

VA



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

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** by dialing 988 (Press 1), or dialing 1 (800) 273-8255 (Press 1), or texting 838255, or visiting <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/>.

OMB Number: 2900-0876
Expiration: 02/28/2026
Estimated Burden: 3 minutes

Help us serve you better.

Based on a review of your records, you have a service-connected disability that renders you eligible to receive VA dental care. It appears you are not using this benefit and we'd like to ask you a few questions. By responding to this survey, you will directly help us improve the program and provide better support to Veterans like you.

This survey should take you approximately 3 minutes to complete.

As a veteran who is eligible for VA dental care benefits, what are the main reasons you do not use VA dental care? (Select all that apply)

<input type="checkbox"/> I have a private dental care plan.
<input type="checkbox"/> I am not interested in receiving VA dental care.
<input type="checkbox"/> I was not aware I am eligible for VA dental care.
<input type="checkbox"/> I do not know how to access VA dental care.
<input type="checkbox"/> I think dental service wait times are too long at Northern Arizona VA.
<input type="checkbox"/> I lack transportation.
<input type="checkbox"/> Other (Please Specify)

I trust VA Northern Arizona with my dental care needs.

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

The VA provides clear instructions on how to access my dental benefits.

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

The VA provides clear instructions on how to navigate community care for my dental care needs.

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

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

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

Overall, I am satisfied with the care and service I receive from VA Northern Arizona.

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

Would you like to be informed about your VA dental care eligibility and benefits, transportation options, and more?

<input type="radio"/> Yes
<input type="radio"/> No

What are your preferred methods to be informed about your individual VA dental care eligibility and benefits of care, transportation options, and other information?

<input type="checkbox"/> Email
<input type="checkbox"/> Phone
<input type="checkbox"/> Physical address
<input type="checkbox"/> Other (Please Specify)

Finish

VA 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 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 3 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 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.

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