Commission on Care Briefing

Women's Health Services (WHS)

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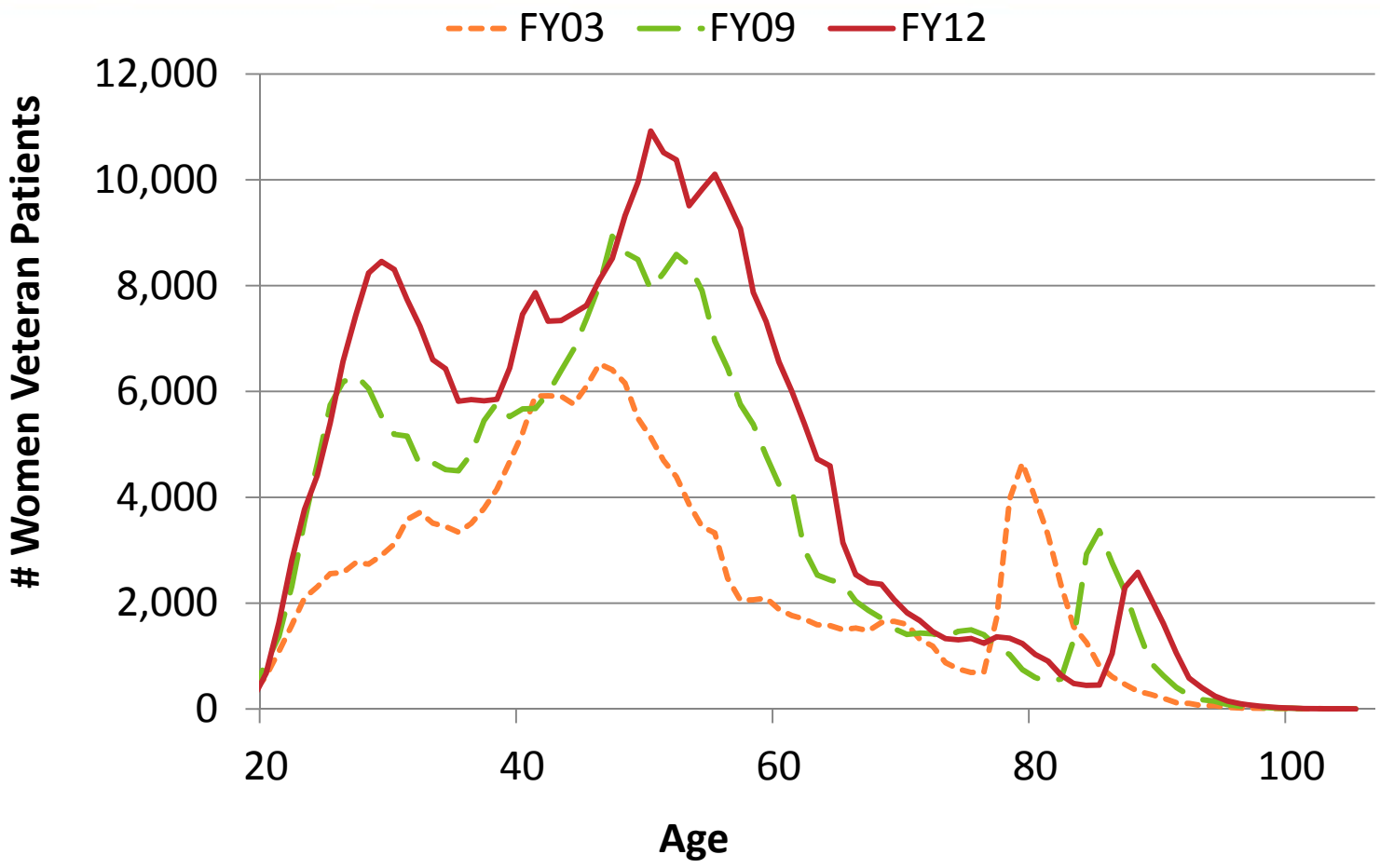
WOMEN VETERANS HEALTH CARE

VA HEALTH CARE Defining EXCELLENCE in the 21st Century

Women Veterans
History and Demographics

Source: America's Women Veterans, National Center for Veterans Analysis and Statistics, Nov. 2n Veterans: Military Service History and VA Benefits Utilization Statistics, Department of 3, 2011; http://www.va.gov/VETDATA/docs/SpecialReports/Final_Womens_Report_3_2_12_v_7.pdf

Age distribution of women Veteran patients Fiscal Years (FY) 2003, 2009 and 2012



Ideal: Women Veterans Experience of VA

- High-quality, equitable care on par with that of men
- Care delivered in a safe and healing environment
- Seamless coordination of services
- Recognition as Veterans

Women Veteran Enrollment[1]

- **663,647 unique women Veterans were enrolled in the Veterans Health Administration (VHA) in FY14**
- Age of women Veterans enrolled in VHA in FY14

Age Range	Number of Unique Women Veterans Enrolled in VHA[2]
Under 29 years old	68,094
30-44 years old	221,407
45-64 years old	289,031
65-84 years old	64,067
Over 88 years old	21,063

[1]Per VSSC WATCH Briefing Book on 3/25/2015 with priority 99 (Unknown) excluded when applicable
http://vssc.med.va.gov/products.asp?PgmArea=24
[2]Total does not equal 663,647 due to unknowns in the Current Enrollment Cube

VHA Utilization by Women Veterans[3]

- **417,316 unique women Veterans received care from the VHA in FY14**
- Of those women, 83,542 were from the Operation Iraqi Freedom/Operation Enduring Freedom/Operation New Dawn (OIF/OEF/OND) cohort
- Age of women Veterans receiving care from the VHA in FY14:

Age Range	Number of Unique Women Veterans Receiving Care from VHA[4]
Under 29 years old	43,198
30-44 years old	126,222
45-64 years old	194,435
65-84 years old	42,299
Over 85 years old	10,909

[3]Per VSSC WATCH Briefing Book on 3/25/2015 with priority 99 (Unknown) excluded when applicable
http://vssc.med.va.gov/products.asp?PgmArea=24
[4]Total does not equal 663,647 due to unknowns in the Uniques Cube

Delivery of Comprehensive Primary Care

- Complete primary care from one designated women's health provider (DWHP) at one site, including CBOCs
  - Care for acute and chronic illness
  - Gender-specific primary care
  - Preventive services
  - Mental Health services
  - Coordination of care
  - Measured with women's health primary care evaluation tools and evaluated by site visits

Women's Health Comprehensive Primary Care Clinic Models

- Model 1 - General Primary Care Clinics. Comprehensive primary care for the women Veteran is delivered by a DWHP. Women Veterans are seen within a general gender-neutral Primary Care clinic. Mental health services for women should be co-located in the Clinic. Referral to specialty gynecology service must be available either on-site or through fee-basis, contractual or sharing agreements, or referral to other VA facilities within a reasonable traveling distance.

- Model 2- Separate but Shared Space. Comprehensive primary care services for women Veterans are offered by DWHP in a separate but shared space that may be located within or adjacent to Primary Care clinic areas. Gynecological care and mental health services should be co-located in this space and readily available.

- Model 3- Women's Health Center (WHC). VHA facilities with larger women Veterans populations are encouraged to create Women's Health Centers (WHC) that provide the highest level of coordinated, high quality comprehensive care to women Veterans.

Historical gaps in comprehensive primary care for women Veterans

- In the past, VHA found gaps in its ability to provide comprehensive primary care for women Veterans
  - Many primary care providers (PCPs) had "little or no exposure" to women patients
  - Women were often referred outside of primary care for gender-specific care

(Under Secretary Report, 2008)

Policy to create Designated Women's Health Providers

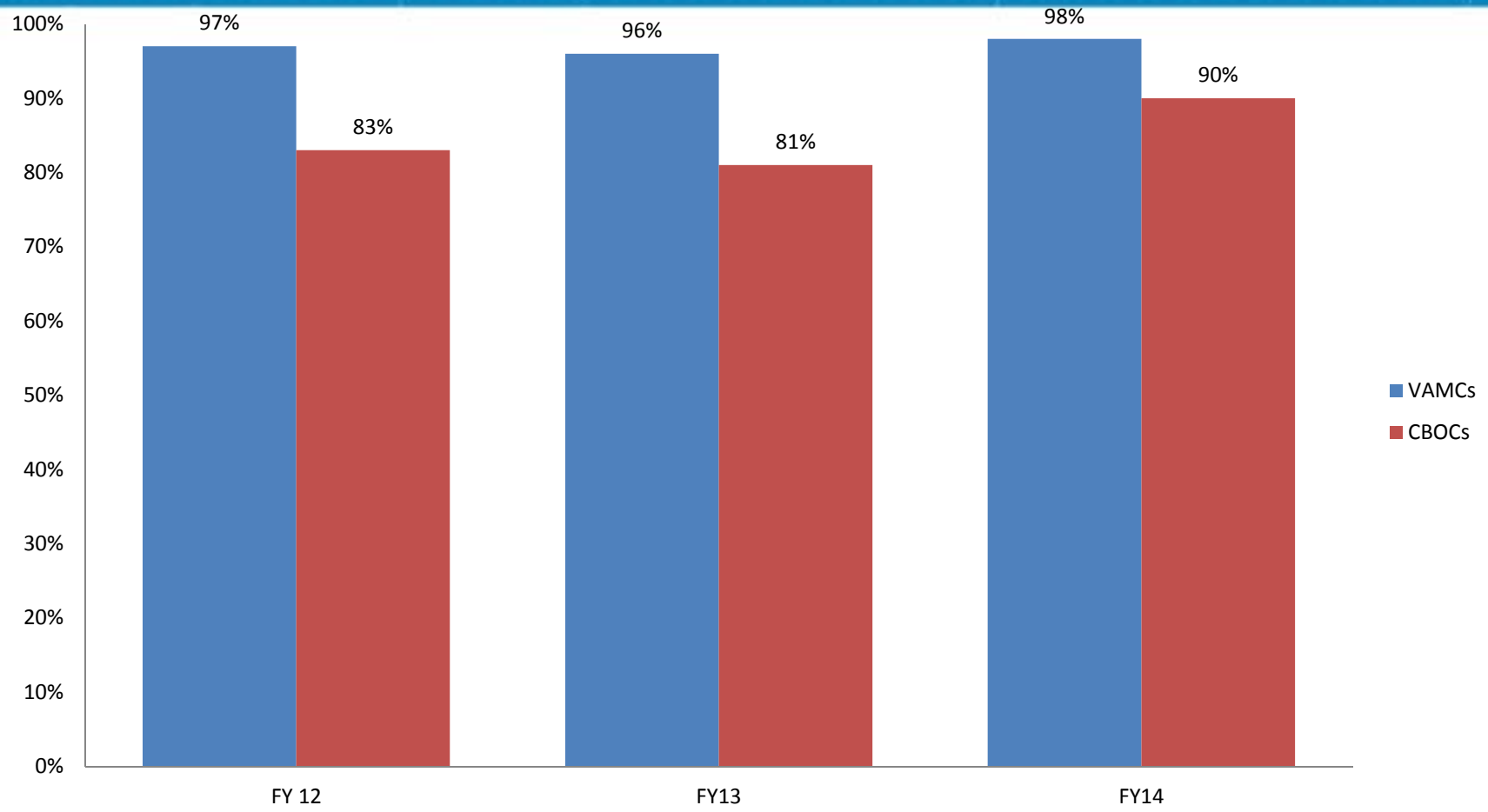
- To increase comprehensive primary care for women Veterans, VHA in 2010 established Designated Women's Health (WH) Providers (VHA Handbook 1330.01)
  http://vaww.va.gov/vhapublications/ViewPublication.asp?pub_ID=2246)

VHA Handbook 1330.01

Designated Women's Health (WH) Providers

- Primary Care Providers who are proficient in women's primary care
  - Trained via mini-residency, continuing medical education (CME), or experienced.
  - Higher volume of women (at least 10 percent) or alternative proficiency plan
- Preferentially assigned women
- Available at all sites of primary care throughout VA medical centers and CBOCs

Percent of Sites with at Least 1 Designated Women's Health Provider



Evidence for Designated Women's Health Providers

- Higher Satisfaction
- Quality of care provided
- Cost savings for reduced gynecology visits
- Sense of safety and comfort in setting

Satisfaction of Women Assigned to DWHPs

- In analysis of FY2012 data on VA women's Health providers and data from the VA Survey of Healthcare Experience of Patients (SHEP).
- Women assigned to DWHPs had higher overall experiences with care compared to women assigned to other primary care providers.
- Women assigned to DWHPs were more satisfied on 6 composite scores including access, communication, shared decision making, self-management support, comprehensiveness, and office staff.

Bastian LA, Trentalange M, Murphy TE, Brandt C, Bean-Mayberry B, Maisel N, Wright SM, Gaetano VS, Allore H, Skanderson M, Reyes-Harvey E, Yano EM, Rose D, Haskell S. Women's Health Issues 24-6(2014) 605-12

Quality of Care for Women Assigned to Designated Women's Health Providers

- Data from VA's External Peer Review Program (EPRP) were compared for women receiving care from DWHPs to those receiving care from other primary care providers.
- Women assigned to DWHPs were more likely to receive age appropriate cervical cancer screening (94.4% vs. 91.9 %) and breast cancer screening (86% vs 83.3%).
- Of note, these rates in VA substantially exceed breast and cervical cancer screening rates in other health care data sets such as Medicaid, Medicare and commercial populations.

Bean-Mayberry B, Bastian L, Trentalange M, Murphy TE, Skanderson M, Allore H, Reyes-Harvey E, Maisel N, Gaetano V, Wright S. Haskell S, Brandt C.Medical Care 53,4 (S1); April 2015.

Gynecology

- 104/140 VA Health Care Systems (HCS) have an on-site gynecologist.
- Of sites with no current gynecologist on site:
  - 50 percent (18/36) served fewer than 1,800 women Veterans
  - 81 percent (29/36) were low complexity facilities with limited or no surgery program
  - 25 percent (9) were located in non-metropolitan (rural) areas
  - 94 percent (34) of medical facilities purchased gynecology care from the community
  - 47 percent (17) referred patients to other VA facilities for gynecology care
- 16 additional VA HCS are in process of hiring.

Mammography

- Mammography can be provided in house or through Non-VA Purchased Care.
- ***53 VHA Health Care sites are now offering on site digital mammography***
- VA exceeds the private sector in mammography screening.
- 87 percent of Women Veterans age eligible women Veterans received mammography screening in 2014.
- Women's Health Services collaborated with Diagnostic Services and Non-VA Purchased Care to streamline and standardize processes for ordering and tracking and outside mammograms.

Breast & Cervical Cancer Screening

Gender-specific care to women Veterans in VHA facilities substantially exceeds that in other systems

Cervical Cancer screening

93.5%
VA average (2010-11)

Vs.

77% private sector (2010)
67% Medicaid (2010)

Breast Cancer screening

86%
VA average (2010-11)

Vs.

71% private sector (2010)
69% Medicare
51% Medicaid (2010)

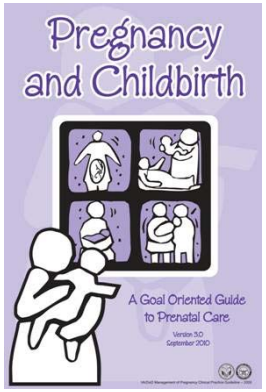
Source: VA Office of Analytics and Business Intelligence 12-19-2011

Innovations in Breast Cancer Screening and Care

- Women's Health Services has two information technology projects to improve breast cancer care.
- ***System for Mammography Results Tracking*** is a modification to the Computerized Patient Record System that enables tracking of all mammograms.
- ***The Breast Care Registry*** is a web based registry on the VA converged registry platform, that lets providers and teams run reports of mammograms done and follow-up breast cancer care.

Maternity Care

- National policies for Maternity Care Coordination
- Maternity Care Coordinators at each VA Medical Center
  - Facilitate communication between non-VA maternity care providers and VA-based health care providers.
  - Provide support and education.
  - Assist with lactation needs
  - Screen for post-partum needs



- Electronic Record alert providers to medications that may be hazardous during pregnancy

Newborn Care

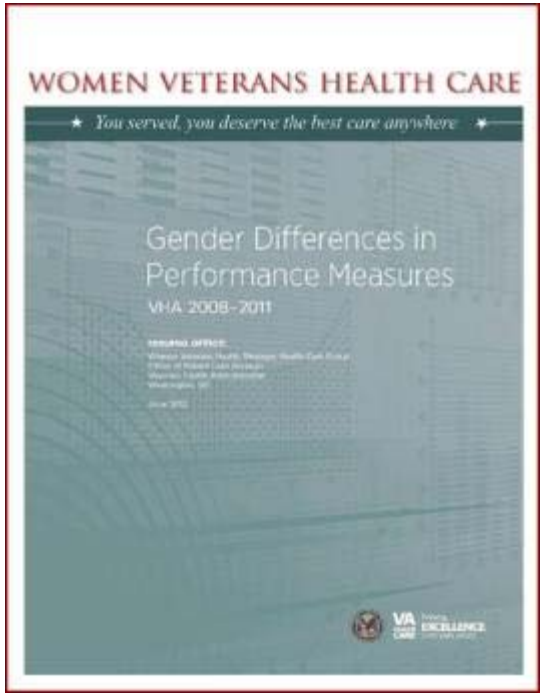
- Care provided for up to but not more than seven days after birth.
- Includes all post-delivery care services, including routine health care services that a newborn child requires.
- The Veteran (mother) must be enrolled in VA care and receiving VA maternity benefits.

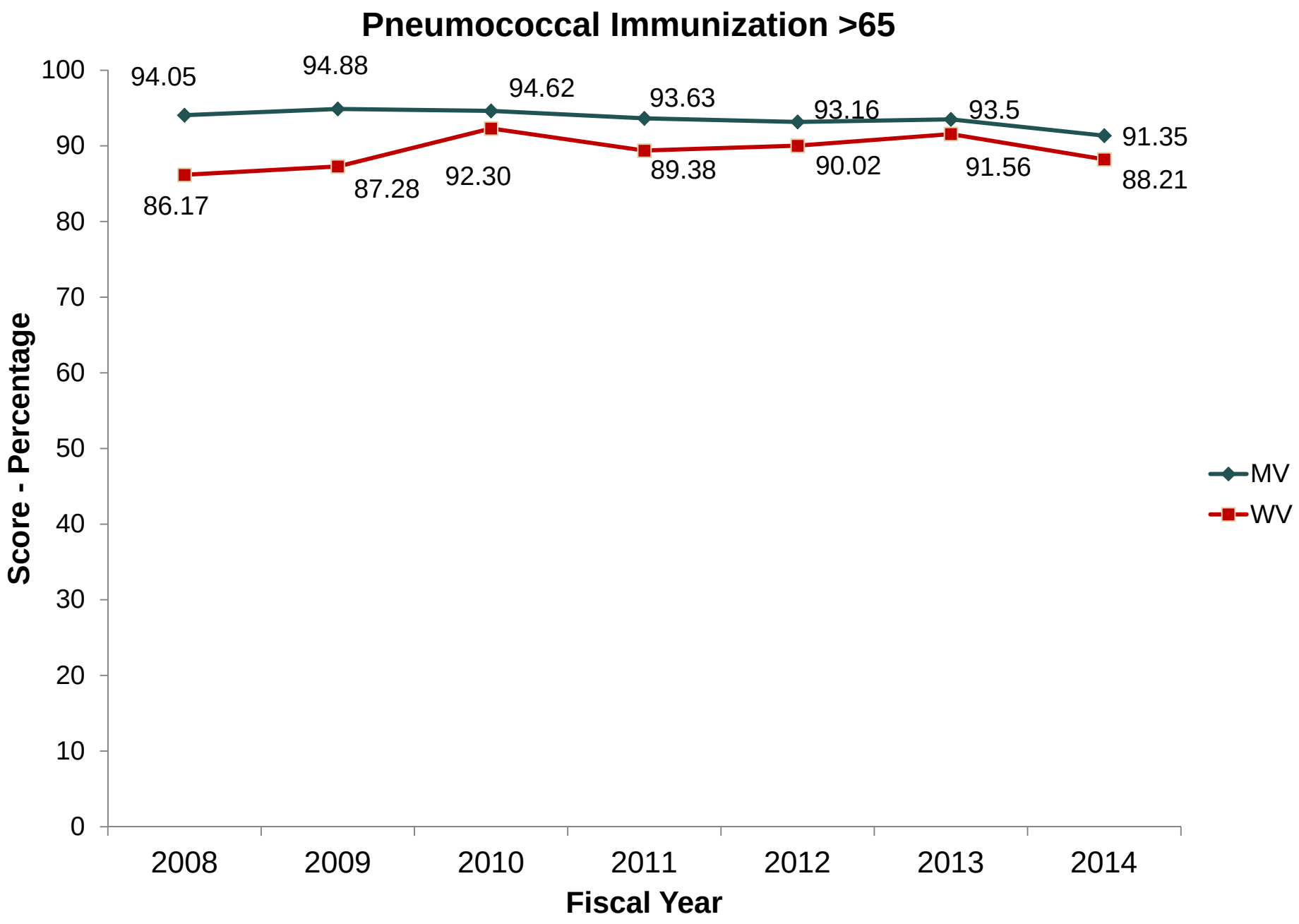
VA Infertility Treatment and Counseling Services Currently Available

Female Veterans	Male Veterans
•Laboratory blood testing •Genetic counseling and testing •Pelvic and/or transvaginal ultrasound •Hysterosalpingogram (HSG) •Saline infused Sonohysterogram •Surgical correction of structural pathology including operative laparoscopy, operative hysteroscopy and reversal of tubal ligation •Intrauterine Insemination (IUI) •Hormonal therapies	•Laboratory blood testing •Genetic counseling and testing •Semen analysis •Evaluation and treatment of erectile dysfunction (e.g., in spinal cord injury) •Surgical correction of structural pathology •Vasectomy reversal •Hormonal therapies •Sperm retrieval techniques •Post-Ejaculatory urinalysis •Transrectal and/or scrotal ultrasonography

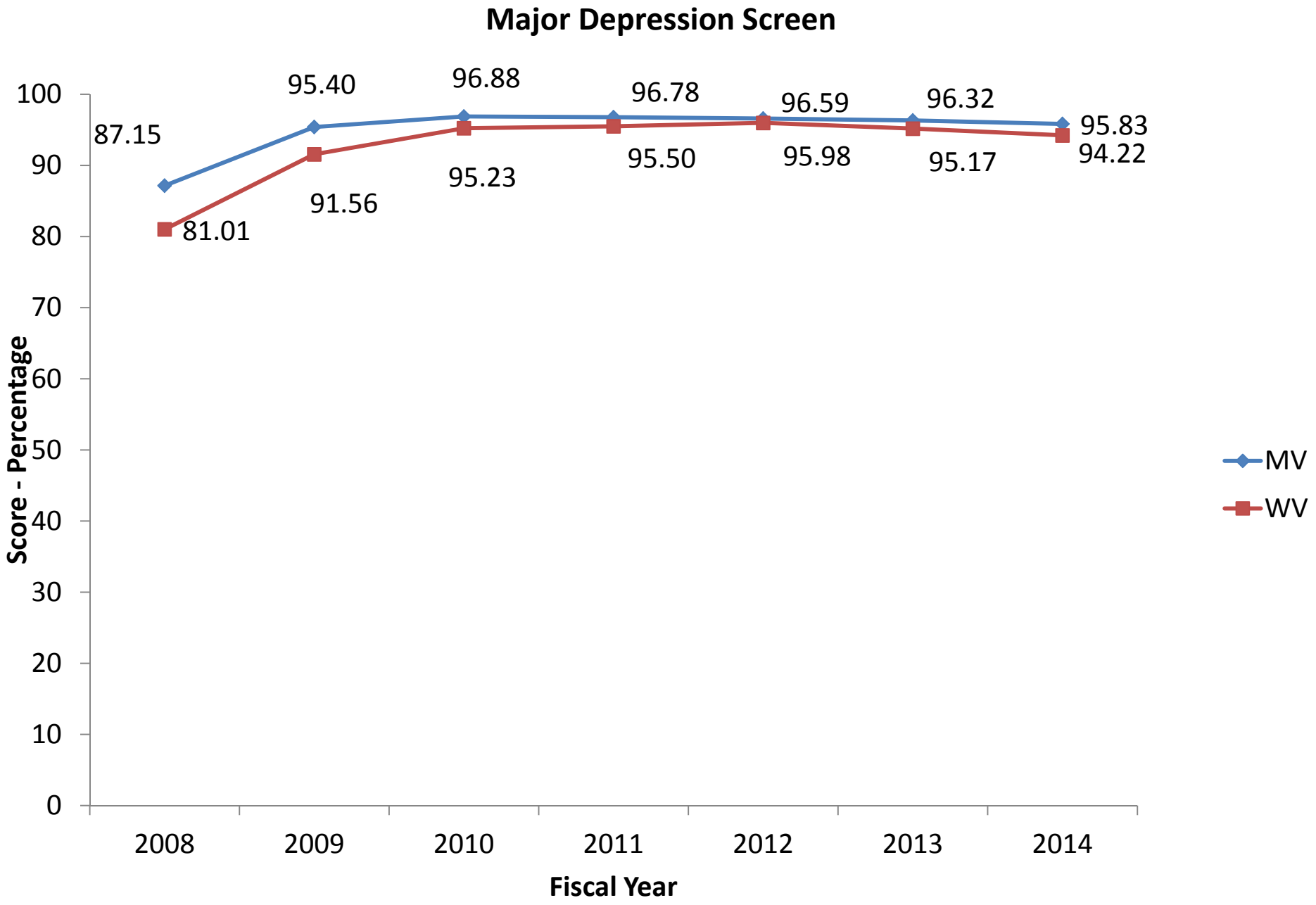
Gender Disparities Progress!

- VA has significantly reduced gender gaps and exceeds private sector on most Clinical prevention Healthcare Effectiveness Data and Information Set (HEDIS) performance measures for both men and women
- *Gender Differences in Performance Measures, VHA 2008-2011*, identifies best practices for eliminating gender gaps based on success in VA networks
  - Electronic 2015 update under development





VHA Office of Quality & Performance - Performance Management Gender Reporting FY08-FY14



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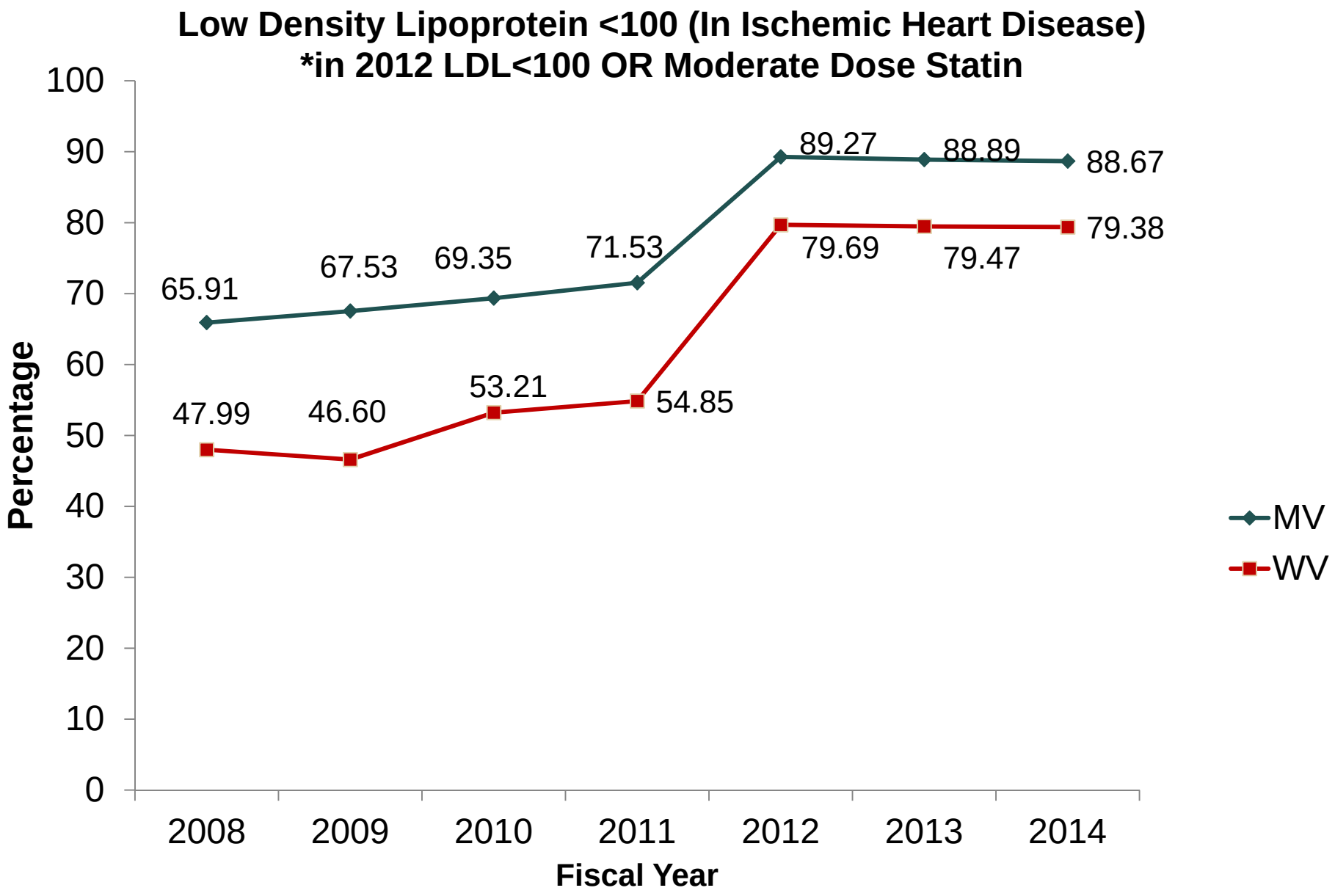


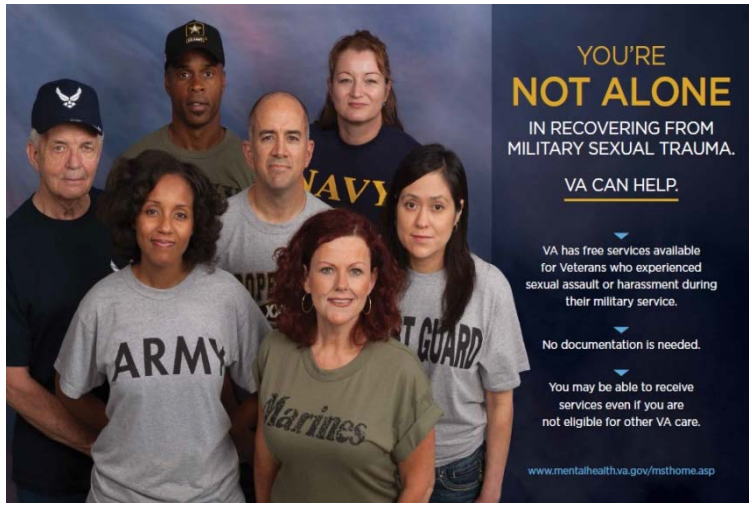
VHA Office of Quality & Performance - Performance Management Gender Reporting FY08-FY14

Women's Health Education

- Trained over 2200 VA Women's Health primary care providers in 3 day update on core concepts in Women's Health
- Delivered over 40 live training sessions in My VA ehealth University (MyVeHU) Campus (including Core Nursing Topics, Core Emergency Care Topics and Special Focus Topics) (http://myvehucampus.com/)
- Delivers monthly webinars (inter-professional)
- Over 50 accredited on-demand training sessions currently available (target audiences: providers, nurses, pharmacists, psychologists, social workers)
- Breast and pelvic exam simulation equipment delivered to all health care systems

Military Sexual Trauma (MST) Related Health Care

- VA provides all MST-related care free of charge
  - Treatment for mental and physical health conditions related to MST
  - Outpatient, inpatient, and residential care
  - Medications



- All Veterans are screened for experiences of MST
- MST Coordinator at every VA Medical Center
- Single gender programs available at some sites

Military Sexual Trauma (MST) Related Health Care: Eligibility

- Section 401 of the Veterans Access, Choice, and Accountability Act of 2014 expanded eligibility for MST-related services.
- Sexual trauma that occurred during inactive duty training (e.g. weekend drill for the National Guard and Reserves) is included in the eligibility.
- ***Sexual trauma occurring during any point in service now is considered MST.***

Vet Center
Readjustment Counseling Services

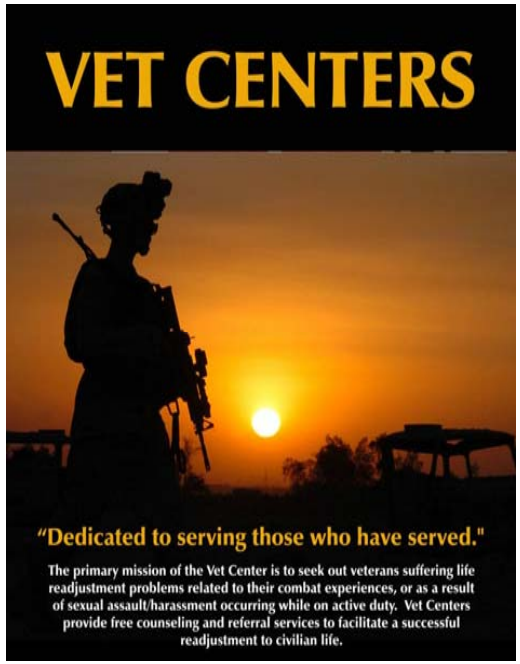
- Individual and Group Counseling for eligible Veterans and Servicemembers
  - Family Counseling for military related issues
  - Bereavement Counseling
  - Military Sexual Trauma
- Outreach and Referrals
  - Substance Abuse
  - Employment Referral
  - Other VA services

1yr extension of pilot program to provide readjustment counseling in a retreat setting to Women Veterans authorized by the Caregivers and Veterans Omnibus Health Services Act of 2010. 3 retreats planned May through November 2015.

Vet Centers: Eligibility

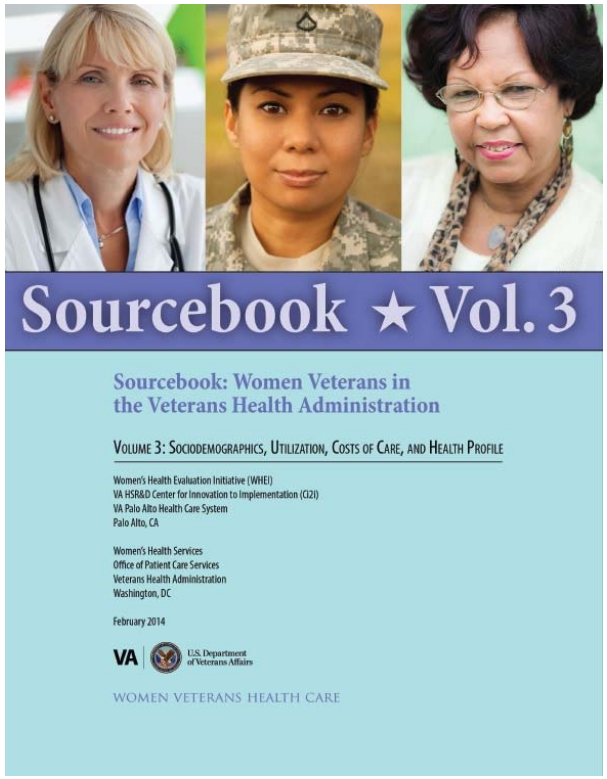
Any Veteran or active-duty Servicemember, to include federally-activated members of the National Guard and Reserve components, who:

- Has served on active military duty in any combat theater or area of hostility.
- Experienced a military sexual trauma while serving on active military duty or inactive training status.
- Provided direct emergent medical care or mortuary services, while serving on active military duty, to the casualties of war.
- Served as a member of an unmanned aerial vehicle crew that provided direct support to operations in a combat zone or area of hostility.



Women's Health Research

- VA Women's Health Practice-Based Research Network
  - 37 facilities
  - Represents 1 in 3 women Veterans
- Sourcebook Volume 3
  - Available at http://www.womenshealth.va.gov
  - Sociodemographics, Utilization, Cost of Care, Health Profiles



Advocating Cultural Transformation

Women's Health Services is leading a VA-wide communication initiative to enhance the **language**, **practice** and **culture** of VA to be **more inclusive of women Veterans.**

Women Veterans Call Center

- Call Center created to increase women's knowledge of VA benefits and services, increase enrollment, and increase utilization of health care services
- Outbound outreach Call Center moved to Canandaigua VAMC in 2012 and inbound Call Center launched April 2013
- Staffed by trained operators to provide information on VA's benefits and services
- Hours of operation M-F 8:00AM- 10:00PM, Saturday 8:00AM- 6:30PM
- Staff makes referrals to Women Veteran Program Managers (WVPM), Health Eligibility Center, Veterans Benefits Administration and suicide and homeless crisis lines as needed
- Referrals to WVPMs followed up within 5 days, Call center conducts 30-day follow-ups to Veterans
- Over 80,000 calls completed. Capacity has increased to project 80,000 calls per year.
- New logo and information

Women Veterans Call Center