

English



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**: Dial 988 (Press 1) or 1 (800) 273-8255 (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 (NCCHV)** by dialing 1 (877) 424-3838 or visiting <https://www.va.gov/HOMELESS/>. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to Vets-Experience@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.

OMB Number: 2900-0876
Expiration: 02/28/2026
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 approximately 5 minutes to complete.

How many times per month do you file a claim for 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 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 HealtheVet 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 Agree Strongly Agree

Disagree

1	2	3	4	5
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How old are you?

<input type="radio"/> <30
<input type="radio"/> 30-39
<input type="radio"/> 40-49
<input type="radio"/> 50-59
<input type="radio"/> 60-69
<input type="radio"/> >=70

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

<input type="radio"/> 1-30 miles
<input type="radio"/> 31-60 miles
<input type="radio"/> 61-100 miles
<input type="radio"/> More than 100 miles

What is your disability rating?

<input type="radio"/> 0%
<input type="radio"/> 10%
<input type="radio"/> 20%
<input type="radio"/> 30%
<input type="radio"/> 40%
<input type="radio"/> 50%
<input type="radio"/> 60%
<input type="radio"/> 70%
<input type="radio"/> 80%
<input type="radio"/> 90%
<input type="radio"/> 100%

→ Required

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
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Finish

We are asking for this information so that you can provide compliments, recommendations, or concerns to VAReadjustment Counseling Service (RCS) Vet Centers. By filling out this survey, you are authorizing VARCS Vet Centers database access to retrieve Veteran contact information to follow up with you accordingly for purposes of service recovery, potential crisis, or to learn more about feedback you have shared regarding your experience with VARCS Vet Centers. Your contact information and response may be referred to the Veterans Crisis Line if an automated review indicates your response may be concerning. The Veterans Crisis Line may contact you for follow up as a result of that referral. VARCS Vet Centers may utilize individual Veteran survey data from this survey or other sources to ensure the final scores truly and accurately represent the experiences of Veterans. This survey is used to inform Congressional legislation and budgets to help the VA better serve Veterans with educational assistance. The information gathered from this survey will be maintained and stored in a secure survey platform. VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974. Your response is voluntary. Giving us your information is voluntary. Refusal to provide your information will not result in the denial of benefits. VA will not deny an individual benefits for refusing to provide information asked within this survey. The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies. This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Accordingly, we may not conduct or sponsor and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who complete this survey will average The Center for Women Veterans is exempt from the Paperwork Reduction Act as found in the Public Law (P.L.) 103 section 509, 318(d). 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 1 minute2 minutes3 minutes4 minutes5 minutes6 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 VARCS Vet Centers services. Participation in this survey is voluntary, and your decision not to respond will have no impact on VA benefitsVA or RCS Vet Centers confidentiality, benefits or services which you may currently be receiving. . This includes the time it will take to follow instructions, gather the necessary facts and respond to questions asked. Customer satisfaction is used to gauge customer perceptions of VA services as well as customer expectations and desires. The results of this survey will lead to improvements in the quality of service delivery by helping to improve educational assistance programs. Participation in this survey is voluntary and failure to respond will have no impact on benefits to which you may be entitled.VARCS Vet Centers 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 this number is not displayed. 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.

[Privacy Policy](#)

If you have additional questions or concerns, please reach out to the [Veterans Experience Office](#).