Veterans Health Administration
Office of Rural Health Update

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Today’s Presentation

• Background/Orientation: Veterans Health Administration (VHA) & Office of Rural Health (ORH)

• Inter-Agency Efforts: Increasing Healthcare Access and Care Coordination for Rural Veterans

• Connecting Efforts with and for Rural Veterans:
  – Veteran Data Discussion
  – Health System Enrollment and Demographics
  – Social Determinants of Health: Spotlight on VA Vocational Rehab/Employment Efforts
What is the 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
- Three components:
  - Veterans Health Administration (VHA)
  - Veterans Benefits Administration (VBA)
  - National Cemetery Administration (NCA)
Veterans Health Administration “Footprint”

- 152 Medical Centers
- 985 Outpatient Clinics (Hospitals, Community, Independent and Mobile)
- 135 Community Living Centers
- 300 Readjustment Counseling Centers Vet Centers
- 103 Domiciliary Resident Rehabilitation Treatment Programs
Eligibility for VHA Healthcare

• Eligibility for VHA health care services depends on a number of qualifying factors, including:
  – The nature of a Veteran’s discharge from military service (e.g., honorable, other than honorable, dishonorable)
  – Length of service
  – VA adjudicated disabilities (commonly referred to as “service-connected disabilities”)
  – Income level
  – Available VA resources
VHA Eligibility Priority Groups

Veteran eligibility for VA healthcare is based on category group (“Priority Enrollment Group”)

- **Priority Group 1**
  Veterans with service-connected disabilities rated 50% or more disabling

- **Priority Group 2**
  Veterans with service-connected disabilities rated 30% or 40% disabling

- **Priority Group 3**
  POWs, Purple Heart recipients, those rated 10% or 20% disabled, or those eligible under Title 38, U.S.C., Section 1151

- **Priority Group 4**
  Veterans who receive aid and attendance or housebound benefits or are catastrophically disabled

- **Priority Group 5**
  Veterans whose income and net worth are below established VA thresholds of $31K - $46K annually, (depending on family size), those on VA pension and/or are eligible for Medicaid benefits

- **Priority Group 6**
  WW I, Mexican Border War Veterans, disorders associated with exposure to herbicides (Agent Orange) while serving in Vietnam, exposure to ionizing radiation in Hiroshima and Nagasaki, Gulf War illness.

- **Priority Group 7**
  Veterans who pay co-payments with income and/or net worth above the VA threshold

- **Priority Group 8**
  Veterans who agree to pay specified co-payments with income and/or net worth above the VA threshold and HUD geographic index who were enrolled before January 2003. Income requirements may change from year to year.
VHA Rural Population Served

- Of 8.3 million enrolled Veterans, 3.1 million enrolled Veterans live in rural/highly rural areas
  - 22 million Veterans nationwide, 6.1 million Veterans living in rural areas
  - 36% of total enrolled Veteran population live in rural/highly rural areas
  - About one-third (31 percent) of Operation Enduring Freedom and Operation Iraqi Freedom (OEF/OIF) users of the VA Health Care System in FY12 reside in rural or highly rural areas.

- 25 VA medical centers are designated as rural or highly rural facilities
  - 340 VA community based outpatient clinics are considered rural or highly rural

Data Sources: American Community survey
Veterans System Support Center
How are rural communities (and Rural Veterans) unique?

- **Status/Health Equity**
  - Older, sicker, and poorer population

- **Options for integrated health care and coordination**
  - Primary and Specialty Care
  - Mental Health Care
  - Healthcare Workforce

- **Geography/Transportation**
  - Longer travel distances to receive care
  - Lack of public transportation

- **Limited internet/broadband connectivity**
Rural Veterans’ Most Common Outpatient Diagnoses

- High Blood Pressure
- Posttraumatic Stress Disorder (PTSD)
- Type II Diabetes
- Depressive Disorder
- High Blood Cholesterol
- At least 1 service-connected disability
• The VHA Office of Rural Health (ORH) was created by Congress in 2007 under Public Law 109-461, Sec 212

• Mission: Improve access and quality of care for enrolled rural and highly rural Veterans

• Works across VA and with external partners to develop policies, best practices and lessons learned to improve care and services for rural and highly rural Veterans
## ORH Investments:
### Project Focus Areas – FY 2014

<table>
<thead>
<tr>
<th>Category</th>
<th># of ORH Projects</th>
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<tbody>
<tr>
<td>Rural Telehealth, including Home Telemonitoring, Store and</td>
<td>24</td>
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<tr>
<td>Forward Image Transmission, and Clinic Based Video Telemedicine</td>
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<td>Rural Primary Care / Patient Aligned Care Teams (PCMH)</td>
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<tr>
<td>Rural Specialty Care: Cardiology, Audiology, Prosthetics, Optometry,</td>
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<td>Radiology, Dermatology</td>
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<tr>
<td>Rural Community Based Outpatient Clinics, Outreach Clinics, Mobile</td>
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<td>Clinics</td>
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<td>Rural Education Initiatives</td>
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<td>Rural Facilities Improvement</td>
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<tr>
<td>Rural Home Based Primary Care</td>
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<td>Rural Homelessness</td>
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<td>Rural Mental Health, including Post Traumatic Stress Disorder</td>
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<td>Other Categories</td>
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<tr>
<td>Rural Outreach Activities</td>
<td>22</td>
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<tr>
<td>Projects Focused on Rural Special Populations, including Women,</td>
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<td>American Indians/Alaska Natives, and Asian American/Pacific Islanders</td>
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<tr>
<td>Rural Veteran Transportation Programs, including ground and air</td>
<td>14</td>
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<tr>
<td>transportation</td>
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<td>TOTAL</td>
<td>447</td>
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How can we work together?
HIE and Care Coordination in Rural Communities

- VA/Office of Rural Health and VA/My HealtheVet and HHS Office of the National Coordinator
  - Veteran Initiated Coordination & Transformation of Rural Health Information Exchange (VICTOR-HIE)
    - **Who**: VA providers and rural community providers who dually care for rural Veterans
    - **What**: Utilizing Blue Button Technology located on My HealtheVet, VA’s online personal health record and patient portal
    - **Where**: Pilot sites - 10 rural communities – in Iowa, Nebraska, Minnesota, Kansas, Florida and Maine
How can we work together?
MOU to Increase Access to Care for AI/AN Rural Veterans

• VA/Office of Rural Health and HHS/Indian Health Service Memorandum of Understanding
  – VA and IHS partnership to impact American Indian and Native Alaskan Veteran access to care. **Goals:**
    • Increase access and quality of care for American Indian/Alaska Native (AI/AN) Veteran
    • Improve health-promotion & disease-prevention
    • Encourage patient-centered collaboration and communication
    • Consult with tribes at the regional and local levels
    • Ensure appropriate resources for services for AI/AN Veterans
    • Leverage strengths.
How can we work together?
Promoting Internet/Broadband Expansion to Rural Areas

- VA/Office of Rural Health & USDA/Rural Utilities Service & Department of Commerce/National Telecommunications and Information Administration

  - These agencies, and private sector partners, through the Rural Broadband Association are working to promote the expansion of broadband offerings to rural and highly rural Veterans in the communities where they live

ISSUE: Telehealth Implications/Access to Care

- At least 350,000 enrolled Veterans live in communities in which broadband is unavailable
  - In rural areas, broadband is less widely available AND median income of population is lower compared to urban
- VHA’s Survey of Enrollees (2013) indicates that 30% of the 8+ million Veterans enrolled in VA Health Care have no access to the internet
Where are We Headed? Eye on the Environment

- Population Migration, Demographics and Definitions
- Affordable Care Act Implementation
- Rural Economies and Service Markets
- Outreach, Coordination and Collaboration
- Workforce Development
- Technology Impact
- Effective Use of Resources
Connecting Veterans With Healthcare and Employment and Training Opportunities – Where Are They?

- **Enrolled in VA Healthcare**
  - Rural
    - Top 10 states in order from most to least “enrolled rural Veterans” are:
      - Texas, North Carolina, Pennsylvania, Ohio, New York, Florida, California, Georgia, Missouri, and Tennessee
  - Total
    - Top 10 states in order from most to least “enrolled Veterans” are:
      - California, Florida, Texas, New York, Pennsylvania, Ohio, North Carolina, Illinois, Georgia, and Virginia

- **Non-Enrolled in VA Healthcare**
  - Total
    - Top 9 states in order from most to least are:

Data Sources: “The 2013 Guide to Hiring Veterans” US Department of Veterans Affairs; Department of Veterans Affairs/Veterans Support Services Center (VSSC)
Enrolled Veterans Health Care Coverage

- Many “VHA-enrolled” Veterans are dual users of healthcare systems:
  - VA coverage only: 22.5%
  - VA plus Medicare: 49.9%
  - VA plus Medicaid: 7.4%
  - VA plus TRICARE: 18.13%

Data Source – VHA Survey of Enrollees - 2012
VHA-Enrolled VeteranReliance on VA Healthcare System

- It is estimated that all VHA-Enrolled Veterans receive:
  - 70% of their pharmacy needs from the VA
  - 34% of their outpatient procedures from the VA
  - 35% of their outpatient diagnostics from the VA
  - 42% of their evaluation and management (office visits) from the VA
  - 20% of their inpatient services from the VA

- Data Source: VA Survey of Enrollees - 2012

- It is estimated that VHA-enrolled Veterans over age 65 receive:
  - 60% of their pharmacy needs from the VA
  - 20% of their outpatient procedures from the VA
  - 25% of their outpatient diagnostics from the VA
  - 30% of their evaluation and management (office visits) from the VA
  - 12% of their inpatient services from the VA
State Spotlight: Alaska Veteran Profile

- Total Number of Veterans – 74,500
- Enrolled in VA Health Care – 30,000
  - Rural – 15,829
- Not enrolled in VA Health Care – 44,500
  - Eligibles – 15,800
    - In Medicaid – 2,700
    - Uninsured – 3,900
    - Other health insurance – 9,200
  - Not eligible – 28,700

Data Sources: VetPop 2011, BY12 EHCPM, ACA Push-Pull Analysis
American Community Survey (ACS) 2011,
Current Enrollment (VSSC ProClarity Cube)
State Spotlight: Maine Veteran Profile

- **Total Number of Veterans** – 130,200
- **Enrolled in VA Health Care** – 53,900
  - Rural – 15,960
- **Not enrolled in VA Health Care** – 76,300
  - Eligibles – 36,900
    - In Medicaid – 9,500
    - Uninsured – 4,400
    - Other health insurance – 23,000
  - Not eligible – 39,400

Data Sources: VetPop 2011, BY12 EHCPM, ACA Push-Pull Analysis
American Community Survey (ACS) 2011,
Current Enrollment (VSSC ProClarity Cube)
State Spotlight: Montana Veteran Profile

- **Total Number of Veterans** – 102,100
- **Enrolled in VA Health Care** – 47,400
  - Rural – 36,900
- **Not enrolled in VA Health Care** – 54,700
  - Eligibles – 23,300
    - In Medicaid – 3,300
    - Uninsured – 5,200
    - Other health insurance – 14,800
  - Not Eligible – 31,400

Data Sources: VetPop 2011, BY12 EHCPM, ACA Push-Pull Analysis, American Community Survey (ACS) 2011, Current Enrollment (VSSC ProClarity Cube)
Veterans – Additional Facts

• From FY 2009 thru FY 2012, the average annual number of Servicemen separating from the military was 274,800.
• 90% of service members separating from the military are 35 and younger.
• As of 4th quarter 2013, 51% of the Veteran population was in the civilian labor force, compared to 65.7% of the non-Veteran population.
• The overall unemployment rate for Veterans is 6.3%.
• The unemployment rate for Veterans aged 18-24 is 14.2% compared to non-Veterans of same age range which is 12.4%.
• The unemployment rate for Veterans aged 25-34 is 9.8% compared to non-Veterans of same age range which is 6.8%.

Data Sources:
– Vet Pop Model 2011
– 2004-2011 Demographics Profile of the Military Community (Defense Manpower & Data Center)
– Bureau of Labor Statistics
Social Determinants of Health: Employment
Veteran Employment Resources/Federal Efforts

• **e-Benefits Employment Center**
  – Provides Veterans with a career/occupation assessment tool, military skill translator and resume builder
  – VetSuccess.va.gov – part of the e-Benefits Employment Center providing a virtual transition and employment resource center to connect e-Benefits users seeking employment directly to registered employers
  – [www.ebenefits.va.gov](http://www.ebenefits.va.gov)
Social Determinants of Health: Employment
Veteran Employment Resources/Federal Efforts

• **VA’s Vocational Rehabilitation & Employment Program**
  – Assists Veterans with service-connected disabilities to prepare for, find, and keep suitable jobs.
  – Other services include:
    • Comprehensive rehabilitation evaluation to determine abilities, skills, and interests for employment
    • Employment services such as job-training, job-seeking skills, resume development and other job accommodations
    • Post-secondary training at a college, vocational, technical or business school
    • On the job training, apprenticeships, and non-paid work experience
    • [www.vba.va.gov/bln/vre](http://www.vba.va.gov/bln/vre)
Social Determinants of Health: Employment
Veteran Employment Resources/Federal Efforts

- **Veterans Job Bank**
  - Located on the eBenefits Employment Center; powered by the Department of Labor (DOL)’s National Labor Exchange
  - Searchable Jobs Database
  - Employers can post their vacancies at [www.us.jobs](http://www.us.jobs)

- **National Resource Directory**
  - A website created by DOD, VA and DOL; available on eBenefits March 2014
  - Connects Wounded Warriors, Veterans, Service members and their families with those who support them
  - Will provide access to services at the National, State, and local levels to support recovery, rehabilitation and community integration. Will also provide information on topics like education and training, health and homeless assistance
  - [www.nrd.gov](http://www.nrd.gov)
Social Determinants of Health: Employment
Veteran Employment Resources

• **US Chamber of Commerce Foundation – Hiring our Heroes**
  – Nationwide initiative to help Veterans, transitioning Service members and military spouses find meaningful employment. Employers can use this resource through the Employer Roadmap at [www.EmployerRoadmap.com](http://www.EmployerRoadmap.com)
  – Job Fairs. Find out about upcoming job fairs at [www.hiringourheroes.org](http://www.hiringourheroes.org)
  – Fast Track. The institute for Veterans and Military Families at Syracuse University created Fast Track to guide Veterans and transitioning service members to make about education and employment opportunities. [www.hiringourheroes.org/fasttrack](http://www.hiringourheroes.org/fasttrack)

• **Veterans Service Organizations**
  – Together with state, county and local Veteran Service representatives, help Veterans and their families understand and navigate Veteran-focused programs
  – To locate Veteran service partners, please visit [www.va.gov/ogc/apps/accreditation/index.asp](http://www.va.gov/ogc/apps/accreditation/index.asp)
Additional Resources:
ORH Website

www.ruralhealth.va.gov
Questions?

For additional information, please contact:

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