AN INTRODUCTION TO THE VA FOR OUR COMMUNITY PARTNERS

Improving Care Coordination and Demystifying the VA for Community Health Providers

“Honor America’s Veterans by providing exceptional health care that improves their health and well-being”

Sandy Filault BSN, RN, CCM Rhonda Lovett, BSN, RN, CCM
VA New England Health Care System

Disclosures

• There are no conflicts of interest
• No financial relationships or partnering
• No commercial support or sponsorship
• Non-endorsement of products discussed/displayed in conjunction with this activity (disclosure applicable when products present)

What Do We Hope to Accomplish Today?

• Present basic information about the Department of Veterans Affairs (VA)
• Improve our collaboration
• Access to VA medical records
• Transferring a Veteran from your hospital to the VA
• Coordination of services, medications and supplies
• Programs that may bring Veterans to your organization
• Payment for non-VHA care
• Acknowledge and address your concerns
About the Department of Veterans Affairs

• Federal government’s second largest department after the Department of Defense (DoD)

• Three components:
  – Veterans Health Administration (VHA)
  – Veterans Benefits Administration (VBA)
  – National Cemetery Administration (NCA)

What is the VHA?

• VHA is a healthcare program funded by Congress. It is not an insurance program; it is an entitlement program.
• Availability of services change depending on the Department of Veteran Affairs budget which is determined by Congress.
• VHA is America’s largest integrated health care system with over 1,700 sites of care, serving 8.76 million Veterans each year.

VHA - The Nation's Largest Integrated Health Care System

• 172 Hospitals
• 1,062 Outpatient sites of care of varying complexity (VHA outpatient clinics)

  • Community-Based Outpatient Clinics (CBOC)
  • Community Living Centers (CLC)
  • Domiciliaries
  • Vet Centers
**Veterans Integrated Service Networks (VISNs)**

![Map of Veterans Integrated Service Networks (VISNs)](image)

**Veterans in the United States**

- Projected Veteran Population (as of 09/30/2017): 19,998,799
- Veterans have served during war and in peacetime.
- Veterans have served our nation during the following eras:
  - World War II: 0.6 million Veterans
  - Korean conflict: 1.5 million Veterans
  - Vietnam era: 6.7 million Veterans
  - Gulf War era: 7.3 million Veterans
    - (Includes 1,500,000 Iraq and Afghanistan Veterans)
  - Peacetime only: 4.5 million Veterans

**Veterans Service Networks Service Networks (VISN 1)**

- Edith Nourse Rogers Memorial Hospital
- VA Boston Healthcare System
- VA Central Western Massachusetts Healthcare System
- VA Connecticut Healthcare System
- VA Maine Healthcare System
- Manchester VA Medical Center
- Providence VA Medical Center
- White River Junction VA Medical Center
I am a Veteran

- "A Veteran is a person who wrote a blank check payable to: ‘The United States of America’ for an amount of: ‘up to and including my life’!"
- I earned this distinction.
- My service speaks of courage and sacrifice in the face of mortal danger.
- My service speaks of compassion and heartbreak in the wake of the terrible cost of war.
- My service speaks of love of country and of a belief in America.

Starting point: Ask your patients...

Ask: “Have you served in the U.S. Military? Army, Navy, Air Force, Marines, or Coast Guard?”
If Yes, are they enrolled in the VA for healthcare?
If Yes but they have not enrolled, suggest they contact their local VA or www.va.gov for Veterans benefits information.

Why Ask?

Myth: All Veterans look like this...
Almost anyone could be a Veteran, never assume they are not.

Fact: Veterans have no stereotypical appearance. Almost anyone could be a Veteran.

Basic Eligibility
• If a Veteran served in the active military service and were separated under any condition other than dishonorable, he/she may qualify for VA health care benefits.
• Current and former members of the Reserves or National Guard who were called to active duty by a federal order and completed the full period for which they were called may be eligible for VA health benefits as well.
• Most Veterans who enlisted after September 7, 1980, or entered active duty after October 16, 1981, must have served 24 continuous months or the full period for which they were called to active duty in order to be eligible.
• VHA eligibility is not only for those who served in combat or have service-connected injuries or conditions.
• We encourage all Veterans to apply to we can determine enrollment eligibility.

VHA Enrollment
• Veterans are not automatically enrolled in the VHA system.
• The categories of Veterans who can be enrolled in VHA programs are determined by Congress.
• The enrollment system is based on priority groups to ensure health care benefits are readily available to all enrolled Veterans.
• The Priority Groups range from 1-8 with 1 being the highest priority for enrollment.
Applying for VA Healthcare

Apply online for VA healthcare, by completing A Form 10-10EZ, Application for Health Benefits

The application must be signed and dated.

You can obtain this form from the VA website:

https://www.1010ez.med.va.gov/

If the Veteran does not have a copy of their DD214, the Discharge Document which is used as proof of service, this can be requested at:

http://www.archives.gov/veterans/military-service-records/

Service vs. Non-Service Conditions

Two types of medical conditions:

• If a healthcare disability was the result of a disease or injury incurred or aggravated during active military service, the VHA calls it service connected. The Veteran receives a monthly compensation.

• Veterans who served their country but never incurred an injury or illness have non-service connected conditions.

About VHA Primary Care

• Patient centered care model is known as a Patient Aligned Care Team (PACT)

• Enrolled Veterans assigned to a Primary Care Team

• The Primary Care Team is the Veteran’s gateway to care and services at the VHA.
Our Purpose: To Provide Excellent Patient-Centered Care for Veterans

- Build an understanding between community healthcare organizations and local VHA services.
- Improve communication by identifying appropriate contacts at the VHA and in the community.
- Identify a plan of care based on veteran’s goals and resources.
- Promote safe transitions of care to reduce hospital readmissions.
- Move from dual management to co-management.

Why is there Co-Managed Care?

- Veterans enrolled in VHA care can use community healthcare services while maintaining their access to VHA benefits.
- 50-70% of all enrolled Veterans are managed in partnerships with the private sector.
- Veterans often seek out the most financially advantageous route of care:
  - Service-related conditions are treated through the VA at no cost to the veteran.
  - Veterans may have good private insurance but do not have a medication coverage.

Co-Management Challenges

- Coordination of medications, diagnostic tests, equipment and supplies from the VA
- Coordination of follow up care VA vs. community
- Timely collaboration with VA and community providers for information sharing.
- Shorter lengths of stay in acute care
- Transferring patients to a VA Hospital
- Knowing what VA will pay for at non-VA sites
Communication with your VA

Non-Urgent
– Veteran can submit a Release of Information (ROI) request to VHA to send information directly to the community provider

Urgent:
– Mon-Fri 8:00 a.m. - 4:30 p.m. Call Veteran’s Primary Care Team (PACT)
– Evenings, nights, weekends, holidays: Call the Administrator on Duty.

Veterans Health Information Exchange (VHIE)

This program gives VA and participating community care providers a secure way to access certain parts of the Veteran’s electronic health record. It will reduce the time it takes to share critical health information as well as other potential benefits to Veterans and their providers.

• Veterans must sign up and or renew their authorization through e-Benefits or by visiting their local Release of Information office (ROI).
• Instructions can also be found at:
AN INTRODUCTION TO THE VA FOR OUR COMMUNITY PARTNERS - 26

Medications and Equipment

- VHA Pharmacy only fills prescriptions written by VHA providers.
- When VHA providers are asked to supply medication or equipment prescribed by a community provider, the VHA provider must review clinical information available and/or request an office visit before assuming medical responsibility for the prescription.
- Prescriptions must be within the VHA provider’s scope of practice.
- The VHA provides medications, supplies and equipment for conditions managed by VHA providers.

How Do I Transfer a Veteran Patient to the VHA?

- Veteran must meet criteria for admission to a VHA facility.
- Ask Veteran if he/she desires to be transferred to a VHA treating facility.
- Referring community facility must call Admissions Office at the VHA Medical Center.
- A member of the admitting team of the day will return the call to the referring community physician to determine the level of care necessary and how to proceed.

What will VHA pay for at non-VHA sites?

VA COMMUNITY CARE PROGRAM

- The VA Community Care program (VACC) provide reviews and payment authorization for eligible Veterans to obtain routine outpatient or inpatient care through community providers.
- If VA services are available, VACC does not usually pay for non-VA care.
- If VA services are geographically inaccessible or VA facilities are not available to meet the Veterans needs, the care may be approved following a review by VACC.
- Individual eligibility determinations are veteran specific and therefore, outside the scope of this general information. Please contact your local VA health care facility for individual Veteran eligibility questions or concerns.
- Additional information for the VACC program may be found at: https://www.va.gov/communitycare/
What do Patients Pay for at Their VA

It varies:

- If a healthcare problem began during or was aggravated by the Veteran’s military service, the VHA calls it service connected. The Veteran receives VHA healthcare for that condition.
- For non-service connected conditions, the Veteran may be charged a co-pay for healthcare visits, prescriptions, equipment or hospitalizations.
- VHA bills Veterans’ commercial healthcare insurance for VHA care unless it is service connected.
- VHA is prohibited by law from billing Medicare or Medicaid.

DISCUSSION

• Created in 1984, the DAV Transportation Network provides free transportation for Veterans with no way to get to a VA facility for needed treatment.

• DAV and Auxiliary volunteers drive Veterans to and from VA hospitals and clinics.

• DAV donates vans where needed.

THE VHA TRANSPORTATION NETWORK

• Links eligible Veterans with special needs to VHA medical services and benefits.
• The VHA has different types of vehicles and or contracts with ambulance providers to assist Veterans with special needs, including passenger vans and stretcher/wheelchair accessible vans.
• Veterans eligible for VHA travel should contact their VAMC travel office.
  - Veterans must be 30% service connected or greater.
  - Traveling for treatment of a SC condition
  - Veterans traveling for a scheduled compensation or pension exam.
  - Veterans with pre-authorized, arranged travel.
  - Based on income.
  - Veterans traveling for treatment of a service-connected condition.
AN INTRODUCTION TO THE VA FOR OUR COMMUNITY PARTNERS

Summing Up Today’s Information

- Co-Managed Care is a Partnership
  - Learn who your VA Primary Care Case Managers are and who is on your patient’s Pact Team!
  - Call the local VA when in doubt or unsure of a VA service or process.
  - Include your patient’s VA provider information in your medical record.
- Ask “Have you served in the U.S. Military, including the Coast Guard?” and “Are you enrolled in the VA Healthcare System?”
- Encourage Veterans to use MyHealthVet:
  http://www.myhealthevet.va.gov/

Thank you for joining us today. We look forward to working together for the Veterans in our community.