Minutes

Research and Office of Integrated Veteran Care (IVC) Meeting

Friday, June 2, 2023 at 12:00PM EST

Agenda

| # | Topic | Lead Speaker |
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| 1 | Presentation – Cataloging and Evaluating Mental Health Care Quality Measures for Better Comparative Performance Management | Dr. Eric Schmidt, PhD  Supervisor, Measurement Analytics Team  Investigator, HSR&D Center for Innovation to Implementation (Ci2i) |
| 2 | Presentation – Expanding Access to Care Through VA Direct Care or VA Purchased Care | Dr. Megan Vanneman  Research Scientist  Salt Lake City, VA Medical Center |
| 3 | Discussion: Program Integrity Tool (PIT) Data Update | Dr. Megan Vanneman  Research Scientist  Salt Lake City, VA Medical Center |

Action/Follow-up Items

| # | Action Item | Date Assigned | Person | Due Date | Status |
| --- | --- | --- | --- | --- | --- |
| 1 |  |  |  |  |  |

Published Papers:



Minutes:

Presentation – Cataloging and Evaluating Mental Health (MH) Care Quality Measures for Better Comparative Performance Management (Dr. Eric Schmidt)

* Project – a few years in
* Goal -To provide information about which measures to select when measuring MH and Substance Use Disorder (SUD) health care service quality
* Patterns of anti-depressive prescribing were not following formulas (clinical incentives/clinical practice use)
* Sail MH domain taken out of registries and Access to Care website
* Positives:
  + Inform decisions on what to do
  + In response to Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSION) Act – comparisons to private sector
* Where next? CMS has decided to consider evolving this measure
  + Start describing the implications of implementation for process improvement
  + CMS is now interested in a higher prevalence
  + Larger role for purchased care data for acute psychiatric services
* Strategy:
  + Try to make a practical product for facilities and local decision-making
  + Describe pathways Veterans can take through the network
* Most common question is whether performance is better through VA internal care or through VA-purchased care? Facilities will have to refer regionally for these services and Veterans navigate in and out of communities via these pathways
* Timeline? About 1 year left of funding; timeline to having a data set is still a few months out (Need to get access to IVC’s consolidated data set, which will help expedite)

Presentation – Expanding Access to Care Through VA Direct Care or VA Purchased Care (Dr. Megan Vanneman)

* Project is funded through Salt Lake City Evidenced-Based Policy Center (SALIENT)
* Expanding access focus is to start with methadone treatment, then another behavioral health topic, and finally a non-behavioral health service
* Examining access, quality and cost
* Multiple aims:
  + Aim 1 - Plans to purchase mobile vans to provide methadone treatment. Interviews with VA leaders, VA providers, and Veterans.
    - VA purchased community care – methadone is the #2 Current Procedural Terminology (CPT) code purchased in outpatient community (VA only has 33 brick and mortar sites that provide services)
* Aim 2 - Make sure we have the right metrics (Ex: access, quality and cost)
* Aim 3 – Cost-effect analysis and budget impact analysis
* 5-year project
* Timeline – Qualitative work being done this year and next year and then metrics, cost-effectiveness analysis and budget impact analysis

Discussion: PIT Data Update (Dr. Megan Vanneman)

* Office of Integrity and Compliance (OIC) disseminated announcement yesterday on Health Services Research and Development (HSR&D) listserv; highlights process for operations projects getting access to PIT data; encouraging everyone to use Consolidated Data Set (CDS)
* Still confirming the process related to research projects (data provision); Investigators must acknowledge guidance on PIT issues before using PIT data
* OIC is reviewing updates provided
* CDS does not include pharmacy data, VA Family Member Program (VFMP) data, and some Choice data (must use PIT anyway if searching these areas)

Announcements – Tuesday meeting to discuss Researcher in Residence at 2:30pm EST

Dr. LaPuz Comments

* Increasing interest regarding comparisons between VA and non-VA provided Residential Rehab Treatment Programs (RRTP)
* Non-VA programs are marketing to Veterans and claiming services superior to VA putting increasing pressure on VA programs
* VA needs evidence to show the difference in the quality of care

Dr. Yende Comments – VA spending close to $600 million on RRTP this year – this will be a major category of spending in the next 12-14 months