

VA Partnerships



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Disclaimer:

- No known conflict of interest
- Not a VA expert or representative
- Thanks to VA for advice, slides



Historic Opportunity!

History

- Blue Ribbon Panel
 - VISN >accountability & expectations
 - VA address workforce shortages
 - Innovation and increased investment
 - Policy Changes, equitable indirect funding
- Advisory Committee Recommendations
- Jan. 2014 Proposal

Veterans Health Administration (VHA) Statutory Missions:

1. Health Care
- 2. Health Professions Training**
3. Research related to health conditions of Veterans
4. Emergency Backup to DoD & part of Nat'l Disaster Medical System (HHS, DoD, VA, FEMA)



VA's Academic Programs

*VA is the largest single provider of health professions education in the US [2nd after Medicare & Medicaid in funding GME]

VHA's educational mission is conducted in collaboration with:

- 135 of 141 allopathic & 35 of 40 osteopathic medical school locations.
- More than 40 other health professions – represented by over 1,800 colleges and universities
- 128 of 150 VA medical centers, 2 of 6 independent outpt clinics, & 4 other facilities have affiliations for GME and almost all VA facilities have some health professions trainees

Veterans Access, Choice, & Accountability Act (VACAA)

- PL 113-146: Enacted by Congress & signed by the President on August 7, 2014 – Section 301.b
 - Provision to expand VA GME by “up to 1,500 positions” over 5 years beginning 1 year after signing
 - Funding priorities defined (next slide)
 - Implemented in fall of 2014, with 1-mo. notice
 - Broad outreach efforts to VA’s constituencies & academic community

Funding Priorities in VACAA

Facility Characteristics

- A shortage of physicians
- No prior GME
- Rural locations
- Areas with a “high concentration of veterans”
- HPSAs – as defined by HRSA

Program Characteristics

- Primary Care
- Mental Health
- New affiliations
- Other specialties “the Secretary deems appropriate”

Caveats

- VACAA positions come with “strings attached”
- OAA & VA sites will need to track these positions & funding separately
 - Cannot be internally reallocated to other positions or purposes
- Annual reports to Congress on:
 - Positions awarded
 - Positions filled/unfilled
 - If not filled, challenges in filling

What VACAA GME is *NOT*...

- *Not* a way to fund resident positions at non-VA sites
- *Not* an opportunity to develop VA-sponsored training programs (prohibited by policy)
- *Not* a mechanism for funding non-accredited programs
- *Not* focused on GME innovation

Conclusions

- VA provides opportunities for funding and expansion of GME positions – especially in non-traditional clinical teaching sites with new affiliations – under new, “VACAA” legislation
- Outreach to THCs and other programs in rural & underserved areas is encouraged
- Watch for VACAA GME RFP to be released in late spring 2015

Future GME Enhancement: VACAA RFPs

- Start-up support for GME naïve sites (FY 2015)
 - Infrastructure support to ensure a quality educational experience & adequate/appropriate resident supervision
 - Planning grants to incentivize future GME relationships
- Timeline – next cycle of VACAA GME Enhancement:
 - RFPs planned for late spring 2015
 - Review summer 2015
 - Awards finalized Sept/Oct 2015
 - Positions start July 1, 2016 (for AY2016-17)
 - Next 4 years: add between 200-325 positions per year.

Current Realities

- VA pays for DME
- VA pays for time caring for VA pts.
- VA does not sponsor residencies
- VA will not leverage facilities to start GME
- VA pays the programs for expenses like IME but this may not go to the educational effort (station funding 87K)

Specialty Priorities

- Primary Care
- Psychiatry
- GI
- Ortho
- Anesthesia



Limitations

- Congress and funding requirements
- General Counsel “Interpretations”
- VA “Policy”

Opportunity for Proactive Changes

- Large organization – change is often glacial in pace

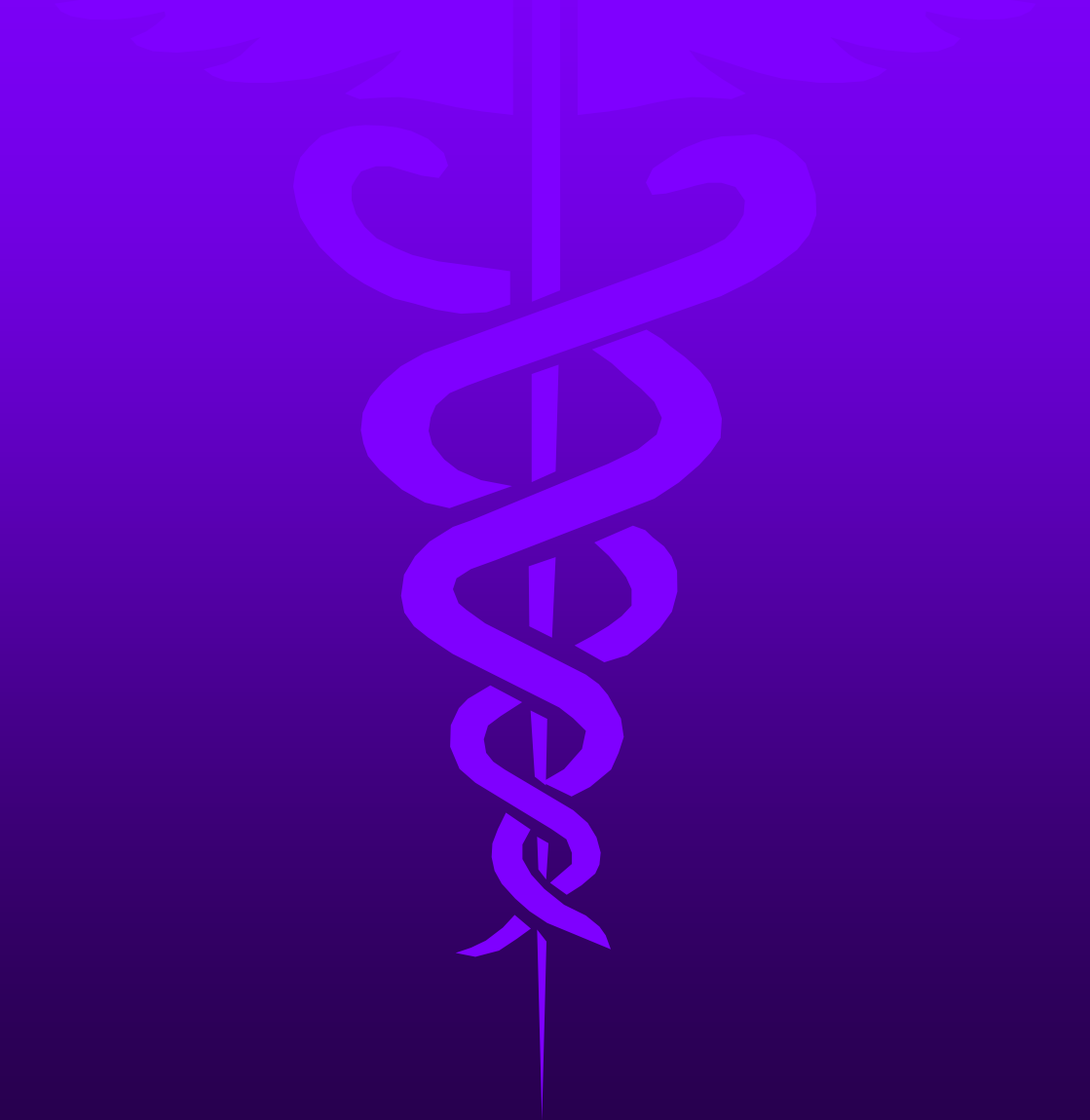
Wish List

- Direct VA sponsorship of GME program = VA Policy not law
- Innovation – Blue Ribbon Panel

VACAA

- RFP this Spring – Plan now
 - Affiliation agreements
 - Anticipate VISN involvement
- Ambulatory VA, CHC, Community Hospital partnerships

Center of Excellence



VA Links

- AACOM conference call 3/17/2015
 - http://www.aacom.org/docs/default-source/va-gme/031715_VA-GME-briefing.pdf?sfvrsn=4
- Blue Ribbon Panel Report 2006
 - <http://www.va.gov/oaa/archive/BRP-final-report.pdf>
- AACOM Resources
 - <http://www.aacom.org/reports-programs-initiatives/initiatives/va-gme>

Resources (cont.)

- Response to National Advisory Committee
 - http://www.va.gov/oaa/NAAC/Cohenletter_20120621.pdf



Questions

(Please speak loudly)