

VA U.S. Department of Veterans Affairs
Cincinnati VA Medical Center
Better Care. Every Day.

VHA GEC PROGRAMS

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VA | U.S. Department of Veterans Affairs

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The Department of Veterans Affairs

"To care for him who shall have borne the battle and for his widow and his orphan..." – by serving and honoring the men and women who are America's Veterans. Abraham Lincoln

Benefits

Veterans Benefits Administration
Administers variety of benefits and services that provide financial and other forms of assistance to Veterans, their dependents and survivors.

- Compensation
 - Service-Connected Disability
 - VA Pensions
- Education
- Insurance
- Loan Guaranty
- Vocational Rehabilitation
- benefits.va.gov

Health Care

Veterans Healthcare Administration
Nation's largest integrated health care system with more than 1,700 hospitals, clinics, community living centers, readjustment counseling centers, and other facilities.

- Columbus VA Ambulatory Care Center (ACC)
- The Vet Center
- Dayton VA Medical Center
- Chillicothe VA Medical Center
- Cincinnati VA Medical Center
- Cleveland VA Medical Center

Burials and Memorials

VA National Cemetery Administration

- 131 national cemeteries
- Dayton National Cemetery 937-262-2115
- Ohio Western Reserve National Cemetery 330-335-3069
- Burial and memorial benefits
- cem.va.gov

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- Community-Based Outreach Clinics (CBOCs)
 - Bellevue CBOC
 - Clermont CBOC
 - Hamilton CBOC
 - Florence CBOC
 - Dearborn CBOC
 - Georgetown Clinic
 - HPACT
- Home-Based Primary Care (HBPC)

Veterans must see a Provider *at minimum* every 24 months to remain vested and eligible for care

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VHA Commonly Utilized Geriatric and Extended Care Services

- Hospice
- Contract Nursing Homes & Community Care Nursing Homes
- Adult Day Healthcare
- Veteran Directed Care (New)
- HHA/HMK & Respite
- Community Living Center
- Home Based Primary Care
- Medical Foster Home



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Hospice

Where can a Veteran receive hospice level of care?

- Home
- Inpatient Unit
- Contract Nursing Home
- Community Living Center

How is hospice covered?
Veteran's private insurance source
VA Community Care Authorization-Home, IPU, or Contract Nursing Home.

- Utilized when Veterans are without a private payer source
- Veteran is administratively eligible for contract nursing home care and clinical needs align with long-term & hospice care.
- Community Living Center- No administrative eligibility requirements or copays.
 - *Prognosis of 6 months and meeting long-term care criteria or short-term symptom management
 - *Referrals must be evaluated by the CVAMCHPC Team before the CLC can consider admission.
 - *Unable to provide IV medication for symptom management



Caitlyn Schaffer-Hospice and Palliative Care Coordinator 513-861-3100 Ext. 204297
Contract Nursing Home Team 513-861-3100 Ext. 205189
Bobbie Wheeler-Butler-Community Living Center Referrals 513-861-3100 Ext. 204408

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Contract Nursing Home (CNH) & Community Nursing Home Placement (CCN)

CNH & CCN are EXEMPT from Copays

- Administrative Eligibility:
 - * Veterans must have a service-related disability rating or service connection to be eligible for the VA Community Nursing Home Program. Specifically:
 - * A Veteran in need of nursing home care for a service-connected (SC) disability.
 - * A Veteran in need of nursing home care who has a single or combined SC disability rating of 70% or greater.
 - * A Veteran with a single disability rated 60% and is categorized as unemployable.
- Clinical Criteria:
 - Veterans must meet nursing home level of care as determined by the VA clinical review. The clinical review will also determine what program the nursing home care will be authorized under VA CNH or VA Optum.

CNH
*Provides coverage for skilled placement, hospice, and long-term care in VA-approved CNH facilities.
*Non-mandatory eligibility for hospice care

CCN VA OPTUM
*Limited to skilled rehab only, does not include skilled nursing services (i.e. wound care or intravenous antibiotics) as stand-alone services.
*No long-term care or hospice
*Limited to 100 days per calendar year

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Community Living Center (CLC)

- CLC offers skilled/rehab, hospice, respite & long-term care options.

Short-term rehab (16 BED):
* No administrative eligibility
* PT/OT/ST evals indicate short-term rehab is appropriate.
* Provider, RN, and SW assessments indicate a need for short-term rehab.

Short-term Skilled Nursing Care
* Must have specific conditions and/or interventions that require the involvement of RN and/or LPN daily (e.g. IV therapy, complex wound care, tube feeding, stage 3 or 4 pressure sores etc).

Long-term (38 BED):
* Must be 60% SC & unemployable or 70% or higher SC or
* Long-term care for their service-connected disability.

Respite (2 BED):
* Will be considered on a case-by-case basis based on availability and must meet long-term care guidelines.
* Veterans meeting criteria have 30 days of inpatient respite care at a VA CLC a calendar year.
* 7 days is the minimum length of stay.

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Adult Day Health Care (CADHC)

- CADHC services are rendered in state-certified outpatient facilities and these centers serve weight-bearing older adults who have physical disability and/or cognitive impairment. Their goals are to support aging in place, enhance self-esteem, ensure safety, and support caregivers.
- Services are provided by contracted community agencies/ facilities. We currently hold 8 contracts for community CADHC.
- Facilities offer clients transportation, meals including modified diets, assistance with ADLs including showers, and nursing services like meds, blood sugars, and dressing changes.
- Services are available to Veterans enrolled in the VA. This service is ordered by a VA provider for eligible Veterans. Please contact VA PCP for CADHC consultation.
- VA authorizes 1-5 days/week for CADHC attendance based on clinical need.

Clinical indicators for CADHC:
The Veteran has been determined to meet the requirements for nursing home level of care as demonstrated by one or more of the following:
*The Veteran needs assistance in two or more ADL dependencies.
*The Veteran has significant cognitive impairment as evidenced by a deficit in executive decision-making or memory.
* The Veteran needs Personal Care Services (PCS) as adjunct care to community hospice services.
* The Veteran does not strictly meet the criteria outlined above but is determined by the Veteran's clinical care team to need these services and the clinical justification is documented in the electronic health record.

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Unskilled Home Care (HHA/HMK) & In Home Respite

No administrative eligibility or copays associated with HHA/HMK

Clinical Criteria

- Veteran needs assistance in two or more ADL dependencies.
- The Veteran has significant cognitive impairment as evidenced by a deficit in executive decision-making or memory.
- The Veteran needs PCS as adjunct care to community hospice services.
- The Veteran does not strictly meet the criteria outlined above but is determined by the Veteran's clinical care team to need these services and the clinical justification is documented in the electronic health record.

Case Mix Levels	First Range of Hours/ Week	Second Range of Hours/ Week
L	3-6	12-20
A, B, C	7-9	20-30
D, E, F	10-11	30-36
G, H, I	11-13	36-44
J, K	14-16	44-58

Requirements

- Case Mix Tool must be completed-Determines dependency level
- Requires a consult be placed by PCP
- 180 Day Reviews completed and updated authorizations
- Services are provided through community HHC agencies within the Optum network

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Decision Tree

Clinical Markers for Use of 2nd Range of Hours

- Imminent need for placement (3-4 months)
- Caregiver burden
- Frequent hospitalizations/ ER Visits
- Decreasing hygiene
- Frequent falls or injuries
- Weight Loss
- Isolation
- Involvement of APS

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graph TD
    Q1[Does the VA have financial responsibility for Veteran's nursing home care?] -- YES --> Q2[Can Veteran's care needs be met with 1st range of hours?]
    Q1 -- NO --> R1[1st Range]
    Q2 -- YES --> R2[1st Range]
    Q2 -- NO --> R3[2nd Range]
    R1 --> R4[2nd Range]
    
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Home Based Primary Care (HBPC)

The following considerations must be used to determine Veteran appropriateness for HBPC Program admission:

- The Veteran must be enrolled in the VA health care system.
- The Veteran must live within an HBPC Program service area designated by each VA medical facility (50 Mile Radius)
- The Veteran has advanced age or serious chronic, disabling conditions (medical, social, or behavioral) that would be amenable to HBPC PACT intervention, and it is determined that the Veteran's primary care needs can be met by the HBPC Program without compromising the Veteran's goals of care. The Veteran or surrogate voluntarily permits the HBPC Program to provide or support coordinated interdisciplinary primary care.
- The Veteran's home environment must be determined adequately safe and an appropriate venue for care as determined by HBPC Program leadership with team collaboration.
- The Veteran must be included in one of the populations targeted by HBPC Programs outlined in paragraph 7 in the body of this directive.

NOTE: The Veteran is not required to be homebound.

This program is quite comprehensive and can be several visits. Veteran must accept at minimum annual visits from all disciplines.

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Medical Foster Home

The Medical Foster Home Program provides care to medically fragile Veterans who are not able to live independently. The Veterans live in the home of a Caregiver in the community. The Medical Foster Home program is an alternative setting to a nursing home. Veterans pay a monthly stipend to the Caregiver for their living expenses.

Caregivers provide 24-hour care within their home.
 Caregivers must be at least 21 years old, financially stable, and have some type of patient care experience.
 Caregivers complete an application, series of home assessments/inspections, and must gain background clearance.

***Upon approval Veteran will be matched with a caregiver and their home.**

Veteran Directed Care

Veteran is responsible for directing his/her own personal care services including:

- What services are needed
- When services will be provided
- Where services will be provided
- Who will provide services

Eligible Veterans are approved a flexible annual budget that can be used to purchase personal care assistance and specific goods/ services that help Veterans avoid nursing facility placement.

Veteran Responsibility

Hiring their own personal care aides

Purchasing needed items and services within the VA approved spending plan.

Following all program guidelines

Recruiting, interviewing, training, supervision, review/approve timesheets, determine employee wages, and evaluating their own support workers (Family/Friends)

No funds are paid directly to the Veteran.



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Veteran Directed Care

Who is eligible for VDC?

- Veterans who have complex, chronic medical needs.
- Veterans who require long-term assistance with activities of daily living/personal care.
- Active with Cincinnati VAMC and has a Primary Care Provider, who has seen Veteran within the last year.
- Clinical criteria must be met, including clinical criteria.
- Veterans interested in directing their own care.

The Veteran or Veteran's Authorized Representative partners with the Area Agency on Aging (AAA) District 7 or COA to determine what services will be purchased with the annual budget provided by the VA.



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Thank you!!!!
Q&A



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