



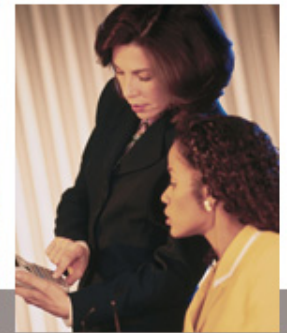
Community
Health
Association of
Mountain/
Plains
States



NATIONAL ASSOCIATION OF
Community Health Centers

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

October 8, 2015



America's Voice for Community Health Care

Presentation Topics

Topic

1. Veterans Healthcare Overview- Tommy Driskill
2. Veteran Services in Health Centers- Dick Bohrer
3. Veterans Choice Program Overview- Tommy Driskill
4. How the Veterans Choice Program Works- Hal Blair and Jim Jones
5. Making Yourself Known as a VCP Provider and Key Resources- Lelia Jackson

Organization

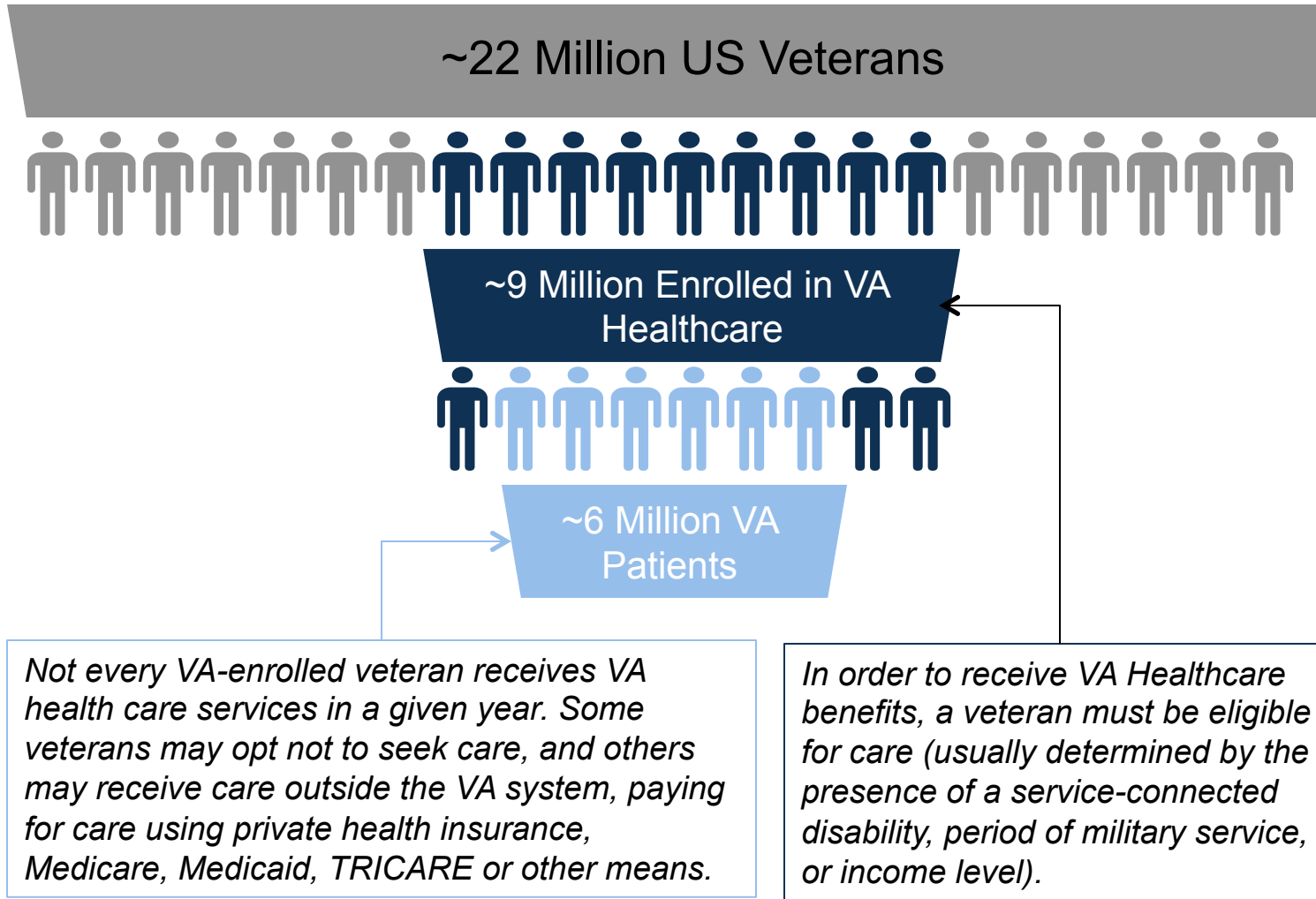
Presenter

Veterans Health Administration	Tommy Driskill, VA Pacific Islands and Office of Rural Health, VHA
Veterans Health Administration	Lelia Jackson, Office of Community Engagement, VHA
National Association of Community Health Centers	Dick Bohrer, Director of Network Relations
Health Net Federal Services	Jim Jones, Director Provider Network Management
TriWest Healthcare Alliance	Hal Blair, Deputy Program Manager



1. Veterans Health Care Overview

Overview: Which Veterans Use VA Healthcare?



Overview: DoD vs. VA Health Care



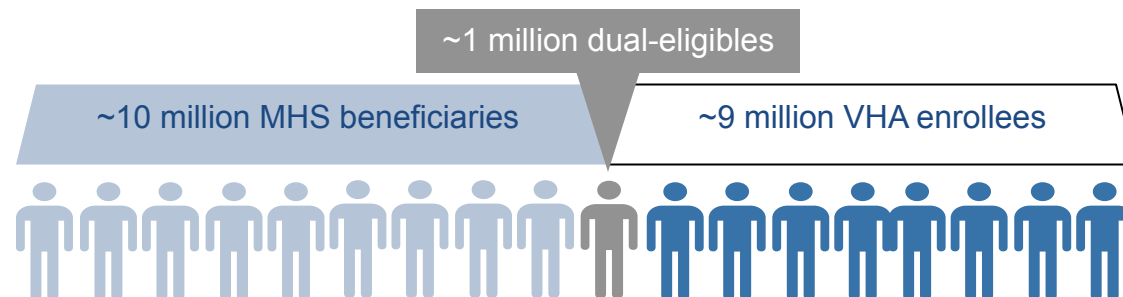
Department of Defense Military Health System (MHS)

- 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



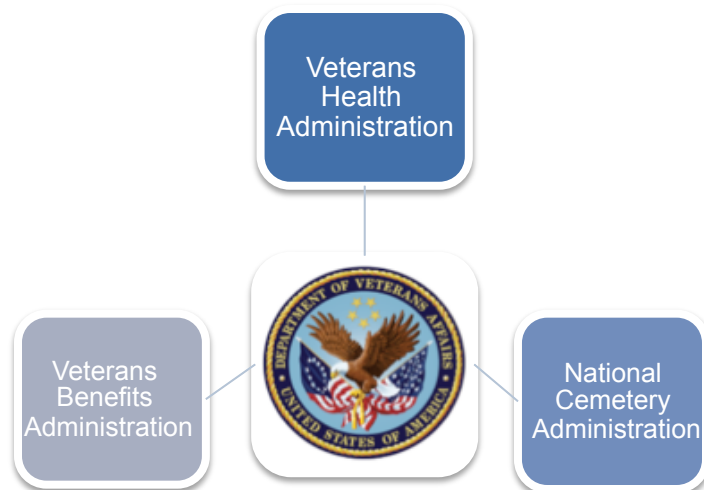
Department of Veterans Affairs Veterans Health Administration (VHA)

- 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



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)



- 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

January 2014

VA establishes Patient
Centered Community
Care (PC3) Contracts



- Lack of access for Veterans seeking specialist care
- PC3 established to expand care options for Veterans

November 2014

VA launches Veterans
Choice Program (VCP)



- 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

Veteran Services in Health Centers: NACHC's Role

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



Veterans Choice Program (VCP)

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

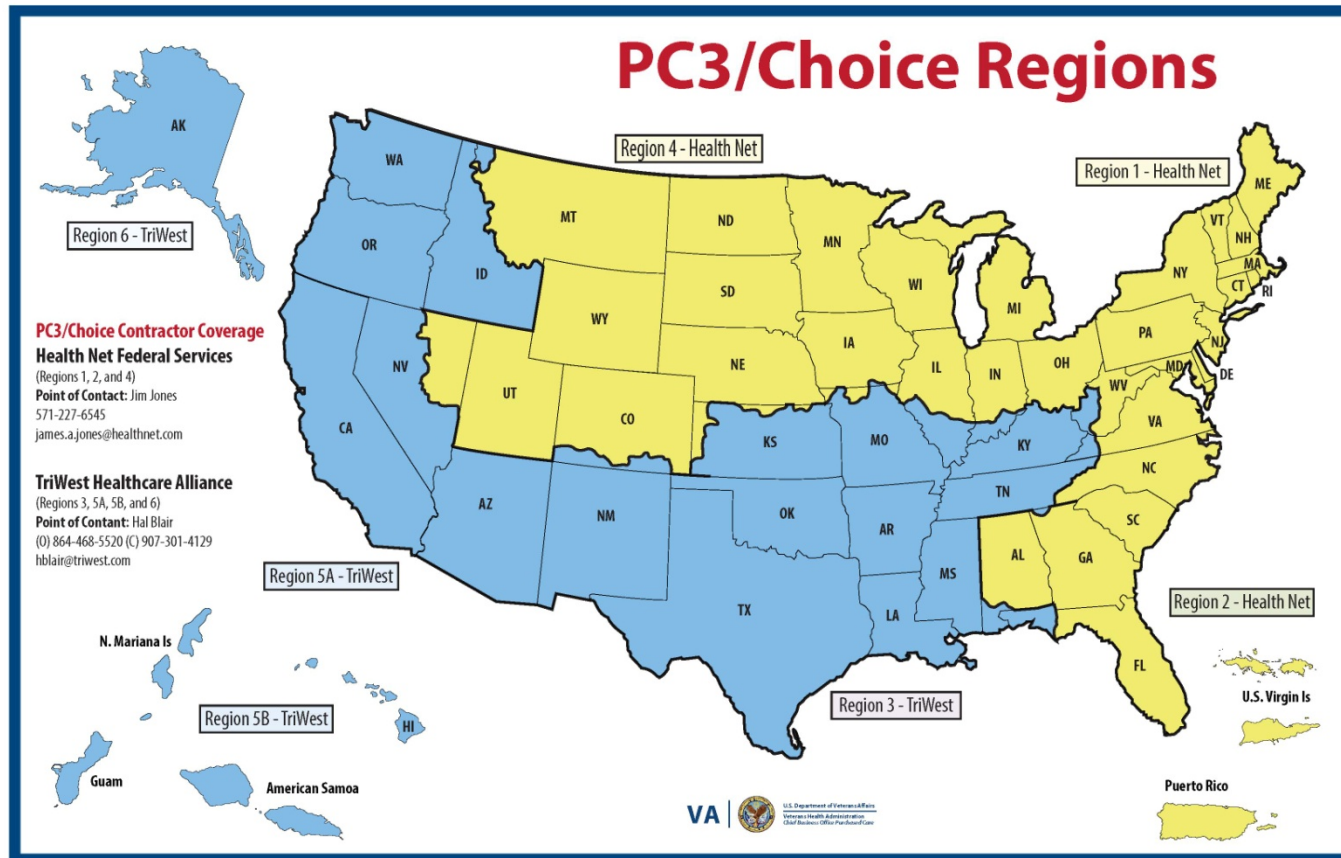


Other Recent Updates**

- 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>
- Point of Contact: Jim Jones, Director, Provider Network Management, Health Net Federal Services, james.a.jones@healthnet.com
(571) 227-6545

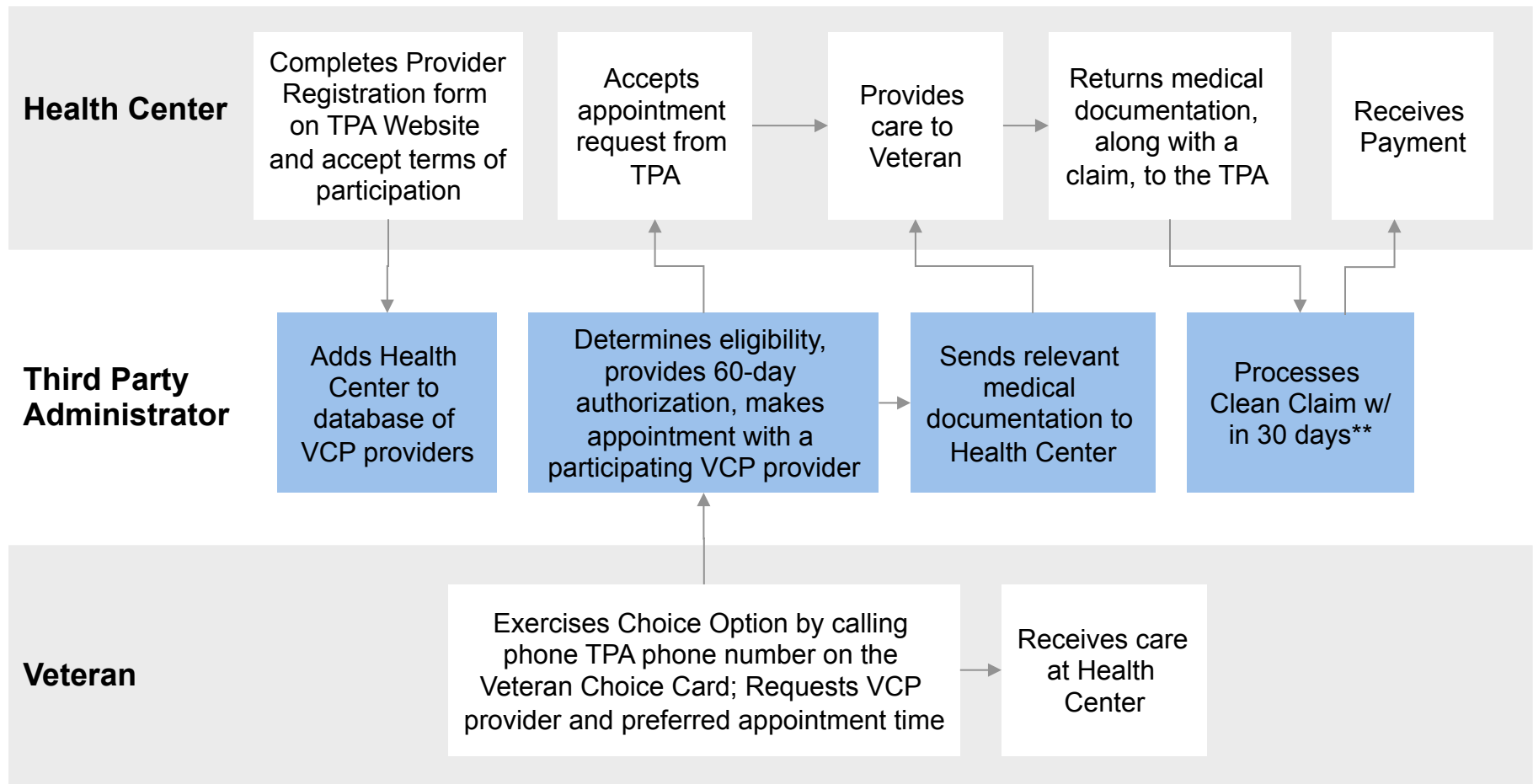
- **TriWest Contact Information**

- Provider Services Contracting Phone: 1-866-284-3743
- Email: TriWestDirectContracting@triwest.com
- Website: <https://joinournetwork.triwest.com/>
- Point of Contact: Hal Blair, Deputy Program Manager, TriWest Healthcare Alliance, hblair@triwest.com, (907) 301-4129



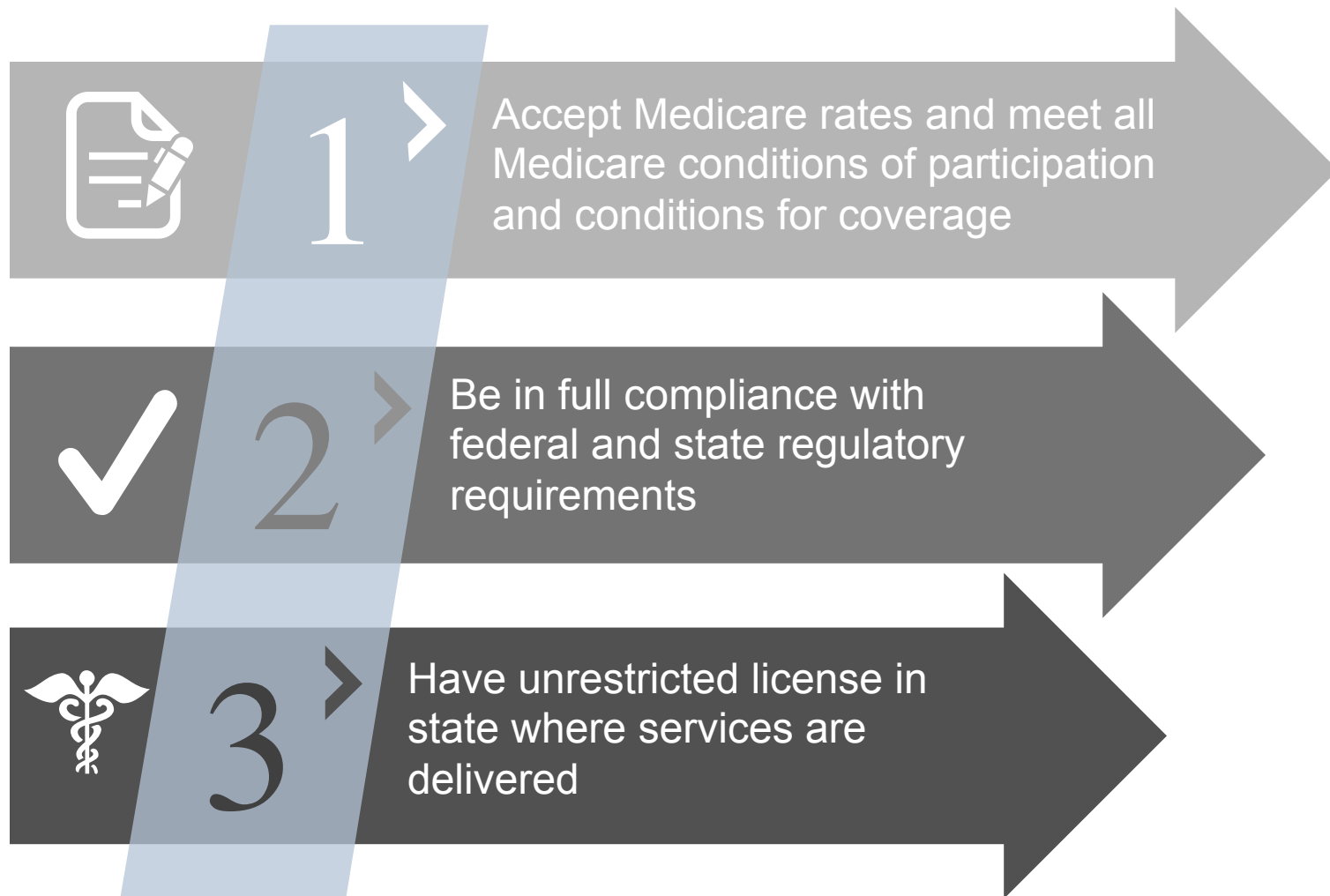
4. How the Veterans Choice Program Works

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



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

<http://www.va.gov/opa/toolkit/index.asp>



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