CHRONICALLY ILL VETERANS: TREATMENT IN A VA HEALTHCARE SETTING

Objectives

- Identify mission, values and population served within the VA health care system.
- Identify common bio-psycho-social challenges that Veterans face.
- Compare/contrast routes of care for dialysis and transplant services to Veterans.

Audience Experience

- Have you worked with Veterans?
- Have you inter-faced with the VA?
MISSION OF THE VA

- To fulfill President Lincoln's promise “To care for him who shall have borne the battle, and for his widow, and his orphan” by serving and honoring the men and women who are America’s Veterans

Who Are Veterans?

https://www.va.gov/vetdata/docs/SpecialReports/Profile_of_Veterans_2016.pdf

Veterans and Medical Conditions

- The Military & Veterans Health SIG Presents: Chronic Condition Management and Prevention among Veterans
  - Jeff Haibach, PhD, MPH; Tannaz Moin, MD, MBA, MSHS;
  - Mona Au Young, PhD, MS, MPH; Samantha Outcalt, PhD, ABPP; Robert Kerns, PhD
  - A symposium presented at the Society of Behavioral Medicine Annual Meeting
  - March 31, 2016
Veterans and Medical Conditions

In a study of 5.2 million VA patients in FY 2010:

- 2/3 of patients had ≥ 1 Chronic Conditions;
- 1/3 had ≥ 3 Chronic Conditions
- Patients with ≥ 3 Chronic Conditions accounted for > 65% of VA healthcare costs
- Most prevalent triad—diabetes, hyperlipidemia, hypertension (>25%)
- Most costly triad—chronic heart failure, renal failure, COPD (Mean=$82k; Median=$58k)

VA healthcare cost attributed to cigarette smoking in 2010:
$2.7 billion (8% of total cost VA healthcare costs)
$1.7 billion, from current smokers and ~1.0 billion from former smokers

Prevalence % of Chronic Health Conditions 2010

<table>
<thead>
<tr>
<th>Health conditions</th>
<th>Veteran M/F</th>
<th>Civilian M/F</th>
<th>Reserves/ Guard M/F</th>
<th>Active Duty M/F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiovascular Disease</td>
<td>21/9</td>
<td>6/7</td>
<td>15/7</td>
<td>6/3</td>
</tr>
<tr>
<td>Diabetes</td>
<td>17/8</td>
<td>8/9</td>
<td>13/8</td>
<td>5/5</td>
</tr>
<tr>
<td>Cancer</td>
<td>18/14</td>
<td>6/11</td>
<td>12/3</td>
<td>7/8</td>
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<tr>
<td>Depressive Disorder</td>
<td>14/27</td>
<td>12/21</td>
<td>9/37</td>
<td>12/18</td>
</tr>
<tr>
<td>Anxiety Disorder</td>
<td>11/20</td>
<td>9/16</td>
<td>10/32</td>
<td>15/10</td>
</tr>
</tbody>
</table>

Veterans and Mental Health

“It takes the courage and strength of a warrior to ask for help.”

- Military service members and Veterans face some different health issues than civilians. During combat, the main health concerns are life-threatening injuries. These include:
  - Shrapnel and gunshot wounds
  - Lost limbs
  - Head and brain injuries

- There may also be a risk of health problems from exposure to environmental hazards, such as contaminated water, chemicals, and infections.
- Being in combat and being separated from your family can be stressful. The stress can put service members and Veterans at risk for mental health problems. These include anxiety, post-traumatic stress disorder, depression and substance abuse. Suicide can also be a concern. (from NIH website)
- In 2011, more than 1.3 million Veterans received specialized mental health treatment from VA for mental health related issues.
48% (9.7 out of 20.4 million) of all Veterans used at least one VA benefit or service in FY 2016, an increase of 10 percentage points (38% or 9.1 out of 23.6 million) since FY 2007.

Of the 9.7 million users, 44% used multiple benefits which is up from 31% in 2005.

The percent of female Veterans who used VA benefits increased from 25% in 2007 to 47% in 2016. The corresponding rate among male Veterans in 2007 and 2016 was 39% and 48%, respectively.

VA Utilization cont.

Health Care and/or Disability Compensation accounted for 76% of all VA use in FY 2016, up from 68% in FY 2007.

25% of all VA users only received health care benefits in FY 2016.

70% of Veterans receiving Disability Compensation used VA Health Care in FY 2016, up from 59% in FY 2007.

VA Utilization cont.

• Median age of male Veterans who used at least one VA benefit is 64; median age of male non-users is 57.

• Median age of female Veterans who used at least one VA benefit is 46; median age of female non-users is 48.

• Veterans between the ages of 25 and 34 and over age 65 are more likely to use VA benefits compared to Veterans of other ages.
VA Core Values

- **Integrity**: Act with high moral principle. Adhere to the highest professional standards. Maintain the trust and confidence of all with whom I engage.
- **Commitment**: Work diligently to serve Veterans and other beneficiaries. Be driven by an earnest belief in VA’s mission. Fulfill my individual responsibilities and organizational responsibilities.
- **Advocacy**: Be truly Veteran-centric by identifying, fully considering, and appropriately advancing the interests of Veterans and other beneficiaries.
- **Respect**: Treat all those I serve and with whom I work with dignity and respect. Show respect to earn it.
- **Excellence**: Strive for the highest quality and continuous improvement. Be thoughtful and decisive in leadership, accountable for my actions, willing to admit mistakes, and rigorous in correcting them.
VA Organization

- VA is organized into Veterans Integrated Service Networks (VISNs). Each VISN has at least two medical centers, and each medical center has outpatient clinics onsite and community-based outpatient clinics (CBOCs) throughout the VISN. VA classifies these CBOCs according to size. Very large CBOCs treat more than 10,000 individual Veterans per year. Large CBOCs treat 5,000-10,000 individual Veterans per year. Mid-sized CBOCs treat 1,500-5,000 individual Veterans per year, and small CBOCs treat fewer than 1,500 individual Veterans per year. Veterans can seek care at the location closest to their home. Veterans can be referred to a larger clinic or medical center if needed.

VA BENEFITS

- Disability compensation is a monthly benefit paid to veterans because of injuries or diseases that happened while on active duty, or were made worse by active military service. VA must obtain evidence to establish that the disability claimed is the result of the veteran’s military service. VA then evaluates the medical evidence and assigns a disability rating percentage. VA evaluates each service-related condition in 10% increments. For some conditions, the maximum level of compensation is 100%. However, for most conditions, the maximum level of compensation is less than 100%. Once the medical evidence is evaluated and a percentage rating assigned, VA pays the amount of compensation provided by law for that rating.

Examples of Service Connected Conditions

- Kermit
  - SC Percent 50%
    - Tinnitus 10%
    - Superficial Scars 10%
    - Impaired Hearing 40%
- Miss Piggy
  - SC Percent 90%
    - Post-Traumatic Stress Disorder 50%
    - Cold Injury Residuals 30%
Notable VA Benefits for ESRD Population

- **VA Contract Nursing Home**: A Community Nursing Home is a place where Veterans can live full time and receive skilled nursing care any time of day or night. VA contracts with community nursing homes to care for Veterans. The Community Nursing Home program is offered in many communities so Veterans can receive care near their homes and families.

- **Hospice Benefit**: During the advanced stages of a terminal disease, Home Hospice Care can offer comfort and supportive services for you and the Veteran you care for in your own home. An interdisciplinary team of health care providers and local community hospice agency is there for you 24 hours a day, seven days a week. Grief counseling is also available for you and other immediate family members.

- **Respite Benefit**: Respite care is an occasional way to take a break from your caregiving duties and relax, renew your energy, and avoid caregiver burnout. Veterans who require a caregiver may be eligible for up to 30 days of respite care each year. This care can be offered in your home, at a VA community living center, at a VA-contracted community residential care facility, or at an adult day health care center.

Benefits

**Adult Day Health Care Centers**: VA agreements with local ADHC centers for authorization of payment to ADHC for Veterans.

**Home-Based Primary Care (HBPC)**: This program delivers routine health care in your home when medical issues make it challenging for a Veteran to travel. This service can also include physical rehabilitation, mental health care for your Veteran, social work and referrals to VA and community services.

**Home Telehealth**: Designed for Veterans who live at a distance from a VA medical center, the Home Telehealth program connects them with a care coordinator through technology (e.g., telephone, computers). These services may also include education and training or online and telephone-based support groups.

Tele-nephrology: Providing Healthcare to Remotely Located Patients with Chronic Kidney Disease

- Prior to implementing the tele-nephrology service, 53.1% of scheduled visits were either cancelled or were "no-shows." This was reduced by nearly half (28.5%) after instituting tele-nephrology (p < 0.001).
- The frequency of attending appointments was greater in the tele-nephrology (71.9%) vs. in-person Bronx VA cohort (61.0%). The incidence of the composite outcome of death, ESRD, or doubling of Cr was similar between both groups (p = 0.96) over 2 years of follow-up.
Benefits

- **Disability Compensation** is a tax-free monetary benefit paid to Veterans with disabilities that are the result of a disease or injury incurred or aggravated during active military service. Compensation may also be paid for post-service disabilities that are considered related or secondary to disabilities occurring in service and for disabilities presumed to be related to circumstances of military service, even though they may arise after service. Generally, the degrees of disability specified are also designed to compensate for considerable loss of working time from exacerbations or illnesses.

- **Aid and Attendance (A&A)** - is an increased monthly pension amount paid if you meet certain criteria, (based on Income or Service Connection)

- **Co-Pay Exemptions** - Exemption from Co-pays for Visits and/or Medications (based on Income or Service Connection)

- **Travel Benefit** - Based on Income or Service Connection

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**VA Caregiver Support Program**

- Caregiver Support Line - 1-855-260-3274
- Telephone Support Groups
- Peer Support Mentoring
- Building Better Caregivers Program
- Reach VA
- Caring for Seriously injured Post-9/11 Veterans

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**How Does The Veteran Experience and The Dialysis Patient Experience Overlap?**

- Grit
- Fellowship
- Loss and Grief
- Resilience
- Assertiveness
Ways To Use the VA

A. Seen once a year for primary care, get all their medications here because it’s cheaper.

B. Never use the system but are service connected, it’s there if they need it.

C. Use it for Primary Care and maybe 1-2 other specialty providers.

D. Use it as their regular healthcare provider for primary care, all specialty care and medication.

Remember...

VA is not a health insurance provider, it is a healthcare system

How Veterans Find Our Dialysis Clinic

- Seen in the renal clinic, known to VA out-patient Nephrologists
- Never seen in our renal clinic but admitted here and in need of acute/chronic dialysis
- Seen by Nephrologist in the community as either an out-patient or in-patient. Veteran shares that s/he is a Veteran and they are offered option of getting dialysis treatment here.
Pro’s & Con’s of Getting Dialysis Treatment at VA

<table>
<thead>
<tr>
<th>Pro’s</th>
<th>Con’s</th>
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<tbody>
<tr>
<td>Exemption From Co-Pays</td>
<td>May have co-pays for visits which are</td>
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<td></td>
<td>higher than in the private sector</td>
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<tr>
<td>Free Travel</td>
<td>Travel time, distance and expense could</td>
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<td></td>
<td>be substantial if Veteran is not eligible</td>
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<tr>
<td></td>
<td>for travel</td>
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<tr>
<td>VA Electronic Medical</td>
<td>Hard to have continuity with outside</td>
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<tr>
<td>Record means</td>
<td>providers</td>
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<tr>
<td>seamless continuity</td>
<td></td>
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<tr>
<td>amongst other VA</td>
<td></td>
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<tr>
<td>providers</td>
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<tr>
<td>Veteran-Centered Care</td>
<td>Bureaucracy</td>
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To VA or Not to VA, That Is The Question

A. Space is available at VA for dialysis treatment but a Veteran elects not to get their dialysis treatment here, they must use their own health insurance to get treatment at a clinic close to their home and arrange their own travel.

B. Veteran would like their treatment at VA but we are full, we “Fee-Base” their treatment to a clinic close to their home. VA covers the cost of the dialysis treatment and provides travel if they are eligible.

C. Veteran lives more than 40 miles away from VA. VA is obligated to Fee-Base their dialysis treatment under Veterans Choice Program.

If You’ve Seen One VA...You’ve Seen One VA
The VA Boston Healthcare System, the largest consolidated facility in VISN 1, encompasses 3 main campuses and 5 outpatient clinics within a 40-mile radius of the greater Boston area. The consolidated facility consists of the Jamaica Plain Campus, located in the heart of Boston’s Longwood Medical Community; the West Roxbury Campus, located on the West Roxbury/Dedham line; and the Brockton Campus, located 20 miles south of Boston in the City of Brockton. In addition to the 3 main medical centers, the Community Based Outpatient Clinics (CBOCs) that make up the VA Boston Healthcare System (VA BHS) are located in Framingham, Lowell, Quincy, Plymouth and Causeway Street (Boston).

### VA Boston Healthcare System
- **Boston VA Dialysis Unit**
  - Jamaica Plain (JP) & West Roxbury (WX)
  - JP- Outpatient Dialysis Unit WX- Acute Inpatient Unit
  - 2 Nephrologists & 1 Nurse Practitioner
  - 1 Nurse Manager & 1 Assistant Nurse Manager
  - 6 Nurses
  - 3 techs
  - 1 Dietician (part-time)
  - 1 Social Work Coordinator

### VA Boston Healthcare System
- M/W/F and T/Th/SAT Morning and Afternoon shifts (7:30AM & 12:30PM)
- Maximum capacity 36 hemodialysis patients
- 73 Fee Basis Hemodialysis Dialysis Patients
  - *Annual Assurance Reviews*
- 3 Fee Basis Peritoneal Dialysis Patients
- Demographics: All Male veterans (No Female Veterans), 1 Nursing Home, All Branches of Service, 50% 85+
- Current construction on a New JP Dialysis unit slated to open Spring/Summer 2018
Providence VA Dialysis Unit
- Serving Rhode Island, parts of Southern Massachusetts, Cape Cod, and Northern Connecticut
- Oldest VA dialysis unit
- Previously operated M/W/F for 2 shifts with no set Nephrologist, Nurse Manager, Social Worker or Dietician
- Large expansion of staffing and shifts starting in 2008

Providence VA
- VISN 1
- CBOCS
  - Middletown, RI
  - New Bedford, MA
  - Cape Cod Hyannis

Providence VA Dialysis Unit
- M/W/F and T/Th/S morning and afternoon shifts
- 2 Nephrologists
- 1 Nurse Manager
- 8 nurses
- 5 techs
- 1 Dietician (part-time)
- 1 Social Worker (with collateral supervisory duties)
## Our Dialysis Patients

- Maximum capacity 40 chronic hemodialysis patients
- 4 Peritoneal Dialysis patients
- One female Veteran
- One Veteran in school
- Eras of Service: Korean War, Vietnam, Gulf War, OEF/OIF
- All Branches of Service: Army, Navy, Marines, Air Force, Coast Guard
- 6 hemo patients on the Cape, 1 PD in CT, 1 PD on the Cape

## TRANSPLANT IN THE VA

- Regionalized process
- Designated VA hospitals across the country that offer transplant.
- Providence VA patients seeking kidney transplants must travel to Pittsburgh VA or Bronx VA
- All transplant candidates must have a support person who is able to travel with the patient for transplant and remain with the patient at the transplant center for the 4-6 weeks of recovery following transplant

## TRANSPLANT IN VA continued

- If Transplant Packet is approved, patient and support person fly to Bronx/Pittsburgh, stay overnight.
- Patient undergoes additional tests
- Transportation and lodging is paid for
- Food is not paid for
- Bronx/Pittsburgh team then approves Veteran to be listed
- If Veteran is medication and/or visit co-pay exempt, s/he will have no co-pays for transplant hospitalization or for anti-rejection medications
### Recommendations

- Ask patients if they are a Veteran
- Ask if they are service connected. If so, what %
- Ask if they are or have ever been enrolled in a VA healthcare system
- Consider having patients get their medications filled at the VA
- Consider primary care, out-patient renal, dialysis or transplant in the VA
- Call us!

### References

- [http://www.va.gov/](http://www.va.gov/)
- [http://vaww.visn1.va.gov/intranet/providence](http://vaww.visn1.va.gov/intranet/providence)
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