Building a VA-CIL Network to Enhance Rural Veterans Health and Independence

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VA Organization

Veterans Health Administration (VHA)

Veterans Benefits Administration (VBA)

National Cemetery Administration (NCA)
Differences in VHA, VBA and NCA

I. **Health Care: Veterans Health Administration (VHA)**
   - The largest integrated health care network
   - 150 VA Medical Centers (VAMCs)
   - 133 Community Living Centers (CLCs)
   - 800 Community-Based Outpatient Clinics (CBOCs)

II. **Benefits: Veterans Benefits Administration (VBA)**
   - Compensation
   - Education and Training
   - Home Loans
   - Life Insurance
   - Vocational Rehabilitation

III. **Burials and Memorials: National Cemetery Administration (NCA)**
   - Burial Benefits
   - Schedule a Burial
   - Headstones, Markers & Medallions

Reference: Available at “http://www.va.gov/”
Snapshot: Veterans in U.S.

- **22 million** Veterans in U.S.
  - 24% live in rural areas

As of 9/30/2014,

The Veteran population has been declining since 1986 while the number of Veterans with a service-connected disability has been on the rise.

A service-connected disability (SCD) is a disability, disease, or injury incurred or aggravated during active military service. The degree of disability is rated from 0 percent to 100 percent.

Disability Definitions: American Community Survey (ACS)

- Defined by self-report as impairment in one of the following 6 categories:
  - hearing
  - vision,
  - cognitive,
  - ambulatory
  - self-care
  - independent living
Disability Prevalence of Veterans in 2014

- 29% all veterans as defined by the American Community Survey (ACS)
- vs. 20% all veterans had a VA service-connected disability (SCD) rating

KA Holder. “The Disability of Veterans” U.S. Census Bureau, Washington, DC
Snapshot: VHA-Enrolled Veterans

- 9.1 Million Veterans (41%) enrolled
  - 1/3 live in rural/highly rural areas


As of 9/30/2014,
Number of VHA Rural/Highly Rural Enrollees by State – 2014

**Comparison: Rural vs. Urban Enrolled Veterans**

Rural Veterans are MORE likely to:

- Be unemployed
- Be white
- Be married
- Describe their health status as poor
- Consider VA a primary source of healthcare

Reference: VA ORH. (Statistics represent fiscal year 2014 data)
Established in 2006 per public law 109-461, Sec. 212

Mission: “To Improve the health and well-being of rural Veterans by increasing their access to care and services”

Goals:

1) Promote health and well-being in the rural Veteran population
2) Generate knowledge regarding rural Veteran Health
3) Strengthen community healthcare infrastructure where rural Veterans reside
4) Inform healthcare policy that impact rural Veterans and rural healthcare delivery
Veterans Rural Health Resource Centers

1. Togus, Maine
2. Iowa City, Iowa
3. Salt Lake City, Utah

- Provide expertise on program studies, innovation, and best practice dissemination.
ORH Rural Health Strategic Plan

- Study
  - Improve understanding of challenges faced by rural Veterans
  - Identify disparities in the availability of health care to rural Veterans

- Innovate
  - Formulate practices to enhance the delivery of health care to rural Veterans
  - Develop special practices and products for the benefit of Veterans living in rural areas and for implementation of such practices and products in the department system-wide

- Spread
  - Spread through mentored implementation of ORH Rural Promising Practices
Thank you