March 25, 2019

Director, Regulation Policy and Management (00REG)
Department of Veterans Affairs
810 Vermont Avenue, Northwest, Room 1063B
Washington, DC 20420

Re: RIN 2900-AQ46 Veterans Community Care Program; submitted electronically via http://www.regulations.gov

Dear Director,

Trinity Health appreciates the opportunity to comment on the Department of Veterans Affairs' (VA) propose rule that would allow eligible veterans to receive hospital care, medical services, and extended care service from non-VA entities or providers in the community.

Trinity Health is one of the largest multi-institutional Catholic health care delivery systems in the nation, serving diverse communities that include more than 30 million people across 22 states. We are building a People-Centered Health System to put the people we serve at the center of every behavior, action and decision. This brings to life our commitment to be a compassionate, transforming and healing presence in our communities. Trinity Health includes 94 hospitals as well as 109 continuing care locations that include PACE, senior living facilities, and home care and hospice services. Our continuing care programs provide nearly 2.5 million visits annually. Committed to those who are poor and underserved, Trinity Health returns $1.1 billion to our communities annually in the form of charity care and other community benefit programs. We have 35 teaching hospitals with graduate medical education (GME) programs providing training for more than 2,000 residents and fellows in 184 specialty and subspecialty programs. We employ approximately 133,000 colleagues, including more than 7,800 employed physicians and clinicians, and have more than 15,000 physicians and advanced practice professionals committed to 23 Clinically Integrated Networks (CINs) that are accountable for approximately 1.5 million lives across the country through alternative payment models (APMs).

In addition to our commitment to value-based payment, Trinity Health is the only large health care system creating a nationwide focus on the delivery of high quality, reliable, and culturally competent care to Veterans, military service members, and their family members. As part of its innovative Military and Veterans Health (MILVET) Program, Trinity Health is training its colleagues to understand the importance of connection and communication with this unique sub-population of patients and their family members; it is familiarizing its colleagues in US military service cultures and organizational structure; it is ensuring its clinical colleagues understand the common diseases, injuries, and exposures associated with military service; it is familiarizing colleagues on the unique aspects and impacts of military service on female service members; and it is training clinical and pastoral care colleagues on the physical, emotional, spiritual, and mental impact of operational deployments on service members, Veterans and their families. Trinity Health currently has MILVET sites in Langhorne, PA; Darby, PA; Silver Spring, MD; and Germantown, MD. Over the next 12 months this will expand to our hospitals and clinics in Fresno, CA; Athens, GA; Lavonia, GA; Greensboro, GA;
Nampa/Boise, ID; Mishawaka, IN; Plymouth, IN; Philadelphia, PA; and Springfield, MA. Within 3 years, the MILVET Program expansion is planned to include Trinity Health's 94 hospitals located in 22 states. Trinity Health's overall goal is to become the preferred healthcare partner for the Veterans Health Administration and the Military Health Systems (MHS), focusing on filling the clinical care and access gaps without competing for VA or MHS patients.

As a recognized VA Choice Provider, Trinity Health appreciates that key terms defined in the proposed rule are substantively similar to those defined in the Veterans Choice Program.

Trinity Health agrees with the six conditions that will allow a Veteran to be eligible to receive care or services from an eligible entity, such as Trinity Health. Our goal is to serve as the preferred partner for regional VA Medical Centers and VISNs in filling care and access gaps for Veterans, as determined by the designated VA entity.

Trinity Health concurs with and applauds the VA’s commitment to identify underperforming medical service lines that could be the basis for eligibility to receive non-VA care. Wherever appropriate, Trinity Health looks forward to serving as the VA’s preferred partner in filling these medical service performance gaps.

Trinity Health concurs with the VA describing how non-VA care could be authorized when a covered Veteran elects to receive such care, and with eligible Veterans’ ability to identify specific entities or providers to furnish their care. Trinity Health would enjoy serving as the preferred provider of these Veteran-elected services.

Trinity Health concurs with the VA’s ability to authorize emergency care within 72 hours of such care being furnished. As a preferred and dedicated partner for the VA, we are committed to providing high quality, safe, and reliable emergency services for eligible Veterans.

Trinity Health agrees with ensuring copayments for extended care services under this new program are treated the same way as copayments for non-institutional extended care services under the Veterans Choice Program. Trinity Health has long-term care, home health, and hospice capabilities that are focused on delivering high quality care for eligible Veterans.

Trinity Health agrees that the Veterans Community Care Program should establish when a covered veteran could elect to have VA authorize an episode of care for hospital care, medical services, or extended care services with eligible entities or providers. In addition, we are supportive of the VA retaining responsibility for care coordination with eligible entities or providers.

Trinity Health concurs with the VA’s proposed definitions of “appointment,” “covered veteran,” “eligible entity or provider”, and “VA facility.” This will provide clarity for eligible entities, eligible providers, and to VA personnel.

Trinity Health concurs with the process by which the VA would identify medical service lines that were not able to furnish care or service in a manner that complied with VA’s standards for quality so that veterans who would receive care or services through such VA medical service lines could be considered eligible for the Veterans Community Care Program. Trinity Health commends the VA’s commitment to quality care and transparency demonstrated through the proposed publication of this data in the Federal Register.

Trinity Health concurs with requiring non-VA entities or providers to enter into a contract, agreement, or other arrangement to furnish care and services under the Veterans Community Care Program.
This proposed language provides both the VHA and Trinity Health the greatest flexibility for establishing a reliable care partnership without becoming a Federal Contractor.

The proposed rule would establish that the access standard would not be met if the VA cannot schedule an appointment for a covered veteran with a VA health care provider that can furnish the required care or services within 30 minutes average driving time of the veteran’s residence (or 60 minutes for specialty care), and within 20 days of the date of request (or 28 day for specialty care), unless a later date has been agreed to by the veteran in consultation with the VA provider. Trinity Health believes requiring veterans to wait 20 days for a primary care appointment or 28 days for specialty care is too long. We recommend reducing the proposed threshold for veterans to access community care from a non-VA provider to 14 days for a primary care appointment and under 20 days for specialty care. Trinity Health is committed to serving this population and will see veterans within 48 hours when possible. In addition, we intend to make our own Centers of Excellence available to eligible Veterans.

Thank you for this opportunity to provide commentary on the proposed rule, Trinity health is supportive of the VA’s effort to improve access to care for Veterans.

If you have questions on our comments, please feel free to contact me at granttw@trinity-health.org or 734-343-1375.

Sincerely,

Tina Weatherwax Grant, JD
Vice President, Public Policy and Advocacy