

CARES Planning Initiatives



VISN 6 - VA Mid-Atlantic Health Care Network





Presentation Outline

✦ VISN Summary

✦ VISN-Level Issues

- Special Disability Programs
- Effective Use of Resources
 - Proximity
 - Vacant Space
- VISN/PI Team Identified Issues
- Collaborative Opportunities

✦ VISN Markets (4)

✦ Market Planning Initiatives

- Access
- Inpatient
- Outpatient
- Small Facility Planning Initiative



VISN 6 Overview

✦ Enrollees

- Projected to increase by 20% from FY 2001 level to FY 2022

✦ Planning Initiatives (PIs)

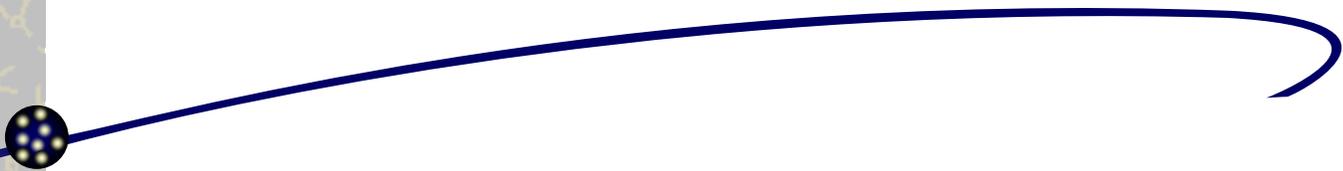
- Access
 - 4 Markets have PIs related to access in Primary Care
 - 1 Market has a PI related to access in Acute/Hospital Care
- Inpatient Demand
 - 1 Market has a PI related to increased inpatient demand
 - 1 Market has a PI related to decreased inpatient demand
- Outpatient Demand
 - 4 Markets have a total of 10 PIs related to increased outpatient demand
 - No Markets have PIs related to decreased outpatient demand
- Small Facility
 - 1 facility is projected to require fewer than 40 acute care beds



VISN 6 Overview

✦ Other VISN-Level Issues

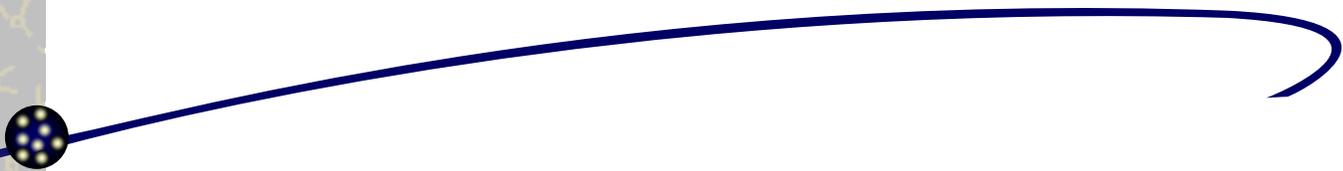
- Proximity
 - 1 VISN Tertiary Care facility is within the 120-mile standard
- VISN Identified Issues
 - NHCU Northwest Market
 - Satellite OPC Southwest Market
- Collaborative Opportunities
 - VBA, NCA and DoD



VISN 6 Overview NHCU

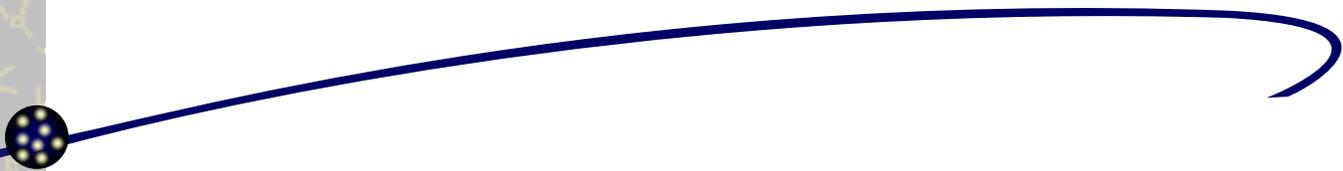
✦ Nursing Home Care:

- The need for NHCU remains high over the planning period. However, the NHCU component of VA's LTC Planning Model is in process of review to update the projections.
- Market Plans shall still consider any space and/or capital needs for NHCU care needs. (Realignment, renovations, conversion of space, etc.)



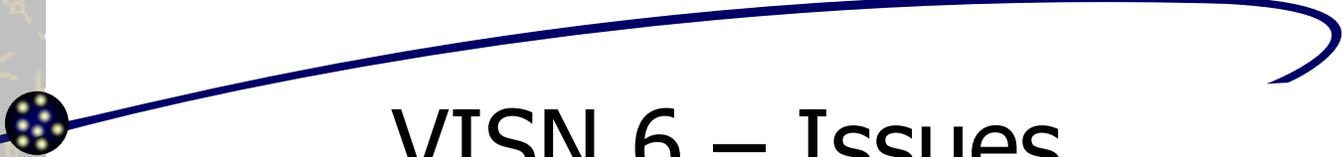
Domiciliary Policy

- ✚ The forecasting model results in the redistribution of beds from existing DOMs to other areas without DOMs.
- ✚ Since this occurred without a policy review, it is inappropriate to select DOM PIs from these forecasts.
- ✚ However, DOMs may and should be included in Market Plans to reuse vacant space or as a result of realignments (especially when homelessness or residential rehab is the focus of Dom bed use).



Outpatient Mental Health

- ✦ The forecasting model results in a systematic reduction in forecasted outpatient mental health visits.
- ✦ We are working to understand the dynamics of the model that results in this outcome.
- ✦ As a result, negative outpatient Mental Health Planning Initiatives will not be proposed or selected for Market Plan development.



VISN 6 – Issues

Special Disability Programs

- ✦ **Blind Rehab:** Peak of legally blinded veterans in 2009 at 7,795 (from 6,940 in '01) & ↓ to 7,582 veterans in '25. Consider space planning for blind rehab programs (i.e., VISORS, VICTORS, low vision clinics, BROS, & VIST).
- ✦ **SCI:** No recommendations.
- ✦ **Mental Health (SCMI, PTSD, SA):** Concerns raised about meeting MH needs in Pls.
- ✦ **TBI:** Distinct and separate space needed for CARF-accredited TBI inpatient care at the Richmond VA Medical Center (one of 4 national ctrs).

VISN 6 Level Issues

Effective Use of Resources – Proximity

- Acute Care Hospitals with similar missions that are within 60 miles of each other:

PI?	Facility Name	Second Facility Name	Miles	Rationale
	None			

- Tertiary Care Hospitals within 120 miles of each other:

PI	Facility Name	Second Facility Name	Miles	Rationale
N	Richmond, VA	Washington, DC	115	Driving distances of 115 miles and impractical commuting times to Washington DC are prohibitive

VISN 6 Level Issues

Effective Use of Resources – Space

- ✦ Current Vacant Space:
373,034 square feet
- ✦ Once the future workload demand data is translated into future space needs, any excess space that is identified will be added to the Vacant Space pool.
- ✦ The final Planning Initiative for all VISNs will be to reduce this total Vacant Space pool by at least 10% beginning in FY2004 and 30 % in FY2005.





VISN 6 Level Issues

PI Team Identified Issues

- ✦ Listed below are other issues that the VISN will consider when developing the Market Plans:
 - NHCU Northwest Market has been designed, is currently awaiting construction dollars.
 - Satellite OPC Southwest Market is at the RFP stage.



VISN 6 Level Issues Collaborative Opportunities

- ✦ The following collaborative opportunities have been identified for VISN 6 to consider when completing Market Plans:
 - VBA
 - No opportunities identified in this VISN
 - NCA identification of areas they would like to expand:
 - Salem, VA
 - Salisbury, NC (adding acreage to present site)
 - Enhanced-Use possible opportunities for vacant space:
 - No VISN facilities were identified in the list of 20 major EU opportunities.
 - This VISN, however, has identified Hampton, VA and Salem, VA as potential sites for EU.



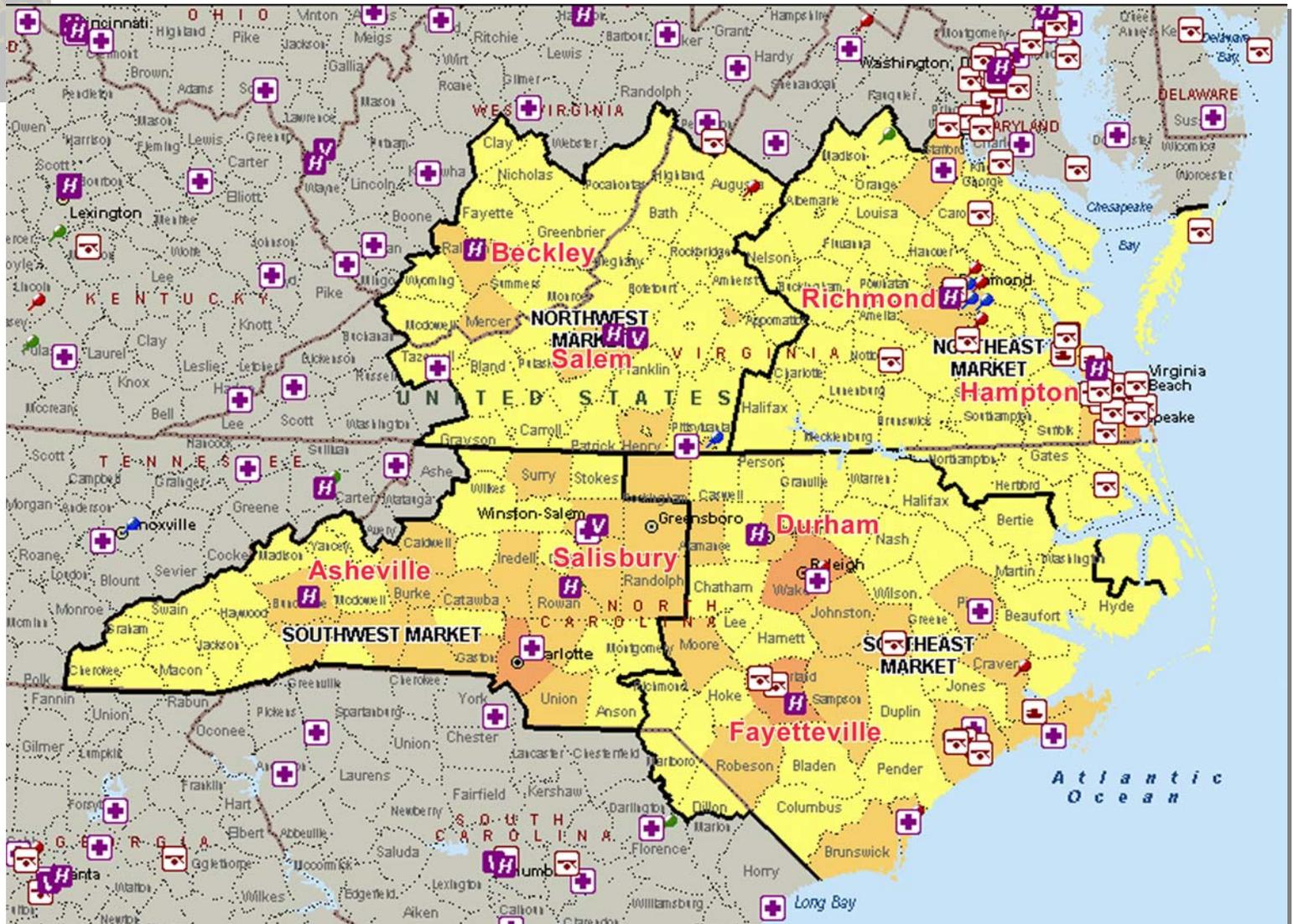
VISN Level Issues Collaborative Opportunities

✦ The following collaborative opportunities have been identified for VISN 6 to consider when completing Market Plans:

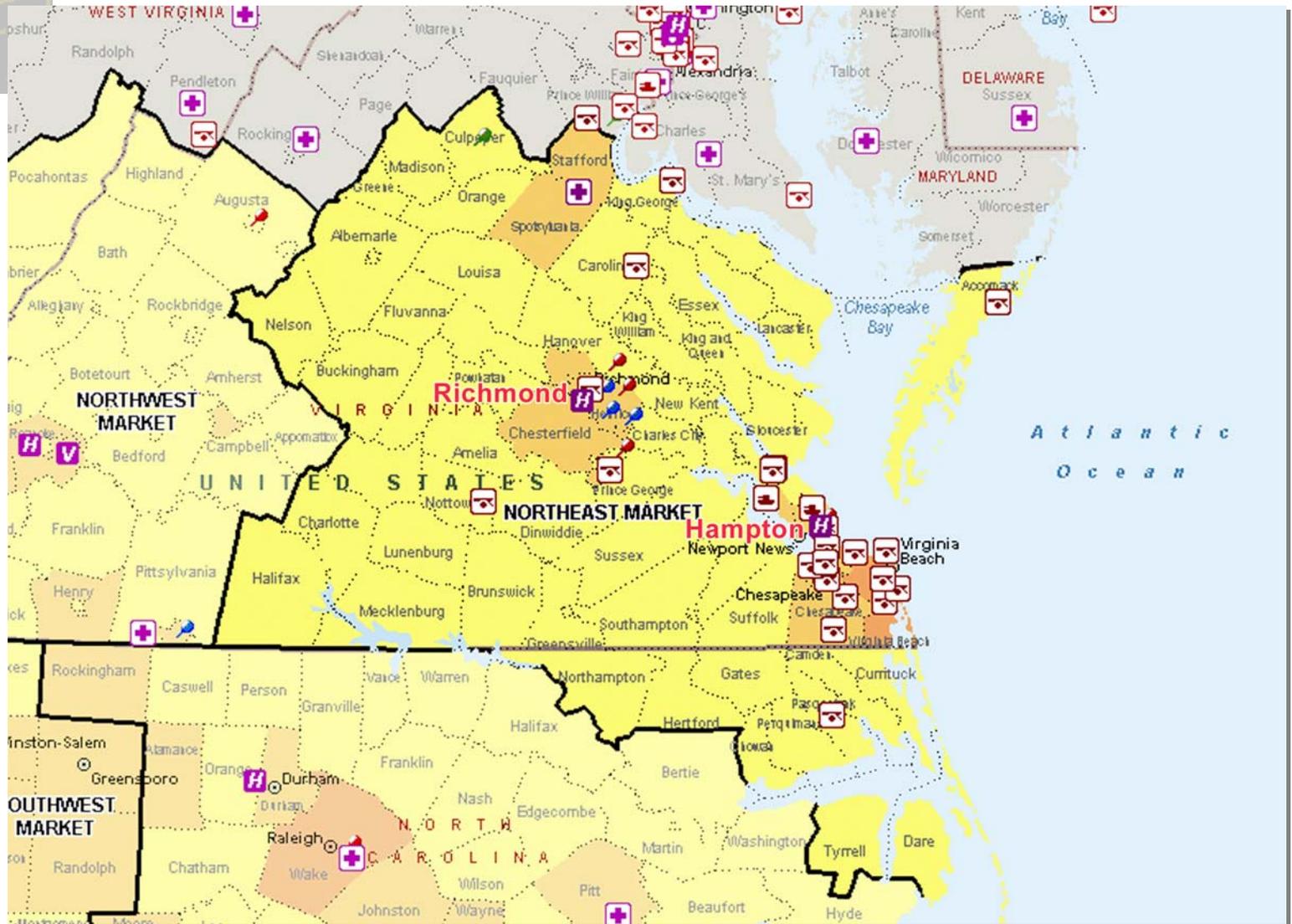
– DoD

- Hampton VA with Portsmouth (Navy) and Langley (AF)
- Fayetteville NC with Ft. Bragg (Army) and Camp Le Juene (Marines)
- Durham NC with Cherry Point (Navy)

VISN 6 Markets



VISN 6 Northeast Market



VISN 6 Northeast Market

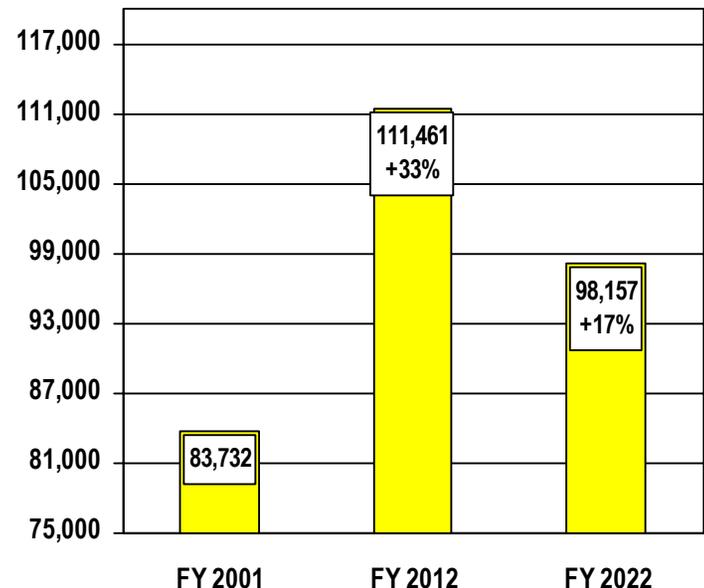
✦ Description of Market Area:

- The North East Market is based on the referral patterns of our Richmond and Hampton Virginia facilities with Richmond being a major tertiary facility. These facilities are also geographic partners and have a relationship of sharing services. There is one CBOC in this market supporting the Northern Virginia fringe. Unique features of this market are a high-density veteran population clustered along the coastal cities with predominantly rural areas inland. This market has strong VA/DoD potential

✦ Medical Center(s):

- Richmond, VA (Tertiary Care)
- Hampton, VA

Number of Enrollees By Year
(With % Change from FY 2001)

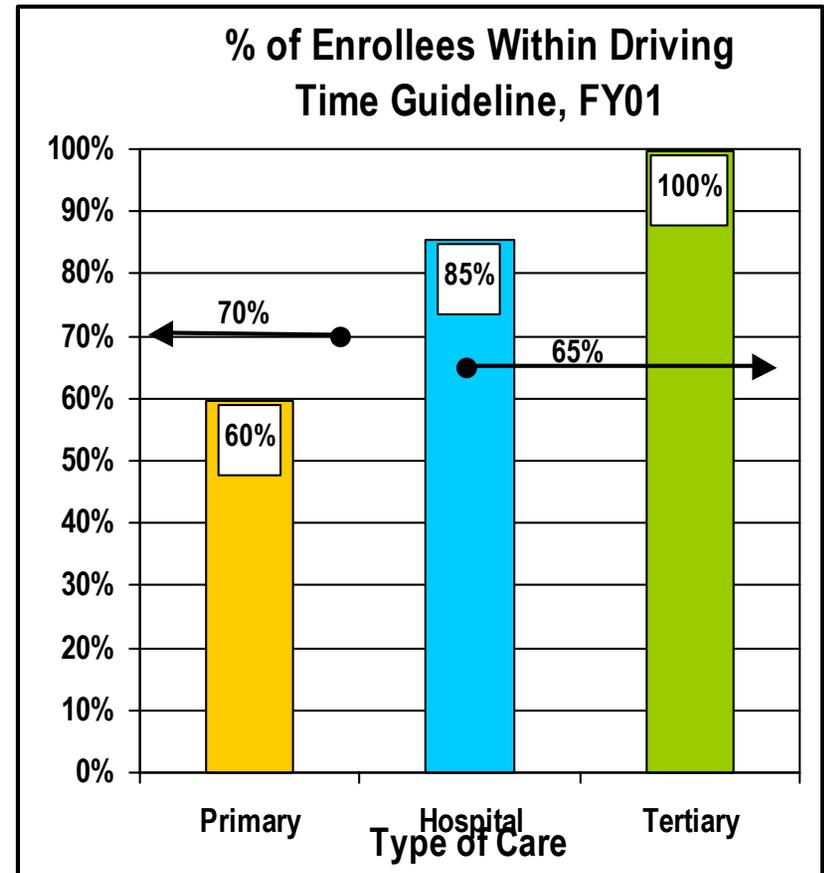


VISN 6 Northeast Market CARES Planning Initiatives

Access

- **Primary Care:** 60% of the veterans residing within the Market are within the Access Standard
- Hospital Care: 85% of the veterans residing within the Market are within the Access Standard
- Tertiary Care: 100% of the veterans residing within the Market are within the Access Standard

 Identified as a CARES Planning Initiative.



 This represents the Travel Time Guideline

*NOTES: Significant Gaps are determined by first applying the percentage threshold and then a volume criteria.

VISN 6 Northeast Market CARES Planning Initiatives

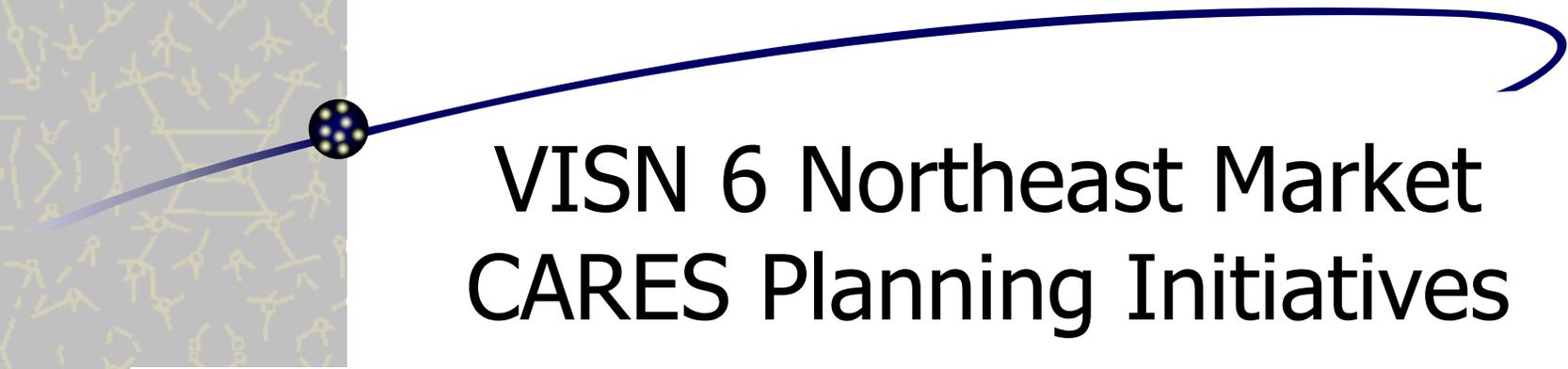
CARES Workload Category	Type of Gap	FY2012 Gap	FY2012 % Var.	FY2022 Gap	FY2022 % Var.	Workload Criteria*
Outpt. Specialty Care	Population Based	174,729	90%	157,121	81%	+/- 30,000
	Treating Facility	164,286	79%	143,799	69%	
Outpt. Primary Care	Population Based	155,972	92%	114,195	67%	+/- 26,000
	Treating Facility	151,648	86%	107,283	61%	
Outpt. Mental Health	Population Based	43,558	30%	2,867	3%	+/- 16,000
	Treating Facility	38,446	32%	5,575	5%	

*NOTES: Significant Gaps are determined by first applying a percentage change criteria for each CARES Category. If the gap meets this threshold, then it must meet the workload threshold criteria (beds for inpatient categories and stops for outpatient categories).

VISN 6 Northeast Market CARES Non-PI Workload Gaps

CARES Workload Category	Type of Gap	FY2012 Gap	FY2012 % Var.	FY2022 Gap	FY2022 % Var.	Workload Criteria*
Inpt. Psychiatry	Population Based	9	8%	-10	-9%	+/- 20
	Treating Facility	-6	-6%	-26	-24%	
Inpt. Medicine	Population Based	17	16%	-4	-3%	+/- 20
	Treating Facility	16	13%	-4	-7%	
Inpt. Surgery	Population Based	5	10%	-3	-6%	+/- 20
	Treating Facility	16	13%	-8	-7%	

*NOTES: Significant Gaps are determined by first applying a percentage change criteria for each CARES Category. If the gap meets this threshold, then it must meet the workload threshold criteria (beds for inpatient categories and stops for outpatient categories).

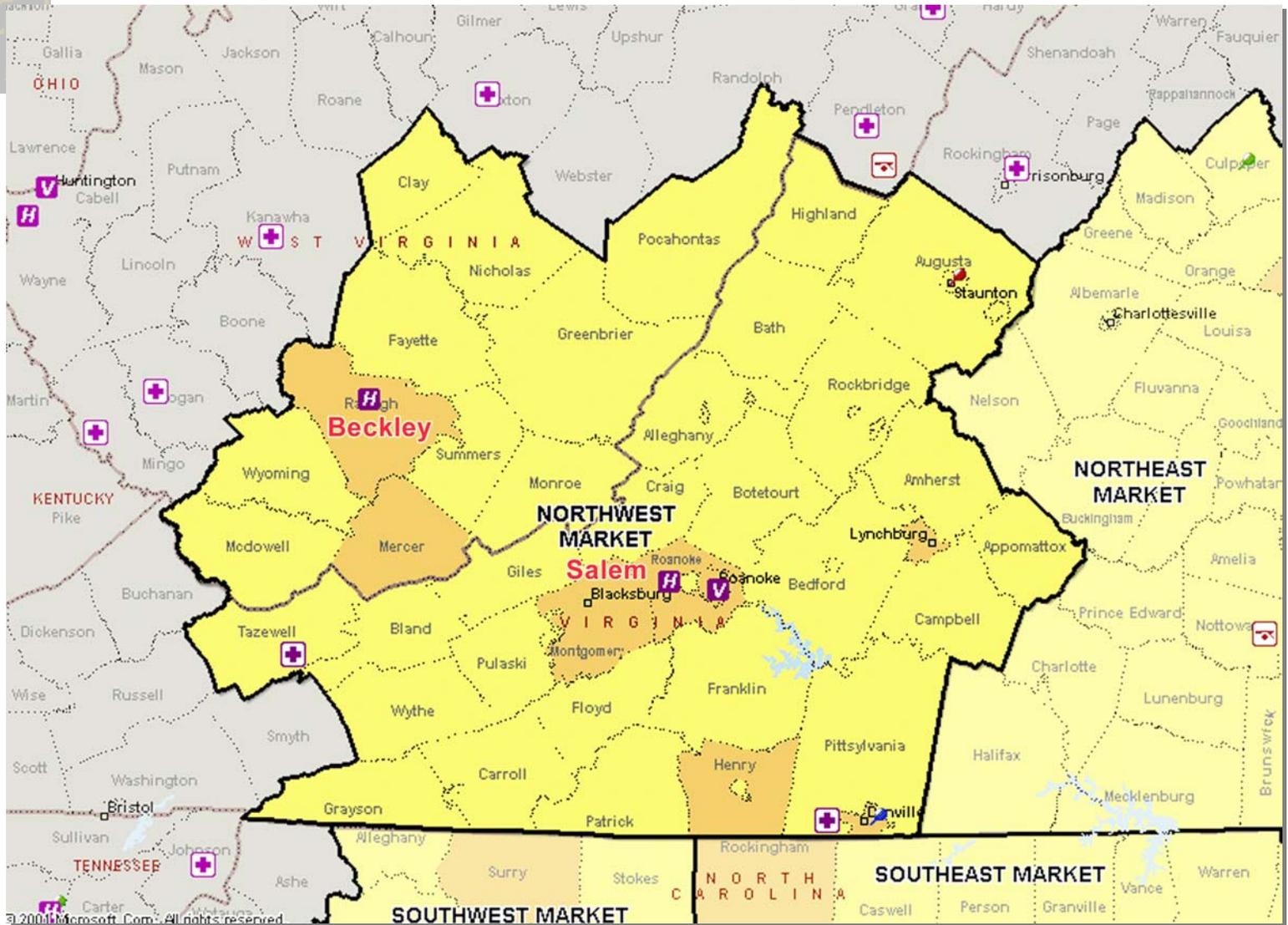


VISN 6 Northeast Market CARES Planning Initiatives

Small Facility Planning Initiative:

- There were no facilities in the Northeast Market projected to have less than 40 beds in FY 2012 and/or 2022.

VISN 6 Northwest Market



VISN 6 Northwest Market

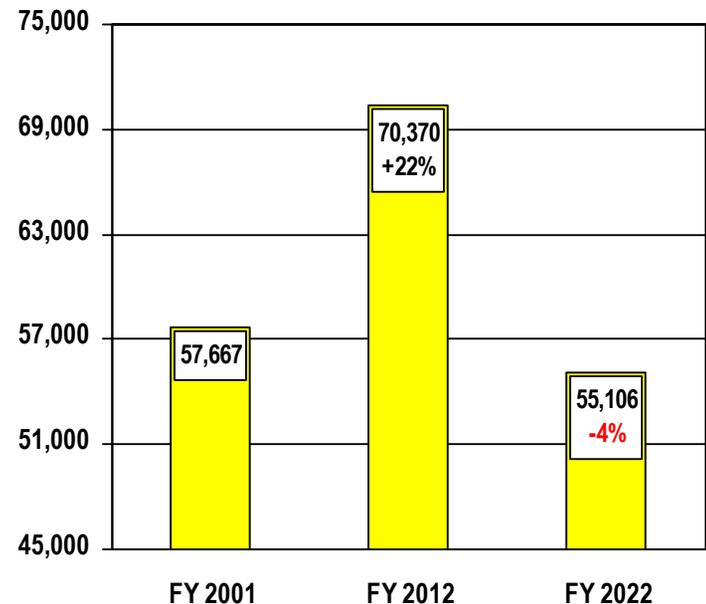
✦ Description of Market Area:

- The Northwest Market is based on the referral patterns of our Salem, Virginia and Beckley, West Virginia facilities with Salem offering a greater range of services. These facilities are also geographic partners and have a relationship of sharing services. There are three CBOCs in this market two in Virginia and one in West Virginia.

✦ Medical Centers:

- Salem, VA
- Beckley, WV

Number of Enrollees By Year
(With % Change from FY 2001)

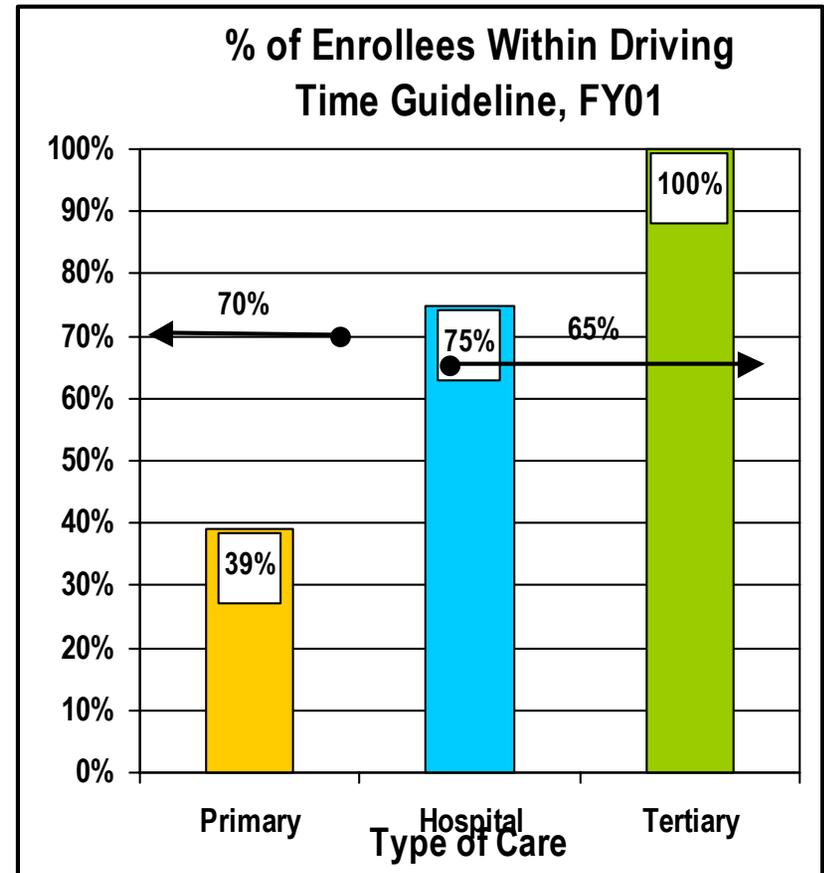


VISN 6 Northwest Market CARES Planning Initiatives

Access

- **Primary Care:** 39% of the veterans residing within the Market are within the Access Standard
- **Hospital Care:** 75% of the veterans residing within the Market are within the Access Standard
- **Tertiary Care:** 100% of the veterans residing within the Market are within the Access Standard

 Identified as a CARES Planning Initiative.



 This represents the Travel Time Guideline

*NOTES: Significant Gaps are determined by first applying the percentage threshold and then a volume criteria.

VISN 6 Northwest Market CARES Planning Initiatives

CARES Workload Category	Type of Gap	FY2012 Gap	FY2012 % Var.	FY2022 Gap	FY2022 % Var.	Workload Criteria*
Outpt. Specialty Care	Population Based	+51,213	+35%	+15,417	+10%	+/- 30,000
	Treating Facility	+55,231	+39%	+21,164	+15%	
Outpt. Primary Care	Population Based	+53,119	+37%	+7,012	+5%	+/- 26,000
	Treating Facility	+46,555	+32%	+2,530	+2%	
Inpt. Psychiatry	Population Based	-37	-38%	-50	-52%	+/- 20
	Treating Facility	-12	-9%	-34	-26%	

*NOTES: Significant Gaps are determined by first applying a percentage change criteria for each CARES Category. If the gap meets this threshold, then it must meet the workload threshold criteria (beds for inpatient categories and stops for outpatient categories).

VISN 6 Northwest Market CARES Non-PI Workload Gaps

CARES Workload Category	Type of Gap	FY2012 Gap	FY2012 % Var.	FY2022 Gap	FY2022 % Var.	Workload Criteria*
Outpt. Mental Health	Population Based	+2,476	+4%	N/A	N/A	+/- 16,000
	Treating Facility	+2,965	+4%	N/A	N/A	
Inpt. Medicine	Population Based	+8	+10%	-17	-23%	+/- 20
	Treating Facility	+7	+11%	-14	-22%	
Inpt. Surgery	Population Based	+3	+12%	-5	-19%	+/- 20
	Treating Facility	+7	+43%	+1	+4%	

*NOTES: Significant Gaps are determined by first applying a percentage change criteria for each CARES Category. If the gap meets this threshold, then it must meet the workload threshold criteria (beds for inpatient categories and stops for outpatient categories).

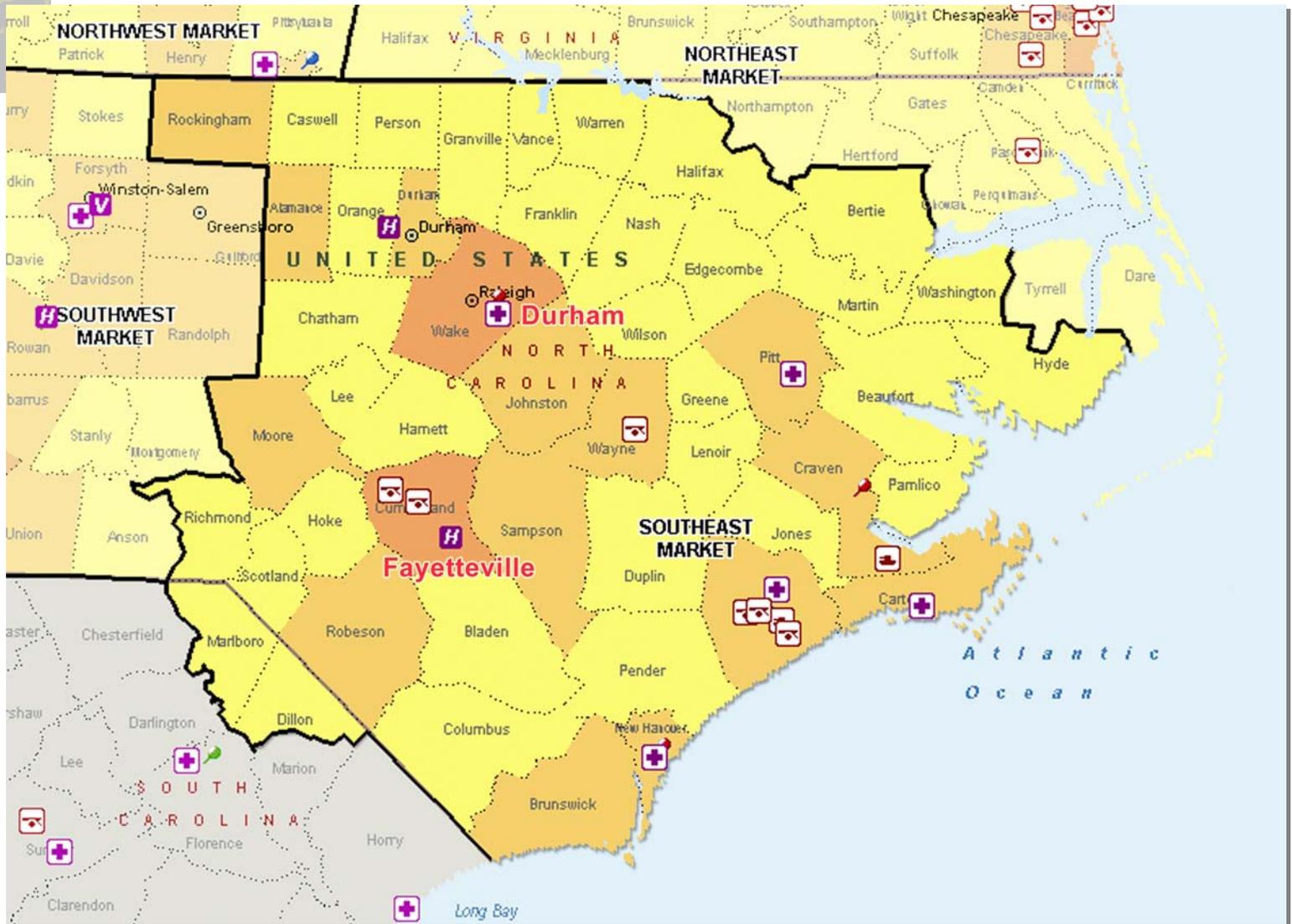
VISN 6 Northwest Market CARES Planning Initiatives

✦ Small Facility Planning Initiative:

- The following facilities were projected to have less than 40 beds in FY 2012 and/or 2022.

PI	Facility Name	FY2012 (Beds)	FY2022 (Beds)	Rationale
N	Beckley, WV	15	11	Driving time from Beckley, WV is 2 hours to another VA hospital facility and 5 hours to a tertiary facility. There is limited community healthcare capacity in Beckley. Geographic barriers are prohibitive for access to other VISNs' VA facilities. A review of the inpatient capacity for this facility will be completed.

VISN 6 Southeast Market



VISN 6 Southeast Market

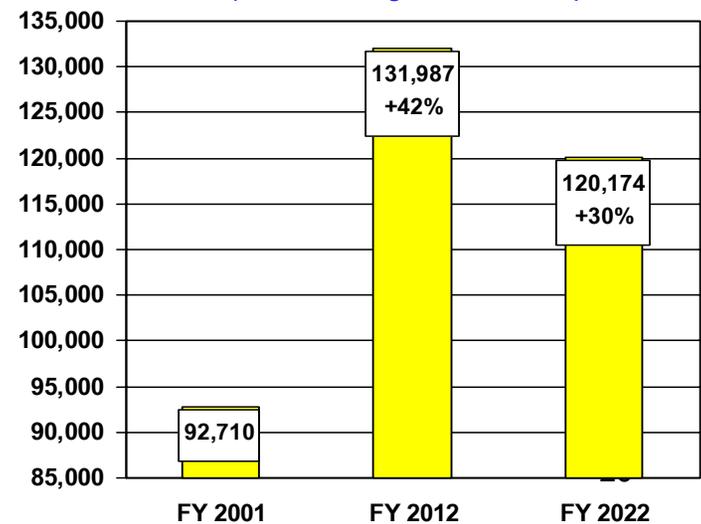
✦ Description of Market Area:

- The Southeast Market is based on the referral patterns of our Durham and Fayetteville, North Carolina facilities with Durham being a major tertiary facility. These facilities are also geographic partners and have a relationship of sharing services. There are five CBOCs in this market. The veteran population is comparatively evenly dispersed in moderately sized population areas along transportation and access routes. This market has moderate/strong VA/DoD potential.

✦ Medical Center(s):

- Durham, NC (Tertiary Care)
- Fayetteville, NC

Number of Enrollees By Year
(With % Change from FY 2001)

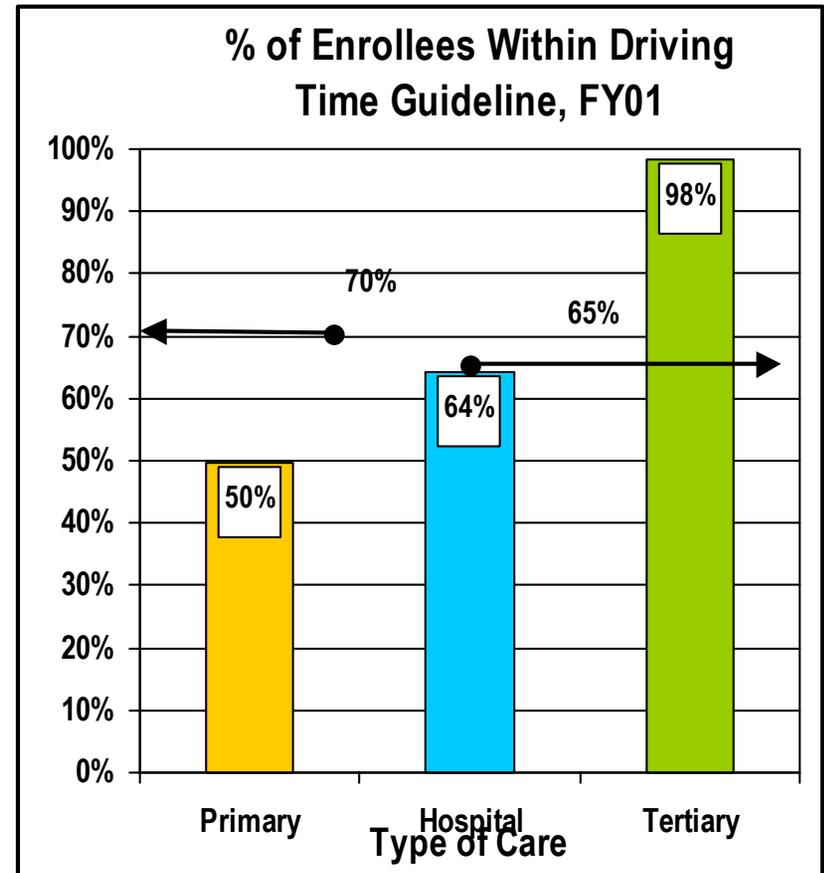


VISN 6 Southeast Market CARES Planning Initiatives

🔦 Access

- **Primary Care:** 50% of the veterans residing within the Market are within the Access Standard
- **Hospital Care:** 64% of the veterans residing within the Market are within the Access Standard
- Tertiary Care: 98% of the veterans residing within the Market are within the Access Standard

 Identified as a CARES Planning Initiative.



 This represents the Travel Time Guideline

*NOTES: Significant Gaps are determined by first applying the percentage threshold and then a volume criteria.

VISN 6 Southeast Market CARES Planning Initiatives

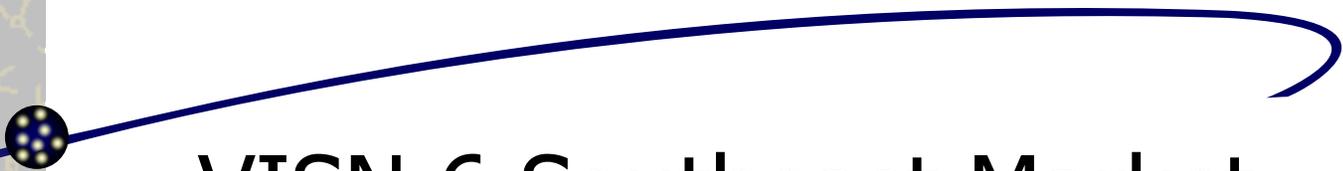
CARES Workload Category	Type of Gap	FY2012 Gap	FY2012 % Var.	FY2022 Gap	FY2022 % Var.	Workload Criteria*
Outpt. Specialty Care	Population Based	207,571	125%	194,888	118%	+/- 30,000
	Treating Facility	205,418	119%	190,742	111%	
Outpt. Primary Care	Population Based	189,549	91%	150,161	72%	+/- 26,000
	Treating Facility	187,477	91%	147,474	72%	
Outpt. Mental Health	Population Based	108,605	146%	81,100	109%	+/- 16,000
	Treating Facility	89,683	169%	66,844	126%	

*NOTES: Significant Gaps are determined by first applying a percentage change criteria for each CARES Category. If the gap meets this threshold, then it must meet the workload threshold criteria (beds for inpatient categories and stops for outpatient categories).

VISN 6 Southeast Market CARES Non-PI Workload Gaps

CARES Workload Category	Type of Gap	FY2012 Gap	FY2012 % Var.	FY2022 Gap	FY2022 % Var.	Workload Criteria*
Inpt. Psychiatry	Population Based	71	76%	50	53%	+/- 20
	Treating Facility	37	76%	23	47%	
Inpt. Medicine	Population Based	56	55%	35	34%	+/- 20
	Treating Facility	55	49%	31	28%	
Inpt. Surgery	Population Based	27	72%	19	52%	+/- 20
	Treating Facility	28	59%	18	39%	

*NOTES: Significant Gaps are determined by first applying a percentage change criteria for each CARES Category. If the gap meets this threshold, then it must meet the workload threshold criteria (beds for inpatient categories and stops for outpatient categories).



VISN 6 Southeast Market CARES Planning Initiatives

Small Facility Planning Initiative:

- There were no facilities in the Southeast Market projected to have less than 40 beds in FY 2012 and/or 2022.

VISN 6 Southwest Market

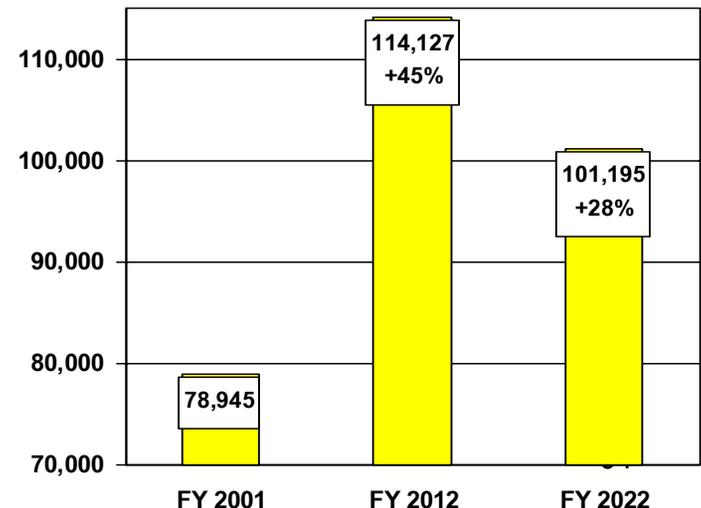
✦ Description of Market Area:

- The Southwest Market is based on the referral patterns of our Salisbury and Asheville, North Carolina facilities with Asheville being a tertiary facility. These facilities are also geographic partners and have a relationship of sharing services. This market has one CBOC and one SOPC to cover the two major metropolitan population centers in this market. The market has one large and several moderately sized population areas dispersed along transportation and access routes.

✦ Medical Center(s):

- Asheville, NC (Tertiary Care)
- Salisbury, NC

Number of Enrollees By Year
(With % Change from FY 2001)

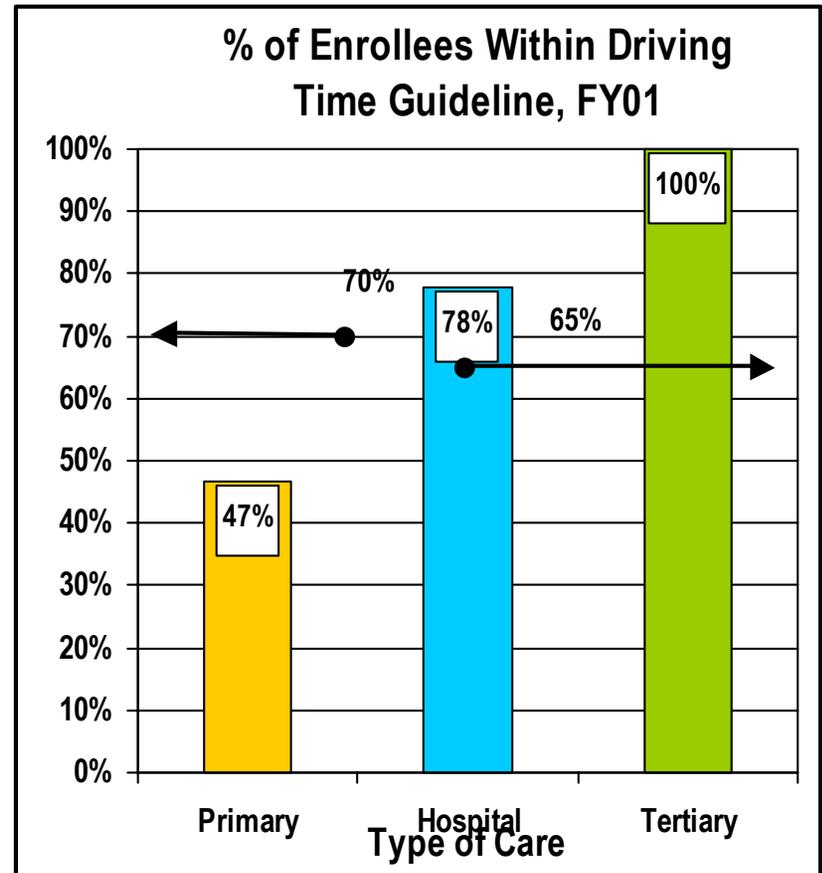


VISN 6 Southwest Market CARES Planning Initiatives

Access

- **Primary Care:** 47% of the veterans residing within the Market are within the Access Standard
- Hospital Care: 78% of the veterans residing within the Market are within the Access Standard
- Tertiary Care: 100% of the veterans residing within the Market are within the Access Standard

 Identified as a CARES Planning Initiative.



 This represents the Travel Time Guideline. 35

*NOTES: Significant Gaps are determined by first applying the percentage threshold and then a volume criteria.

VISN 6 Southwest Market CARES Planning Initiatives

CARES Workload Category	Type of Gap	FY2012 Gap	FY2012 % Var.	FY2022 Gap	FY2022 % Var.	Workload Criteria*
Outpt. Specialty Care	Population Based	179,765	142%	162,986	129%	+/- 30,000
	Treating Facility	180,719	145%	161,583	130%	
Outpt. Primary Care	Population Based	161,367	91%	122,642	69%	+/- 26,000
	Treating Facility	127,482	65%	87,241	45%	
Inpt. Medicine	Population Based	53	75%	30	43%	+/- 20
	Treating Facility	55	81%	32	48%	

*NOTES: Significant Gaps are determined by first applying a percentage change criteria for each CARES Category. If the gap meets this threshold, then it must meet the workload threshold criteria (beds for inpatient categories and stops for outpatient categories).

VISN 6 Southwest Market CARES Non-PI Workload Gaps

CARES Workload Category	Type of Gap	FY2012 Gap	FY2012 % Var.	FY2022 Gap	FY2022 % Var.	Workload Criteria*
Inpt. Psych	Population Based	-36	-24%	-46	-31%	+/- 20
	Treating Facility	21	10%	-4	-2%	
Outpt. Mental Health	Population Based	60,840	93%	43,588	66%	+/- 16,000
	Treating Facility	69,789	99%	50,070	71%	
Inpt. Surgery	Population Based	20	67%	12	41%	+/- 20
	Treating Facility	17	61%	10	35%	

*NOTES: Significant Gaps are determined by first applying a percentage change criteria for each CARES Category. If the gap meets this threshold, then it must meet the workload threshold criteria (beds for inpatient categories and stops for outpatient categories).



VISN 6 Southwest Market CARES Planning Initiatives

Small Facility Planning Initiative:

- There were no facilities in the Southwest Market projected to have less than 40 beds in FY 2012 and/or 2022.