Improving Access to Care for America’s Veterans
June 2015

Summary

For the past year, improving access to care has been among VA's top priorities. One year ago, 290,000 Veterans were waiting more than 30 days for care. In response to the unacceptable delays in Veterans receiving medical service, VA developed a strategy that focused on growing capacity in four critical areas: staffing, space, productivity, and VA Community Care. The execution of this strategy has been data-driven, supported by more robust, actionable information from the field.

The result of this strategy is 7 million more appointments for care inside VA and in the community than in the previous 12 months – double the capacity required to meet last year's demand. More Veterans are not only coming to VA for care, they are also using VA for more care. Total appointments scheduled are up 12% over the last 12 months. At the same time, 97% of appointments are now completed within 30 days of the clinically indicated or Veteran's preferred date; 93% within 14 days; 88% within 7 days; and 22% are actually completed on the same day. Despite all of these improvements, wait times are up, demonstrating that as VA improves access to care, Veterans are responding and seeking VA care at higher rates.

While more work remains to be done, VA has made real progress.

Critical Activities to Improve Access

Almost every weekday morning, senior leaders from across the Department meet in VA's Integrated Operations Center for an Access to Care Standup meeting. This forum brings a Department level focus on this priority work and provides immediate communication and decision-making that accelerates execution. The group regularly meets with medical center leadership teams by Video Teleconference to keep the effort grounded in frontline reality. In addition, dozens of VA senior leader visits to medical centers over the past year have provided valuable input.

Staffing:

- Since April 2014, VHA increased onboard staff by 12,179, including 1,086 Physicians, 2,724 Nurses, and 4,671 other select critical occupations.
- Increased interim staffing to fill short term vacancies and mitigate disruption to scheduled appointments.
- Hired over 3,700 medical center staff using funding from the Choice Act.
- Employee turnover of about 9% continues to compare favorably to private sector healthcare turnover of 18% allowing hiring activity to result in net staff increase.

Space:

- In Fiscal Year 2014, VHA activated 80 new leases totaling 1.3 million square feet and activated new owned facilities totaling 420 thousand square feet.
- Initiated dozens of emergency lease transactions to quickly increase space for Veteran care.
- Increased, where possible, the number of primary care exam rooms per provider allowing providers to see more Veterans each day.
Productivity:

- Extended clinic hours into nights and weekends to leverage limited space and enhance convenience for Veterans.
- Increased delivery of care by telephone and secure messaging to better use provider time, improve access, and meet Veteran care needs without their traveling for a scheduled appointment.
- Optimized primary care clinic appointment grids to see more Veterans and better assess scheduling capacity.
- Reviewed primary care panels to identify unused capacity, making way for more Veterans to be assigned a primary care provider.
- Increased use of telehealth to see more Veterans, reduce or eliminate Veteran travel time, and better leverage provider time.
- Increased use of e-consults, improving Veteran access to specialty care without an additional appointment and better leveraging specialty provider time.
- Increased delivery of mental health care by primary care providers giving Veterans access to care without requiring additional specialty care appointments.
- Deployed a robust specialty care productivity tool to evaluate productivity down to the clinic level.
- Launched a national initiative to reduce “no-shows” and late appointment cancellations.
- Increased clinical and administrative support staff in specialty clinics to improve the productivity of specialty care providers.

VA Community Care:

- Expanded the use of care in the community through VA’s Accelerating Access to Care Initiative.
- Launched the Choice Program to expand Veteran options for care in the community within ninety days after the Choice Act was signed into law.
- Consolidated organizational reporting for provider invoice processing and overhauled processes to speed the timeliness of payment at the same time claims for reimbursement are up 40%.

Improving Access Results

Hard work focused on critical activities is not enough. Veterans and taxpayers expect to see actual improvement in access to care outcomes. Highlights include:

- Veterans have completed 2.7 million more appointments inside VA than in the previous twelve months.
- At the same time, completed appointments are up: 97% are completed within 30 days of the clinically indicated or Veteran’s preferred date; 93% within 14 days; 88% within 7 days; and 22% are actually completed on the same day.
- Average wait time for completed primary care appointments is 4 days, specialty care 5 days, and mental health care 3 days.
- In 2014, authorizations for care in the community totaled 2.3 million resulting in more than 16.5 million completed appointments for care. Since beginning the effort to accelerate access to care a year ago, 900,000 more authorizations have been issued, an increase of 44%, resulting in millions of additional episodes of care for Veterans. The number of Veterans receiving authorization for care in the community is up 36% to 1.5 million over the past 12 months.
- Relative Value Units (RVUs), a standard measure of clinical output, have increased 10% year-over-year, twice the increase in the number of doctors and three times the increase in our budget, confirming improved productivity.
- In the last twelve months, 1.5 million care encounters were completed during extended hours, up 12%.
- The New Enrollee Appointment Request (NEAR) list is down 93%, consistently remaining at a nominal working level.
- The Electronic Wait List (EWL) is down 47% as access to clinics for new Veterans has improved.
• Nearly a third of Veterans receive care virtually, up from 18% just two years ago, improving access and convenience.
  o Secure messaging (private e-mails with clinicians) up 127%
  o Store and forward telehealth (e.g. sending photos of skin lesion to clinician) up 44%
  o Clinical video telehealth (speaking with clinician by video) up 68%
  o Home telehealth (speaking with provider by video from home) up 31%
  o E-consults (clinicians receive expert advice by e-mail to expedite best decision for patient) up 288%

**Veteran Response to Improving Access to Care**

As VA has improved access to care, Veterans have responded by seeking more care though VA.

• The combination of increasing appointments inside VA and in the community has resulted in approximately 7 million additional appointments for care. Considering that there were 290,000 Veterans waiting more than 30 days for care one year ago, this increase in capacity is double that required to meet last year’s demand. Yet today, appointments pending more than 30 days and Veterans on the EWL are up 50%, demonstrating that Veterans increased demand for care as VA improves access.

• While the number of Veterans using VA for care has grown about 2% per year in the past, the pace in many locations where space, staffing, productivity, and community care enhancements have been emphasized is growing at multiples of that rate. For example, from 2012 to 2014, Las Vegas has seen the number of patients they are caring for grow 18%; Hampton, VA 16%; Portland, OR and Fayetteville, NC 13%; Denver 10%.

• In Phoenix – where more than 300 staff were added, 34,000 additional appointments were completed and 120% more authorizations for care in the community were issued during the last seven months of 2014 – wait times are up. Why? During the same June-December period, the number of Veterans receiving primary care was up 13%, specialty care up 15%, and mental health up 29% over the previous year as Veterans responded to improved access.

• On average, 131,000 Veterans began using VA for care each month this fiscal year, up from 53,000 per month in the prior year, a 147% increase.

• More Veterans are not only coming to VA for care, they are also using VA for more care. Total appointments scheduled are up 12% over the last 12 months.

• More Veterans are coming to VA for their care even though 81% have Medicare, Medicaid, Tricare, or private insurance. Veterans are coming to VA for care because they want to.

• According to the March VFW survey of Veterans, 47% who were offered Choice elected to receive their care from VA, 78% were satisfied with their VA care experience, and 82% would recommend VA care to their fellow Veterans.

**Looking Ahead**

While access has improved, Veterans, by their own response to these improvements, are telling us they want and expect more.

• VA and its stakeholders must recognize that as we continue to improve access to care, Veterans will continue to respond by coming to VA for more of their care. If the 30 day standard in Choice is the requirement to which VA manages, then our experience of the last year makes clear that more flexibility and, ultimately, more resources are required to provide Veterans the care they deserve.

• VA will continue to focus on the key drivers of staffing, space, productivity, and VA Community Care, with particular emphasis on improving the Choice program and increasing Choice utilization.

• In addition, VA has launched a sustained effort to deliver care to Veterans waiting the longest for an appointment.

• Major near term enhancements to the scheduling system will be rolled out later this year as work continues on a comprehensive longer-term solution.