

Utah's US Veterans Needs Assessment Report

The Rural Health Association of Utah conducted a US Veterans needs assessment in seven counties at the direction of the Office of Primary Care and Rural Health. The purpose of the assessment was to gather information directly from US Veterans, hospitals and community organizations in order to better understand the personal experiences, local resources and barriers that Veterans and providers of services experience in accessing health benefits. This information will be used to improve access to needed healthcare services and to improve the coordination of care for veterans living in rural areas. Some challenges due to the COVID-19 pandemic resulted in some changes in how the assessment was conducted, including virtual interviews and meetings.

US Veteran Interviews

We interviewed 31 US Veterans throughout rural Utah from Washington, Iron, Piute, Kane and Garfield Counties. Each Veteran provided unique insight into their experiences in accessing healthcare services locally and through the VA system. Qualitative statements from the interviewees were recorded with a few noted below: Thematic analysis was used to analyze and categorize the qualitative data. This was completed at the county level and then combined for all 5 counties represented (see graphs and data summary document). Some of the input directly from Veterans is reflected below:

“Veterans living in rural places are discriminated against for healthcare.”

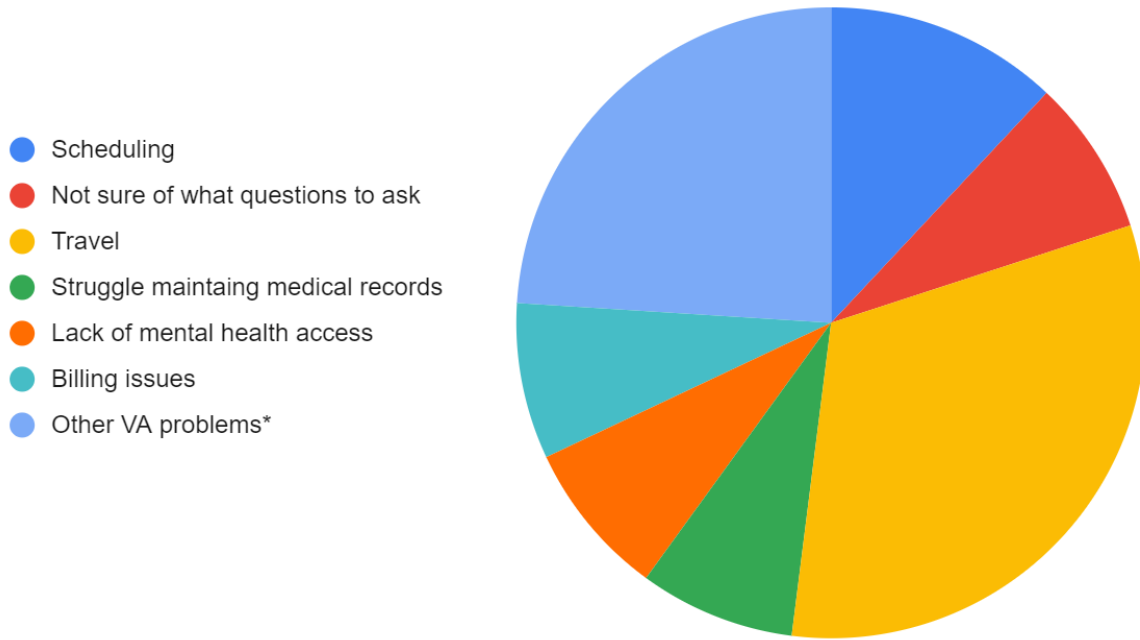
“Consensus big percentage of the suicide in veterans is the difficulty of having to work with the VA and the pain of dealing with the VA. To come home and have some guy, tell you that it is all in your head and not really understand you that's hard. A lot of people don't understand veterans.”

“A lot of veterans don't know how to get compensated, have an advocate or a friend that knows what to do.”

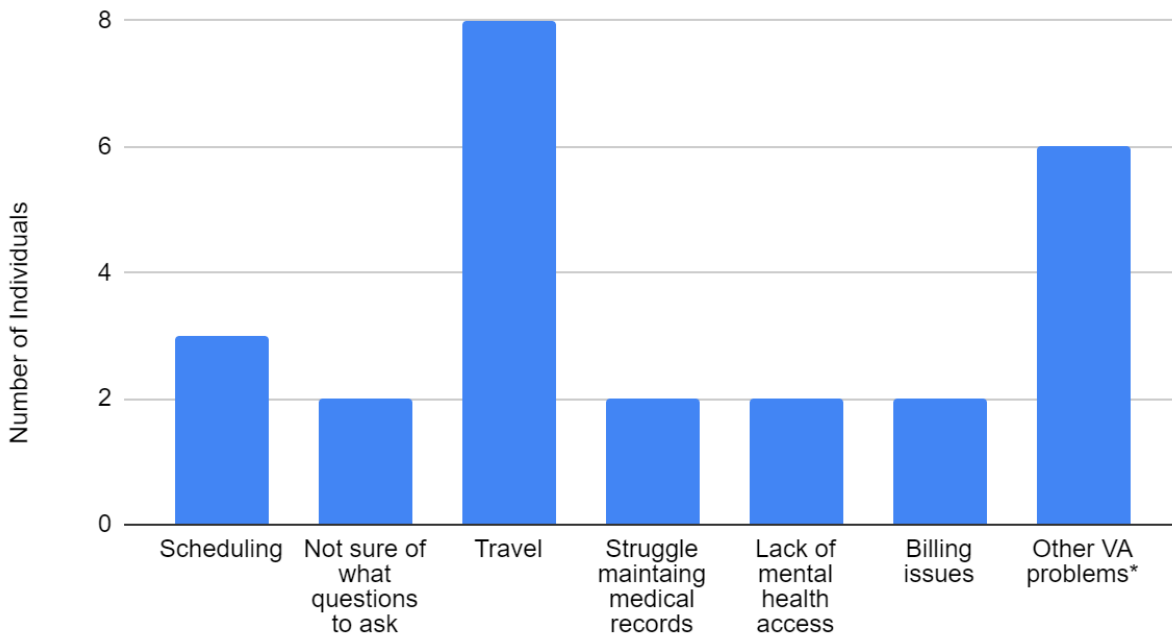
“They should make veterans benefits accessible no matter where you live, they should not make it this hard.”

“It's ridiculous... it is so hard for veterans to access these benefits. The wait is ridiculous to just get in to see a doctor as a veteran. If they would make every hospital and provider be required to see veterans that would help.”

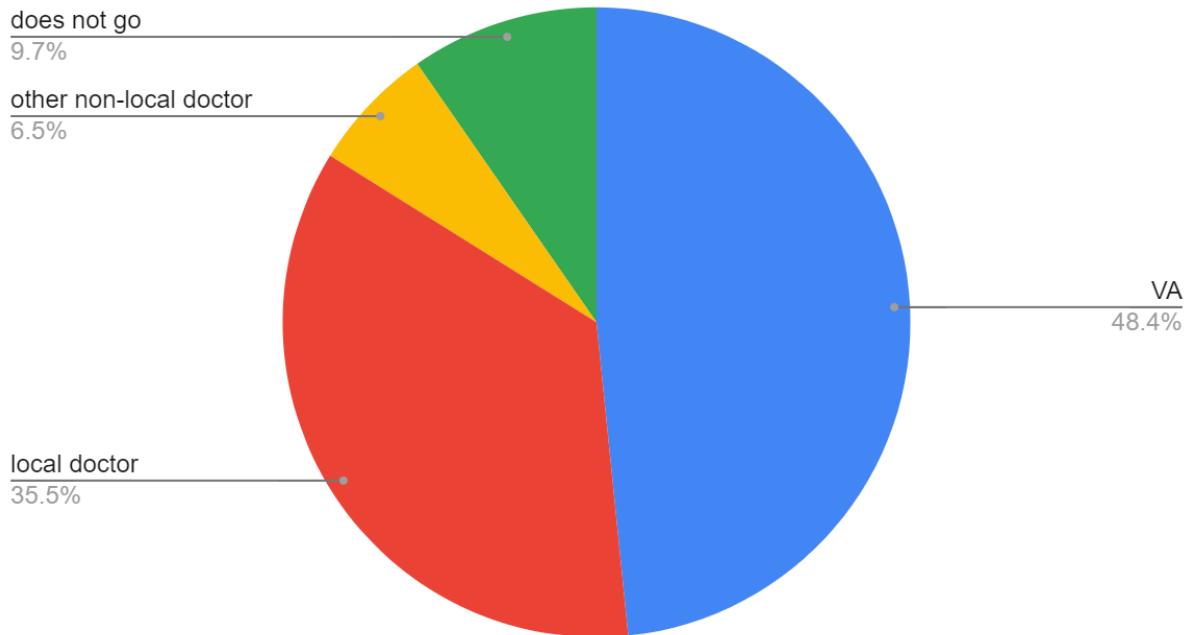
Rural Veteran Barriers to Healthcare Access



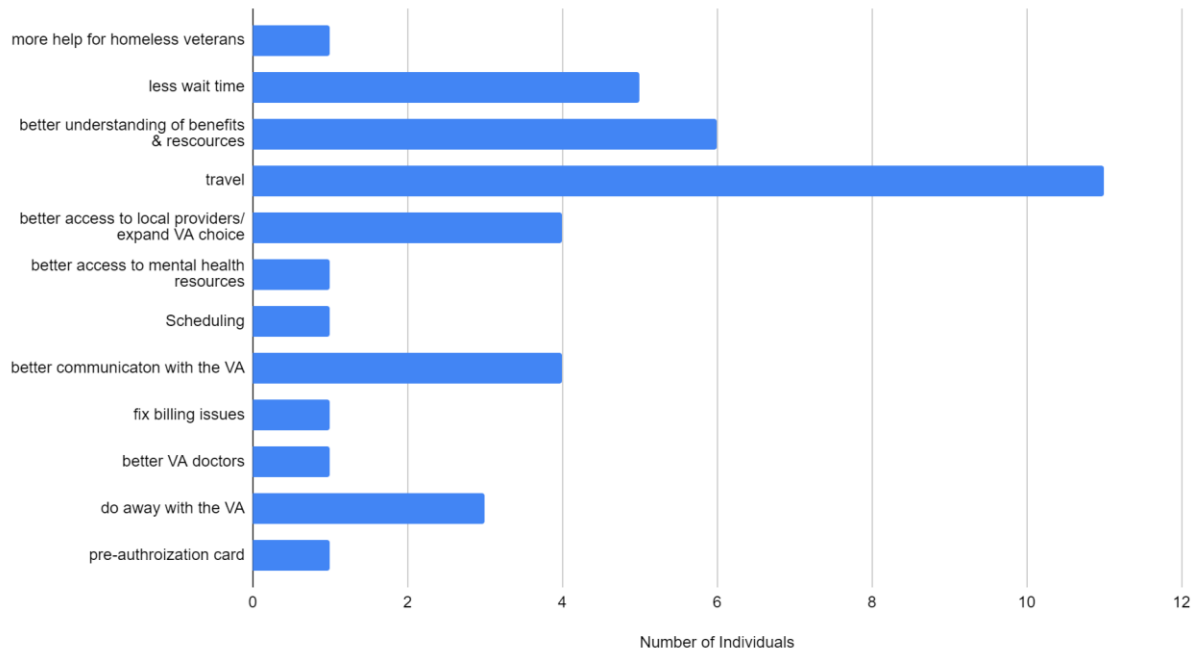
Rural Veteran Barriers to Healthcare Access



Where Rural Veterans Go For Primary Care Services



Ways to Improve Access to Care



Focus Groups

Focus groups were conducted in the counties of Iron, Washington, Wayne, Piute, Kane, Uintah, Sevier, Grand and Duchesne. These included 44 different organizations that work with veterans. These were conducted in person prior to social distancing, virtually through zoom and by contacting the organizations by phone. A number of organizations were contacted many times without the success. Those that were contacted provided valuable information regarding working with veteran organizations. Most organizations contacted said that only a small portion of their work is dedicated to serving Veterans. A complete list of organizations contacted or attempted to contact is provided in the data summary. Thematic analysis was used to analyze and categorize the qualitative data. Out of the 44 organizations we interviewed, 26 of them offered services to veterans at no cost to veterans. When asked if the organizations performed outreach to veterans, 14 said they shared resources through email, social media, and fairs, but 15 of the 44 organizations said they did not perform outreach specifically to veterans. 23 of the 44 organizations said they collaborate with the VA and 19 said they don't (see additional graphs below). An added benefit to those organizations that attended a group session was connecting with other organizations in the area to learn more about their services. Qualitative statements from the interviewees were recorded with a few summarized here:

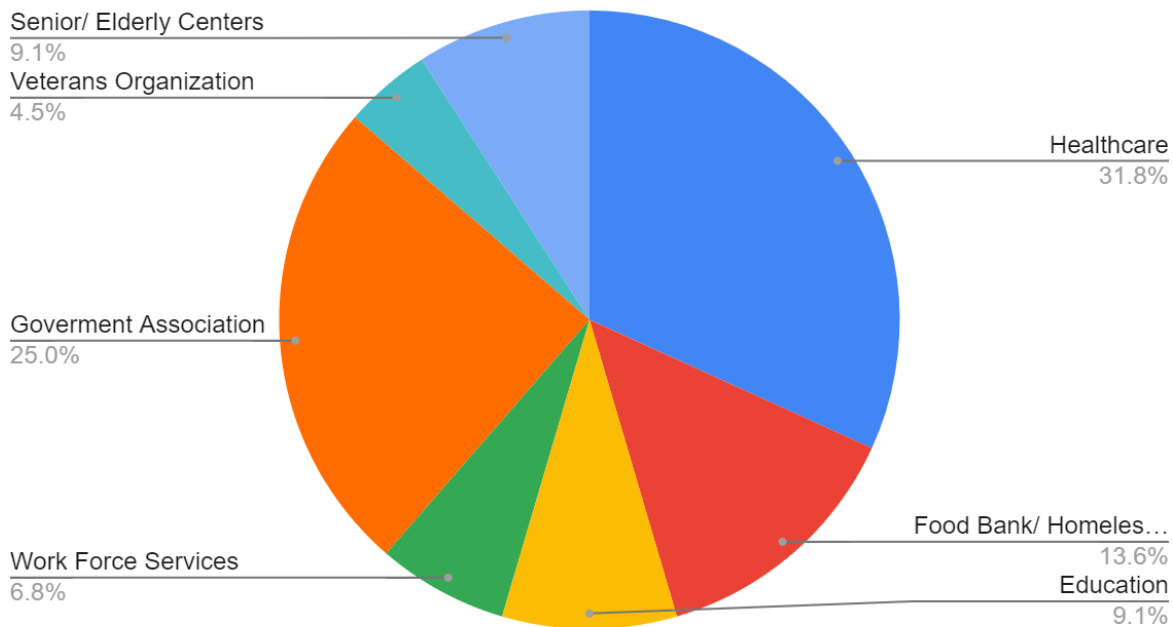
“Often rural communities are small so that makes working with the VA more difficult. Veterans don’t know what they are offered and sometimes paperwork keeps them from applying for resources.”

“Worst thing is that everything has to be pre- authorized veterans often come in and think they have pre -authorization but they don’t or they need some other type of approval”

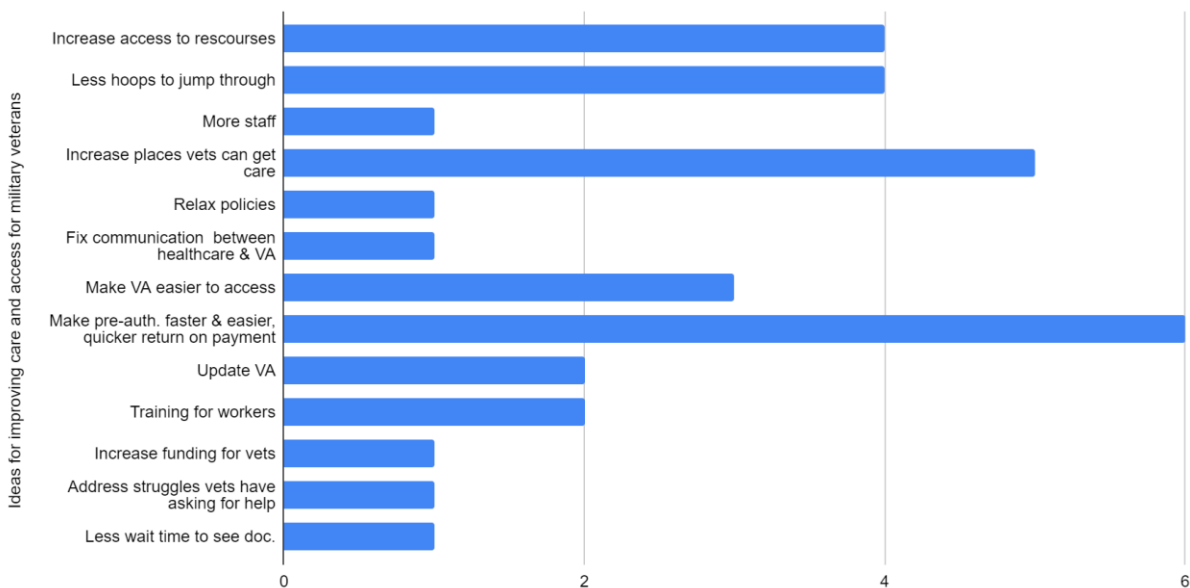
“In order to deal directly with the VA many seniors have to do it over the phone as our nearest VA centers are more than an hour drive. The drive is hard for most seniors, but talking on the phone can be equally hard for many of them.” -Kane County

“There is a long wait time to get in to see a doctor. This one veteran came in and was in so much pain and he couldn’t get into see a health care provider... he called the suicide hotline because he was in so much pain and was so desperate and it still took 4 days to get in to see a doctor.”

Type of Organization



vs. Ideas for improving care and access for military veterans



Hospital Listening Sessions

Hospitals were contacted in 4 counties and provided information regarding the services provided to Veterans (Kane, Iron, Sevier, Garfield). Generally, the CEO, CNO, social worker and billing representative attended the session. The main issues for these hospitals were:

- Lack of education and information available from the VA.
- A desire to receive training and education to better understand the VA system and the unique needs of treating Veterans.
- Difficulty navigating the VA system especially with regards to discharge from the hospital often delaying discharge for the Veteran.
- Recommendations included making it easier to access DME equipment from local providers, access to home care and access to transportation.

Additionally we contacted organizations that directly serve Veterans including the Utah Department of Military and Veteran Affairs, VA Colorado, VA Clinics, Some representatives from these organizations did not return multiple calls which limited additional information from being obtained. We also reviewed websites to obtain more information on the VA Choice program, disability rating, Tricare, VA Benefits and attempt to navigate the VA Website.

Assessment Summary

The needs assessment indicates a significant lack of information on how Veterans can access healthcare services locally and through the VA Centers and Clinics. One resource that provides great assistance to Veterans is the Utah Department of Military and Veteran Affairs. This department has a focus on helping navigate GI benefits, employment, education and other resources. We found that their response to questions regarding health benefits was to refer the Veteran to the VA website which is complex and difficult to navigate. Another resource that is helpful to Veterans is the Veterans Resource and Support Centers located at all the major Higher Education Institutes in Utah. These centers provide educational navigation and some provide counseling and tele-mental health services. However, these services are only offered to Veterans who are enrolled at the University. Representatives at hospitals expressed desire to improve the ability to navigate the system in order to better serve the Veterans and improve the discharge process. Travel appears to be the biggest barrier in access to VA Healthcare. A lot of Veterans suggested that having more places Veterans can go to access resources locally. Many Veterans do not know about the VA Choice program or how it works or how to qualify for the program. Additionally, for those who access VA Choice, expressed their frustration with the prior authorization process which becomes tedious and time consuming.

Recommendations:

After listening directly to our US Veterans and those who provide services to support their health and well-being we recommend exploring the following considerations.

- Improving travel resources including use of local shuttle services already in businesses within rural communities.
- Increase the tele-health and tele-mental health services available to Veterans within their own community.
- Provide educational resources and navigational support to Veterans and providers about the VA Choice program.
- Provide educational resources and navigational support to rural hospitals, social workers and organizations working with Veterans
- Expand Skilled Nursing Facilities to include local rural skilled nursing.
- Expand DME services to include contracts with local DME providers and large DME providers that service the entire state.
- Expedite the discharge approvals needed for rural hospitals to safely discharge a Veteran patient back to the community.
- Connect organizations that work directly with Veterans to increase collaboration and networking.
- Leverage the Utah Department of Military and Veterans Affairs and the Veteran's Resource and Support Services located in Universities across Utah. These resources have connections with Veterans, however lack funding to expand into healthcare navigation.

References:

VA Office of Rural Health

<https://www.ruralhealth.va.gov/#:~:text=Congress%20established%20the%20Veterans%20Health,who%20reside%20in%20rural%20communities>

VA Choice Program

<https://militarybenefits.info/veterans-choice-program/>

Utah Department of Veterans and Military Affairs

<https://veterans.utah.gov/>

University Veteran Support Centers:

SUU

<https://www.suu.edu/veteransaffairs/>

DSU

<https://veterans.dixie.edu/>

Snow College

https://www.snow.edu/offices/veteran_services/index.html

USU

<https://www.usu.edu/veterans/>