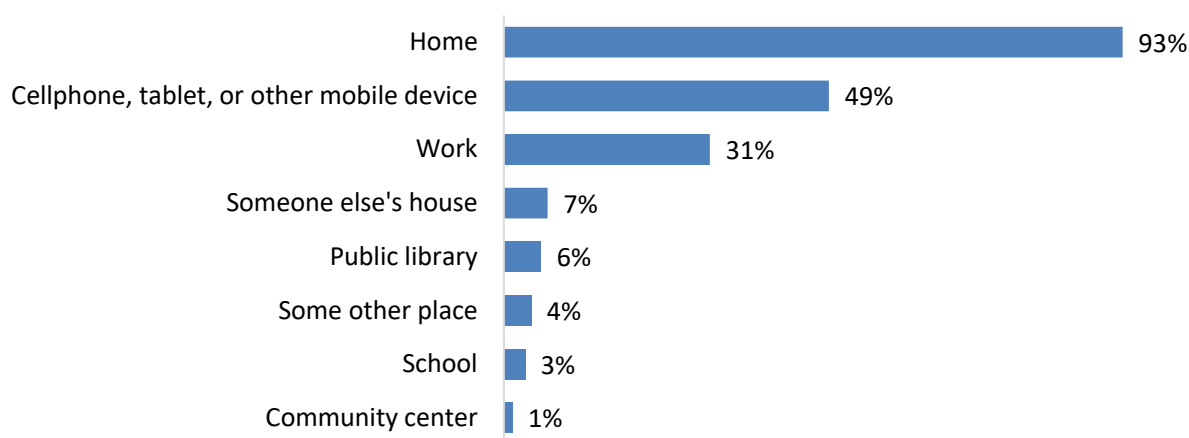
The remainder of this chapter describes responses to several questions related to internet use among the 83.4 percent of all enrollees who indicated that they use the internet at least occasionally. These enrollees are referred to as enrollee internet users, internet users, or enrollees who self-identify as internet users.

8.2 Places Where Enrollees Access the Internet

As shown in Figure 8-3, the most common place where enrollees accessed the internet was at home (93.1%). Enrollees also reported accessing the internet through mobile devices such as a cellphone or tablet (48.9%) and at work (31.0%). A much smaller share of

enrollees reported accessing the internet at someone else's house (6.6%), a public library (5.6%), some other place (4.1%), a school (3.2%), or a community center (1.3%).

Figure 8-3. Among enrollee internet users, the places where they accessed the internet



Note: Denominator is enrollees who are internet users. Weighted N = 6,983,434 enrollees.

Table 8-1 shows places where enrollee internet users accessed the internet by priority group, age, and sex. Across priority group, age group, and sex, home was the most frequent place where enrollees accessed the internet. However, there were notable differences across all three groups for other locations.

Compared with Priority Groups 4-6 and 7-8, enrollee internet users in Priority Groups 1-3 were slightly more likely to access the internet from home (93.7% compared to 90.8% of Priority Groups 4-6 and 93.1% of Priority Groups 7-8), through mobile devices (52.7% compared to 42.6% of Priority Groups 4-6 and 43.2% of Priority Groups 7-8), from work (52.7% compared to 20.5% of Priority Groups 4-6 and 28.9% of Priority Groups 7-8), and from school (3.9% compared to 2.6% of Priority Groups 4-6 and 1.4% of Priority Groups 7-8).

The youngest group of enrollee internet users (under the age of 45) were more likely than older enrollee internet users to access the internet from all of the given locations except for home. A slightly higher proportion of those age 65 or older reported accessing from home (94.1%) compared to other age groups (92.5% for those age less than 45 and 92.3% for those age 45-64). The youngest group of enrollee internet users was more likely than older users to use the internet on a mobile device (70.6% compared to 53.9% of those age 45-64 and 30.6% of those age 65 or older) and at work (56.7% compared to 41.1% of those age 45-64 and 5.9% of those age 65 or older).

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 8-1. Places where enrollees access the internet, by priority group, age, and sex

	Priority group			Age			Sex	
	P1-P3	P4-P6	P7-P8	<45	45-64	65+	Male	Female
Home	4,004,890	1,199,160	1,293,954	1,711,038	2,135,009	2,651,958	5,772,970	725,036
% internet users	93.7	90.8	93.1	92.5	92.6	93.8	93.1	93.0
Cellphone, tablet, other mobile device	2,252,681	561,931	599,959	1,305,230	1,243,581	865,759	2,947,368	467,202
% internet users	52.7	42.6	43.2	70.6	53.9	30.6	47.5	60.0
Work	1,489,641	270,876	402,018	1,048,593	947,853	166,088	1,836,760	325,774
% internet users	34.9	20.5	28.9	56.7	41.1	5.9	29.6	41.8
Someone else's house	291,330	89,176	76,846	188,173	162,591	106,588	376,403	80,949
% internet users	6.8	6.8	5.5	10.2	7.1	3.8	6.1	10.4
Public library	225,969	97,493	67,610	131,496	148,021	111,555	316,663	74,409
% internet users	5.3	7.4	4.9	7.1	6.4	4.0	5.1	9.6
Some other place	187,450	55,935	43,825	117,747	98,071	71,391	264,509	22,700
% internet users	4.4	4.2	3.2	6.4	4.3	2.5	4.3	2.9
School	165,593	34,786	19,710	159,708	49,527	10,854	166,492	53,597
% internet users	3.9	2.6	1.4	8.6	2.2	0.4	2.7	6.9
Community center	65,067	15,686	8,443	44,658	23,488	21,050	80,825	8,372
% internet users	1.5	1.2	0.6	2.4	1.0	0.7	1.3	1.1

More than 90 percent of males (93.1%) and females (93.0%) access the internet from home. Females are more likely to access the internet using a mobile device (60.0% vs. 47.5% for males), at work (41.8% vs. 29.6% for males), at someone else's house (10.4% vs. 6.1% for males), at a public library (9.6% vs. 5.1% for males), and at school (6.9% vs. 2.7% for males).

8.3 Readiness and Willingness to Use Internet for VA Information and Activities

Telehealth is one of VA's efforts to shift health care from a provider-centric delivery model to a patient-centric model where enrollees' personal health goals are taken into consideration and their health care needs are better met through more timely care, improved access, and higher quality.⁵⁸ Telehealth is a term used to describe various technologies such as Home Telehealth, Clinical Video Telehealth, and Store-and-Forward Telehealth (enabling sites in need of specialized consults to forward clinical data, images, and/or videos), all of which use "modern technology to provide clinical care and patient education when the patient and provider are in separate locations."⁵⁹ Telehealth enables patients to receive medical exams from primary care providers, consult with specialists, participate in counseling, monitor chronic conditions, and share/receive diagnostic information while circumventing barriers such as stigma, geographic distance, and travel costs. Veterans Health Administration (VHA) telehealth services have seen a steady annual growth in the last several years⁶⁰ and have been a critical resource for delivering clinical programs and services to meet the psychosocial and health needs of enrolled Veterans and their caregivers.^{61,62,63}

In the 2021 survey, enrollee internet users were asked if they would be willing to perform a series of health-related tasks using a computer or mobile device. As indicated in Figure 8-4, more than 8 in 10 internet-using enrollees said that they were "somewhat" or "very willing" to go online to access their personal health record (85.5%), access laboratory or X-ray test results (84.9%), communicate with their health care provider over secure email (84.9%), fill out health forms (80.5%), schedule medical appointments (84.4%), go online to refill a medication prescription (83.9%), and sign up for health-related text messages (81.1%).

⁵⁸Available at: <http://www.mdedge.com/fedprac/article/101082/health-policy/madhulika-agarwal-telehealth-vha>.

⁵⁹Available at: https://www.va.gov/communitycare/docs/news/VA_telehealth_services.pdf.

⁶⁰Darkins, A. (2014). The growth of telehealth services in the Veterans Health Administration between 1994 and 2014: A study in the diffusion of innovation. *Telemedicine and e-Health*, 20 (9), 761-768.

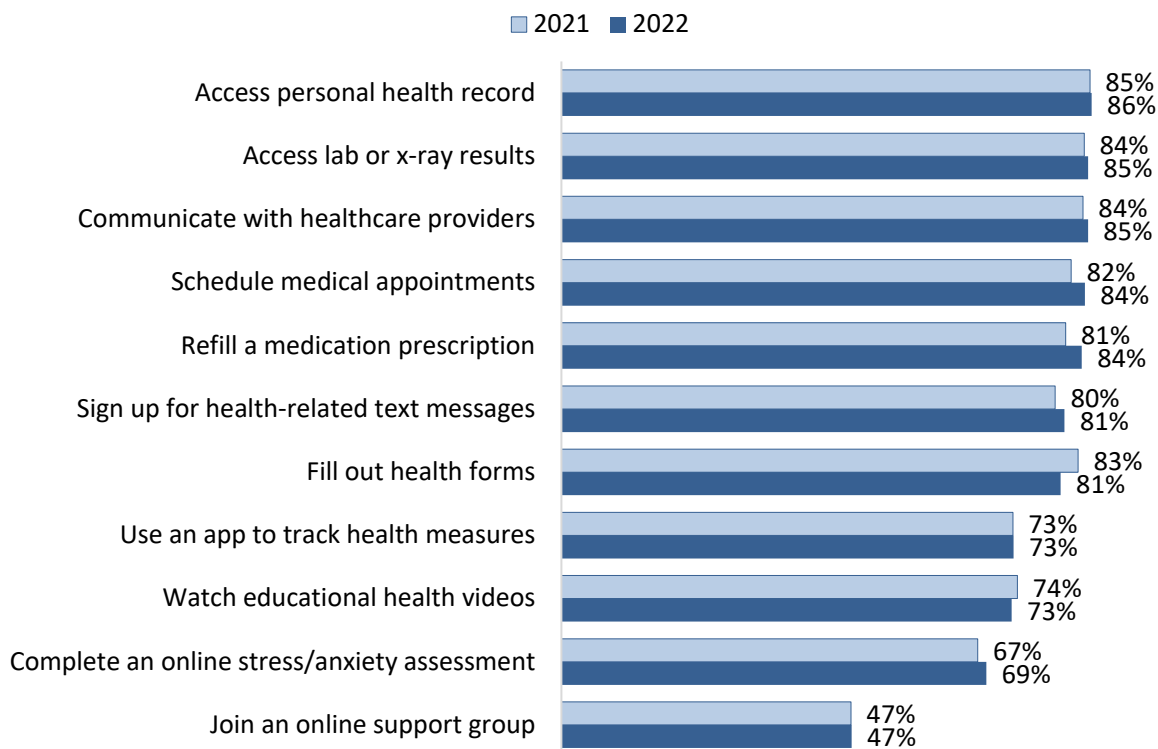
⁶¹Yuen, E.K., Gros, D.F., Price, M., Zeigler, S., Tuerk, P.W., Foa, E.B., and Acierno, R. (2015). Randomized controlled trial of home-based telehealth versus in-person prolonged exposure for combat-related PTSD in Veterans: Preliminary results. *Journal of Clinical Psychology*, 71(6), 500-512.

⁶²Hernandez, H., Scholten, J., and Moore, E. (2015). Home clinical video telehealth promotes education and communication with caregivers of Veterans with TBI. *Telemedicine and e-Health*, 21(9), 761-766.

⁶³Dang, S., Gomez-Orozco, C.A., van Zuilen, M.H., and Levis, S. (2017). Providing dementia consultations to Veterans using clinical video telehealth: Results from a clinical demonstration project. *Telemedicine and e-Health*, 24(3), 203-209.

More than 7 in 10 internet-using enrollees said they were “somewhat” or “very willing” to use the internet to watch educational health videos online (72.6%) and use an “app” to track health measures such as blood pressure or weight (72.9%). Two-thirds of enrollee internet users were willing to complete an online health assessment to measure stress or anxiety (68.5%). Less than half of enrollees who access the internet were “somewhat” or “very willing” to join an online support group for people with similar health issues (46.8%).

Figure 8-4. Among enrollee internet users, percentage willing to perform telehealth-related tasks by year



Note: Denominator is enrollees who are internet users. Weighted N = 6,983,434 enrollees.

Telehealth has the potential to improve access to services and help reduce the inequalities in health care use, and ultimately outcomes, attributable to socioeconomic, geographic, and demographic differences among VA enrollees. However, for these benefits to be realized, it is important for these technologies to reach subgroups of enrollees who are disproportionately less willing or able to adopt these new practices by providing the information and support they need to overcome any barriers to access and use. The 2022 Survey of Enrollees asked about willingness to perform virtual health-related tasks, willingness to schedule virtual consultations or appointments, and willingness to share information and receive medical opinions as part of a virtual consultation or appointment.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Willingness of enrollees to perform telehealth services, telemedicine, or perform health-related tasks using the internet varied across priority group, age, and sex (Table 8-2). Enrollees in Priority Groups 1-3 had the highest willingness rates across all telehealth-related tasks, while Priority Groups 4-6 had the lowest rates. The youngest enrollees (<45 years) were most willing to conduct telehealth-related tasks, and those age 45-64 were more willing than those age 65+ for all tasks. Female enrollees were more willing to conduct all telehealth-related tasks than male enrollees (by at least 13 percentage points).

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

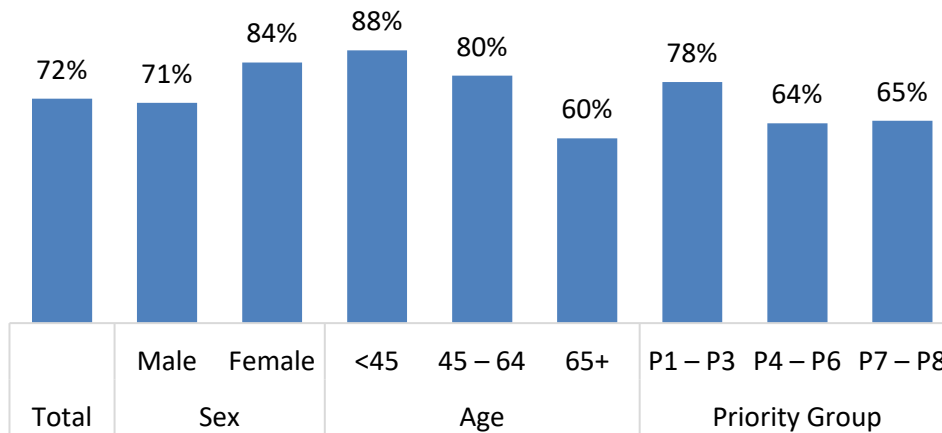
Table 8-2. Percentage of enrollees willing to perform virtual health-related tasks by priority group, age, and sex

	Priority group			Age			Sex	
	P1-P3	P4-P6	P7-P8	<45	45-64	65+	Male	Female
Access personal health record	3,937,792	1,177,003	1,201,727	1,746,316	2,162,383	2,407,823	5,594,446	722,076
% enrollees	81.8	64.4	69.4	93.1	86.5	60.2	74.1	87.9
Access laboratory or X-ray test results	3,904,450	1,167,931	1,198,190	1,732,278	2,147,683	2,390,610	5,549,423	721,149
% enrollees	81.1	63.9	69.2	92.3	85.9	59.8	73.5	87.8
Communicate with providers	3,900,405	1,158,813	1,182,059	1,745,025	2,149,947	2,346,306	5,517,040	724,238
% enrollees	81.0	63.4	68.3	93.0	86.0	58.7	73.0	88.2
Fill out health forms	3,691,417	1,092,112	1,109,657	1,699,294	2,059,473	2,134,420	5,192,702	700,485
% enrollees	76.6	59.7	64.1	90.6	82.4	53.4	68.7	85.3
Schedule medical appointments	3,906,830	1,174,153	1,173,460	1,747,502	2,148,014	2,358,928	5,544,851	709,592
% enrollees	81.1	64.2	67.8	93.1	85.9	59.0	73.4	86.4
Refill medication prescription	3,911,626	1,173,425	1,171,101	1,707,742	2,147,205	2,401,204	5,543,052	713,099
% enrollees	81.2	64.2	67.6	91.0	85.9	60.0	73.4	86.8
Receive health-related text messages on mobile device	3,809,582	1,134,493	1,117,034	1,684,209	2,091,589	2,285,309	5,358,899	702,209
% enrollees	79.1	62.1	64.5	89.8	83.7	57.1	70.9	85.5
Watch educational health videos	3,335,993	988,419	1,001,346	1,508,791	1,901,972	1,914,995	4,678,196	647,562
% enrollees	69.3	54.1	57.8	80.4	76.1	47.9	61.9	78.8
Use app to track health measures	3,413,275	960,955	987,114	1,572,202	1,906,656	1,882,486	4,716,364	644,980
% enrollees	70.9	52.6	57.0	83.8	76.3	47.1	62.4	78.5
Complete online health assessment to measure stress/anxiety	3,234,504	882,521	875,342	1,610,941	1,823,007	1,558,419	4,335,964	656,402
% enrollees	67.2	48.3	50.6	85.9	72.9	39.0	57.4	79.9
Join online support group	2,247,869	584,631	569,990	1,126,757	1,294,724	981,010	2,909,193	493,297
% enrollees	46.7	32.0	32.9	60.1	51.8	24.5	38.5	60.1

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

The survey also asks enrollees about their willingness to use virtual consultations or appointments. Overall, 72.2 percent said they had used virtual consultations at least occasionally, with highest utilization being among females (83.9%), those age less than 45 (87.8%), and those in Priority Group 1-3 (77.6%; see Figure 8-5 below and Appendix Table A8-3).

Figure 8-5. Percentage of enrollees willing to schedule virtual consultations or appointments, at least occasionally, with provider, by priority group, age, and sex



Note: Denominator is all enrollees in each demographic group. Weighted N = 8,376,015 enrollees.

Table 8-3 provides the percentage of enrollees willing to share information and receive medical opinions as part of a virtual consultation or appointment among those willing to schedule virtual consultations or appointments, as well as among all enrollees. Those in Priority Groups 1-3 were more willing than the other priority groups to share information and receive a medical opinion, including sharing with and receiving from a computer. The same occurred for the youngest enrollees (age less than 45), and those age 45 to 64 were more likely than enrollees age 65 and older. Female enrollees were more willing than males to share information and receive a medical opinion, including sharing with and receiving from a computer.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table 8-3. Percentage of enrollees willing to share health information or receive medical opinions as part of a virtual consultation or appointment

	Priority group			Age			Sex	
	P1-P3	P4-P6	P7-P8	<45	45-64	65+	Male	Female
Share health information	3,280,343	958,270	920,931	1,539,226	1,797,057	1,823,261	4,532,861	626,684
% of willing to schedule	87.8	81.2	81.7	93.4	89.9	76.1	84.7	90.9
% of enrollees	69.1	54.0	54.3	82.6	72.7	47.2	61.2	76.9
Receive a medical opinion	3,299,987	935,353	904,608	1,574,104	1,819,176	1,746,668	4,508,420	631,527
% of willing to schedule	88.3	79.3	80.2	95.5	91.0	72.9	84.2	91.6
% of enrollees	69.4	52.5	53.2	84.5	73.5	45.0	60.7	77.4
Share health information with a computer	2,284,541	633,632	625,233	1,164,426	1,277,235	1,101,745	3,130,020	413,386
% of willing to schedule	61.2	53.7	55.5	70.7	63.9	46.0	58.5	60.0
% of enrollees	48.0	35.7	36.8	62.5	51.7	28.4	42.1	50.8
Receive a medical opinion from a computer	2,245,925	609,877	597,639	1,158,579	1,253,700	1,041,163	3,054,538	398,904
% of willing to schedule	60.1	51.7	53.0	70.3	62.7	43.4	57.1	57.9
% of enrollees	47.1	34.3	35.1	62.1	50.7	26.8	41.1	48.9

Appendix A
Supporting Tables for Figures

Appendix A

Supporting Tables for Figures

Table A2-1. Comparison of Priority Group 1 to Priority Groups 2-8 by OEF/OIF/OND, age, sex, and combat service

Demographic Group		Priority Group 1 (%)	Priority Groups 2 - 8 (%)	Total Enrollee Population (%)
OEF/OIF/OND*	Served in OEF/OIF/OND	38.5	14.1	22.6%
	Did not serve in OEF/OIF/OND	61.5	85.9	77.4%
Age*	44 or younger	34.7	15.8	22.4%
	45 to 64	32.9	28.2	29.8%
	65 and older	32.3	56.0	46.2%
Sex*	Male	87.4	91.7	90.2%
	Female	12.6	8.3	9.8%
Combat Service	Served in combat zone	67.0	36.6	47.2%
	Did not serve in combat zone	30.5	60.2	52.8%

*OEF/OIF/OND, age, and sex data come from the VA administrative data file. Note: Percentages may not sum to 100 percent due to rounding.

Table A2-2. Enrollees by age group

Age	#	%
<45	1,876,477	22.4
45 - 64	2,499,629	29.8
65+	3,999,909	47.8
Total	8,376,015	100.0

Table A2-3. Enrollees by sex of enrollees, by age and priority group

	Sex					
	Male		Female		Total	
	N	%	N	%	N	%
Total	7,554,517	90.2	821,499	9.8	8,376,016	100.0
Priority Group						
P1 - P3	4,266,468	56.5	549,581	66.9	4,816,049	57.5
P4 - P6	1,686,084	22.3	142,321	17.3	1,828,404	21.8
P7 - P8	1,601,965	21.2	129,597	15.8	1,731,562	20.7
Age						
<45	1,541,867	20.4	334,610	40.7	1,876,477	22.4
45 - 64	2,152,939	28.5	346,691	42.2	2,499,629	29.8
65+	3,859,711	51.1	140,198	17.1	3,999,909	46.2

Note: Percentages may not sum to 100 percent due to rounding.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table A2-4. Enrollees by marital status and dependents

Marital status	#	%
Married	5,118,163	61.1
Divorced	1,227,397	14.7
Never married	842,445	10.1
Widowed	596,419	7.1
Living with partner, unmarried	376,458	4.5
Separated	128,968	1.5
Missing	86,165	1.0
Total	8,376,015	100.0
Dependents	#	%
0	3,638,431	43.4
1 - 4	4,504,367	53.8
5 or more	132,711	1.6
Missing	100,507	1.2

Note: Percentages may not sum to 100 percent due to rounding.

Table A2-5. Number and percentage of enrollees by race and Hispanic origin

Race	#	%
White	6,661,231	79.5
Black or African American	1,163,663	13.9
American Indian or Alaska Native	86,309	1.0
Asian	148,513	1.8
Native Hawaiian or Other Pacific Islander	55,791	0.7
Missing	260,508	3.1
Hispanic Origin	#	%
Spanish, Hispanic or Latino(a)	740,379	8.8
Non-Hispanic	7,401,415	88.4
Missing	234,222	3.8

Note: Denominator is all enrollees (N = 8,376,015).

Table A2-6. Enrollees by income group

Income	#	%
<\$35,000	3,188,515	38.1
\$35,000+	4,823,295	57.6
Missing	332,973	4.0

Note: Percentages may not sum to 100 percent due to rounding.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table A2-7. Age by income

Income	<30		30-49		50-64		65+		Total
	#	%	#	%	#	%	#	%	
<35,000	119,593	51.7	508,512	25.2	696,944	32.8	1,863,466	46.6	3,188,515
\$35,000+	102,920	44.5	1,450,441	71.8	1,341,358	63.1	1,928,576	48.2	4,823,294
Missing	NA	NA	NA	NA	NA	NA	NA	NA	364,206
Total	231,252	100.0	2,019,126	100.0	2,125,729	100.0	3,999,909	100.0	8,376,015

Note: Percentages may not sum to 100 percent due to rounding.

NA denotes cells that do not have enough respondents (unweighted n<30) to provide reliable estimates. Other cells were also coded NA to prevent deduction to identify low cell count.

Table A2-8. Sex by income

	Male		Female		Total
	#	%	#	%	
<35,000	2,888,682	38.2	299,833	36.5	3,188,515
\$35,000+	4,338,667	57.4	484,627	59.0	4,823,294
Missing	327,168	4.3	37,039	4.5	364,206
Total	7,554,517	100.0	821,499	100.0	8,376,015

Note: Percentages may not sum to 100 percent due to rounding.

Table A3-1. Percentage of enrollees with no insurance, by priority group, age, and sex

	Uninsured		Total
	#	%	
Priority group			
P1 - P3	879,530	18.3	4,816,049
P4 - P6	417,290	22.8	1,828,404
P7 - P8	281,156	16.2	1,731,562
Age group			
<45	570,643	30.4	1,876,477
T45 - 65	680,343	27.2	2,499,629
65+	326,991	8.2	3,999,909
Sex			
Male	1,363,940	18.2	7,554,517
Female	214,037	26.1	821,498
Total enrollees	1,577,977	18.8	8,376,015

Note: Denominator is all enrollees in each demographic group.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table A3-2. Percentage of enrollees with Medicare coverage, by priority group, age, and sex

	Medicare		Total
	#	%	
Priority group			
P1 – P3	1,954,240	40.6	4,816,049
P4 – P6	1,095,857	59.9	1,828,404
P7 – P8	1,023,383	59.1	1,731,562
Age group			
<45	130,512	7.0	1,876,477
45 – 64	400,163	16.0	2,499,629
65+	3,542,804	88.6	3,999,909
Sex			
Male	3,884,966	51.4	7,554,517
Female	188,513	23.0	821,498
Total enrollees			
	4,073,479	48.6	8,376,015

Note: Denominator is all enrollees in each demographic group.

Table A3-3. Percentage of enrollees with Medigap and Medicare Advantage coverage

	Medigap		Medicare Advantage		Total
	#	%	#	%	
Priority Group					
P1 – P3	382,676	19.6	589,177	30.2	1,954,240
P4 – P6	193,656	17.7	414,374	37.8	1,095,857
P7 – P8	292,899	28.6	381,367	37.3	1,023,383
Age Group					
<45	NA	NA	NA	NA	NA
45 – 64	37,112	9.3	117,336	29.3	400,163
65+	818,433	23.1	1,218,608	34.5	3,542,804
Sex					
Male	843,099	21.7	1,337,544	34.4	3,884,966
Female	26,132	13.9	47,376	25.1	188,513
Total Enrollees					
	2,362,597	28.2	1,384,920	34.0	4,073,479

Note: Denominator is all enrollees with Medicare in each demographic group.

NA denotes cells that do not have enough respondents (unweighted n<30) to provide reliable estimates.

Table A3-4. Among enrollees with Medicare, the percentage with Medicare Part D coverage by priority group, age, and sex

	Medicare Part D Coverage		Total
	#	%	
Priority group			
P1 – P3	525,257	26.9	1,954,240
P4 – P6	397,300	36.3	1,095,857
P7 – P8	402,269	39.3	1,023,383
Age group			
<45	NA	NA	NA
45 – 64	100,359	25.1	400,162.8
65+	1,177,,589	33.2	3,542,804
Sex			
Male	1,274,037	32.8	3,884,966
Female	50,790	26.9	188,0513
Total enrollees			
	1,324,828	32.5	4,073,479

Note: Denominator is all enrollees with Medicare in each demographic group.
 NA denotes cells that do not have enough respondents (unweighted n<30) to provide reliable estimates.

Table A3-5. Percentage of enrollees with Medicaid coverage, by priority group, age, and sex

	Medicaid Coverage		Total
	#	%	
Priority group			
P1 – P3	225,194	4.7	4,816,049
P4 – P6	226,697	12.4	1,828,404
P7 – P8	84,128	4.9	1,731,562
Age group			
<45	78,821	4.2	1,876,477
45 – 64	143,702	5.8	2,499,629
65+	313,497	7.8	3,999,909
Sex			
Male	483,792	6.4	7,554,517
Female	52,228	6.3	821,498
Total enrollees			
	536,020	6.4	8,376,015

Note: Denominator is all enrollees in each demographic group. Weighted N = 8,376,015 enrollees.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table A3-6. Percentage of enrollees with TRICARE coverage, by priority group, age, and sex

	TRICARE Coverage		Total
	#	%	
Priority group			
P1 – P3	1,550,352	32.19	4,816,049
P4 – P6	174,680.4	9.55	1,828,404
P7 – P8	192,633.1	11.12	1,731,562
Age group			
<45	384,667	20.5	1,876,477
45 – 64	776,127	31.1	2,499,629
65+	756,872	18.9	3,999,909
Sex			
Male	1,684,637	22.3	7,554,517
Female	233,028	28.4	821,498
Total enrollees			
	1,917,666	22.9	8,376,015

Note: Denominator is all enrollees in each demographic group.

Table A3-7. Percentage of enrollees with private or group health plans, by priority group, age, and sex

	Private or group health plan coverage		Total
	#	%	
Priority group			
P1 – P3	1,494,819	31.0	4,816,049
P4 – P6	321,390	17.6	1,828,404
P7 – P8	546,387	31.6	1,731,562
Age group			
<45	877,358	46.8	1,876,477
45 – 64	832,227	33.3	2,499,629
65+	653,013	16.3	3,999,909
Sex			
Male	2,082,869	27.6	7,554,517
Female	279,727	34.1	821,498
Total enrollees			
	869,232	21.3	8,376,015

Note: Denominator is all enrollees in each demographic group.

Table A3-8. Percentage of enrollees with private insurance, by primary source of coverage

Primary Source	#	%
Current employer, including COBRA coverage	1,218,216	51.6
Former employer	407,938	17.3
Coverage purchased on a Federal or state exchange	76,198	3.2
Other individually purchased coverage	98,122	4.2
Coverage through a family member	358,555	15.2
Coverage purchased through a union	96,142	4.1
Some other source	106,010	4.5
Missing	114,690	4.9

Note: Denominator is all enrollees in each demographic group. Weighted N = 8,376,015 enrollees.

Table A8-1. Enrollee use of the internet, by age, priority group, and sex

	Use the Internet, at least occasionally		Total
	#	%	
Priority group			
P1 – P3	4,273,129	88.7	4,816,049
P4 – P6	1,320,629	72.2	1,828,404
P7 – P8	1,389,676	80.3	1,731,562
Age group			
<45	1,849,748	98.6	1,876,477
45 – 65	2,306,067	92.3	2,499,629
65+	2,827,619	70.7	3,999,909
Sex			
Male	6,204,053	82.1	7,554,517
Female	779,380	94.9	821,499
Total enrollees			
	6,983,434	83.4	8,376,015

Table A8-2. Use of text messages, by priority group, age, and sex

	Sends/receives text messages		Total
	#	%	
Priority group			
P1 – P3	4,271,372	88.7	4,816,049
P4 – P6	1,350,024	73.8	1,828,404
P7 – P8	1,328,707	76.7	1,731,562
Age group			
<45	1,847,158	98.4	1,876,477
45 – 65	2,369,364	94.8	2,499,629
65+	2,733,580	68.3	3,999,909
Sex			
Male	6,169,541	95.0	7,554,517
Female	780,561	81.7	821,499
Total enrollees			
	6,950,103	83.0	8,376,015

Table A8-3. Percentage of enrollees willing to schedule virtual consultations or appointments, at least occasionally, with provider, by priority group, age, and sex

	Willing to schedule virtual consultations or appointments, at least occasionally		Total
	#	%	
Priority group			
P1 – P3	3,735,518	77.6	4,816,049
P4 – P6	1,179,911	64.3	1,828,404
P7 – P8	1,127,656	65.1	1,731,562
Age group			
<45	1,647,586	87.8	1,876,477
45 – 65	1,998,953	80.0	2,499,629
65+	2,396,546	59.9	3,999,909
Sex			
Male	5,353,659	70.9	7,554,517
Female	689,426	83.9	821,499
Total enrollees			
	6,043,085	72.2	8,376,015

Appendix B

VISN Tables

Appendix B VISN Tables

Table B1-1. Enrollees by priority group and VISN

VISN	VISN total	Priority Group					
		P1-P3		P4-P6		P7-P8	
		Weighted N	%	Weighted N	%	Weighted N	%
1	316,690	165,331	52.2	69,837	22.1	81,522	25.7
2	377,729	161,903	42.9	93,262	24.7	122,564	32.4
4	372,744	172,804	46.4	95,399	25.6	104,541	28.0
5	301,017	184,988	61.5	56,306	18.7	59,723	19.8
6	536,915	341,867	63.7	103,392	19.3	91,656	17.1
7	621,087	402,084	64.7	117,986	19.0	101,017	16.3
8	719,212	392,252	54.5	176,256	24.5	150,704	21.0
9	355,563	211,672	59.5	79,357	22.3	64,534	18.1
10	621,604	319,204	51.4	163,795	26.4	138,605	22.3
12	339,653	156,048	45.9	86,610	25.5	96,995	28.6
15	306,009	166,849	54.5	73,499	24.0	65,661	21.5
16	557,725	332,145	59.6	124,027	22.2	101,553	18.2
17	588,619	399,864	67.9	98,866	16.8	89,889	15.3
19	427,912	273,713	64.0	78,272	18.3	75,927	17.7
20	433,499	263,342	60.7	90,687	20.9	79,470	18.3
21	418,884	238,843	57.0	93,945	22.4	86,096	20.6
22	692,591	403,282	58.2	154,736	22.3	134,573	19.4
23	388,566	229,860	59.2	72,172	18.6	86,534	22.3
National	8,376,015	4,816,049	57.5	1,828,404	21.8	1,731,562	20.7

Note: Denominator is the enrollee population by VISN. Percentages may not total 100 percent due to rounding.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B1-2. Enrollees by age and VISN

VISN	VISN total	Age group					
		<45		45-64		65+	
		Weighted N	%	Weighted N	%	Weighted N	%
1	316,690	91,173	28.8	61,458	19.4	164,059	51.8
2	377,729	70,667	18.7	102,281	27.1	204,781	54.2
4	372,744	72,513	19.5	93,096	25.0	207,135	55.6
5	301,017	62,202	20.7	111,693	37.1	127,123	42.2
6	536,915	123,751	23.0	190,809	35.5	222,355	41.4
7	621,087	105,820	17.0	243,464	39.2	271,803	43.8
8	719,212	131,968	18.3	229,390	31.9	357,853	49.8
9	355,563	72,199	20.3	113,488	31.9	169,877	47.8
10	621,604	134,355	21.6	158,703	25.5	328,546	52.9
12	339,653	77,881	22.9	80,060	23.6	181,711	53.5
15	306,009	64,407	21.0	81,925	26.8	159,677	52.2
16	557,725	126,953	22.8	189,045	33.9	241,727	43.3
17	588,619	152,738	25.9	218,886	37.2	216,995	36.9
19	427,912	108,826	25.4	120,715	28.2	198,371	46.4
20	433,499	122,601	28.3	105,113	24.2	205,784	47.5
21	418,884	90,521	21.6	122,228	29.2	206,135	49.2
22	692,591	184,205	26.6	194,939	28.1	313,446	45.3
23	388,566	83,697	21.5	82,338	21.2	222,530	57.3
National	8,376,015	1,876,477	22.4	2,499,629	29.8	3,999,909	47.8

Note: Denominator is the enrollee population by VISN. Percentages may not total 100 percent due to rounding.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B1-3. Enrollees by sex and VISN

VISN	VISN Total	Sex			
		Male		Female	
		Weighted N	%	Weighted N	%
1	316,690	291,994	92.2	24,696	7.8
2	377,729	348,135	92.2	29,594	7.8
4	372,744	337,798	90.6	34,946	9.4
5	301,017	265,974	88.4	35,043	11.6
6	536,915	469,651	87.5	67,263	12.5
7	621,087	539,010	86.8	82,078	13.2
8	719,212	651,832	90.6	67,379	9.4
9	355,563	323,822	91.1	31,741	8.9
10	621,604	579,872	93.3	41,732	6.7
12	339,653	311,929	91.8	27,723	8.2
15	306,009	278,218	90.9	27,791	9.1
16	557,725	488,423	87.6	69,301	12.4
17	588,619	525,105	89.2	63,513	10.8
19	427,912	379,805	88.8	48,106	11.2
20	433,499	395,324	91.2	38,173	8.8
21	418,884	385,565	92.0	33,319	8.0
22	692,591	619,897	89.5	72,693	10.5
23	388,566	362,161	93.2	26,405	6.8
National	8,376,015	7,554,517	90.2	821,499	9.8

Note: Denominator is the enrollee population by VISN. Percentages may not total 100 percent due to rounding.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B1-4. Enrollees by service and VISN

VISN	Period of Service							
	WW II era		Korean War era		Between Korean and Vietnam Wars		Vietnam War era	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	3,994	1.3	19,615	6.2	31,767	10.0	111,940	35.3
2	5,475	1.4	28,250	7.5	38,699	10.2	138,348	36.6
4	4,961	1.3	22,947	6.2	42,835	11.5	143,066	38.4
5	NA	NA	11,998	4.0	25,017	8.3	92,978	30.9
6	NA	NA	16,685	3.1	38,062	7.1	163,708	30.5
7	NA	NA	20,804	3.3	44,593	7.2	206,495	33.2
8	9,017	1.3	40,377	5.6	70,696	9.8	247,016	34.3
9	NA	NA	14,778	4.2	31,371	8.8	127,038	35.7
10	NA	NA	28,493	4.6	49,099	7.9	245,945	39.6
12	2,967	0.9	20,874	6.1	33,412	9.8	128,873	37.9
15	4,612	1.5	15,517	5.1	25,744	8.4	114,518	37.4
16	NA	NA	21,865	3.9	37,817	6.8	186,597	33.5
17	2,918	0.5	21,524	3.7	37,570	6.4	162,917	27.7
19	NA	NA	21,116	4.9	37,764	8.8	153,267	35.8
20	5,488	1.3	17,931	4.1	37,144	8.6	156,343	36.1
21	4,550	1.1	24,157	5.8	39,234	9.4	150,517	35.9
22	6,536	0.9	37,682	5.4	56,087	8.1	228,660	33.0
23	3,021	0.8	22,585	5.8	37,254	9.6	160,838	41.4
National	68,265	0.8	407,198	4.9	714,165	8.5	2,919,064	34.9

Note: Denominator is the enrollee population by VISN. Percentages do not total 100 percent because enrollees may have responded with multiple periods of service. "WWII Era" includes all WWII Veterans and a small number of enrollees who reported serving prior to WWII. "Korean War Era" includes all Korean War Veterans and a small number of enrollees who reported serving between WWII and the Korean War. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B1-4. Enrollees by service and VISN (continued)

VISN	Period of Service							
	Between Vietnam and Gulf War		Gulf War era		Post-2001		Combat Status	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	63,259	20.0	49,978	15.8	105,353	33.3	140,981	44.5
2	88,710	23.5	72,210	19.1	90,557	24.0	146,260	38.7
4	84,764	22.7	76,612	20.6	93,782	25.2	164,678	44.2
5	97,241	32.3	115,516	38.4	118,117	39.2	146,817	48.8
6	172,758	32.2	170,567	31.8	206,080	38.4	280,472	52.2
7	219,691	35.4	217,429	35.0	192,607	31.0	295,356	47.6
8	235,614	32.8	200,713	27.9	202,412	28.1	322,349	44.8
9	113,855	32.0	98,804	27.8	104,077	29.3	177,366	49.9
10	159,120	25.6	134,409	21.6	168,486	27.1	290,243	46.7
12	72,699	21.4	62,604	18.4	95,488	28.1	149,748	44.1
15	79,572	26.0	81,014	26.5	92,410	30.2	142,780	46.7
16	168,217	30.2	178,033	31.9	194,990	35.0	256,479	46.0
17	185,067	31.4	215,750	36.7	239,721	40.7	329,099	55.9
19	113,984	26.6	118,082	27.6	147,985	34.6	203,415	47.5
20	113,972	26.3	115,647	26.7	154,128	35.6	228,837	52.8
21	119,187	28.5	102,548	24.5	115,018	27.5	182,594	43.6
22	191,402	27.6	194,711	28.1	246,559	35.6	334,068	48.2
23	86,685	22.3	82,792	21.3	107,181	27.6	162,602	41.8
National	2,365,797	28.2	2,287,419	27.3	2,674,951	31.9	3,954,143	47.2

Note: Denominator is the enrollee population by VISN. Percentages do not total 100 percent because enrollees may have responded with multiple periods of service.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B1-5. Enrollees by employment status and VISN

VISN	VISN Total	Employment Status			
		Full-time Employed		Part-time Employed	
		Weighted N	%	Weighted N	%
1	316,690	103,424	32.7	18,644	5.9
2	377,729	89,333	23.7	20,698	5.5
4	372,744	94,346	25.3	24,725	6.6
5	301,017	125,188	41.6	13,808	4.6
6	536,915	191,035	35.6	27,998	5.2
7	621,087	175,895	28.3	23,332	3.8
8	719,212	200,558	27.9	52,938	7.4
9	355,563	106,258	29.9	19,415	5.5
10	621,604	199,905	32.2	34,857	5.6
12	339,653	99,754	29.4	17,540	5.2
15	306,009	91,916	30.0	14,912	4.9
16	557,725	171,150	30.7	40,151	7.2
17	588,619	241,898	41.1	28,392	4.8
19	427,912	123,003	28.7	42,867	10.0
20	433,499	143,924	33.2	21,181	4.9
21	418,884	124,974	29.8	18,547	4.4
22	692,591	233,610	33.7	47,616	6.9
23	388,566	126,507	32.6	16,527	4.3
National	8,376,015	2,642,679	31.6	484,148	5.8

Note: Denominator is the enrollee population by VISN. Percentages may not total 100 percent due to rounding.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B1-5. Enrollees by employment status and VISN (continued)

VISN	Employment Status (continued)							
	Unemployed		Not in Labor Force		Missing		Unemployment Rate	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	NA	NA	181,952	57.5	3,967	1.3	NA	NA
2	18,292	4.8	241,327	63.9	8,079	2.1	18,292	14.3
4	NA	NA	239,582	64.3	7,287	2.0	NA	NA
5	6,592	2.2	151,178	50.2	4,252	1.4	6,592	4.5
6	15,158	2.8	287,238	53.5	15,486	2.9	15,158	6.5
7	21,200	3.4	387,233	62.3	13,428	2.2	21,200	9.6
8	14,793	2.1	440,315	61.2	10,606	1.5	14,793	5.5
9	13,596	3.8	207,094	58.2	9,200	2.6	13,596	9.8
10	NA	NA	362,204	58.3	8,389	1.3	NA	NA
12	12,159	3.6	203,739	60.0	6,461	1.9	12,159	9.4
15	NA	NA	188,181	61.5	7,850	2.6	NA	NA
16	17,644	3.2	319,107	57.2	9,672	1.7	17,644	7.7
17	13,384	2.3	294,926	50.1	10,020	1.7	13,384	4.7
19	8,932	2.1	242,442	56.7	10,667	2.5	8,932	5.1
20	7,160	1.7	253,228	58.4	8,005	1.8	7,160	4.2
21	24,226	5.8	246,784	58.9	4,353	1.0	24,226	14.4
22	26,123	3.8	376,966	54.4	8,276	1.2	26,123	8.5
23	NA	NA	234,072	60.2	4,171	1.1	NA	NA
National	241,454	2.9	4,857,569	58.0	150,166	1.8	241,454	7.2

Note: Denominator is the enrollee population by VISN. Percentages may not total 100 percent due to rounding. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B2-1. Enrollees by health insurance coverage, priority group, and VISN

VISN	Medicare						Medicaid					
	P1-P3		P4-P6		P7-P8		P1-P3		P4-P6		P7-P8	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	69,051	41.8	45,656	65.4	46,876	57.5	NA	NA	NA	NA	NA	NA
2	71,661	44.3	56,713	60.8	87,169	71.1	NA	NA	NA	NA	NA	NA
4	71,275	41.2	64,177	67.3	71,665	68.6	NA	NA	NA	NA	NA	NA
5	56,251	30.4	33,717	59.9	38,187	63.9	NA	NA	NA	NA	NA	NA
6	128,629	37.6	59,500	57.5	49,217	53.7	NA	NA	NA	NA	NA	NA
7	167,372	41.6	68,199	57.8	65,475	64.8	NA	NA	NA	NA	NA	NA
8	171,137	43.6	102,261	58.0	96,966	64.3	NA	NA	NA	NA	NA	NA
9	96,308	45.5	47,909	60.4	35,423	54.9	NA	NA	NA	NA	NA	NA
10	156,504	49.0	95,057	58.0	76,852	55.4	NA	NA	NA	NA	NA	NA
12	66,981	42.9	51,888	59.9	56,788	58.5	NA	NA	NA	NA	NA	NA
15	72,848	43.7	48,986	66.6	40,824	62.2	NA	NA	NA	NA	NA	NA
16	126,592	38.1	67,972	54.8	55,669	54.8	NA	NA	NA	NA	NA	NA
17	124,847	31.2	56,481	57.1	41,217	45.9	NA	NA	NA	NA	NA	NA
19	118,088	43.1	45,513	58.1	41,707	54.9	NA	NA	NA	NA	NA	NA
20	108,997	41.4	57,710	63.6	39,320	49.5	NA	NA	NA	NA	NA	NA
21	92,001	38.5	57,560	61.3	46,946	54.5	NA	NA	NA	NA	NA	NA
22	141,606	35.1	93,570	60.5	76,319	56.7	NA	NA	NA	NA	NA	NA
23	114,091	49.6	42,989	59.6	56,765	65.6	NA	NA	NA	NA	NA	NA
National	1,954,240	40.6	1,095,857	59.9	1,023,383	59.1	69,428	1.4	61,773	3.4	17,252	1.0

Note: Denominator is the enrollee population by priority group and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple types of health insurance coverage. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B2-1. Enrollees by health insurance coverage, priority group, and VISN (continued)

VISN	Tricare						Private Insurance					
	P1-P3		P4-P6		P7-P8		P1-P3		P4-P6		P7-P8	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	19,445	11.8	NA	NA	NA	NA	42,075	25.4	8,434	12.1	19,226	23.6
2	13,242	8.2	NA	NA	NA	NA	32,927	20.3	10,878	11.7	16,116	13.1
4	20,171	11.7	NA	NA	NA	NA	44,832	25.9	9,954	10.4	17,621	16.9
5	48,436	26.2	NA	NA	NA	NA	54,963	29.7	5,077	9.0	11,050	18.5
6	67,142	19.6	NA	NA	NA	NA	65,773	19.2	7,223	7.0	18,843	20.6
7	99,369	24.7	NA	NA	NA	NA	63,757	15.9	11,233	9.5	13,758	13.6
8	69,163	17.6	NA	NA	NA	NA	73,219	18.7	10,733	6.1	26,373	17.5
9	37,007	17.5	NA	NA	NA	NA	35,672	16.9	7,392	9.3	13,937	21.6
10	43,785	13.7	NA	NA	NA	NA	66,782	20.9	17,192	10.5	30,150	21.8
12	13,419	8.6	NA	NA	NA	NA	29,875	19.1	9,174	10.6	21,968	22.6
15	32,232	19.3	NA	NA	NA	NA	32,110	19.2	7,337	10.0	12,699	19.3
16	61,415	18.5	NA	NA	8,546	8.4	74,188	22.3	10,523	8.5	15,646	15.4
17	118,662	29.7	3,208	3.2	7,868	8.8	98,485	24.6	7,957	8.0	19,445	21.6
19	45,493	16.6	6,934	8.9	NA	NA	47,763	17.5	6,723	8.6	18,814	24.8
20	46,892	17.8	5,401	6.0	NA	NA	61,943	23.5	9,274	10.2	23,264	29.3
21	33,241	13.9	NA	NA	NA	NA	64,254	26.9	9,594	10.2	15,010	17.4
22	76,601	19.0	NA	NA	NA	NA	95,163	23.6	15,196	9.8	19,568	14.5
23	22,512	9.8	NA	NA	NA	NA	60,842	26.5	9,985	13.8	15,040	17.4
National	868,226	18.0	79,605	4.4	81,245	4.7	1,044,623	21.7	173,879	9.5	328,526	19.0

Note: Denominator is the enrollee population by priority group and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple types of health insurance coverage. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B2-1. Enrollees by health insurance coverage, priority group, and VISN (continued)

VISN	No Health Insurance Coverage					
	P1-P3		P4-P6		P7-P8	
	Weighted N	%	Weighted N	%	Weighted N	%
1	30,125	18.2	12,281	17.6	12,262	15.0
2	39,463	24.4	17,283	18.5	16,236	13.2
4	34,207	19.8	17,832	18.7	10,372	9.9
5	24,583	13.3	11,631	20.7	7,188	12.0
6	71,323	20.9	27,450	26.5	15,324	16.7
7	70,496	17.5	30,022	25.4	15,190	15.0
8	75,864	19.3	49,503	28.1	25,363	16.8
9	38,268	18.1	18,520	23.3	8,793	13.6
10	48,512	15.2	35,523	21.7	26,279	19.0
12	41,012	26.3	20,351	23.5	13,790	14.2
15	28,675	17.2	15,475	21.1	8,440	12.9
16	66,430	20.0	34,586	27.9	20,676	20.4
17	55,779	13.9	29,600	29.9	21,043	23.4
19	56,390	20.6	15,657	20.0	12,548	16.5
20	39,945	15.2	16,006	17.7	12,970	16.3
21	46,874	19.6	19,432	20.7	18,459	21.4
22	80,837	20.0	32,982	21.3	26,923	20.0
23	30,746	13.4	13,155	18.2	9,300	10.7
National	879,530	18.3	417,290	22.8	281,157	16.2

Note: Denominator is the enrollee population by VISN. Percentages may not total 100 percent due to rounding. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B2-2. Enrollees by health insurance coverage, age, and VISN

VISN	Medicare						Medicaid					
	<45		45-64		65+		<45		45-64		65+	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	NA	NA	9,794	15.9	146,251	89.1	NA	NA	NA	NA	NA	NA
2	NA	NA	24,034	23.5	186,372	91.0	NA	NA	6,873	6.7	NA	NA
4	NA	NA	13,299	14.3	188,195	90.9	NA	NA	NA	NA	NA	NA
5	NA	NA	13,614	12.2	114,540	90.1	NA	NA	NA	NA	NA	NA
6	NA	NA	29,335	15.4	200,502	90.2	NA	NA	NA	NA	NA	NA
7	NA	NA	41,834	17.2	251,015	92.4	NA	NA	NA	NA	NA	NA
8	NA	NA	34,745	15.1	315,459	88.2	NA	NA	NA	NA	NA	NA
9	NA	NA	23,914	21.1	147,094	86.6	NA	NA	NA	NA	NA	NA
10	NA	NA	26,660	16.8	293,912	89.5	NA	NA	NA	NA	NA	NA
12	NA	NA	11,933	14.9	161,502	88.9	NA	NA	NA	NA	NA	NA
15	NA	NA	15,287	18.7	142,561	89.3	NA	NA	NA	NA	NA	NA
16	NA	NA	35,891	19.0	206,962	85.6	NA	NA	NA	NA	NA	NA
17	NA	NA	28,617	13.1	190,168	87.6	NA	NA	NA	NA	NA	NA
19	NA	NA	20,275	16.8	174,897	88.2	NA	NA	NA	NA	NA	NA
20	NA	NA	16,007	15.2	181,371	88.1	NA	NA	NA	NA	NA	NA
21	NA	NA	19,910	16.3	172,793	83.8	NA	NA	NA	NA	NA	NA
22	NA	NA	25,897	13.3	268,100	85.5	NA	NA	NA	NA	NA	NA
23	NA	NA	9,118	11.1	201,110	90.4	NA	NA	NA	NA	NA	NA
National	39,688	2.1	400,163	16.0	3,542,804	88.6	130,512	7.0	78,851	3.2	29,915	0.7

Note: Denominator is the enrollee population by priority group and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple types of health insurance coverage. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B2-2. Enrollees by health insurance coverage, age, and VISN (continued)

VISN	Tricare						Private Insurance					
	<45		45-64		65+		<45		45-64		65+	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	NA	NA	9,291	15.1	NA	NA	41,554	45.6	24,141	39.3	4,040	2.5
2	NA	NA	13,574	13.3	NA	NA	NA	NA	30,108	29.4	3,747	1.8
4	NA	NA	16,518	17.7	NA	NA	NA	NA	31,351	33.7	5,064	2.4
5	NA	NA	43,211	38.7	NA	NA	36,313	58.4	33,116	29.6	NA	NA
6	NA	NA	60,996	32.0	NA	NA	41,901	33.9	46,675	24.5	NA	NA
7	NA	NA	72,840	29.9	NA	NA	NA	NA	64,902	26.7	NA	NA
8	NA	NA	62,805	27.4	NA	NA	52,556	39.8	53,107	23.2	4,661	1.3
9	NA	NA	26,752	23.6	NA	NA	NA	NA	28,410	25.0	NA	NA
10	NA	NA	27,834	17.5	NA	NA	56,992	42.4	52,224	32.9	NA	NA
12	NA	NA	12,732	15.9	NA	NA	35,871	46.1	22,529	28.1	NA	NA
15	NA	NA	23,000	28.1	NA	NA	NA	NA	18,997	23.2	NA	NA
16	NA	NA	43,558	23.0	NA	NA	53,563	42.2	43,715	23.1	NA	NA
17	NA	NA	79,141	36.2	6,093	2.8	64,824	42.4	57,845	26.4	NA	NA
19	NA	NA	30,600	25.3	NA	NA	38,019	34.9	32,579	27.0	2,702	1.4
20	NA	NA	30,908	29.4	3,419	1.7	62,823	51.2	28,632	27.2	NA	NA
21	NA	NA	25,889	21.2	NA	NA	41,735	46.1	41,967	34.3	5,157	2.5
22	NA	NA	54,623	28.0	NA	NA	73,212	39.7	50,759	26.0	5,955	1.9
23	NA	NA	18,377	22.3	NA	NA	55,684	66.5	26,568	32.3	3,615	1.6
National	340,054	18.1	652,649	26.1	36,374	0.9	795,580	42.4	687,624	27.5	63,825	1.6

Note: Denominator is the enrollee population by priority group and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple types of health insurance coverage. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B2-2. Enrollees by health insurance coverage, age, and VISN (continued)

VISN	No Health Insurance Coverage					
	<45		45-64		65+	
	Weighted N	%	Weighted N	%	Weighted N	%
1	NA	NA	15,943	25.9	11,828	7.2
2	32,561	46.1	27,692	27.1	12,730	6.2
4	NA	NA	27,868	29.9	12,131	5.9
5	NA	NA	20,694	18.5	9,042	7.1
6	NA	NA	48,641	25.5	16,102	7.2
7	NA	NA	60,806	25.0	15,970	5.9
8	42,838	32.5	77,061	33.6	30,831	8.6
9	NA	NA	29,028	25.6	16,732	9.8
10	NA	NA	46,026	29.0	25,874	7.9
12	NA	NA	28,238	35.3	15,548	8.6
15	NA	NA	23,914	29.2	13,377	8.4
16	38,532	30.4	57,923	30.6	25,238	10.4
17	39,429	25.8	50,639	23.1	16,354	7.5
19	35,068	32.2	31,852	26.4	17,675	8.9
20	NA	NA	27,878	26.5	16,413	8.0
21	NA	NA	29,309	24.0	24,117	11.7
22	NA	NA	50,576	25.9	31,984	10.2
23	NA	NA	26,255	31.9	15,045	6.8
National	570,643	30.4	680,343	27.2	326,991	8.2

Note: Denominator is the enrollee population by VISN. Percentages may not total 100 percent due to rounding. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B2-3. Enrollees by health insurance coverage, sex, and VISN

VISN	Medicare				Medicaid			
	Male		Female		Male		Female	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	156,576	53.6	5,007	20.3	NA	NA	NA	NA
2	207,858	59.7	7,685	26.0	7,494	2.2	NA	NA
4	199,126	58.9	7,990	22.9	NA	NA	NA	NA
5	122,041	45.9	6,113	17.4	NA	NA	NA	NA
6	223,416	47.6	13,930	20.7	NA	NA	NA	NA
7	284,045	52.7	17,001	20.7	NA	NA	NA	NA
8	353,572	54.2	16,793	24.9	NA	NA	NA	NA
9	171,032	52.8	8,607	27.1	7,285	2.2	NA	NA
10	317,937	54.8	10,476	25.1	11,823	2.0	NA	NA
12	169,268	54.3	6,389	23.0	7,771	2.5	NA	NA
15	155,813	56.0	6,844	24.6	NA	NA	NA	NA
16	236,895	48.5	13,338	19.2	NA	NA	NA	NA
17	210,705	40.1	11,840	18.6	NA	NA	NA	NA
19	193,625	51.0	11,682	24.3	5,676	1.5	NA	NA
20	194,667	49.2	11,359	29.8	NA	NA	NA	NA
21	187,548	48.6	8,958	26.9	6,462	1.7	NA	NA
22	293,668	47.4	17,827	24.5	18,715	3.0	NA	NA
23	207,172	57.2	6,674	25.3	3,666	1.0	NA	NA
National	3,884,966	51.4	188,514	22.9	118,589	1.6	29,865	3.6

Note: Denominator is the enrollee population by sex and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple types of health insurance coverage. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B2-3. Enrollees by health insurance coverage, sex, and VISN (continued)

VISN	Tricare				Private Insurance				No Health Insurance Coverage			
	Male		Female		Male		Female		Male		Female	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	20,052	6.9	NA	NA	62,612	21.4	NA	NA	46,000	15.8	8,667	35.1
2	16,177	4.6	NA	NA	54,592	15.7	5,329	18.0	62,014	17.8	10,968	37.1
4	18,640	5.5	NA	NA	64,299	19.0	8,109	23.2	51,251	15.2	11,161	31.9
5	46,145	17.3	9,762	27.9	59,060	22.2	12,029	34.3	36,829	13.8	6,574	18.8
6	66,839	14.2	15,031	22.3	74,861	15.9	16,978	25.2	99,542	21.2	14,555	21.6
7	93,974	17.4	17,407	21.2	66,491	12.3	22,258	27.1	91,221	16.9	24,487	29.8
8	64,718	9.9	16,017	23.8	93,419	14.3	16,906	25.1	134,385	20.6	16,345	24.3
9	38,348	11.8	7,459	23.5	48,837	15.1	8,163	25.7	58,319	18.0	7,263	22.9
10	49,046	8.5	NA	NA	98,397	17.0	15,728	37.7	102,668	17.7	7,646	18.3
12	13,155	4.2	6,271	22.6	56,324	18.1	4,692	16.9	65,411	21.0	9,742	35.1
15	30,668	11.0	NA	NA	44,437	16.0	7,708	27.7	45,149	16.2	7,442	26.8
16	58,700	12.0	16,771	24.2	81,750	16.7	18,607	26.8	101,494	20.8	20,198	29.1
17	115,521	22.0	14,216	22.4	107,978	20.6	17,908	28.2	87,831	16.7	18,591	29.3
19	43,404	11.4	11,133	23.1	63,317	16.7	9,982	20.8	73,782	19.4	10,813	22.5
20	46,661	11.8	8,703	22.8	84,688	21.4	9,793	25.7	61,562	15.6	7,359	19.3
21	36,892	9.6	NA	NA	79,030	20.5	9,828	29.5	75,633	19.6	9,132	27.4
22	76,155	12.3	12,650	17.4	107,391	17.3	22,536	31.0	123,968	20.0	16,774	23.1
23	28,197	7.8	3,229	12.2	76,246	21.1	9,621	36.4	46,880	12.9	6,321	23.9
National	863,292	11.4	165,785	20.2	1,323,730	17.5	223,299	27.2	1,363,940	18.1	214,037	26.1

Note: Denominator is the enrollee population by sex and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple types of health insurance coverage. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B3-1. Enrollees with Medicare Part D drug coverage, by priority group, age, sex, and VISN

VISN	Priority Group						Age Group					
	P1-P3		P4-P6		P7-P8		<45		45-64		65+	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	20,617	29.9	18,032	39.5	18,294	39.0	NA	NA	NA	NA	50,474	34.5
2	22,672	31.6	21,533	38.0	39,161	44.9	NA	NA	8,631	35.9	73,732	39.6
4	16,551	23.2	22,605	35.2	27,604	38.5	NA	NA	NA	NA	63,315	33.6
5	12,289	21.8	9,302	27.6	11,552	30.3	NA	NA	NA	NA	29,998	26.2
6	27,614	21.5	19,195	32.3	18,433	37.5	NA	NA	7,300	24.9	57,942	28.9
7	51,952	31.0	24,747	36.3	25,635	39.2	NA	NA	NA	NA	87,112	34.7
8	48,729	28.5	44,037	43.1	41,149	42.4	NA	NA	7,737	22.3	123,549	39.2
9	21,386	22.2	18,482	38.6	14,214	40.1	NA	NA	NA	NA	45,776	31.1
10	43,736	27.9	33,692	35.4	33,217	43.2	NA	NA	NA	NA	102,141	34.8
12	19,837	29.6	19,432	37.5	20,267	35.7	NA	NA	NA	NA	54,347	33.7
15	20,946	28.8	17,069	34.8	13,710	33.6	NA	NA	NA	NA	44,442	31.2
16	34,749	27.4	23,098	34.0	21,398	38.4	NA	NA	8,525	23.8	65,105	31.5
17	25,455	20.4	17,861	31.6	15,120	36.7	NA	NA	4,185	14.6	54,251	28.5
19	24,654	20.9	14,577	32.0	15,300	36.7	NA	NA	NA	NA	48,806	27.9
20	31,517	28.9	20,270	35.1	15,514	39.5	NA	NA	NA	NA	58,205	32.1
21	24,338	26.5	21,354	37.1	20,334	43.3	NA	NA	NA	NA	58,794	34.0
22	48,835	34.5	37,008	39.6	35,197	46.1	NA	NA	NA	NA	103,725	38.7
23	29,382	25.8	15,006	34.9	16,169	28.5	NA	NA	NA	NA	55,876	27.8
National	525,258	26.9	397,300	36.3	402,270	39.3	46,879	35.9	100,359	25.1	1,177,589	33.2

Note: Denominator is the enrollee population with Medicare by priority group, age, or sex, and by VISN. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B3-1. Enrollees with Medicare Part D drug coverage, by priority group, age, sex, and VISN (continued)

VISN	Sex			
	Male		Female	
	Weighted N	%	Weighted N	%
1	55,185	35.2	NA	NA
2	80,473	38.7	2,893	37.6
4	64,385	32.3	NA	NA
5	31,975	26.2	NA	NA
6	62,206	27.8	3,036	21.8
7	97,393	34.3	4,941	29.1
8	129,699	36.7	4,215	25.1
9	51,811	30.3	2,270	26.4
10	107,522	33.8	3,123	29.8
12	57,656	34.1	NA	NA
15	49,722	31.9	NA	NA
16	76,830	32.4	2,416	18.1
17	55,481	26.3	2,956	25.0
19	49,929	25.8	4,602	39.4
20	64,923	33.4	2,378	20.9
21	63,832	34.0	2,193	24.5
22	116,164	39.6	4,877	27.4
23	58,851	28.4	1,705	25.6
National	1,274,037	32.8	50,791	26.9

Note: Denominator is the enrollee population with Medicare by priority group, age, or sex, and by VISN. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B3-2. Enrollee use of prescription medications, by VISN

VISN	Prescription Medications in the last 30 days									
	0		1-2		3-4		5 or more		Missing	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	50,830	16.1	69,871	22.1	67,005	21.2	121,728	38.4	7,255	2.3
2	50,245	13.3	66,173	17.5	71,302	18.9	175,945	46.6	14,063	3.7
4	56,075	15.0	56,456	15.1	70,383	18.9	178,447	47.9	11,383	3.1
5	43,061	14.3	53,483	17.8	61,669	20.5	136,387	45.3	6,419	2.1
6	76,441	14.2	83,537	15.6	90,830	16.9	271,796	50.6	14,311	2.7
7	66,119	10.6	104,452	16.8	109,092	17.6	321,862	51.8	19,563	3.1
8	82,581	11.5	109,266	15.2	142,027	19.7	367,493	51.1	17,844	2.5
9	42,646	12.0	48,517	13.6	60,508	17.0	194,597	54.7	9,294	2.6
10	68,557	11.0	115,589	18.6	124,584	20.0	295,893	47.6	16,981	2.7
12	50,832	15.0	58,609	17.3	61,057	18.0	159,367	46.9	9,787	2.9
15	38,800	12.7	48,738	15.9	58,243	19.0	150,662	49.2	9,566	3.1
16	61,158	11.0	96,499	17.3	106,905	19.2	280,541	50.3	12,622	2.3
17	85,716	14.6	113,997	19.4	107,068	18.2	269,247	45.7	12,590	2.1
19	88,395	20.7	63,922	14.9	72,512	16.9	194,630	45.5	8,453	2.0
20	88,457	20.4	71,331	16.5	84,254	19.4	181,700	41.9	7,757	1.8
21	64,556	15.4	96,330	23.0	75,218	18.0	173,611	41.4	9,168	2.2
22	136,537	19.7	131,585	19.0	127,594	18.4	277,892	40.1	18,983	2.7
23	49,737	12.8	76,021	19.6	76,484	19.7	173,649	44.7	12,675	3.3
National	1,200,740	14.3	1,464,375	17.5	1,566,737	18.7	3,925,448	46.9	218,715	2.6

Note: Denominator is the enrollee population who reported using prescription medications in the last 30 days by VISN. Percentages may not total 100 percent due to rounding.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B3-3. Enrollee use of prescription medications obtained from VA, by VISN

VISN	Prescription Medications in the last 30 Days									
	0		1-2		3-4		5 or more		Missing	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	86,579	27.3	57,632	18.2	41,650	13.2	70,149	22.2	60,680	19.2
2	133,993	35.5	41,754	11.1	41,873	11.1	91,407	24.2	68,701	18.2
4	107,147	28.7	54,611	14.7	44,109	11.8	97,082	26.0	69,795	18.7
5	102,591	34.1	36,915	12.3	34,816	11.6	74,595	24.8	52,101	17.3
6	140,412	26.2	67,329	12.5	66,573	12.4	167,087	31.1	95,513	17.8
7	191,151	30.8	83,462	13.4	73,621	11.9	181,639	29.2	91,214	14.7
8	191,698	26.7	99,435	13.8	93,386	13.0	229,736	31.9	104,957	14.6
9	92,410	26.0	45,749	12.9	39,776	11.2	123,170	34.6	54,458	15.3
10	174,792	28.1	95,083	15.3	81,351	13.1	180,445	29.0	89,934	14.5
12	80,668	23.8	50,112	14.8	46,017	13.5	100,025	29.4	62,830	18.5
15	95,001	31.0	33,215	10.9	35,112	11.5	92,763	30.3	49,919	16.3
16	165,339	29.6	75,681	13.6	58,784	10.5	179,093	32.1	78,828	14.1
17	156,954	26.7	97,044	16.5	64,473	11.0	166,703	28.3	103,445	17.6
19	111,708	26.1	48,884	11.4	50,666	11.8	115,756	27.1	100,897	23.6
20	114,874	26.5	56,527	13.0	51,017	11.8	110,425	25.5	100,655	23.2
21	115,077	27.5	68,600	16.4	47,296	11.3	109,160	26.1	78,750	18.8
22	194,054	28.0	92,772	13.4	82,329	11.9	164,750	23.8	158,686	22.9
23	100,021	25.7	58,763	15.1	50,968	13.1	108,808	28.0	70,005	18.0
National	2,354,470	28.1	1,163,568	13.9	1,003,817	12.0	2,362,793	28.2	1,491,368	17.8

Note: Denominator is the enrollee population by VISN. Percentages may not total 100 percent due to rounding.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B4-1. Enrollees who ever smoked, by priority group, age, sex, and VISN

VISN	Priority Group						Age Group					
	P1-P3		P4-P6		P7-P8		<45		45-64		65+	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	96,256	58.2	48,674	69.7	48,021	58.9	49,958	54.8	31,272	50.9	111,721	68.1
2	88,373	54.6	59,670	64.0	70,300	57.4	34,793	49.2	54,251	53.0	129,298	63.1
4	99,581	57.6	64,927	68.1	57,638	55.1	NA	NA	50,305	54.0	134,383	64.9
5	76,573	41.4	32,982	58.6	34,017	57.0	22,343	35.9	39,989	35.8	81,241	63.9
6	171,799	50.3	61,923	59.9	55,293	60.3	NA	NA	94,540	49.5	146,107	65.7
7	176,461	43.9	72,770	61.7	57,271	56.7	NA	NA	91,328	37.5	171,006	62.9
8	204,287	52.1	108,638	61.6	85,077	56.5	63,876	48.4	99,310	43.3	234,816	65.6
9	120,071	56.7	51,427	64.8	34,188	53.0	37,990	52.6	56,713	50.0	110,983	65.3
10	203,487	63.7	98,317	60.0	86,222	62.2	79,311	59.0	87,411	55.1	221,303	67.4
12	100,363	64.3	54,934	63.4	52,340	54.0	43,286	55.6	42,244	52.8	122,107	67.2
15	89,721	53.8	52,624	71.6	40,475	61.6	NA	NA	46,293	56.5	105,747	66.2
16	192,373	57.9	75,377	60.8	54,082	53.3	64,212	50.6	98,256	52.0	159,363	65.9
17	189,781	47.5	56,254	56.9	44,023	49.0	59,092	38.7	98,580	45.0	132,386	61.0
19	149,591	54.7	47,343	60.5	43,512	57.3	55,202	50.7	60,804	50.4	124,440	62.7
20	146,813	55.8	54,368	60.0	48,010	60.4	68,286	55.7	48,870	46.5	132,035	64.2
21	112,176	47.0	52,842	56.2	43,512	57.3	NA	NA	55,734	45.6	128,576	62.4
22	204,133	50.6	84,834	54.8	48,010	60.4	72,948	39.6	88,852	45.6	198,309	63.3
23	137,468	59.8	45,972	63.7	46,662	54.2	39,985	47.8	44,749	54.3	149,613	67.2
National	2,559,307	53.1	1,123,879	61.5	979,178	56.5	879,425	46.9	1,189,503	47.6	2,593,435	64.8

Note: Denominator is the enrollee population with Medicare by priority group, age, or sex, and by VISN. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B4-1. Enrollees who ever smoked, by priority group, age, sex, and VISN (continued)

VISN	Sex			
	Male		Female	
	Weighted N	%	Weighted N	%
1	183,657	62.9	9,294	37.6
2	205,661	59.1	12,681	42.8
4	211,045	62.5	11,102	31.8
5	132,433	49.8	11,140	31.8
6	263,565	56.1	25,449	37.8
7	284,045	52.7	22,457	27.4
8	377,570	57.9	20,433	30.3
9	189,566	58.5	16,120	50.8
10	371,111	64.0	16,914	40.5
12	195,689	62.7	11,949	43.1
15	168,120	60.4	14,700	52.9
16	289,284	59.2	32,548	47.0
17	262,689	50.0	27,369	43.1
19	218,058	57.4	22,388	46.5
20	230,546	58.3	18,645	48.8
21	198,752	51.5	12,928	38.8
22	333,999	53.9	26,110	35.9
23	220,503	60.9	13,843	52.4
National	4,336,292	57.4	326,071	39.7

Note: Denominator is the enrollee population by priority group, age, or sex, and by VISN.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B4-2. Enrollees who are current smokers, by priority group, age, sex, and VISN

VISN	Priority Group						Age Group					
	P1-P3		P4-P6		P7-P8		<45		45-64		65+	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	24,329	14.7	9,818	14.1	5,904	7.2	NA	NA	8,788	14.3	14,023	8.5
2	20,503	12.7	16,100	17.3	10,874	8.9	NA	NA	20,431	20.0	16,512	8.1
4	24,329	14.7	18,933	19.8	6,745	6.5	NA	NA	17,522	18.8	17,629	8.5
5	20,503	12.7	12,361	22.0	5,008	8.4	NA	NA	14,168	12.7	12,778	10.1
6	24,162	14.0	18,285	17.7	10,351	11.3	NA	NA	30,706	16.1	20,987	9.4
7	22,516	12.2	23,793	20.2	7,052	7.0	NA	NA	36,276	14.9	24,943	9.2
8	31,227	9.1	29,496	16.7	10,468	6.9	NA	NA	31,793	13.9	27,934	7.8
9	42,573	10.6	15,281	19.3	5,588	8.7	NA	NA	19,985	17.6	19,399	11.4
10	36,435	9.3	29,343	17.9	15,746	11.4	NA	NA	28,794	18.1	32,805	10.0
12	35,591	16.8	14,339	16.6	10,620	10.9	NA	NA	15,059	18.8	20,186	11.1
15	47,177	14.8	14,245	19.4	8,621	13.1	NA	NA	12,887	15.7	17,133	10.7
16	19,639	12.6	22,683	18.3	10,333	10.2	NA	NA	35,055	18.5	26,483	11.0
17	17,808	10.7	19,507	19.7	12,557	14.0	NA	NA	30,752	14.0	21,509	9.9
19	72,100	21.7	12,471	15.9	7,919	10.4	NA	NA	22,799	18.9	17,386	8.8
20	42,105	10.5	12,934	14.3	6,576	8.3	NA	NA	15,483	14.7	16,560	8.0
21	44,168	16.1	12,866	13.7	7,987	9.3	NA	NA	15,058	12.3	19,335	9.4
22	30,899	11.7	19,531	12.6	10,621	7.9	NA	NA	20,990	10.8	29,437	9.4
23	21,531	9.0	9,910	13.7	8,231	9.5	NA	NA	15,543	18.9	21,164	9.5
National	594,329	12.3	311,897	17.1	161,204	9.3	299,143	15.9	392,086	15.7	376,202	9.4

Note: Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life by VISN. Current smokers include both every-day smokers and some-day smokers. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B4-2. Enrollees who are current smokers, by priority group, age, sex, and VISN (continued)

VISN	Sex			
	Male		Female	
	Weighted N	%	Weighted N	%
1	38,257	13.1	NA	NA
2	43,853	12.6	3,624	12.2
4	46,379	13.7	NA	NA
5	36,083	13.6	3,802	10.8
6	51,876	11.0	7,987	11.9
7	65,781	12.2	7,638	9.3
8	71,629	11.0	NA	NA
9	51,241	15.8	5,220	16.4
10	86,739	15.0	NA	NA
12	41,468	13.3	NA	NA
15	36,038	13.0	4,636	16.7
16	88,510	18.1	16,607	24.0
17	67,554	12.9	6,615	10.4
19	52,323	13.8	12,234	25.4
20	45,703	11.6	4,707	12.3
21	38,691	10.0	4,968	6.8
22	61,246	9.9	NA	NA
23	40,190	11.1	3,456	13.1
National	963,563	12.8	103,868	12.6

Note: Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life by VISN. Current smokers include both every-day smokers and some-day smokers. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B4-3. Enrollees who are former smokers, by priority group, age, sex, and VISN

VISN	Priority Group						Age Group					
	P1-P3		P4-P6		P7-P8		<45		45-64		65+	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	70,549	42.7	38,135	54.6	41,544	51.0	NA	NA	22,315	36.3	95,196	58.0
2	65,930	40.7	42,625	45.7	57,875	47.2	NA	NA	32,789	32.1	109,383	53.4
4	74,226	43.0	45,195	47.4	49,008	46.9	NA	NA	31,891	34.3	113,768	54.9
5	52,511	28.4	20,025	35.6	28,436	47.6	NA	NA	25,248	22.6	66,707	52.5
6	138,763	40.6	42,003	40.6	44,489	48.5	NA	NA	63,343	33.2	121,714	54.7
7	132,849	33.0	47,643	40.4	49,114	48.6	NA	NA	54,693	22.5	142,945	52.6
8	165,887	42.3	76,033	43.1	72,807	48.3	NA	NA	66,654	29.1	200,869	56.1
9	83,716	39.5	35,259	44.4	28,194	43.7	NA	NA	36,032	31.7	90,223	53.1
10	153,127	48.0	66,880	40.8	68,948	49.7	NA	NA	57,123	36.0	183,189	55.8
12	79,133	50.7	38,400	44.3	41,519	42.8	NA	NA	25,805	32.2	99,824	54.9
15	70,380	42.2	36,820	50.1	30,590	46.6	NA	NA	32,274	39.4	85,390	53.5
16	118,335	35.6	50,737	40.9	42,157	41.5	NA	NA	62,373	33.0	128,897	53.3
17	144,630	36.2	35,205	35.6	30,541	34.0	37,183	24.3	66,792	30.5	106,400	49.0
19	103,703	37.9	33,571	42.9	35,135	46.3	NA	NA	37,477	31.0	104,102	52.5
20	112,855	42.9	40,029	44.1	40,770	51.3	49,489	40.4	32,947	31.3	111,219	54.0
21	87,514	36.6	39,288	41.8	37,812	43.9	NA	NA	38,856	31.8	106,379	51.6
22	165,466	41.0	64,696	41.8	58,989	43.8	57,162	31.0	66,165	33.9	165,825	52.9
23	106,839	46.5	34,414	47.7	41,500	48.0	31,211	37.3	28,669	34.8	122,872	55.2
National	1,926,412	40.0	786,957	43.0	799,428	46.2	576,446	30.7	781,448	31.3	2,154,902	53.9

Note: Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life by VISN. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B4-3. Enrollees who are former smokers, by priority group, age, sex, and VISN (continued)

VISN	Sex			
	Male		Female	
	Weighted N	%	Weighted N	%
1	142,828	48.9	7,400	30.0
2	157,409	45.2	9,021	30.5
4	160,900	47.6	7,528	21.5
5	94,046	35.4	6,926	19.8
6	207,960	44.3	17,294	25.7
7	214,838	39.9	14,767	18.0
8	299,143	45.9	15,584	23.1
9	136,778	42.2	10,391	32.7
10	277,635	47.9	11,320	27.1
12	150,784	48.3	8,268	29.8
15	128,221	46.1	9,569	34.4
16	195,527	40.0	15,703	22.7
17	189,763	36.1	20,613	32.5
19	162,462	42.8	9,947	20.7
20	179,818	45.5	13,837	36.2
21	155,411	40.3	9,203	27.6
22	268,110	43.3	21,041	28.9
23	172,891	47.7	9,861	37.3
National	3,294,524	43.6	218,272	26.6

Note: Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life by VISN. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B4-4. Enrollees who are unsuccessful quitters, by priority group, age, sex, and VISN

VISN	Priority Group						Age Group					
	P1-P3		P4-P6		P7-P8		<45		45-64		65+	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	11,336	6.9	4,423	6.3	NA	NA	NA	NA	4,329	7.0	7,187	4.4
2	11,200	6.9	7,462	8.0	8,253	6.7	NA	NA	11,390	11.1	7,732	3.8
4	9,225	5.3	9,924	10.4	NA	NA	NA	NA	9,025	9.7	7,881	3.8
5	12,850	6.9	7,281	12.9	2,626	4.4	NA	NA	9,894	8.9	5,471	4.3
6	18,217	5.3	10,502	10.2	NA	NA	NA	NA	17,979	9.4	9,183	4.1
7	20,000	5.0	16,393	13.9	NA	NA	NA	NA	22,262	9.1	12,996	4.8
8	21,078	5.4	15,844	9.0	NA	NA	NA	NA	19,262	8.4	12,154	3.4
9	23,240	11.0	8,297	10.5	3,313	5.1	NA	NA	9,653	8.5	10,214	6.0
10	18,193	5.7	11,821	7.2	NA	NA	NA	NA	10,244	6.5	16,917	5.1
12	11,858	7.6	7,877	9.1	NA	NA	NA	NA	8,623	10.8	9,970	5.5
15	11,156	6.7	8,005	10.9	NA	NA	NA	NA	6,375	7.8	7,573	4.7
16	41,293	12.4	12,185	9.8	4,046	4.0	NA	NA	17,915	9.5	14,025	5.8
17	26,576	6.6	11,259	11.4	5,926	6.6	NA	NA	16,435	7.5	9,725	4.5
19	27,202	9.9	6,694	8.6	NA	NA	NA	NA	12,048	10.0	7,814	3.9
20	17,526	6.7	5,275	5.8	NA	NA	NA	NA	6,662	6.3	6,419	3.1
21	9,427	3.9	4,314	4.6	3,941	4.6	NA	NA	4,880	4.0	7,380	3.6
22	19,145	4.7	9,182	5.9	4,378	3.3	NA	NA	10,275	5.3	13,976	4.5
23	14,978	6.5	3,873	5.4	4,389	5.1	NA	NA	6,308	7.7	9,992	4.5
National	324,502	6.7	160,612	8.8	72,674	4.2	177,618	9.5	203,559	8.1	176,612	4.4

Note: Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life and currently smoke, by VISN. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B4-4. Enrollees who are unsuccessful quitters, by priority group, age, sex, and VISN (continued)

VISN	Sex			
	Male		Female	
	Weighted N	%	Weighted N	%
1	18,763	6.4	NA	NA
2	24,906	7.2	NA	NA
4	19,711	5.8	NA	NA
5	20,729	7.8	NA	NA
6	27,656	5.9	NA	NA
7	36,681	6.8	NA	NA
8	38,755	5.9	NA	NA
9	31,091	9.6	NA	NA
10	34,318	5.9	NA	NA
12	21,763	7.0	NA	NA
15	19,187	6.9	NA	NA
16	48,666	10.0	NA	NA
17	39,398	7.5	NA	NA
19	30,421	8.0	NA	NA
20	23,689	6.0	NA	NA
21	15,952	4.1	NA	NA
22	30,542	4.9	NA	NA
23	21,741	6.0	NA	NA
National	503,969	6.7	53,819	6.6

Note: Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life and currently smoke, by VISN. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B5-1. Enrollees' perceived health status, by priority group and VISN

VISN	Priority Group 1-3				Priority Group 4-6				Priority Group 7-8			
	Excellent/Very Good/Good		Fair/Poor		Excellent/Very Good/Good		Fair/Poor		Excellent/Very Good/Good		Fair/Poor	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	121,052	73.2	43,473	26.3	55,312	79.2	13,928	19.9	69,917	85.8	10,973	13.5
2	108,635	67.1	52,778	32.6	68,506	73.5	23,230	24.9	95,894	78.2	25,736	21.0
4	126,169	73.0	44,925	26.0	71,332	74.8	23,535	24.7	87,630	83.8	15,480	14.8
5	140,721	76.1	43,196	23.4	39,529	70.2	16,289	28.9	48,862	81.8	9,988	16.7
6	245,495	71.8	92,409	27.0	73,117	70.7	29,973	29.0	71,823	78.4	19,249	21.0
7	254,427	63.3	145,505	36.2	81,116	68.8	35,126	29.8	81,289	80.5	19,284	19.1
8	280,116	71.4	111,642	28.5	133,595	75.8	41,761	23.7	122,101	81.0	27,927	18.5
9	146,181	69.1	63,661	30.1	53,524	67.4	24,932	31.4	50,094	77.6	14,309	22.2
10	243,522	76.3	74,176	23.2	119,809	73.1	42,881	26.2	104,092	75.1	33,547	24.2
12	102,336	65.6	52,857	33.9	63,382	73.2	22,492	26.0	81,087	83.6	14,913	15.4
15	125,932	75.5	40,741	24.4	51,524	70.1	21,081	28.7	52,773	80.4	12,443	18.9
16	219,100	66.0	111,329	33.5	85,046	68.6	38,259	30.8	78,144	76.9	22,862	22.5
17	286,102	71.5	111,862	28.0	69,757	70.6	28,604	28.9	72,283	80.4	17,128	19.1
19	201,075	73.5	66,435	24.3	54,942	70.2	21,779	27.8	61,375	80.8	13,977	18.4
20	194,568	73.9	66,539	25.3	68,116	75.1	22,351	24.6	65,382	82.3	13,511	17.0
21	165,597	69.3	72,304	30.3	74,706	79.5	18,784	20.0	67,076	77.9	17,660	20.5
22	289,181	71.7	111,597	27.7	118,779	76.8	34,897	22.6	111,991	83.2	22,146	16.5
23	164,232	71.4	57,138	24.9	52,569	72.8	19,486	27.0	71,001	82.0	14,813	17.1
National	3,414,442	70.9	1,362,567	28.3	1,334,659	73.0	479,386	26.2	1,392,814	80.4	325,946	18.8

Note: Denominator is the enrollee population by priority group and VISN. Some rows sum to less than 100 percent due to a small percentage of enrollees (<1%) who did not respond to this question.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B5-2. Enrollees' perceived health status, by age and VISN

VISN	<45				45-64				65+			
	Excellent/Very Good/Good		Fair/Poor		Excellent/Very Good/Good		Fair/Poor		Excellent/Very Good/Good		Fair/Poor	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	70,004	76.8	NA	NA	49,079	79.9	11,969	19.5	127,198	77.5	35,236	21.5
2	45,063	63.8	NA	NA	75,514	73.8	26,360	25.8	152,458	74.4	50,532	24.7
4	61,614	85.0	NA	NA	73,868	79.3	18,843	20.2	149,650	72.2	54,198	26.2
5	55,998	90.0	NA	NA	83,951	75.2	27,407	24.5	89,162	70.1	35,861	28.2
6	101,161	81.7	NA	NA	132,507	69.4	55,310	29.0	156,768	70.5	63,731	28.7
7	65,643	62.0	NA	NA	160,857	66.1	80,446	33.0	190,333	70.0	79,292	29.2
8	104,600	79.3	NA	NA	159,774	69.7	69,246	30.2	271,438	75.9	84,716	23.7
9	57,188	79.2	NA	NA	77,832	68.6	34,258	30.2	114,778	67.6	53,634	31.6
10	106,954	79.6	NA	NA	123,474	77.8	34,895	22.0	236,995	72.1	88,308	26.9
12	57,330	73.6	NA	NA	55,746	69.6	23,764	29.7	133,728	73.6	45,947	25.3
15	55,599	86.3	NA	NA	60,866	74.3	20,908	25.5	113,764	71.2	44,549	27.9
16	84,758	66.8	NA	NA	126,282	66.8	61,867	32.7	171,251	70.8	68,388	28.3
17	114,840	75.2	NA	NA	159,380	72.8	58,710	26.8	153,922	70.9	60,986	28.1
19	86,148	79.2	NA	NA	88,703	73.5	31,336	26.0	142,541	71.9	53,143	26.8
20	93,192	76.0	NA	NA	83,161	79.1	21,916	20.8	151,714	73.7	51,076	24.8
21	61,962	68.5	NA	NA	89,786	73.5	31,985	26.2	155,630	75.5	49,088	23.8
22	138,092	75.0	NA	NA	148,582	76.2	46,060	23.6	233,278	74.4	76,466	24.4
23	55,470	66.3	NA	NA	61,097	74.2	20,604	25.0	171,235	76.9	50,013	22.5
National	1,415,616	75.4	446,851	23.8	1,810,458	72.4	675,884	27.0	2,915,842	72.9	1,045,164	26.1

Note: Denominator is the enrollee population by age and VISN. Some rows sum to less than 100 percent due to a small percentage of enrollees (<1%) who did not respond to this question. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B5-3. Enrollees' perceived health status, by sex and VISN

VISN	Male				Female			
	Excellent/Very Good/Good		Fair/Poor		Excellent/Very Good/Good		Fair/Poor	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	225,670	77.3	64,351	22.0	20,611	83.5	4,023	16.3
2	250,525	72.0	94,877	27.3	22,510	76.1	6,867	23.2
4	255,825	75.7	78,301	23.2	29,306	83.9	5,640	16.1
5	198,364	74.6	65,511	24.6	30,748	87.7	3,961	11.3
6	339,658	72.3	125,273	26.7	50,778	75.5	16,357	24.3
7	362,059	67.2	172,910	32.1	54,773	66.7	27,005	32.9
8	483,296	74.1	166,626	25.6	52,516	77.9	14,703	21.8
9	225,009	69.5	96,125	29.7	24,789	78.1	6,777	21.4
10	435,829	75.2	140,540	24.2	31,595	75.7	10,064	24.1
12	226,882	72.7	82,706	26.5	19,923	71.9	7,556	27.3
15	207,581	74.6	69,123	24.8	22,649	81.5	5,143	18.5
16	328,402	67.2	157,037	32.2	53,889	77.8	15,412	22.2
17	380,034	72.4	142,247	27.1	48,108	75.7	15,346	24.2
19	282,574	74.4	88,986	23.4	34,818	72.4	13,205	27.4
20	300,826	76.1	91,504	23.1	27,240	71.4	10,897	28.5
21	282,530	73.3	100,614	26.1	24,848	74.6	8,134	24.4
22	465,452	75.1	150,539	24.3	54,498	75.0	18,101	24.9
23	266,688	73.6	86,210	23.8	21,114	80.0	5,227	19.8
National	5,517,203	73.0	1,973,480	26.1	624,713	76.1	194,419	23.7

Note: Denominator is the enrollee population by sex group and VISN.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B6-1. Enrollees who access the internet, at least occasionally, by priority group, age, sex, and VISN

VISN	Priority Group						Age Group					
	P1-P3		P4-P6		P7-P8		<45		45-64		65+	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	147,375	89.1	49,573	71.0	66,130	81.1	91,173	100.0	56,319	91.6	115,586	70.5
2	141,665	87.5	65,765	70.5	89,109	72.7	67,771	95.9	91,737	89.7	137,031	66.9
4	150,546	87.1	63,973	67.1	74,381	71.2	72,513	100.0	84,042	90.3	132,345	63.9
5	169,354	91.5	39,329	69.8	46,107	77.2	62,202	100.0	106,212	95.1	86,376	67.9
6	301,307	88.1	73,815	71.4	73,869	80.6	117,652	95.1	178,064	93.3	153,274	68.9
7	358,716	89.2	87,851	74.5	81,535	80.7	105,228	99.4	230,672	94.7	192,201	70.7
8	358,349	91.4	125,712	71.3	127,757	84.8	129,644	98.2	207,986	90.7	274,188	76.6
9	178,550	84.4	54,418	68.6	51,536	79.9	71,544	99.1	100,658	88.7	112,303	66.1
10	273,894	85.8	117,684	71.8	114,341	82.5	131,500	97.9	143,076	90.2	231,344	70.4
12	136,684	87.6	64,512	74.5	76,283	78.6	77,881	100.0	72,868	91.0	126,729	69.7
15	147,318	88.3	48,290	65.7	48,020	73.1	63,900	99.2	73,806	90.1	105,922	66.3
16	298,593	89.9	89,858	72.5	79,124	77.9	125,557	98.9	173,235	91.6	168,783	69.8
17	356,501	89.2	70,924	71.7	77,982	86.8	151,359	99.1	199,630	91.2	154,418	71.2
19	239,921	87.7	57,823	73.9	61,443	80.9	104,436	96.0	113,945	94.4	140,806	71.0
20	240,007	91.1	69,116	76.2	69,012	86.8	121,561	99.2	99,745	94.9	156,830	76.2
21	212,530	89.0	72,297	77.0	73,654	85.5	90,230	99.7	115,828	94.8	152,423	73.9
22	373,248	92.6	119,303	77.1	116,599	86.6	184,205	100.0	182,200	93.5	242,745	77.4
23	188,571	82.0	50,386	69.8	62,794	72.6	81,391	97.2	76,046	92.4	144,314	64.9
National	4,273,129	88.7	1,320,629	72.2	1,389,676	80.3	1,849,748	98.6	2,306,067	92.3	2,827,619	70.7

Note: Denominator is the total enrollee population by priority group, age, or sex, and by VISN.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B6-1. Enrollees who access the internet, at least occasionally, by priority group, age, sex, and VISN (continued)

VISN	Sex			
	Male		Female	
	Weighted N	%	Weighted N	%
1	239,938	82.2	23,141	93.7
2	268,789	77.2	27,750	93.8
4	256,592	76.0	32,308	92.5
5	220,778	83.0	34,011	97.1
6	384,294	81.8	64,697	96.2
7	449,814	83.5	78,288	95.4
8	547,554	84.0	64,265	95.4
9	254,945	78.7	29,559	93.1
10	466,790	80.5	39,130	93.8
12	251,134	80.5	26,344	95.0
15	217,451	78.2	26,177	94.2
16	400,597	82.0	66,979	96.6
17	445,819	84.9	59,588	93.8
19	312,709	82.3	46,477	96.6
20	341,489	86.4	36,646	96.0
21	328,383	85.2	30,097	90.3
22	540,004	87.1	69,146	95.1
23	276,974	76.5	24,777	93.8
National	6,204,053	82.1	779,380	94.9

Note: Denominator is the total enrollee population by priority group, age, or sex, and by VISN.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B6-2. Enrollees who send or receive text messages on their cell phone, by priority group, age, sex, and VISN

VISN	Priority Group						Age Group					
	P1-P3		P4-P6		P7-P8		<45		45-64		65+	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	142,339	86.1	45,858	65.7	56,704	69.6	91,173	100.0	56,677	92.2	97,052	59.2
2	139,366	86.1	66,419	71.2	84,042	68.6	68,575	97.0	94,820	92.7	126,433	61.7
4	146,914	85.0	62,207	65.2	71,535	68.4	71,307	98.3	86,188	92.6	123,161	59.5
5	167,860	90.7	39,850	70.8	42,370	70.9	62,202	100.0	108,155	96.8	79,724	62.7
6	309,343	90.5	77,757	75.2	71,570	78.1	120,702	97.5	183,476	96.2	154,493	69.5
7	362,064	90.0	95,365	80.8	76,808	76.0	102,051	96.4	236,770	97.3	195,416	71.9
8	359,359	91.6	131,650	74.7	118,594	78.7	131,968	100.0	218,347	95.2	259,287	72.5
9	181,671	85.8	55,717	70.2	51,364	79.6	70,736	98.0	107,571	94.8	110,444	65.0
10	275,123	86.2	123,588	75.5	108,668	78.4	131,743	98.1	149,006	93.9	226,630	69.0
12	130,305	83.5	61,541	71.1	73,001	75.3	76,756	98.6	74,043	92.5	114,049	62.8
15	147,805	88.6	51,016	69.4	46,842	71.3	63,900	99.2	76,419	93.3	105,345	66.0
16	302,202	91.0	98,200	79.2	82,579	81.3	125,557	98.9	179,554	95.0	177,870	73.6
17	364,906	91.3	80,668	81.6	78,206	87.0	152,738	100.0	209,140	95.5	161,903	74.6
19	236,968	86.6	57,304	73.2	60,463	79.6	103,922	95.5	113,554	94.1	137,259	69.2
20	229,790	87.3	65,767	72.5	64,141	80.7	118,844	96.9	97,845	93.1	143,009	69.5
21	214,678	89.9	68,694	73.1	70,031	81.3	90,521	100.0	116,633	95.4	146,249	70.9
22	370,657	91.9	118,233	76.4	112,228	83.4	183,403	99.6	184,198	94.5	233,518	74.5
23	190,022	82.7	50,187	69.5	59,559	68.8	81,062	96.9	76,969	93.5	141,739	63.7
National	4,271,372	88.7	1,350,024	73.8	1,328,707	76.7	1,847,158	98.4	2,369,364	94.8	2,733,580	68.3

Note: Denominator is the total enrollee population by priority group, age, or sex, and by VISN.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B6-2. Enrollees who send or receive text messages on their cell phone, by priority group, age, sex, and VISN (continued)

VISN	Sex			
	Male		Female	
	Weighted N	%	Weighted N	%
1	222,021	76.0	22,880	92.6
2	261,616	75.1	28,212	95.3
4	248,200	73.5	32,456	92.9
5	216,189	81.3	33,892	96.7
6	393,542	83.8	65,128	96.8
7	457,889	85.0	76,348	93.0
8	544,887	83.6	64,715	96.0
9	258,628	79.9	30,124	94.9
10	467,828	80.7	39,550	94.8
12	238,951	76.6	25,897	93.4
15	219,514	78.9	26,149	94.1
16	415,545	85.1	67,436	97.3
17	463,140	88.2	60,640	95.5
19	308,772	81.3	45,963	95.5
20	323,604	81.9	36,094	94.6
21	322,677	83.7	30,725	92.2
22	530,744	85.6	70,375	96.8
23	275,793	76.2	23,976	90.8
National	6,169,541	81.7	780,561	95.0

Note: Denominator is the total enrollee population by priority group, age, or sex, and by VISN.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B6-3. Enrollees' readiness to use Internet for VA information and (tele) health-related activities, by VISN

VISN	Fill out health forms		Join online support group		Refill medication prescription		Watch educational health videos	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	218,909	69.1	131,364	41.5	226,835	71.6	190,540	60.2
2	244,288	64.7	137,234	36.3	255,219	67.6	217,906	57.7
4	227,991	61.2	129,128	34.6	250,786	67.3	204,340	54.8
5	220,287	73.2	147,135	48.9	233,994	77.7	214,181	71.2
6	402,720	75.0	244,102	45.5	422,540	78.7	377,816	70.4
7	452,396	72.8	267,189	43.0	485,675	78.2	415,660	66.9
8	522,180	72.6	297,045	41.3	556,431	77.4	486,193	67.6
9	242,300	68.1	127,359	35.8	258,577	72.7	211,117	59.4
10	416,861	67.1	220,340	35.4	450,310	72.4	347,555	55.9
12	223,234	65.7	122,789	36.2	241,471	71.1	204,304	60.2
15	196,057	64.1	106,752	34.9	212,301	69.4	171,811	56.1
16	390,438	70.0	212,574	38.1	430,232	77.1	359,898	64.5
17	458,440	77.9	296,441	50.4	476,549	81.0	414,767	70.5
19	302,596	70.7	154,341	36.1	319,537	74.7	264,769	61.9
20	312,257	72.0	167,651	38.7	328,754	75.8	278,295	64.2
21	312,079	74.5	192,435	45.9	327,045	78.1	282,799	67.5
22	521,609	75.3	323,639	46.7	523,721	75.6	470,461	67.9
23	228,544	58.8	124,973	32.2	256,176	65.9	213,345	54.9
National	5,893,186	70.4	3,402,490	40.6	6,256,151	74.7	5,325,757	63.6

Note: Denominator is the enrollee population who reported that they use the Internet at least occasionally by VISN.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B6-3. Enrollees' readiness to use Internet for VA information and (tele) health-related activities, by VISN (continued)

VISN	Complete health assessment to measure stress/anxiety		Schedule medical appointments		Access personal health record		Access or X-ray test results	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	182,334	57.6	227,234	71.8	238,017	75.2	236,720	74.7
2	199,317	52.8	255,528	67.6	262,800	69.6	262,121	69.4
4	189,526	50.8	243,060	65.2	253,723	68.1	253,253	67.9
5	193,076	64.1	232,159	77.1	234,323	77.8	233,485	77.6
6	358,278	66.7	431,156	80.3	431,638	80.4	427,436	79.6
7	379,732	61.1	479,270	77.2	482,921	77.8	473,011	76.2
8	440,914	61.3	555,485	77.2	560,817	78.0	551,274	76.6
9	197,125	55.4	255,915	72.0	257,995	72.6	256,959	72.3
10	348,527	56.1	443,484	71.3	454,938	73.2	450,016	72.4
12	189,748	55.9	245,728	72.3	251,717	74.1	252,253	74.3
15	155,582	50.8	207,373	67.8	210,428	68.8	210,464	68.8
16	345,926	62.0	414,190	74.3	421,009	75.5	417,806	74.9
17	401,551	68.2	482,522	82.0	478,151	81.2	471,595	80.1
19	253,160	59.2	319,593	74.7	319,680	74.7	323,135	75.5
20	266,320	61.4	329,417	76.0	335,655	77.4	332,930	76.8
21	261,506	62.4	327,878	78.3	326,800	78.0	329,250	78.6
22	444,706	64.2	552,961	79.8	546,113	78.9	540,983	78.1
23	185,038	47.6	251,489	64.7	249,797	64.3	247,882	63.8
National	4,992,366	59.6	6,254,443	74.7	6,316,522	75.4	6,270,572	74.9

Note: Denominator is the enrollee population who reported that they use the Internet at least occasionally by VISN.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B6-3. Enrollees' readiness to use Internet for VA information and (tele) health-related activities, by VISN (continued)

VISN	Use app to track health measures		Receive health-related text messages on mobile device		Communicate with providers	
	Weighted N	%	Weighted N	%	Weighted N	%
1	190,492	60.2	211,830	66.9	227,368	71.8
2	215,546	57.1	241,863	64.0	254,060	67.3
4	206,598	55.4	242,252	65.0	244,465	65.6
5	207,435	68.9	227,024	75.4	235,031	78.1
6	373,339	69.5	414,088	77.1	426,909	79.5
7	400,453	64.5	462,899	74.5	479,393	77.2
8	463,664	64.5	535,066	74.4	551,622	76.7
9	218,978	61.6	254,003	71.4	255,026	71.7
10	377,235	60.7	425,549	68.5	441,204	71.0
12	209,052	61.5	235,782	69.4	240,427	70.8
15	175,445	57.3	199,059	65.1	205,558	67.2
16	355,560	63.8	414,657	74.3	421,225	75.5
17	425,872	72.4	470,946	80.0	474,094	80.5
19	270,214	63.1	310,623	72.6	321,193	75.1
20	285,140	65.8	316,860	73.1	336,083	77.5
21	281,685	67.2	320,000	76.4	318,534	76.0
22	483,898	69.9	525,645	75.9	557,132	80.4
23	220,740	56.8	252,963	65.1	251,956	64.8
National	5,361,344	64.0	6,061,108	72.4	6,241,278	74.5

Note: Denominator is the enrollee population who reported that they use the Internet at least occasionally by VISN.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-1. Enrollees' perceptions of VA health care services at a VA facility, by VISN

VISN	Easy to get appointments within reasonable time		Available appointments at convenient hours/days		Appointments took place as scheduled		Easy access to the VA facility		Short wait times after arriving for appointment	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	181,236	57.2	189,958	60.0	191,748	60.5	180,375	57.0	180,067	56.9
2	177,949	47.1	181,071	47.9	190,572	50.5	178,434	47.2	182,347	48.3
4	196,694	52.8	204,810	54.9	210,395	56.4	206,642	55.4	209,548	56.2
5	126,043	41.9	133,471	44.3	144,730	48.1	136,551	45.4	137,664	45.7
6	238,971	44.5	261,833	48.8	270,238	50.3	268,579	50.0	267,097	49.7
7	273,870	44.1	288,196	46.4	319,308	51.4	310,790	50.0	291,830	47.0
8	371,745	51.7	403,808	56.1	434,411	60.4	425,621	59.2	413,699	57.5
9	181,188	51.0	193,210	54.3	201,286	56.6	191,311	53.8	189,454	53.3
10	326,707	52.6	336,787	54.2	343,822	55.3	352,803	56.8	338,616	54.5
12	191,394	56.4	194,351	57.2	207,040	61.0	198,522	58.4	200,596	59.1
15	161,555	52.8	169,562	55.4	171,674	56.1	168,913	55.2	167,859	54.9
16	254,865	45.7	282,399	50.6	300,641	53.9	286,933	51.4	273,256	49.0
17	252,752	42.9	264,399	44.9	282,623	48.0	290,362	49.3	250,683	42.6
19	195,819	45.8	209,169	48.9	231,319	54.1	223,680	52.3	221,537	51.8
20	177,759	41.0	201,736	46.5	219,550	50.6	200,861	46.3	202,411	46.7
21	188,047	44.9	206,102	49.2	215,588	51.5	215,239	51.4	203,230	48.5
22	281,730	40.7	338,159	48.8	356,073	51.4	337,177	48.7	337,822	48.8
23	205,364	52.9	214,038	55.1	229,646	59.1	211,866	54.5	221,278	56.9
National	3,983,690	47.6	4,273,060	51.0	4,520,664	54.0	4,384,657	52.3	4,288,992	51.2

Note: Denominator is the enrollee population that used any VA health care services (at a VA facility) on or after January 1, 2021.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-1. Enrollees' perceptions of VA health care services at a VA facility, by VISN (continued)

VISN	Getting around facility was easy		Personnel were welcoming and helpful	
	Weighted N	%	Weighted N	%
1	191,047	60.3	199,603	63.0
2	188,134	49.8	193,295	51.2
4	216,160	58.0	219,811	59.0
5	148,194	49.2	150,278	49.9
6	281,910	52.5	285,217	53.1
7	327,269	52.7	322,391	51.9
8	449,665	62.5	441,515	61.4
9	189,054	53.2	198,858	55.9
10	358,280	57.6	356,912	57.4
12	209,154	61.6	209,713	61.7
15	177,043	57.9	174,057	56.9
16	316,824	56.8	307,325	55.1
17	289,510	49.2	295,453	50.2
19	230,219	53.8	231,609	54.1
20	211,727	48.8	223,494	51.6
21	227,310	54.3	229,561	54.8
22	353,229	51.0	381,721	55.1
23	228,893	58.9	224,487	57.8
National	4,593,620	54.8	4,645,300	55.5

Note: Denominator is the enrollee population that used any VA health care services (at a VA facility) on or after January 1, 2021.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-1a. Enrollees' perceptions of health care services at non-VA facility, by VISN

VISN	Easy to get appointments within reasonable time		Available appointments at convenient hours/days		Appointments took place as scheduled		Easy access to the VA facility		Short wait times after arriving for appointment	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	69,239	21.9	73,721	23.3	74,105	23.4	74,551	23.5	71,028	22.4
2	53,166	14.1	53,702	14.2	56,430	14.9	51,426	13.6	50,608	13.4
4	83,732	22.5	85,650	23.0	88,804	23.8	87,862	23.6	88,082	23.6
5	65,584	21.8	66,496	22.1	68,288	22.7	64,251	21.3	66,107	22.0
6	124,427	23.2	129,774	24.2	136,803	25.5	137,664	25.6	131,226	24.4
7	149,772	24.1	164,226	26.4	171,426	27.6	169,175	27.2	152,539	24.6
8	174,793	24.3	181,960	25.3	183,611	25.5	181,387	25.2	175,436	24.4
9	87,760	24.7	91,425	25.7	93,225	26.2	92,670	26.1	87,343	24.6
10	145,244	23.4	147,811	23.8	153,169	24.6	154,256	24.8	150,250	24.2
12	85,479	25.2	84,363	24.8	90,748	26.7	93,756	27.6	83,678	24.6
15	81,131	26.5	81,603	26.7	89,493	29.2	86,711	28.3	83,852	27.4
16	137,129	24.6	146,897	26.3	145,414	26.1	149,179	26.7	137,857	24.7
17	132,036	22.4	134,849	22.9	142,344	24.2	143,418	24.4	136,655	23.2
19	120,372	28.1	123,322	28.8	137,103	32.0	127,115	29.7	136,413	31.9
20	129,203	29.8	138,634	32.0	151,243	34.9	151,993	35.1	149,191	34.4
21	97,997	23.4	105,505	25.2	109,078	26.0	103,115	24.6	106,395	25.4
22	149,065	21.5	155,410	22.4	163,032	23.5	161,157	23.3	139,722	20.2
23	112,899	29.1	115,885	29.8	117,265	30.2	115,470	29.7	111,939	28.8
National	1,999,029	23.9	2,081,231	24.8	2,171,581	25.9	2,145,154	25.6	2,058,323	24.6

Note: Denominator is the enrollee population that used health care services (at a provider other than VA) on or after January 1, 2021.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-1a. Enrollees' perceptions of health care services at non-VA facility, by VISN (continued)

VISN	Getting around facility was easy		Personnel were welcoming and helpful	
	Weighted N	%	Weighted N	%
1	75,169	23.7	75,283	23.8
2	56,551	15.0	56,345	14.9
4	90,434	24.3	85,788	23.0
5	70,405	23.4	68,919	22.9
6	139,577	26.0	136,594	25.4
7	174,289	28.1	171,021	27.5
8	187,501	26.1	186,655	26.0
9	93,110	26.2	92,103	25.9
10	154,335	24.8	156,877	25.2
12	86,819	25.6	90,676	26.7
15	89,850	29.4	88,172	28.8
16	156,267	28.0	153,893	27.6
17	144,713	24.6	140,943	23.9
19	138,314	32.3	135,642	31.7
20	158,380	36.5	149,722	34.5
21	114,216	27.3	110,006	26.3
22	163,121	23.6	164,148	23.7
23	115,965	29.8	118,268	30.4
National	2,209,015	26.4	2,181,058	26.0

Note: Denominator is the enrollee population that used health care services (at a provider other than VA) on or after January 1, 2021.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-2. Enrollees who indicated “satisfied” or “very satisfied” about the health care services received at a VA facility, by VISN

VISN	Respect shown to you by health care professionals		How clearly your health care providers explained your health problems		How clearly your health care providers explained options and choices about care with you		Opportunities for you to participate in decisions about your care		The way providers listened to you	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	198,001	62.5	191,358	60.4	181,423	57.3	183,736	58.0	186,566	58.9
2	193,418	51.2	184,403	48.8	180,893	47.9	180,080	47.7	183,172	48.5
4	219,164	58.8	207,854	55.8	202,843	54.4	203,087	54.5	205,448	55.1
5	145,588	48.4	142,436	47.3	137,871	45.8	135,583	45.0	139,216	46.2
6	289,434	53.9	274,796	51.2	271,036	50.5	271,898	50.6	271,836	50.6
7	335,799	54.1	319,672	51.5	296,568	47.7	296,771	47.8	303,123	48.8
8	448,886	62.4	430,281	59.8	419,771	58.4	417,566	58.1	418,652	58.2
9	203,822	57.3	194,172	54.6	187,000	52.6	184,011	51.8	188,381	53.0
10	354,783	57.1	341,888	55.0	333,231	53.6	341,421	54.9	332,759	53.5
12	208,735	61.5	192,870	56.8	186,280	54.8	190,422	56.1	194,095	57.1
15	175,214	57.3	163,118	53.3	156,768	51.2	157,783	51.6	161,903	52.9
16	312,869	56.1	291,666	52.3	285,749	51.2	284,292	51.0	284,969	51.1
17	304,245	51.7	280,230	47.6	259,624	44.1	277,569	47.2	273,542	46.5
19	232,011	54.2	223,112	52.1	209,820	49.0	215,136	50.3	211,770	49.5
20	225,024	51.9	213,976	49.4	203,210	46.9	204,387	47.1	205,312	47.4
21	226,958	54.2	206,418	49.3	205,603	49.1	211,148	50.4	215,613	51.5
22	363,940	52.5	349,438	50.5	334,036	48.2	334,129	48.2	338,023	48.8
23	224,058	57.7	216,113	55.6	210,186	54.1	209,500	53.9	214,922	55.3
National	4,661,949	55.7	4,423,802	52.8	4,261,913	50.9	4,298,517	51.3	4,329,300	51.7

Note: Denominator is the enrollee population that used any VA health care services (at a VA facility) on or after January 1, 2021.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-2. Enrollees who indicated “satisfied” or “very satisfied” about the health care services received at a VA facility, by VISN (continued)

VISN	The manner in which your providers accepted you for who you are		The way your privacy was respected		Your ability to get referrals for specialist care or special equipment	
	Weighted N	%	Weighted N	%	Weighted N	%
1	192,666	60.8	201,534	63.6	173,049	54.6
2	189,302	50.1	191,098	50.6	167,159	44.3
4	212,510	57.0	222,078	59.6	188,104	50.5
5	142,254	47.3	147,779	49.1	124,585	41.4
6	270,183	50.3	287,656	53.6	238,118	44.3
7	323,335	52.1	335,253	54.0	250,100	40.3
8	444,325	61.8	454,196	63.2	378,096	52.6
9	197,647	55.6	208,865	58.7	178,095	50.1
10	340,074	54.7	354,953	57.1	315,366	50.7
12	203,407	59.9	211,804	62.4	177,896	52.4
15	165,812	54.2	171,250	56.0	143,754	47.0
16	298,129	53.5	321,630	57.7	249,138	44.7
17	282,800	48.0	306,841	52.1	235,316	40.0
19	228,882	53.5	241,159	56.4	188,109	44.0
20	208,425	48.1	218,021	50.3	183,796	42.4
21	217,710	52.0	227,021	54.2	198,379	47.4
22	349,123	50.4	366,352	52.9	283,810	41.0
23	219,902	56.6	224,225	57.7	194,702	50.1
National	4,486,486	53.6	4,691,715	56.0	3,867,572	46.2

Note: Denominator is the enrollee population that used any VA health care services (at a VA facility) on or after January 1, 2021.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-2a. Enrollees who indicated “satisfied” or “very satisfied” about the health care services received at non-VA facility, by VISN

VISN	Respect shown to you by health care professionals		How clearly your health care providers explained your health problems		How clearly your health care providers explained options and choices about care with you		Opportunities for you to participate in decisions about your care		The way providers listened to you	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	74,616	23.6	75,148	23.7	72,845	23.0	72,687	23.0	73,162	23.1
2	56,999	15.1	55,041	14.6	52,855	14.0	52,274	13.8	52,249	13.8
4	90,767	24.4	85,631	23.0	80,986	21.7	79,965	21.5	81,580	21.9
5	68,910	22.9	68,228	22.7	65,782	21.9	63,767	21.2	66,455	22.1
6	137,434	25.6	132,493	24.7	130,144	24.2	126,160	23.5	129,052	24.0
7	174,801	28.1	169,274	27.3	166,603	26.8	162,613	26.2	168,323	27.1
8	187,122	26.0	179,080	24.9	178,257	24.8	174,958	24.3	182,055	25.3
9	94,041	26.4	93,904	26.4	89,776	25.2	89,435	25.2	93,678	26.3
10	156,679	25.2	150,535	24.2	148,822	23.9	148,813	23.9	150,580	24.2
12	90,016	26.5	87,240	25.7	85,232	25.1	81,396	24.0	79,999	23.6
15	88,773	29.0	82,988	27.1	80,747	26.4	80,508	26.3	80,118	26.2
16	154,721	27.7	147,290	26.4	140,117	25.1	139,481	25.0	146,609	26.3
17	141,555	24.0	137,707	23.4	132,784	22.6	133,654	22.7	135,185	23.0
19	140,352	32.8	136,665	31.9	134,521	31.4	128,714	30.1	128,630	30.1
20	150,280	34.7	144,549	33.3	142,953	33.0	144,289	33.3	145,965	33.7
21	110,162	26.3	108,862	26.0	106,012	25.3	105,769	25.3	107,962	25.8
22	163,933	23.7	160,322	23.1	151,455	21.9	152,338	22.0	156,206	22.6
23	118,708	30.6	114,965	29.6	114,031	29.3	113,948	29.3	115,486	29.7
National	2,199,869	26.3	2,129,922	25.4	2,073,923	24.8	2,050,768	24.5	2,093,295	25.0

Note: Denominator is the enrollee population that used health care services (at a provider other than VA) on or after January 1, 2021.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-2a. Enrollees who indicated “satisfied” or “very satisfied” about the health care services received at non-VA facility, by VISN (continued)

VISN	The manner in which your providers accepted you for who you are		The way your privacy was respected		Your ability to get referrals for specialist care or special equipment	
	Weighted N	%	Weighted N	%	Weighted N	%
1	73,678	23.3	74,827	23.6	67,149	21.2
2	54,489	14.4	55,023	14.6	44,412	11.8
4	84,527	22.7	89,271	23.9	74,325	19.9
5	66,740	22.2	69,835	23.2	63,272	21.0
6	130,606	24.3	138,761	25.8	117,176	21.8
7	172,113	27.7	173,525	27.9	139,102	22.4
8	183,950	25.6	187,566	26.1	165,582	23.0
9	91,343	25.7	95,206	26.8	82,605	23.2
10	151,093	24.3	154,858	24.9	139,585	22.5
12	86,232	25.4	91,484	26.9	78,597	23.1
15	81,484	26.6	85,032	27.8	75,741	24.8
16	148,025	26.5	153,138	27.5	129,392	23.2
17	137,592	23.4	145,038	24.6	127,004	21.6
19	131,701	30.8	138,765	32.4	116,375	27.2
20	147,722	34.1	156,400	36.1	126,580	29.2
21	110,074	26.3	112,137	26.8	99,084	23.7
22	154,750	22.3	164,723	23.8	136,453	19.7
23	117,572	30.3	119,258	30.7	103,788	26.7
National	2,123,692	25.4	2,204,847	26.3	1,886,221	22.5

Note: Denominator is the enrollee population that used health care services (at a provider other than VA) on or after January 1, 2021.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-3. Enrollees' planned future use of VA health care services, by VISN

VISN	Primary		Service-related disability		Specific condition		Medical devices	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	138,458	43.7	40,655	12.8	23,769	7.506	12,908	4.1
2	149,436	39.6	38,044	10.1	25,404	6.726	14,979	4.0
4	160,481	43.1	32,036	8.6	22,625	6.070	18,179	4.9
5	118,467	39.4	44,778	14.9	11,475	3.812	10,062	3.3
6	253,731	47.3	86,293	16.1	22,771	4.241	16,471	3.1
7	250,391	40.3	98,204	15.8	39,509	6.361	21,638	3.5
8	333,546	46.4	80,329	11.2	47,923	6.663	21,750	3.0
9	167,894	47.2	46,139	13.0	16,415	4.617	13,151	3.7
10	288,612	46.4	48,596	7.8	41,068	6.607	27,768	4.5
12	170,206	50.1	26,802	7.9	19,720	5.806	12,032	3.5
15	137,962	45.1	31,363	10.2	14,971	4.892	13,383	4.4
16	259,853	46.6	82,451	14.8	29,355	5.263	19,478	3.5
17	258,849	44.0	113,997	19.4	20,912	3.553	15,129	2.6
19	197,267	46.1	58,126	13.6	26,647	6.227	21,424	5.0
20	202,458	46.7	63,591	14.7	22,722	5.242	15,760	3.6
21	212,108	50.6	48,307	11.5	19,388	4.629	13,048	3.1
22	310,666	44.9	101,535	14.7	37,435	5.405	26,137	3.8
23	172,471	44.4	31,362	8.1	20,706	5.329	18,284	4.7
National	3,782,856	45.2	1,072,607	12.8	462,815	5.525	311,582	3.7

Note: Denominator is the enrollee population by VISN.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-3. Enrollees' planned future use of VA health care services, by VISN (continued)

VISN	Prescriptions		Safety net		No plan to use VA	
	Weighted N	%	Weighted N	%	Weighted N	%
1	12,867	4.1	38,140	12.0	15,983	5.0
2	18,436	4.9	63,514	16.8	29,050	7.7
4	26,696	7.2	46,137	12.4	29,033	7.8
5	10,105	3.4	52,520	17.4	20,351	6.8
6	19,852	3.7	58,560	10.9	29,941	5.6
7	27,163	4.4	86,665	14.0	37,985	6.1
8	30,495	4.2	82,578	11.5	47,075	6.5
9	12,186	3.4	42,033	11.8	18,834	5.3
10	31,608	5.1	81,255	13.1	28,346	4.6
12	19,156	5.6	43,012	12.7	16,319	4.8
15	14,197	4.6	45,183	14.8	16,147	5.3
16	19,001	3.4	62,152	11.1	28,603	5.1
17	18,160	3.1	74,555	12.7	32,028	5.4
19	13,801	3.2	52,936	12.4	26,433	6.2
20	14,767	3.4	55,263	12.7	24,433	5.6
21	11,148	2.7	58,918	14.1	25,852	6.2
22	21,530	3.1	96,519	13.9	36,616	5.3
23	28,174	7.3	43,375	11.2	22,263	5.7
National	349,344	4.2	1,083,313	12.9	485,294	5.8

Note: Denominator is the enrollee population by VISN.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-3. Enrollees' planned future use of VA health care services, by VISN (continued)

VISN	Other		Missing	
	Weighted N	%	Weighted N	%
1	NA	NA	30,730	9.7
2	4,010	1.1	34,855	9.2
4	NA	NA	34,950	9.4
5	NA	NA	29,499	9.8
6	NA	NA	44,903	8.4
7	NA	NA	54,136	8.7
8	5,812	0.8	69,703	9.7
9	NA	NA	35,082	9.9
10	7,834	1.3	66,517	10.7
12	4,032	1.2	28,373	8.4
15	NA	NA	29,365	9.6
16	7,363	1.3	49,469	8.9
17	NA	NA	48,966	8.3
19	NA	NA	28,217	6.6
20	NA	NA	31,603	7.3
21	NA	NA	26,476	6.3
22	NA	NA	56,592	8.2
23	15,498	4.0	36,434	9.4
National	92,336	1.1	735,869	8.8

Note: Denominator is the enrollee population by VISN. "NA" denotes cells that do not have enough respondents (unweighted n<30) to provide a reliable estimate.

2022 Survey of Veterans Enrollees' Health and Use of Health Care: Findings Report

Table B7-4. Enrollees' use of VA services to meet their health care needs, by VISN

VISN	All		Most		Some		None	
	Weighted N	%	Weighted N	%	Weighted N	%	Weighted N	%
1	112,063	35.4	56,637	17.9	84,452	26.7	56,763	17.9
2	110,860	29.3	49,554	13.1	107,786	28.5	89,185	23.6
4	106,157	28.5	65,544	17.6	110,704	29.7	75,453	20.2
5	87,685	29.1	44,304	14.7	73,218	24.3	87,282	29.0
6	180,519	33.6	106,765	19.9	138,282	25.8	99,079	18.5
7	200,974	32.4	114,537	18.4	167,836	27.0	124,849	20.1
8	245,980	34.2	149,785	20.8	192,169	26.7	108,792	15.1
9	123,839	34.8	74,054	20.8	76,953	21.6	68,763	19.3
10	210,361	33.8	122,932	19.8	153,255	24.7	112,047	18.0
12	122,447	36.1	67,987	20.0	82,381	24.3	54,303	16.0
15	110,591	36.1	49,002	16.0	77,100	25.2	60,498	19.8
16	195,064	35.0	106,436	19.1	140,298	25.2	101,876	18.3
17	178,955	30.4	118,386	20.1	150,858	25.6	122,097	20.7
19	144,352	33.7	87,829	20.5	96,389	22.5	87,816	20.5
20	143,982	33.2	89,147	20.6	102,871	23.7	85,537	19.7
21	153,674	36.7	69,874	16.7	98,751	23.6	82,422	19.7
22	243,613	35.2	109,790	15.9	157,069	22.7	159,400	23.0
23	112,174	28.9	87,294	22.5	104,027	26.8	73,793	19.0
National	2,783,290	33.2	1,569,857	18.7	2,114,398	25.2	1,649,957	19.7

Note: Denominator is the enrollee population by VISN.