Caring for Rural Veterans

National Rural Health Day
Mary Beth Skupien, PhD, Director of the VHA Office of Rural Health

November 17, 2011

About Rural Veterans

- Approximately 22 million Veterans are living in the US today
- Nearly 30% (6.1 million) live in rural areas
- Over 8.3 million Veterans enrolled with the VHA (FY11)
  - 3.4 million of these live in rural or highly rural areas
  - 41% of the total enrolled Veteran population
- Service members from rural and highly rural areas
  make up a disproportionate share of Veterans enrolled in the Veterans Health Care system
  - About 30% of enrolled rural Veterans served in Operation Enduring Freedom, Operation Iraqi Freedom (OEF/OIF)
    and Operation New Dawn (OND).
- Many soldiers are returning to their rural communities
  when discharged from the military.
More About Rural Veterans...

- Rural Veterans’ health care enrollment has increased 15% since 2006.
- Geographically, rural Veteran enrollment for VA health care is highest from:
  - South Eastern U.S.
  - South Central U.S.
  - Upper Midwest
- Nearly half of enrolled rural Veterans are between the ages of 55 and 74.
  - Approximately 26% are 75 years of age or older
  - Older than their urban counterparts
- Rural Women Veterans make up a small percentage (5%) of enrolled population, however their numbers have increased 31% since 2006.

Rural Veteran Health Care Needs

- Rural Veterans report lower health-related quality of life scores and they experience a higher prevalence of physical illness than their urban counterparts.
- Research indicates that about 1 in every 4 or 5 Veterans will return from war with some serious mental illness.
- Many Veterans have unique health conditions associated with combat including mild TBI, PTSD, and amputation.

- The five most common diagnosis in rural Veterans seen as an outpatient include:
  - Hypertension
  - Diabetes Type II
  - PTSD
  - Depressive Disorder
  - Hyperlipidemia
Rural Veteran Health Care Challenges

- Distance to care
- Transportation
- Lack of specialty care
- Rural provider training
- Older, poorer, sicker population
- Lack of mental health care providers
- Difficulty in recruitment and retention of providers to rural areas
- Rural Veteran understanding of VA eligibility and benefits

VA Office of Rural Health (ORH)

- Established in 2007 to improve access and quality of care for enrolled rural and highly rural Veterans.
- ORH Organizational Structure
  - Headquartered in Washington, DC
  - ORH Director and Staff:
    - Direct National ORH activities and communications
    - Oversee the budget and performance of all ORH-funded programs
  - Three Veterans Rural Health Resource Centers (VRHRCs) serve as field based laboratories that conduct studies and implement and evaluate innovative models of health care delivery:
    - Eastern Region - Gainesville, Florida
    - Central Region - Iowa City, Iowa
    - Western Region - Salt Lake City, Utah
  - Twenty-one VISN (VA Network) Rural Consultants (VRCs) oversee rural health programs in their geographic area of responsibility.
Veteran Rural Health Resource Centers

- **Eastern Region**
  - **Focus Areas:** Telehealth and Distance Technology; Provider Training and Education; Program Evaluation; and Geographical Needs Assessment
    - In-home Telerehabilitation for Neurological Conditions (MS/ALS/SCI)
    - Rural health training programs for Pharm D’s, Psychologists, Psychiatrists, Nurse Practitioners, Allied Health Professionals and Medical Students
    - GeoSpatial Outcomes Division (GSOD)

- **Central Region**
  - **Focus Areas:** Assessing Clinical Needs of rural Veterans through Qualitative Methodology (interview and focus groups); Assessing Barriers to Care; and Evaluating Innovative Models of Care.
    - Remote Delivery of Cardiac Rehabilitation
    - Colorectal Cancer Screening Initiative

- **Western Region**
  - **Focus Areas:** Geriatrics, Native Veterans and Collaboration and Outreach to rural Veterans
    - Rural Native Veteran Telehealth Collaborative Education and Consultation Service
    - Rural Veteran Outreach Initiative

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ORH Initiatives

- Since 2009, ORH has expended just over $750 million to increase access to and quality of health care for rural/highly rural Veterans.
- Major initiatives have been in the areas of:
  - Telehealth and Health Information Technology
  - Mental Health and Homelessness
  - Establishment of rural Community-Based Outpatient Clinics (CBOCs) and Outreach Clinics
  - Rural Veteran Outreach
  - Geriatrics
  - Rural provider training and education
  - Transportation
  - Contract care pilot program Project Access Received Closer to Home (ARCH)
Telehealth and Health Information Technology

- Health Information Exchange pilot between the VA and a rural non-VA provider through the NwHIN
- VA telehealth services and equipment expansion into rural areas:
  - Store and Forward
  - Clinical Video Telehealth
  - Care Coordination Home Telehealth
- Demonstration projects of innovative telehealth models of care:
  - Virtual Intensive Care Unit
  - Home Telerehabilitation for Multiple Sclerosis
  - Telemental Health Care for Veteran Students
  - Virtual HIV Care teams
  - Mobile Teleretinal Imaging for rural Vets with Diabetes
- VA National Teleradiology program expansion into rural areas.

Mental Health

- Enhanced - Rural Access Network Growth Enhancement Program (E-RANGE)
  - Provides community-based outreach to homeless rural Veterans
  - Intensive case management services for Veterans with serious mental illness (SMI)
- Post Traumatic Stress Disorder (PTSD) Tele-mental Health Clinics for Northern Plains American Indian Veterans
  - Partners include the VA Minority Veterans Program and Office of Telemedicine, local VA medical centers, Tribes, the Indian Health Service, and the University of Colorado.
  - Currently operating from the Denver VAMC to 8 clinics serving 14 tribes in Montana, Wyoming, and South Dakota.
- VA Center for Tele-mental Health in Charleston, South Carolina
  - Provides evidence-based psychotherapies targeting PTSD and other mental health disorders via telehealth technologies to Veterans at 5 rural VA clinics.
  - Since its inception, this program has provided mental health services to 1,900 rural Veterans.
Rural Clinics

- 51 new rural VA Community-Based Outpatient clinics (CBOCs)
  - These new facilities served nearly 45,000 rural Veterans in FY11.
- 40 new rural outreach clinics, one serving Veterans living in Puerto Rico.
- Telemedicine specialty care initiatives:
  - physical and occupational therapy
  - audiology
  - mental and behavioral health services
  - pharmacy services
  - radiology services
  - foot care
- Hired new specialty care staff for CBOCs, outreach clinics and mobile clinics.

Geriatrics

- Expansion of the Home-Based Primary Care (HBPC) Program into Rural Areas
  - In-home comprehensive, longitudinal primary care
  - Interdisciplinary team (Patient-Aligned Care Team)
  - Complex, chronic, disabling conditions for whom routine clinic-based care is not effective
  - Expanded to 57 different sites including rural VHA clinics, Indian Health Service Clinics and tribal clinics.
- Geriatric Scholars Program
  - Training is focused on primary care providers, social workers, and pharmacists who work in rural CBOCs.
  - Since 2008, this program has trained 140 providers from 109 different clinics.
- Geriatric Education through Quality Improvement Program
  - This pilot program trained 128 rural providers and 252 rural CBOC staff on fall prevention in the elderly.
  - A goal of screening 90% of patients over 75 years for fall risk was achieved; 75% of those with a positive screen were evaluated further for fall risk.
Rural Veteran Outreach

- Rural Veteran Outreach and Health Literacy in the Mid-Atlantic Region
- Collaborating with Rural Clergy
- Tribal Outreach Workers Program (TOW)
- Rural Community Collaboration and Veteran Outreach in the Western Region
- Rural Veteran Outreach using Motivational Interviewing and the Patient Navigator Model in rural Alabama

Rural Provider Training and Education

- Rural Health Professions Institute (RHPI)
- Mobile Mini-Residency Training Program in Women’s Health care for Rural CBOCs
- TelePharmacy – Brown Bag Clinics for Rural Maine CBOCs
- Rural Health Training Program for Medical, Nursing and Allied Health Professions Students
- Public Psychiatry Fellowship Program
Transportation

- In FY12, ORH is funding 8 transportation initiatives.
- Largest initiative is a collaboration with the Veteran Transportation System:
  - Will utilize a Mobility Management Concept to establish a network of transportation providers at VA health care facilities.
  - Will increase transportation resources and options for rural Veterans.
  - Will improve efficiency of existing transportation resources through use of 21st Century technology, including ridesharing software and GPS units.

Project ARCH

- 3-year pilot program intended to improve access for eligible Veterans.
- Provides contracted care from non-VA health providers serving rural areas.
- The five pilot sites are:
  - Caribou, Maine
  - Farmville, VA
  - Flagstaff, AZ
  - Billings, MT
  - Pratt, KS
- All sites provide:
  - Primary Care
  - Diagnostic Imaging
  - Lab Services
- Two sites provide Acute Inpatient Medical and Surgical Care, one provides Behavioral Health.
Contact Us

- Our website:  
  — www.ruralhealth.va.gov
- Our rural health mailbox inquiry:  
  — rural.health.inquiry@va.gov
- Join the ORH mail list to receive updates and our Quarterly Newsletter:  
  — http://www.ruralhealth.va.gov/subscribe.asp

Mary Beth Skupien, Ph.D.  
Director, Office of Rural Health

Department of Veterans Affairs  
Veterans Health Administration  
810 Vermont Avenue, NW  
Washington, DC 20420  
MaryBeth.Skupien@va.gov