

## **SDR 17-156: Developing Measures to Evaluate Network Adequacy for VA Community Care**

**Michelle Mengeling, PhD (Co-PI)**

**Iowa City VA Health Care System, Iowa City, IA**

**Funding Period: April 2017 - September 2018**

### **Background / Rationale:**

Assessing the network adequacy of VA's affiliated community-providers is an essential preliminary step to determining how to efficiently and effectively ensure Veterans have access to high-quality community care. In the three years since the Veterans Choice Program (VCP) was authorized, VA has faced increasing pressure to ensure that its non-VA community networks are sufficiently developed to meet the needs of Veterans receiving VCP care. To date, the VA has not defined an approach to adequately assess and measure network adequacy, and Third Party Administrator (TPA) contracts are not held to meaningful measures to assess whether their networks are sufficiently developed in order to meet VA's Community Care needs. Most importantly, network adequacy is a necessary precursor to characterizing reasons why care cannot be obtained in specific communities or care types and subsequently identifying ways to address these needs (extending networks, expanding VA services, using technology to offer telemedicine options or novel approaches yet to evolve).

### **Objective(s):**

The aim of our planning grant is to develop a comprehensive system of network adequacy measurement and evaluation using a multi-pronged approach. We plan to: 1) utilize an expert panel to develop a comprehensive understanding of the fundamental components of non-VA network adequacy standards, measurement practices and regulations, and unique geographic and healthcare (primary vs. specialty) characteristics. With this information as a basis for understanding components of network adequacy, we propose to: 2) conduct demand/capacity modeling to accurately determine VA needs in primary, specialty, and mental health care across VA facilities; 3) develop appropriate measures of network adequacy to direct targeted responses with the long-term goal; 4) of monitoring network adequacy over time. Throughout this process, our Advisory Panel, comprised of our VA program partners, researchers, and non-VA network adequacy experts, we will develop a framework for subsequent research on the role of community providers in an integrated VA healthcare system.

### **Methods:**

For Aim 1, we plan to use a modified Delphi panel process during the meeting with our Expert Panel to critically review and synthesize existing network adequacy standards in order to generate evidence-based recommendations for VA Community Care network adequacy measures. For Aim 2, we plan to develop and refine demand/capacity models by using historic demand data (FY15-16) for each facility and monthly appointed authorizations for each VAMC. Furthermore, we plan to apply the demand/capacity model to each type of primary/specialty care/mental health at the VA facility-level. Following this, we plan to establish routine monitoring of demand/capacity and evaluate the temporal stability of demand/capacity estimates.

### **Findings / Results:**

No findings at this time.

### **Status:**

We are still in the planning stages.

**Impact:**

Our VHA Community Networks planning grant will develop standardized measures of network adequacy for Community Care that characterizes strengths and weaknesses of local networks through a comprehensive evaluation of network adequacy for both primary and specialty Community Care. Without measures of network adequacy, it is unclear where variation exists (e.g., facility-level, care type), reasons for the variation (need/capacity), and the magnitude of the variation (potential impact on Veteran health outcomes). Our work will address these important gaps and allow the VA to build highly-functioning community care networks.