



## DATABASE & METHODS CYBERSEMINAR SERIES

Session 12:

# Updates on VA-Purchased Community Care Data

September 12, 2022

Erin Beilstein-Wedel, MA – Research Data Analyst, CHOIR COIN, VA Boston

Matthew Labo, MPA – Director of Oversight Data, VA Office of Integrated Veteran Care

Megan Vanneman, PhD, MPH – Core Investigator, IDEAS COIN, VA Salt Lake City

Todd Wagner, PhD – Director, HERC, VA Palo Alto



# DATABASE & METHODS CYBERSEMINAR SERIES

*Informational seminars to help VA researchers access and use VA databases.*

## Sessions cover...

- VA data sources & data access systems
- Application of VA data to research and quality improvement questions
- Limitations of secondary data use
- Resources to support VA data use



## UPCOMING DATABASE & METHODS SESSIONS

First Monday of the month | 1:00pm-2:00pm ET

Date	Topic
10/3/22	Meet VIReC: The Researcher's Guide to VA Data
11/7/22	Navigating VA Data Sources: An Overview of Commonly Used Databases
12/5/22	Navigating VA Data Access: Overview of VA Data Access Request Processes

Visit our Education page for more information & registration links:

<https://bit.ly/39B1JUo>

Visit HSR&D's VIReC Cyberseminar Archive to watch previous sessions:

<https://bit.ly/3dZFJWG>

# Where can I download a copy of the slides?



## SAMPLE EMAIL

Host: HSR&D Cyberseminars ([cyberseminar@va.gov](mailto:cyberseminar@va.gov))

Event number (access code): 199 009 5117

Event password: 3844

Registration ID: This event does not require an enrollment ID

Join event

### To join the audio conference only

To receive a call back, provide your phone number when you join the event, or call the number below and enter the access code.

USA Toll Number: 14043971596

Toll-free dialing restrictions:

[https://www.webex.com/pdf/tollfree\\_restrictions.pdf](https://www.webex.com/pdf/tollfree_restrictions.pdf)

Access code: 199 009 5117

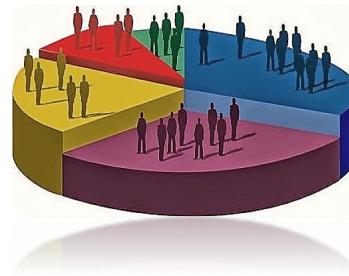
[Please download today's slides](#)

[Please click here for today's live captions](#)

## Poll #1:

*What is your primary **role** in projects using VA data?*

- Investigator, PI, Co-I
- Statistician, methodologist, biostatistician
- Data manager, analyst, or programmer
- Project coordinator
- Other – please describe via the chat function



## Poll #2:

*How many years of experience working with VA data?*

- None – I'm brand new to this!
- One year or less
- More than 1, less than 3 years
- At least 3, less than 7 years
- At least 7, less than 10 years
- 10 years or more



## DATABASE & METHODS CYBERSEMINAR SERIES

Session 12:

# Updates on VA-Purchased Community Care Data

September 12, 2022

Erin Beilstein-Wedel, MA – Research Data Analyst, CHOIR COIN, VA Boston

Matthew Labo, MPA – Director of Oversight Data, VA Office of Integrated Veteran Care

Megan Vanneman, PhD, MPH – Core Investigator, IDEAS COIN, VA Salt Lake City

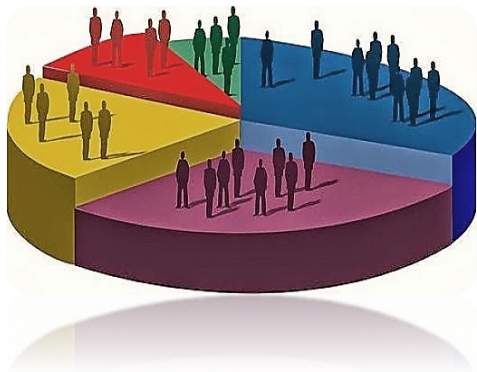
Todd Wagner, PhD – Director, HERC, VA Palo Alto

# Session roadmap

- **Overview of VA-purchased community care data**
- **Estimating cost of VA-purchased community care**
- **Assessing access to VA-purchased community care**
- **Q&A**

## Poll #3:

*Have you ever used  
VA-purchased  
community care data  
for a VA project?*

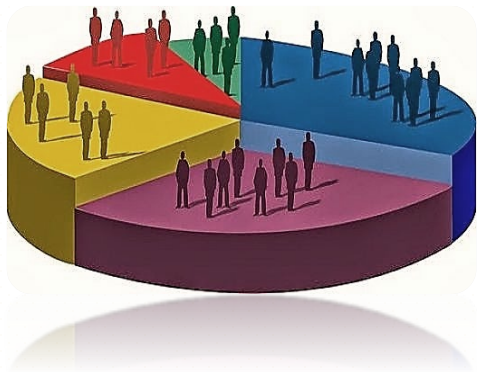


- Yes
- No



## Poll #3:

*How would you rate your overall knowledge of VA-purchased community care data?*



- 1 (No knowledge)
- 2
- 3
- 4
- 5 (Expert-level knowledge)

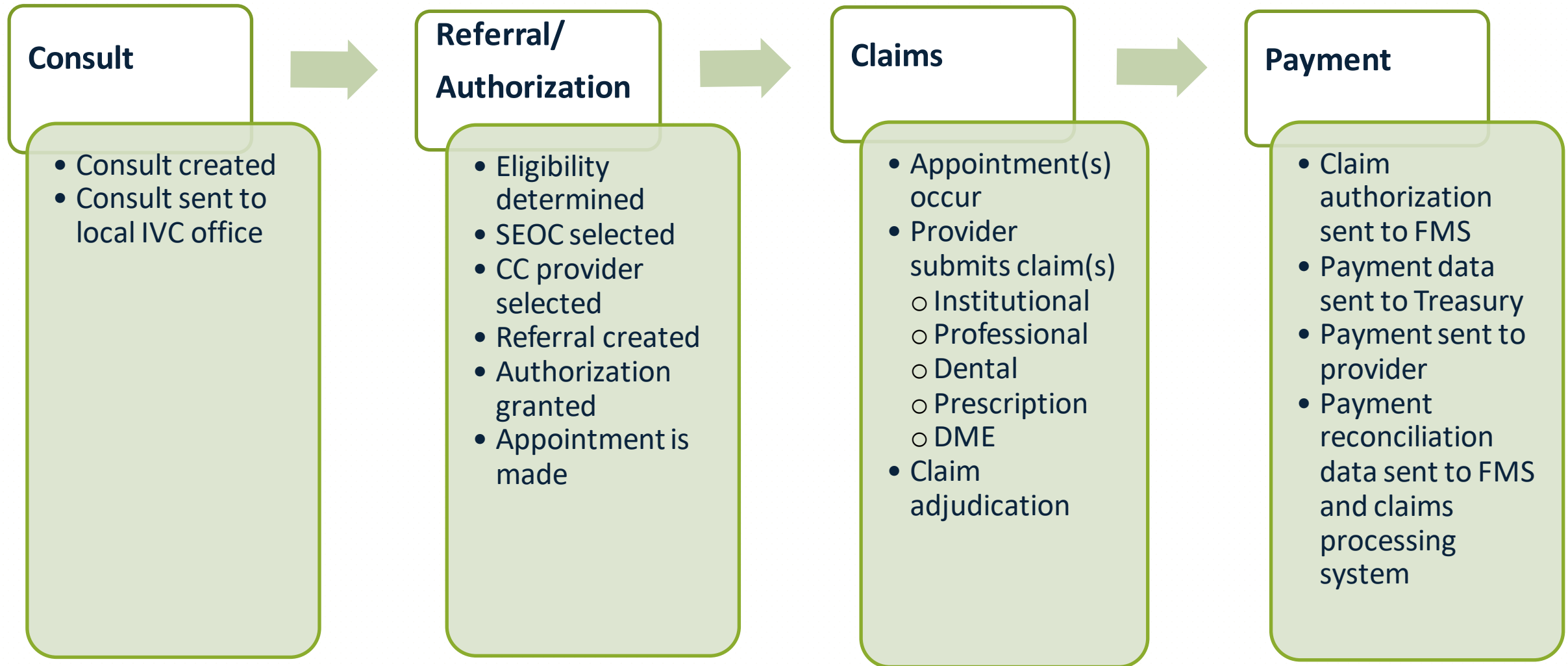
# Overview of VA-Purchased Community Care

Erin Beilstein-Wedel, MA  
Research Data Analyst, CHOIR COIN, VA Boston  
CREEK Data and Measurement Science Hub

# Overview: What is VA-Purchased Care?

- VA-purchased or “community care” (CC) is care paid for by the VA but delivered by providers outside a VA facility.
  - This care can take place in a multitude of settings
  - Providers could be VA staff at an academic affiliate, DoD providers, HIS/THP providers, or non-VA providers.
  - The Office of Integrated Veteran Care (IVC) oversees VA-purchased care
- VA-provided care
  - Care delivered in VA Healthcare Systems (VAHCS) and other VA facilities

# Overview: VA-Purchased Care Process



# Overview: VA-purchased vs VA-provided data

	<b>VA-provided</b>	<b>VA-purchased</b>
Consult	VistA	VistA
Referral	—	CCRA
Encounter/Claim	VistA	FBCS, VistA Fee, PIT, CCRS, eCAMS
Payment	—	FMS, claim systems

- Most data for most VA-provided care is entered through VistA, including lab results and free text notes
- VA-purchased care data spans multiple systems
  - Often not in VistA
  - Claims are similar to Medicare

# Available CDW Data Sources for VA-Purchased Care

Long Name	Short Name	Description
Community Care Referral & Authorization	CCRA or HSRM	Referrals and authorizations for VA-purchased care. Also called HealthShare Referral Manager.
Consult Toolbox	Consult Factor	Front end allows for input of consult requests, helps determine eligibility for CC, allows for input of Veteran preferences in care.
CDW Purchased Care Domain	VistA Fee	Authorizations and claims for care and authorized and unauthorized.
Fee Basis Claims System	FBCS	Authorizations, claims data.
Performance Integrity Tool	PIT	Meant to mitigate fraud, waste, and abuse and score claims. Contains expedited, lump sum and bypass payments that cannot be found in other claims systems.
Community Care Reimbursement System	CCRS	Claims for providers in the Community Care Network (CCN).
Electronic Claims Adjudication Management System	eCAMS	Claims for providers not in the CCN—including emergency/urgent care.
Consolidated Data Sets	CDS	Consolidated, standardized, datasets for consults, referrals, claims, and payments with linking keys. FY19 forward.

# CDW Data Sources for VA-Purchased care

Short Name	Consult	Authorization	Claims	Payment	NDS Approval	Access*
Consult Factor	Y	Y	N	N	Full (Basic)	Research
CCRA or HSRM	Y	Y	N	N	SPatient	Ops only (A06)
VistA Fee	N	Y	Y	Y	Full (Basic)	Research
FBCS	N	Y	Y	Y	SStaff	Research
PIT	L	Y	Y	Y	SStaff and SPatient	Research
CCRS	L	Y	Y	Y	SPatient	Ops only (A06)†
eCAMS	L	Y	Y	Y	SPatient	Ops only (A06) †
CDS	Y	Y	Y	Y	TBD	A06

\*Databases available for research are also available for operations

† Being incorporated into DART

Y=yes, data included

N=no, data not included

L=has linking variable to data of this type

# Some of the useful data elements: Referrals

Authorization #

Standardized Episode of Care (SEOC)

Date of input

Station number

Referring provider

Diagnosis



# Some of the useful data elements: Claims & Payments on Claims

## Patient Identifiers and Information

## Claim Type

## Dates

- Service
- Admission
- Procedure

## Procedure Codes (ICD-PCS / CPT)

- Modifiers
- DRG

## Diagnoses

- Primary/Secondary, PoA

## Prescriptions

- Limited; usually only 5 day prescriptions are allowed

## Costs/Charges

- Billed amounts
- Payments and payment dates
- Check information
- Obligation number

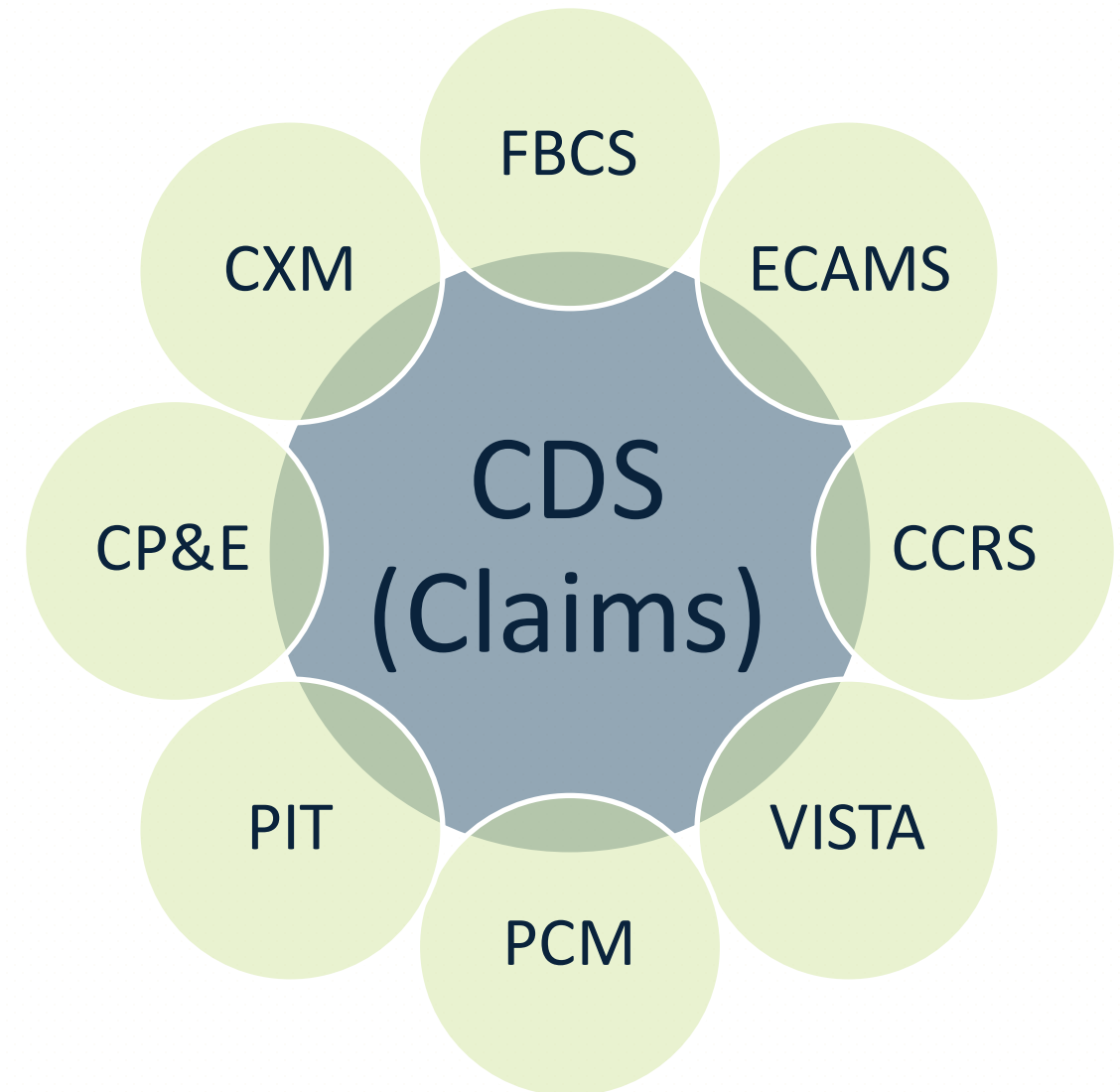
## Location of Care

- NPI
- Place of Service
- Type of Bill

## Station Number

# Upcoming Changes to VA-Purchased Care Data

- PIT was 'easy' but not complete, with frequent data quality issues
  - Misalignment with CCRS data input
  - Missing data points
  - Not easy to link to consults, referrals, payments
- CDS
  - Contain data from inaccessible systems
  - Only most recent submission
  - FY19 – current
  - Will also contain Consults, Referrals, and Payments



# In Summary

- Carefully consider deduplication
- Be flexible and prepare for some challenges
- Working on getting CCRS, eCAMS and CDS available to researchers
- If CCRS and eCAMS become available before CDS, please use them

# Measuring Utilization

## Cataracts, Primary Care, Behavioral Health, Total Knee Arthroplasties (TKAs)

Type	Data Source(s)	Identification of Utilization	Lesson Learned
Cataracts	Fee	CPT + CPT modifier + authorization diagnosis	Claims can be submitted multiple times, can be difficult to determine side of surgery
Primary Care	PIT + Fee	CPT + NPPES Taxonomy + PoS + Professional Claims only	Knowing how you want to 'count' beforehand is helpful How to connect to NPPES
Behavioral Health	PIT + Fee + FBCS	Inpatient: Principal diagnosis + Type of Bill + Revenue Codes Outpatient: CPT + NPPES Taxonomy + PoS	PIT doesn't always have the diagnosis qualifier
TKAs	PIT + Fee	DRG + ICD PCS + CPT + CPT modifier	Sometimes only an institutional claim is submitted when you expect both an institutional and a professional claim; may need to expand code types included

# Resources

## [VIReC](#)

- [Community Care for Veterans \(va.gov\)](#)

## [IVC](#)

- [OCC FGB Landing Page \(sharepoint.com\)](#)
- [Community Care Home \(va.gov\)](#)
- [Community Care Hub Home - VHA Office of Integrated Veteran Care \(va.gov\)](#)
- [Data locations](#)

## [Community Care Research Evaluation & Knowledge Center](#)

## [HERC](#)

## [BISL Daily Community Care CDW-Raw Updates](#)

## [Non-VA resources](#)

- [Find, Request and Use CMS Data | ResDAC](#)
- [CMS claims manual](#)
- [CMS costs](#)

# Acronyms

ICD	International Classification of Diseases
ICD-PCS	International Classification of Diseases - Procedure Coding System
DRG	diagnostic related group
CPT	Current Procedural Terminology
PoA	present on admission
ToB	type of bill
PoS	place of service
SEOC	Standardized Episode of Care

# Estimating Cost of VA-Purchased Community Care

Todd Wagner, PhD

Director, Health Economics Resource Center (HERC), VA Palo Alto

Professor, Department of Surgery, Stanford University School of Medicine

# VA-Purchased Care Cost Information

- Question: Why do you want cost information from VA-purchased care data?
- Common Answer: to compare VA-delivered care costs to VA-purchased care costs
- 5 reasons you should be very careful about this comparison

MDM Policy & Practice  
Volume 6, Issue 2, July 2021  
© The Author(s) 2021, Article Reuse Guidelines  
<https://doi-org.stanford.idm.oclc.org/10.1177/23814683211057902>



*Original Research Article*



## **Estimating the Cost of Surgical Care Purchased in the Community by the Veterans Health Administration**

Todd H. Wagner  <sup>1,2</sup>, Jeanie Lo <sup>3</sup>, Erin Beilstein-Wedel <sup>4</sup>, Megan E. Vanneman <sup>5,6,7</sup>, Michael Shwartz <sup>8</sup>, and Amy K. Rosen <sup>9,10</sup>



# 1) VA-purchased care datasets are organized differently than VA data

VA MCA data report comprehensive costs in a single record. This includes all the care provided to the patient during that encounter.

VA-purchased care is a series of claims, and encounters often have many claims. Pulling these claims together is limited by errors in the authorization id and incomplete data. Thus, VA-purchased care costs are often incomplete and underestimated.

Missing data, both missing information on a claim and missing claims, are a bigger problem for VA-purchased care.

Don't ignore missing data.

## 2) VA-Purchased Care Dates

Tracking the timing of procedures is imperfect.

Procedure (CPT) modifier codes are often incomplete in the PIT data.

- Avoid PIT data whenever possible!

CPT modifiers identify a surgical pre-op or a surgical post-op visit.

- If the modifier is missing, and a patient has more than one CPT for the same service, then it is hard to know when the service was actually provided.
- Our analysis of cataracts highlights this problem.

### 3) VA-Purchased Care Has Other Costs

Cost comparisons often ignore the TPA fees and the costs of running the Office of Community Care (now IVC).

In 2018

- TPA Fees +2.55%
- OCC costs +2.4%

In 2019

- TPA fees 4.85%
- OCC costs 4.7%

These costs change over time.

## 4) VA Expects VA Providers to Manage Purchased Care

VA primary care providers are expected to coordinate the care for VA-purchased care. This adds burden and costs to the VA data that do not exist on the purchased care side.

In other health care systems in the US, we don't expect one set of providers to coordinate care that they aren't providing.

## 5) VA-Purchased Care Payments are Capped

Finally, the VA-delivered MCA costs reflect the costs of providing care.

VA-purchased care does not reflect the costs of providing care

- VA rates are generally capped at Medicare rates, which is artificially below the costs of providing care.
- In 2017, commercial rates were 122% more than Medicare (HCCI).
- By 2020, the Kaiser Family Foundation reported that commercial rates were 199% more than Medicare rates.

Medicare rates are arguably below the rates that are sustainable for most providers. For VA, this means that comparing VA costs of providing care to artificially low rates is not a fair comparison.

I've got  
a good feeling  
this time.



Be  
Careful

# Assessing Access to VA-Purchased Community Care

Megan Vanneman, PhD, MPH

Core Investigator, IDEAS COIN, VA Salt Lake City Health Care System

MPI CREEK, Data and Measurement Science Core

Assistant Professor, Epidemiology and Population Health Sciences, University of Utah School of Medicine

# Has expansion of VA-purchased community care improved Veterans' access to care?



Veteran perspective



Drive distance



Areas with few healthcare providers



By type of provider





## Veteran Perspective

DOI: 10.1377/hlthaff.2019.01375  
HEALTH AFFAIRS 39,  
NO. 8 (2020): 1368–1376  
©2020 Project HOPE—  
The People-to-People Health  
Foundation, Inc.

### PATIENT-CENTERED CARE

By Megan E. Vanneman, Todd H. Wagner, Michael Schwartz, Mark Meterko, Joseph Francis, Clinton L. Greenstone, and Amy K. Rosen

# Veterans' Experiences With Outpatient Care: Comparing The Veterans Affairs System With Community-Based Care

**Data Sources:** VA Survey of Healthcare Experiences of Patients (SHEP) and CDW

**Key Access Finding:** While communication, coordination, and provider rating were better for VA-provided care, access to specialty care better for VA-purchased care; no difference for access to primary or mental health care

**Data Lesson Learned:** Can systematically compare Veterans to Veterans over time, but limited to those able to access care



## Drive Distance



## Comparing Driving Miles for Department of Veterans Affairs–delivered Versus Department of Veterans Affairs–purchased Cataract Surgery

Warren B.P. Pettey, MPH, CPH,\*† Todd H. Wagner, PhD,‡§¶ Amy K. Rosen, PhD,¶#  
Erin Beilstein-Wedel, MA,¶ Michael Shwartz, PhD,¶ and Megan E. Vanneman, PhD, MPH\*†\*\*

**Data Sources:** CDW, VHA Planning System Support Group (PSSG), National Plan and Provider Enumeration System (NPPES)

**Key Access Finding:** 26% of VA-purchased cataract surgeries took place at locations farther away than closest VA performing those surgeries, suggesting that distance isn't all that matters for Veterans' decisions.

**Data Lesson Learned:** National Provider Identifier (NPI) from VA-purchased claims can be linked to addresses in NPPES.



## Areas With Few Healthcare Providers



### County-level Predictors of Growth in Community-based Primary Care Use Among Veterans

*Sarah H. Gordon, PhD, MS,\*† Erin Beilstein-Wedel, MA,‡ Amy K. Rosen, PhD,‡§  
Tianyu Zheng, MS,¶¶ Alan Taylor Kelley, MD, MPH, MSc,||# James Cook, MS,||\*\* Sarah  
S. Zahakos, MPH,†  
Todd H. Wagner, PhD,††‡‡ and Megan E. Vanneman, PhD, MPH||¶\*\**

**Data Sources:** CDW, Area Health Resources Files (AHRF), County Health Rankings, NPPES

**Key Access Finding:** VA-purchased primary care may be serving an access need in counties that are rural, without a VA, and with lower provider supply.

**Data Lessons Learned:** Place of service codes can be used to identify outpatient care.



## By Type of Provider

### Psychiatric Services

## Differences Between VHA-Delivered and VHA-Purchased Behavioral Health Care in Service and Patient Characteristics

Megan E. Vanneman, Ph.D., M.P.H., Amy K. Rosen, Ph.D., Todd H. Wagner, Ph.D., Michael Shwartz, Ph.D., M.B.A., Sarah H. Gordon, Ph.D., M.S., Greg Greenberg, Ph.D., Tianyu Zheng, M.S., James Cook, M.Sc., Erin Beilstein-Wedel, M.A., Tom Greene, Ph.D., A. Taylor Kelley, M.D., M.P.H.

**Data Sources:** CDW, AHRF, NPPES

**Key Access Finding:** VA-purchased behavioral health care accounts for 20% of inpatient care and 3% of outpatient care, which has increased over time and is among clinicians with fewer years of training than in VA.

**Data Lesson Learned:** Can leverage provider specialties (“taxonomies”) in NPPES

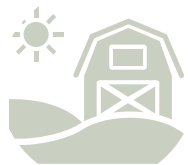
# Inevitably access to more providers due to expansion of VA-purchased community care, but ...



Veteran experience may not be better



Drive distance may not be shorter



May have an impact on availability of providers for patients who are not VA enrollees



Characteristics of providers may vary

THANK YOU!  
Questions?



# CONTACT INFORMATION

**Erin Beilstein-Wedel, MS**

[Erin.Beilstein-Wedel@va.gov](mailto:Erin.Beilstein-Wedel@va.gov)

**Matthew Labo, MPA**

[Matthew.Labo@va.gov](mailto:Matthew.Labo@va.gov)

**Megan Vanneman, PhD, MPH**

[Megan.Vanneman@va.gov](mailto:Megan.Vanneman@va.gov)

**Todd Wagner, PhD**

[Todd.Wagner@va.gov](mailto:Todd.Wagner@va.gov)





## DATABASE & METHODS CYBERSEMINAR SERIES

---

Next session:

Monday, October 3<sup>rd</sup> at 1 pm Eastern

Meet VIREC: The Researcher's Guide to VA Data





VA-Purchased Community Care Data  
**BONUS SLIDES**

# Other Data Sources for VA-Purchased Care

Long Name	Short Name	Description
Plexis Claims Manager	PCM/FSC	Claims from Financial Services Center (FSC) for Dialysis National Contract, Choice, PC3 and Camp Lejeune Family Member Program
ECR/ECAT	--	Referrals for emergency care
CAEC	--	Referrals for emergency care
Claim XM	CXM	Claims
Financial Management System	FMS	Payment data with transitions from Treasury

## Additional CDW Data Sources for VA-Purchased Care

CDW Table Name	Description
Con.Consults	Consults with stopcode 669 are for community care
Inpat.InpatientFeeBasis	Inpatient information for some patients in non-VA hospitals
Outpat.Visits	Non-workload only visits; stopcode 669 is for community care



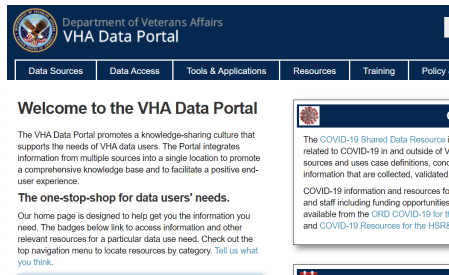
Database & Methods  
**BONUS SLIDES**

# Resources for VA Data Users

Select image to visit page



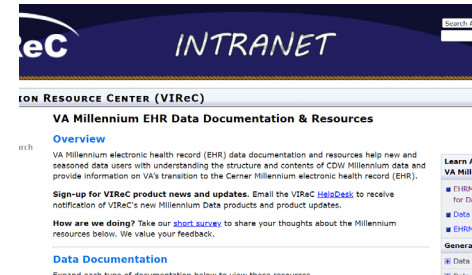
VA Information Resource Center (VIREC) (VA Intranet)



VHA Data Portal (VA Intranet)



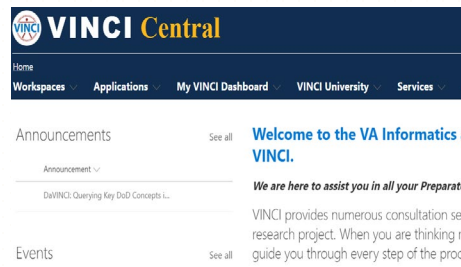
VIREC Cyberseminars



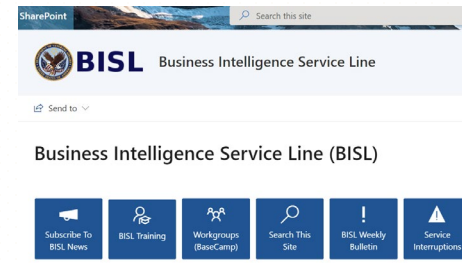
VA Millennium EHR Data Documentation (VA Intranet)



Quick Guide: Resources for Using VA Data (VA Intranet)



VA Informatics and Computing Infrastructure (VINCI) (VA Intranet)



BISL/CDW (VA Intranet)



Health Economics Resource Center (HERC) (VA Intranet)



## Questions about using VA Data?

### HSRData Listserv

- Community knowledge sharing
- ~1,400 VA data users
- Researchers, operations, data stewards, managers
- Subscribe by visiting <https://vaww.virec.research.va.gov/Support/HSRData-L.htm> (VA Intranet)

### VIReC HelpDesk

- Individualized support



[virec@va.gov](mailto:virec@va.gov)