



Agency Priority Goal Action Plan

Community Care

Goal Leaders:

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Overview

Goal Statement

- Improve Veterans' health experiences by consolidating all VA-purchased care programs into one modernized community care program. By September 30, 2019, the percent of Veterans who are satisfied with the community care they received will increase from 73% (FY17Q4) to 79%.

Challenge

- Ability to develop and implement the Community Care Network is contingent upon contract award.
- Timeline for enactment of new community care legislation impacts the ability to simplify the process to access and manage community care through a consolidated program.

Opportunity

- New legislation to consolidate community care and a new contracting vehicle to purchase community care will enable VA to improve Veteran satisfaction with community care.

Goal Structure & Strategies

VA will improve Veteran satisfaction with community care through the following strategies:

- Strategy 1: Work with Congress to pass legislation for a consolidated community care program.
- Strategy 2: Award Community Care Network contract and create implementation milestones.

There are several key external factors that may impede goal achievement. These include:

- Timeline for contract award.
- Timeline for passage of community care legislation.

Proposed Mitigation Actions:

- If new community care legislation is not passed, then VA will continue community care under current legislative authorities and work to optimize Veterans' satisfaction with community care under existing authorities.
- If the Community Care Network contract is not awarded, VA will utilize contracts currently in place and work to optimize them within current standards.

Summary of Progress – FY 19 Q3

- Congress passed legislation for community care reform; the VA Maintaining Systems and Strengthening Integrated Outside Networks (MISSION) Act was signed into law on June 6, 2018.
- Office of Community Care (OCC) implemented Title I MISSION provisions related to the community care program on June 6, 2019. The MISSION Act required VA to –
 - Consolidate multiple community care programs into one program
 - Identify new access standards that qualify Veterans to receive community care
 - Determine a new walk-in care benefit for Veterans (which VA is calling Urgent care)
 - Develop Veteran-centric competency standards and education for community health care providers
 - Establish strict payment timeliness standards for VA, including interest penalties for late payments to providers
- Awarded Community Care Network Contracts for regions 1, 2, and 3 to Optum on December 28, 2018
 - Held Region 1 kickoff meeting January 30, 2019
 - Began start of healthcare delivery in Philadelphia at the end of June 2019 for dental services
 - Developed deployment schedule for remainder of the Region 1 sites through December 2019
 - Began deployment planning for Region 2
 - Expected award for Regions 4-6 by end of CY 2019

Summary of Progress – FY 19 Q3

- Expansion of TriWest contract serves as the bridge contract until full implementation of CCN
 - Current option year expires September 30, 2019
 - One additional option year available through September 30, 2020
- The Veterans Choice Program ended on June 6, 2019.

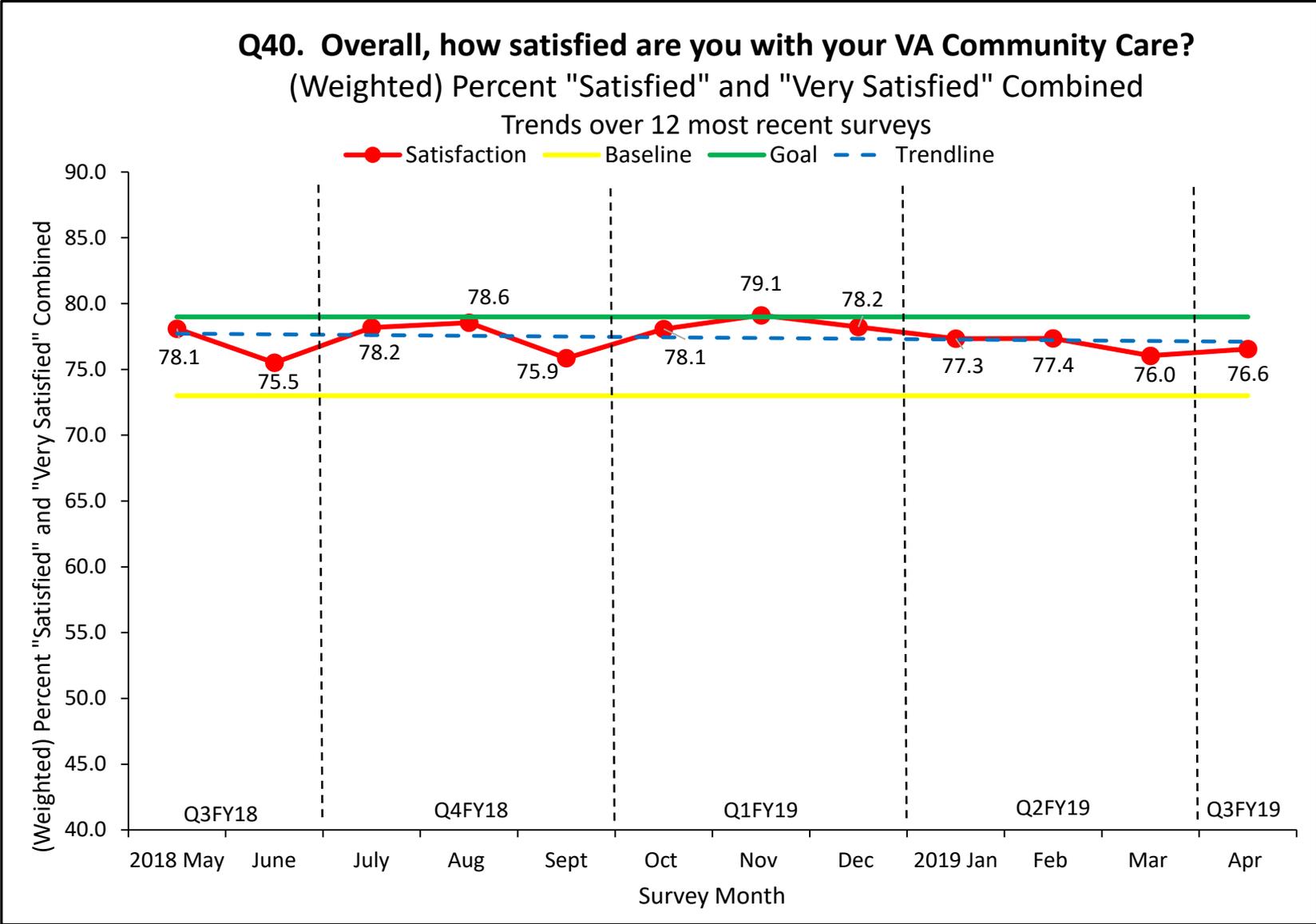
Key Milestones

- Community Care is creating a streamlined and modernized way to deliver community care by acquiring a community care network of providers and implementing the VA MISSION Act to consolidate community care
- FY19 Q3 Status: Implementation of MISSION provisions; resolved protest for CCN region 2.

Milestone Summary					
Key Milestones	Milestone Due Date	Milestone Status	Change from Last Quarter	Owner	Anticipated Barriers or Other Issues Related to Milestone Completion
Passage of Community Care Legislation	FY18Q3	COMPLETED	COMPLETED	VHA OCC, OCLA	VA MISSION Act of 2018 enacted June 6, 2018
Community Care Network (CCN) Contract First Region Award	FY19Q2	COMPLETED	COMPLETED	VHA OCC, VHA OAL	Awards made December 28, 2018
Implementation of Community Care Regulations	FY19Q3	COMPLETED	COMPLETED	VHA OCC	Accelerated timeline to comply with MISSION Act

Key Indicators

There is approximately a six month lag between survey and data analysis. FY 19 quarterly data will be reported as available on this timeline.



Data Accuracy and Reliability

In March 2016, VA initiated a Community Care Patient Survey to assess Veteran experiences with VA Community Care, including care through the Choice Program. The survey includes questions regarding access, provider communication, and basic provider/patient coordination care. The survey assesses experiences unique to the process of obtaining VA Community Care, including (a) the determination of eligibility, (b) referral to a contractor and the arrangement of the first appointment with a community provider, (c) coordination between VA and the community provider, and (d) out-of-pocket payments and billing. Questions in the Community Care Survey related to these unique elements of the care process are based on extensive focus groups and pilot testing with Veteran users of community care.

There is a 3 to 5 month lag between the payment of a claim by VA and the availability of survey results for the care visit associated with that claim. First, after care has occurred and the claim paid, eligible Veterans are identified in the VA claims database representing actual visits to community care providers. Second, the data collection process -- including the drawing of the sample, preparation of the survey packets, and the cycle of initial survey mailing and reminders -- requires approximately 2 months to complete. Finally, another month is required for data analysis and report preparation.

Community care clinic groupings are sampled based on the type of care provided to the Veterans; approximately 50 types of care or services are sampled. A rolling 3 month random sampling method is used to account for bill processing and ensure all appropriate visits are available to be sampled. A standard mail out protocol is used that includes both email (30%) and mail (70%) contact. Ten thousand (10,000) surveys are sent out each month.

Contributing Programs

Internal VA Organizations:

- Office of Management develops budget projections
- Office of Congressional and Legislative Affairs (OCLA) coordinates Congressional support and input
- Office of General Counsel provides legal review of policies and regulations

Program Activities:

- VHA Office of Community Care (OCC) is developing transition

Regulations:

- With the advent of VA MISSION, OCC is working with others in VA responsible for drafting relevant regulations

Policies:

- With the advent of VA MISSION, OCC is responsible for and working towards drafting relevant policies

Stakeholders

Stakeholders include:

- Veterans
- Veterans Service Organizations
- VA Staff and Clinicians
- Federal Partners
- Health Care Industry Leaders

OCC has regularly engaged Congressional input and support:

- Participating as lead or accompanying witness at House and Senate Veterans' Affairs Committees (HVAC, SVAC) hearings
- Meeting regularly with members of HVAC, SVAC, and House and Senate Appropriations Committees
- Meeting regularly with Congressional staff to provide technical assistance on future legislation