

CARES COMMISSION POST HEARING SUMMARY

VISN 10 – Columbus Hearing
August 19, 2003

- I. Commissioners in Attendance:
- a. Everett Alvarez, Commission Chairman
 - b. John Vogel, Commission Vice-Chairman
 - c. Richard Pell, Hearing Chairman
 - d. Layton McCurdy, MD, Commissioner
- II. Market Areas Addressed in Hearing
- a. Central Market (Columbus and Chillicothe)
 - b. Western Market (Dayton and Cincinnati)
- III. Market Area Summary

Market Area <i>(Indicate Facility if Applicable)</i>	Planning Initiative <i>(Met Criteria)</i>	Market Plan Recommendation	DNCP Recommendation
Central (Columbus)	Access to hospital care -- 39% vs. 65% goal, veterans in 9 counties north of Columbus are outside 60 mile radius of Chillicothe	Contract with area hospitals in Columbus for inpatient care, raises access from 39% to 83%	Contract for acute hospital care in Columbus, raises percent of veterans within access guidelines from 39% to 83% in 2012, and 84% in 2022
Central (Columbus)	Primary Care: 30K stops 2012 6K stops 2022 Specialty Care: 79K stops 2012 63K stops 2022	<ul style="list-style-type: none"> ➤ Open Ambulatory Care Center in Columbus by 2005 ➤ Build replacement, expanded Ambulatory Care Center in Columbus on DOD-donated land at Defense Supply Center Chillicothe to contract with area providers for specialty care and refer to Columbus Ambulatory Specialty Care Center once it opens. ➤ Open 2 CBOCs at Cambridge and Newark by 2004/2005 	<ul style="list-style-type: none"> ➤ In-house expansion (leases and new) ➤ Telemedicine ➤ New expanded 260K sq ft outpatient specialty care center to be built on DOD/ Defense Supply Center site in Columbus ➤ DOD has up to 200 acres at no cost to VA ➤ Terminate 150K sq ft leased space ➤ Offer selected high volume specialty care at larger CBOCs
Central (Chillicothe)	NCA collaboration at Chillicothe	<ul style="list-style-type: none"> ➤ NCA interested in up to 50 acres on campus in 2009 ➤ NCA contacted state about making it a state- operated national cemetery ➤ Proposed state veterans nursing home 	<ul style="list-style-type: none"> ➤ NCA considering use of up to 50 acres for a cemetery site, not before 2009 ➤ Chillicothe is one of seven high priority NCA initiatives for 2004 - 2010
Central (Chillicothe)	Reduce vacant space	Reduce space at Chillicothe	VISN 10 total of 115K sq ft in 2022, reduced by 65% from 331K to 116K
Western	Dayton and Cincinnati 50 miles apart	Maintain both VAMCs and increase sharing/consolidation of services	Maintain both VAMCs and increase sharing/consolidation of services
Western	Primary Care: 77K stops 2012	Increase workload at existing CBOCs	In-house expansion of CBOCs Telemedicine

	43K stops 2022 Specialty Care: 77K stops 2012 54K stops 2022	Add 3 new CBOCs	Community contracts and selected high volume specialty care at larger CBOCs
Western (Dayton)	Collaboration with Wright Patterson AFB	Increased sharing with Wright Patterson AFB	No specific mention
Western (Dayton)	Reduce vacant space	Reduce vacant space at Dayton through enhanced use leases	No specific mention of enhanced use at Dayton; provide additional parking at Cincinnati VAMC through enhanced use leasing of Ft. Thomas quarters

IV. Brief Description of Hearing Testimony

a. Elected Officials – The first panel consisted of four elected officials, three Members of Congress – Representatives David Hobson, Deborah Pryce, and Patrick Tiberi -- and the Mayor of Columbus, Michael Coleman. Each witness stressed the need for, and his or her support for, a new outpatient clinic in Columbus (the proposed site is actually in a neighboring jurisdiction). They also voiced support for meeting the inpatient care needs of veterans in the Columbus area. Two of the federal elected officials expressly supported contracting for such care.

b. Network Panel – Mr. Clyde Parkis

Mr. Parkis outlined the overall CARES plan for the network, with an emphasis on the Central Market (Columbus and Chillicothe). The Commissioners questioned Mr. Parkis at length on the network’s plans, both at present and in the future, for contracting for inpatient care, emergency services, and specialty care in the Columbus area. Mr. Parkis expressly supported a contract for inpatient services. There were also questions on the status of the Chillicothe facility and on the degree of coordination between the Dayton and Cincinnati medical centers.

c. Panels 3 & 4 – Veteran Service Organizations

The Ohio Director of Veterans Affairs as well as representatives from The American Legion, Disabled American Veterans, AMVETS, Vietnam Veterans of America, the Franklin County Veterans Service Organization, and an individual veteran (Medal of Honor recipient) provided testimony. There was strong support for the new clinic in Columbus (with descriptions of the problems now faced by veterans seeking care in the area) as well as significant support for the establishment of a VA inpatient facility in Columbus.

d. Panel 5 – Employee Organizations

This panel included representatives from three organizations – AFGE, SEIU, and the United Nursing Association. These witnesses focused most directly on their individual facilities (Chillicothe, Dayton, and Cincinnati) and on staff-related concerns.

e. Panel 6 – Affiliates and Collaborative Partners

This panel consisted of representatives from the Defense Supply Center Columbus, a non-profit entity which deals with historical property at the Dayton VAMC, a former Franklin County health planner, and two academic affiliates (Ohio State University and Wright State University).

V. Commissioner Views

VISN/Market Area <i>(Indicate Facility if Applicable)</i>	Subject	DNCP Recommendation	Commissioner Views
Central (Columbus)	Access to hospital care	Contract for acute hospital care in Columbus, raises percent of veterans within access guidelines from 39% to 83% in 2012, and 84% in 2022	Commissioners expressed significant concerns about the current status of access to inpatient care in the Columbus area and recommend that VA contract with community hospitals in Columbus. They supported those parts of the Ohio State proposal that would provide VA signage and designated areas in a nearby hospital.
Central (Columbus)	Access to Primary Care	<ul style="list-style-type: none"> ➤ In-house expansion (leases and new) ➤ Telemedicine ➤ New expanded 260K sq ft outpatient specialty care center to be built on DOD/ Defense Supply Center site in Columbus ➤ DOD has up to 200 acres at no cost to VA ➤ Terminate 150K sq ft leased space ➤ Offer selected high volume specialty care at larger CBOCs 	Commissioners expressed support for the new clinic on the DSCC site (and identified it as a priority over other capital investments in the network). Commissioners also noted the need for increased contracting for specialty care in the Columbus area now.
Central (Chillicothe)	NCA collaboration at Chillicothe	<ul style="list-style-type: none"> ➤ NCA considering use of up to 50 acres for a cemetery site, not before 2009 ➤ Chillicothe is one of seven high priority NCA initiatives for 2004 - 2010 	Commissioners expressed a desire for a detailed plan for Chillicothe, including plans to deal with excess property, before being prepared to express an opinion on these two proposals.
Central (Chillicothe)	Reduce vacant space	VISN 10 total of 115K sq ft in 2022, reduced by 65% from 331K to 116K	

VI. Other Comments

- Commissioners expressed the strong view that medical care appropriations should not be used in support of historical buildings on VA property that are not being used for care delivery and urged consideration of a separate appropriation to support such historical structures.

- Commissioners expressed the view that VA should develop stronger contracting capabilities that support field operations, with an emphasis on the form and length of contracts as well as on appropriate levels of reimbursement.

VII. Follow-up questions for VHA/VISN

N/A