

TriWest's Response to January 2017 OIG Report

"Review of the Implementation of the Veterans Choice Program"

TRIWEST HEALTH CARE ALLIANCE RESPONSE TO VA OIG REPORT

TriWest Healthcare Alliance respects the Department of Veterans Affairs (VA) Office of Inspector General (OIG) review of the Veterans Choice Program (VCP) in its report dated January 30, 2017, and supports its recommendations to improve the program. In fact, we have been working closely in support of VA to address many of the items in this report. Given the fact that the OIG review of VCP in this analysis only covered the period up to September 2015, the report does not reflect the current state of the program. In fact, over the past 16 months, VA and Congress have worked together to successfully adopt and implement several important improvements to the program that have resulted in significant progress for Veterans and increased their access to care in the community. TriWest has proactively worked alongside VA to execute these program changes.

While there were predictably real challenges associated with setting up a program of this size and scope in only 90 days (with little over 30 days for the Choice contractors), our partnership with VA and the 180,000 community health care providers in our 28-state area of responsibility has now connected Veterans with over 4.1 million total medical appointments since January 2015. That's real progress for our nation's Veterans. In fact, TriWest has now served over 800,000 Veterans and is now receiving over 100,000 Choice requests for care each month. And, across all categories of care, the average number of days to make an appointment with a community care provider is 3 days. Today, less than 2% of the care requests are being returned due to lack of a network provider of the specialty type needed. Further, TriWest is now processing and paying claims within 30 days for those receiving care through the network.

As we look back on the launch of VCP two years ago, the program today provides VA more elasticity to meet the ever-growing demand for care. Because of the very focused leadership of Congress and VA to recognize and resolve policy gaps during this implementation and early refinement phase, Veterans' access to needed community care has significantly grown over the past 16 months.

But the mission is not complete. As the Veterans Choice Program continues to grow and more and more Veterans receive care in the community, TriWest will continue to work closely with VA, Congress, and community health care providers to refine and strengthen the program, enhance the Veteran and provider experience, and ensure Veterans have greater access to high-quality care closer to home.

Below is a snapshot of TriWest's operational growth from the start of the Veterans Choice Program.

Network:

- ▶ VA OIG's report cites inadequate provider networks immediately following the 90-day implementation timeline to stand up the Veterans Choice Program. At the time (November 2014), TriWest's network consisted of approximately 90,000 community health care providers.

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- Since that time, TriWest has worked directly with every VA medical center in our 28-state geographic area of responsibility to assess demand for care, and has tailored the network accordingly. Now, TriWest's customized and tailored network is comprised of ***approximately 180,000 providers***, more than doubling since January 2015.
- Since the end of the VAOIG analysis in September 2015, TriWest has grown its network by 32%, increasing from 135,000 to over 179,000 unique providers, to meet the growing demand of the program (IG Recommendation #2 and #6).
- Using our innovative Demand Capacity Tool to refine and strengthen our network since 2015, TriWest's community providers meet Veterans' appointment scheduling needs in each local service area. Beginning in July 2015, TriWest's executive leaders met with every Veterans Integrated Service Network (VISN) and VAMC director to learn exactly what type of network they needed. Today, ***less than 2%*** of the care requests are being returned due to lack of a network provider of the specialty type needed.

Appointments/Program Demand (IG Recommendation #2):

- TriWest has scheduled **over 4.1 million total appointments** (including initial and follow up care) since the start of the Choice Program. Without the Choice Act, those appointment requests would have increased appointment wait times at VA hospitals and clinics for all Veterans using VA care.
- 95% of all appointments are scheduled within **5 business days of authorization**.
- The report cites that at the onset of the Choice program, the time from a Veteran opting in to receive care through the Choice program to the first completed appointment took an average of 48 days – 18 days longer than VHA's 30-day standard. Now, as a result of streamlined processes, and TriWest's staff of more than 3,000, the average number of days to the first completed appointment with a network provider is **14 days**, a decrease of 33% from the 2015 annual wait time average.
- TriWest has worked diligently to address scheduling issues over the past two years. Now, as the result of a dedicated quality improvement initiative, TriWest schedules appointments with the correct provider the first time, **98% of the time**.
- ***Since August 2015, the number of care requests TriWest receives on a monthly basis has increased by 120%.*** Today, TriWest receives nearly 110,000 authorizations for Veteran care in the community, compared to 50,000 authorizations in August 2015. Program usage continues to grow as the program matures and enhances access to care for Veterans.
- Over **800,000 unique Veterans** across TriWest's 28-state territory have received care from a community care provider under the Choice program.

Customer Service:

- ***Since the fall of 2015, TriWest has opened or expanded from 2 to 10 operations centers... at least one per VISN. Our volume of calls has more than tripled*** since the beginning of 2015; with our staff responding to over 800,000 calls per month, with an average speed to answer below 30 seconds.

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Claims Processing (IG Recommendation #5):

TriWest understands the importance of paying community providers on a timely manner, and has gone to great lengths to make the provider claims submission process easier for providers and ensure claims are paid to providers on a timely basis.

- The number of claims received each month has grown from 114,000 in September 2015 to over 420,000 in December 2016. That represents an increase in volume of 268% since the analysis period covered by the OIG report.
- During that same period of time, since September 2015, the average days TriWest is taking to process claims has overall averaged 25 days. In recent months, paying claims on a timely basis became complicated by the volume moving through the system. Through the effort of both TriWest and VA, the issues have been resolved, payments have been made, and a long-term fix has been put in place. Today, all claims have been brought current through additional resources from VA and TriWest (including \$45 million from TriWest's company's non-profit owners) in order to decrease the backlog and honor our commitment to provide timely and accurate payment to providers.
- The average number of days from receipt of the claim to it actually being paid to the provider is currently down from a high of 65 days (when we and VA started to aggressively confront the backlog that has built up through October 2016) to now processing and paying claims within 30 days for those receiving care through the network.

Streamlined Processes and Procedures for Accessing Care (Recommendation #1):

TriWest has worked at VA's side on several initiatives to streamline processes and procedures and help improve the PC3/VCP programs, including:

- New CRM: TriWest has improved customer service for Veterans by investing in an entire new Customer Relationship Management (CRM) System to help deliver effective and efficient customer service encounters. The system also brings improvements to the user interface and the ability to document outbound and inbound calls with Veterans – all aimed at improving customer service.
- VA Portal: TriWest solicited feedback on the then-existing VA Portal from VAMCs. This system is the way TriWest and VA staff order and track health care services between the two organizations. Based on VA feedback, a new redesigned portal was rolled out in July 2015, bringing streamlined processes, which increased portal utilization and improved efficiency for both VAMCs and TriWest.
- Embedded Staff in VAMCs: In 2015, TriWest worked with VA to begin to embed cells of staff within a multitude of VAMCs. Veterans accessing VAMCs with embedded TriWest staff are educated in-person about program benefits and receive customer service quickly; TriWest works directly alongside VA staff to help coordinate Veteran care. Today, TriWest has embedded cells of staff in over 40 VAMC locations within our geographic area of operations, providing better daily coordination at a personal level.

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- Top Priorities Workgroups: TriWest collaborated with VA to initiate workgroups to develop solutions for VA's Top 5 Priorities—improving customer service, improving visibility into the network, reducing returned authorizations, getting the right provider every time, and simplifying the referral process. As a result of these meetings, we jointly developed a detailed plan of action and timelines to address and execute plans to address each of these five priorities.
- Tele-Behavioral Health (Tele-BH) Pilots: In October 2016, TriWest implemented state-of-the-art, tele-behavioral health pilots in support of VA's same day behavioral health access initiative. As a result, Veterans in several states are experiencing increased access to BH care, including in rural areas. The pilot is being expanding to multiple states throughout our geographic areas of our responsibility.