



Caring for Rural Veterans

National Rural Health Day

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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.

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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.



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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
 - Hyperlipidemia
 - PTSD
 - Depressive Disorder

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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



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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.



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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



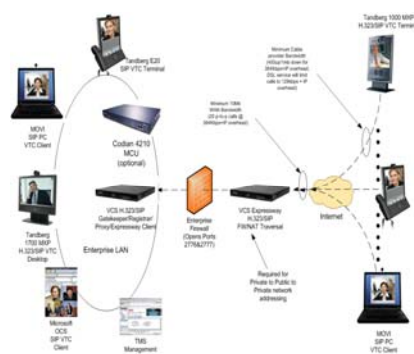
- Since 2009, ORH has expended just over \$750 million to increase access to and quality of health care for rural/highly rural Veterans.
- Major initiatives have been in the areas of:
 - Telehealth and Health Information Technology
 - Mental Health and Homelessness
 - Establishment of rural Community-Based 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)

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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.



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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.

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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.



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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.

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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



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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



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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.

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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.
- Learn more about Project ARCH at <http://www.ruralhealth.va.gov/arch/index.asp>



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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>

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