



# National Contract Overview for Academic Affiliate Partners

## Background

The Department of Veterans Affairs (VA) partners with community providers to better meet the needs and preferences of Veterans and expand Veteran access to care. VA's community care network includes academic affiliates, federal and federally funded agencies (e.g., Department of Defense, Indian Health Services, Tribal Health Programs, Federally Qualified Health Centers), and other community providers. VA provides care in the community under its various community care authorities, including through the Veterans Choice Program (VCP) and what is commonly referred to as traditional community care.

To implement VCP, VA amended its Patient-Centered Community Care (PCCC) contracts with the two Third Party Administrators (TPA), Health Net Federal Services, Inc. (Health Net) and TriWest Healthcare Alliance (TriWest). Under the PCCC/Choice contracts, the TPAs are required to create and maintain a network of community providers to which Veterans are referred. With these contracts, VA authorizes care for a Veteran, and then the TPA manages both the referral and the payment process. The TPA is required to pay claims submitted by network providers, and VA reimburses the TPA for claims that it has paid.

Under VCP, VA also has authority to enter into VCP provider agreements, which are used when the needed care is not covered by the contract and in certain circumstances when the TPAs return authorizations for care. VA enters into VCP provider agreements directly with community providers, and VA also pays the providers. Payment rates under VCP are capped by law.

As part of efforts to modernize VA, the Veterans Health Administration (VHA) is awarding new Community Care Network (CCN) contracts across specified regions to provide a network of licensed healthcare providers and practitioners for medical, surgical, complementary and integrative health services (CIHS), durable medical equipment, pharmacy, and dental services to Veterans who are eligible for community care. These contracts will

be awarded and implemented using a phased approach throughout Calendar Years 2018 and 2019 to ensure continuity of care for our Veterans. The CCN contracts will eventually replace the existing PCCC/Choice contracts.

## Ethical Standards Applicable to Referrals:

VA partners, through affiliation agreements, with academic institutions and programs to enable VA to fulfill its commitment to teaching and training the nation's healthcare professionals. However, criminal conflict of interest laws and standards of ethical conduct protect against potential, apparent, and real conflicts of interest with regard to referring Veterans to an academic affiliate, where the referring VA physician is employed by, or otherwise has a relationship with the academic affiliate such that the financial interests of the affiliate are attributed to the referring physician.

## Frequently Asked Questions:

**Q1. If an academic affiliate has an affiliation agreement with VA, does it need a separate agreement to become a provider under CCN or the Choice program (including the PCCC/Choice contracts and VCP provider agreements)?**

A1. Yes.

**Q2. How will the VA MISSION Act affect these relationships?**

A2. The VA MISSION Act of 2018 will consolidate VA's community care programs into a new Veterans community care program. VA will provide further guidance on the MISSION Act in the near future.

**Q3. Does an established sole source contract with an academic affiliate limit VA's ability to utilize other national contracts for care?**

A3: No, the establishment of a sole source contract with an academic affiliate for services does not limit



VA's ability to utilize other contracts, such as those established with TPAs.

#### **Q4. How does an affiliate sign up to be part of VA's provider network?**

A4. Providers sign up directly with the current TPAs, TriWest and Health Net. The process to sign up is similar to joining any health insurance network and can be done using the TPAs' web-based forms. To join the VCP network, providers must submit data including their National Provider Identifier and information regarding licenses and credentials to allow the TPAs to determine if the providers meet the eligibility criteria for VCP. Please see the TPA websites for more specific information:

TriWest: <https://joinournetwork.triwest.com/>

Health Net: <https://www.hnfs.com/content/hnfs/home/va/provider/options-for-providers/join-our-network.html>

In certain instances, VA may also enter into VCP provider agreements directly with eligible community providers. Under the law, VA must use existing contracts to the maximum extent practicable prior to using VCP provider agreements.

The process by which providers will join the CCN network will be determined by the new TPAs and may vary.

For more information on joining the current network, providers should contact the Choice Program Support Line at 1-866-606-8198.

#### **Q5. If an academic affiliate has many providers, is there a way to streamline the provision of the provider-specific information required to sign-up to be a provider under national contracts?**

A5. Yes, both current TPAs have web-based applications that can be used to input provider information. If an affiliate has many providers, the TPAs will work with them to provide alternatives to share the information. The process by which providers will join the CCN network will be determined by the new TPAs and may vary among TPAs.

#### **Q6. Are physicians with joint VA/academic affiliate appointments eligible providers under national contracts?**

A6. If the provider meets the eligibility criteria to be a provider, is acting in their capacity as an employee of the affiliate, and is registered as a network provider

with the TPAs, they are able to participate as a provider in the TPA's network. Providers may not furnish care as a TPA network provider while performing VA duties, even if the VA employment is a result of the academic affiliation agreement.

#### **Q7: Can a VA provider direct a patient to a particular community provider?**

A7: Under VCP, the VA provider and/or TPA cannot direct a Veteran to a particular provider contrary to the Veteran's preference; aside from a prohibition on self-referral, there is no similar restriction with traditional community care. Under VCP, an eligible Veteran may request a specific community provider and if that provider is part of the network, or willing and eligible to join the network or enter into a VCP provider agreement, the Veteran's preference controls. If the Veteran does not have a provider preference, VA or the TPA will provide the Veteran with the available community providers, including any eligible local academic affiliates.

If a VA provider is making a referral to the community, he or she may not recommend a provider, including an academic affiliate, if he/she holds a position other than a name-only appointment with that provider. In that circumstance, the VA provider may provide the Veteran with a list of available community providers. For assistance in confirming that a VA provider has a name-only appointment, contact [GovernmentEthics@va.gov](mailto:GovernmentEthics@va.gov). If the VA provider has no affiliations with, or equity interest in, any of those available community providers that result in compensation or otherwise result in him or her being deemed an officer, Director, Trustee, partner, employee, contractor or consultant, he or she may recommend a particular provider.

With the future CCN contracts, Veterans will work with local facility community care staff to schedule all care with community providers in the network.

#### **Q8. What impact do national contracts have on clinical training and affiliation agreements? Should program directors plan to continue to rotate residents to VA?**

A8. The national contracts do/will not impact clinical training and affiliation agreements. Program directors should plan to continue to rotate residents at VA. Disbursement agreements for resident salary and benefits, and educational cost contracts (for indirect costs associated with residency programs) will proceed as usual.