Alaska Primary Care Association Board of Directors

RESOLUTION 2009-10

Veteran Access to Health Care (State and Federal)

WHEREAS the mission of the Alaska Primary Care Association is to improve access to primary care for all Alaskans by supporting Community Health Centers (CHCs) and safety net providers throughout the state; and

WHEREAS CHCs provide comprehensive primary care services to medically underserved areas and populations including but not limited to uninsured and underinsured individuals, low income families, Veterans, seniors, seasonal workers, non-English speaking individuals; and

WHEREAS a National Rural Health Association (NRHA) Written Testimony by Andy Behrman, NRHA Rural Health Policy Board Chair, prepared for the Health Subcommittee of the House Committee on Veteran's Affairs, asserts, "The disproportionate number of rural Americans serving in the military has created a disproportionate need for veteran's care in rural areas and yet rural areas are less likely to have VA services available to them;" and

WHEREAS the above mentioned written testimony states that "time and distance prevent many rural veterans from getting their healthcare benefits through a VHA facility" and that approaches, including CHCs, are "readily available in the VA system and in the rural health landscape that could improve this situation;" and

WHEREAS the written testimony also stresses the problem that "Federally Qualified Community Health Centers (CHCs) serve millions of rural Americans, but most veterans cannot use their VA health benefits to receive care at these CHCs" because a "national policy advocating VHA-CHC collaboration has not emerged in an effective way;" and

WHEREAS the NRHA written testimony emphasizes that a "limited number of collaborations between the VHA and CHCs already exist and have proven to be prudent and cost-effective solutions to serving eligible veterans in remote areas" and that this "model of collaboration between VHA and CHCs might do well in other rural states and with other rural providers and systems of care and should be implemented further;" and

WHEREAS a report written by David R. Selig, Chief Executive Officer of the Community Care Network of Virginia, provides a concrete proposal of collaboration between CHCs and the VA by suggesting that CHCs "serve as a vehicle for increasing access to primary care for Veterans" and

presents a model where CHCs "function as a Community Based Outpatient Clinics (CBOCs) as defined by the Department of Veterans Affairs;" and

WHEREAS the proposed model mentioned above would help provide access by enhancing CHCs ability to serve Alaska's Veterans in rural communities and the written proposal provides the following rationales for CHCs functioning as CBOCs:

- The goal of the CBOC program to increase access to primary care for its Veterans is consistent with the mission of community health centers and the President's Initiative.
- Community health centers offer the wide range of services that meet or exceed VA's requirements for CBOCs [Community Based Outpatient Clinics] including primary care, laboratory, radiology, mental health, and women's services;"⁶
- Veteran patient population health demographics are consistent with the patient health demographics of community health center patients and the program's efforts to further develop disease collaboratives.
- Community health centers are well suited to meet the CBOC Performance Measures, as established by the VA, in the areas of JCAHO accreditation, travel distance, mental health, patient satisfaction, ect.
- There is a growing community health center commitment to health information technology, high speed internet connectivity, and an electronic health record which is consistent with the Veterans Administration's Commitment to the Computerized Patient Record Systems (CPRS).
- Community health centers are organized in BPHC funded networks that can provide the infrastructure and expertise in information technology, contracting and care management;⁷

WHEREAS CHCs are an existing infrastructure within Alaska and should be utilized to their full potential in providing access to cost-effective, quality care for Alaska's Veterans whether through a CBOC arrangement, a network arrangement, or individual arrangements with individual CHCs; and

WHEREAS the Secretary of Veteran Affairs CARES Decision states, "Medical care is a key component of the benefits and services enacted by Congress in recognition of the service, and sometimes the sacrifice, of the men and women whose military service preserved and protected America's freedoms."

THEREFORE BE IT RESOLVED that the Alaska Primary Care Association supports federal and state legislative and other efforts to assure Veterans across the state have access to quality health care, including in outlying areas where there are no VA-run clinics.

SUBMITTED BY:

Regan Mattingly, State Affairs Coordinator Shelley S. Hughes, Government Affairs Director Marilyn Kasmar, Executive Director

DONE AND DATED THE 21st DAY OF January IN THE YEAR 2009

SIGNED BY

Sonia Handforth-Kome, APCA Board President

¹ National Rural Health Association. Written Testimony, Andy Behrman. Prepared for the Health Subcommittee of the House Committee on Veterans' Affairs Oversight Hearing on "Access to VA Health Care: How Easy is it for Veterans? Addressing the Gaps," April 18, 2007. ² Ibid.

³ Ibid.

⁴ Ibid.

⁵ Selig, David R. Utilizing Community Health Centers As a Vehicle for Increasing Access to Primary Care for Veterans Through the Rapid Activation of Community Based Outpatient Clinics (CBOCs). May 2007. 6 Ibid.

⁷ Ibid.

⁸ Department of Veterans Affairs, Secretary of Veterans CARES Decision, Office of the Secretary, May 2004.