DoD/VA Sharing Agreements

VHA Interagency Health Affairs
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Agenda

• Program Overview
• Sharing Agreements/Sharing Authority
• TRICARE Agreements
• Models of Sharing
• RWTF Questions:
  - Are there formal and informal agreements between DoD and VA?
  - Are these agreements universal throughout the US or location specific?
DoD/VA Collaboration

Vision

*Enhance the overall healthcare experience of all federal beneficiaries*

Mission

*Promotes the sharing of medical resources between VA and DoD through policy guidance and oversight*
VA-DoD Sharing Authority

• Public Law 97-174, VA/DoD Health Resources Sharing and Emergency Operations Act of 1982
  – Directs VHA and DoD to form an interagency committee to oversee opportunities for sharing medical resources of the VA and DoD; codified as Title 38 U.S.C. § 8111

  – Provides for the sharing of healthcare resources between VA and DoD for the mutually beneficial coordination, use, or exchange of use of healthcare resources between the two Departments

• 10 U.S.C. § 1104, Sharing of Resources with the Department of Veterans Affairs
  – Provides for the sharing of DoD healthcare resources with the VA in accordance with 38 U.S.C. § 8111
Types of Sharing Agreements - Local

Direct Sharing/Local

- Agreement between the head of a medical facility or organization of both Departments. May vary in scope:
  - Local – between the heads of individual VA and DoD medical facilities
  - Reimbursement:
    - Paid from local site to local site
    - Barter for exchange of services
• Approximately 200 active VA/DoD sharing agreements nationwide: 59 VAMCs providing health care services for DoD beneficiaries and 38 DoD medical facilities providing health care services for Veterans

• In FY 2013 VA purchased from DoD $118.9M for services rendered to Veterans and DoD reimbursed VA $89.4M for services delivered to Servicemembers, military retirees and DoD beneficiaries at VAMCs

• There are currently 11 VA/DoD Joint Ventures including the James A. Lovell Federal Health Care Center

• Range of services include; Graduate Medical Education (GME), Laundry, Administration, Clinical Pathology, Cardiology, Dermatology, Ambulatory Care Services, Radiology, Mental Health, Neurosurgery, Fitness Centers

• Services may be discontinued at any time by either party, given a 30-day notice to terminate
## Levels of VA/DoD Collaboration

### Facility Examples

<table>
<thead>
<tr>
<th>Facility Example</th>
<th>1: S. Nevada VAHCS and Nellis AFB</th>
<th>2: VA Gulf Coast HCS and Keesler AFB</th>
<th>3: Joint Ambulatory Care Clinic Goose Creek Charleston, SC</th>
<th>4: William Beaumont AMC and El Paso VAHCS</th>
<th>5: North Chicago Federal Health Facility</th>
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### Levels of Collaboration

<table>
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<tr>
<th>Level of Collaboration</th>
<th>1: Separate Facilities w/o Sharing of Services</th>
<th>2: Separate Facilities with Sharing of Services</th>
<th>3: Co-occupancy with Sharing of Ancillary Support</th>
<th>4: Co-occupancy with Sharing of Ancillary Support AND Inpatient and/or Specialty Care</th>
<th>5: Fully Integrated Care - Federal Health Facility</th>
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### Description

- **Level 1**: Separate Facilities w/o Sharing of Services
  - Separate buildings in same or different locations
  - Individual agency beneficiaries
  - Sharing agreement outlining service arrangements in market

- **Level 2**: Separate Facilities with Sharing of Services
  - Separate buildings in same or different locations
  - Sharing agreement outlining service arrangements in market

- **Level 3**: Co-occupancy with Sharing of Ancillary Support
  - Colocated – single facility
  - Joint capital investment OR one entity pays rent to other entity to occupy space
  - Two entities providing separate care
  - Sharing of selected ancillary support services (e.g., pharmacy, lab, radiology, etc.)
  - Sharing of selected inpatient and/or specialty care services

- **Level 4**: Co-occupancy with Sharing of Ancillary Support AND Inpatient and/or Specialty Care
  - Colocated – single facility
  - Joint capital investment OR one entity pays rent to other entity to occupy space
  - Two entities providing separate care
  - Sharing of selected ancillary support services (e.g., pharmacy, lab, radiology, etc.)
  - Sharing of selected inpatient and/or specialty care services

- **Level 5**: Fully Integrated Care - Federal Health Facility
  - Single facility with integrated leadership
  - Fully integrated and shared clinical and facility operations

### Physical Layout

- **Level 1**: Separate
- **Level 2**: Separate
- **Level 3**: Joint use
- **Level 4**: Joint use
- **Level 5**: Joint use

### Building Operations

- **Level 1**: Independent
- **Level 2**: Independent
- **Level 3**: Joint capital investment with sharing agreement outlining building operations plan OR prime tenant / lease type sharing agreement
- **Level 4**: Joint capital investment with sharing agreement outlining building operations plan OR prime tenant / lease type sharing agreement
- **Level 5**: Fully integrated

### Clinical Operations

- **Level 1**: Independent
- **Level 2**: Sharing agreement outlining service arrangements, beneficiaries can receive services at either facility
- **Level 3**: Sharing agreement outlining service arrangements
- **Level 4**: Sharing agreement outlining service arrangements
- **Level 5**: Fully integrated

### Color Coding

- Green: Department of Veterans Affairs (VA)
- Purple: Department of Defense (DoD)
- Green: VA Patient
- Purple: DoD Patient
- Orange: Shared Ancillary Support
- Yellow: Shared Inpatient and/or Specialty Care
- Red: Shared and Integrated
Types of Sharing Agreements - National

National – between the two Departments

- Reimbursement varies by terms of agreement
- National Agreement to provide treatment for Active Duty with Spinal Cord Injuries, Traumatic Brain Injuries and Blindness, Rehabilitation
- National Integrated Disability Evaluation System MOA for Service members referred to VA for Compensation and Pension (C&P) examinations of potentially unfitting conditions
- National Pharmacy MOA promoting all VA pharmacies to participate as a TRICARE pharmacy
- National TRICARE Dental MOA to provide dental services to Active Duty where VA capacity permits
- National Allergen Extract Program
- Other collaborative activities: purchase of prosthetics, hearing devices
TRICARE Network Provider Agreement

- Agreement between VA and the DoD Managed Care Support Contractor (MCSC) whereby VA will participate in the MCSC provider network to provide health care services to DoD beneficiaries in accordance with TRICARE regulations

- ALL VA medical facilities are TRICARE Providers

- Benefits of being a Network Provider include:
  - Continuity of care for Active Duty Service Members transitioning to VA care, especially for OEF/OIF/OND
  - Provision of medical care that may not be available at DoD Facilities
  - Streamlined Referral, Authorization and Billing Processes

- Reimbursement is negotiated through the agreement process and varies, but generally follows TRICARE reimbursement guidelines

- In FY2013, TRICARE reimbursed VA $62.6M for health care services delivered to TRICARE beneficiaries at VAMCs
Types of Sharing Agreements - TRICARE
Benefits of VA-DoD Sharing

- Purchased Care/Non-VA Care Recapture
- Combining Other VA and DoD Services in one location – economies of scale
- Increased patient mix and complexity – enhanced clinical currency
- Combining or Complementary Services for Graduate Medical Education (GME)
- Joint training sessions – increased training opportunities (non-GME); reduced training costs
VA-DoD Sharing Summary

• RWTF Questions:
  - Are there formal and informal agreements between DoD and VA?
  - Are these agreements universal throughout the US or location specific?