

VA MISSION Act of 2018
Your Care is Our Mission

TOMAH VA MEDICAL CENTER

VA MISSION Act Overview

Presentation for: CVSO's & Congressional Liaisons

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VA MISSION Act of 2018

Your Care is Our Mission

What We're Going to Cover Today

- What is the MISSION Act?
- Health Care Eligibility
- Community Care Eligibility
- Urgent Care Benefit
- Copayments & Insurance
- Expanding Eligibility for Caregivers Support
- Peer Specialists
- Complaint and Appeals Process



VA MISSION Act of 2018

Your Care is Our Mission

Delivering an excellent experience of care for Veterans, families, and caregivers is at the core of VA's approach to the MISSION Act.

VA is one integrated system with internal and community aspects of care delivery.

The MISSION Act strengthens both aspects of care delivery and empowers Veterans to find the balance in the system that is right for them.

VA is leveraging this opportunity to grow into an optimized, customer-centric network.



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MISSION Act and Modernization

- Executive-In-Charge Dr. Stone's vision is to transform VHA into an Integrated High Reliability Organization using 10 Lanes of Effort.
- VA MISSION Act is one of the ten lanes that will enable Dr. Stone's vision
- That vision is a unifying factor for all employees and all initiatives.
- MISSION addresses in-network and non-VA health care issues, Veterans' homes, access to walk-in VA care, prescription drug procedures, and more.



VA MISSION Act for Veterans

Your Care is Our Mission

The VA MISSION Act of 2018 empowers Veterans and enhances care options.

VA will:

- Continue to be a trusted, caring partner;
- Meet you where you are, with the right care at the right place and the right time;
- Provide telehealth in your home, in a VA facility, or in the community;
- Focus on providing an excellent experience for you and the important people in your life.

We are honored to serve you!



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Stronger Network to Care for Veterans

VA is improving internal and community care coordination through one optimized, customer-service network.

- Improved systems that work together to transform our business processes and deliver better customer service.
- Transparent health care options to help Veterans make informed health care choices.



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Trusted Caring Partner

- Through the MISSION Act, VA gives Veterans the power to choose the care they trust, and more Veterans are choosing VA for their health care than ever before.
- Patients' trust in VA care has skyrocketed - currently at 87.7%
- VA is leading the health care industry in transparency by helping Veterans compare data across VA and the private sector so they can make informed decisions when selecting a provider.
- VA is giving Veterans more choices in their health care decisions and improving transparency by becoming the first hospital system in the nation to publicly post wait times, opioid prescription rates, accountability, settlements, and chief executive travel.
- Our medical services will continue to evolve to meet Veterans' needs and strengthen the trust in the VA by constantly innovating, upgrading, and pursuing better ways to serve our Nation's heroes.



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Expanding Telehealth

The MISSION Act allows VA providers to use telehealth to deliver care across state lines and into Veterans' homes regardless of whether or not the provider or the patient are on federal property.

- VA is recognized as a world leader in the development and use of telehealth.
- Telehealth helps VA move care outside of VA facilities and into Veterans' homes via their computers and mobile devices.
- VA's goal is to have all primary care and mental health clinicians telehealth-capable by the end of fiscal year 2020.
- Access to care for Veterans is anticipated to increase with the growth of telehealth.



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New Assistance for Underserved Areas

- The MISSION Act guides VA to implement a pilot program to establish mobile deployment teams to address and improve care in underserved areas.
- Underserved facilities are defined as a medical center, ambulatory care facility, or community-based outpatient clinic in the Department of Veterans Affairs with a shortage of health care services.
- The MISSION Act allows VA to expand or create education programs in certain underserved areas. The Graduate Medical Education and Residency will allow VA to support residents' costs at covered VA and non-VA facilities.



Telehealth synchronous appt.



VA Video Connect synchronous appt.



Mobile Medical Unit

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VA Health Care Eligibility Requirements





Key Messages:

Implementation of MISSION Act:

- Processes and Procedures for Access to VA Healthcare **Do Not Change**
- Eligibility Requirements for VA Healthcare **Do Not Change**
- There **is** a Difference Between Eligibility for VA Healthcare and Community Care
- VA Healthcare Enrollment Priority Groups **Do Not Change**
- If Veteran has not Applied for VA Healthcare, **APPLY TODAY!**



Objectives

To provide an overview of the following:

- Eligibility Requirements for VA Healthcare
- Minimum Active Duty Requirements
- Exceptions to Minimum Duty Requirements
- Eligibility for Military Sexual Trauma
- Eligibility for Presumptive Psychosis and Other Mental Health
- VA Healthcare Enrollment Priority Groups



Minimum Active-Duty Service Requirement – 38 CFR 3.12

A Veteran meets basic eligibility requirements for VA healthcare, if they satisfy the following requirements:

- One day of active duty service, if enlisted before 9/7/1980 or entered active duty on or before 10/16/1981 (could have been delayed entry)
- 24 months of active duty service, if enlisted after 9/7/1980 or;
- Reservist or National Guard member activated under a Title 10 executive order for any period of time and completed the period that they were called up to serve
- Honorable or under honorable conditions character of discharge



Exceptions to Minimum Duty Requirements

In accordance with 38 USC 5303A - Minimum active duty requirements do not apply to persons discharged or released from active duty for:

- Early out (enlisted only), information found on DD 214
- Hardship (dependent upon type of hardship)
- Discharge due to a disability that was incurred or aggravated in line of duty
- Veterans with a compensable Service Connected (SC) disability
- Contracted for a 15-month enlistment (National Call to Service) “DD 214 narrative states “Completion of Service” or Expiration Term of Service (ETS)
- 0% SC Non-Compensable National Guard/Reservist



Eligibility for Military Sexual Trauma (MST)

Any Veteran of the active duty military, Reserves, or National Guard who experienced sexual trauma during:

- a period of active duty,
- active duty for training,

The Veteran is eligible to receive MST-related health care.

Veterans who do not meet length of active duty requirements for general enrollment in VA healthcare are still eligible to receive care only for MST-related conditions.



Presumptive Eligibility for Psychosis and other Mental Illness

- Authorizes VA to provide presumptive eligibility and access to VA health care for non-enrolled Veterans who develop psychosis or mental illness within two years of their discharge from service
- Access to health care only for their psychosis or other mental health conditions and any illnesses determined by VA clinical staff as being associated or related to them
- Implements 38 USC 1702, using the new regulation 38 CFR 17.109

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VA Community Care Eligibility Requirements

Simplifying Access and Tools for Community Care



Introduction

Key Topics

- Overview of the six eligibility criteria
- Key tools used for determining eligibility:
 - Decision Support Tool (DST)
 - Computerized Patient Record System (CPRS)

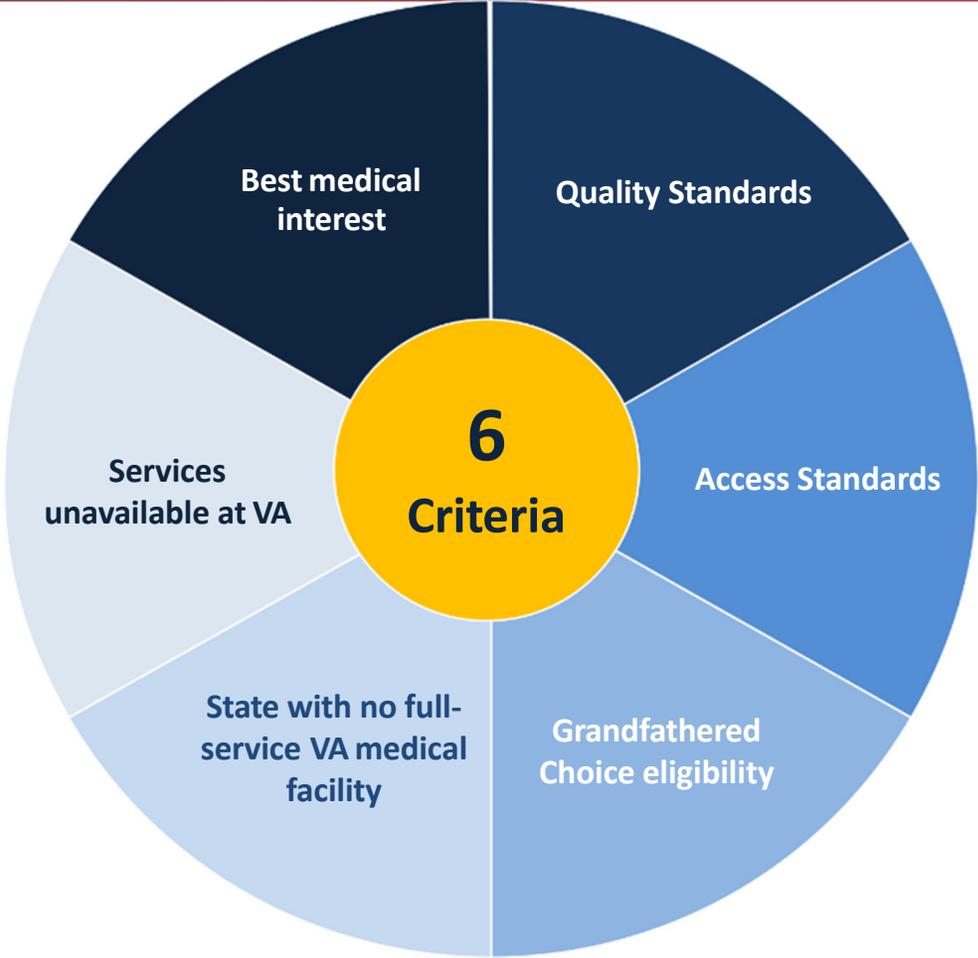


Eligibility Overview

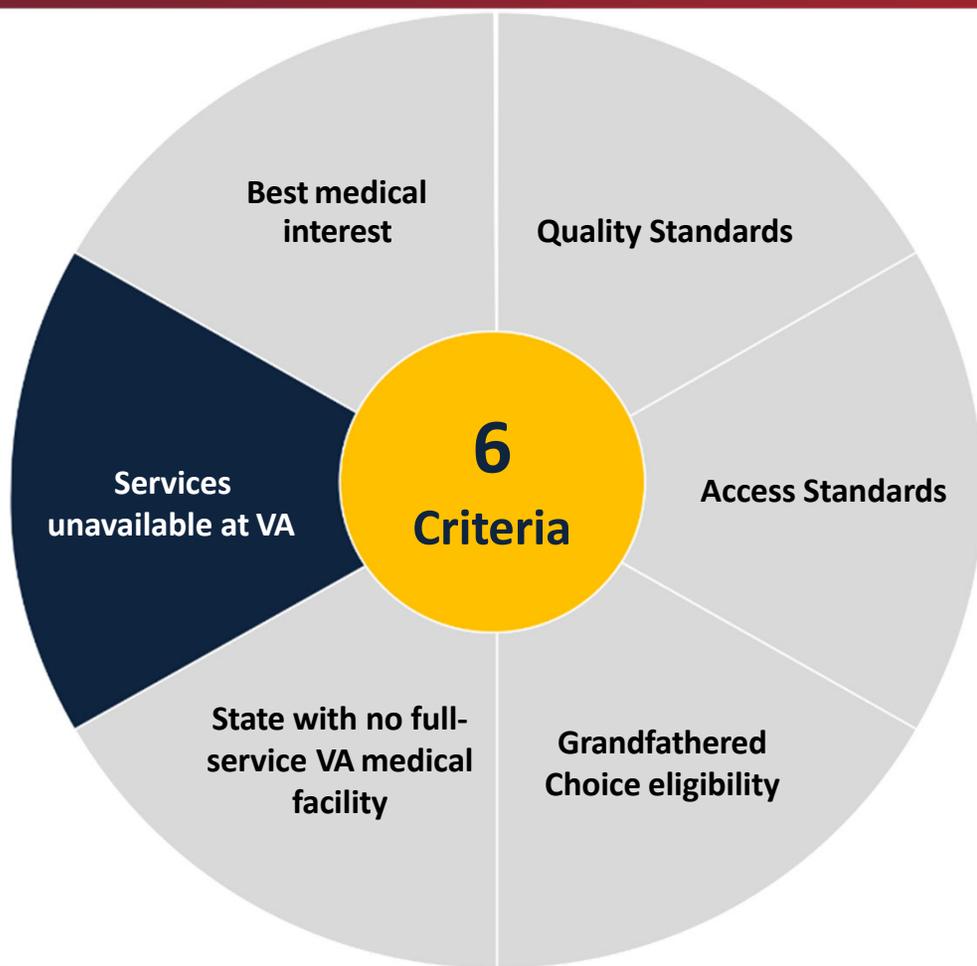
Key Changes

- There are now **6 eligibility criteria**.
- **Eligibility criteria for community care will be expanded and more straightforward.**
 -  A key tenet of the new community care program is making eligibility details easy to understand; together with increased access to care and ease of program administration, this will enable Veterans and other stakeholders to make informed decisions and have greater ease in planning and accessing care.
- **Eligibility determinations are automated and streamlined**
 -  In order to ensure that eligibility determinations and scheduling activities are streamlined, OCC will implement a DST that will **standardize and automate how VA staff make eligibility determinations** for Veterans and schedule appointments for community care.
 -  Program staff will have the **ability to view the VA average wait time for the service being requested.**

Eligibility Criteria



Services Unavailable at VA

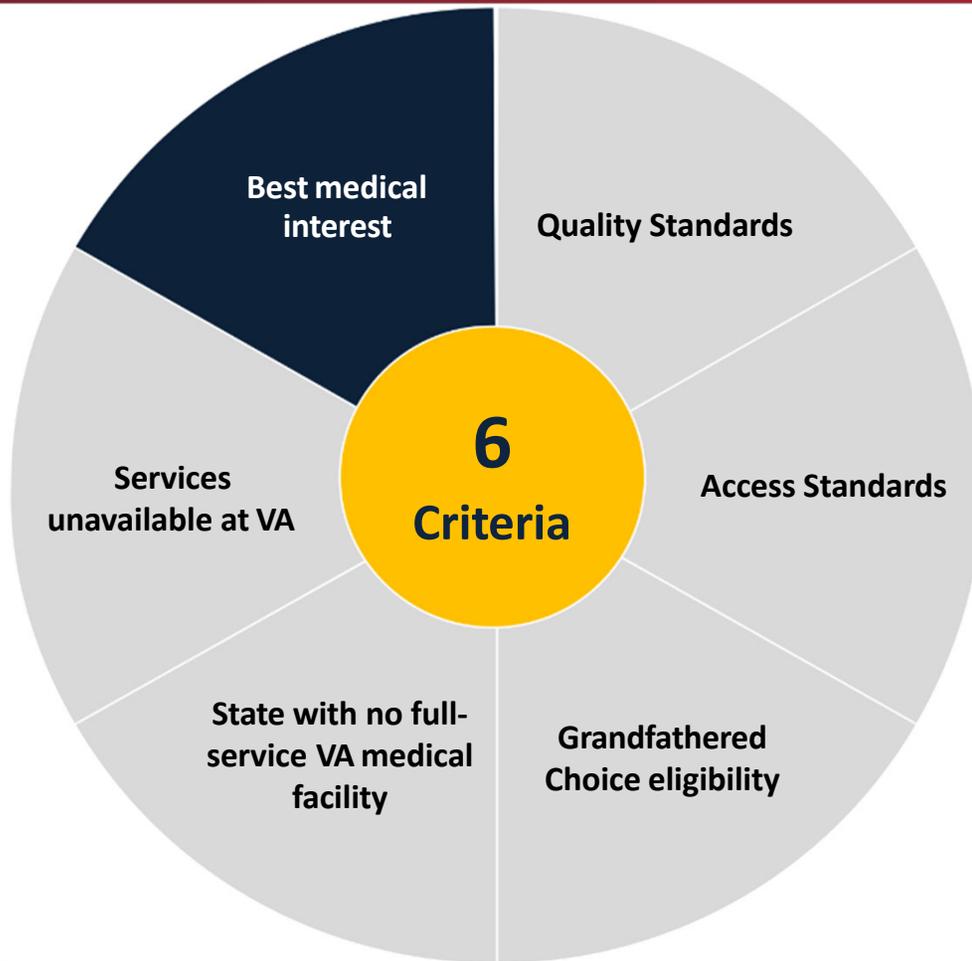


Services unavailable at VA

(e.g., maternity care, IVF)

- In this situation, a Veteran needs a specific type of care or service that VA does not provide in-house at any of its medical facilities.
- *Example: If a female Veteran needs maternity care, the Veteran would be eligible for community care because VA does not provide maternity care in any of its medical facilities.*

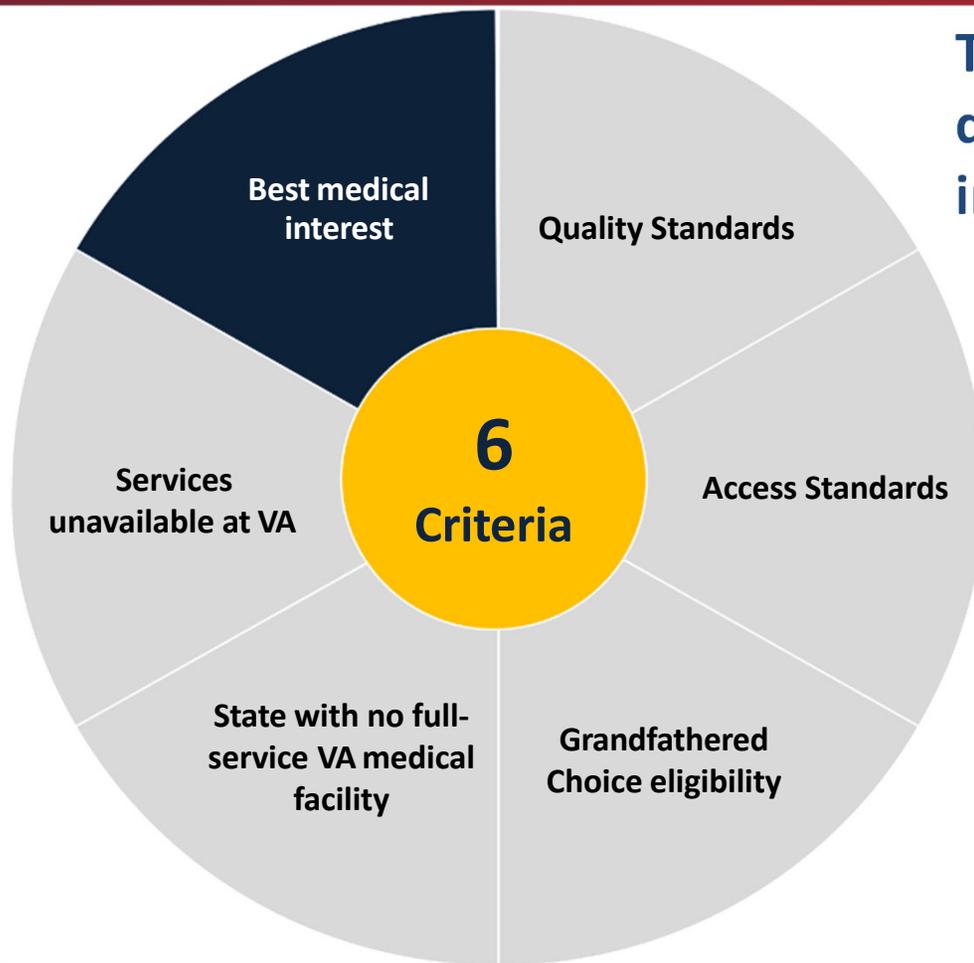
Best Medical Interest



Best Medical Interest

- In this situation, a Veteran may be referred to a community provider if it's in the Veteran's best medical interest as determined by a VA provider in discussion with the Veteran.
- *Example: If a Veteran had a specific type of ovarian cancer that their VA oncologist is unfamiliar with, and the Veteran lives close to a medical facility where there is specialist for that type of cancer, the Veteran would be eligible for community care.*

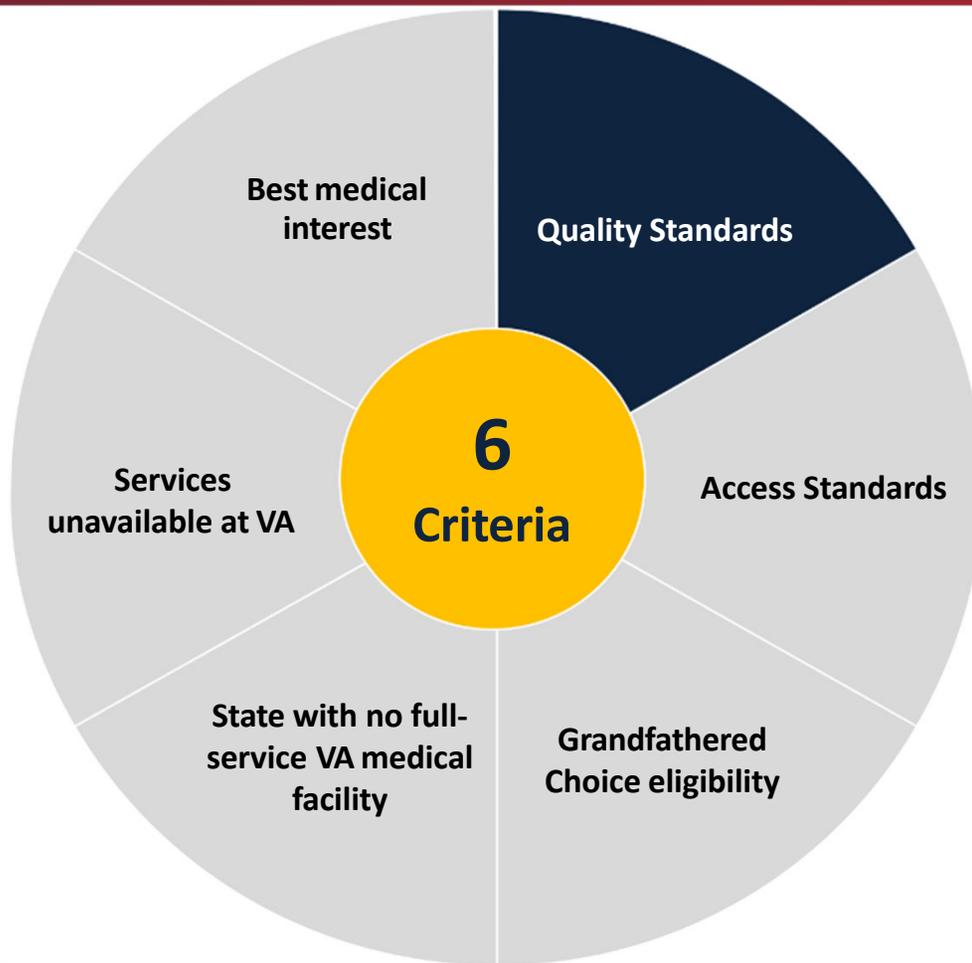
Best Medical Interest



The VA Provider and Veteran may determine it is in the Best Medical Interest in consideration of the following:

- Distance between Veteran and the facility or facilities that could provide required care or services
- Nature or complexity of the hospital care or medical services
- Frequency that such hospital care or medical services need to be furnished to the Veteran
- Need for medical attendant
- Potential for improved continuity of care
- Potential for improved quality of care
- Timeliness of available appointments
- Another reason as determined in consultation with the Veteran

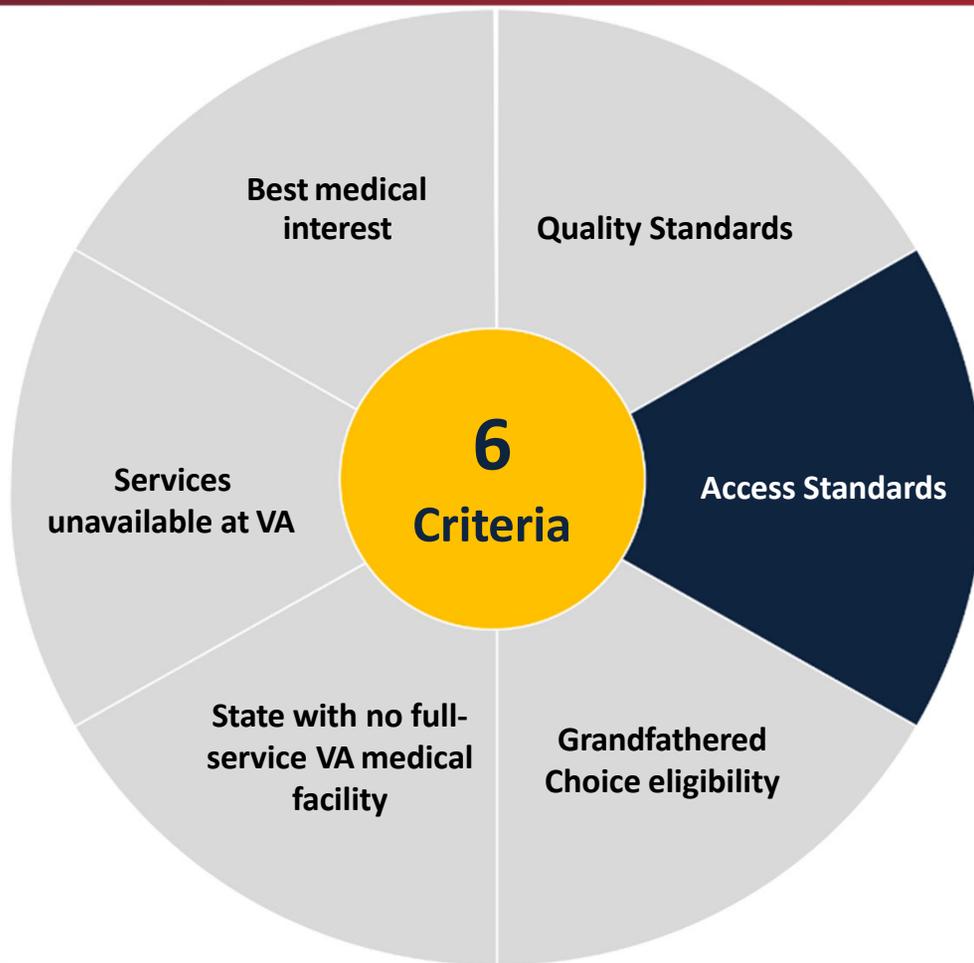
Quality Standards



Needing care from a VA medical service line that is not compliant with VA's standards for quality

- In this scenario, if VA has identified a medical service line is not meeting VA's standards for quality based on specific conditions, Veterans can elect to receive care from a community provider under certain limitations.
- This criteria will be implemented after June 2019.

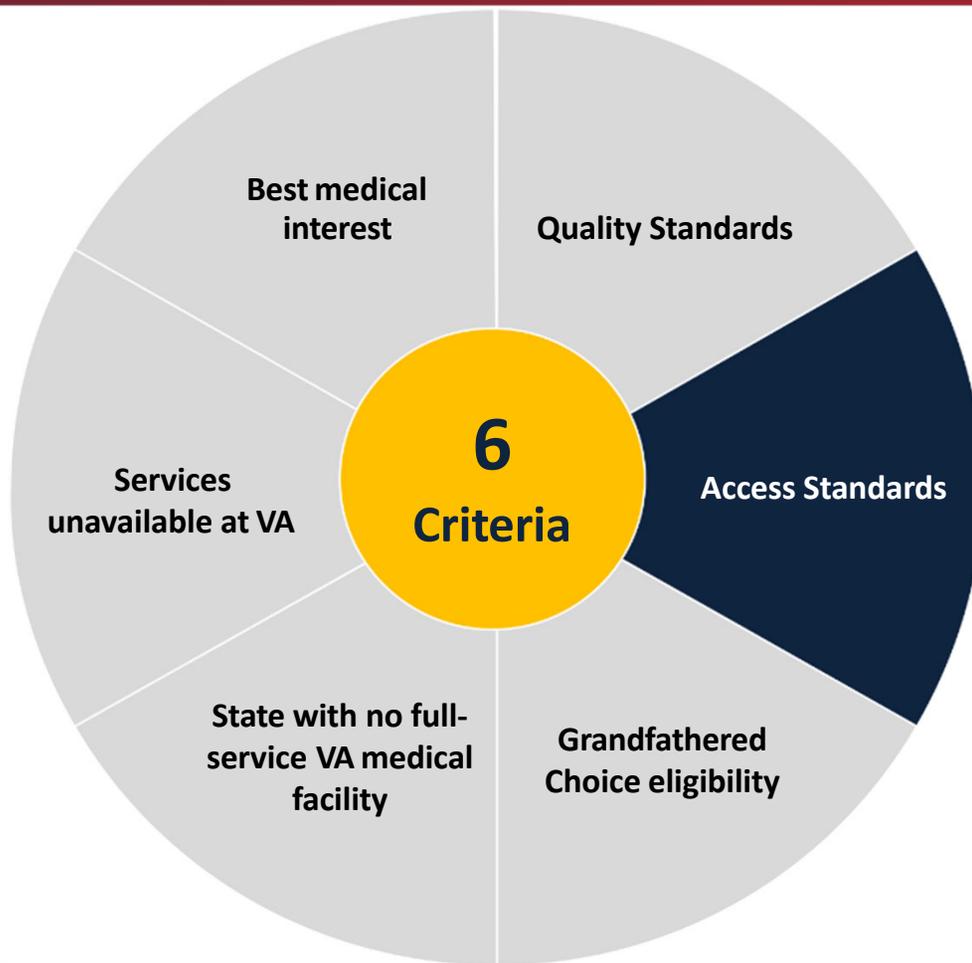
Access Standards



VA cannot furnish care within certain designated access standards

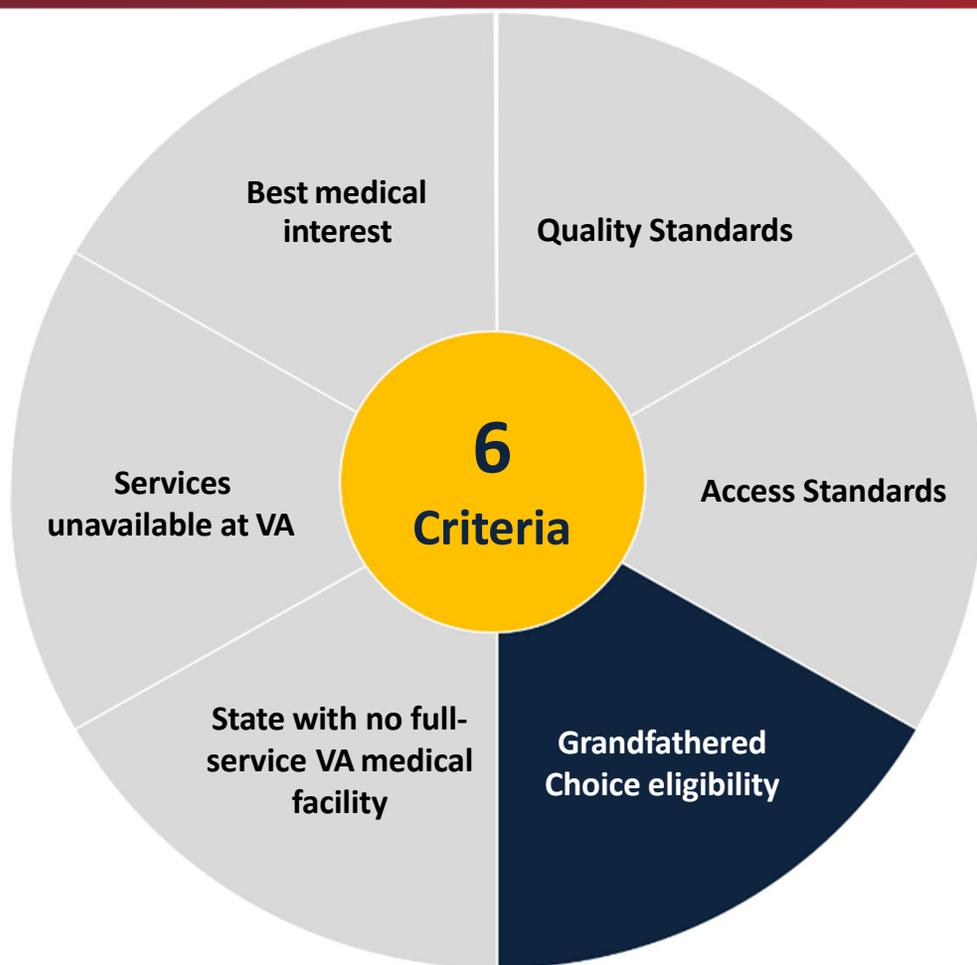
- To be eligible under this criterion, VA would have to be unable to schedule a VA appointment for a Veteran at a facility that can provide the requested service within the designated average drive time and within the designated number of days (wait time).
- 30-minute average drive time for primary care, mental health, and non-institutional extended care services (including adult day health care)
- 60-minute average drive time for specialty care

Access Standards



- Average wait time at VA medical facility that can provide the service
 - 20 days for primary care, mental health care, and non-institutional extended care services from the date of request, unless the Veteran agrees to a later date in consultation with their VA health care provider
 - 28 days for specialty care from the date of request, unless the Veteran agrees to a later date in consultation with their VA health care provider
- *Example A: If a Veteran lives more than a 60-minute drive away, on average, from their nearest VA cardiologist, they would be eligible to receive cardiology community care.*
- *Example B: If the soonest available VA primary care appointment is more than 20 days from the date of request, a Veteran would be eligible to receive primary community care.*

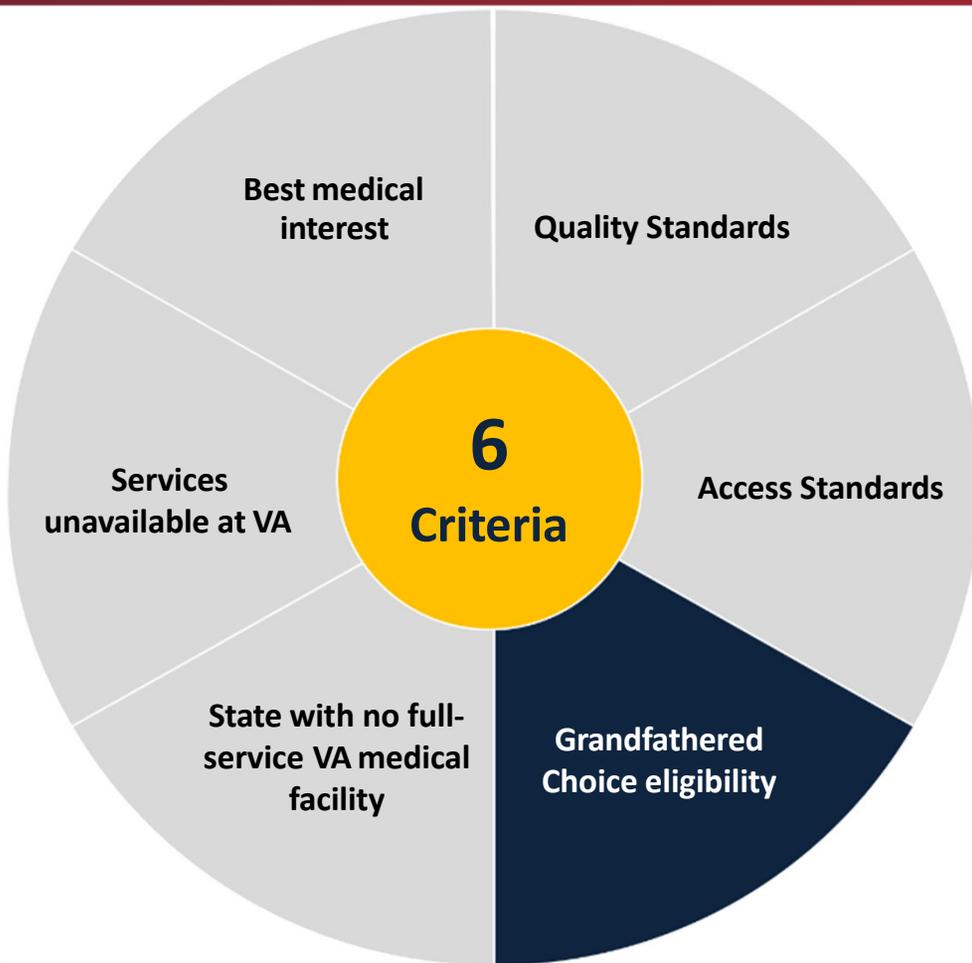
Grandfathered Choice Eligibility



Grandfathered Choice Eligibility

- A Veteran could be eligible if they were eligible for community care under the distance criteria for the Veterans Choice Program on the day before the VA MISSION Act was enacted into the law (specifically, they were eligible on June 5, 2018), continue to meet the distance criteria, and
 - They live in one of the five U.S. states with the lowest populations (North Dakota, South Dakota, Montana, Alaska, and Wyoming) or
 - Veteran received care in the year prior to enactment the VA MISSION Act of 2018 AND requires care before June 6, 2020

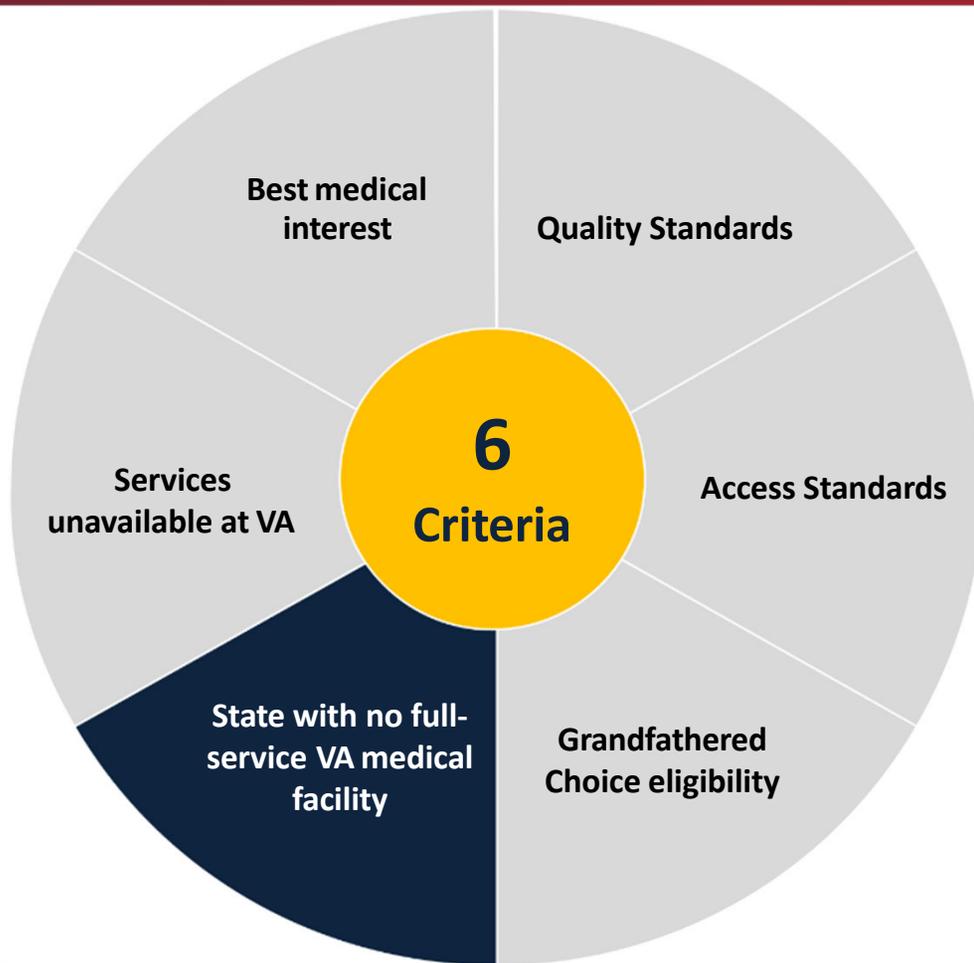
Grandfathered Choice Eligibility



Grandfathered Choice Eligibility

- *Example A: If a Veteran lived more than 40 miles away from their nearest VA Medical Facility with a full time primary care physician on June 5, 2018, continues meet the same distance requirement and lives in Montana.*
- *Example B: If a Veteran lived more than 40 miles away from their nearest VA Medical Facility with a full time primary care physician on June 5, 2018, continues to live more than 40 miles away, lives in Pennsylvania, had a primary care appointment on January 2, 2018, and calls their local VA facility requesting an appointment on June 29, 2019, they would be eligible for community care.*

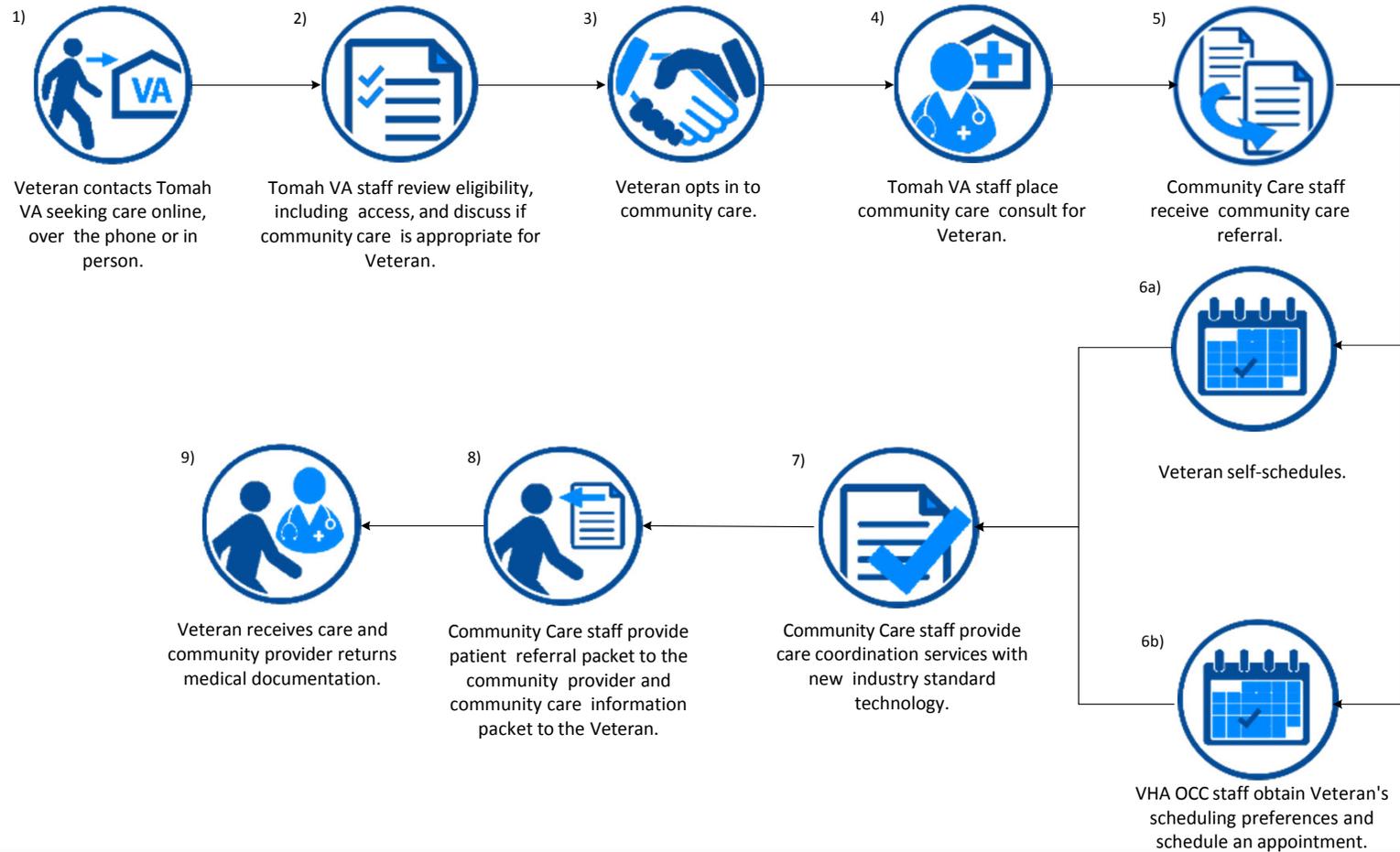
State with No Full-Service VA Medical Facility



Residence in a State without a full-service VA medical facility

- In this scenario, a Veteran lives in a U.S. state or territory that does not have a full-service VA medical facility. Specifically, this applies to Veterans living in Alaska, Hawaii, New Hampshire, and the U.S. territories of Guam, American Samoa, Northern Mariana Islands, and Virgin Islands.
- *Example: If a Veteran lives in Alaska, they would be eligible to receive community care.*

Eligibility Process Overview



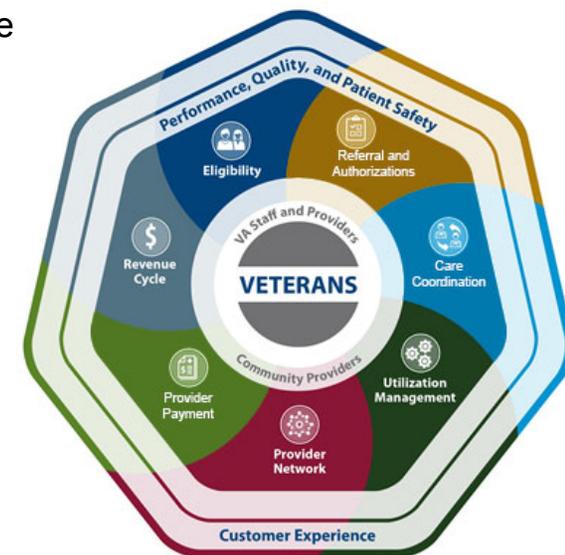
Q&A

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Community Care

- The MISSION Act puts VA at the center of care to ensure Veterans receive the best care possible, whether in a VA facility or through a community provider.
- One of the key goals of the MISSION Act is to ensure Veterans have access to health care where and when they need it.
- VA has been delivering care through community providers for decades. The MISSION Act will improve community care, making it easier to navigate for Veterans and their families, community providers, and VA employees.
- Veterans who access community care can expect streamlined eligibility criteria, a new urgent care benefit, and improved customer service.
- Community providers can expect their interaction with the VA to be easier with new IT systems and timely payment processing



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Community Care Decision Support Tool

The Community Care Decision Support Tool (DST) will make it easier for staff to determine patient eligibility for community care and help VA providers to decide in real-time whether to refer a Veteran to VA care or community care.

Consult: Advanced Heart Failure Slc

| | | | |
|---------------------|--|----------------------|-------------|
| Veteran Name | Residential Address | Date of Birth | SSN |
| DSTPatient, One A | 1234 Example Rd West Branch, CO 97734 | Jan 18, 1938 (80) | *** ** 0000 |

Urgent Care Eligible

Clinical Service (Specialty Care)
Cardiology

Urgency
 Routine Stat Special Instructions

| | | | |
|-----------------------|----------------------|---------------------------------|---------------------------|
| Drive Time Std | Wait Time Std | CID/No Earlier Than Date | No Later Than Date |
| 1 hr 00 min | 28 days | 01/21/2019 | 02/19/2019 |

VA Facilities: Cardiology [IFC Dashboard](#)

| Facility Name | Drive Time | Average Wait Time |
|--|------------------------|-------------------|
| VA Western Colorado HCS | ✓ 15 min (12 mi) | ✓ 15 days |
| VA Eastern Colorado Health Care System (ECHCS) | ✓ 45 min (27 mi) | ✓ 18 days |
| Golden Outpatient Clinic | ✓ 50 min (38 mi) | ✗ 35 days |
| Glenwood Springs Veterans Community Clinic | ✗ 1 hr 50 min (83 mi) | ✗ 32 days |
| Glenwood Springs Veterans Community Clinic | ✗ 2 hr 30 min (122 mi) | ✗ 32 days |

Community Care

Community Care Eligible

- ✓ Grandfathered
- ✓ No full-service VAMC
- ✓ Best Medical Interest of Veteran

Explanation (required)
Text entered by user, lorem ipsum...

Veteran Community Care Choice (required)
 Veteran Not Present Opt-In Opt-Out

SEOC
Cardiology Comprehensive [View SEOC](#)

Community Care Consult Name
CC_Cardiology

Consult Type
 VA Community Care

[Cancel](#) [Save](#)

Key Features

- ✓ Automated wait time and drive time calculations
- ✓ At-a-glance eligibility determinations
- ✓ Reporting capabilities
- ✓ Integrated into existing consult order workflow
- ✓ Supports best medical interest discussion between provider and Veteran



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Urgent Care Benefit



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Objective One

Understand and communicate the VA's new Urgent Care Benefit

Objective Two

Understand and communicate who is eligible, description or service available, and where and how to locate urgent care services.

Objective Three

Understand and discuss the copayment requirements.



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What is Urgent Care?

Urgent care is medical services provided for illnesses or injuries which require prompt attention but are not life-threatening, such as strep throat, pink eye or influenza.



Urgent Care vs Emergency Care

Urgent Care



Emergency Care



Urgent Care vs Emergency Care

Urgent Care is appropriate for health issues that need care right away, but aren't as serious as emergencies. Examples of those non-life threatening conditions include:

- Abdominal pain – moderate
- Allergic reaction - minor
- Asthma attack - minor
- Sudden, severe back pain
- Burns - minor
- Cough
- Dizziness
- Ear pain - sinus pain - throat pain
- Eye redness, swelling
- Fever over 100.5 without rash
- Suspected Fractures
- Lacerations - within 12 hours injury
- Migraine headache - not responding to home treatment
- Nausea – vomiting - diarrhea
- Sprains or strains - within 48 hours injury
- Sexually Transmitted Diseases
- Urinary symptoms - painful urination

Urgent Care



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Urgent Care vs Emergency Care

An Emergency Department should be used when you need fast care for life or limb-threatening illnesses and injuries.

Examples include:

- Abdominal pain - Severe
- Allergic reaction - Severe
- Back Injury
- Bleeding - Uncontrolled
- Breathing difficulty - short of breath
- Broken bones - protruding from skin
- Burns - Severe
- Chest pain or pressure; jaw or arm pain
- Coughing up blood
- Eye Injuries
- High fever with stiff neck and headache
- Head injury
- Passing out
- Poisoning - inhaling fumes
- Seizures
- Sudden headache, confusion, dizziness, or weakness; trouble speaking, seeing or swallowing

Emergency Care



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Urgent Care Benefit

What do you think?

Select the best
response.



Which of these conditions would
most likely require emergency care?

- A** Stroke symptoms
- B** A runny nose
- C** A bee sting
- D** A minor cut with controlled bleeding

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Urgent Care Benefit

Choose the
best answer!



What is one difference between urgent care and emergency care?

- A** Urgent care is available for times when the emergency room is closed.
- B** Urgent care facilities are larger than emergency care facilities.
- C** Urgent care is for instances in need of attention, but are not life threatening.
- D** Urgent care is for major bleeding, while emergency care is for illness.

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Urgent Care Benefit

Lesson Two

Urgent Care Benefit: Explained

This lesson focuses on:

- Veteran eligibility requirements
- Examples of covered services



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Veteran Eligibility

**Urgent Care
Benefit**



Veteran Eligibility Requirements

Any Veteran who has received care in or through the VA in the last 24 months.

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In-Network Providers

Veterans can receive urgent care at any in-network urgent care facility or retail clinic.

**Urgent Care
Benefit**



Facility Locator



VA Facility Finder

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Urgent Care Benefit

Visiting an Out-of-Network Provider

Out-of-network care is not eligible for the urgent care benefit.

If a Veteran does receive care at an out of network provider, their health insurance or Medicare will be billed or they will be required to pay out of pocket.



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Which of the following is a service included in the urgent care benefit?

Urgent Care Benefit

- A. Emergency transportation (Ambulance)
- B. X-ray imaging
- C. Follow up care for a chronic condition
- D. Hospital care

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True or False: The VA Facility Locator will provide a list of in-network providers.

**Urgent Care
Benefit**

True

False

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How do Urgent Care Copayments Work?

Urgent Care Benefit



Copayments are based on:

- VA priority group.
- Number of visits.

Urgent Care Copayment Requirements

Urgent Care Benefit

| Priority Group(s) | Copayment Amount |
|-------------------|---|
| 1-5 | First three visits (per calendar year): \$0 Fourth and subsequent visits (per calendar year): \$30 per visit |
| 6 | If related to combat experience, special authority, or exposure: First three visits (per calendar year): \$0 Fourth and subsequent visits (per calendar year): \$30 per visit |
| | If <u>not</u> related to combat experience, special authority, or exposure: \$30 per visit |
| 7-8 | \$30 per visit |

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Urgent Care Benefit

Copayment Information

- There is no limit to the amount of urgent care visits.
- Preventive care is not included.
- Flu shots are included in the urgent care benefit.
 - Do not require a copayment.
 - Does not count towards an urgent care visit.



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**Urgent Care
Benefit**

Meet Our Veteran

Jack is a Desert Storm and Iraq War Veteran.



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Urgent Care Benefit

Copayment Scenario 1

Jack is experiencing a severe sore throat and is visiting an in-network provider for treatment. Jack is 100% service-connected. He is in Priority Group 1. This is Jack's second visit to an urgent care facility this calendar year. What will be Jack's copayment amount?



SELECT

\$30

SELECT

\$15

SELECT

\$0

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Copayment Scenario 2

Later in the year, Jack visits an in-network urgent care clinic for a cold. Jack has visited an urgent care facility seven times this year. What is Jack's copayment?

Urgent Care
Benefit



SELECT

\$30

SELECT

\$15

SELECT

\$0

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Copayments & Insurance



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- Like other health care providers, VA may charge a co-payment for health care. The co-payment amount may be based on your enrollment priority group, the type of health care service you receive, and your financial situation. If a VA co-payment applies, you are responsible for that amount whether your care is furnished directly by VA or through a community provider.
- VA may bill your health insurance for medical care, supplies, and prescriptions.
- As a result of the MISSION Act, VA no longer requires your permission to bill your health insurance carrier for health care related to a sensitive diagnosis. If you would like to submit a request to restrict this process, please contact our Privacy Officer, Shai Sims-Brown.



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Expanding Eligibility for Caregivers Support

- The MISSION Act will expand eligibility for VA's Program of Comprehensive Assistance for Family Caregivers (PCAFC) under the Caregiver Support Program, which is currently only available to eligible Veterans who were injured on or after September 11, 2001. The expansion will open the program to eligible Veterans from all eras of service and their caregivers.
- Veterans in these programs need assistance for Activities of Daily Living (ADL) such as bathing, dressing, grooming, mobility, eating independently, and use of prosthetics.
- Program participation is also available to qualified Veterans in need of supervision or protection for mental health and cognitive issues (concentration, memory, planning, organizing, safety).
- There is an extensive support program for family caregivers including educational courses, a Peer Support Mentoring Program, Building Better Caregivers™ (BBC), and Resources for Enhancing All Caregivers Health (REACH).



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Peer Specialists

- The MISSION Act places peer specialists in VA Patient Aligned Care Teams in at least 15 VA medical centers by May 31, 2019, and in at least 30 VA medical centers by May 31, 2020 to provide services for mental health, substance use disorder, and behavioral health in a primary care setting
- Peer specialists have a variety of roles in their work with Veterans. They help Veterans with treatment goals, and often go with Veterans to mental health or primary care appointments
- Veterans may request to work with a peer specialist or, the treatment team may ask a Veteran if he or she would be willing to meet with a peer
- Each site will also have female peer specialists available, when requested/needed by female Veterans



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Complaint & Appeals Process



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- VA is committed to delivering an excellent care experience every time.
- We know that concerns arise, and we're here for you. Patient Advocates can assist with almost any problem you may experience.
- VA has different processes for clinical and non-clinical appeals, and the Patient Advocate can ensure your concern is handled appropriately.



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For future updates, please connect with us: VHATOMMISSIONAct@va.gov

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