Overview

From February 9-11, 2016, The American Legion’s System Worth Saving (SWS) team conducted a site visit to the West Campus of the Central Alabama Veterans Health Care System (CAVHCS) in Montgomery, Alabama. The SWS team was accompanied by The American Legion’s Department of Alabama’s staff to include: Willis Frazier, National Executive Committee man; David Hartline, Department Commander; Jim Jeffries, Senior Vice Commander; Greg Akers, Department Adjutant; Paul Mark Sullivan, Department Service Officer; and Pat Liddell, Junior Vice-Commander for the Department of Georgia. Before the site visit, a town hall meeting was hosted by the Department of Alabama’s Headquarters, to hear first-hand from veterans about their health care experiences at the CAVHCS.

The last SWS site visit to CAVHCS was in February of 2003 when the SWS team cited challenges in staffing nurses, contracting out Cardiology, and a shorthanded Intensive Care Unit (ICU). CAVHCS was established January 1, 1997, from the merger of the Montgomery and Tuskegee VA medical centers, which are approximately 40 miles apart. Along with two (2) Community-Based Outpatient Clinics (CBOCs), these four (4) sites serve more than 134,000 veterans living in a 43-county area of Georgia and Alabama. CAVHCS is a level two hospital that served 48,302 unique patients during fiscal year 2015.

Areas of care include: primary and specialty care, surgical and mental health care, urgent care, acute care, telemedicine, extended care and rehabilitation, Health Administration Services, Home Based Primary Care (HBPC), tertiary care, laboratory and pharmacy services.

CAVHCS operates seven (7) Community-Based Outpatient Clinics (CBOCs) in the following locations: Montgomery, AL; Fort Benning VA Clinic in Fort Benning, GA; Columbus, GA; two in Dothan, AL; Monroeville, AL; and the VA Wiregrass Clinic in Fort Rucker, AL.

Montgomery, Alabama

(Recently opened on December 7, 2015)

Services

• Primary Care services
• Women’s Health services
• Dental
• Mental Health services
• Optometry
• Laboratory: Blood drawing
• Prescription processing
• Prosthetics
• Radiology
• Health Administration Services
• Prescription processing

Fort Benning, Georgia

(CAVHCS signed a Resource Sharing Agreement with the DoD at Fort Benning. This added 19 specialty clinics services through Fort Benning’s Martin Army Community Hospital (MACH) Memorandum of Agreement).

Columbus, Georgia

Services

• Primary Care services
• Mental Health services
• Personal Care
• Laboratory: Blood drawing
• Prescription processing

Dothan, AL Mental Health Clinic

Services

Primary care services for veterans in Dothan metro area:

• Behavioral Health services including individual, group and family counseling, and programs such as QuitSmart Smoking Cessation.
• Personal Care: Highly qualified primary care providers, specialty care referrals to the Montgomery, AL facility.
• Laboratory: Blood drawing services available.
• Prescriptions: Routine prescriptions processed through the mail or My HealtheVet.
Dothan, Alabama (Contract Clinic)

Services
- Primary Care services
- Mental Health services
- Personal Care
- Laboratory: Blood drawing
- Prescriptions: Routine prescriptions processed through the mail or My HealtheVet.

Monroeville, Alabama

Services
- Primary Care services
- Mental Health services (Face-to-Face and Telemental Health)
- Personal Care
- Laboratory: Blood drawing
- Prescriptions: Routine prescriptions processed through the mail or My HealtheVet.

Fort Rucker, Alabama

Services
- Optometry Office shares VA clinic building
- Personal Care: Highly qualified primary care providers, specialty care referrals to the Tuskegee-East Campus.
- Prescriptions: Routine prescriptions processed through the mail or My HealtheVet.

Executive Leadership Briefing

The SWS team met with the executive leadership team of CAVHCS including Paul Bockelman, Interim Director; Dr. Vic Malabonga, Chief of Staff; Linda Townsend-Green, Acting Associate Director for Operations; and Traci Solt, Associate Director of Patient Care Service. The Interim Director started working at CAVHCS on January 29, 2016; the Chief of Staff began working on January 10, 2016.

During the meeting, the Executive Leadership reported the following as the top challenges faced by CAVHCS:

- Recruitment & Retention: According to the facility’s Human Resources staff, CAVHCS currently has 700 vacancies, with approximately 30% of that number being care providers.
- Veterans Choice Act: The Veterans Choice Act enables veterans who live more than 40 miles from the nearest VA facility with a primary care physician, or who have been told that they will have to wait more than 30 days from the clinically indicated date to receive care in the community. CAVHCS struggles with Choice due to the rurality of the medical center and lack of providers willing to accept the Choice Program rates.

When asked about what they are doing to ensure that there is open communication between the medical center, veterans, and the community as a whole, the executive leadership responded as follows:

CAVHCS has a Veteran’s Voice Advisory Committee (including members of The American Legion’s Department(s) of Alabama and Georgia) which consists of veterans from across the region, who report and make recommendations to spark healthcare improvements and solve problems. According to the committee's minutes from the latest meeting in December 2015, Choice and VA referrals overlapped and employees had some difficulty in identifying their leadership at CAVHCS. CAVHCS leadership who attended the meeting quickly began to work on resolving the issues.

To ensure CAVHCS and veterans continue to have efficient communication and are better informed, The American Legion recommended that the director hold an orientation briefing with veterans once a month, and offered to assist the medical center in educating the veterans within the facility's catchment area. The American Legion also requested that the medical center conduct a town hall meeting with leadership from Health Net to address concerns with the Choice Program.

Human Resources Department

CAVHCS is in the process of rebuilding its senior leadership team. As of February 5, 2016, the Veterans Health Administration has been recruiting to finalize the selection for a permanent medical center director for CAVHCS. Their chief of staff began working at CAVHCS on January 10, 2016. The associate director of patient care services arrived December 2014, and they have increased staff from 1,480 to 1,604 over the past year. Nevertheless, the facility has approximately 700 vacancies with about 30% vacancies for direct care providers.

CAVHCS has struggled in hiring physicians and nurses and has been posting jobs in professional journals, as well as holding “Mega Career Job Fairs.” Their most recent job fair took place in October 2015, when they recruited registered nurses, certified registered nurse practitioners, licensed practical nurses, nursing assistants, social workers, and medical support assistants.

As a result of the career fair, the Human Resources Management Service (HRMS) of CAVHCS processed 1,006 applicants. Of the applicant pool, 272 were registered nurses (34 were veterans), 73 were social workers (six were veterans), and 660 were medical support assistants (146 were veterans). On October 24, 2015, HRMS referred 103 registered nurses, six (6) nurse practitioners, four (4) social workers, and 110 medical support assistants to the respective service line managers interview panels. From that point, the nurses, social workers, and medical support as-
assistants should be onboard within eight weeks.

The Montgomery division of CAVHCS is challenged by the lack of medical school affiliations and is in the process of pursuing universities near the medical center. Without a medical school affiliation, it will be difficult for the medical center to decrease the number of vacancies. CAVHCS has only recently started to use their Student Loan Repayment Program. Due to not having this program in place earlier, there has been a lack of attraction for physician and nursing students to pursue careers at CAVHCS.

### Medical Center Budget

<table>
<thead>
<tr>
<th>Appropriation</th>
<th>2015</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Purpose</td>
<td>$136,563.80</td>
<td>$143,994.40</td>
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<tr>
<td>Hepatitis C</td>
<td>$1,740.70</td>
<td>$7,704.00</td>
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<tr>
<td>Non-VA Care Coordination (NVCC)</td>
<td>$39,300.00</td>
<td>$40,208.70</td>
</tr>
<tr>
<td>Veterans Access, Choice and Accountability Act</td>
<td>$4,547.60</td>
<td>$13,094.00</td>
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<tr>
<td>General Purpose</td>
<td>$20,057.90</td>
<td>$17,976.80</td>
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<tr>
<td>Medical Support &amp; Compliance</td>
<td>$17,428.40</td>
<td>$17,797.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$219,638.40</td>
<td>$240,774.90</td>
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</tbody>
</table>

### Highlights

CAVHCS fiscal year 2016 funding reflects increases in areas that directly impact veterans access to care, general health care services, care in the community, and the Veterans Access, Choice and Accountability Act. Although the medical facilities appropriation shows a 10% cut, CAVHCS anticipates additional funds ($5.6M) for infrastructure support from their VISN.

### Equity

CAVHCS will continue their veterans transportation initiative, the patient reminder notification (PRN) program, the expansion of women veteran services, mental health, homeless, and telehealth programs.

### Fiscal Stewardship

CAVHCS continues to meet or exceed revenue goals with a projection of $12.9M for fiscal year 2016. All resource decisions consider veteran-centered needs while operating within their allocated resources.

### Non-VA Coordinated Care

<table>
<thead>
<tr>
<th>Interest Penalty</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Nursing Home</td>
<td>$0.00</td>
</tr>
<tr>
<td>Compensation and Pension</td>
<td>$59.28</td>
</tr>
<tr>
<td>Fee Dental</td>
<td>$0.00</td>
</tr>
<tr>
<td>Home Health Services</td>
<td>$17.62</td>
</tr>
<tr>
<td>Mill Bill</td>
<td>$0.00</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>$0.00</td>
</tr>
<tr>
<td>Preauthorized Inpatient/Ancillary</td>
<td>$0.00</td>
</tr>
<tr>
<td>Preauthorized Outpatient/Ancillary</td>
<td>$5.16</td>
</tr>
<tr>
<td>Unauthorized</td>
<td>$0.00</td>
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<tr>
<td><strong>Total</strong></td>
<td>$82.06</td>
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</tbody>
</table>

For the past three (3) years, the Non-VA Coordinated Care (NVCC) Program at CAVHCS has spent $45,555,388 for authorized care, unauthorized care, specialty care, emergency care, and non-service connected Mill Bill emergency care.

The medical center provided the below amounts of interest paid during fiscal year 2015 for non-VA claims due to noncompliance of the Prompt Payment Act 1 of 1982, P.L 97-177.

### Outpatient Wait Time Results

<table>
<thead>
<tr>
<th>Appointment Type</th>
<th>Average Wait Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care</td>
<td>6.73</td>
</tr>
<tr>
<td>Specialty Care</td>
<td>19.69</td>
</tr>
<tr>
<td>Mental Health</td>
<td>8.19</td>
</tr>
</tbody>
</table>

**Total Appointments Scheduled: 11,824**

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1 Source: VHA Access Audit released February 11, 2016, for the period ending February 1, 2016.

In 1982, Congress enacted the Prompt Payment Act ("Act"; Pub. L. 97–177) to require Federal agencies to pay their bills on a timely basis, to pay interest penalties when payments are made late, and to take discounts only when payments are made by the discount date.
**Facility Demographics**

**Operating Beds:**
- Hospital - 71
- Domiciliary - 148
- Nursing Home - 160
- Transitional - 12

**Average Daily Census for Each Inpatient Programs**

CAVCHS reported the number 200 as the average daily census for each of their inpatient programs. In the past fiscal year, CAVHCS reported 2,124 admissions, and 475,786 outpatient visits and are projecting approximately 500,000 outpatient visits this fiscal year.

**Strategic Plan**

At the time of the visit, CAVHCS indicated that they were in the process of developing a five-year strategic plan for the facility.

**Business Office**

The Veteran Population Projection Model 2014 estimates the total number of veterans residing in the Montgomery Campus of CAVHCS’ catchment area at approximately 46,151 – 52,116. The state of Alabama reports having 414,000 veterans, 43,000 of which are women. According to CAVHCS, the facility currently has 42,810 men enrolled, and 5,466 women enrolled.

During the team’s meeting with the Chief of Health Administration Services, Mr. Andrew Freeman said that there is no national training module for Medical Support Assistants (MSAs), and hopes the VA will standardize MSA training nationwide. He has scheduled audits and randomly selected MSAs to see if they were scheduling appointments appropriately. According to Mr. Freeman, 91% of appointments were proficiently scheduled at the last audit. The SWS team recognized Mr. Freeman’s training module as a best practice that should be shared with other facilities.

Joint Commission, Commission on Accreditation of Rehabilitation Facilities (CARF) and other Reviews Conducted between 2013 and 2015

According to CAVHCS, their last Joint Commission Survey took place from January 25-29, 2016. CAVHCS currently has three Mental Health & Behavior Medicine (MH&BM) programs accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF):

- Psychosocial Rehabilitation Recovery Center (PRRC) as of July 14-15, 2014.
- Therapeutic Supportive Employment Services (SES) as of August 21, 2014.
- Mental Health Residential Rehabilitation Treatment Program (MH-RRTP) as of September 10-11, 2015.

**Women Veterans**

According to the facility, 4,592 women currently utilize the Women’s Clinic, and this number continues to increase each year. CAVHCS employs female psychologists and psychiatrists, but they are not directly assigned to the Women Health Clinics. Currently, no female gynecologists are available; there are six (6) primary care female providers (two (2) nurse practitioners and four (4) MDs), and there is one (1) male primary care provider for MD & OB/GYN.

The following reports how many women veteran events are held at CAVHCS:

<table>
<thead>
<tr>
<th>Events</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operation Baby Shower</td>
<td>3</td>
</tr>
<tr>
<td>Women Veterans Day program</td>
<td>1</td>
</tr>
<tr>
<td>Go Red Breakfasts</td>
<td>2</td>
</tr>
<tr>
<td>Lunch and Learn Health Heart</td>
<td>1</td>
</tr>
<tr>
<td>Breast Cancer Awareness Walks</td>
<td>2</td>
</tr>
<tr>
<td>Grand Opening of Mother’s Room</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>10</strong></td>
</tr>
</tbody>
</table>

In previous years, CAVHCS has also hosted meet & greet events and Women’s Health Education Expos. During the SWS team’s meeting with the Women Veterans Program Manager, the manager described how the rurality of the medical center and lack of childcare programs posed as barriers for women veterans seeking care. She also expressed the need for funding of the women veterans events and other promotional items.

**Town Hall**

On Tuesday, February 9, 2016, The American Legion hosted a town hall meeting at the Department of Alabama’s Headquarters to discuss the care at the Central Alabama VA Healthcare System. There were 20 people in attendance including Willis Frazier, National Executive Committeeman; Greg Akers, Department Adjutant; Pat Liddell, Junior Vice-Commander for the Department of Georgia; and Vera Jordan, State Representative for Senator Richard Shelby.

During the town hall, veterans both praised and remarked on areas for improvement within CAVHCS. One veteran was very
pleased with the complementary and alternative medications offered (primarily acupuncture), but several veterans were displeased with the somewhat negative culture that exists within CAVHCS. Two veterans expressed frustration with the dental clinic within CAVHCS; however, a lot of this frustration could have been avoided had veterans been provided with more communication and education on which veterans are eligible for VA’s dental care. Other veterans commented that they felt the Choice program was not working, and were disappointed with delays in billing. CAVHCS officials were present for the town hall meeting and responded that they would look into the issues.

Montgomery Vet Center

On Wednesday, February 10, 2016, Mark Walker, Deputy Director for Veterans Employment & Education; Ed Lilley, Team Leader for Health Policy; Phil Youngblood, Chairman of the Health Administration Committee; Vickie Smith-Dikes, VA&R Council Member; and Department of Alabama/Georgia leadership visited the Montgomery Vet Center. The Vet Center is requesting to renovate for more space, as they had 300 visits from veterans per month and 48,000 visits in 2015. Of those visits, more than 50% were Vietnam Veterans requesting counseling. Team Leader, Marsha McCormick, reported that she pays for coffee and other refreshments out of her pocket, and requested Legion assistance in funding refreshments.

Homeless Shelter Tour

Following the visit at the Vet Center, the SWS team met with Ms. Springe Love, the Homeless Grant & Per Diem Program Manager for CAVHCS at the Safe Haven Homeless Shelter that is affiliated with CAVHCS. Montgomery’s Safe Haven was established in 2013 and has 32 beds for the homeless. Of the eight (8) beds contracted by VA, two (2) are reserved for female veterans. Currently, the Safe Haven is 90% full. The contract allows veterans to stay at the Safe Haven for four (4) months and is low demand. Ms. Love requested assistance from The American Legion in obtaining clothing and bus tickets for the residing veterans, support for veterans living in rural Alabama, and permanent housing for these veterans. The current contract only allows for a stay of four (4) months.

Operation Comfort Warrior

The American Legion’s Department of Alabama presented $5,300 worth of recreational and comfort items to the CAVHCS on Thursday, February 11, 2016, thanks to the Legion’s Operation Comfort Warriors (OCW) program. The department was so impressed that plans are in the works for future OCW distributions. The donations included recreational equipment such as corn hole games with patriotic-themed beanbags, a CD player, soft tip dartboard and two (2) video players. The Legion also distributed clothing items such as sweat suits for winter weather and comfort items like soap and deodorant. Additionally, 30 “starter kits” for male and women homeless veterans were provided to CAVHCS.

Best Practices

CAVHCS is a diverse health care system that has a staff of dedicated employees serving the needs of Central Alabama’s veterans. The medical center has implemented some best practices which are noted below:

- **Veteran’s Voice Committee:** The committee consists of veterans from across the region who report and make recommendations on the governance structure, to help spark healthcare improvements. During several SWS site visits, The American Legion has urged for improved communication between VA and their local veteran community. This committee is a great example of how much-needed communication can and should work.

- **MSA Training:** The training available for Medical Support Assistants (MSAs) is recognized as a best practice for CAVHCS, and it ensures that veterans’ appointments are scheduled appropriately. This has been a major issue for VA medical centers nationwide following the outbreak in 2014.

Key Challenges

1. **Staffing:** According to the facility’s human resources staff, CAVHCS currently has 700 vacancies; approximately 30% of that number are care providers.

2. **Medical School Affiliations:** The Montgomery division of CAVHCS is challenged by the lack of medical school affiliations and is in the progress of pursuing universities near the medical center. Without these affiliations, it is hard for the medical center to fill vacancies. CAVHCS has only recently started using their Student Loan Repayment Program; without having this program in place earlier, there has been a lack of attraction for physician and nursing students to pursue careers at CAVHCS.

3. **Veterans Choice Act:** CAVHCS struggles with Choice due to the rurality of the medical center and lack of providers willing to accept the Choice Program rates.

Recommendations

1. Develop a strategic and ongoing relationship with the local universities and colleges in and around Montgomery. The east campus of CAVHCS, Tuskegee, is only 40 miles from the west campus and has affiliations with the Morehouse School of Medicine, Alabama State University, Auburn University,
and Tuskegee University. These affiliations should not only be affiliated with one campus.

2. The Education Debt Reduction Program (EDRP) authorizes VA to provide student loan reduction payments to employees with qualifying loans who are in health care positions providing direct patient care services and are in positions that are considered hard to recruit or retain. The loan must be for the health professional’s education that qualified the applicant for a specific position. Each Veterans Health Administration (VHA) facility determines which jobs are hard to recruit and retain, and when the facility will offer EDRP for those posts. EDRP is a recruitment and retention incentive only offered or approved for certain positions but should be promoted and highlighted by CAVHCS when trying to attract new recruits.

3. The American Legion is working with both Congress and the VA to develop a new Veterans Choice Program that would replace all of the Non-VA Care programs currently offered by VA, to include the existing Choice Program. The data collected at various SWS site visits will be factored in when considering how to develop The American Legion’s position on the new Veterans Choice Program.