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Statement of

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and

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Good Morning Senator Murray and Members of the Committee: Thank you for the opportunity to appear today to discuss our preparedness to meet the needs of returning Operation Iraqi Freedom and Operation Enduring Freedom veterans. I am Dennis Lewis, the Acting Network Director of the Veterans Integrated Services Network (VISN 20), providing healthcare to Northwest veterans. I am also the Assistant Deputy Under Secretary for Health for Operations and Management; a position I have held since July 2002.

I would like to recognize you, Senator Murray, for providing this forum to focus on our returning OIF/OEF veterans and for your continuing leadership and support for all veterans in Washington State.

At the core of VA's mission is a solid commitment to the service of those men and women who so faithfully have served our country. The VA Northwest Health Network is honored to be able to provide veterans, including recently returning active duty, reservists and National Guard troops with services designated to specifically address the health care needs of their military deployment.

In addition to Washington State, the VA Northwest Health Network is comprised of the states of Alaska and Oregon, most of Idaho, and one county each in Montana and California. Our 135 counties cover approximately 23% of the United States land mass. VISN 20 consists of six medical centers, including two academic referral sites, one independent outpatient clinic, one rehabilitation center, 19 community based outpatient clinics, and one mobile clinic. Other services include 7 nursing home care units, 2 homeless domiciliaries, and 14 Veterans Outreach Centers (Vet Centers). VISN 20 has one of the VA's most robust research programs. Program areas of significance to veterans include limb loss prevention and prosthetics; spinal cord injury and rehabilitative medicine; mental health; addiction treatment; Post Traumatic Stress Disorder (PTSD); and deployment health programs.

VISN 20 supports the use of Telemedicine to enhance care to our veterans. Telemedicine involves the use of electronic medical information and communication to provide and support health care when distance separates the provider from the patient. Because of our geographic distribution, we use telemedicine throughout the Network to increase access to our care, and find it especially useful in providing care for veterans in remote areas, veterans in State Veterans Home and those who are disabled and elderly. We use telemedicine in radiology, mental health, cardiology, pathology, dermatology, psychiatry, and in-home care teleconsultations for spinal cord injury patients and for patients with other chronic conditions.

In Washington State, veterans receive care at the VA Puget Sound Health Care System, the VA Medical Center (VAMC) Spokane, VAMC Walla Walla and the Vancouver campus of the VAMC Portland, in addition to eight Community Based Outpatient Clinics (CBOCs) and five veterans readjustment counseling centers (Vet Centers). During FY 2005, VISN 20's operating budget has amounted to approximately \$1.20B, and the Network employs 7,966 staff. In FY 2004, VISN 20 served 194,949 veterans, a 6.6% increase over FY 2003, making us first in growth within the Veterans Health Administration (VHA), more than double the national average growth rate. In spite of these increases, the Network costs grew at just 0.6% in FY 2004.

As you well know, Washington State has a significant number of troops currently serving in Operation Enduring Freedom and Operation Iraqi Freedom. To date, we have seen nearly 3,300 (3,281) returning veterans from OIF/OEF within the Network, of whom, nearly 65% (2,131) have been treated at our Washington State facilities.

In addressing today's topic, I would like to profile the Washington State facilities who provide care to our returning veterans. I am pleased that Dr. Stephen Hunt will be sharing information with you about the VA Puget Sound Health Care System (PSHCS) Deployment Health Clinic that follows the care of veterans (including active duty, National Guard and reservists) who are experiencing unique health concerns related to their specific military deployment. This care is provided even if the veteran is receiving his/her care outside a VA setting. As a result of Dr. Hunt's leadership, the PSHCS has become known as a national leader in issues of deployment health.

The VA PSHCS, with campuses in Seattle and at American Lake (Tacoma) is the largest VA academic referral medical center in the Northwest. As a primary and tertiary care facility, the VA Puget Sound Health Care System provides a full range of patient care services, with state-of-the-art care.

The PSHCS had approximately 612,377 patient visits in fiscal year 2004, providing care to 59,329 veterans, throughout the state and across the VISN. So far this year, they have provided care to 5.7% more veterans than last year at this time including 1,567 OIF/OEF veterans.

At our Spokane facility, during fiscal year 2004, there were 204,915 patient visits providing care to 21,008 veterans, primarily from Spokane and Kootenai counties. So far this year, the VAMC Spokane has provided care to 8.9% percent more veterans than last year at this time including 368 OIF/OEF veterans. Spokane VA operates a mobile primary care clinic that visits nine remote sites (five in WA, three in ID and one in MT) providing follow up care to their patients.

At the Walla Walla VAMC, 93,643 patient visits occurred in fiscal year 2004. The Medical Center provided care to 12,611 veterans, primarily from 15 counties. So far this year, the VAMC Walla Walla has provided care to 196 OIF/OEF veterans. In addition to the parent facility, the VAMC Walla Walla operates Community Based Outpatient Clinics in Yakima and Richland (Washington) and in Lewiston (Idaho).

VISN 20 has demonstrated our commitment to the seamless transition of returning combat veterans. In anticipation of returning OIF/OEF veterans, our Medical Center employees, throughout the VISN, have been thoroughly trained to ensure that they can identify these new

combat veterans, and to take appropriate steps to ensure that they receive the world class care they have earned.

Since August 2003, VISN 20 has supported the placement of two VHA social workers located at Madigan Army Medical Center working with Veterans Benefits Administration (VBA), to ensure a successful transition for returning service personnel. These employees work closely with specifically assigned Points of Contact (POCs) at each of VISN 20's facilities and our VISN office; this active out-processing program has touched the lives of 2,624 individuals throughout the VISN since 2003 resulting in over 1,700 referrals. Our intent is to continue this important partnership as a means of encouraging those who are returning home from military commitments to pursue post-deployment support.

VISN 20 is also prepared to provide specialized care for service members and veterans. The PSHCS Spinal Cord Injury Unit (SCI) has provided care to four veterans transferred directly from Walter Reed Army Hospital. In addition, their Rehabilitation Care Service has provided a combination of inpatient and outpatient care to twelve veterans also directly transferred directly from Walter Reed.

The PSHCS has been nominated to be the Northwest Network's Tertiary Polytrauma Center. The facility will coordinate the care and services required to meet the needs of the amputee population and assure that patients have access to the same high level of care across the network. They will be responsible for implementing care that transitions individuals back into their home community.

VISN 20 is also participating in VHA National initiatives focused on OIF/OEF. PSHCS has been approved to develop ?VISN-Wide Outreach, Early Intervention Collaborative Care with DoD and State Partners.? Spokane VAMC has been funded to establish ?PTSD Rural Outreach Services.?

VISN 20 has taken a collaborative approach in addressing the Mental Health care needs for our nation's newest veterans. In 2004, we sponsored a comprehensive clinical update for our behavioral/mental health staff and others (Readjustment Counseling Centers, Private Sector Health Care Systems and Agencies, other VISNs and Washington State DVA). The program provided an opportunity among the 330 participants for sharing best practices. In addition, it highlighted recent research and data to assist clinicians as they provide care to veterans. An OIF/OEF Conference is currently planned for November 3-5, 2005. The program will be comprised of three one- day programs focusing on specific audiences (Primary Care, Mental Health Clinicians and Veteran/National Guard and Families).

Additionally, VISN 20 is an active participant in a Memorandum of Understanding, initiated by the Washington State Department of Veterans Affairs, with the Washington State Department of Defense, the National Guard and the Reserve to inform returning service members and their families of their benefits and deliver the services that are needed for our nation's newest veterans. Oregon has also recently entered into a similar agreement and one is pending in the State of Idaho.

Senator Murray, I have provided you an overview of VISN 20 and the services we provide to our veterans and patients. However, it is our veterans who tell us how we are doing and provide us ongoing feedback. VHA measures patient and veteran satisfaction for both outpatient and inpatient care. I am proud to share with you VISN 20 has tied nationally as #1 for overall satisfaction for inpatient care (Spokane is rated #1 for all VHA facilities) and we are # 5 overall for outpatient care. We also measure how long our veterans wait to see their providers once they arrive for their clinic appointment. Our goal is for them to be seen within 20 minutes or less. We are ranked 3rd in the nation and continually strive to improve. As you can see, our veterans continue to acknowledge we are providing timely quality care.

As we celebrate the VA's 75th anniversary, all of the dedicated employees in the Northwest Network are proud to serve the VHA mission: Honor America's Veterans by Providing Exceptional Healthcare that Improves Their Health and Well-being. I believe we have demonstrated and can promise that we are prepared to continue meeting the needs of returning veterans.

Thank you, Senator Murray. This concludes my formal remarks. I welcome any questions the Committee Members may have.