

## Conference Call Highlights

### Grant and Per Diem Program Operational Call

September 10, 2012

1. Jeff Quarles introduced two new employees for the Grant and Per Diem Program. Coral Baker is the Financial Management Specialist and Matt McGahran has assumed the position of Clinical Manager for the program
2. Susan Langer mentioned the next continuing education training will be on Assessment and Intervention of Suicide Among Homeless Veterans. The target date for the training is November 1, 2012. More information will be forthcoming.
3. Jeff Quarles took questions from the participants.
  - a) There was a question regarding billing when Veteran leaves the program for more than three days. If a Veteran enters the hospital for surgery and then is admitted to a nursing home, the facility loses the ability to charge per diem after three days. How can the law be changed regarding that time requirement? This is a legislative issue. The Provider can work with the community and other organizations for assistance in funding.
  - b) There was a question regarding the 60% performance metric when a Veteran is discharged because he is entering the hospital for an extended stay. Jeff reminded everyone that the 60% target takes into consideration people who are discharged someplace other than permanent housing. The percentage is broken down as follows: 60% discharged to permanent housing; approximately 20% discharged to a hospital or nursing home; and approximately 20% are unaccounted for.
  - c) The issue was raised whether or not there will be restrictions on admitting Veterans just to improve the performance of a facility regarding the standard. Jeff mentioned that providers need to consider unintended consequences. For example, not accepting difficult Veterans or keeping Veterans in the program longer. We need everyone to play an active role to assist Veterans in obtaining housing.
  - d) There was a question regarding medical care for dependents. The law restricts the Department of Veterans Affairs from providing medical care to children. There are some medical organizations in the community that offer care.
  - e) There was a question regarding clarification of number of days a Veteran is gone before the discharge documents must be completed. The GPD program pays for up to three days if a Veteran leaves the program and the provider holds the bed because there is a reasonable expectation that the Veteran will return. The Veteran can be gone for up to 14 days before the Veteran must be discharged from the program. If a Veteran is being admitted to the hospital for long-term care, coordinate with the VA facility regarding admitting the Veteran back to the program upon discharge so the Veteran doesn't end up on the street. If the provider knows the Veteran is AWOL, then the Veteran should be discharged after 24 hours. The Agency determines whether or not to hold the bed after the initial three days.

- f) There was a question regarding rent in the new Transition In Place facilities. The Veterans can be charged rent.
- g) There was a question regarding the per diem rate. The current maximum per diem rate of \$38.90 is still in effect. The per diem rate is based on the appropriation ceiling. The VA is doing a study on per diem payments.
- h) There was a question regarding indirect costs in relation to the SF 425. Jeff reminded the providers that if they have an indirect cost agreement in place from another department, the GPD program will honor that agreement. The indirect rate guide is in the final approval process.