



May 19, 2017

The Honorable David Shulkin, M.D.
Secretary of Veterans Affairs
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington DC 20420

Dear Secretary Shulkin,

On behalf of University of Virginia Health System, congratulations on your confirmation as Secretary of Veterans Affairs (VA). Thank you for your letter to the VA's academic partners reaffirming the Department's commitment to preserving and enhancing our relationship. We share your interest in collaborating to transform the VA and reduce barriers to doing business with the Department.

The University of Virginia School of Medicine has enjoyed a longstanding agreement with the Salem Veterans Administration Medical Center (SVAMC) that supports the collaborative missions of both institutions. This agreement, approved by the VA, establishes an affiliation between the VA, its Veterans Integrated Service Networks, and the SVAMC with the School of Medicine and its affiliated participating institutions for the academic purposes of enhanced patient care, education, and research. Important examples of our education partnership include having medical students rotate regularly to the SVAMC for electives and clerkships in Surgery and Psychiatry; partnering with the SVAMC on residency rotations in a variety of programs such as Surgery and Ophthalmology; providing UVA School of Medicine faculty appointments to physicians from the Salem VA; and partnering with the SVAMC in continuing medical education programs. We encourage the VA to continue to promote faculty and resident development of teaching skills and learning goals to ensure the caliber of teaching programs.

While our partnership with the VA for our joint education mission is solid, the Health System believes we can do more to ensure veterans have access to the patient care they need at the right time and place. We appreciate your goal of streamlining and improving the efficiency of VA contracting with the nation's medical schools and teaching hospitals, and we believe that direct clinical care contracts will allow academic affiliates to plan, staff, and sustain infrastructure for certain complex clinical care services that are often not found elsewhere, such as trauma centers, burn care units, comprehensive stroke centers, and surgical transplant services.

The UVA Health System participates in the VA's Patient-Centered Community Care (PC3) and Veterans Choice (VCP) programs, both of which are administered in our region by Health Net and provide veterans with easier access to our clinical services. The Hunter Holmes McGuire VA Medical Center in Richmond recently approached us and we are in the process of finalizing the terms for participation in a separately managed VCP agreement with them.

While we are committed to providing care to our veterans, we do have continuing concerns relative to the timeliness of claims processing, clarity of covered benefits, and case management for both programs, and we encourage the VA to streamline its processes. Our data show that we have provided care totaling ~\$26M during the eight-month period from July 1, 2016, through February 29, 2017. Our receivables associated with these programs represent a disproportionate share of our aged accounts greater than 90 days. This results in stress for the veterans who seek care here due to untimely denials for non-covered services, uncertainty about the extent of their financial responsibility, and therefore an overall unsatisfactory experience. These inefficiencies and our consequential necessity to follow up lead to a significant and costly administrative burden to the UVA Health System.

We wish to highlight two areas of collaborative opportunity to improve access to patient care for veterans—1) the recently opened Community Based Outpatient Clinic in Charlottesville, which is associated with Richmond's McGuire VA Medical Center and is in close proximity to the UVA Health System; and 2) the University of Virginia's Karen S. Rheuban Center for Telehealth, which has over 20 years of experience in the use of advanced technologies and broadband communications as well as an extensive network of more than 150 telemedicine partners across Virginia. The network has provided more than 60,000 clinical patient encounters in over 60 medical subspecialties, thus saving Virginia patients 16 million miles of travel. Wherever a veteran might need access to care, our Health System and Center for Telehealth services can meet that need in a timely fashion.

In addition to our education and patient care collaborations with the VA, we are engaged in research collaborations with VA centers across the country on research relevant to veterans. Many of these collaborations, with partners that include the Hunter Holmes McGuire VA Medical Center in Richmond, VA, the James J. Peters VA in Bronx, NY, and the Michael E. DeBakey VA in Houston, TX, are exploring traumatic brain injury (TBI) in veterans. Through the Salem VA, we are facilitating VA sponsored research projects at UVA to understand why some veterans develop lung cancer and others don't.

Through our experiences, we have developed an appreciation for the unique strengths possible from an academic-VA research partnership. We believe streamlining processes to share clinical data sets and to facilitate faculty appointments between VA universities and the VA could further our research partnerships and be powerful catalysts for discovering innovative solutions for veterans' medical needs.

We welcome the opportunity to discuss these issues and range of possibilities within these different areas. We have a long, rich history of collaboration with Drs. Maureen McCarthy and Jennifer Lee, and would be delighted to work with your team to advance collaborative models to improve medical care for our nation's veterans.

Thank you for your commitment to strengthening relationships with the academic community. Please know University of Virginia Health System stands with you to further our commitment and service to the veteran population.

Sincerely,



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