

VA State of the Art Conference on Rural I Health  
September 12-13, 2016, Washington DC

# CHALLENGES OF VETERANS CHOICE IMPLEMENTATION FROM INSULAR ISLAND PERSPECTIVE



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ACOS for R&D VA Caribbean Healthcare System



# I CARE

- This presentation is aligned with the VHA core values, I CARE:
  - *Integrity to do what is Right, not what is Easy*
  - *Commitment to Research & Education*
  - *Advocacy to our Veterans*
  - *Respect to our Patients & Relatives*
  - *Excellence in all we do!*
- ...and with the Blueprint for Excellence Strategy 7



Strategy Seven: Lead the nation in research and treatment of military service-related conditions.

# Objectives

- At the end of this presentation the participants will be able to list...
  - ▣ ...the definition of VHA ORH Insular Island category
  - ▣ ...the unique characteristics of the VA Caribbean Healthcare System (VACHS), as a VA facility serving insular islands Veterans
  - ▣ ...the challenges associated to the VA Choice Program implementation in the VACHS, as a facility serving insular islands Veterans
    - Clinical Perspective
    - Administrative/ Management Perspective
    - Patient Perspective/Veterans Experience

# Rural-Urban Commuting Area Codes (RUCAs)

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**Maps**

**Map Classifications**

We have created several different RUCA codes are assigned (as shown in the map) based on the extent of rural and urban land use at the county level of the county (e.g. metropolitan county). Further, because RUCA codes are provided in more than one variation in the type of rurality/urbanity.

**Four category classification, Census Division**

aggregated into four categories: urban, large rural, medium rural, and small rural. The classification is as follows:

- urban: 1.0, 2.0, 3.0, 4.0, 5.0, 6.0, 7.0, 8.0, 9.0
- large rural: 4.0, 4.2, 5.0, 5.2, 6.0, 6.2, 7.0, 7.2, 8.0, 8.2, 9.0
- medium rural: 10.0, 10.2, 10.3, 10.4, 10.5, 10.6
- isolated: 10.0, 10.2, 10.3, 10.4, 10.5, 10.6

**RUCAs:** New Census tract-based classification scheme that utilizes the standard Bureau of Economic Analysis (BEA) definitions of Urbanized Area, and Urban, Cluster, and Rural, in combination with work commuting information to characterize all of the nation's Census tracts regarding their rural and urban status and relationships. In addition, a ZIP Code RUCA approximation was developed.

<http://www.ers.usda.gov/data-products/rural-urban-commuting-area-codes.aspx>

<http://depts.washington.edu/uwrUCA/index.php>

# Insular Island Definition

in the RUCA system 10.0 is more sparsely populated than 10.1 - 10.6. The U.S. Department of Veterans Affairs (VA) considers the latter to be "regular" rural, not "highly" rural.

In addition, VA recently added an "I" category to complement "U", "R" and "H". The "I" value is assigned to veterans living on the U.S. insular islands (territories): Guam, American Samoa, Northern Marianas and U.S. Virgin Islands.

- Rural-Urban Commuting Areas (RUCA) is used to define urban, rural and highly rural land areas of the United States
- VA recently added an "I" category to complement "U", "R" and "H". The "I" value is assigned to veterans living on the U.S. insular islands (territories): Guam, American Samoa, Northern Marianas and U.S. Virgin Islands
- Puerto Rico

The screenshot shows the U.S. Department of Veterans Affairs website. The main heading is "Office of Rural Health" with a sub-heading "RURAL VETERANS". Below this, there is a section titled "Rural Veterans' Health Care Challenges" which includes a paragraph and a bulleted list of challenges. The bulleted list includes: Higher poverty rates, More hospital closings due to financial instability, Population health factors and "social determinants of health", and More hospital closings due to financial instability. The website also features a search bar, navigation tabs, and various service links like "Hospital Locator", "Health Programs", and "Protect Your Health".

# Insular Island Definition

**From:** VHA 10P1R ORH Communications Shared Mailbox  
**Sent:** Tuesday, August 30, 2016 5:13 PM  
**To:** Molina, Irma L  
**Subject:** RE: Insular Island Definition

Irma,

Thanks for your inquiry! Like the U.S. mainland, Puerto Rico's geographic space is classified as urban, rural and highly rural based on the Rural-Urban Commuting Area (RUCA) system. Since these RUCA data are available for Puerto Rico (unlike the islands you mention below) it is not included in the "insular" category.

I hope this answers your question! Please let us know if we can provide additional information.

Best,  
Krista

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**From:** Molina, Irma L  
**Sent:** Monday, August 29, 2016 2:34 PM  
**To:** VHA 10P1R ORH Communications Shared Mailbox  
**Subject:** Insular Island Definition  
**Importance:** High

**Dear All:** I was navigating within the ORH website: <http://www.ruralhealth.va.gov/aboutus/ruralvets.asp#atlas> to get more information on the definition of the insular island category. I found the following definition:

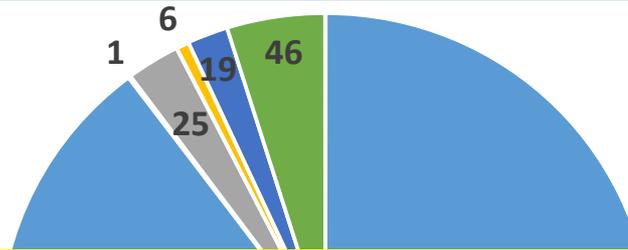
*"In addition, VA recently added an "I" category to complement "U", "R" and "H". The "I" value is assigned to veterans living on the U.S. insular islands (territories): **Guam, American Samoa, Northern Marianas and U.S. Virgin Islands.**"*

I would like to know in which category Veterans from **Puerto Rico** are categorized. The VA Caribbean Healthcare System serves Puerto Rico and USVI, USVI is indeed included in the definition on insular islands...but now, I am not clear about Puerto Rico as I do not see it included in the definition.

*Irma L. Molina, MD*  
Associate Chief of Staff for R&D

# Insular Island Definition

Puerto Rico RUCA Codes 2010  
945 FIPS (Federal Information Processing Standards)  
codes

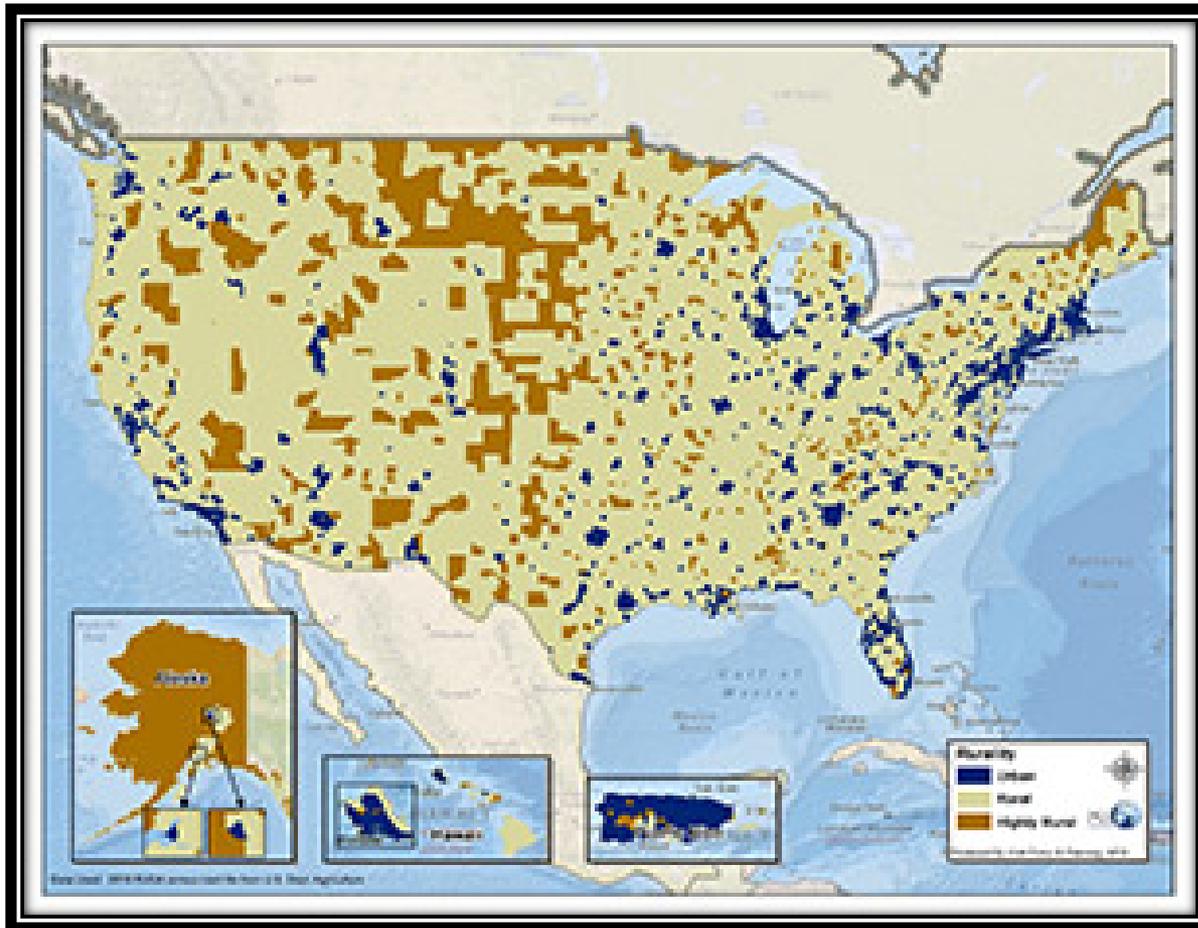


## Primary RUCA Codes, 2010

- 1 Metropolitan area core: primary flow within an urbanized area (UA)
- 2 Metropolitan area high commuting: primary flow 30% or more to a UA
- 3 Metropolitan area low commuting: primary flow 10% to 30% to a UA
- 4 Micropolitan area core: primary flow within an Urban Cluster of 10,000 to 49,999 (large UC)
- 5 Micropolitan high commuting: primary flow 30% or more to a large UC
- 6 Micropolitan low commuting: primary flow 10% to 30% to a large UC
- 7 Small town core: primary flow within an Urban Cluster of 2,500 to 9,999 (small UC)
- 8 Small town high commuting: primary flow 30% or more to a small UC
- 9 Small town low commuting: primary flow 10% to 30% to a small UC
- 10 Rural areas: primary flow to a tract outside a UA or UC
- 99 Not coded: Census tract has zero population and no rural-urban identifier information

90% urban

# Insular Island Definition



<http://www.ruralhealth.va.gov/about/rural-veterans.asp>



## VA Caribbean Healthcare System (VACHS): Serving Veterans in Puerto Rico and the U.S. Virgin Islands

Complexity system level 1a of care Facility

Tertiary care VA Medical Center (VAMC) located in San Juan, Puerto Rico

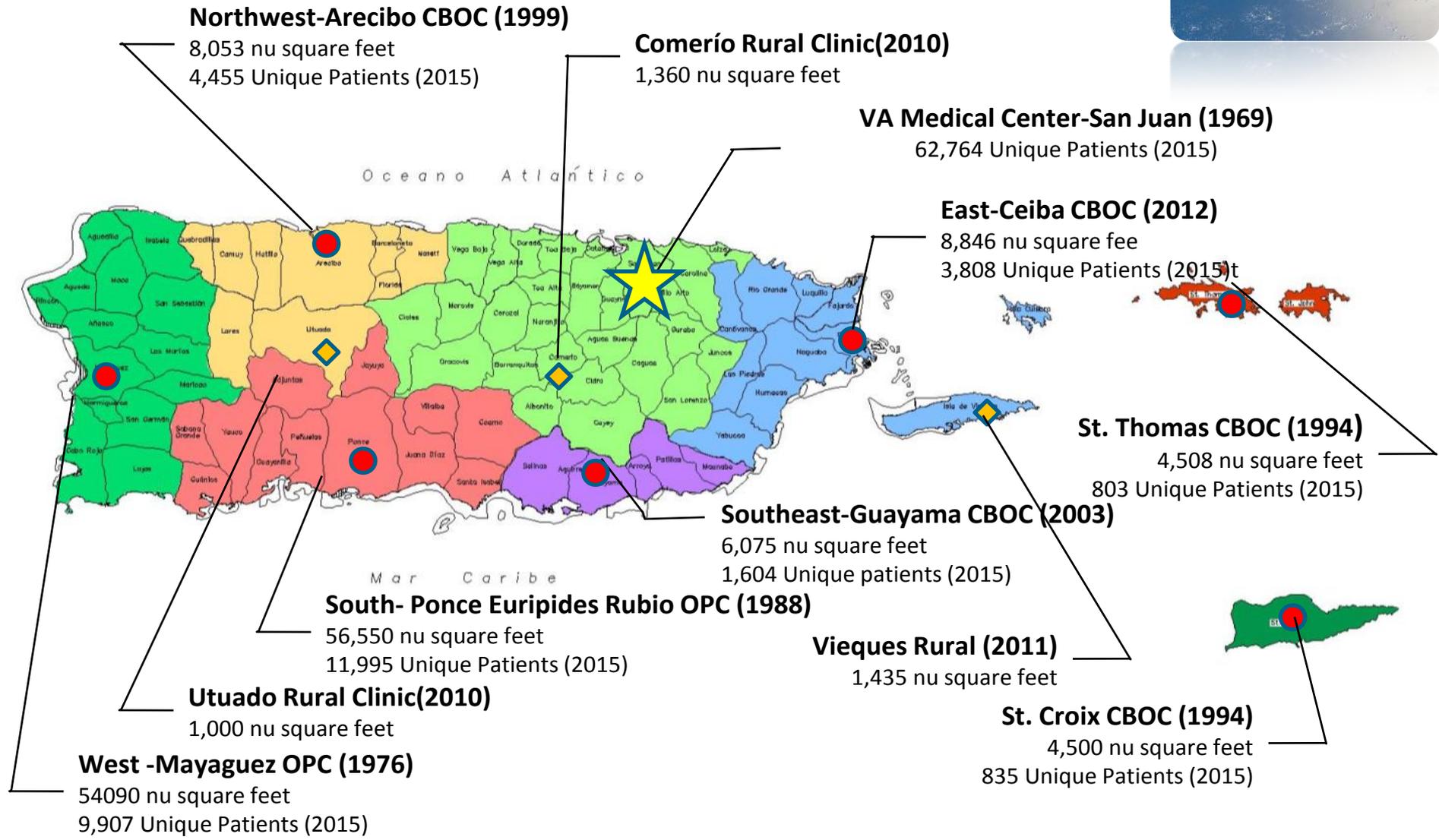
2 Outpatient Clinics (OPCs)

5 Community Based Outpatient Clinics (CBOC)

3 Rural Clinics



# Facility: Name, Year of Establishment, Size, and Unique patients as per FY15



# Transition...



1955

1969

2016

1921

- Veterans Bureau was established in San Juan, Puerto Rico

1933

- President Roosevelt authorized VA in PR to hospitalize veterans in private hospitals under contract basis

1946

- VA General Medical and Surgical Hospital



# VA Caribbean Healthcare System (VACHS)

- 300 authorized acute care beds (including 12 blind rehabilitation beds)
- 122 nursing home beds (including 29 transitional beds and 5 beds for Long Term Care Spinal Cord Injury)
- Services are provided to a population of 107,207 veterans in Puerto Rico and the U.S. Virgin Islands
- In FY 2015 the VA Caribbean Healthcare System registered:
  - **63,879** unique patients
  - **1,087,350** outpatient visits
  - **9,187** veterans treated as inpatients



# VA Caribbean Healthcare System (VACHS)

## Specialized Services and Programs:

- Polytrauma Network Site Level II
- Spinal Cord Injury
- Blind Rehabilitation
- Women Health Program: 2,298 Uniques Female Patients (2015)
- Chest Pain Center
- Community Living Center
- Research and Development Program
- VACHS Caregivers Support Program: serves 921 caregivers; 576 receive comprehensive benefits
- OEF/OIF/OND:
  - In FY15...
    - 2,000+ soldiers and family members were reached in 30+ outreach activities
    - VACHS registered 8,047 OEF/OIF/OND uniques
    - Enrolled 12,404 returning soldiers; 7% Women Veterans

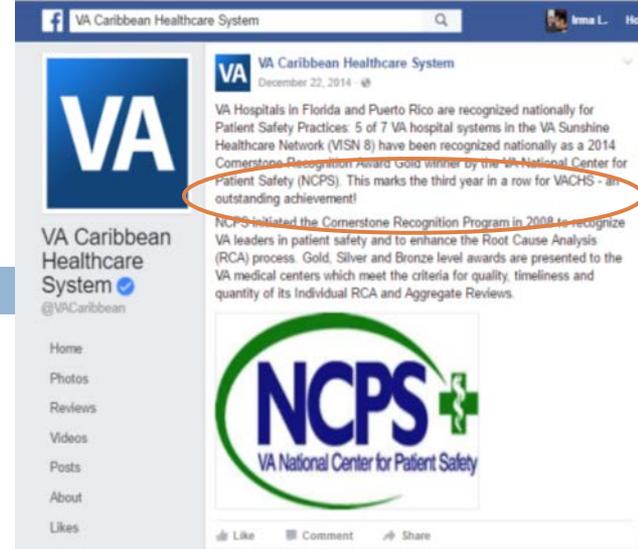


# VA Caribbean Healthcare System (VACHS) Virtual Care



- Clinical Video Telehealth:
  - 23+ (nutrition, social work service, clinical pharmacy, dental, polytrauma/traumatic brain injury (TBI)-individual, audiology, speech language pathology, PM&R amputation clinic, bros (blind rehab o/p spec), spinal cord injury (SCI), cardiology, dermatology, pulmonary/chest, renal/nephrol(except dialysis), primary care/medicine, move program grp, gynecology, podiatry, urology, mental health, psychiatry, sub use disorder indiv, PTSD-indiv, care of HT program patients, etc.)
- Currently working to establish VA Video Connect for our veterans during FY 2017
- Store-and-Forward Telehealth: Currently serving over a combined 5,100 unique Veterans in Puerto Rico and the U.S. Virgin Islands
- Expanding to telehealth directed research related to TBI

# VACHS: Serving Veterans in Puerto Rico & the U.S. Virgin Islands



8/2015: Chest Pain Center received full accreditation by the Society of Cardiovascular Patient Care



## The Joint Commission

7/2016: "the best Medical Facility in Puerto Rico and the Caribbean"

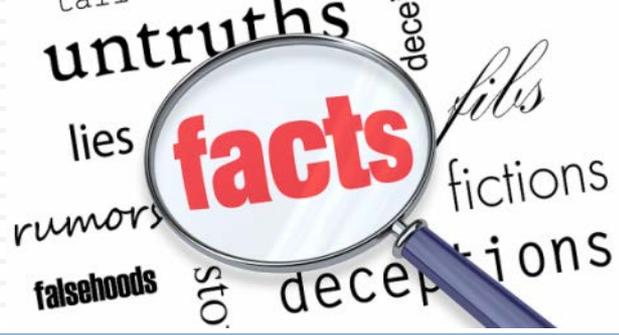


Commission on Accreditation of Rehabilitation Facilities (CARF)



2/2016: Awarded with the prestigious Accreditation Council of Graduate Education and Gold Foundation's **DeWitt C. Baldwin, Jr. Award**. The award recognizes institutions with accredited residency/fellowship programs that are "exemplary in fostering a respectful, supportive environment for medical education and the delivery of patient care"





# Veterans Choice Program (VCP)

Which were the challenges when we implemented the Veterans Choice Program in VACHS to include our Puerto Rican and US Virgin Islanders Veterans?



# Methodology

## Focus Groups



Veteran Choice Program  
Focus Group:

1. Clinical Only
2. Administrative (HAS)  
Only
3. Administrative/Clinical  
Participants = 7 (3 clinical &  
4 administrative)

## Online Survey



Veterans Choice Program  
Quality Survey:

1. Primary Care Providers
  2. Clinical/Administrative  
Service Chief and  
Executive Team
- Participants = 29

## Face to Face Interviews

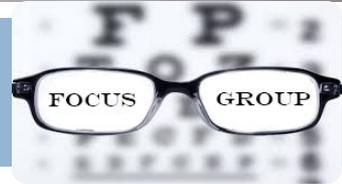


Veterans Choice Program  
Quality Survey - The  
Veterans Experience:

1. Puerto Rico (341)
  2. US Virgin Islands (9)
- Participants = 350



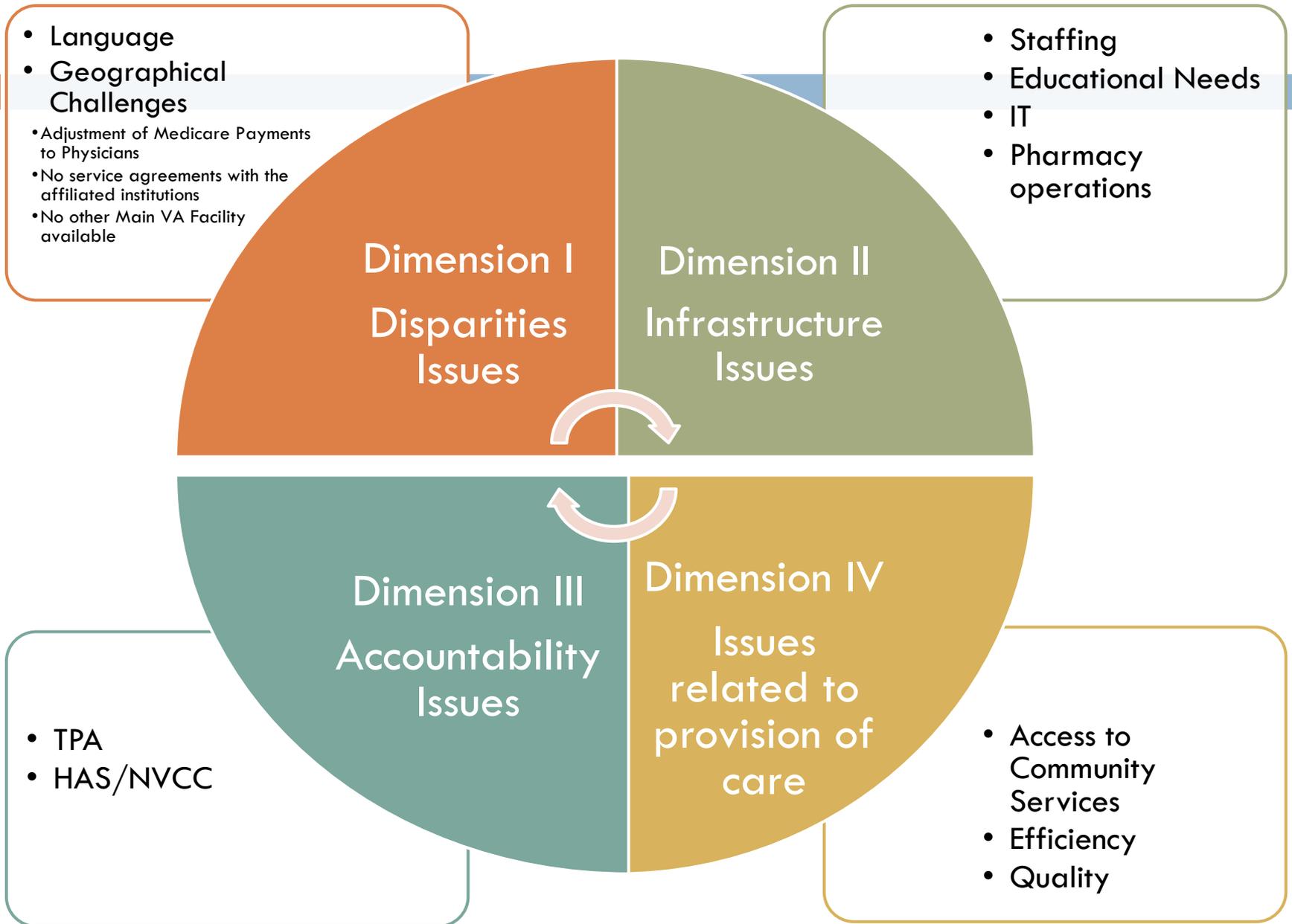
## VCP Focus Groups

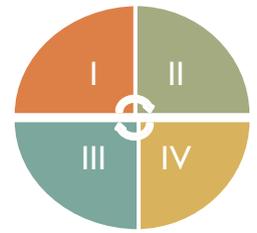


Clinical

Administrative

# VCP Focus Groups Results -Dimensions identified





# VCP Focus Groups Results

## Clinical

- Language Barrier
- Geographic Challenges
  - ▣ Adjustment of Medicare Payments to Physicians
  - ▣ No service agreements with the affiliated institutions
  - ▣ No other Main VA Facility available
- Lack of Training
- Providers no register in VA Pharmacy
- TPA Documentation
- HAS/NVCC Accountability
- Clinical professionals moving to Mainland
- No Quality Control measures

## Administrative

- Language Barrier
- Lack of Training
- IT interconnections (CPRS : DOMA)
- The TPA work is done by the VA
- Volume VCP referrals returned back to the Facility
  - ▣ Untimely by TPA
- Delay on “start-up” of TPA scheduling
- Enrollment process not considered “lean”

# No Shows Rate at VACHS



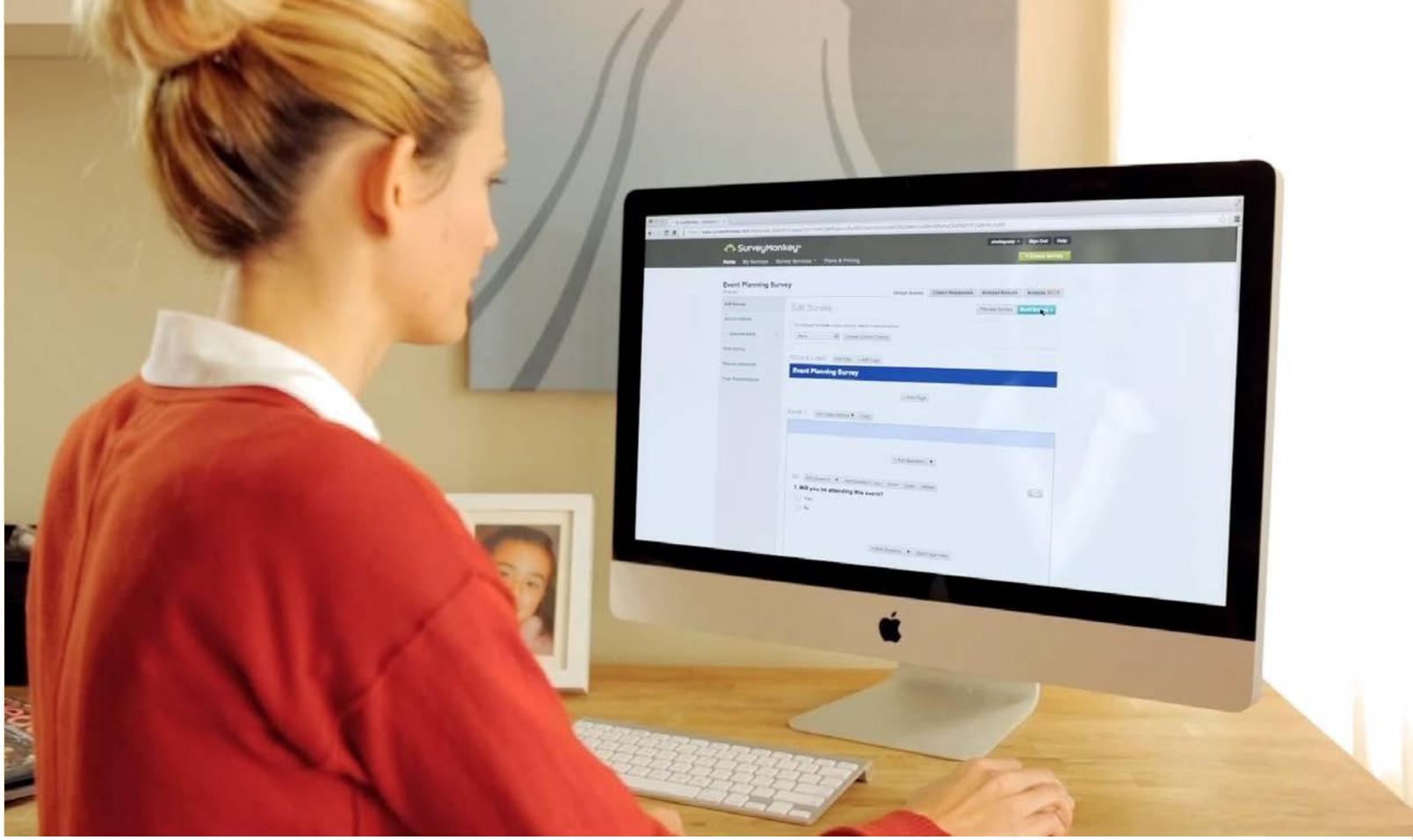
	FY16		FY16
(V08) (673) Tampa, FL	12.98%	(V08) (672GE) Guayama	9.44%
(V08) (548) West Palm Beach, FL	13.11%	(V08) (672B0) Ponce	11.43%
(V08) (516) Belle Glades, FL	13.40%	(V08) (672BZ) Mayaguez	13.62%
(V08) (672) San Juan, PR	13.85%	(V08) (672) San Juan VAMC	14.11%
V08	14.39%	(V08) (672GD) Ceiba	14.41%
(V08) (573) Gainesville, FL	14.79%	(V08) (672GA) St Croix	16.78%
(V08) (675) Orlando, FL	15.60%	(V08) (672GC) Arecibo	17.91%
(V08) (546) Miami, FL	17.21%	(V08) (672GB) St Thomas	18.08%

Source: Pyramid Analytics: VA-Prod-BI-Office Website accessed 9/6/2016  
<https://bioffice.pa.cdw.va.gov/default.aspx?bookid=4ebf7e78-d693-47d9-8162-73164dacf38b|ispasFalse|reportcf375f4f-248a-40f5-87fe-c24fc2f93d84|ws5|wsb0|isDisabledAnalyticsTrue|isDashboardPanelOnTrue>



# VCP Focus Groups: Specific Examples





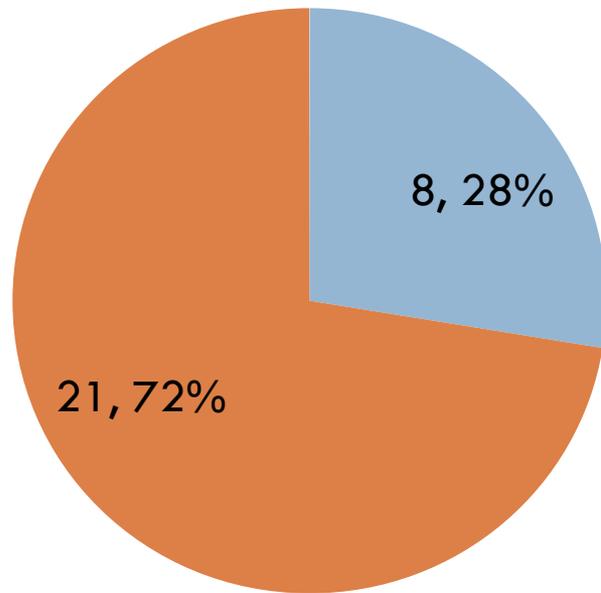
## Online Survey: VCP Quality Survey Results

Providers

Service Chiefs

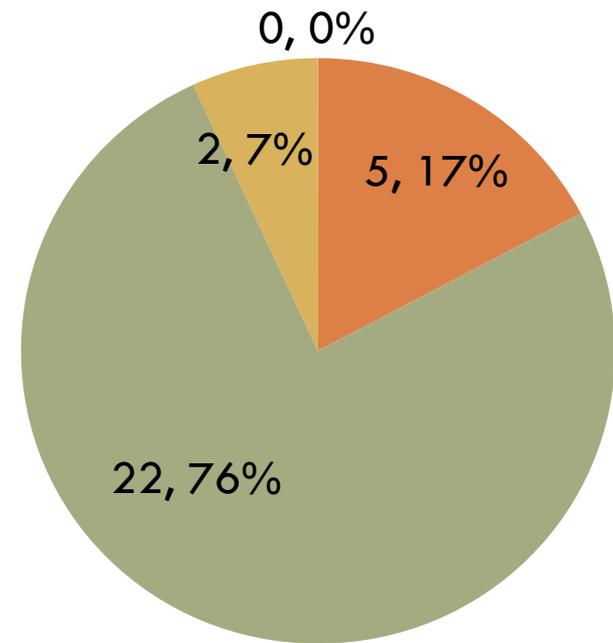
# Online Survey: VCP Quality Survey Results

## Type of Service



■ Administrative ■ Clinical

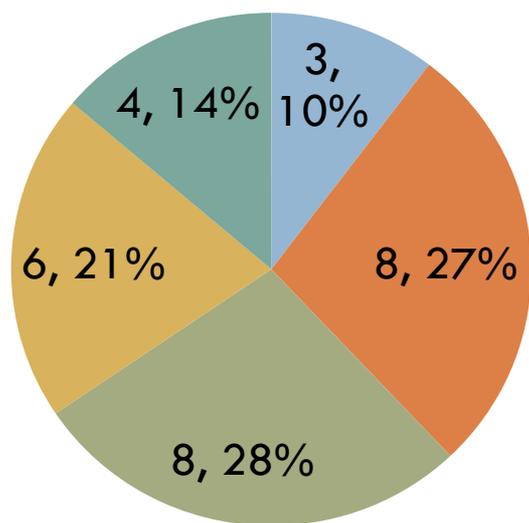
## Age



■ 18 - 30 years old ■ 31 - 44 years old  
■ 45 - 64 years old ■ 65 years or older

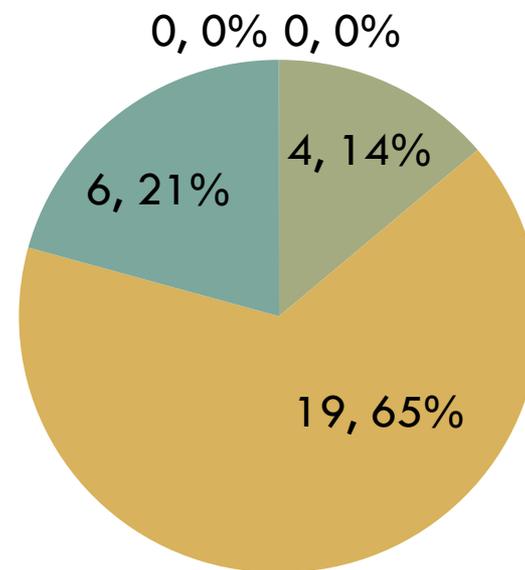
# Online Survey: VCP Quality Survey Results

## Years working at VACHS



- Less than 5 years
- 5 - 10 years
- 11 - 20 years
- 21 - 30 years
- More than 30 years

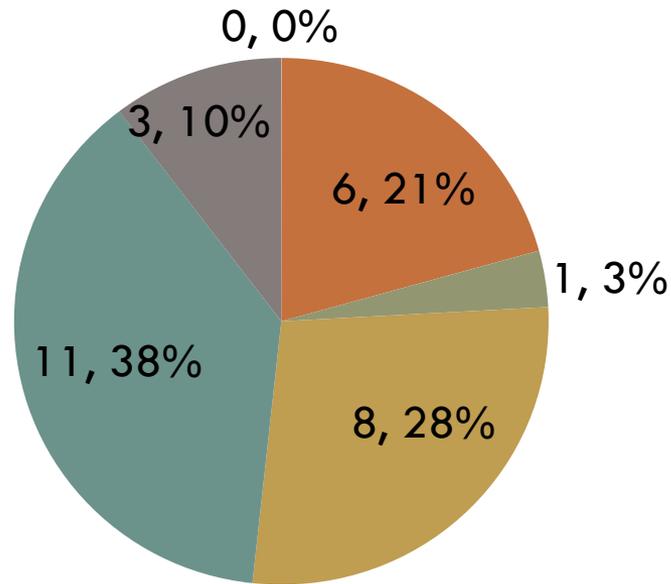
## Familiarity with Choice



- Not at all familiar
- Slightly familiar
- Somewhat familiar
- Moderately familiar
- Extremely familiar

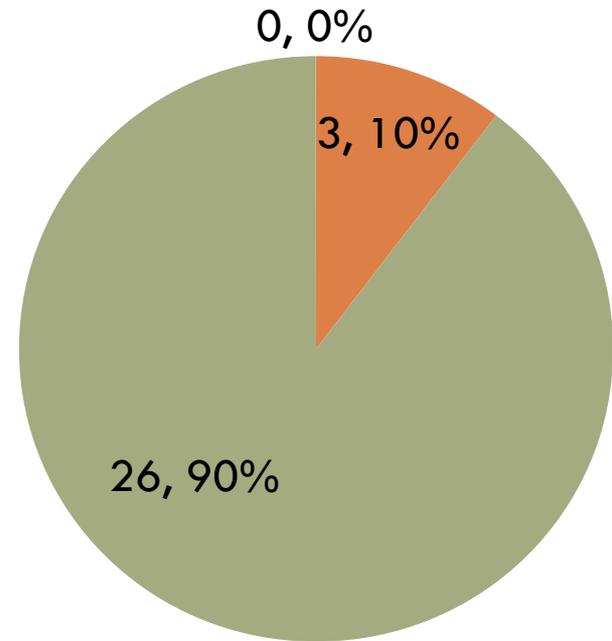
# Online Survey: VCP Quality Survey Results

## Expectation of Choice



- Very good program
- Good program
- Average program
- Poor program
- Very poor program
- Had no expectation

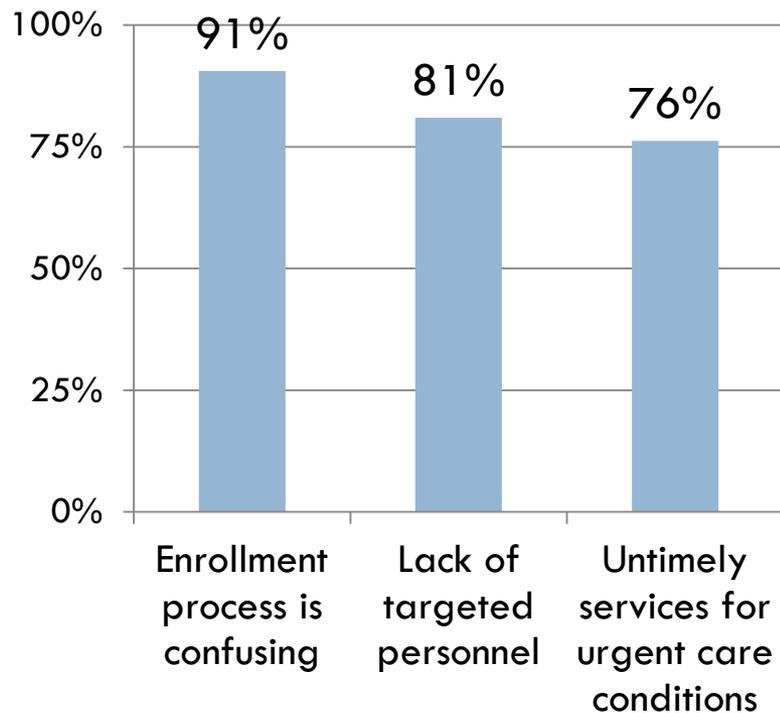
## Expectation vs. Reality



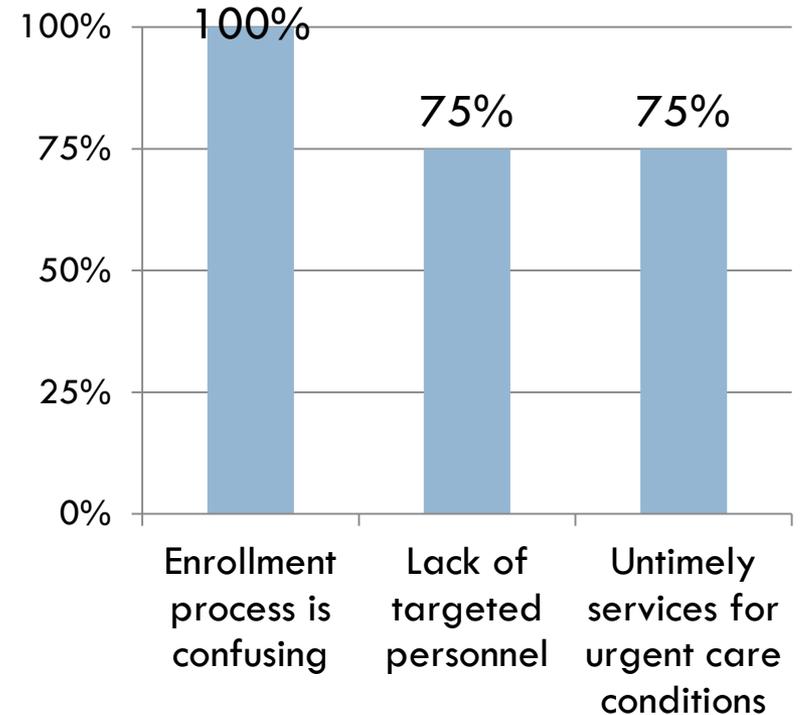
- Better than expected
- Exactly as expected
- Worse than expected

# Online Survey: VCP Quality Survey Results – INTERNAL CHALLENGES

## Clinical

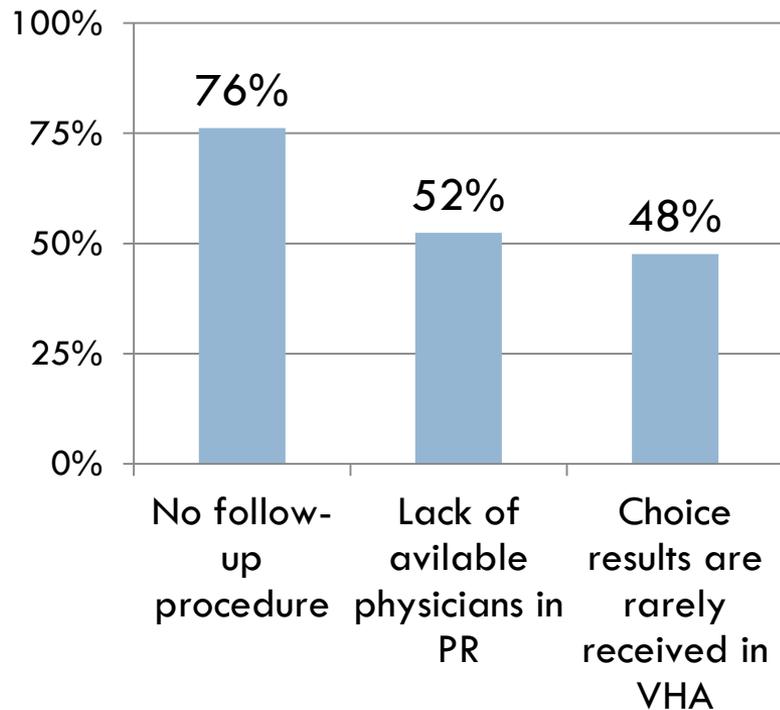


## Administrative

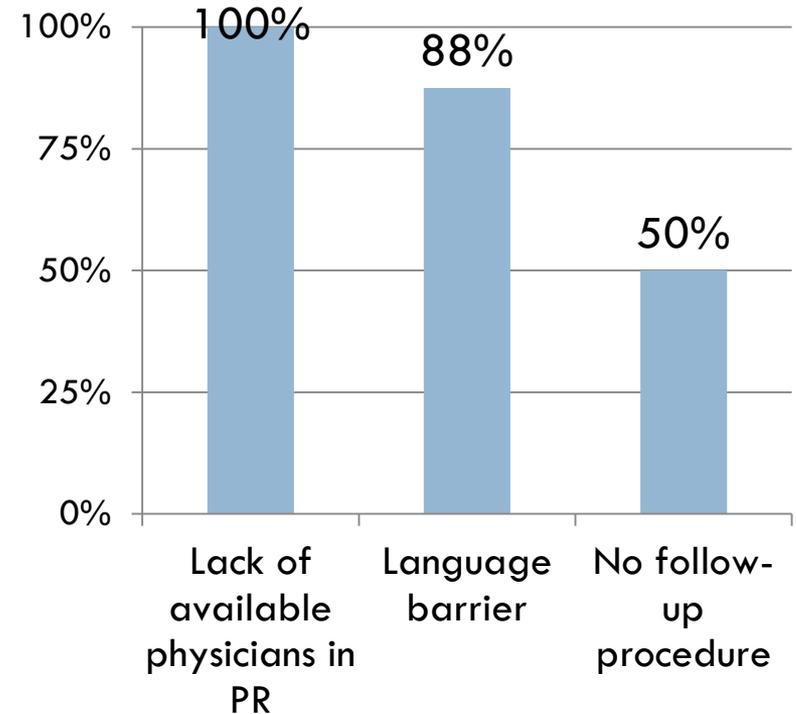


# Online Survey: VCP Quality Survey Results— EXTERNAL CHALLENGES

## Clinical

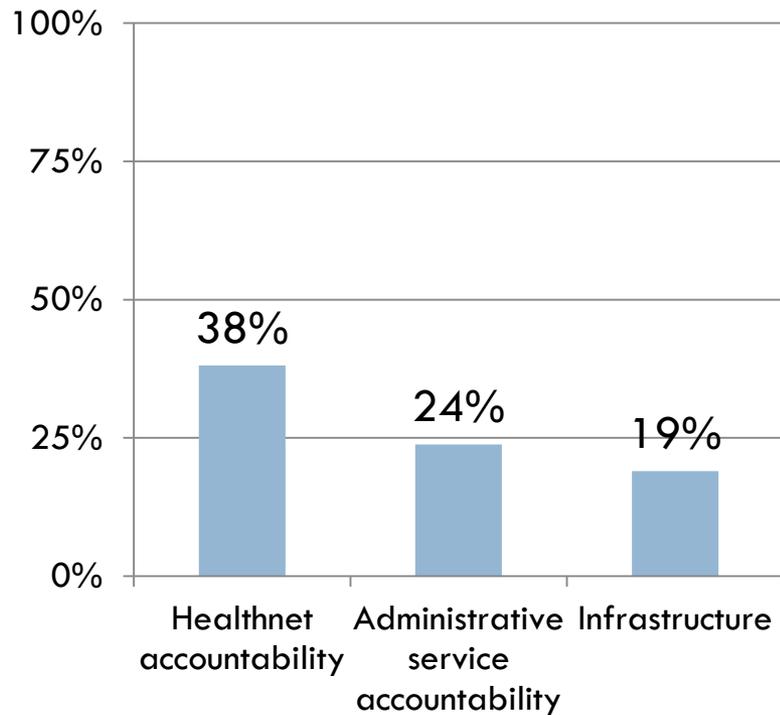


## Administrative

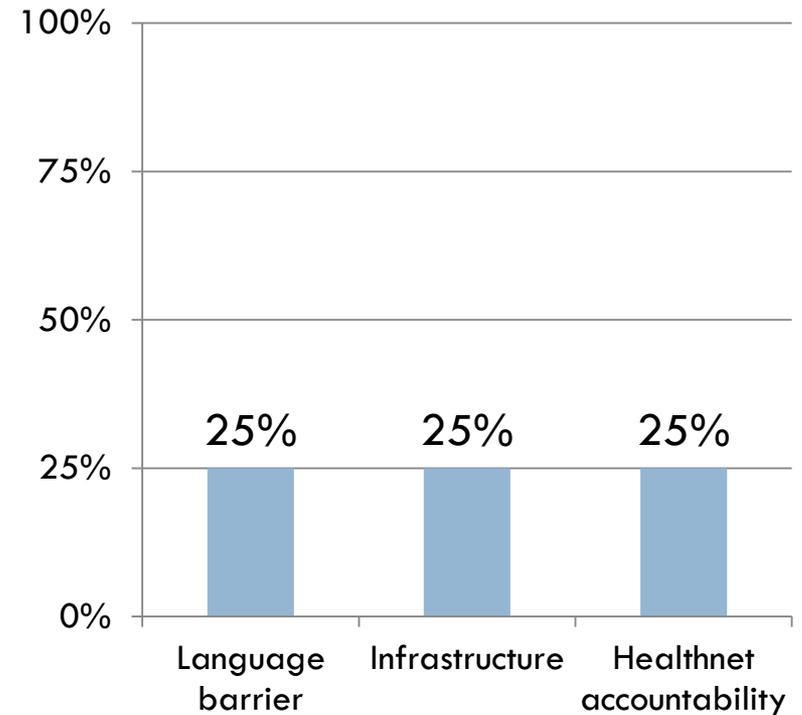


# Online Survey: VCP Quality Survey Results— MOST IMPORTANT ASPECT TO ADDRESS

## Clinical



## Administrative





## Face to Face Interviews: VCP Quality Survey- The Veterans Experience

Those who have used VCP

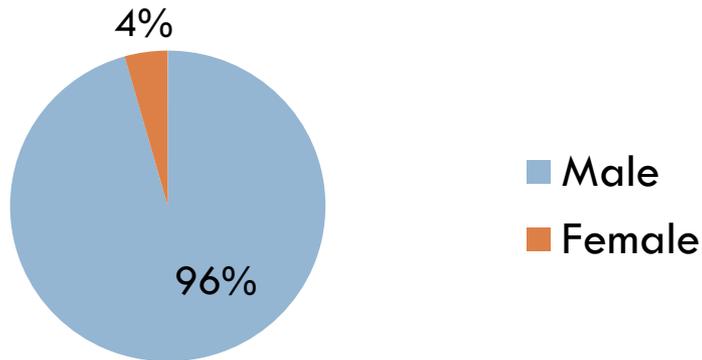
Those that have knowledge about VCP but have not used it

Those that do not know about VCP

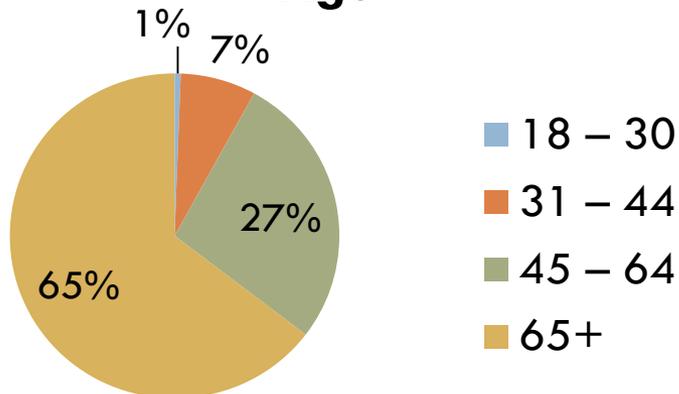
# Face to Face Interviews: VCP Quality Survey- The Veterans Experience

## Puerto Rico (n=341)

### Gender

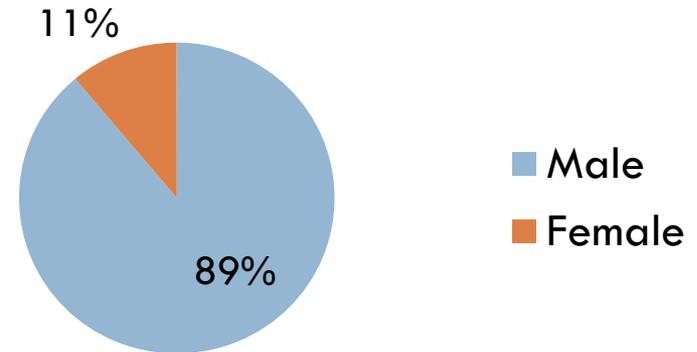


### Age

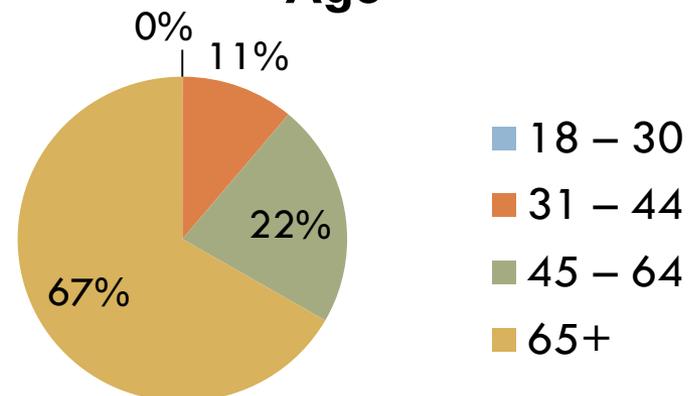


## US Virgin Islands (n=9)

### Gender



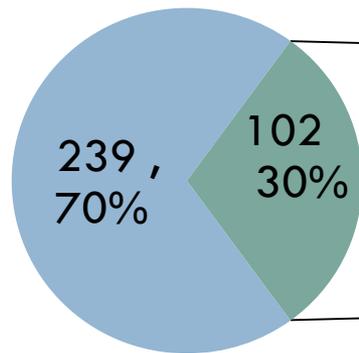
### Age



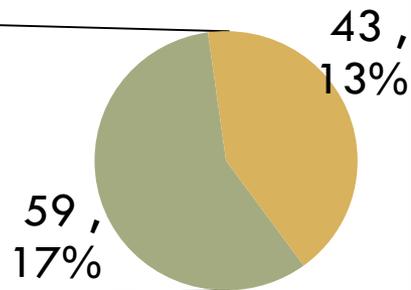
# Face to Face Interviews: VCP Quality Survey- The Veterans Experience

Puerto Rico (n=341)

**Knowledge  
about Choice**



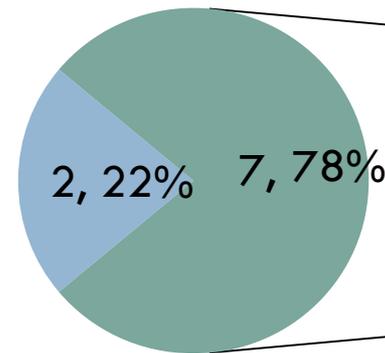
**Has used  
Choice**



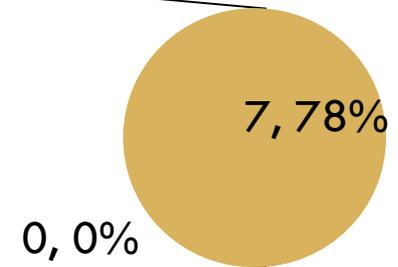
■ No ■ Yes ■ Not used ■ Used

US Virgin Islands (n=9)

**Knowledge  
about Choice**



**Has used  
Choice**



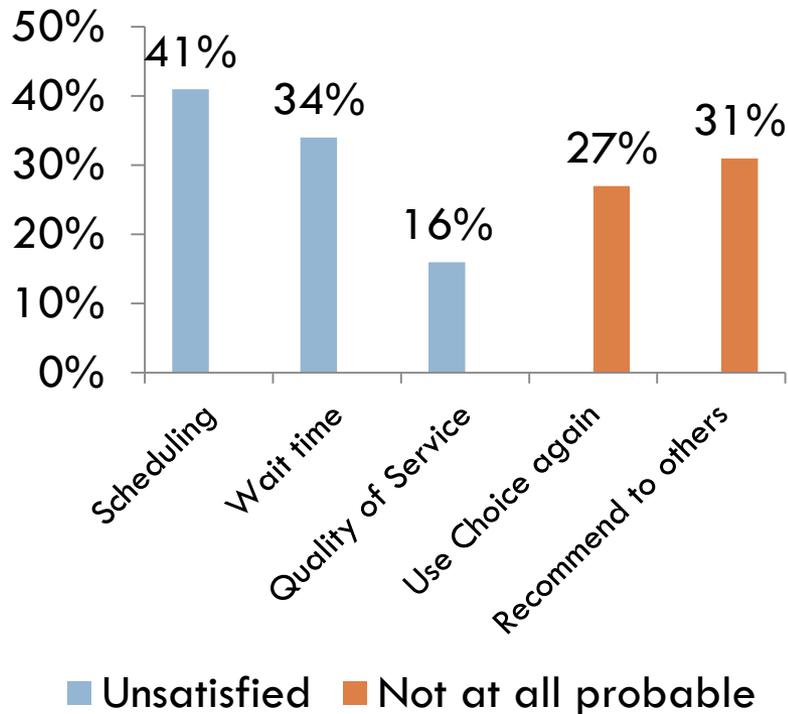
■ No ■ Yes ■ Not used ■ Used



# Face to Face Interviews: VCP Quality Survey- The Veterans Experience (those who have used VCP)

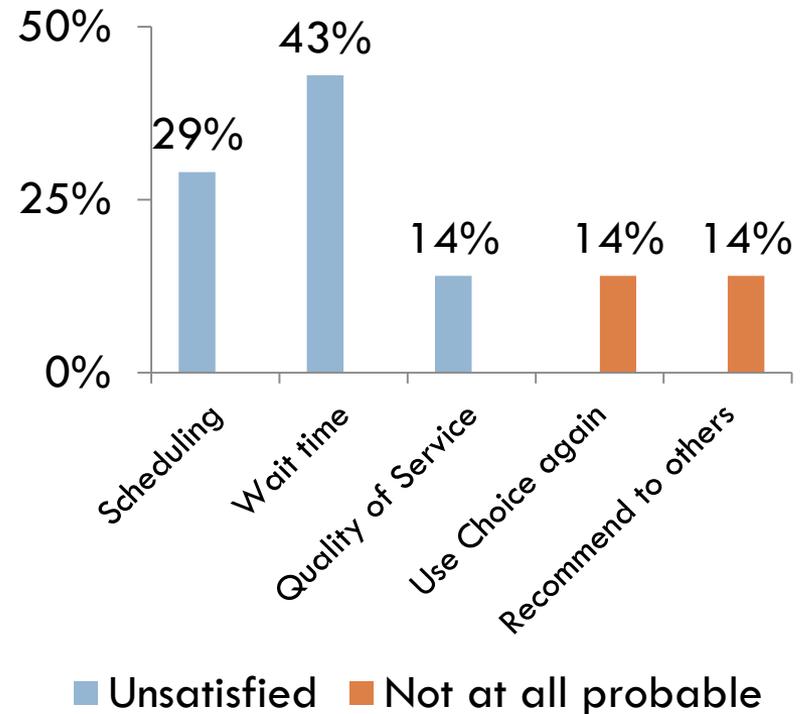
## Puerto Rico

### Satisfaction with Choice



## US Virgin Islands

### Satisfaction with Choice

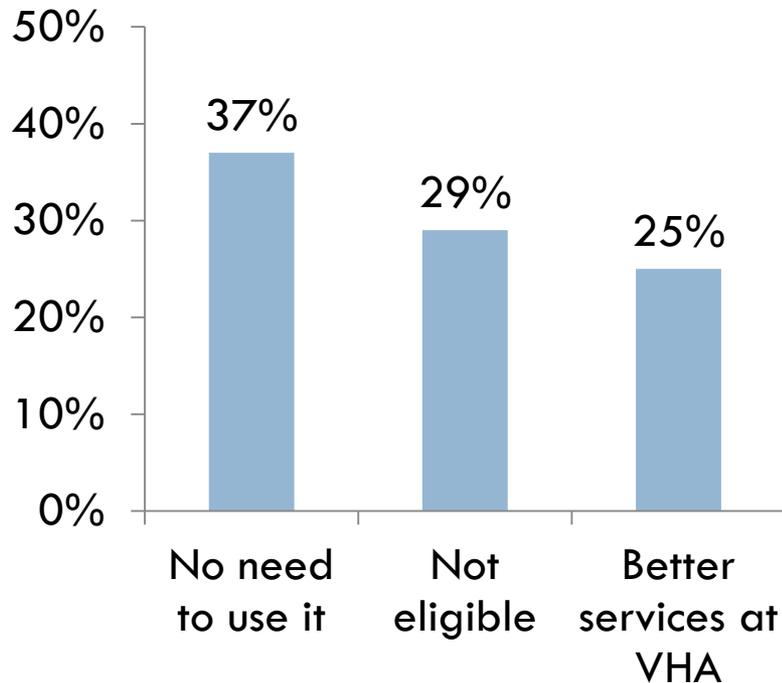




# Face to Face Interviews: VCP Quality Survey- The Veterans Experience (those that have knowledge about VCP but have not used it)

## Puerto Rico

### Barriers to use Choice



## US Virgin Islands

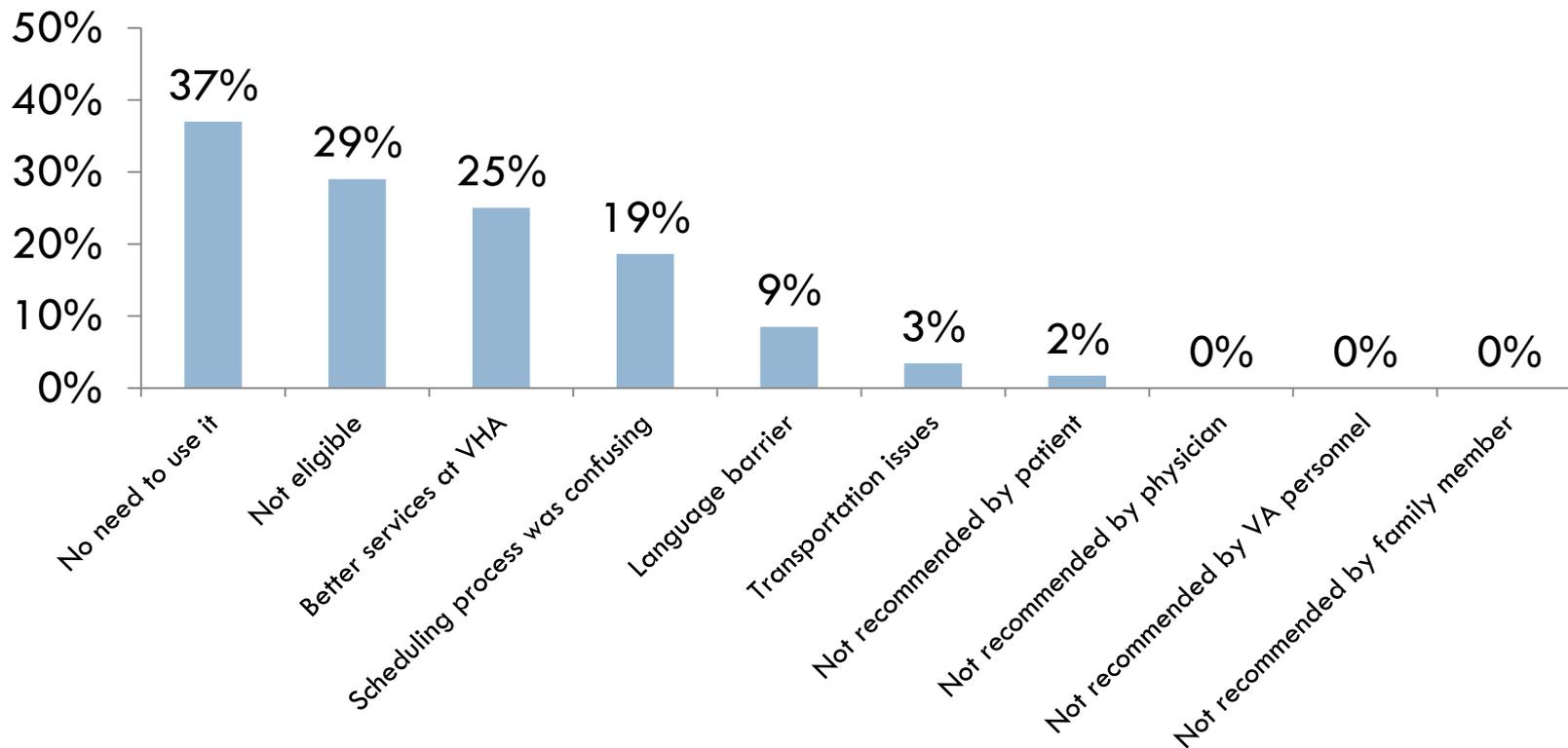
0 participants mentioned that they had knowledge about Choice but had not used it



# Face to Face Interviews: VCP Quality Survey- The Veterans Experience (those that have knowledge about VCP but have not used it)

## Puerto Rico

### Barriers to use Choice

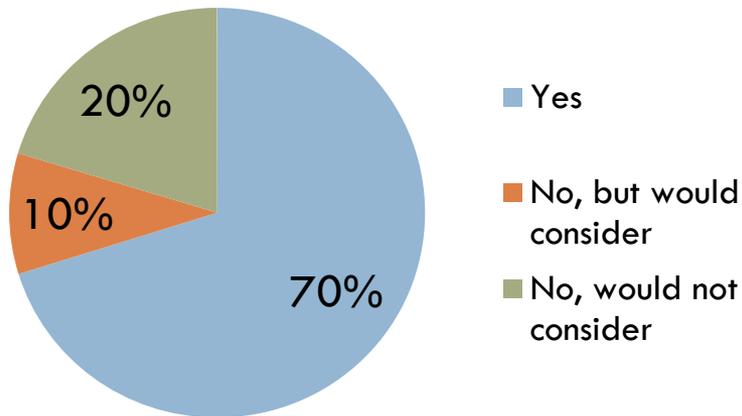




# Face to Face Interviews: VCP Quality Survey- The Veterans Experience (those that do not know about VCP)

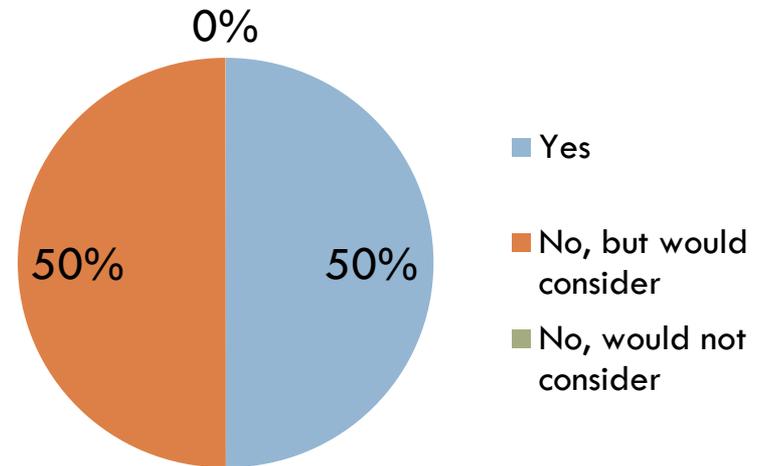
## Puerto Rico

**Would use Choice if eligible**



## US Virgin Islands

**Would use Choice if eligible**

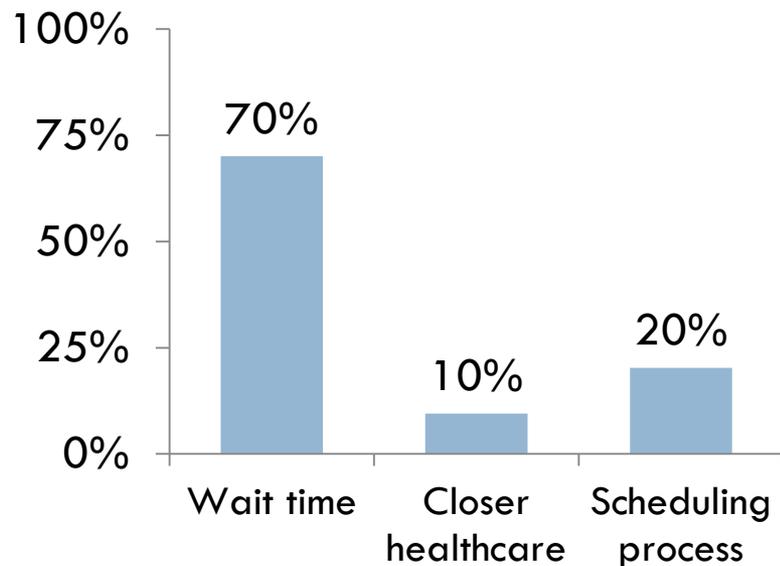




# Face to Face Interviews: VCP Quality Survey- The Veterans Experience (those that do not know about VCP)

## Puerto Rico

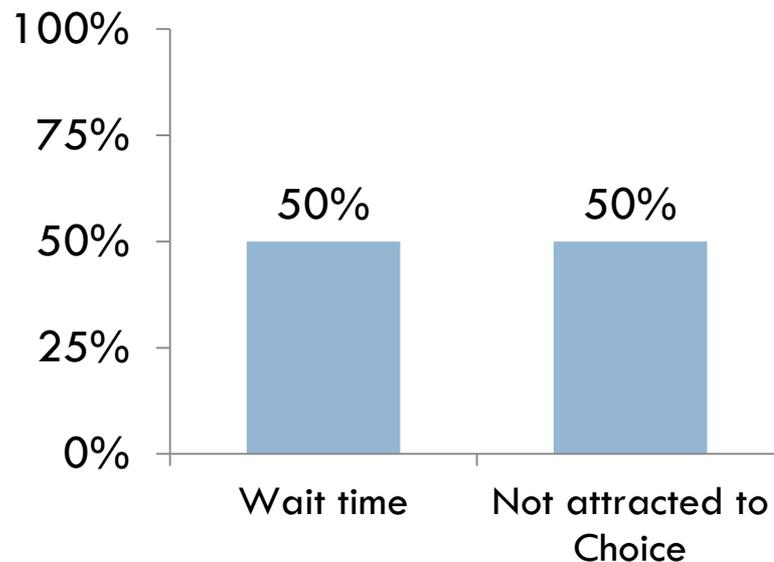
### Aspects about Choice that attract



23% is not attracted to the VCP at all

## US Virgin Islands

### Aspects about Choice that attract

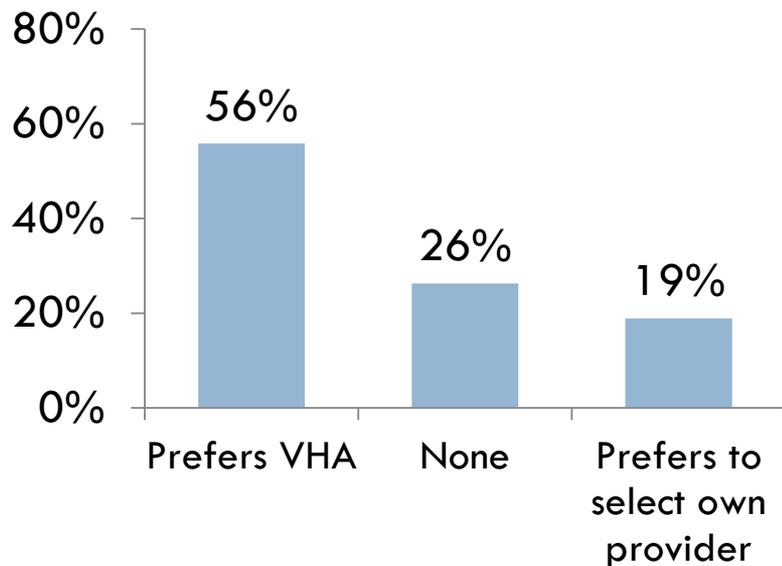




# Face to Face Interviews: VCP Quality Survey- The Veterans Experience (those that do not know about VCP)

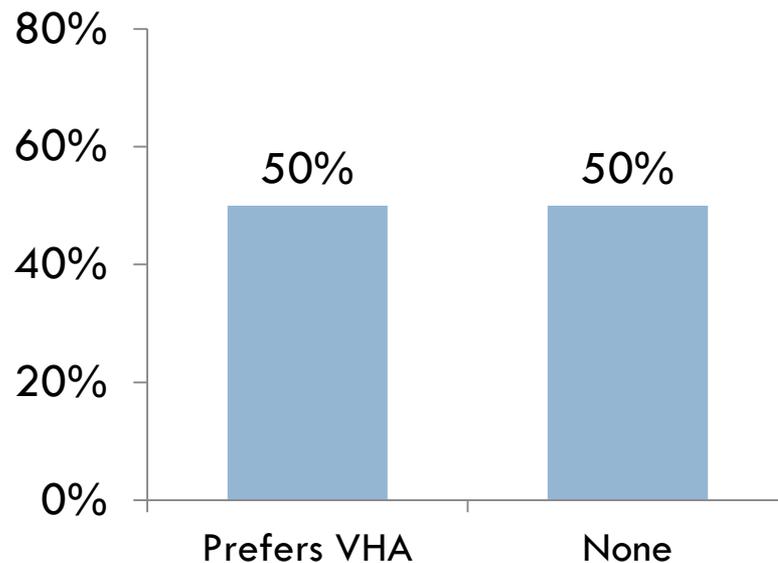
## Puerto Rico

**Aspects about Choice that could prevent from using**



## US Virgin Islands

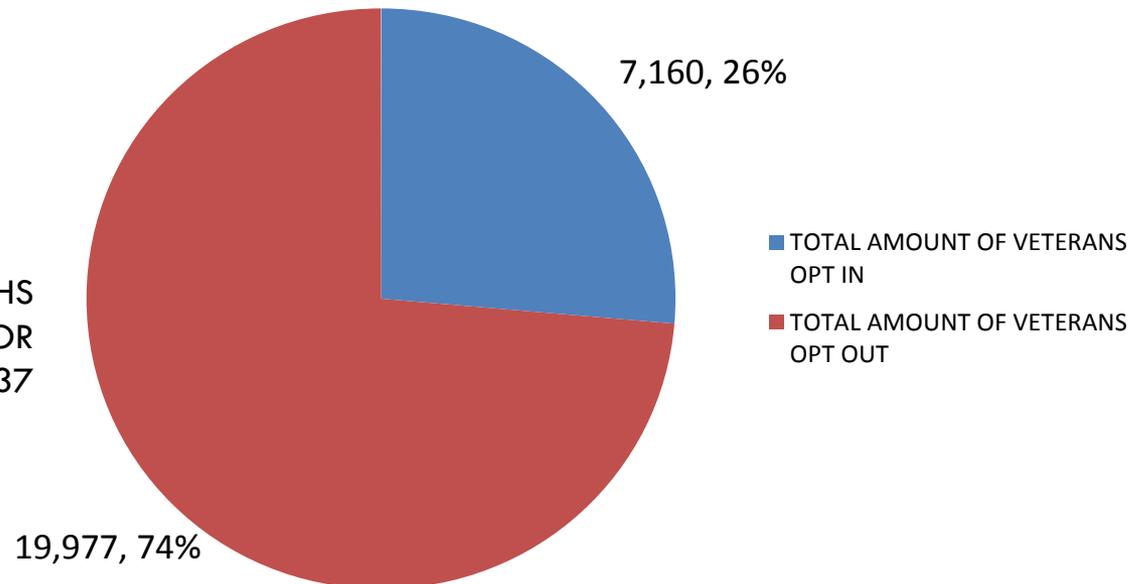
**Aspects about Choice that could prevent from using**



# Face to Face Interviews: VCP Quality Survey- The Veterans Experience: Specific Examples

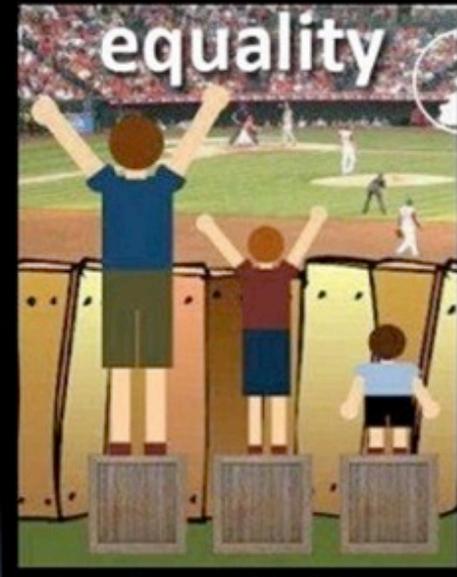
- “I haven’t used Choice because my VA providers know me and my medical history”
- “The Choice appointed provider is upset with the payments”

THE TOTAL AMOUNT OF VACHS  
VETERANS IN THE VCL LIST FOR  
FY16 AS PER 8/23/2016 = 27,137



# Equality versus Equity

## Equality vs. Equity



**EQUALITY=SAMENESS**

**GIVING EVERYONE THE SAME THING** → It only works if everyone starts from the same place



**EQUITY=FAIRNESS**

**ACCESS to SAME OPPORTUNITIES** → We must first ensure equity before we can enjoy equality

From the Caribbean Insular Island perspective...

The **BIG**  
Answer

## Veterans Choice Program (VCP)

Direct research efforts on VCP into...



### Veterans Choice Program

Access health care closer to home



# FUTURE directions

*the next 5 years*



Initiatives to gain a better understanding of Insular Islands' geographical reality and the challenges it represents



Partnering with the Community to provide services to our Veterans and, if needed, helping them to raise up their healthcare standards: Federal Qualified Healthcare Organizations

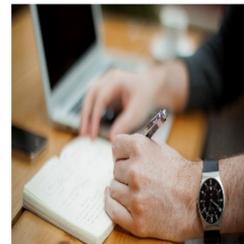
Measure the impact of having bilingual personnel at TPA



Implementation of a trackable mechanism for providers to be informed of referral' status



Implementation of new technology for bi-directional interface between CPRS and TPA Portal



Implement Educational Initiatives and measures the outcomes: Veterans, Providers and HAS/NVCC staff oriented

Incorporate quality measures into the VCP structure to assure appropriate standard of care



Improve coordination of care:  
Establishment of a Service Center for VCP (Veterans' Centered Idea)  
Analyze data on return of referrals  
Improve CPRS documentation (Expert Panel)



Any questions?



In Summary:

- VHA ORH Insular Island category
- Characteristics of the VACHS
- Challenges associated to the VCP implementation in the VACHS, as a facility serving insular islands Veterans



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Axel Román, VACHS Chief of Patient and Community Relations

## The Veterans Choice Program



The concept is innovative...

The innovation to assure a flawless implementation...

That is in our hands!