

Quarterly Board Meeting

Swinomish Casino Resort

April 16, 2019







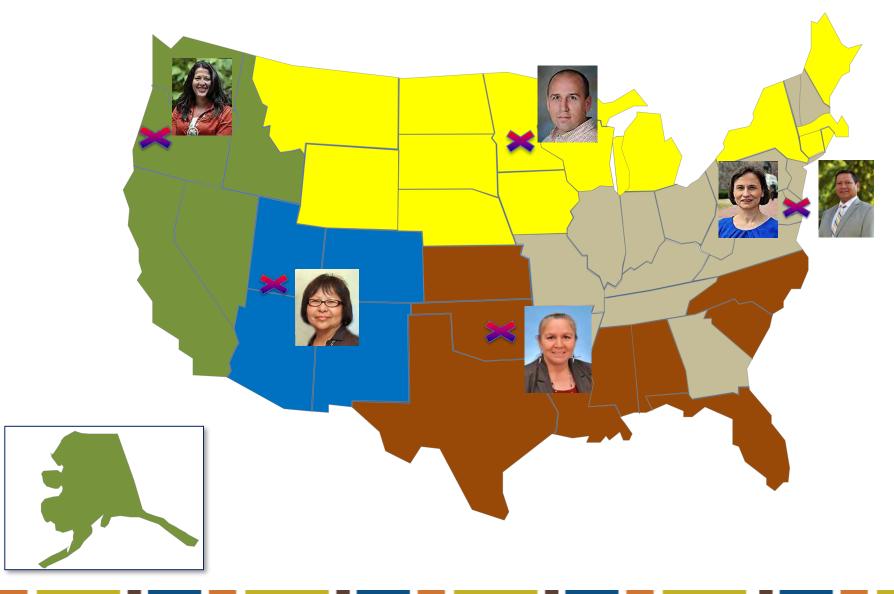












Our Administrations



(VBA)





Administration

(NCA)



Where are VA facilities?

- United States
- Puerto Rico
- American Samoa
- Guam
- U.S. Virgin Islands
- Philippines







VA Secretary's Five Priorities -VA's Strategic Framework

Greater Choice

- Redesign the 40/30 Rule
- Build a High Performing Integrated Network of Care
- Empower Veterans Through Transparency of Information

- Modernize Systems
- Infrastructure Improvements and Streamlining
- EMR Interoperability and IT Modernization

Focus Resources

- Strengthening Foundational Services in VA
- VA/DoD/Community Coordination
- Deliver on Accountability and Effective Management Practices

Improve Timeliness

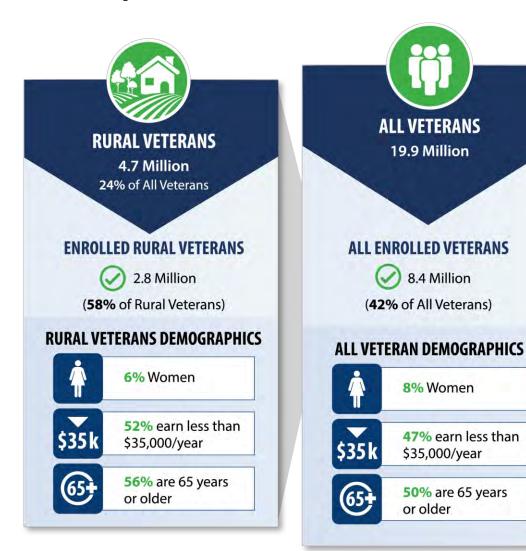
- Access to Care and Wait Times
- Decisions on Appeals
- Performance on Disability Claims

Suicide Prevention

Getting to Zero



snapshot of rural & urban veterans





Data are FY 2017 VA Internal Data Sources, US Census Bureau and VHA Survey of Enrollees



RURALITY	Enrollees	%						
Total	207,278		V	Vac	e h	in	atai	
Urban	149,699	72%	V	Vas			gtoi	
Rural	56,915	27%						
Highly Rural	1,668	1%	HCS*	VHA		Charac	teristics Vet Centers	Counties
Rural	55,247	27%	4	9	5	0	9	39
			DEMOGRAP	HICS				
GENDER	Enrollees	%		RACE			Enrollees	%
Male	186,786	90%	Native Amer	ican/Alas	kan Nati	ve	2,274	1%
Female	20,492	10%	Asian				4,470	2%
Unknown Sex	0	0%	Black/Africa	n-America	an		13,541	7%
AGE	Enrollees	%	Hawaiian/Pa	cific Islan	ider		2,835	1%
Under 25	1,229	1%	White				141,551	68%
25 to 49	64,458	31%	Multiple				2,882	1%
50 to 64	51,478	25%	Unknown 33,7		33,769	16%		
65 and older	90,113	43%	Declined to Answer 5,956 39		3%			
Unknown Age	0	0%						

^{*} Number of Health Care Systems (HCS) that have counties in this catchment area that are part of this territory

Data Source End of FY 2018/Start of FY 2019 Current Enrollment with status of verified



RURALITY	Enrollees	%		
Total	132,392			
Urban	69,584	53%	Oregor	
Rural	62,500	47%		
Highly Rural	1,512	1%	VHA Territory Characterist	ics
			HCS* CBOCs VAMC HCC Vet	Centers Counties
Rural	60,988	46%	4 18 3 1	5 36
			DEMOGRAPHICS	
GENDER	Enrollees	%	RACE En	rollees %
Male	122,197	92%	Native American/Alaskan Native	1,511 1%
Female	10,195	8%	Asian	901 1%
Unknown Sex	0	0%	Black/African-American 2	2,403 2%
AGE	Enrollees	%	Hawaiian/Pacific Islander	669 1%
Under 25	665	1%	White 10	1,504 77%
25 to 49	33,336	25%	Multiple 1	l,478 1%
50 to 64	27,876	21%	Unknown 1	7,399 13%
65 and older	70,515	53%	Declined to Answer	5,527 5%
Unknown Age	0	0%		



RURALITY	Enrollees	%		
Total	31,873			
Urban	14,987	47%	Alaska	
Rural	16,795	53%		
Highly Rural	2,576	8%	VHA Territory Characteristics HCS* CBOCs VAMC HCC Vet Centers Co	unties
Rural	14,219	45%	1 5 1 0 4	29
			DEMOGRAPHICS	
GENDER	Enrollees	%	RACE Enrollees	%
Male	28,123	88%	Native American/Alaskan Native 1,569	5%
Female	3,750	12%	Asian 515	2%
Unknown Sex	0	0%	Black/African-American 1,994	6%
AGE	Enrollees	%	Hawaiian/Pacific Islander 387	1%
Under 25	212	1%	White 21,277	67%
25 to 49	11,385	36%	Multiple 620	2%
50 to 64	9,664	30%	Unknown 4,639	15%
65 and older	10,612	33%	Declined to Answer 872	3%
Unknown Age	0	0%		



RURALITY	Enrollees	%				
Total	58,283		Idaha			
Urban	31,795	55%	Idaho			
Rural	26,366	45%				
Highly Rural	1,681	3%	VHA Territory Characteristics HCS* CBOCs VAMC HCC Vet Centers Counties			
Rural	24,685	42%	4 10 1 0 2 44			
DEMOGRAPHICS						
GENDER	Enrollees	%	RACE Enrollees %			
Male	53,855	92%	Native American/Alaskan Native 613 1%			
Female	4,428	8%	Asian 237 0%			
Unknown Sex	0	0%	Black/African-American 521 1%			
AGE	Enrollees	%	Hawaiian/Pacific Islander 230 0%			
Under 25	310	1%	White 45,095 77%			
25 to 49	15,967	27%	Multiple 303 1%			
50 to 64	12,722	22%	Unknown 8,403 14%			
65 and older	29,284	50%	Declined to Answer 2,881 5%			
Unknown Age	0	0%				
* Number of Health Care	e Systems (HCS) t	hat have cou	ounties in this catchment area that are part of this territory			
Data Source End of FY 2018/Start of FY 2019 Current Enrollment with status of verified						



2019 Dear Tribal Leader Letters Forthcoming

- Section 106B of the MISSION Act includes a requirement for consultation with tribal government stakeholders (in addition to heads of other federal agencies, states, members of Congress, veteran service organizations, private sector representatives, academics and other policy experts). VA Deputy Secretary Jim Byrne will be releasing a DTLL seeking input from tribes regarding VA care within the next 60 days (estimated)
- The VHA Office of Community Care will be releasing a DTLL seeking tribal representatives to participate in a workgroup focused on a number of issues regarding the Reimbursement Agreement program, including care coordination. The VHA Undersecretary for Community Care, Dr. Kameron Matthews will be the signatory to this letter.



FY2019 VA Leadership & Tribal Engagement

- November 2018 SECVA visit to Chickasaw Nation, Oklahoma, OK
- October 2018 SECVA site visit to Alaska Federation of Native Convention, Anchorage, AK

Access to Care

 Since FY2012 to date, VA IHS and VA THP Reimbursement Agreements provided \$92M in reimbursement for care of 10,220 VHA enrolled American Indian Veterans

Access to Medication

 In FY2018, VA Consolidated Mail Outpatient Pharmacy Program (CMOP) processed 840,109 prescriptions, 11% increase from FY2017. Since its inception in FY2010, CMOP has processed more than 3.6M prescriptions for VA-IHS patients



VA OTGR & VBA Claims Clinics

- FY2018 collaborated with 24 tribal governments to facilitate 32 claims clinic events
- Estimated 1,100 Veterans served and 730 claims submitted for VA benefits
- More are planned for FY2019 across Indian Country

Housing Assistance Tribal HUD VASH

 Tribal HUD VASH program increased tribal engagement in FY18 from 23 to 26 tribes that used the program to find homes for Veterans, as a result the program found homes for 130 American Indian Veterans

FY2019 Elders/Seniors Programs

 OTGR team to engage with tribal elders/seniors programs as part of our FY2019 performance plan



FY2019 Urban Indian Health Programs

 OTGR team to engage with Urban Indian Health Programs as part of FY2019 performance plan

2016 Tribal Consultation-Top 5 Priorities in Indian Country

 1) Access to Medical Care; 2) Addressing housing/ homelessness; 3 Treatment for PTSD and Mental Health; 4)
 Understanding benefits, including families; 5) Transportation

OTGR Publications

 Quarterly OTGR Newsletter; VA/OTGR Executive Summary Report; VA/OTGR Tribal Consultation Reports; A Guide for Tribal Justice Systems; VA Tribal Consultation Policy; VA Tribal Consultation Policy; VA Tribal Consultation Handbook; VA Report: American Indian and Alaska Native Servicemembers and Veterans





VA Tribal Veterans Advisory Committee Act of 2019

Senators Jon Tester (D-MT), Dan Sullivan (R-AK), Tom Udall (D-NM), and Lisa Murkowski (R-AK) are teaming up to improve the VA's outreach, health care and benefits for Native American Veterans. The Senators introduced the bipartisan VA Tribal Advisory Committee Act to establish a VA Advisory Committee on Tribal and Indian Affairs. The Committee will facilitate communication and understanding between the VA and Tribal governments to better address the unique barriers Native American veterans face when accessing VA services. The VA Tribal Advisory Committee Act will establish a 15-member Committee comprised of a representative from each of the 12 regions of the Indian Health Service and three at-large Native American members. At least half of the Committee members must be veterans. The Committee will facilitate communication between the VA and Tribal governments, meet face-to-face with the VA Secretary to provide guidance on Tribal and Indian Affairs, and report to Congress its recommendations for legislation to improve Native American veterans' access to VA health care and benefits.



PL 113-146, Veterans Access, Choice & Accountability Act Section 303 – VA Specialty Education Loan Repayment Program

- Establishes the Specialty Education Loan Repayment Program (SELRP) which is intended to help VA attract physicians in medical specialties that the Secretary determines are difficult to recruit for or retain personnel in.
- Participants must have outstanding loan balances that were used to pay for the education that qualified them for specialty training (i.e. tuition, books, fees, reasonable living expenses).
- VA may give preference to applicants who are Veterans or will participate in residency programs in health care facilities that are: 1) located in rural areas; 2) operated by Indian tribes, tribal organizations, or the Indian Health Service; or 3) affiliated with underserved VA health care facilities.

VA Section 303 – VA Specialty Education Loan Repayment Program

- No more than \$40,000 per year may be disbursed to awardees for a total of 4 years (\$160,000).
- Following specialty training, SELRP participants are required to serve as full-time VA clinical practice employees for 12 months for every \$40,000 in benefits received.



VA Section 403 – Pilot Program on Graduate Medical Education

- Establish physician residency positions authorized under Public Law 113-146 (i.e. the Choice Act) at the following "covered facilities" through August 7, 2024:
- 1) VA health care facilities;
- 2) Health care facilities operated by a tribal organization;
- 3) Indian Health Service (IHS) facilities;
- 4) Federally qualified health centers;
- 5) Department of Defense health care facilities;
- 6) Other health care facilities deemed appropriate by the Secretary.





VA Section 403 – Pilot Program on Graduate Medical Education

- Directs VA to consider physician specialty and geographic location shortages when determining the covered facilities where residents are placed.
- VA will determine clinical need by using the six factors identified in the statute.
- Place at least 100 residents in the following subcategories of covered facilities: 1) IHS facilities; 2) health care facilities run by an Indian tribe or tribal organization; or 3) those located in communities that VA designates as underserved using the criteria established in Section 401 of The MISSION Act.
- Allows VA to pay for the stipends and benefits of physician residents in the pilot program regardless of whether they provide care in a VA or non-VA "covered" setting.

VA Section 403 – Pilot Program on Graduate Medical Education

- If new residencies are established in the pilot VA will reimburse the institution for the following costs:
 - 1) curriculum development;
 - 2) faculty recruitment and retention;
 - 3) ACGME accreditation expenses;
 - 4) the portion of faculty salaries attributable to the pilot;
 - 5) the expenses related to educating physician residents in the pilot.
- An extensive Congressional reporting requirement is mandated for the pilot
- For detailed information contact VA Office of Academic Affiliations at http://www.va.gov/OAA/index.asp



- Working on 2018 VA Executive Summary Report regarding engagement with Indian Country which will specifically address the 2018 Nationwide Outreach Campaign in Indian Country for Veterans with Presumptive Disabilities – "Your Service, Our Mission: Bringing Benefits Home"
 - ➤ Impacting 1,100 Veterans and 730 claims for benefits
- VA OTGR continues to engage in Veteran focused events during 2019 across Indian Country: Veteran Summits, Regional or National Tribal Meetings (ATNI, NCAI, NIHB, NPIAHB, CRIHB), Tribal Veteran Trainings, Tribal Site Visits, Urban Indian Health Programs





- VA OTGR is partnering with the State Departments of Veterans Affairs in many states to conduct Tribal Veteran Representative (TVR) Trainings throughout Indian Country. Several opportunities will occur in 2019
 - April 24-25, 2019, Lincoln City, OR
- VA OTGR Newsletter are you signed up? News specific to VA in Indian Country (we're happy to share tribal announcements) – send Terry Bentley an email to sign up







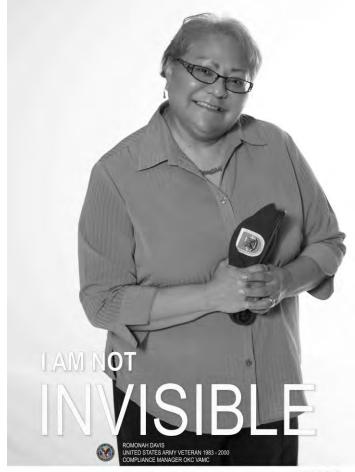


















Contact Info

Stephanie Birdwell - Director VA Office of Tribal Government Relations:

StephanieElaine.Birdwell@va.gov (202) 461-4851

Terry Bentley- Pacific District Regional Specialist VA Office of Tribal Government Relations:

<u>Terry.Bentley@va.gov</u> (541) 440-1271

Website: www.va.gov/tribalgovernment