

VA Collaboration with Rural Community Health Centers Project

Project funded by



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PURPOSE

The Department of Veterans Affairs (VA) Collaboration with Rural Community Health Centers (CHC) Project involves four rural CHC systems consisting of 17 CHC sites in a dedicated effort to increase collaboration with Veterans Integrated Service Network (VISN) 5, particularly with five rural Veterans Health Administration (VHA) community-based outpatient clinics (CBOCs). The goals of this project are to improve access, coordination of care, and VHA enrollments for rural Veterans who are eligible for VHA services and use CHCs in addition to or instead of VHA.

The project will establish outreach and educational programs and ongoing communication channels between VISN 5 and participating CHC staff. These relationships will enable community-based providers to improve coordination of care and refer Veterans to VA eligibility-certifying personnel and medical services.

METHODOLOGY

In order to select the most appropriate CHCs for participation in the four-month pilot project, and to develop baseline data, the project team conducted an analysis of the CHC patient population and the total Veteran population within each CHCs' county catchment area.

Specifically, this baseline assessment:

- Examined Health Resources and Services Administration (HRSA) Uniform Data System (UDS) data regarding Veterans served by CHCs.
- Examined current information concerning VA enrollment and user data within the county catchment areas of 17 CHC sites.
- Assessed demographic and other trends, such as age, gender, market penetration, service connection, and priority status.
- Assessed access to VA facilities within each CHC system.
- Reviewed literature concerning the quality of care provided by CHCs, particularly in preventative health care and chronic disease management, and previously existing VA/CHC collaborations.

RESULTS

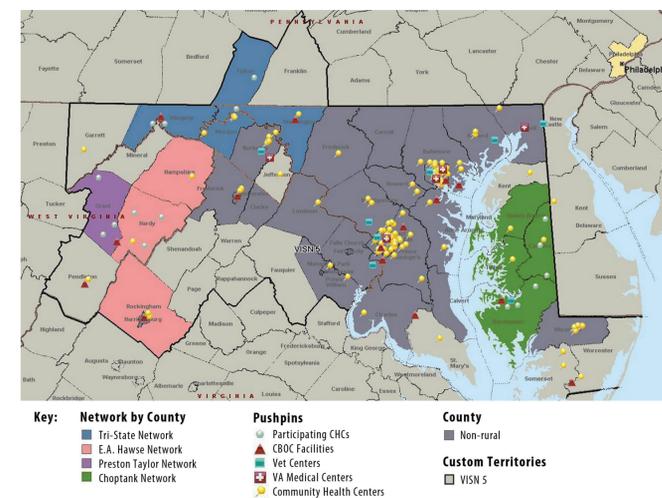
According to the baseline assessment, the four selected CHC systems consisting of 17 participating project sites served at least 2,250 Veterans in 2009, and, given inconsistencies in the methods by which CHCs report Veteran data, likely served many more.

Each of the selected CHC system catchment areas also contains a considerable number of Veterans. Although most are male, the women Veterans have unique health care needs, including obstetrics. The younger Veterans, mainly OEF/OIF Veterans, have an increasing proportion of women in the population, which also indicates a probable increased need for obstetric and other gender-specific services. The male Veteran population is largely over the age of 65, suggesting a need for geriatric specialty care and home health services. Finally, given the high number of enrolled Veterans who have incomes below the VA national income threshold, it is likely that much of the non-enrolled Veteran population may also need financial support to obtain needed health care. As poverty is linked to decreased access to health care, these Veterans may be in great need of local access to primary care such as that provided by a CHC.

VETERAN POPULATION FIGURES WITHIN CHC SYSTEM CATCHMENT AREAS

CHC System	Total Projected Veterans within CHC System Catchment Areas			CHC patients who are Veterans	Total Veteran Enrollees/ Users within CHC System Catchment Areas	
	All Veterans	Male Veterans	Female Veterans		Enrollees	Users
Choptank	14,812	14,039	773	779	4,110	2,655
E. A. Hawse	9,687	9,011	676	339	3,712	2,201
Preston-Taylor	1,179	1,091	88	600	512	380
Tri-State	23,406	21,509	1,897	532	8,837	5,928

VISN 5 CHC PILOT PROJECT SITES, VA AND CHC FACILITIES



FUTURE WORK

Continuing work includes the implementation of a four-month pilot program within four CHC systems consisting of 17 CHC sites. During the period of performance, the project team will visit each CHC participating in the pilot project. Project team members performing these visits will conduct interviews with appropriate CHC management to obtain all necessary background information, enlist CHC support staff, and review the current patient intake documentation processes. The specific parameters of the pilot project are outlined in Figure 2.

In addition, the project team will conduct three focus groups and 200 telephone interviews with CHC Veteran patients in order to better understand the reasons why and how these individuals use both VHA and CHC systems of care.

This project has the potential to serve as a national model for VA and other VISNs to collaborate with CHCs.

PILOT PROJECT PARAMETERS BY CONTENT AREA

Increasing VA Enrollment	Improving the CHC Intake Process	Outreach & Education	Establishing Communications Channels	Building a Framework for Clinical Collaboration
Provide CHC with outreach coordinator contact information	Provide CHC intake personnel with a definition of "Veteran"	Develop service area maps of CHC and VA facilities, including Vet Centers	Hold three Veterans focus groups in two participating CHC service areas in order to better understand why and how Veterans use both CHCs and VHA	Provide CHCs with information on the My HealtheVet online medical information tool
Provide CHC with blank 1010EZ enrollment forms and instructions for Veterans to contact outreach coordinator	Provide CHC intake personnel with follow-on questions intended to determine user and enrollment status of the Veteran	Share CHC, CBOC and other VA provider characteristics such as location, hours, services, and points of contact	Facilitate at least two meetings between participating CHCs, their respective Veteran services stakeholders, CBOCs and VISN 5 representatives	Provide VA medication formulary to CHC Medication Assistance Coordinators
Develop a tracking sheet for outreach coordinators to record number of Veteran contacts referred by CHCs	Develop a process within the CHC to communicate Veteran status from intake personnel to the medical provider	Leave VA outreach materials at each CHC to include specialized information regarding mental health services and regarding women Veterans	Provide contact information for VAMC Women Veterans Coordinators	
Provide CHCs with online look-up tool to assess Veteran eligibility by county	Assess the intake and Veteran UDS data collection process for each CHC			