Serving America's Veterans:
How Health Centers Can Answer the Call

October 8, 2015

America's Voice for Community Health Care
## Presentation Topics

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1. Veterans Health Care Overview
Overview: Which Veterans Use VA Healthcare?

~22 Million US Veterans

~9 Million Enrolled in VA Healthcare

~6 Million VA Patients

Not every VA-enrolled veteran receives VA health care services in a given year. Some veterans may opt not to seek care, and others may receive care outside the VA system, paying for care using private health insurance, Medicare, Medicaid, TRICARE or other means.

In order to receive VA Healthcare benefits, a veteran must be eligible for care (usually determined by the presence of a service-connected disability, period of military service, or income level).
Overview: DoD vs. VA Health Care

**Department of Defense**
Military Health System (MHS)
- Provides care to those who **serve** in uniform (plus families and retirees) through the TRICARE program
- 57 hospitals and ~400 clinics worldwide
- FY 2015 Budget = $47.4 B

**Department of Veterans Affairs**
Veterans Health Administration (VHA)
- Provides care to those who **served** in uniform
- 144 hospitals, 14 health care centers, and, 754 community-based outpatient clinics across US
- FY2015 Budget = $59.5 B

~1 million dual-eligibles

~10 million MHS beneficiaries

~9 million VHA enrollees
Overview: Department of Veterans Affairs (VA)

- Established in 1930
- Elevated to Cabinet level in 1989
- Federal government’s 2nd largest department after the Department of Defense

VA Mission: 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.

Goal 1: Empower Veterans to Improve their Well-Being
- Giving Veterans more information and choices for health care

Goal 2: Enhance and Develop Trusted Partnerships
- Creating relationships between VA and community partners to provide care for Veterans

Goal 3: Manage and Improve VA Operations to Deliver Seamless and Integrated Support
- Improving the coordination of care between VA and community providers
### VA Efforts to Engage Health Centers

**February 1995**
- VA begins to establish Community Based Outpatient Clinics (CBOCs)

**January 2014**
- VA establishes Patient Centered Community Care (PC3) Contracts

**November 2014**
- VA launches Veterans Choice Program (VCP)

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- **CBOCs** established to improve Veterans’ geographic access to and use of primary care services
- Shifts focus of care from inpatient to outpatient setting
- Most CBOCs owned and staffed by VA, but some contracted to private sector

- **Lack of access** for Veterans seeking specialist care
- PC3 established to expand care options for Veterans
- Barriers to accessing care due to long wait times and geographic distance
- Choice Act established the VCP to increase accessibility to care for eligible Veterans
- The VCP provides greater access to community health care for eligible Veterans
- Choice Act specifically mentions FQHCs as providers
- Coordinated Care
- Choice Improvement Act
2. Veterans Services in Health Centers
Veteran Services in Health Centers: A Natural Fit

- In line with health center mission for the underserved
- Provides a venue for connecting with Veterans in the community
- Additional source of revenue
- Community impact and opportunity for partnership with community VSOs and nonprofits
Veteran Services in Health Centers: Key Statistics

300,000 → Approximate number of Veterans served by health centers according to the 2014 Uniform Data System

739 → Number of Health Center sites currently signed up as VCP/PC3 providers, representing over 250 Health Center grantees

95% → Percent of VCP claims paid within 30 days
Advocacy
- Choice Act
- 2015 Amendments to Choice Act
- Implementing Regulations
- Policies

Communication
- Fact Sheets
- Toolkits
- Conference Calls

Assistance
- Targeted technical assistance
- Education Sessions
3. Veterans Choice Program Overview
Veterans Choice Program (VCP)

**Provisions**
- VA to furnish hospital care and medical services to eligible Veterans through agreements* with eligible entities or other laws administered by the Secretary
- $10 billion for a “Veterans Choice Fund” to pay for community care authorized under the Veterans Choice Program
- Authority sunsets in three years, or when the Veterans Choice Fund is exhausted
- Pre-existing programs and initiatives were unchanged

*Agreements include contracts, provider agreements and intergovernmental agreements

**Definitions**
- For purposes of the Veterans Choice Program, a VA medical facility is defined as a:
  - VA Community Based Outpatient Clinic (excludes mobile clinics)
  - VA health care center
  - VA hospital
  - Outpatient Clinic on VA Medical Center campus

*Note: VA operates other outpatient service sites, community living centers, and rehabilitation facilities, but these sites are excluded from VCP driving distance calculations*
Veteran Eligibility

- *Veterans who were enrolled for VA medical care as of August 1, 2014 OR recently discharged combat Veterans (within the five-year enrollment window) And one of the following:
  - Live >40 miles driving distance from nearest VA Medical Facility,
  - Wait time for an appointment is greater than the wait time goal set by VA (currently 30 days) or clinically necessary time**
  - Reside in state without VA Medical facility, OR
  - Unusual or excessive burden for travel to nearest health care facility

* In process of change due to new legislation

Other Recent Updates**

- No longer a 60 day limit on episode of care
- VA Secretary can establish criteria to expand provider base
- Change in requirement for distance from CBOCs related to full time physician availability
Veterans Choice Program: Third Party Administrators

- Role
- Geographic Coverage
  - Health Net (yellow) and TriWest (blue)
Veterans Choice Program: Third Party Administrators

- **Health Net Contact Information**
  - Provider Customer Service Phone: 1-866-606-8198
  - Email: HNFSProviderRelations@Healthnet.com
  - Website: [http://www.healthnetpc3provider.com/p3c/?register=tru](http://www.healthnetpc3provider.com/p3c/?register=tru)
  - Point of Contact: Jim Jones, Director, Provider Network Management, Health Net Federal Services, james.a.jones@healthnet.com (571) 227-6545

- **TriWest Contact Information**
  - Provider Services Contracting Phone: 1-866-284-3743
  - Email: TriWestDirectContracting@triwest.com
  - Website: [https://joinournetwork.triwest.com/](https://joinournetwork.triwest.com/)
  - Point of Contact: Hal Blair, Deputy Program Manager, TriWest Healthcare Alliance, hblair@triwest.com, (907) 301-4129
4. How the Veterans Choice Program Works
Veterans Choice Program: How it Works

**Clean claims that are not processed within 30 days will be paid interest in addition to the payable amount**
Veterans Choice Program: Requirements for Providers

1. Accept Medicare rates and meet all Medicare conditions of participation and conditions for coverage.
2. Be in full compliance with federal and state regulatory requirements.
3. Have unrestricted license in state where services are delivered.
Veterans Choice Program: How Care is Authorized

40 Mile or Excessive Burden*
1. Veteran contacts the TPA
2. TPA addresses medical necessity; if established, appointing will occur
3. Provider sees patient, submits medical documentation along with a claim, and is reimbursed by TPA
4. TPA submits medical documentation and claim to VA

* Changing to be more liberal under new legislations

30 Day Waitlist
1. TPA ensures the Veteran is on the VA waitlist
2. TPA contacts the VA of record and obtains the Veteran’s medical records for this episode of care
3. TPA identifies a community provider (either PC3 or VCP with a finalized signed contract or agreement)
4. TPA forwards a packet of documentation to the provider
5. The provider completes the episode of care and returns medical documentation, along with a claim, to the TPA
6. TPA pays the provider and submits a claim and medical documentation to VA

Secondary Authorization Requests
1. Secondary authorization requests (SARs) beyond initial 60 days* or for care not included in initial authorization are submitted to and authorized by TPA (not VA)

*changing

Pharmacy
1. An initial 14-day supply of medication that is an urgent and emergent needed incident to an episode of care can be filled by community provider or local pharmacies
2. That initial 14-day supply, must be initially paid for by the Veteran, but can be reimbursed by VA
3. All other prescriptions must be filled by VA and are typically dispensed through the mail order pharmacy, but can be in-person if Veteran desires
5. Making Yourself Known as a VCP Provider and Key Resources
Veterans Choice Program: Making Yourself Known

- Engage with Veteran Community
- Marketing and Outreach
- Partner with Community VSOs
- Provide Fact Sheets
- Partner with Nearest VA
Key Resources

- Tom Grahek, Chief, Non-VA Purchased Care, Chief Business Office, VHA: Tom.Grahek@va.gov or 804-878-2754
- Veterans Choice Program overview: http://www.va.gov/opa/choiceact/factsheets_and_details.asp
- "How to Become a Veterans Choice Program and/or Patient-Centered Community Provider" fact sheet: http://www.va.gov/opa/choiceact/documents/FactSheets/VACAA_Provider_Fact_Sheet_Choice_Program_508c_Internet.pdf
- VHA Choice Locator PC3 Provider Map: http://www.va.gov/opa/apps/locator/
**Key Resources**

**Veterans Choice Program Toolkit**
Outreach materials (e.g., fact sheets, FAQs) designed to make it easy to share information and spread awareness about VCP

**Military Culture Training Course**
Training for community providers on treating the unique Veteran patient community
http://deploymentpsych.org/military-culture-course-modules

**PTSD Consultation Program**
Post-traumatic stress disorder training offered for health care professionals who treat Veterans
www ptsd.va.gov/professional/consult/index.asp
Key Resources

- **Gina Capra**, Director, Office of Rural Health (ORH), VHA, Gina.Capra@VA.gov or 202-632-8615
- **Regan Crump**, Director, Office of Strategic Planning & Analysis, VHA, Regan.Crump@VA.gov or 202-461-7096
- **Lelia Jackson**, Director, Office of Community Engagement, VHA Lelia.Jackson@va.gov or 202-461-5758
- **Tommy Driskill**, Executive Assistant to Director, VA Pacific Islands Health Care System and to Director, ORH, VHA Thomas.Driskill@va.gov or 808-499-9917
- **Hal Blair**, Deputy Program Manager, TriWest Healthcare Alliance, HBlair@triwest.com or 907-301-4129
- **Jim Jones**, Director, Provider Network Management, Health Net Federal Services, James.A.Jones@healthnet.com or 571-227-6545
- **Dick Bohrer**, Director, Network Relations, National Association of Community Health Care Centers, DBohrer@nachc.org or 202-230-4331