

VA Midwest Health Care Network FY 2008 ANNUAL REPORT

Dear Friends of the VA Midwest
Health Care Network:

2008 was a good year for VA Midwest Health Care Network. Expansion of the Network in rural areas, improvements and expansion of the Care Coordination/Home Telehealth (CCHT) program, and advances in technology are allowing more Veterans access to VA services than ever before, particularly for Operation Enduring Freedom/ Operation Iraqi Freedom (OEF/OIF) Veterans, patients with serious mental illnesses, and new primary care patients.

Serving our newest generation of Veterans is one of our top priorities. New transition clinics, additional staffing, and new programs all contribute to the effort to make the transition from military to civilian life as easy as possible.

Again this year we have met or exceeded many goals in areas such as flu vaccinations, disease prevention, treatment of chronic health conditions, and prompt access for new patients. Overall patient satisfaction remains high, exceeding National averages.

This success has also brought about the challenges of increased caseloads for our staff. We plan to add more support to our patients through some of our Rural Health Initiatives, as well as rethinking how our staff can better serve Veterans. As we strive to meet Veterans' expectations in 2009, we will continue to develop new ways to enhance our services to even more Veterans.



Robert A. Petzel, M.D.
Network Director

Rural Health

Efforts to improve Veterans' access to VA health care services in rural areas accelerated in 2008. There were two major actions taken by the Veterans Health Administration Office of Rural Health to help our Network expand services in rural areas.

1. VA Midwest Health Care Network was selected as one of eight Networks to receive funding to hire a full-time Rural Health Consultant. This new position will help lead rural health activities and assist with the sharing of information across the Network so that VAMCs can effectively plan future improvements; and
2. Iowa City VAMC was selected as one of three sites across the nation to operate a Veterans Rural Health Resource Center.

With an annual budget of 2 million dollars over the course of five years, the Veterans Rural Health Resource Center will enhance health care delivery to Veterans living in rural areas, by serving as a resource for education and policy analysis. The Network also plans to broaden our comprehensive care management program and increase availability of specialty services in rural areas through the use of care coordination and home telehealth, and advanced technology.

Improving Access

Expanding our primary care services in rural areas remains a priority. By the end of 2010 there will be an additional fifteen CBOCs and two outpatient clinics opened in this Network. The table below shows where these clinics are planned and target opening dates.

New Community Based Outpatient Clinics to Open in 2009 and 2010		
CBOC Location	Parent Station	Target Opening Date
Carroll, IA	Central Iowa HCS	2009
Cedar Rapids, IA	Iowa City VAMC	2009
Marshalltown, IA	Central Iowa HCS	2009
Shenandoah, IA	NWI HCS	Now Open
Bellevue, NE	NWI HCS	Now Open
Wagner, SD	Sioux Falls VAMC	2009
Watertown, SD	Sioux Falls VAMC	2009
Ottumwa, IA	Iowa City VAMC	2009
Alexandria, MN	St. Cloud VAMC	2009
NW Metro, MN	Minneapolis VAMC	2009
O'Neill - Outreach, NE	NWI HCS	2009
Devil's Lake - Outreach, ND	Fargo VAMC	2009
Grand Forks, ND	Fargo VAMC	2009
Decorah, IA	Iowa City VAMC	2010
Sterling, IL	Iowa City VAMC	2010
South Border, MN	Minneapolis VAMC	2010
SW Metro, MN	Minneapolis VAMC	2010

HCS: Health Care System; NWI: Nebraska Western Iowa; VAMC: VA Medical Center

Care Coordination and Home Telehealth Keep Veterans Healthy

Improvements and expansion of the Care Coordination/ Home Telehealth (CCHT) program in VA Midwest Health Care Network showed great success in 2008.

Care coordination is about ensuring that Veterans get the right care in the right place at the right time. The goal is to make the home into the preferred place of care, whenever possible. By using home telehealth equipment, we can monitor a Veteran's condition right from the home. Information such as blood pressure and glucose levels can be monitored for Veterans with chronic diseases such as diabetes or depression. Telehealth is becoming increasingly popular with Veterans because it provides greater access to medical care, reduces the amount of travel required, and provides an instant link from the home to medical providers.

Thanks to CCHT, Veterans can now stay at home with loved ones and still receive VA health care services. A recent study found a 25 percent reduction in the average number of days hospitalized, and a 19 percent reduction in hospitalizations for patients using home telehealth services. By the end of 2008 we were serving 1,805 patients in their homes through the use of Care Coordinators and Telehealth, an 80 percent growth in the number of Veterans enrolled in CCHT since 2007. Without the added benefit of Care Coordination and Home Telehealth, nearly half of Veterans served at home would likely face hospitalization or nursing home care.

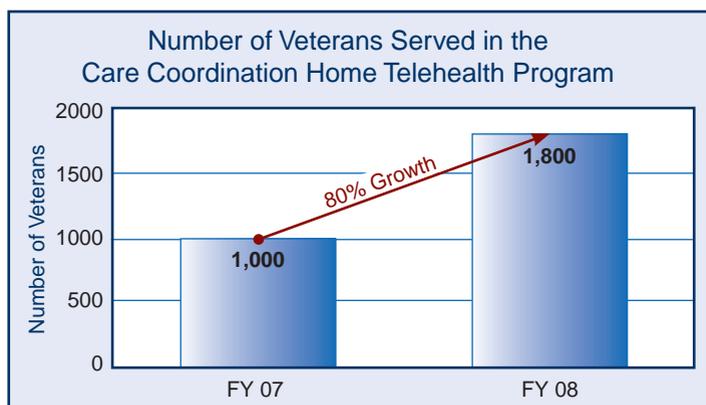
Large strides were made in 2008 by focusing our efforts on incorporating CCHT into the Mental Health Service Line and expanded services to Home Based Primary Care patients. All of our medical centers are now using Care Coordination Home Telehealth services as part of the many services offered for Veterans with mental health illnesses.

The key to our overall success in the field of Home Telehealth is VA's computerized patient medical record system. Data obtained from the home, such as blood pressure and blood glucose, along with other patient information in the electronic system, allows our health care teams to anticipate and prevent avoidable problems

Nationwide, VA's home telehealth program cares for 35,000 patients and is the largest of its kind in the world.

Studies have found that an increasing number of patients in rural areas feel telehealth improves their access to health care and promotes their ongoing relationship with their health care system.

The chart below illustrates an 80% growth in the number of Veterans served in their homes in 2008.



Workload and Financial Report for 2008

VA Midwest Health Care Network serves Veterans residing in a seven state area through a system of community based outpatient and outreach clinics, hospitals, community living centers, and domiciliary residential rehabilitation treatment programs. In 2008, the Network served more than 279,000 Veterans, with an annual budget of \$1.84 billion. The following table shows workload and resources comparisons from 2006 through 2008.

Network Totals	2006	2007	2008
Veteran patients treated	270,273	275,567	279,930
• Priority 1-6	178,237	184,913	191,138
• Priority 7-8	92,036	90,654	88,792
Inpatient discharges	25,016	25,493	26,272
Outpatient visits	2,349,603	2,333,551	2,514,579
Annual budget ¹	\$1.49 B	\$1.62 B	\$1.84 B
Costs/patient	\$4,943	\$4,825	\$5,554
Pharmacy costs	\$221.6 M	\$212.9 M	\$209.8 M
Pharmacy costs/patient	\$809	\$784	\$742
Prosthetic obligations	\$43.4 M	\$57.3	\$66.0 M
MCCR collections ²	\$150 M	\$150 M	\$159.5 M
Staffing FTE ³	9,427	9,707	10,364

¹Annual Budget – Appropriated funds (VERA, Collections, Specific Purpose) used for operations, it excludes Major and Minor Construction.

²Medical Care Cost Recovery (MCCR)– Funds collected are kept by the facilities and used for direct patient care.

³Full time equivalent (FTE)

Performance Achievements for 2008

Our mission, vision and values are centered on a foundation of putting patient care first. We measure our performance so we can build on our successes and focus on continuous improvement. Our 2008 performance measure outcomes demonstrate our commitment to continuous improvement in Veteran satisfaction, rural health access, flu prevention, smoking cessation, and service to those returning from combat. Moving forward, we must never lose sight of our commitment to putting patient care first and to providing Veterans with the best health care possible.

VA Midwest Health Care Network exceeded the VA goal of vaccinating at least 60% of employees, with an overall exceptional employee flu vaccination rate of 77%. This is the second highest rate of all Networks nationally for the second year in a row. Keeping our employees healthy helps keep our Veterans healthy.

In addition, VA Midwest Health Care Network facilities continue to excel in disease prevention with initiatives to prevent infections, including the Methicillin Resistant Staphylococcus Aureus (MRSA) Prevention initiative and facility Hand Hygiene Re-design Teams.

The illustration on the right shows some of our performance achievements for 2008.

Veterans Health Administration MEASURE	VHA Goal Percentage	VA National Average Percentage	VISN 23 Performance Percentage
Patients Screened for Depression	No Target	87	91
Outpatients 50-80 years of age screened for colorectal cancer	79	79	82
New Patient Wait Time to see a provider is 20 minutes or less	79	77	83
Established patients receive a primary care appointment when desired	87	86	92
New patients receive a primary care appointment when desired	87	88	93
Flu vaccine given employees	60	65	77
Immunizations - Outpatients (ages 50-64) receive Influenza vaccination	66	69	70
Tobacco - Patients using tobacco in past year who have been offered medication for smoking cessation	73	83	88
Tobacco - Outpatients using tobacco in past year provided with counseling on how to quit	84	89	90
Satisfaction - Outpatient rated Overall Very Good or Excellent	77	78	83
Satisfaction - Inpatient Overall rated Very Good or Excellent	76	79	84

Serving Those Who Returned Home from Combat

Throughout 2008, the Network continued its efforts in serving our newest generation of Veterans. As we closed out 2008, we began operating transition clinics to assist returnees adjusting to civilian life, and we expanded case managers to assist those with special needs. Our partnership with the Minnesota National Guard at Camp Ripley is allowing returnees easier access to mental health case management services. This program has proven to be very successful.

We successfully recruited 34 new employees in 2008 for the Operation Enduring Freedom/Operation Iraqi Freedom program, which increased staffing dedicated to serving those returning from combat from 38 to 72. This includes hiring an additional 24 case managers, 3 transition patient advocates, and 7 program assistants.



Through the end of December 2008, the Network enrolled a total of 29,674 combat Veterans, including 16,642 National Guard members, 5,272 Reservists, and 7,760 active military. The majority of those enrolled receive outpatient care, with 608 receiving inpatient care. There are a number who choose to enroll only. Those who choose to enroll only are encouraged to come to a VA facility for a baseline medical exam.

The tables on the right show the number of combat Veterans enrolled by facility.

Mental Health

Our mental health services have steadily expanded each year since 2005 and our efforts continued in 2008. Some of our Mental Health initiatives that improved services to Veterans with mental illnesses included placing Depression Case managers at all sites, increasing the number of staff assisting homeless Veterans, and adding a pharmacist dedicated to mental health services.

Construction Update

The Minneapolis VA Medical Center's Spinal Cord Injury/Disorders (SCI/D) Center is now open and caring for both outpatients and inpatients. The outpatient clinics, which have seven exam rooms, opened in January; the first inpatient moved into the SCI on Feb. 23. The inpatient area, which will have 30 beds, will be opening in stages.

A new \$25 million community living center under construction in Des Moines, Iowa, will provide 140 long-term care beds. It is scheduled to open in the fall of 2009.

Combat Veterans Enrolled in VISN 23 Cumulative through December 31, 2008				
Location	National Guard	Reserve	Active Duty	Total
Black Hills	919	31	1,040	1,990
Central Iowa	1,672	231	748	2,651
Fargo	1,956	154	660	2,770
Iowa City	2,285	426	161	2,872
Minneapolis	4,539	3,129	1,238	8,906
Neb/W-Iowa	2,528	906	993	4,427
St. Cloud	1,782	229	943	2,954
Sioux Falls	961	166	1,977	3,104
VISN 23 Total	16,642	5,272	7,760	29,674

Combat Veterans Care in VISN 23 Cumulative through December 31, 2008				
Location	Outpatient Care	Inpatient Care	Enroll Only	Total
Black Hills	1,721	171	98	1,990
Central Iowa	1,583	13	1,055	2,651
Fargo	1,291	21	1,458	2,770
Iowa City	2,168	50	654	2,872
Minneapolis	3,321	173	5,412	8,906
Neb/W-Iowa	2,877	48	1,502	4,427
St. Cloud	2,867	54	33	2,954
Sioux Falls	2,755	78	271	3,104
VISN 23 Total	18,583	608	10,483	29,674



Minneapolis VA Medical Center's Spinal Cord Injury/Disorders (SCI/D) Center



Construction is underway on an extended care facility in central Iowa. It will open in the fall of 2009.

Minneapolis VAMC physical therapists demonstrate how the new therapy pool works in the recently opened Spinal Cord Injury/Disorders Center. Pictured are (L-R): Amanda Simone, Chris Schieffer and Kate Thul (swimmer).

