

Introduction

Care Coordination for veterans is critical to successful delivery of health care services. Care Coordination should be addressed and improved at two junctures, first when service members' transition from active duty to inactive service or retirement, and subsequently once veterans are reestablished in the community employed, looking for employment or retired. Accessing health care services while waiting for eligibility processes to run their course, can be difficult and coordinating care for multiple health care issues or for the veteran and dependents is even more difficult. Additionally once veterans have determined health care benefit eligibility for themselves and their dependents, they may find that living in a rural area can create another set of healthcare coordination challenge. This supplement reviews the primary programs for coordinating services upon military discharge and continued coordination once the veteran settles back into the community.

Transition from Military Service

Transition Assistance Program (TAP)--The Department of Defense developed the Transition Assistance Program (TAP) that is designed to assist service members as they transition from the military to civilian life. TAP focuses on providing information regarding job search, employment and training information and VA benefits information in a three-day workshop format for service members who are within 12 months of separation or 24 months of retirement. Information presented on VA benefits includes information on health care benefits after transitioning out of the military. Attendance at a TAP workshop is mandatory prior to discharge. The eligibility for health care benefits is dependent upon the service members' separation status and will differ on a soldier-by-soldier basis, as well as for retirees.¹

National Guard Yellow Ribbon Reintegration Program – The Yellow Ribbon Reintegration Program promotes the well-being of National Guard and Reserve Members, their families and communities by connecting them with local resources throughout the deployment cycle. The program strives to ensure that all parties are properly prepared for deployments and have access to services, referrals, and proactive outreach.² The YRRP is a congressionally mandated program established in 2008 under the National Defense Authorization Act which called for the development of the informational events and activities for National Guard and Reserve service members and their families, in order to facilitate access to services supporting good health and well-being throughout the deployment cycle. The post-deployment points of contact are set at a 30-, 60-, and 90- day cycle.³

A component of the YRRP is the **InTransition program**. This program offers coaching support for members of the Guard and Reserves who are receiving treatment for psychological health concerns as they move between health care providers. InTransition coaches are master's-level behavioral health clinicians who understand military culture and issues. The coaches will coach the service member on a one to one basis, connect them to their new provider, and empower the service members with personal tools to make healthy life choices. Coaches may also assist family members.⁴

National Guard Joint Services Support - Transition Assistance Advisors (formerly State Benefits Advisors) assist National Guard members with access to care and enrollment at VA healthcare facilities near their home of record. They also assist National Guard members and their families in applying for other VA entitlements and benefits such as compensation and pension for disabilities, insurance, loan guarantee, vocational rehabilitation/ employment (VRE) and educational benefits. Additionally, they work with other Joint Forces Headquarters staff members and Directors of State Family Programs to build a state coalition of support with VA and community organizations for Guard members and their families to access in their community. While the program was set up to primarily take care of Guard members and their Families, Transition Assistance Advisors provide critical support and facilitate the integration for the delivery of VA and community services to all members of the active and reserve components. ⁵

Ongoing Care Coordination

Patient Aligned Care Team (PACT) - The Patient Aligned Care Team (PACT) was developed by the VA to improve the delivery of primary care for veterans in a more patient-centered environment. PACTs are composed of the veteran's primary care provider, nurse, specialist, social worker, pharmacist, dietitian and others as the medical needs of the veteran may dictate. The veteran is an active participate in his or her own health care planning. The PACT will assist the veteran in scheduling care and provide information on the prevention and/or management of disease when seeking medical care at a VA primary care site.⁶

In addition to the ongoing care coordination for veterans, the Veterans Health Administration (VHA) has established procedures for the transition of care, coordination of services, care and case management of Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) active duty service members and veterans by VHA and Veterans Benefit Administration (VBA) staff. The partnership is between the Department of Veterans Affairs (VA) and Department of Defense (D0D) to seamlessly transition the health care of injured and ill returning combat service members and veterans from D0D to the VA health care system. The requirement for transition of care applies to active duty service members and veterans who are directly referred from Military Treatment Facilities (MTFs) and to active duty service members and veterans who present to VHA facilities seeking health care. This initiative pertains to active duty military personnel who are returning from combat theater assignments. ⁷

Virtual Lifetime Electronic Record (VLER) - The VA is also piloting the Virtual Lifetime Electronic Record (VLER) which allows for the sharing of certain parts of a veteran's health record between the

VA, DoD, and selected private providers over a secure network known as the Nationwide Health Information Network. VLER creates a unified lifetime health record for service members and veterans with the goals of keeping health care providers informed, improve continuity and timeliness of care, and eliminate gaps in healthcare information. The veteran's participation in the program is on a voluntary basis. The Hampton VA Medical Center is the second location in the country to pilot VLER and has participated in VLER since fall 2010. ⁸

Virginia Wounded Warrior Program (VWWP) Case Management – Through a network of case managers, outreach coordinators, resource and peer specialists the VWWP helps veterans and their family members connect them to medical and mental health services at the VA and/or in the community. In addition to helping connect veterans and their families the VWWP staff assists individuals and families in a variety of areas that support overall well-being, such as locating affordable housing, budgeting assistance and financial counseling, obtaining food stamps or other types of aide, arranging transportation to appointments, and assisting with employment search through helping them with interview skills and resumes.

References

¹ United States Department of Veterans Affairs. Federal Benefits for Veterans, Dependents, and Survivors. Chapter 10 Transition Assistance. Retrieved November 29, 2011 from http://www.va.gov/opa/publications/benefits book/benefits chap10.asp

² Panetta L.E, Secretary of Defense. The Yellow Ribbon Reintegration Program. retrieved November 21, 2011 from http://www.yellowribbon.mil/

³ Yellow Ribbon Reintegration Program. retrieved November 21, 2011 from http://www.vellowribbon.mil/

⁴ Are you a service member in transition? InTransition. Retrieved November 21, 2011 from http://www.health.mil/InTransition/

⁵Virginia Wounded Warrior Program Website. Retrieved December 1, 2011 http://wearevirginiaveterans.org/Resources/For-Military-Veterans.aspx

⁶ United States Department of Veterans Affairs. Primary Care Program Office. *Patient Aligned Care Team (PACT) Overview.* Retrieved November 16, 2011 from http://www.va.gov/PRIMARYCARE

⁷ Transition Assistance and Case Management of Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) Veterans (May 2007). VHA Handbook 1010.01 Veterans Health Administration. Retrieved November 21, 2011 from

http://www.heartoftexas.va.gov/HEARTOFTEXAS/Docs/VHA HB 1010 01 Transition Asst and CM of OEF OIF Vets. pdf

⁸ Healthcare IT News. *Virtual Lifetime Electronic Record pilot expands to include more veterans.* Retrieved on December, 2011 from http://healthcareitnews.com/news/use-it-helps-va-outperform-private-sector