March 1, 2019

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

Re: RIN 2900-AQ47 Urgent Care; submitted electronically via [http://www.regulations.gov](http://www.regulations.gov)

Dear Director,

Trinity Health appreciates the opportunity comment on the Department of Veterans Affairs’ (VA) propose rule that would grant eligible veterans more convenient access to urgent care from qualifying from non-VA entities or providers without prior approval from VA.

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, non-federal 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. Trinity Health is: 1) training colleagues to understand the importance of connection and communication with this unique sub-population of patients and their family members; 2) familiarizing colleagues on US military service cultures and organizational structure; 3) helping clinical colleagues understand the common diseases, injuries, and exposures associated with military service; 4) familiarizing colleagues on the unique aspects and impacts of military service on female service members; and 5) training clinical and pastoral care colleagues on the physical, emotional, spiritual, and mental impact of operational deployments on service members, Veterans and their families. Our overall goal is to become the preferred health care partner for the VA and the Military Health System (MHS), focusing on filling the clinical care and access gaps without competing for VA or MHS patients.
Trinity Health strongly concurs with the proposed rule’s definition of qualifying non-VA providers for the purposes of the regulation. Including any non-VA provider that has entered into a contract, agreement, or other arrangement with the VA to provide services allows the greatest flexibility for both the VA and for non-VA providers.

The rule also proposes to refer to this benefit as urgent care, instead of walk-in care, and include care provided at both urgent care facilities and walk-in retail health clinics. Trinity Health agrees referring to this type of care as “urgent care” is consistent with industry practice and concurs with using the Centers for Medicare and Medicaid Services description of such services. However, we recommend including additional entities that have “urgent care” capability, such as primary care clinics and emergency departments with co-located “fast track” or urgent care capabilities – these types of clinics often meet the CMS intent and guidelines for urgent care clinics, without being called urgent care clinics or walk-in retail health clinics. More important, they fill care gaps while avoiding the unnecessary expense associated with receiving care in hospital emergency departments.

Due to the intent of the authorizing law and goal of targeting urgent care, Trinity Health concurs with excluding general preventive services—with the exception of certain appropriate preventive services such as flu shots—and excluding longitudinal care from this policy. Such provisions will ensure the VA’s health care partners have the flexibility to deliver appropriate preventive services in conjunction with an urgent care visit, but do not attempt to provide care as a substitute for the VA’s preventive and primary care.

Trinity Health concurs with the proposed rule establishment of a reasonable co-payment for eligible veterans who receive urgent care (except when the sole purpose of the visit is for influenza immunization), and not requiring eligible veterans to receive prior approval for urgent care.

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