



The VA provides free, confidential support 24/7 for Veterans and their family and friends. If you are in crisis, contact the Veterans Crisis Line: Call 800 (Press 1) or (800) 372-6822 (Press 1), text 838255, or visit <https://www.veteranscrisisline.net/>. If you are homeless or at risk of homelessness, contact the National Call Center for Homeless Veterans (NCCWH) by dialing 1 (877) 424-3638 or visiting <https://www.vvaprof.com/CMSE/ESD/>. Send comments regarding this survey, feedback or any other aspect of the information collection, including suggestions for reducing this burden to info-dcm@va.gov. VA will not disclose your personal information to third parties outside VA without your consent or when immediately responding to an expressed concern or need for immediate information or resources.

OMB Number: 2900-0876
Expiration: 2/28/2026
Estimated Burden: 5 minutes

Help us serve you better.

The Veterans Health Administration (VHA) has implemented a new process for Veterans to submit their Beneficiary Travel reimbursement applications called the Beneficiary Travel Self Service System (BTSSS). The responses you provide will help inform the future of this program so we would greatly appreciate your candid feedback. Thank you for your service.

This voluntary survey should take about 5 minutes to complete.

How many times per month do you file a claim for the beneficiary travel mileage reimbursement?

- ☐ 1-5 times per month
☐ 6-10 times per month
☐ More than 10 times per month

For what types of appointments do you normally file a claim for the beneficiary travel mileage reimbursement? Select all that apply.

- ☐ Mental Health
☐ Primary Care
☐ Specialty Care (medical-surgical, not mental health)
☐ Emergency Room
☐ Non-VA Care
☐ Other

Do you have internet access at home or a mobile phone to submit your travel claim using the Beneficiary Travel Self Service System?

- ☐ Yes
☐ No

Have you received any training or instructions on how to use and submit claims into the Beneficiary Travel Self Service System?

- ☐ Haven't received training or instructions
☐ Training
☐ Communication/information
☐ Both
☐ Don't know/don't remember

Why do you prefer the Beneficiary Travel Self Service System over paper reimbursement? Select all that apply.

- ☐ Payment is received faster
☐ The system is available 24/7/365 days a year to submit a claim
☐ I can track the status of my payments in the Veteran Portal
☐ I don't need to visit the facility to file for travel reimbursement
☐ I actually prefer paper reimbursement

How did you hear about the Beneficiary Travel Self Service System?

- ☐ Information provided by my treating facility (direct mail, other written communications)
☐ Another Veteran/beneficiary
☐ Public Affairs announcement (i.e. social media, e-mail, e-newsletter)
☐ AccessVA website
☐ My HealthVet coordinator

How do you prefer to receive news and information about VA benefits?

- ☐ Letter
☐ Email
☐ Phone
☐ Text

What areas in the Beneficiary Travel Self Service System application would you like to see improved? Select all that apply.

- ☐ Register/Login
☐ Claim submission process
☐ Mileage expense process
☐ Adding attachments
☐ Profile update requests (to include updating EFT information)
☐ Communication from your treating facility

It's easy to use the Beneficiary Travel Self Service System.

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
1	2	3	4	5

I'm likely to recommend the Beneficiary Travel Self Service System to a fellow Veteran/beneficiary.

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
1	2	3	4	5

How old are you?

- ☐ <30
☐ 30-39
☐ 40-49
☐ 50-59
☐ 60-69
☐ >=70

How many miles (one way) do you live from your enrolled VA Medical Center?

- ☐ 1-30 miles
☐ 31-60 miles
☐ 61-100 miles
☐ More than 100 miles

What is your disability rating?

- ☐ 0%
☐ 10%
☐ 20%
☐ 30%
☐ 40%
☐ 50%
☐ 60%
☐ 70%
☐ 80%
☐ 90%
☐ 100%

I trust VA to fulfill our country's commitment to Veterans.

Required

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
1	2	3	4	5

Finish

By filling out this survey, you are authorizing VA database access to retrieve Veteran contact information to follow up with you accordingly for purposes of service delivery, potential crisis, or to learn more about feedback you have shared regarding your experience with VA. VA may utilize individual Veteran survey data from this survey or other sources to ensure the first access truly and accurately represent the experiences of Veterans. This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995, Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 5 minutes to review the instructions and complete this survey. The results of this survey will be used to inform opportunities for program improvement in the quality of VA services. Participation in this survey is voluntary, and your decision not to respond will have no impact on VA benefits or services which you may currently be receiving. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if it does not have a valid OMB control number. Valid OMB control numbers can be located on the OMB Internet Page at <https://www.reginfo.gov/public/do/PRAMain>. Information gathered will be kept private to the extent provided by law.

VA**U.S. Department
of Veterans Affairs**

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Thank you for choosing VA.

The U.S. Department of Veterans Affairs uses these surveys to collect your feedback in order to continuously improve your experience with VA services.

Please visit [VA.gov](https://va.gov) to explore benefits, resources, and information at VA.

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