

VA Health Care Components

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VA Medical Center

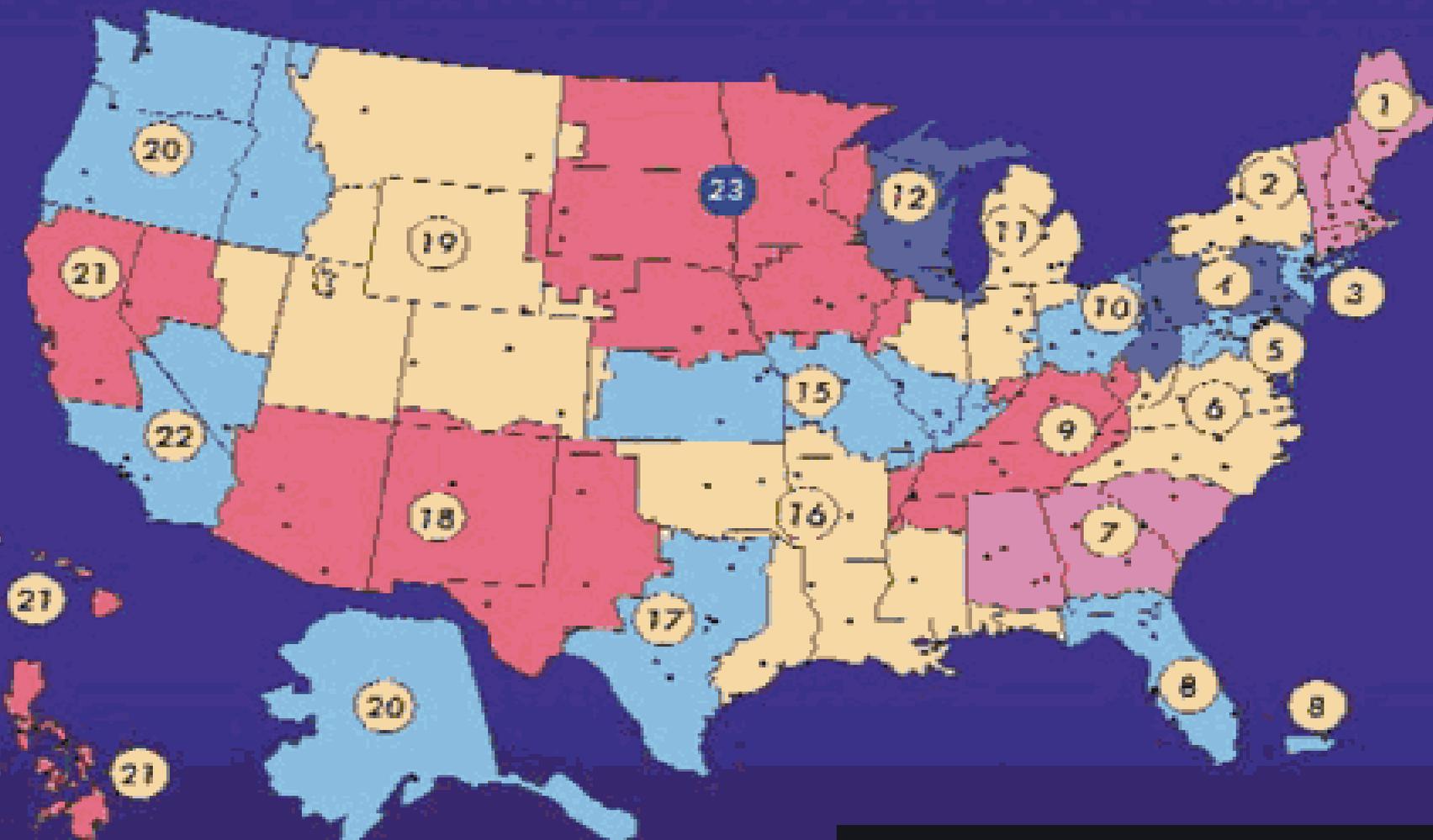
White River Junction, Vermont

November 2012

Objectives

- Overview of VA Health Care
- Specifics to White River Junction, Vermont
- Eligibility/Enrollment
- Healthcare Services
- Adaptive Devices
- Special Programs
- Questions

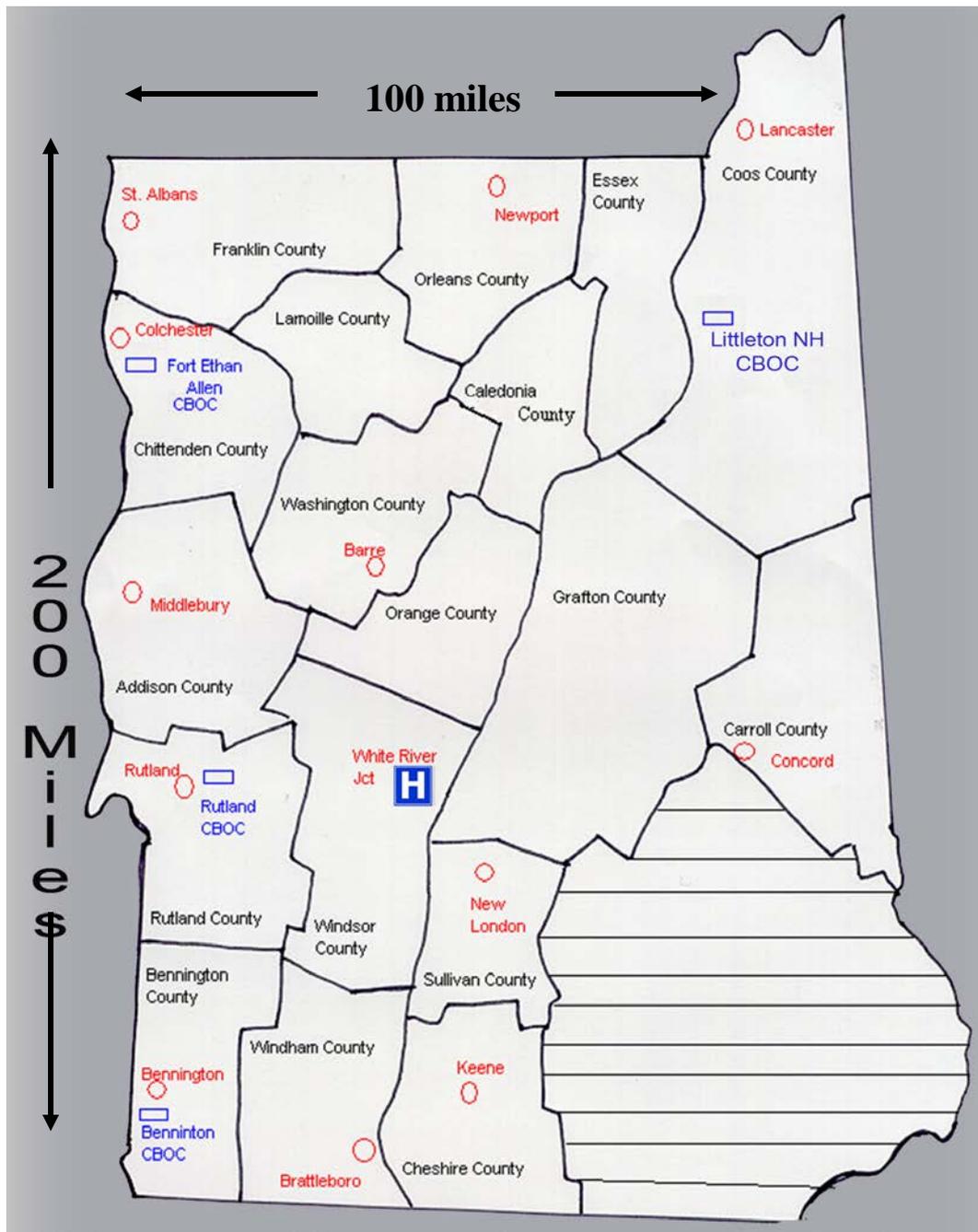
Veterans Health Administration 21 Veterans Integrated Service Networks



In January 2002, VISNs 13 and 14 were integrated and renamed VISN 23

VA VISN Health Care Concept

- VISN Concept: Structure health care delivery based on number of veterans in a certain geographic area. Theoretically same number of eligible entitled veterans in each VISN
- Types of hospitals in each VISN
 - **Large Tertiary Care** – VA West Roxbury
 - **Long Term Care** – Northampton, Bedford, Manchester, Brockton
 - **Small General Medical/Surgical Affiliated** – WRJ, Providence, West Haven,
 - **Outlier** - Togus



80 Miles

VA Health Care

- Eligibility
- Enrollment: Priority Groups & Limitations
- Co-pays: Acute & Long Term Care
- VA & Health Insurance Plans
- VA Health Care - Acute & Long Term Care Options
- Care in the Community – CBOC's
- Co-Managed Care
- Glasses, Hearing Aides, Durable Medical Equipment, Dental Care
- HISA Grants/Stair Glides/Medical Alerts/Specially Adapted Housing & Vehicles
- Special Programs

Eligibility

- Active Duty – at least one day – not for training
- Discharge under other than dishonorable conditions
- Reservist/National Guard must have been mobilized by Presidential Order & served out duration of order or were released prior to Order termination
- VA determined Service Connected Condition
- Non Service Connected “Means Test” eligible
- Other...

Enrollment Priority Groups

- 1: $\geq 50\%$ SC
- 2: 30% SC - 40% SC
- 3: 10% SC & 20% SC; POW's; Purple Heart; VA Voc Rehab
- 4: A&A/Housebound; Catastrophic Disability
- 5: NSC in receipt of VA Pension; eligible for Medicaid; 0% SC and $<$ Means Test criteria
- 6: WWI; exposure to radiation; illnesses related to Gulf War; others...
7. NSC $>$ natl income threshold (NIT) but below GMT
8. NSC & 0% SC who did not enroll before 1/17/03 – no longer allowed to enroll

Co-pays (if necessary)

- Acute: Outpatient
 - Primary Care: \$15.00
 - Specialty Care: \$50.00
- Acute Care: Inpatient
 - 1st 90 of 365 days - \$1,156
 - Each additional 90 days - \$578
 - Per Diem - \$10
- Medications 30 day supply for NSC medications
 - \$8.00 or \$9.00 (limited to \$960 annual for PG's 2-6)
- Long Term Care
 - Inpatient Respite - \$97/day
 - Adult Day Health Care - \$15/day

VA & Health Insurance Plans

- At time of enrollment and at each episode of care, VA requests non-VA health care insurance information if vet has and is entitled
- If non-VA insurance is available, VA will bill for treatment of NSC conditions
- If co-pay applies & health insurance billing applies, vet's co-pay will be reduced accordingly
- Cannot accept Medicare
- Cannot accept Medicaid
- Can accept Tricare for Active Duty

VA Medical Center WRJ, VT

- 76 Beds: 43 Med/Surg, 7 ICU, 10 MH, 16 RRC
- Rural - even though WRJ considers itself **THE** Center of the universe
- Do a little bit of everything with exception of dialysis, XRT, transplants & intricate vascular
- Numerous Primary Care & Same Day procedure programs & 7 CBOC's
- Affiliations – Dartmouth, UVM & ancillary services
- FY'11 Enrollees: 31,141 Users: 24,453
- Males: 23,261+/- Females: 1,192
- Annual Admits FY'11: 2,401
- Annual Opt Visits FY'11: 228,632

Specialty Care

- Internal Medicine
- Oncology
- General Surgery
- Orthopedic
- Urology
- Cardiology
- Gastroenterology
- Pulmonary
- Vascular
- Infectious Disease
- Otolaryngology
- Podiatry
- Anesthesia
- Dermatology
- Geriatric Medicine
- Mental Health
- Tele-Health: HT, CVT, SF
- Radiology
- CAT Scan
- MRI
- Gynecology/Women's Health
- Endocrinology
- Interventional Radio
- Rehab Medicine
- Pathology
- Critical Care
- Pain Management
- Plastic Surgery
- Rheumatology
- Ethicist
- Allied Health (OT, PT, Speech, Dietetics, Social Work)

Community Based Outreach Clinics (CBOC's)

- Primary general medical/mental health care in community settings – limited specialty care in some settings
- 7 Locations
 - Colchester – Fort Ethan Allen; soon to be Burlington
 - Rutland
 - Bennington
 - Brattleboro, VT
 - Newport, VT
 - Littleton, NH
 - Keene, NH

VA Medical Center WRJ, VT Geriatrics & Extended Care

- VAMC Based
 - Hospice & Advanced Illness Coordination
 - Post Acute Care
 - Respite Care
 - Outpatient Geriatrics Evaluation
Management Clinic

VA Medical Center WRJ, VT

Community Based

- Community Based Care
 - Contract Nursing Home Care
 - Contract Adult Day Health Care
 - Home & Community Based Care
 - Veterans' Home
 - Non-Contract Community NH Care
 - Home Based Primary Care

VA Medical Center WRJ, VT Community Based Care continued:

- Telehealth: HT, CVT, SF
- Vermont Veterans Home
- Good Neighbor “Friendly Visitors”
- Phone Follow-up
- Community Based Assessment
- Community Liaison
- Veteran’s Independence Program (VIP)

FUNCTIONAL CHART - GERIATRICS & EXTENDED CARE SERVICE LINE

VA MEDICAL CENTER WHITE RIVER JUNCTION, VERMONT

Operation Enduring Freedom Operation Iraqi Freedom Operation New Dawn

Establish procedures in the transition of care, coordination of services, care and case management of OIF/OEF active duty service members and veterans. Develop partnership between VA and DoD to seamlessly transition the health care of injured and ill returning combat service members from DoD to VA health care system.

Community Contract Nursing Home Care (CNH)

VA contract approved community nursing facilities provide appropriate skilled care/rehab services to eligible service connected veteran patients. Follow-up care is provided to all patients monthly "on site" by a VA Nurse or Social Worker. Nurse and Social Worker also provide the following functions: serve as concerned consumers for VA; liaison between facility and VA; consultant to facility on patient care matters; advocate for patient and family; and lastly as the VA's "eyes and ears" in the community concerning VA and other health care matters.

Acute Care Case Management

Nurse and Social Work staff coordinate appropriate discharge and continuity of

Contract Adult Day Healthcare (CADHC)

VA contract approved community facilities provide appropriate medical/nursing/rehab adult day health care services. Veteran patients live at home or in a community setting; receive round trip transportation to the facility; participate in appropriate supervised activities; receive rehab and/or skilled nursing care services; receive appropriate medical oversight and receive a hot lunch. Veteran caregivers are integrated into the CADHC activities and case plans to assure continuity of care and to allow them respite from their veteran patient. VA Social Work provides "on site" follow-up quarterly to all patients in CADHC.

Community Home Health Care (CHHC)

Eligible veteran patients are referred to community Visiting Nurse Agencies (VNA). VNAs provide assessment of skilled home nursing care needs, case management and monitoring of delivered services. Services provided include: skilled nursing care, PT/OT, speech therapy, social work, bowel & bladder care, home health aide and homemaker services. Socialization is also included using trained community volunteers via the "Friendly Visitors" program.

Respite Care

Veteran patients are placed into various settings for up to 30 days/yr to allow caregivers a break from the daily grind of caring for their

Office of Local Service Line Manager Geriatrics & Extended Care (GEC)

Responsible for all strategic aspects of the GEC Service Line to include budget, personnel, workload, space, equipment, communication, program oversight, planning & business integrity

Administrative Officer

Responsible for all operational aspects of GEC to include the following programs/services: Contract Nursing Home, Contract Adult Day Healthcare, Community Home Health Care, Care Coordination Home Tele-health, Hospice and Palliative Care, State Veteran Home oversight, Respite Care and OIF/OEF returning combat veterans/active duty personnel. Programs are available throughout VT and the five contiguous counties of NH.

Virtual Care

Veterans participate in various health care options via use of tele-health technology (THT). The encounter allows individuals to be seen at locations distant from the VA Medical Center, via COBC's or other settings. Examples of technology used include Movi cameras, Primary Care carts and Home Tele-health via Health Buddies. The THT option allows Veterans to be seen closer to home, obviates travel time to the Medical Center to be seen by specialists for evaluations, mental health care and for ongoing primary care issues.

Hospice & Palliative Care Services (HPC)

Veterans eligible for hospital services and suffering from a terminal or advanced illness are eligible for HPC services. The goal of this care is to provide a planned and collaborative interdisciplinary approach to the care of patients and their families. Functions include: consult service comprised of physicians, nurses, case managers, social workers and chaplains to address symptom management, patient/family education about HPC, advanced directives, care coordination, collaboration with community providers, bereavement care and referral for patients and families. Support is also provided to health care personnel caring for this

Home Based Primary Care (HBPC)

Provision of in home primary care by a team of VA clinicians and support staff to meet the needs of aging veterans who have chronic disabling conditions. Services are provided within a 30-40 mile radius of the Medical Center and its CBOC's. The team also coordinates sub specialty care, while supporting and teaching home caregivers to care for the patient.

State Veteran Home Oversight

Medical Center staff provides annual and ongoing oversight to the local State Veterans Home in Bennington, Vermont. The facility participates in the VA's National State Home program. A VA multi-disciplinary team inspects the facility on an annual basis. The team utilizes a standardized VA inspection tool to monitor patient care and life safety code issues at the facility. Areas found to be deficient require specific Plans of Correction with definitive time lines for accomplishment. Inspection results are shared with local management, VA Central Office and the State of Vermont.

Veteran Directed Home Care

Program focuses on keeping chronically ill Veterans in their own homes. Veterans are enrolled in VA health care. They receive some VA and possibly State services but need additional services to keep them out of community institutional settings. VA coordinates with State Area Agencies on Aging to allow Veteran to hire additional services to keep Vets in their home and VA reimburses a financial intermediary who pays the Veterans' bills.

Caregiver Support

Family members of severely injured post 9/11 Veterans are eligible for potential stipends & other benefits paid to them to care for their Veterans

Co-Managed Care

- 84% of enrolled patients at VAMC WRJ, VT have an identified Primary Care Provider (PCP) at the Medical Center
- The same patients also have an identified non VA PCP whom they regularly see in the community
- Patients come to us for a wide variety of reasons most notably because of low cost medications, supplies & DME that are prescribed by the VA PCP
- VA PCP's work with community PCP's to assure that patients get the appropriate care that they need and that there are no contraindications to their receipt of medications or other services

Glasses/Hearing Aides/Durable Medical Equipment/Dental Care

- All veterans who are enrolled for VA health care are entitled to evaluations for glasses, hearing aides and DME if found to clinically be in need of such devices
- Evaluations for the devices must be completed and approved by VA clinicians and then appropriately fitted by the same clinicians
- Dental care is done on a Fee Service basis in the community; limited to certain SC conditions; former POW's or work that was initiated while individual was on Active Duty – no dental care @ VAMC

HISA Grants, Stair Glides, Medical Alerts, Specially Adaptive Housing, Vehicle Modification & More...

- Veterans may be eligible to receive reimbursement for modifications made to their home (ramps, widening doors, remodeling bathrooms/kitchens... MUST BE PREAPPROVED BY VA!)
- May be entitled to stair glide if clinically appropriate and environment can accommodate
- Are entitled to medical alert system if found to be clinically appropriate
- Certain SC veterans are entitled to specially adapted and built housing based on severe disability
- Certain SC veterans are entitled to reimbursement for specially adapted vehicles

Special Programs

- Spinal Cord Injury Support Clinic
- Visual Impairment Services
- Nursing Home Care: Community Living Centers
- Women Veterans
- Operation Enduring/Iraqi Freedom & New Dawn
- Polytrauma/TBI Support Clinic
- Gulf War/Depleted Uranium/Agent Orange/Ionizing Radiation Registries
- VA/DoD Sharing Agreements
- Rural Health Initiative
- Mobile Health Clinic/EMDS support

Special Programs continued

- Primary Mental Health Clinic (PMHC)
- PTSD
- Homeless
- Substance Abuse
- Suicide Prevention Hotline
- Compensated Work Therapy
- Vocational Rehabilitation
- Mental Health Intensive Case Management (MHICM)
- Mental Health: Residential Recovery Center

References

- Main Medical Center Phone for VA WRJ, VT:
 - 802-295-9363
 - Toll Free within VT: 1-866 (OUR VETS) 687-8387
- **www.va.gov**
- Federal Benefits for Veterans and Dependents 2012 Edition
- **<http://www.whiteriver.va.gov>**
- **<http://www.va.gov/1010ez.htm>**
- **www.nationalresourcedirectory.org**

QUESTIONS

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