Welcome to Community Care- Decision Support Tool (DST) Office Hours

For Audio please call VANTs (800) 767-1750 – Participant Code 85286You will hear silence until we begin at the top of the hour.

U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Community Care

Community Care- Decision Support Tool (DST) Office Hours

(b)(6)

Decision Support Tool (DST) Office Hours

DST office hours will take place the third Monday of each month. First session starting 6/15/2020DST office hour information:

https://vacctraining.adobeconnect.com/dstoh/ Time: 3:00-4:00pm ET(800) 767-1750 Participant Code: 85286 The call will consist of an overview of any DST updates and an open forum question and answer session to assist participants in utilizing DST.

Upcoming Decision Support Tool (DST) Changes

Office of Community Care is currently working on improved functionality for DST that will include the following:Clinical Services Synonyms- Ability to find the correct clinical service in the drop-down based on a search of common clinical service synonyms. For example: User enters “Acupuncture” and is returned the official Clinical Service value of “Complementary and Integrative Health Treatment”. [May 19, 2020]Clinical Service Mapping Updates- Updates to the Clinical Service mapping to align with the MCAO FY20 Mid-Year Active Stop Codes list. [May 19, 2020]Community Wait Time- The Facilities list will now show the average wait time for community care appointments so that Veterans and providers can compare the average wait times between VHA and the community for the selected clinical service. [June 22, 2020]Adjustment to VHA Average Wait Time- The internal appointment data logic in DST will temporarily be adjusted to capture pending or completed appointments back to January 1, 2020 and forward as a result of the COVID-19 impact on VHA appointments. [June 22, 2020]

Clinical Services Synonyms

- As of May 19, 2020, DST supports Clinical Service Synonyms. When you are selecting the clinical service, you can start typing the value you are looking for. Common synonyms are searchable and will appear in the drop down along with the official clinical service name. When you select a Clinical service synonym from the drop-down list, the official clinical service name will be displayed. Only official clinical service names will be saved with the DST information and written to the consult when signed.Example: Value typed in the Clinical Service field: Acupuncture Clinical Service drop-down option displays: Acupuncture <Complementary and Integrative Health Treatment> When selected, Clinical Service field displays: Complementary and Integrative Health Treatment

Clinical Service Mapping Updates

- As of May 19, 2020, the following Clinical Services have been added and are available for selection in DST, per the MCAO FY20 Mid-Year Active Stop Codes list (http://vaww.dss.med.va.gov/programdocs/pd_oident.asp):391 Cardiac ECHO392 Ambulatory ECG MonitoringThe following Clinical Services have been renamed, per the MCAO FY20 Mid-Year Active Stop Codes list (http://vaww.dss.med.va.gov/programdocs/pd_oident.asp):311 Cardiac Implantable Electronic Devices (CIED) (previously Pacemaker)372 Weight Management and MOVE! Program- Individual (previously MOVE! Program- Individual)

Community Care Average Wait Time

- Beginning on June 22, 2020, DST will display the average wait times of all community care appointments booked or completed under Standard Episodes of Care (SEOCs) related to the requested clinical service, based on a rolling 90-day assessment. Community care wait time is calculated by determining the average time from the date a community care appointment is made to the date of the appointment itself, as recorded in Health Share Referral Manager (HSRM). The mapping table that indicates which SEOCs are associated with each clinical service is available on the DST SharePoint site: https://dvagov.sharepoint.com/sites/vacovha/DUSHCC/DC/DO/CI/S/Decision%20Support%20Tool/Forms/AllItems.aspx

Community Care Average Wait Time

The average wait times reflected for community care appointments are based on the community care appointments captured in HSRM. The specific calculation is based on the following:Days between the appointment made date and the appointment date based on HSRM calculations HSRM referrals with an appointment in booked or completed status and an appointment date time within the past 90 daysExclusionsAppointments with a null made date or appointment dateAppointments with a made date greater than the appointment dateNo minimum referral number required in order to capture the community care wait time average

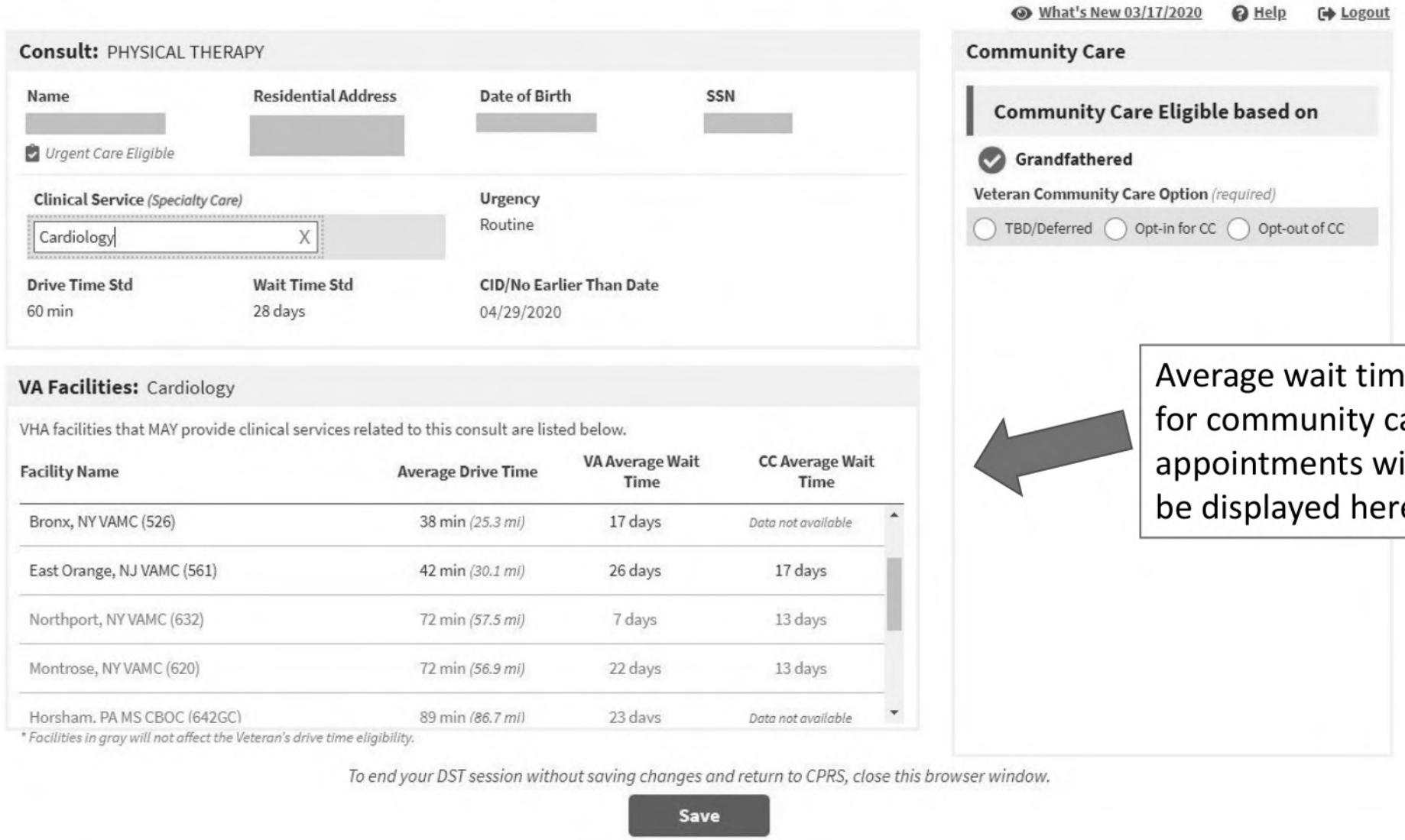
Community Care Average Wait Time

- The addition of the community care average wait time to DST will assist end users, to include the Referral Coordination Team (RCT) and specialty clinic schedulers, when having that thoughtful conversation with Veterans regarding their VA and community care options and the average wait times both in VA and community care. It is important to note: DST is providing the average wait time for both calculations and not the exact wait time. The methodology of the calculations is similar but a different date parameter is applied. In both situations, the exact wait time is determined at the time of scheduling into the specific clinic where the Veteran is to be seen, when knowledge of the next available appointment is accessible. The data for facility community care offices currently under PC3 that have the TPA schedule for them will not be all inclusive, as these sites do not use HSRM to process community care referrals. The data for these sites will reflect the most up to date average community care wait time once they begin to use HSRM for referral management.

Community Care Average Wait Time

When having the conversation with the Veteran, after community care eligibility has been determined, the end user should be aware of the following:1. Available options within the VA to provide the care (i.e. Interfacility Consult (IFC), e-consult, Telehealth (TH) etc.)2. Review the average wait times in the community and within the VA for the care being requested in order to provide the patient with an overall idea on the appointment wait time, once the request is routed. 3. Emphasize that the average community wait times presented in DST are not reflective of the actual available appointments at any one community provider's office, but an average of all community providers who offer the service to Veterans seen at this VAMC's Healthcare system (CBOCs and off-site facilities).4. If the Veteran opts into community care, capture their Community Care Scheduling Preferences (per Field Guidebook chapter 2, section 2.19) prior to forwarding the consult to a community care consult title.

DST Dashboard with Community Care Wait Time



DST VHA Average Wait Time

- During the COVID-19 Pandemic, many VA facilities have seen a reduction in the number of face to face VHA appointments scheduled or have been offering telehealth alternatives for more than 60 days. For this reason, some VA facilities that do offer specific services are no longer seeing this information reflected in the DST facilities list. To resolve this issue, the algorithm used to capture VHA Average Wait Time data in DST will be temporarily updated to identify VA facilities within the search radius that report pending or completed appointments back to January 1, 2020 linked to consults associated with the stop code of the selected clinical service. Facilities that only offer the service via telehealth are excluded. The search radius logic in DST searches the Provider Profile Management System (PPMS) for VA facilities within a defined radius of the Veteran's residential address (100 miles for Specialty Care; 40 miles for Primary Care / Mental Health) that may offer the requested service.

Frequently Asked Questions

What must be installed on my desktop for DST to work? Consult Toolbox v1.9.0065 with the DST URL defined must be installed on the user's computer; the user must ensure that Consult Toolbox is enabled (CPRS Tools Menu - Consult Toolbox - Enable). In addition, a patch must be installed at the user's VistA site in order for the DST data to be added to the consult when the order is signed. Furthermore, the Google Chrome web browser must be installed on the user's machine. If you are unsure if your computer is compatible with DST, please contact your local IT staff.

Frequently Asked Questions

Is it required that all community care consults have at least one (1) staff person run DST on it?No, use of the DST is not nationally mandated for any VA staff person. Providers may choose not to launch DST. Even if the provider has not run DST, it is not required that the scheduler use DST. Nevertheless, use of DST is highly encouraged in order to review a Veteran's eligibility for Community Care and document the care decision. Also, if the ordering provider strongly feels that the Veteran is eligible for community care based on Best Medical Interest, the ordering provider should launch DST at the time of entering the consult and capture the BMI eligibility at that time. The consult will still be routed to the (RCT) or Specialty clinic for review and final referral to community care, if appropriate.

Frequently Asked Questions

Why doesn't the residential address in DST match the Veteran's current address?DST displays the Veteran's residential address as documented in the Enrollment System (ES), not CPRS. If the address in DST is incorrect, please make the needed update in the ES. You may need to work with your facility enrollment office to make the appropriate corrections in ES. Allow two to three (2-3) business days for the change to reach DST.

Frequently Asked Questions

Cardiology at our VAMC shows an average wait time of 20 days in the DST and our real clinic availability is out about 50 days. DST does not allow us to show that the eligibility is really due to wait time. Why doesn't DST's wait time data match our availability? It's important to note two (2) things:Average wait time and next available appointment are different metrics. We would never expect average wait time to match actual clinic availability. Average wait time data in DST is displayed for reference only. DST should not be used to determine wait time eligibility. It is determined on a case by case basis by the MSA at the point of scheduling, who may use Consult Toolbox to document the eligibility and Veteran's opt-in decision.

Frequently Asked Questions

How does DST identify which facilities to display? Sometimes my VAMC doesn't show up, and sometimes a facility on the list does not offer the consult service I'm ordering. DST searches PPMS for VA facilities within a defined radius of the Veteran's residential address (40 miles for Primary Care/Mental Health; 100 miles for Specialty Care) that may offer the requested clinical service. Because clinical service is broader than the specific consult service, DST may display facilities that do not actually offer the specific consult service.DST will display VA facilities within this search radius that report pending or completed appointments within the last 60 days (see Note 2) linked to consults associated with the stop code of the selected clinical service. Facilities that only offer the service via telehealth will be excluded.Note 1: When the selected clinical service is one (1) of the five (5) direct scheduling services, DST will display facilities that have reported workload in the stop code within the last 60 days, regardless of whether the appointments were linked to consults. The five (5) exceptions are: Primary Care, Optometry, Audiology (including Hearing Aid Services), Podiatry, and NutritionNote 2: A temporary modification will take effect on June 22, 2020. The algorithm will identify VHA facilities within the search radius that have reported pending or completed appointments from January 1, 2020 onward linked to consults associated with the stop code of the selected clinical service.

Frequently Asked Questions

DST is displaying a facility that does not offer the consult service I'm ordering. How can I correctly capture the Veteran's community care eligibility? In the case that the DST facility list misrepresents a Veteran's community care eligibility, VA staff may use Consult Toolbox at the time of forwarding the internal VA consult to a community care consult to document the eligibility, as appropriate.

Action Required & Resources

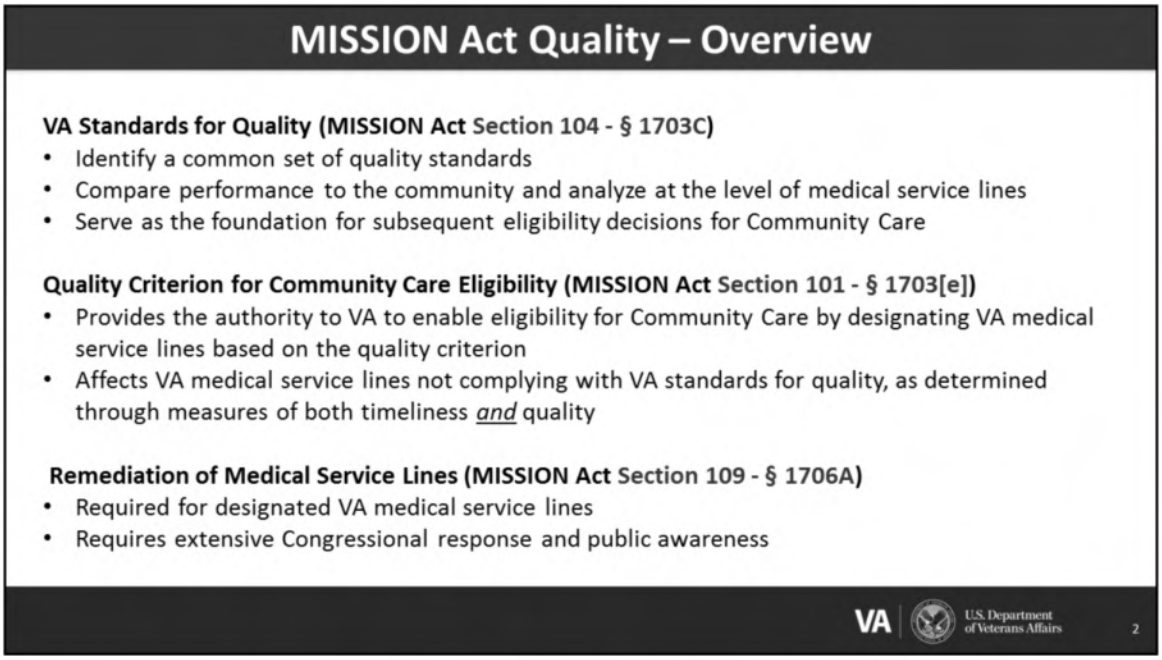
Action Required:In order to access the latest version of DST, ensure that you have installed the most current version of Consult Toolbox. As of May 10, 2020, all workstations should have installed Consult Toolbox v1.9.0065.ResourcesDST SharePoint site: https://dvagov.sharepoint.com/sites/vacovha/DUSHCC/DC/DO/CI/S/Decision%20Support%20Tool/Forms/AllItems.aspxeLearning course 'DST for Administrative Staff' on the Community Care Hub: https://vaww.va.gov/COMMUNITYCARE/cchub/training/care-coordination.aspGuidance on DST to include the addition of community care wait times can be reviewed in Chapter 2 of the Office of Community Care Field GuidebookCourses on Talent Management System 2.0 (TMS): https://www.tms.va.gov/SecureAuth35/ Course ID 38464 – Decision Support Tool (DST) Complete OverviewCourse ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) **of Clinical Integration**

Questions?

We will remain on the line until the top of the hour to answer any DST-related questions.

MISSION Act Quality Standards and Related Activities

VHA Office of Quality and Patient Safety (QPS)
September 1, 2021



MISSION Act-specific needs, distinct from routine VHA improvement and consultation

VA Standards for Quality and Measures*

VHA Standards	Initial Measures
Timely Care: Provided without inappropriate or harmful delays	Patient-reported measures on getting timely appointments, care, and information Wait times for outpatient care
Effective Care: Based on scientific knowledge of what is likely to provide benefit to Veterans	Smoking and Tobacco Use Cessation Immunization for Influenza
	Breast and Cervical Cancer Screening
	Mortality Rates - Risk Adjusted Controlling high blood pressure Beta-blocker treatment after heart attack
	Comprehensive Diabetes Care – Blood Pressure and Glucose control
	Improvement in function (short-stay nursing home patients) Newly received antipsychotic medications (short-stay nursing home patients)
Safe Care: Avoids harm from care that is intended to help Veterans	Catheter and central line associated infection rates C. difficile infection rate
	Death rate among surgical patients with serious treatable complications
	Nursing home safety measures
Veteran-Centered Care: Anticipates and responds to Veterans specific needs	Patient's overall rating of the Provider Patient's rating of Coordination of Care
	HCAHPS Overall Rating of Hospital HCAHPS Care Transition Measure

*This represents a condensed version of the list of measures posted on the Federal Register on 10/3/2019

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Things to Remember…

- VA standards for quality reflect care that is **timely, effective, safe, and Veteran-centered**.
- VA **compares its care** to the care provided in the community.
- Where VA compares favorably to the community, **that's great**!
- Where we do not, we are committed to improving our care.
- If there is **a significant or serious concern**, Veterans have the option to receive care in the community for specific medical services that do not meet the VA standards for quality and timeliness while remediations are underway at their VA facility.

Quality Criterion for Community Care Eligibility Section 101 - § 1703[e]

Veterans may be provided the option for community care if a medical service line* does not meet VA's standards for quality based on two conditions:

- **Quality – compared to community (2 or more measures)**
- **Timeliness – compared to same service line at other VA facilities**

Example: If VA has identified that the cardiology service line at a local VA medical facility is not providing care that meets VA's standards for quality, the Veteran may be able to elect to receive their cardiology care in the community. However, there may be limits on when, where, and what is available under this criterion.

*Medical service line - "a specific medical service or set of services delivered in a VA facility."
Source: VA regulations (AQ-46)

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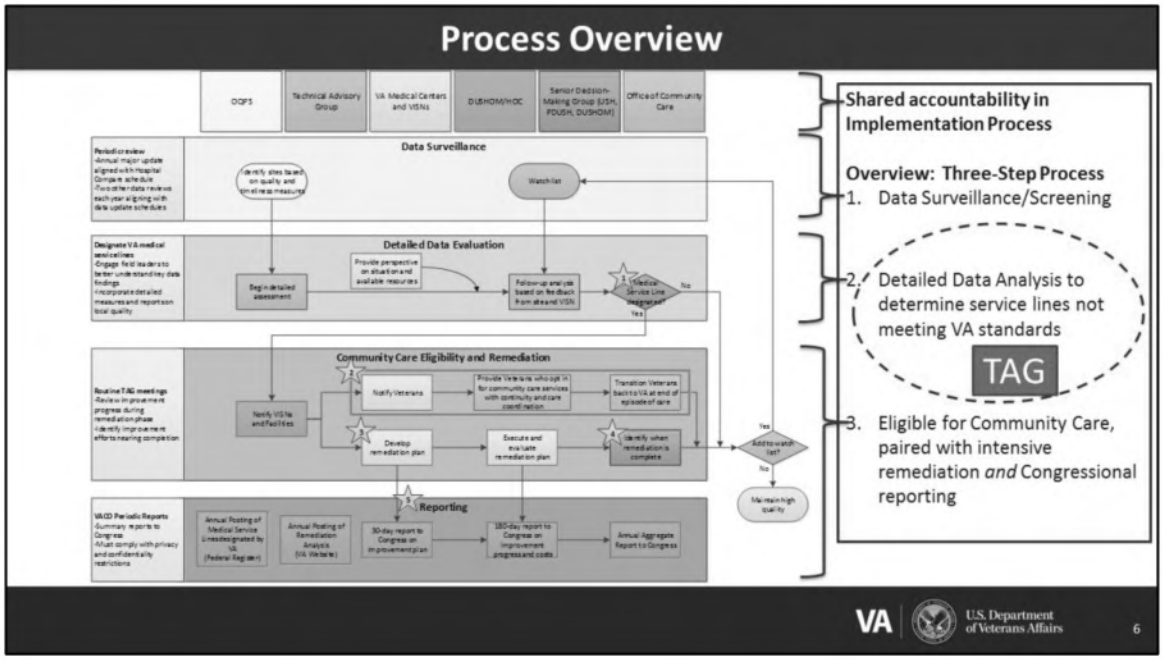
Process Overview
OCPS
Technical Advisory Group
VA Medical Centers and VISNs
DUSHOM/HOC
Senior Decision-Making Group (USH, PDUSH, DUSHOM)
Office of Community Care
Data Surveillance
Identify sites based on quality and timeliness measures
Watchlist
Detailed Data Evaluation
Provide perspective on situation and available resources
Begin detailed assessment
Follow-up analysis based on feedback from site and VISN
Medical Service Line Assessment
No
Yes
Community Care Eligibility and Remediation
Notify VISNs and Facilities
Notify Veterans
Provide Veterans who opt in for community care services with continuity and care coordination
Transition Veterans back to VA at end of episode of care
Develop remediation plan
Execute and evaluate remediation plan
Identify when remediation is complete
Add to watch list?
Yes
No
Maintain high quality
Reporting
Annual Posting of Medical Service Lines designated by VA (Federal Register)
Annual Posting of Remediation Analysis (VA Website)
30-day report to Congress on improvement plan
180-day report to Congress on improvement progress and costs
Annual Aggregate Report to Congress
Shared accountability in Implementation Process
Overview: Three-Step Process
1. Data Surveillance/Screening
2. Detailed Data Analysis to determine service lines not meeting VA standards
TAG
3. Eligible for Community Care, paired with intensive remediation and Congressional reporting
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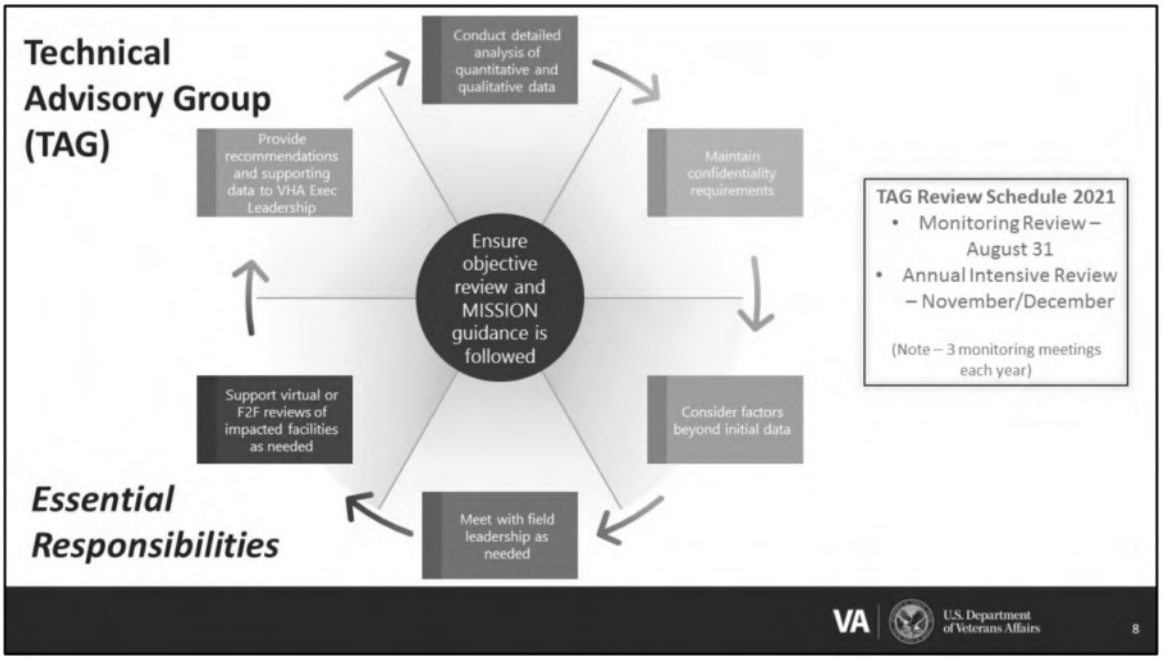
Surveillance Logic Leading to Technical Advisory Group (TAG) Evaluation

Data Surveillance

- Measures are triggered through comparisons against a benchmark (one or two standard deviations worse than the benchmark average)
  - Timeliness measures are compared with internal VA data
  - Quality measures are primarily compared with community data
- Medical Service Lines are flagged in timeliness and/or quality
  - Flagging is based on the number of triggered measures
  - For example, Primary Care at Everytown VAMC is flagged in quality due to triggering in two quality measures

Detailed Data Evaluation

- Any Medical Service Line flagged in both timeliness **and** quality is brought to the TAG for further evaluation
- The TAG reports Detailed Data Evaluation findings to the Senior Decision-Making Group (USH's Office) to inform their recommendations to the VA Secretary on medical service lines to be designated


Technical Advisory Group (TAG)
Conduct detailed analysis of quantitative and qualitative data
Maintain confidentiality requirements
Consider factors beyond initial data
Meet with field leadership as needed
Support virtual or F2F reviews of impacted facilities as needed
Provide recommendations and supporting data to VHA Exec Leadership
Ensure objective review and MISSION guidance is followed
Essential Responsibilities
TAG Review Schedule 2021
• Monitoring Review – August 31
• Annual Intensive Review – November/December
(Note – 3 monitoring meetings each year)
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VA and Community Surveillance Data Availability

Measures	Deviation from Mean	Benchmark	Date Ranges	COVID
Wait times	2 std. dev.	Nation-wide		May FY20-AprFY21 Oct FY21-DecFY21
Outpatient CAHPS	1 std. dev.	Nation-wide	FY20	Apr FY20-Mar FY21
Hospital CAHPS	1 std. dev.	State Average	Jan CY19-DecCY19	Apr FY20-Mar FY21
HEDIS (non-eQM)	1 std. dev.	Region*	Jan CY19-DecCY19	Oct FY2[illegible]-Mar FY21
HEDIS (eQM)	1 std. dev.	Region*	Jan CY19-DecCY19	Aug FY20-Mar FY21
Skilled Nursing	1 std. dev.	Nation-wide	Jan CY19-DecCY19	Apr FY20-Mar FY21
Mortality	1 std. dev.	Nation-wide	July FY17-Dec FY20 July CY17-DecCY19	
Complications	1 std. dev.	Nation-wide	Apr CY19-Sep CY19	Apr FY20-Mar FY21

Jul-17 Dec-17 Jul-18 Dec-18 Jul-19 Dec-19 Jul-20 Dec-20 Jul-21

VA Community VA Baseline

*Some facilities were scored against a national benchmark due to a lack of sufficient sample sizes for regional data (flu and tobacco measures)

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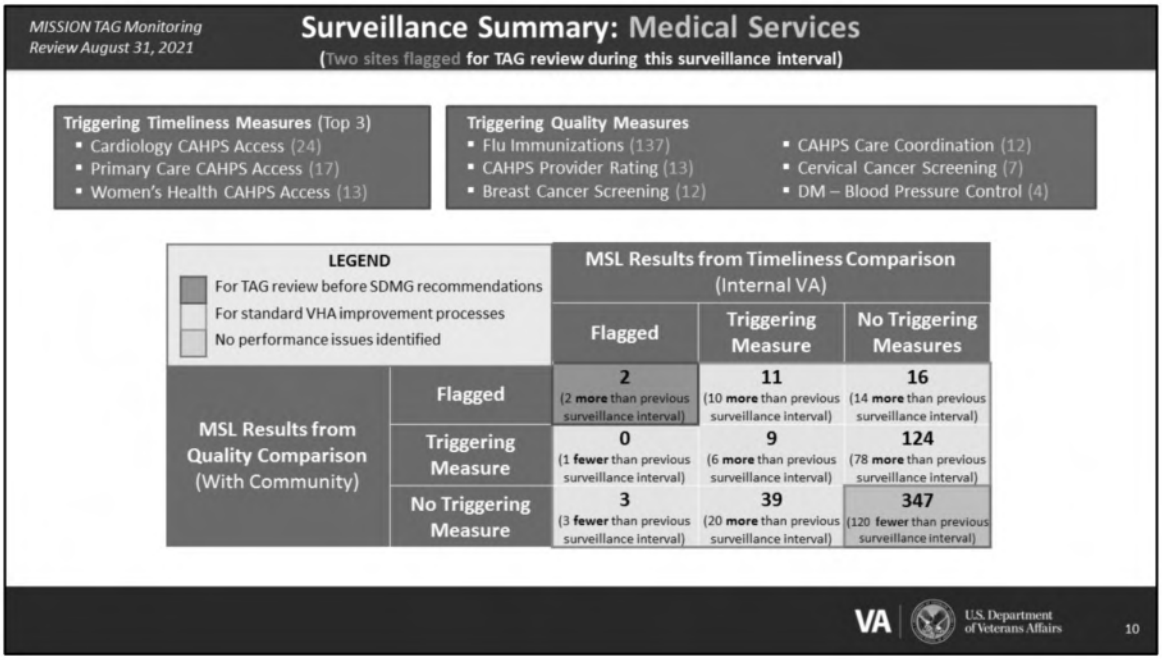

MISSION TAG Monitoring
Review August 31, 2021

Surveillance Summary: Medical Services

(Two sites flagged **for TAG review during this surveillance interval)**

Triggering Timeliness Measures (Top 3)
- Cardiology CAHPS Access (24)
- Primary Care CAHPS Access (17)
- Women's Health CAHPS Access (13)

Triggering Quality Measures
- Flu Immunizations (137)
- CAHPS Provider Rating (13)
- Breast Cancer Screening (12)
- CAHPS Care Coordination (12)
- Cervical Cancer Screening (7)
- DM – Blood Pressure Control (4)

LEGEND
- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

MSL Results from Quality Comparison (With Community)	MSL Results from Timeliness Comparison (Internal VA): Flagged	Triggering Measure	No Triggering Measures
Flagged	**2** (2 **more** than previous surveillance interval)	**11** (10 **more** than previous surveillance interval)	**16** (14 **more** than previous surveillance interval)
Triggering Measure	**0** (1 **fewer** than previous surveillance interval)	**9** (6 **more** than previous surveillance interval)	**124** (78 **more** than previous surveillance interval)
No Triggering Measure	**3** (3 **fewer** than previous surveillance interval)	**39** (20 **more** than previous surveillance interval)	**347** (120 **fewer** than previous surveillance interval)

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MISSION TAG Monitoring Review August 31, 2021

Surveillance Summary: Hospital Care

(No sites flagged for TAG review during this surveillance interval)

Triggering Quality Measures

- CLABSI (18)
- CAUTI (13)
- HCAHPS Hospital Rating (11)
- HCAHPS Care Transition (10)

Due to the lack of timeliness measures, Inpatient medical service lines **may not be designated** by the VA Secretary, per MISSION Act requirements.

LEGEND

- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

MSL Results from Quality Comparison (With Community)	MSL Results from Timeliness Comparison (Internal VA)		
	Flagged	**Triggering Measure**	**No Triggering Measures**
Flagged	N/A	N/A	**13** (4 **more** than previous surveillance interval)
Triggering Measure	N/A	N/A	**24** (7 **fewer** than previous surveillance interval)
No Triggering Measure	N/A	N/A	**92** (2 **more** than previous surveillance interval)

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MISSION TAG Monitoring Review August 31, 2021

Surveillance Summary: Extended Care Services

(No sites flagged for TAG review during this surveillance interval)

Triggering Quality Measures:
Short Stay
- Antipsychotic Medications (26)
- Functional Improvement (8)
- Pressure Ulcer (0)

Triggering Quality Measures:
Long Stay
- Falls with Major Injury (4)
- Physical Restraints (3)

Due to the lack of timeliness measures, Skilled Nursing Home medical service lines **may not be designated** by the VA Secretary, per MISSION Act requirements.

LEGEND
- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

MSL Results from Quality Comparison (With Community)	MSL Results from Timeliness Comparison (Internal VA): Flagged	Triggering Measure	No Triggering Measures
Flagged	N/A	N/A	7 (3 **more** than previous surveillance interval)
Triggering Measure	N/A	N/A	27 (3 **fewer** than previous surveillance interval)
No Triggering Measure	N/A	N/A	98 (same as previous surveillance interval)

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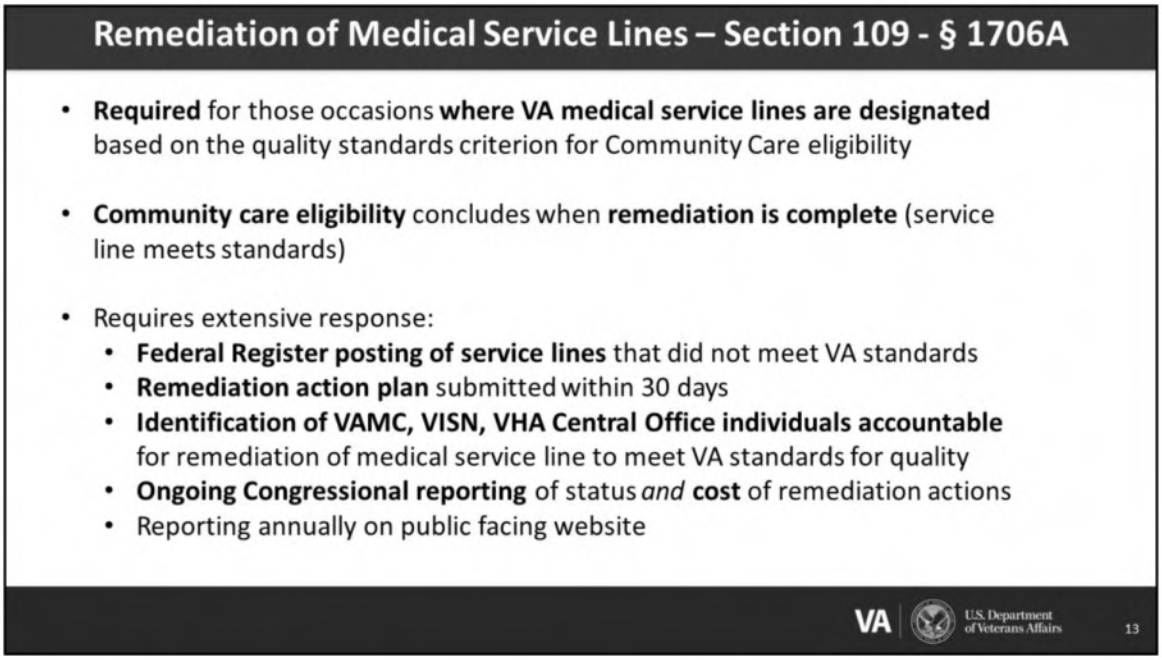

MISSION Act-specific needs, distinct from routine VHA improvement and consultation

Mission Act Quality Standards Tracking Report (MAQSTR)

The MISSION Act Quality Standards Tracking Report (MAQSTR) is designed to help compare VHA performance measure results to comparable community benchmarks

The main report displays:

- Measure Domains
- Short description of performance measures
- Preferred data direction
- Short description of performance measures
- Quarterly and yearly data
- Community scores
- Facility prior year score
- Links to the source reports
- Measure data timeframes

https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/IPEC/NDPP/NDPP_Production/NDPP

Appendix – Supporting Materials

MISSION Act Requirements

MISSION Act Requirements – Section 101

✓ – Measure quality of a medical service line of a VA facility by comparing it with 2 or more distinct and appropriate quality measures at non-Department medical service lines

✓ – Measure timeliness of the medical service line of a VA facility by comparing with the same medical service line at different Department facilities

Are there differences between the quality criterion and other eligibility criteria for community care?

Other Eligibility Criteria

- Criteria are applied on a **case-by-case basis** using information **specific to each Veteran. Veteran decision to opt-in or opt-out**
- The **decision to use the criteria is made at the clinic or provider level**
- Available for use any time a Veteran is eligible**, without any limit**
- These criteria are **always active**, so Veterans are eligible **any time the conditions are met**

Standards for Quality

- Criterion applies to the **entire medical service line based on analysis for care. Veteran decision to opt-in or opt-out**
- The **decision to use the criterion is made by the VA Secretary** based on the analysis of the data
- **Cap limit placed by Congress on the number of service lines eligible (3 locally and 36 nationally)**
- When the **service line MEETS the standards** for quality, **this eligibility for community care ends**

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Full Measure List by VA Medical Service Line – 11/2020 to Present

Medical Service Line	Timeliness Measures (VA Internal Comparison)	Quality Measures (Community Comparison)	
Primary Care (PC)	% Wait Within 20 Days from CD CAHPS Routine (bottom box) CAHPS Urgent (bottom box) CAHPS Questions (bottom box)	Smoking and Tobacco Cessation Counselling Flu Immunization Controlling High Blood Pressure** Risk Adjusted Mortality Rate for CHF** Beta-Blocker Treatment After Heart Attacks**	Diabetes Management – HbA1c Poor Control** Diabetes Management – Blood Pressure Control** Care Coordination Overall Rating of Provider
Women's Health (WH)	% Wait Within 20 Days from CD CAHPS Routine (bottom box) CAHPS Urgent (bottom box) CAHPS Questions (bottom box)	Breast Cancer Screening Cervical Cancer Screening	
Cardiology (Card)	% Wait Within 28 Days from CD CAHPS Routine (bottom box) CAHPS Urgent (bottom box) CAHPS Questions (bottom box)	Controlling High Blood Pressure** Risk Adjusted Mortality Rate for CHF**	Risk Adjusted Mortality Rate for AMI Beta-Blocker Treatment After Heart Attacks**
Endocrinology (PC)	% Wait Within 28 Days from CD	Diabetes Management – HbA1c Poor Control**	Diabetes Management – Blood Pressure Control**
Skilled Nursing Facilities (SNF)*	N/A	Functional Improvement (Short Stay) Antipsychotic Medications (Short Stay) Pressure Ulcers (Short Stay)	Physical Restraints (Long Stay) Falls with Major Injury (Long Stay)
Acute Medicine & Surgery (AMS)*	N/A	Risk Adjusted Mortality Rate for COPD Risk Adjusted Mortality Rate for Pneumonia Catheter Associated Urinary Tract Infection Central Line Associated Bloodstream Infection	C. Diff Infection Surgical Mortality Rate – Severe Complications Care Transition Overall Rating of Hospital

* No timeliness measures are available for this medical service line, so it is not able to be designated according to MISSION Act requirements.
** Measure not able to be broken out with MSL-specific filters, so same aggregate data is used to flag both MSLs using this measure.

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Factors for Consideration in TAG Evaluation

- VA Regulations specify that consideration of additional factors will occur prior to designation decision
- Consideration during detailed data evaluation is not limited to these factors alone

Factor	Description*
Clinical Significance	Whether the differences between performance of individual VA medical service lines, and between performance of VA medical service lines and non-VA medical service lines are clinically significant.
Ease of Remediation	Likelihood and ease of remediation of the VA medical service line within a short timeframe.
Recent Trends	Recent trends concerning the VA medical service line or non-VA medical service line.
Number of Covered Veterans	The number of covered Veterans served by the medical service line or that could be affected by the designation.
Impact on Patient Outcomes	The potential impact on patient outcomes.
Collateral Effects	The effect that designating one VA medical service line would have on other VA medical service lines.

* From 38 CFR Part 17 § 17.4015 (e)

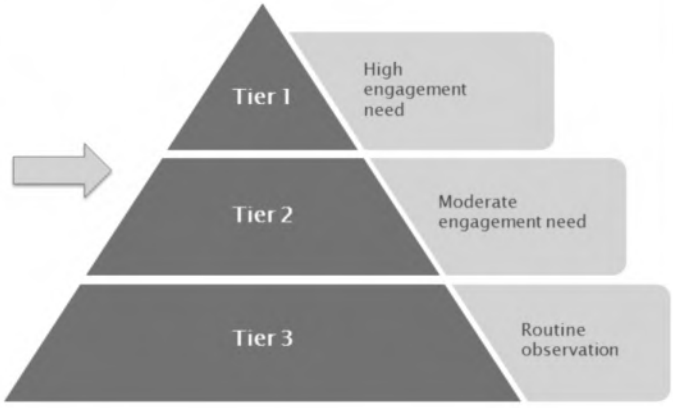
What about VAMCs needing support outside the MISSION process?

- It is anticipated that there may be VAMCs with medical service lines which are experiencing challenges but do not meet the requirements for MISSION Act related remediation.
- Remediation efforts under the parameters of the MISSION Act are separate from VHA's ongoing consultation, improvement and monitoring activities undertaken by VISNs and VHACO Program Offices.
- **Sites *not* triggered under MISSION** – the TAG has the option to recommend that a VAMC medical service line *(not triggered under MISSION)* explore support options from the VISN or relevant program office to help drive quality improvement and high value care for Veterans.
- **Sites triggered under MISSION –** the TAG may also recommend additional VISN or programmatic support for sites *triggered under MISSION* as an adjunct to formal remediation. In these cases, reporting of other improvement efforts is completed through existing channels – separate to the specific remediation reporting requirements under the Act.

QPS/CIC's Engagement Protocol for Improvements in Quality (EPIQ)

Strategic Engagement Needs Algorithm (SENA)

- **Relative Comparison**
  - ≥40% metrics in 5th quintile of SAIL
  - ≥65% metrics in 4th or 5th quintiles of SAIL
- **Absolute Improvement or Decline**
  - >50% of all SAIL metrics worsened from 1 year ago
  - >50% of all SAIL supporting indicators worsened from 1 year ago
- **Community Comparison**
  - Under-served VA (Mental Health and Primary Care)
  - **MISSION Act (Monitor List)**



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MISSION Act Quality Standards and Related Activities

VHA Office of Quality and Patient Safety (QPS)
September 1, 2021

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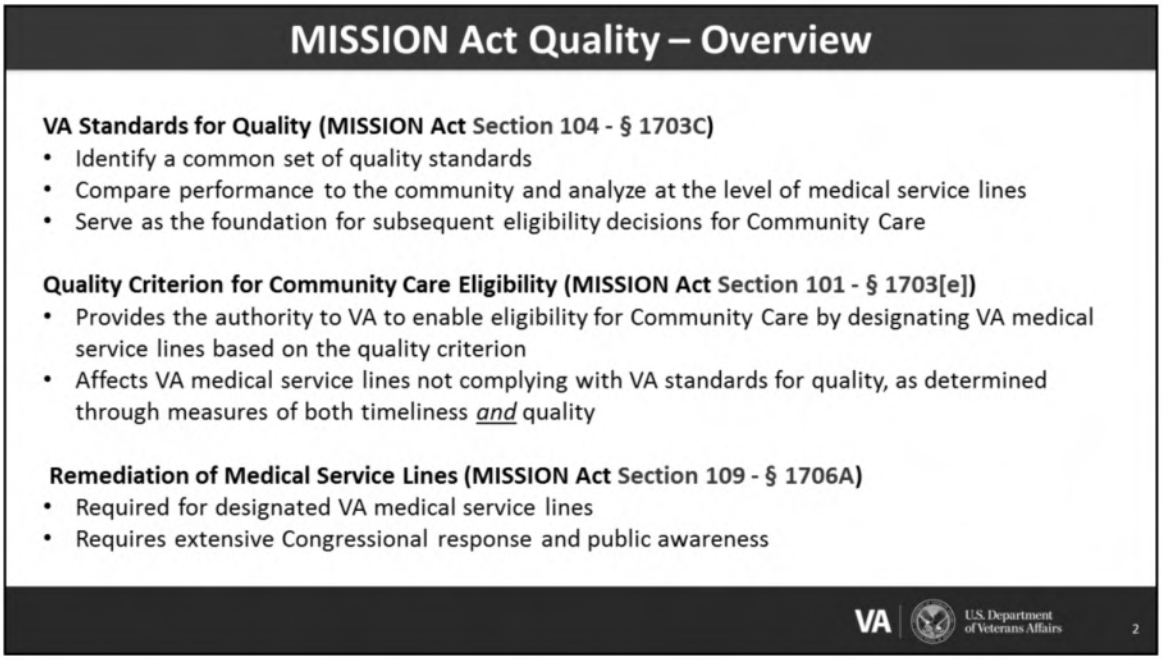

MISSION Act-specific needs, distinct from routine VHA improvement and consultation

VA Standards for Quality and Measures*

VHA Standards	Initial Measures
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	Breast and Cervical Cancer Screening
	Mortality Rates - Risk Adjusted Controlling high blood pressure Beta-blocker treatment after heart attack
	Comprehensive Diabetes Care – Blood Pressure and Glucose control
	Improvement in function (short-stay nursing home patients) Newly received antipsychotic medications (short-stay nursing home patients)
Safe Care: Avoids harm from care that is intended to help Veterans	Catheter and central line associated infection rates C. difficile infection rate
	Death rate among surgical patients with serious treatable complications
	Nursing home safety measures
Veteran-Centered Care: Anticipates and responds to Veterans specific needs	Patient's overall rating of the Provider Patient's rating of Coordination of Care
	HCAHPS Overall Rating of Hospital HCAHPS Care Transition Measure

*This represents a condensed version of the list of measures posted on the Federal Register on 10/3/2019

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Things to Remember…

- VA standards for quality reflect care that is **timely, effective, safe, and Veteran-centered**.
- VA **compares its care** to the care provided in the community.
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- Where we do not, we are committed to improving our care.
- If there is **a significant or serious concern**, Veterans have the option to receive care in the community for specific medical services that do not meet the VA standards for quality and timeliness while remediations are underway at their VA facility.

Quality Criterion for Community Care Eligibility Section 101 - § 1703[e]

Veterans may be provided the option for community care if a medical service line* does not meet VA's standards for quality based on two conditions:

- **Quality – compared to community (2 or more measures)**
- **Timeliness – compared to same service line at other VA facilities**

Example: If VA has identified that the cardiology service line at a local VA medical facility is not providing care that meets VA's standards for quality, the Veteran may be able to elect to receive their cardiology care in the community. However, there may be limits on when, where, and what is available under this criterion.

*Medical service line - "a specific medical service or set of services delivered in a VA facility."
Source: VA regulations (AQ-46)

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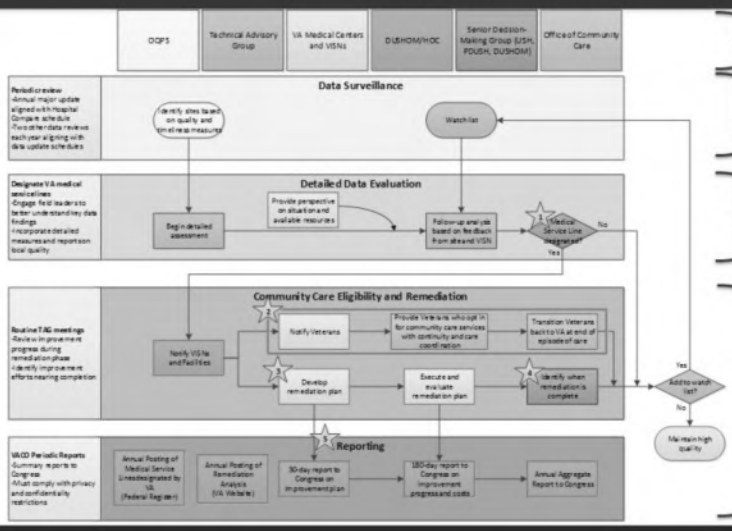
Process Overview



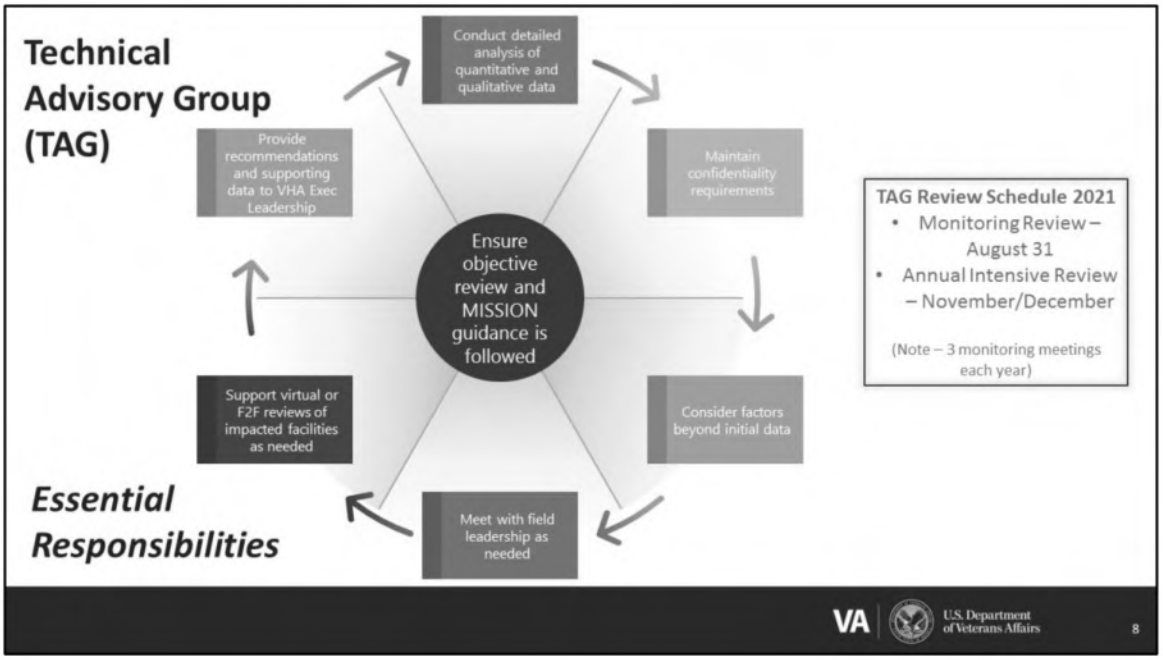
Surveillance Logic Leading to Technical Advisory Group (TAG) Evaluation

Data Surveillance

- Measures are triggered through comparisons against a benchmark (one or two standard deviations worse than the benchmark average)
  - Timeliness measures are compared with internal VA data
  - Quality measures are primarily compared with community data
- Medical Service Lines are flagged in timeliness and/or quality
  - Flagging is based on the number of triggered measures
  - For example, Primary Care at Everytown VAMC is flagged in quality due to triggering in two quality measures

Detailed Data Evaluation

- Any Medical Service Line flagged in both timeliness **and** quality is brought to the TAG for further evaluation
- The TAG reports Detailed Data Evaluation findings to the Senior Decision-Making Group (USH's Office) to inform their recommendations to the VA Secretary on medical service lines to be designated


Technical Advisory Group (TAG)
Conduct detailed analysis of quantitative and qualitative data
Maintain confidentiality requirements
Consider factors beyond initial data
Meet with field leadership as needed
Support virtual or F2F reviews of impacted facilities as needed
Provide recommendations and supporting data to VHA Exec Leadership
Ensure objective review and MISSION guidance is followed
Essential Responsibilities
TAG Review Schedule 2021
• Monitoring Review – August 31
• Annual Intensive Review – November/December
(Note – 3 monitoring meetings each year)
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VA and Community Surveillance Data Availability

Measures	Deviation from Mean	Benchmark	Date Ranges	COVID
Wait times	2 std. dev.	Nation-wide		May FY20-AprFY21 Oct FY21-DecFY21
Outpatient CAHPS	1 std. dev.	Nation-wide	FY20	Apr FY20-Mar FY21
Hospital CAHPS	1 std. dev.	State Average	Jan CY19-DecCY19	Apr FY20-Mar FY21
HEDIS (non-eQM)	1 std. dev.	Region*	Jan CY19-DecCY19	Oct FY2[illegible]Mar FY21
HEDIS (eQM)	1 std. dev.	Region*	Jan CY19-DecCY19	Aug FY20-Mar FY21
Skilled Nursing	1 std. dev.	Nation-wide	Jan CY19-DecCY19	Apr FY20-Mar FY21
Mortality	1 std. dev.	Nation-wide	July FY17-Dec FY20 July CY17-DecCY19	
Complications	1 std. dev.	Nation-wide	Apr CY19-Sep CY19	Apr FY20-Mar FY21

Jul-17 Dec-17 Jul-18 Dec-18 Jul-19 Dec-19 Jul-20 Dec-20 Jul-21

VA Community VA Baseline

*Some facilities were scored against a national benchmark due to a lack of sufficient sample sizes for regional data (flu and tobacco measures)

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MISSION TAG Monitoring Review August 31, 2021

Surveillance Summary: Medical Services

(Two sites flagged **for TAG review during this surveillance interval)**

Triggering Timeliness Measures (Top 3)
- Cardiology CAHPS Access (24)
- Primary Care CAHPS Access (17)
- Women's Health CAHPS Access (13)

Triggering Quality Measures
- Flu Immunizations (137)
- CAHPS Provider Rating (13)
- Breast Cancer Screening (12)
- CAHPS Care Coordination (12)
- Cervical Cancer Screening (7)
- DM – Blood Pressure Control (4)

LEGEND
- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

MSL Results from Quality Comparison (With Community)	MSL Results from Timeliness Comparison (Internal VA): Flagged	Triggering Measure	No Triggering Measures
Flagged	**2** (2 **more** than previous surveillance interval)	**11** (10 **more** than previous surveillance interval)	**16** (14 **more** than previous surveillance interval)
Triggering Measure	**0** (1 **fewer** than previous surveillance interval)	**9** (6 **more** than previous surveillance interval)	**124** (78 **more** than previous surveillance interval)
No Triggering Measure	**3** (3 **fewer** than previous surveillance interval)	**39** (20 **more** than previous surveillance interval)	**347** (120 **fewer** than previous surveillance interval)

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MISSION TAG Monitoring Review August 31, 2021

Surveillance Summary: Hospital Care

(No sites flagged for TAG review during this surveillance interval)

Triggering Quality Measures

- CLABSI (18)
- CAUTI (13)
- HCAHPS Hospital Rating (11)
- HCAHPS Care Transition (10)

Due to the lack of timeliness measures, Inpatient medical service lines **may not be designated** by the VA Secretary, per MISSION Act requirements.

LEGEND

- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

		MSL Results from Timeliness Comparison (Internal VA)		
		Flagged	**Triggering Measure**	**No Triggering Measures**
MSL Results from Quality Comparison (With Community)	**Flagged**	N/A	N/A	**13** (4 **more** than previous surveillance interval)
	Triggering Measure	N/A	N/A	**24** (7 **fewer** than previous surveillance interval)
	No Triggering Measure	N/A	N/A	**92** (2 **more** than previous surveillance interval)

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MISSION TAG Monitoring Review August 31, 2021

Surveillance Summary: Extended Care Services

(No sites flagged for TAG review during this surveillance interval)

Triggering Quality Measures:
Short Stay
- Antipsychotic Medications (26)
- Functional Improvement (8)
- Pressure Ulcer (0)

Triggering Quality Measures:
Long Stay
- Falls with Major Injury (4)
- Physical Restraints (3)

Due to the lack of timeliness measures, Skilled Nursing Home medical service lines **may not be designated** by the VA Secretary, per MISSION Act requirements.

LEGEND
- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

MSL Results from Quality Comparison (With Community)	MSL Results from Timeliness Comparison (Internal VA): Flagged	Triggering Measure	No Triggering Measures
Flagged	N/A	N/A	7 (3 **more** than previous surveillance interval)
Triggering Measure	N/A	N/A	27 (3 **fewer** than previous surveillance interval)
No Triggering Measure	N/A	N/A	98 (same as previous surveillance interval)

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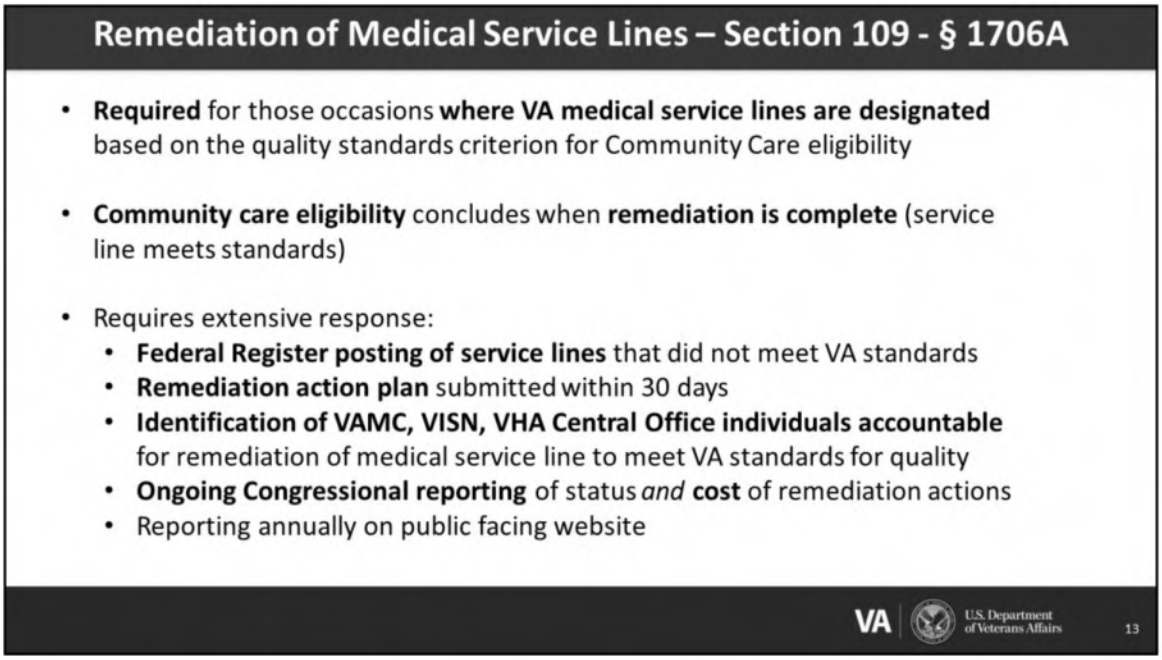

MISSION Act-specific needs, distinct from routine VHA improvement and consultation

Mission Act Quality Standards Tracking Report (MAQSTR)

The MISSION Act Quality Standards Tracking Report (MAQSTR) is designed to help compare VHA performance measure results to comparable community benchmarks

The main report displays:

- Measure Domains
- Short description of performance measures
- Preferred data direction
- Short description of performance measures
- Quarterly and yearly data
- Community scores
- Facility prior year score
- Links to the source reports
- Measure data timeframes

https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/IPEC/NDPP/NDPP_Production/NDPP

Appendix – Supporting Materials

MISSION Act Requirements

MISSION Act Requirements – Section 101

✓ – Measure quality of a medical service line of a VA facility by comparing it with 2 or more distinct and appropriate quality measures at non-Department medical service lines

✓ – Measure timeliness of the medical service line of a VA facility by comparing with the same medical service line at different Department facilities

Are there differences between the quality criterion and other eligibility criteria for community care?

Other Eligibility Criteria

- Criteria are applied on a **case-by-case basis** using information **specific to each Veteran. Veteran decision to opt-in or opt-out**
- The **decision to use the criteria is made at the clinic or provider level**
- Available for use any time a Veteran is eligible**, without any limit**
- These criteria are **always active**, so Veterans are eligible **any time the conditions are met**

Standards for Quality

- Criterion applies to the **entire medical service line based on analysis for care. Veteran decision to opt-in or opt-out**
- The **decision to use the criterion is made by the VA Secretary** based on the analysis of the data
- **Cap limit placed by Congress on the number of service lines eligible (3 locally and 36 nationally)**
- When the **service line MEETS the standards** for quality, **this eligibility for community care ends**

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Full Measure List by VA Medical Service Line – 11/2020 to Present

Medical Service Line	Timeliness Measures (VA Internal Comparison)	Quality Measures (Community Comparison)	
Primary Care (PC)	% Wait Within 20 Days from CD CAHPS Routine (bottom box) CAHPS Urgent (bottom box) CAHPS Questions (bottom box)	Smoking and Tobacco Cessation Counselling Flu Immunization Controlling High Blood Pressure** Risk Adjusted Mortality Rate for CHF** Beta-Blocker Treatment After Heart Attacks**	Diabetes Management – HbA1c Poor Control** Diabetes Management – Blood Pressure Control** Care Coordination Overall Rating of Provider
Women's Health (WH)	% Wait Within 20 Days from CD CAHPS Routine (bottom box) CAHPS Urgent (bottom box) CAHPS Questions (bottom box)	Breast Cancer Screening Cervical Cancer Screening	
Cardiology (Card)	% Wait Within 28 Days from CD CAHPS Routine (bottom box) CAHPS Urgent (bottom box) CAHPS Questions (bottom box)	Controlling High Blood Pressure** Risk Adjusted Mortality Rate for CHF**	Risk Adjusted Mortality Rate for AMI Beta-Blocker Treatment After Heart Attacks**
Endocrinology (PC)	% Wait Within 28 Days from CD	Diabetes Management – HbA1c Poor Control**	Diabetes Management – Blood Pressure Control**
Skilled Nursing Facilities (SNF)*	N/A	Functional Improvement (Short Stay) Antipsychotic Medications (Short Stay) Pressure Ulcers (Short Stay)	Physical Restraints (Long Stay) Falls with Major Injury (Long Stay)
Acute Medicine & Surgery (AMS)*	N/A	Risk Adjusted Mortality Rate for COPD Risk Adjusted Mortality Rate for Pneumonia Catheter Associated Urinary Tract Infection Central Line Associated Bloodstream Infection	C. Diff Infection Surgical Mortality Rate – Severe Complications Care Transition Overall Rating of Hospital

* No timeliness measures are available for this medical service line, so it is not able to be designated according to MISSION Act requirements.
** Measure not able to be broken out with MSL-specific filters, so same aggregate data is used to flag both MSLs using this measure.

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Factors for Consideration in TAG Evaluation

- VA Regulations specify that consideration of additional factors will occur prior to designation decision
- Consideration during detailed data evaluation is not limited to these factors alone

Factor	Description*
Clinical Significance	Whether the differences between performance of individual VA medical service lines, and between performance of VA medical service lines and non-VA medical service lines are clinically significant.
Ease of Remediation	Likelihood and ease of remediation of the VA medical service line within a short timeframe.
Recent Trends	Recent trends concerning the VA medical service line or non-VA medical service line.
Number of Covered Veterans	The number of covered Veterans served by the medical service line or that could be affected by the designation.
Impact on Patient Outcomes	The potential impact on patient outcomes.
Collateral Effects	The effect that designating one VA medical service line would have on other VA medical service lines.

* From 38 CFR Part 17 § 17.4015 (e)

What about VAMCs needing support outside the MISSION process?

- It is anticipated that there may be VAMCs with medical service lines which are experiencing challenges but do not meet the requirements for MISSION Act related remediation.
- Remediation efforts under the parameters of the MISSION Act are separate from VHA's ongoing consultation, improvement and monitoring activities undertaken by VISNs and VHACO Program Offices.
- **Sites *not* triggered under MISSION** – the TAG has the option to recommend that a VAMC medical service line *(not triggered under MISSION)* explore support options from the VISN or relevant program office to help drive quality improvement and high value care for Veterans.
- **Sites triggered under MISSION –** the TAG may also recommend additional VISN or programmatic support for sites *triggered under MISSION* as an adjunct to formal remediation. In these cases, reporting of other improvement efforts is completed through existing channels – separate to the specific remediation reporting requirements under the Act.

QPS/CIC's Engagement Protocol for Improvements in Quality (EPIQ)

Strategic Engagement Needs Algorithm (SENA)

- **Relative Comparison**
  - ≥40% metrics in 5th quintile of SAIL
  - ≥65% metrics in 4th or 5th quintiles of SAIL
- **Absolute Improvement or Decline**
  - >50% of all SAIL metrics worsened from 1 year ago
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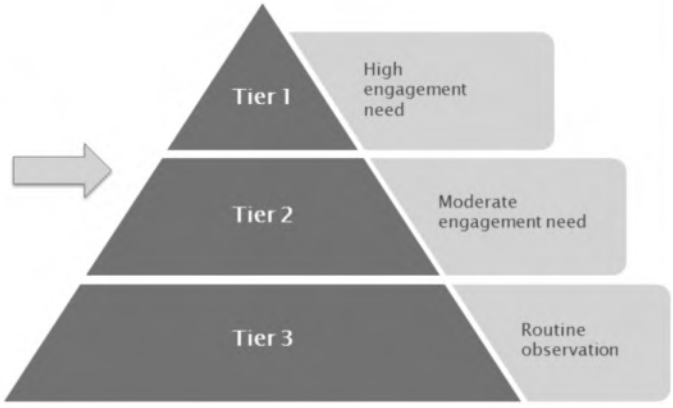

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September 1, 2021

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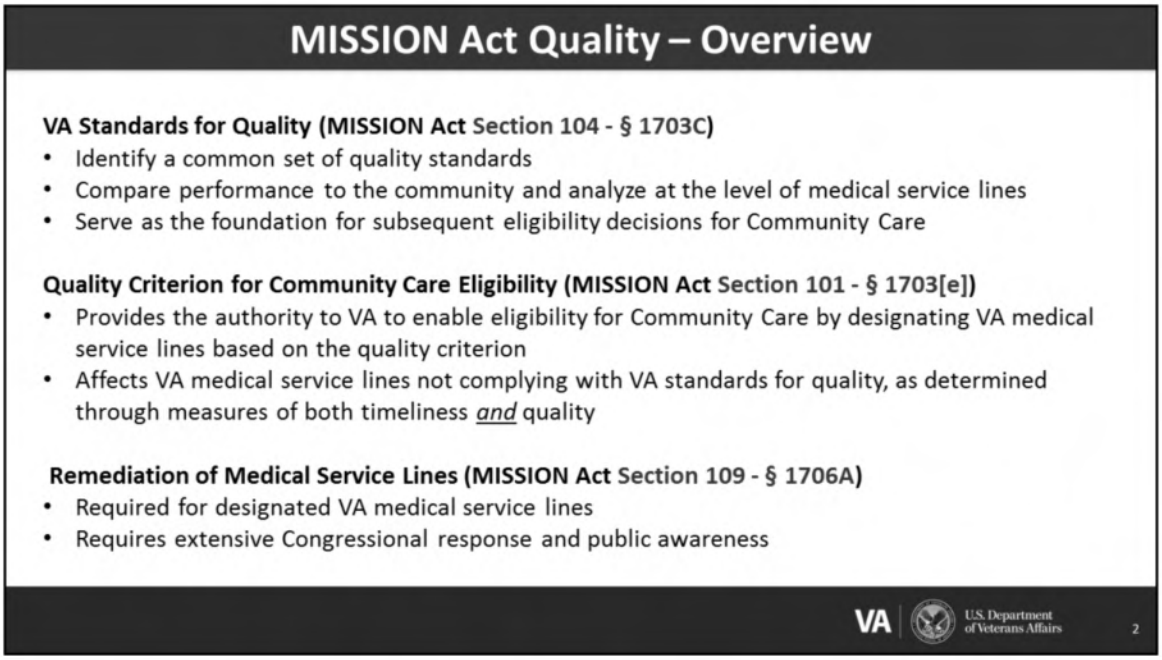

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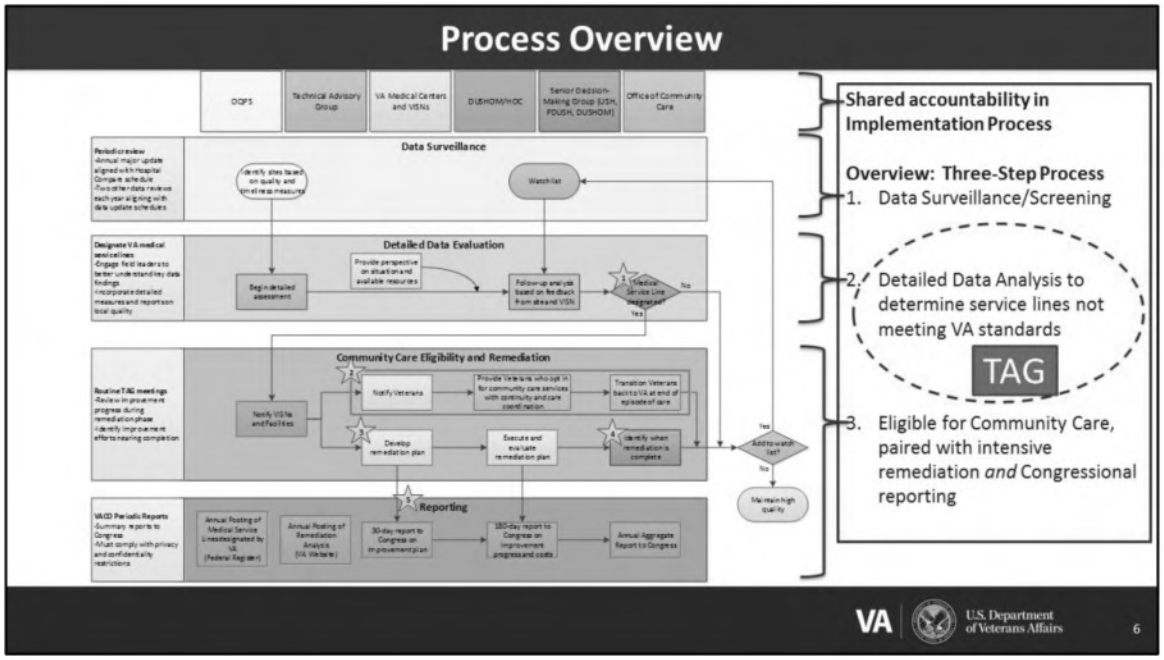
Process Overview
OCPS
Technical Advisory Group
VA Medical Centers and VISNs
DUSHOM/HOC
Senior Decision-Making Group (USH, PDUSH, DUSHOM)
Office of Community Care
Data Surveillance
Identify sites based on quality and timeliness measures
Watchlist
Detailed Data Evaluation
Provide perspective on situation and available resources
Begin detailed assessment
Follow-up analysis based on feedback from site and VISN
Medical Service Line Designation?
No
Yes
Community Care Eligibility and Remediation
Notify VISNs and Facilities
Notify Veterans
Provide Veterans who opt in for community care services with continuity and care coordination
Transition Veterans back to VA at end of episode of care
Develop remediation plan
Execute and evaluate remediation plan
Identify when remediation is complete
Add to watch list?
Yes
No
Maintain high quality
Reporting
Annual Posting of Medical Service Lines designated by VA (Federal Register)
Annual Posting of Remediation Analysis (VA Website)
30-day report to Congress on improvement plan
180-day report to Congress on improvement progress and costs
Annual Aggregate Report to Congress
Shared accountability in Implementation Process
Overview: Three-Step Process
1. Data Surveillance/Screening
2. Detailed Data Analysis to determine service lines not meeting VA standards
TAG
3. Eligible for Community Care, paired with intensive remediation and Congressional reporting
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Surveillance Logic Leading to Technical Advisory Group (TAG) Evaluation

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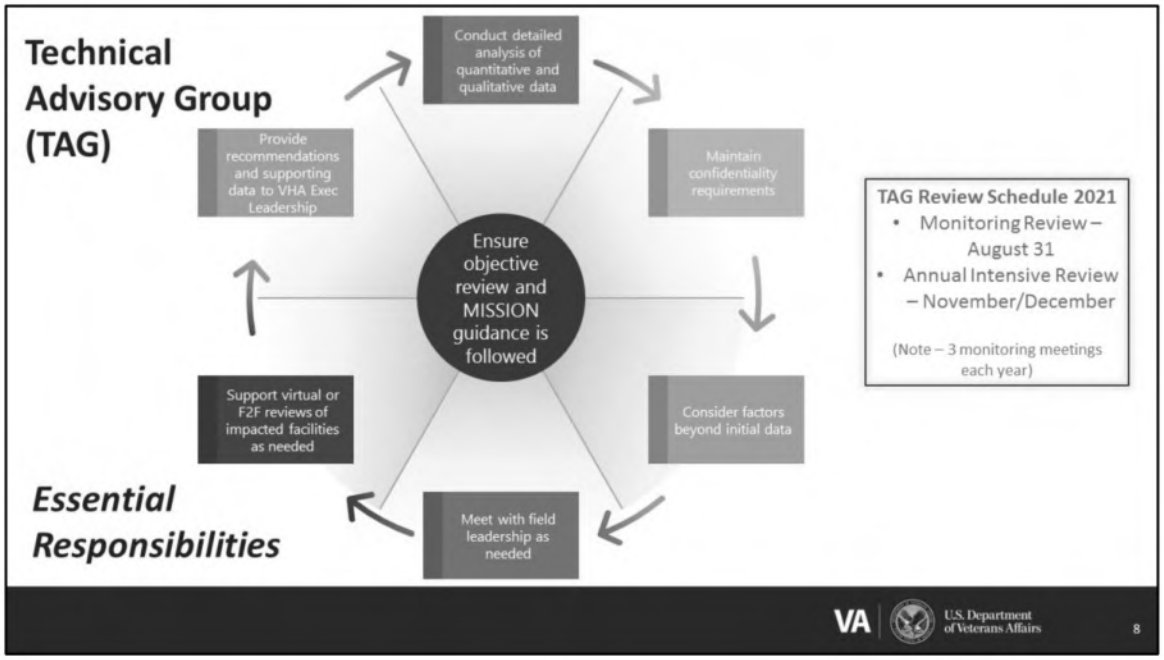
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HEDIS (eQM)	1 std. dev.	Region*	Jan CY19-DecCY19	Aug FY20-Mar FY21
Skilled Nursing	1 std. dev.	Nation-wide	Jan CY19-DecCY19	Apr FY20-Mar FY21
Mortality	1 std. dev.	Nation-wide	July FY17-Dec FY20 July CY17-Dec CY19	
Complications	1 std. dev.	Nation-wide	Apr CY19-Sep CY19	Apr FY20-Mar FY21

Jul-17 Dec-17 Jul-18 Dec-18 Jul-19 Dec-19 Jul-20 Dec-20 Jul-21

VA Community VA Baseline

*Some facilities were scored against a national benchmark due to a lack of sufficient sample sizes for regional data (flu and tobacco measures)

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MISSION TAG Monitoring Review August 31, 2021

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(Two sites flagged **for TAG review during this surveillance interval)**

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Triggering Quality Measures
- Flu Immunizations (137)
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- DM – Blood Pressure Control (4)

LEGEND
- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

MSL Results from Quality Comparison (With Community)	MSL Results from Timeliness Comparison (Internal VA): Flagged	Triggering Measure	No Triggering Measures
Flagged	**2** (2 **more** than previous surveillance interval)	**11** (10 **more** than previous surveillance interval)	**16** (14 **more** than previous surveillance interval)
Triggering Measure	**0** (1 **fewer** than previous surveillance interval)	**9** (6 **more** than previous surveillance interval)	**124** (78 **more** than previous surveillance interval)
No Triggering Measure	**3** (3 **fewer** than previous surveillance interval)	**39** (20 **more** than previous surveillance interval)	**347** (120 **fewer** than previous surveillance interval)

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MISSION TAG Monitoring Review August 31, 2021

Surveillance Summary: Hospital Care

(No sites flagged for TAG review during this surveillance interval)

Triggering Quality Measures

- CLABSI (18)
- CAUTI (13)
- HCAHPS Hospital Rating (11)
- HCAHPS Care Transition (10)

Due to the lack of timeliness measures, Inpatient medical service lines **may not be designated** by the VA Secretary, per MISSION Act requirements.

LEGEND

- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

		MSL Results from Timeliness Comparison (Internal VA)		
		Flagged	**Triggering Measure**	**No Triggering Measures**
MSL Results from Quality Comparison (With Community)	**Flagged**	N/A	N/A	**13** (4 **more** than previous surveillance interval)
	Triggering Measure	N/A	N/A	**24** (7 **fewer** than previous surveillance interval)
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MISSION TAG Monitoring Review August 31, 2021

Surveillance Summary: Extended Care Services

(No sites flagged for TAG review during this surveillance interval)

Triggering Quality Measures:
Short Stay
- Antipsychotic Medications (26)
- Functional Improvement (8)
- Pressure Ulcer (0)

Triggering Quality Measures:
Long Stay
- Falls with Major Injury (4)
- Physical Restraints (3)

Due to the lack of timeliness measures, Skilled Nursing Home medical service lines **may not be designated** by the VA Secretary, per MISSION Act requirements.

LEGEND
- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

MSL Results from Quality Comparison (With Community)	MSL Results from Timeliness Comparison (Internal VA)		
	Flagged	**Triggering Measure**	**No Triggering Measures**
Flagged	N/A	N/A	**7** (3 **more** than previous surveillance interval)
Triggering Measure	N/A	N/A	**27** (3 **fewer** than previous surveillance interval)
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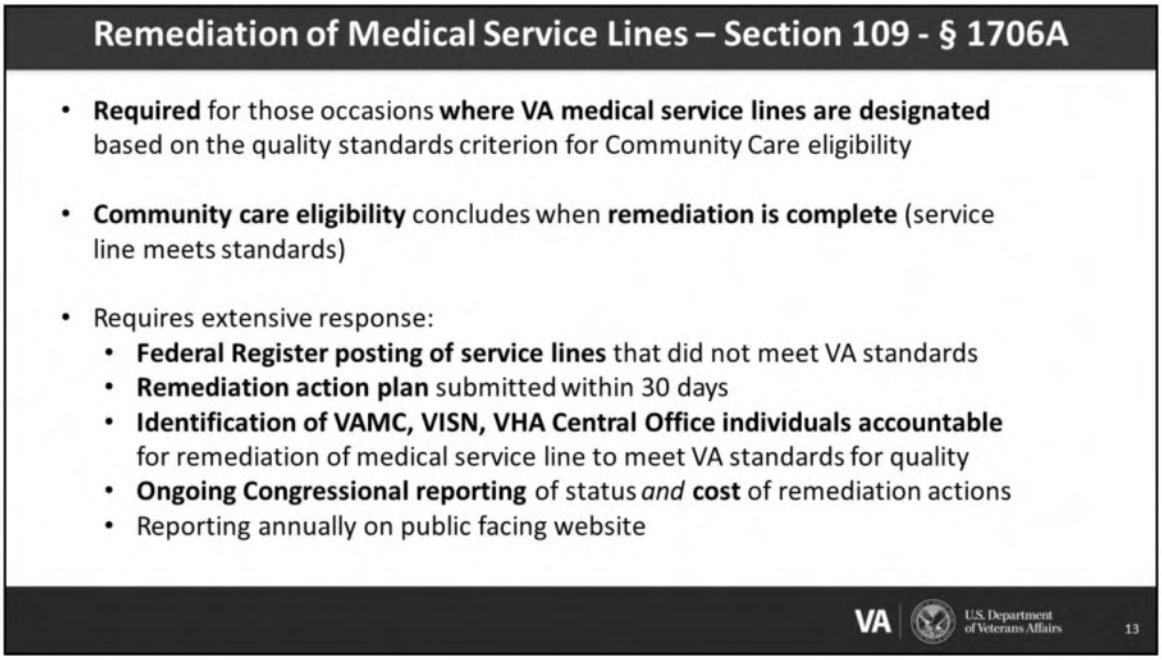

MISSION Act-specific needs, distinct from routine VHA improvement and consultation

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The main report displays:

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- Short description of performance measures
- Preferred data direction
- Short description of performance measures
- Quarterly and yearly data
- Community scores
- Facility prior year score
- Links to the source reports
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https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/IPEC/NDPP/NDPP_Production/NDPP

Appendix – Supporting Materials

MISSION Act Requirements

MISSION Act Requirements – Section 101

✓ – Measure quality of a medical service line of a VA facility by comparing it with 2 or more distinct and appropriate quality measures at non-Department medical service lines

✓ – Measure timeliness of the medical service line of a VA facility by comparing with the same medical service line at different Department facilities

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Full Measure List by VA Medical Service Line – 11/2020 to Present

Medical Service Line	Timeliness Measures (VA Internal Comparison)	Quality Measures (Community Comparison)	
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* From 38 CFR Part 17 § 17.4015 (e)

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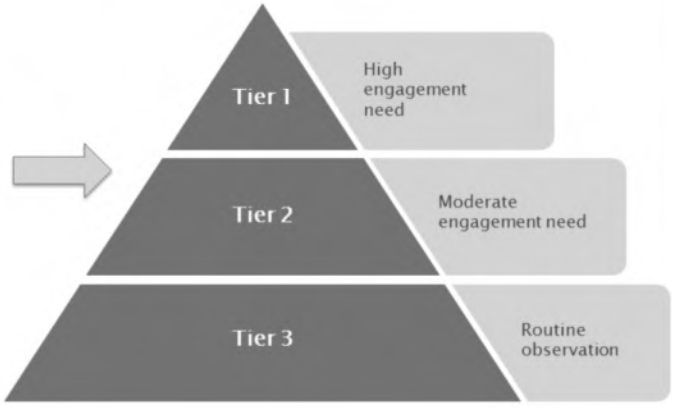
  - **MISSION Act (Monitor List)**



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MISSION Act Quality Standards and Related Activities

VHA Office of Quality and Patient Safety (QPS)
September 1, 2021

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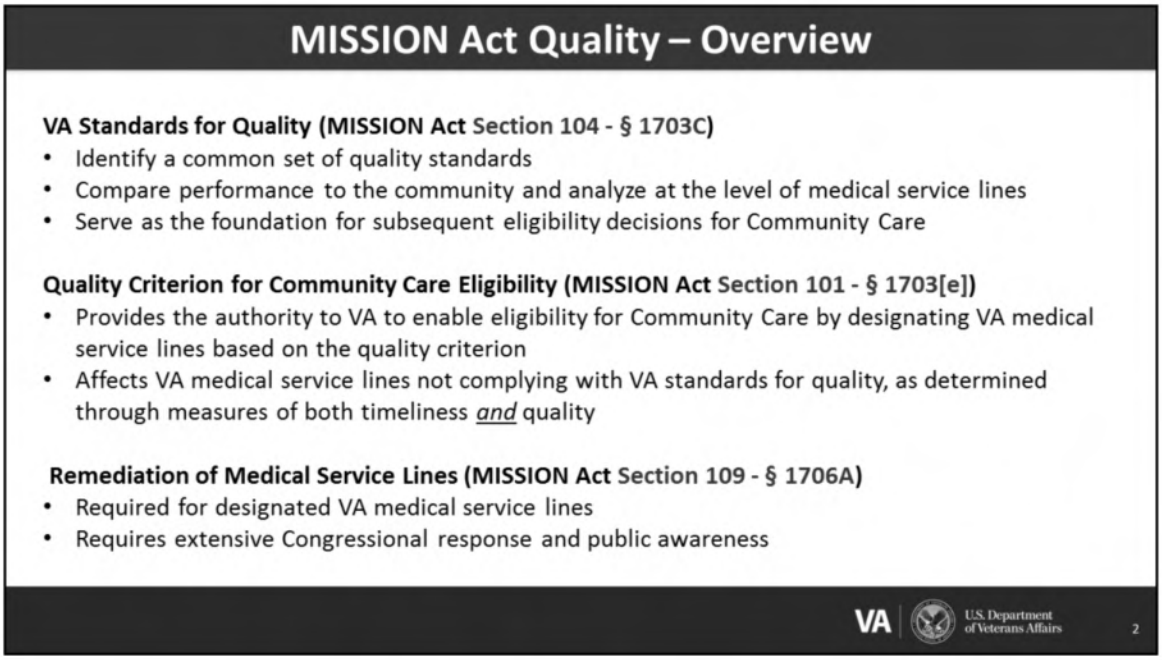

MISSION Act-specific needs, distinct from routine VHA improvement and consultation

VA Standards for Quality and Measures*

VHA Standards	Initial Measures
Timely Care: Provided without inappropriate or harmful delays	Patient-reported measures on getting timely appointments, care, and information Wait times for outpatient care
Effective Care: Based on scientific knowledge of what is likely to provide benefit to Veterans	Smoking and Tobacco Use Cessation Immunization for Influenza
	Breast and Cervical Cancer Screening
	Mortality Rates - Risk Adjusted Controlling high blood pressure Beta-blocker treatment after heart attack
	Comprehensive Diabetes Care – Blood Pressure and Glucose control
	Improvement in function (short-stay nursing home patients) Newly received antipsychotic medications (short-stay nursing home patients)
Safe Care: Avoids harm from care that is intended to help Veterans	Catheter and central line associated infection rates C. difficile infection rate
	Death rate among surgical patients with serious treatable complications
	Nursing home safety measures
Veteran-Centered Care: Anticipates and responds to Veterans specific needs	Patient's overall rating of the Provider Patient's rating of Coordination of Care
	HCAHPS Overall Rating of Hospital HCAHPS Care Transition Measure

*This represents a condensed version of the list of measures posted on the Federal Register on 10/3/2019

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Things to Remember…

- VA standards for quality reflect care that is **timely, effective, safe, and Veteran-centered**.
- VA **compares its care** to the care provided in the community.
- Where VA compares favorably to the community, **that's great**!
- Where we do not, we are committed to improving our care.
- If there is **a significant or serious concern**, Veterans have the option to receive care in the community for specific medical services that do not meet the VA standards for quality and timeliness while remediations are underway at their VA facility.

Quality Criterion for Community Care Eligibility Section 101 - § 1703[e]

Veterans may be provided the option for community care if a medical service line* does not meet VA's standards for quality based on two conditions:

- **Quality – compared to community (2 or more measures)**
- **Timeliness – compared to same service line at other VA facilities**

Example: If VA has identified that the cardiology service line at a local VA medical facility is not providing care that meets VA's standards for quality, the Veteran may be able to elect to receive their cardiology care in the community. However, there may be limits on when, where, and what is available under this criterion.

*Medical service line - "a specific medical service or set of services delivered in a VA facility."
Source: VA regulations (AQ-46)

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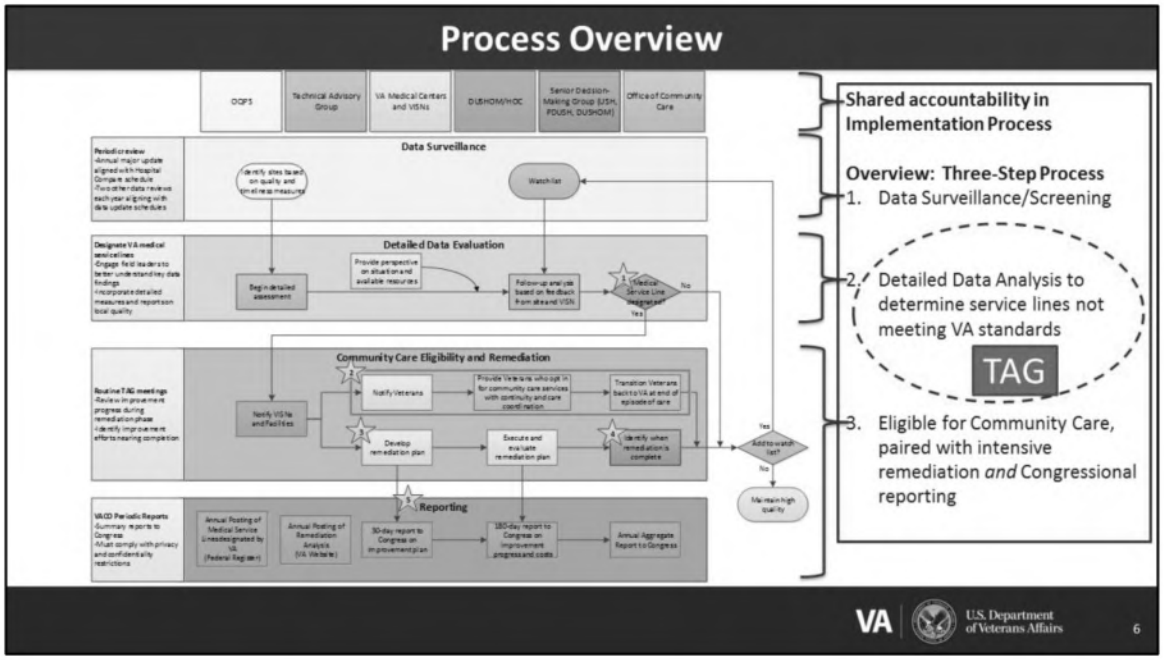
Process Overview
OCPS
Technical Advisory Group
VA Medical Centers and VISNs
DUSHOM/HOC
Senior Decision-Making Group (USH, PDUSH, DUSHOM)
Office of Community Care
Data Surveillance
Identify sites based on quality and timeliness measures
Watchlist
Detailed Data Evaluation
Provide perspective on situation and available resources
Begin detailed assessment
Follow-up analysis based on feedback from site and VISN
Medical Service Line Designation?
No
Yes
Community Care Eligibility and Remediation
Notify VISNs and Facilities
Notify Veterans
Provide Veterans who opt in for community care services with continuity and care coordination
Transition Veterans back to VA at end of episode of care
Develop remediation plan
Execute and evaluate remediation plan
Identify when remediation is complete
Add to watch list?
Yes
No
Maintain high quality
Reporting
Annual Posting of Medical Service Lines designated by VA (Federal Register)
Annual Posting of Remediation Analysis (VA Website)
30-day report to Congress on improvement plan
180-day report to Congress on improvement progress and costs
Annual Aggregate Report to Congress
Shared accountability in Implementation Process
Overview: Three-Step Process
1. Data Surveillance/Screening
2. Detailed Data Analysis to determine service lines not meeting VA standards
TAG
3. Eligible for Community Care, paired with intensive remediation and Congressional reporting
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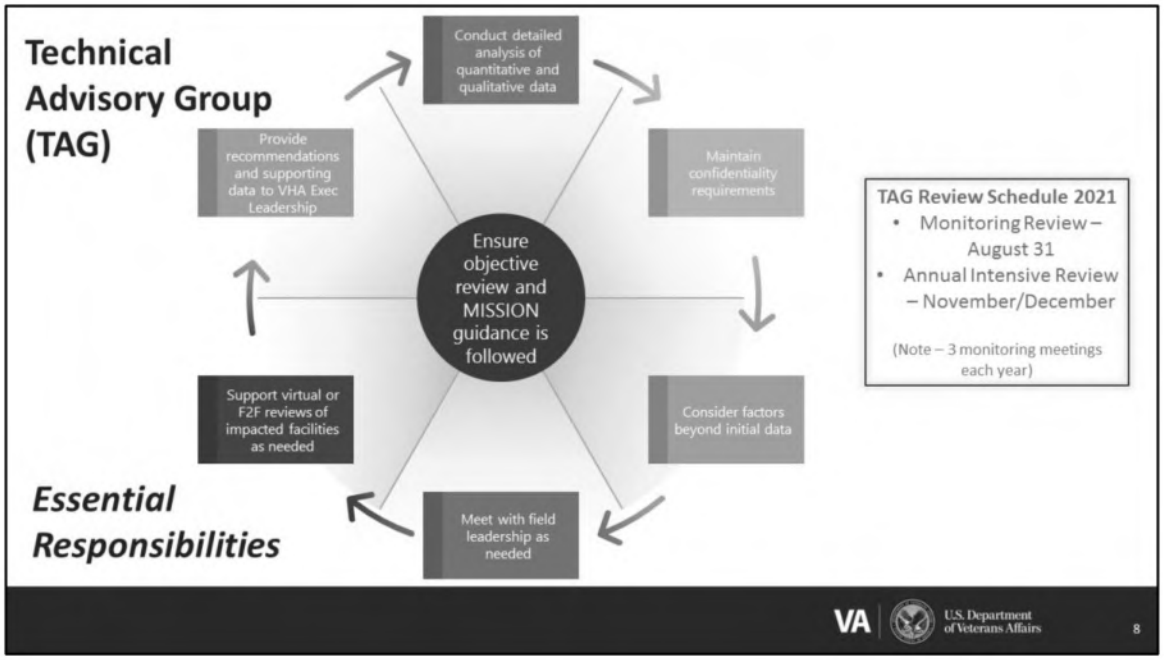
Surveillance Logic Leading to Technical Advisory Group (TAG) Evaluation

Data Surveillance

- Measures are triggered through comparisons against a benchmark (one or two standard deviations worse than the benchmark average)
  - Timeliness measures are compared with internal VA data
  - Quality measures are primarily compared with community data
- Medical Service Lines are flagged in timeliness and/or quality
  - Flagging is based on the number of triggered measures
  - For example, Primary Care at Everytown VAMC is flagged in quality due to triggering in two quality measures

Detailed Data Evaluation

- Any Medical Service Line flagged in both timeliness **and** quality is brought to the TAG for further evaluation
- The TAG reports Detailed Data Evaluation findings to the Senior Decision-Making Group (USH's Office) to inform their recommendations to the VA Secretary on medical service lines to be designated


Technical Advisory Group (TAG)
Conduct detailed analysis of quantitative and qualitative data
Maintain confidentiality requirements
Consider factors beyond initial data
Meet with field leadership as needed
Support virtual or F2F reviews of impacted facilities as needed
Provide recommendations and supporting data to VHA Exec Leadership
Ensure objective review and MISSION guidance is followed
Essential Responsibilities
TAG Review Schedule 2021
• Monitoring Review – August 31
• Annual Intensive Review – November/December
(Note – 3 monitoring meetings each year)
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VA and Community Surveillance Data Availability

Measures	Deviation from Mean	Benchmark	Date Ranges	COVID
Wait times	2 std. dev.	Nation-wide		May FY20-AprFY21 Oct FY21-DecFY21
Outpatient CAHPS	1 std. dev.	Nation-wide	FY20	Apr FY20-Mar FY21
Hospital CAHPS	1 std. dev.	State Average	Jan CY19-DecCY19	Apr FY20-Mar FY21
HEDIS (non-eQM)	1 std. dev.	Region*	Jan CY19-DecCY19	Oct FY2[illegible]-Mar FY21
HEDIS (eQM)	1 std. dev.	Region*	Jan CY19-DecCY19	Aug FY20-Mar FY21
Skilled Nursing	1 std. dev.	Nation-wide	Jan CY19-DecCY19	Apr FY20-Mar FY21
Mortality	1 std. dev.	Nation-wide	July FY17-Dec FY20 July CY17-DecCY19	
Complications	1 std. dev.	Nation-wide	Apr CY19-Sep CY19	Apr FY20-Mar FY21

Jul-17 Dec-17 Jul-18 Dec-18 Jul-19 Dec-19 Jul-20 Dec-20 Jul-21

VA Community VA Baseline

*Some facilities were scored against a national benchmark due to a lack of sufficient sample sizes for regional data (flu and tobacco measures)

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MISSION TAG Monitoring Review August 31, 2021

Surveillance Summary: Medical Services

(Two sites flagged **for TAG review during this surveillance interval)**

Triggering Timeliness Measures (Top 3)
- Cardiology CAHPS Access (24)
- Primary Care CAHPS Access (17)
- Women's Health CAHPS Access (13)

Triggering Quality Measures
- Flu Immunizations (137)
- CAHPS Provider Rating (13)
- Breast Cancer Screening (12)
- CAHPS Care Coordination (12)
- Cervical Cancer Screening (7)
- DM – Blood Pressure Control (4)

LEGEND
- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

MSL Results from Quality Comparison (With Community)	MSL Results from Timeliness Comparison (Internal VA): Flagged	Triggering Measure	No Triggering Measures
Flagged	**2** (2 **more** than previous surveillance interval)	**11** (10 **more** than previous surveillance interval)	**16** (14 **more** than previous surveillance interval)
Triggering Measure	**0** (1 **fewer** than previous surveillance interval)	**9** (6 **more** than previous surveillance interval)	**124** (78 **more** than previous surveillance interval)
No Triggering Measure	**3** (3 **fewer** than previous surveillance interval)	**39** (20 **more** than previous surveillance interval)	**347** (120 **fewer** than previous surveillance interval)

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MISSION TAG Monitoring Review August 31, 2021

Surveillance Summary: Hospital Care

(No sites flagged for TAG review during this surveillance interval)

Triggering Quality Measures

- CLABSI (18)
- CAUTI (13)
- HCAHPS Hospital Rating (11)
- HCAHPS Care Transition (10)

Due to the lack of timeliness measures, Inpatient medical service lines **may not be designated** by the VA Secretary, per MISSION Act requirements.

LEGEND

- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

		MSL Results from Timeliness Comparison (Internal VA)		
		Flagged	**Triggering Measure**	**No Triggering Measures**
MSL Results from Quality Comparison (With Community)	**Flagged**	N/A	N/A	**13** (4 **more** than previous surveillance interval)
	Triggering Measure	N/A	N/A	**24** (7 **fewer** than previous surveillance interval)
	No Triggering Measure	N/A	N/A	**92** (2 **more** than previous surveillance interval)

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MISSION TAG Monitoring Review August 31, 2021

Surveillance Summary: Extended Care Services

(No sites flagged for TAG review during this surveillance interval)

Triggering Quality Measures:
Short Stay
- Antipsychotic Medications (26)
- Functional Improvement (8)
- Pressure Ulcer (0)

Triggering Quality Measures:
Long Stay
- Falls with Major Injury (4)
- Physical Restraints (3)

Due to the lack of timeliness measures, Skilled Nursing Home medical service lines **may not be designated** by the VA Secretary, per MISSION Act requirements.

LEGEND
- For TAG review before SDMG recommendations
- For standard VHA improvement processes
- No performance issues identified

MSL Results from Quality Comparison (With Community)	MSL Results from Timeliness Comparison (Internal VA): Flagged	Triggering Measure	No Triggering Measures
Flagged	N/A	N/A	7 (3 **more** than previous surveillance interval)
Triggering Measure	N/A	N/A	27 (3 **fewer** than previous surveillance interval)
No Triggering Measure	N/A	N/A	98 (same as previous surveillance interval)

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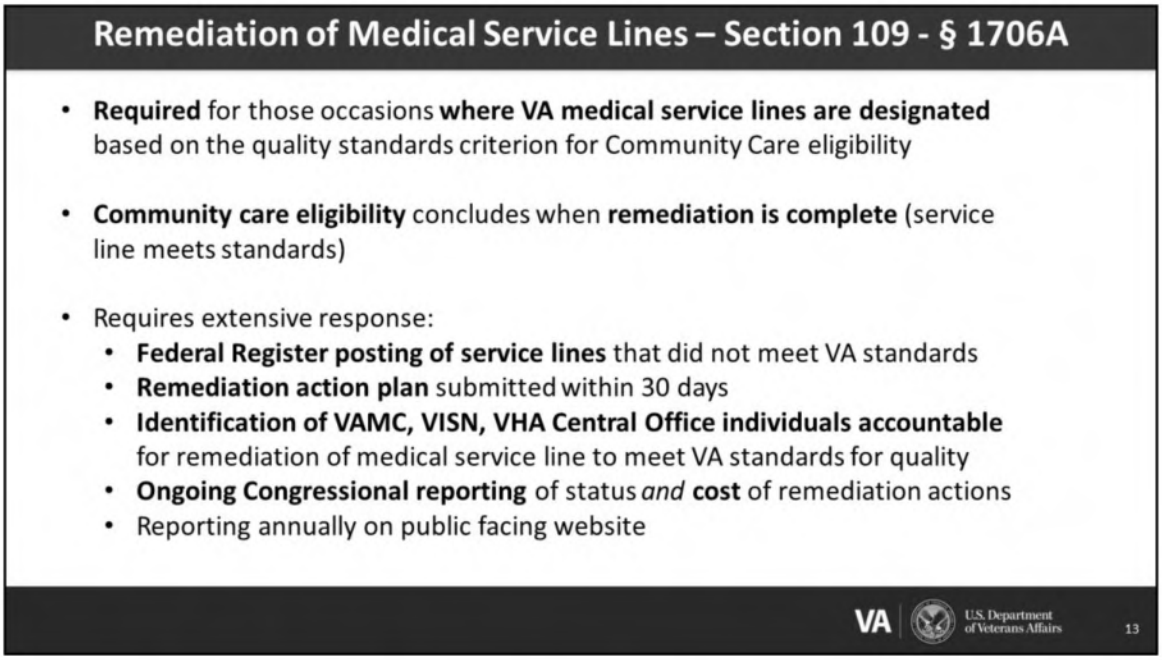

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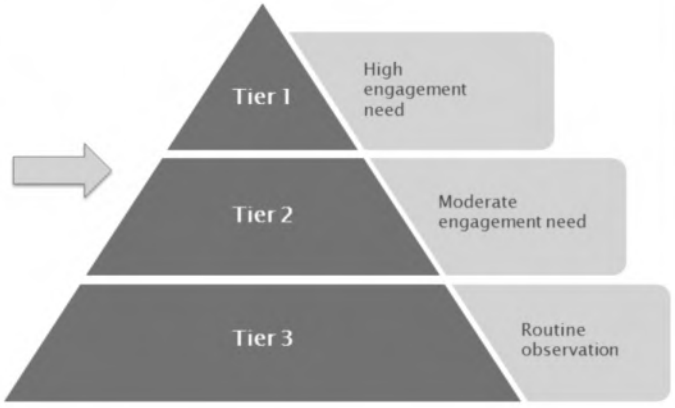

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From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: January 5, 2021 9:16 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

These changes include:

- **Community Care** Average Wait Time – DST will display a weighted average wait time for Community Care appointments for the requested clinical service.
- **VHA** Average Wait Time – The internal appointment data logic in DST will temporarily be adjusted to capture pending or completed appointments back to January 1, 2020 and forward as a result of the COVID-19 impact on VHA appointments.
- Clinical Service Synonyms – DST will find the official clinical service name in the drop-down based on a search of common clinical service synonyms.
- Clinical Service Mapping Updates – An update to the Clinical Service mapping to align with the Managerial Cost Accounting Office (MCAO) FY20 Mid-Year Active Stop Codes list.

Community Care Average Wait Time

The Facilities list in DST now shows the average wait time for community care appointments so that Veterans and providers can compare the average wait times between VHA and the community for the selected clinical service.

Community care wait time is calculated by determining the average time from the date a community care appointment is made to the date of the appointment itself, as recorded in Health Share Referral Manager (HSRM). DST displays the average wait times of all appointments booked or completed under Standard Episodes of Care (SEOCs) related to the requested clinical service, based on a rolling 90-day assessment. The Community Care data displayed is for community care appointments associated with the facility and SEOCs associated with the selected clinical service. This information is provided to inform providers, schedulers and Veterans of the comparable wait time in the community so they can make an informed decision when considering community care.

Adding the community care wait time to DST will assist with guiding the conversation between the VA Care Team and the Veteran, regarding their VA and community care options to include average community care wait time.

Please note that community care eligibility based on wait time is still to be determined at the time of scheduling into the specific VA clinic where the Veteran is to be seen.

Action Required

Please share this announcement locally with all clinical and administrative staff members.

In order to access the latest version of DST, ensure that you have installed the most current version of Consult Toolbox. As of May 10, 2020, all workstations should have installed Consult Toolbox v1.9.0065.

Office Hours

The Office of Community Care will reinstate the DST Office Hours starting **June 15, 2020,** with these DST updates the scheduled topic. Moving forward the office hours will be held on the third Monday of each month.

Time: 3:00-4:00pm ET
https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

Resources

Additionally, the following resources are available to support users:

- Artifacts stored on DST SharePoint site
- eLearning course 'DST for Administrative Staff' on the Community Care Hub
- Guidance on use of Best Medical Interest (including definitions) and guidance on forwarding consults to community care in the OCC Field Guidebook
- Courses on Talent Management System 2.0 (TMS)
    - Course ID 38464 – Decision Support Tool (DST) Complete Overview
    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6)@va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: February 14, 2021 10:43 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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- Clinical Service Mapping Updates – An update to the Clinical Service mapping to align with the Managerial Cost Accounting Office (MCAO) FY20 Mid-Year Active Stop Codes list.

Community Care Average Wait Time

The Facilities list in DST now shows the average wait time for community care appointments so that Veterans and providers can compare the average wait times between VHA and the community for the selected clinical service.

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Adding the community care wait time to DST will assist with guiding the conversation between the VA Care Team and the Veteran, regarding their VA and community care options to include average community care wait time.

Please note that community care eligibility based on wait time is still to be determined at the time of scheduling into the specific VA clinic where the Veteran is to be seen.

Action Required

Please share this announcement locally with all clinical and administrative staff members.

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Office Hours

The Office of Community Care will reinstate the DST Office Hours starting **June 15, 2020,** with these DST updates the scheduled topic. Moving forward the office hours will be held on the third Monday of each month.

Time: 3:00-4:00pm ET
https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

Resources

Additionally, the following resources are available to support users:

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    - Course ID 38464 – Decision Support Tool (DST) Complete Overview
    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6)@va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: February 15, 2021 10:27 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Support

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To:
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Sent: February 16, 2021 10:36 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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https://vacctraining.adobeconnect.com(b)(6)
(800) 767-1750
Participant Code: 85286

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Support

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Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: February 19, 2021 9:42 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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Action Required

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Office Hours

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https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

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Support

For questions please contact Clinical Integration at (b)(6)@va.gov.

Thank you,

VHA Office of Community Care

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Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: February 20, 2021 7:15 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

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Thank you,

VHA Office of Community Care

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To:
Bcc: (b)(6)@va.gov; (b)(6)@va.gov (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; Jacqueline.May@va.gov; kristin.cunningham@va.gov; Jennifer.Sherman@va.gov; Upneet.Randhawa@va.gov
Sent: February 21, 2021 4:56 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Sent: February 22, 2021 4:42 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Sent: February 23, 2021 8:31 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

These changes include:

- **Community Care** Average Wait Time – DST will display a weighted average wait time for Community Care appointments for the requested clinical service.
- **VHA** Average Wait Time – The internal appointment data logic in DST will temporarily be adjusted to capture pending or completed appointments back to January 1, 2020 and forward as a result of the COVID-19 impact on VHA appointments.
- Clinical Service Synonyms – DST will find the official clinical service name in the drop-down based on a search of common clinical service synonyms.
- Clinical Service Mapping Updates – An update to the Clinical Service mapping to align with the Managerial Cost Accounting Office (MCAO) FY20 Mid-Year Active Stop Codes list.

Community Care Average Wait Time

The Facilities list in DST now shows the average wait time for community care appointments so that Veterans and providers can compare the average wait times between VHA and the community for the selected clinical service.

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Adding the community care wait time to DST will assist with guiding the conversation between the VA Care Team and the Veteran, regarding their VA and community care options to include average community care wait time.

Please note that community care eligibility based on wait time is still to be determined at the time of scheduling into the specific VA clinic where the Veteran is to be seen.

Action Required

Please share this announcement locally with all clinical and administrative staff members.

In order to access the latest version of DST, ensure that you have installed the most current version of Consult Toolbox. As of May 10, 2020, all workstations should have installed Consult Toolbox v1.9.0065.

Office Hours

The Office of Community Care will reinstate the DST Office Hours starting **June 15, 2020,** with these DST updates the scheduled topic. Moving forward the office hours will be held on the third Monday of each month.

Time: 3:00-4:00pm ET
https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

Resources

Additionally, the following resources are available to support users:

- Artifacts stored on DST SharePoint site
- eLearning course 'DST for Administrative Staff' on the Community Care Hub
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    - Course ID 38464 – Decision Support Tool (DST) Complete Overview
    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6)@va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: February 23, 2021 8:35 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Sent: February 23, 2021 4:44 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Sent: February 24, 2021 4:45 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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Participant Code: 85286

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Sent: February 25, 2021 4:44 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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https://vacctraining.adobeconnect.com(b)(6)
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Participant Code: 85286

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Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
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Sent: February 26, 2021 4:13 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Sent: February 27, 2021 4:00 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Sent: February 28, 2021 4:04 PM (UTC-06:00)

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- Clinical Service Mapping Updates – An update to the Clinical Service mapping to align with the Managerial Cost Accounting Office (MCAO) FY20 Mid-Year Active Stop Codes list.

Community Care Average Wait Time

The Facilities list in DST now shows the average wait time for community care appointments so that Veterans and providers can compare the average wait times between VHA and the community for the selected clinical service.

Community care wait time is calculated by determining the average time from the date a community care appointment is made to the date of the appointment itself, as recorded in Health Share Referral Manager (HSRM). DST displays the average wait times of all appointments booked or completed under Standard Episodes of Care (SEOCs) related to the requested clinical service, based on a rolling 90-day assessment. The Community Care data displayed is for community care appointments associated with the facility and SEOCs associated with the selected clinical service. This information is provided to inform providers, schedulers and Veterans of the comparable wait time in the community so they can make an informed decision when considering community care.

Adding the community care wait time to DST will assist with guiding the conversation between the VA Care Team and the Veteran, regarding their VA and community care options to include average community care wait time.

Please note that community care eligibility based on wait time is still to be determined at the time of scheduling into the specific VA clinic where the Veteran is to be seen.

Action Required

Please share this announcement locally with all clinical and administrative staff members.

In order to access the latest version of DST, ensure that you have installed the most current version of Consult Toolbox. As of May 10, 2020, all workstations should have installed Consult Toolbox v1.9.0065.

Office Hours

The Office of Community Care will reinstate the DST Office Hours starting **June 15, 2020,** with these DST updates the scheduled topic. Moving forward the office hours will be held on the third Monday of each month.

Time: 3:00-4:00pm ET
https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

Resources

Additionally, the following resources are available to support users:

- Artifacts stored on DST SharePoint site
- eLearning course 'DST for Administrative Staff' on the Community Care Hub
- Guidance on use of Best Medical Interest (including definitions) and guidance on forwarding consults to community care in the OCC Field Guidebook
- Courses on Talent Management System 2.0 (TMS)
    - Course ID 38464 – Decision Support Tool (DST) Complete Overview
    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6)@va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 1, 2021 4:08 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

These changes include:

- **Community Care** Average Wait Time – DST will display a weighted average wait time for Community Care appointments for the requested clinical service.
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- Clinical Service Mapping Updates – An update to the Clinical Service mapping to align with the Managerial Cost Accounting Office (MCAO) FY20 Mid-Year Active Stop Codes list.

Community Care Average Wait Time

The Facilities list in DST now shows the average wait time for community care appointments so that Veterans and providers can compare the average wait times between VHA and the community for the selected clinical service.

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Adding the community care wait time to DST will assist with guiding the conversation between the VA Care Team and the Veteran, regarding their VA and community care options to include average community care wait time.

Please note that community care eligibility based on wait time is still to be determined at the time of scheduling into the specific VA clinic where the Veteran is to be seen.

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https://vacctraining.adobeconnect.com(b)(6)
(800) 767-1750
Participant Code: 85286

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    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6)@va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 2, 2021 6:59 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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Community Care Average Wait Time

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Action Required

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Time: 3:00-4:00pm ET
https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

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    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6)@va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 2, 2021 7:03 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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- Clinical Service Mapping Updates – An update to the Clinical Service mapping to align with the Managerial Cost Accounting Office (MCAO) FY20 Mid-Year Active Stop Codes list.

Community Care Average Wait Time

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Please note that community care eligibility based on wait time is still to be determined at the time of scheduling into the specific VA clinic where the Veteran is to be seen.

Action Required

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Office Hours

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Time: 3:00-4:00pm ET
https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

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    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6)@va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; Jessie.Doktor@va.gov; Karen.Blythe@va.gov; Mary.Gorman3@va.gov; Jacqueline.May@va.gov; kristin.cunningham@va.gov; Jennifer.Sherman@va.gov; Upneet.Randhawa@va.gov
Sent: March 2, 2021 4:10 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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Community Care Average Wait Time

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Action Required

Please share this announcement locally with all clinical and administrative staff members.

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Office Hours

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Time: 3:00-4:00pm ET
https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

Resources

Additionally, the following resources are available to support users:

- Artifacts stored on DST SharePoint site
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- Guidance on use of Best Medical Interest (including definitions) and guidance on forwarding consults to community care in the OCC Field Guidebook
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    - Course ID 38464 – Decision Support Tool (DST) Complete Overview
    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by Dr. Greenstone, Deputy Executive Director of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6)@va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 3, 2021 3:46 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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Community Care Average Wait Time

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Action Required

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https://vacctraining.adobeconnect.com (b)(6)
(800) 767-1750
Participant Code: 85286

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    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6) @va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6)@va.gov (b)(6)@va.gov (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov (b)(6)@va.gov; (b)(6)@va.gov (b)(6)@va.gov (b)(6)@va.gov; (b)(6)@va.gov (b)(6)@va.gov; (b)(6)@va.gov
Sent: March 4, 2021 7:00 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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Action Required

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https://vacctraining.adobeconnect.com (b)(6)
(800) 767-1750
Participant Code: 85286

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    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6) @va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 4, 2021 7:02 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Action Required

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Time: 3:00-4:00pm ET
https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

Resources

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    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6)@va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 4, 2021 3:28 PM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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https://vacctraining.adobeconnect.com (b)(6)
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Participant Code: 85286

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Support

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Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 5, 2021 6:40 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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(800) 767-1750
Participant Code: 85286

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Support

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Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 5, 2021 8:59 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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https://vacctraining.adobeconnect.com (b)(6)
(800) 767-1750
Participant Code: 85286

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From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 6, 2021 6:39 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

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Support

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Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov; (b)(6)@va.gov
Sent: March 6, 2021 6:42 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 6, 2021 8:38 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov (b)(6) @va.gov (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 7, 2021 8:33 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Action Required

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Time: 3:00-4:00pm ET
https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

Resources

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    - Course ID 38464 – Decision Support Tool (DST) Complete Overview
    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6)@va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 8, 2021 7:52 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Adding the community care wait time to DST will assist with guiding the conversation between the VA Care Team and the Veteran, regarding their VA and community care options to include average community care wait time.

Please note that community care eligibility based on wait time is still to be determined at the time of scheduling into the specific VA clinic where the Veteran is to be seen.

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To:
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Sent: March 9, 2021 7:13 AM (UTC-06:00)

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Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 10, 2021 6:12 AM (UTC-06:00)

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Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 10, 2021 6:14 AM (UTC-06:00)

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Sent: March 10, 2021 6:37 AM (UTC-06:00)

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Sent: March 11, 2021 6:05 AM (UTC-06:00)

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    - Course ID 4508484 – MISSION Act: Decision Support Tool (DST) Webinar, presented by (b)(6) of Clinical Integration

Support

For questions please contact Clinical Integration at (b)(6) @va.gov.

Thank you,

VHA Office of Community Care

From: (b)(6)
Subject: 886979a5-dc61-4080-943d-08ecfbc8affc
To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 11, 2021 6:46 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

These changes include:

- **Community Care** Average Wait Time – DST will display a weighted average wait time for Community Care appointments for the requested clinical service.
- **VHA** Average Wait Time – The internal appointment data logic in DST will temporarily be adjusted to capture pending or completed appointments back to January 1, 2020 and forward as a result of the COVID-19 impact on VHA appointments.
- Clinical Service Synonyms – DST will find the official clinical service name in the drop-down based on a search of common clinical service synonyms.
- Clinical Service Mapping Updates – An update to the Clinical Service mapping to align with the Managerial Cost Accounting Office (MCAO) FY20 Mid-Year Active Stop Codes list.

Community Care Average Wait Time

The Facilities list in DST now shows the average wait time for community care appointments so that Veterans and providers can compare the average wait times between VHA and the community for the selected clinical service.

Community care wait time is calculated by determining the average time from the date a community care appointment is made to the date of the appointment itself, as recorded in Health Share Referral Manager (HSRM). DST displays the average wait times of all appointments booked or completed under Standard Episodes of Care (SEOCs) related to the requested clinical service, based on a rolling 90-day assessment. The Community Care data displayed is for community care appointments associated with the facility and SEOCs associated with the selected clinical service. This information is provided to inform providers, schedulers and Veterans of the comparable wait time in the community so they can make an informed decision when considering community care.

Adding the community care wait time to DST will assist with guiding the conversation between the VA Care Team and the Veteran, regarding their VA and community care options to include average community care wait time.

Please note that community care eligibility based on wait time is still to be determined at the time of scheduling into the specific VA clinic where the Veteran is to be seen.

Action Required

Please share this announcement locally with all clinical and administrative staff members.

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Office Hours

The Office of Community Care will reinstate the DST Office Hours starting **June 15, 2020,** with these DST updates the scheduled topic. Moving forward the office hours will be held on the third Monday of each month.

Time: 3:00-4:00pm ET
https://vacctraining.adobeconnect.com(b)(6)
(800) 767-1750
Participant Code: 85286

Resources

Additionally, the following resources are available to support users:

- Artifacts stored on DST SharePoint site
- eLearning course 'DST for Administrative Staff' on the Community Care Hub
- Guidance on use of Best Medical Interest (including definitions) and guidance on forwarding consults to community care in the OCC Field Guidebook
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To:
Bcc: (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov; (b)(6) @va.gov
Sent: March 12, 2021 6:29 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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Sent: March 13, 2021 6:26 AM (UTC-06:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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Adding the community care wait time to DST will assist with guiding the conversation between the VA Care Team and the Veteran, regarding their VA and community care options to include average community care wait time.

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Thank you,

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Sent: March 14, 2021 7:14 AM (UTC-05:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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Please note that community care eligibility based on wait time is still to be determined at the time of scheduling into the specific VA clinic where the Veteran is to be seen.

Action Required

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Office Hours

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https://vacctraining.adobeconnect.com (b)(6)
(800) 767-1750
Participant Code: 85286

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Sent: March 15, 2021 7:06 AM (UTC-05:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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https://vacctraining.adobeconnect.com/(b)(6)
(800) 767-1750
Participant Code: 85286

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To:
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Sent: March 16, 2021 6:54 AM (UTC-05:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

In response to feedback received from Decision Support Tool (DST) users in the field, changes have been made to the DST that will be in effect **June 22, 2020** which make it more user-friendly, help guide the eligibility conversation between VA care teams and Veterans and incorporates a routine update to stop codes. Detailed information is available in Chapter 2, Section 2.9 of the OCC FGB at https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx.

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Sent: March 18, 2021 4:06 PM (UTC-05:00)

*Due to technical issues, we are unable to share today's PowerPoint. In the meantime, please follow along with the attachment.

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