



## DEPARTMENT OF VETERANS AFFAIRS

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To: National Academic Affiliations Council Advisory Committee  
From: Rafael L. Perez, MD  
Chief of Medicine, Robley Rex VAMC  
Professor of Medicine, University of Louisville School of Medicine

The strong push by Secretary Shulkin and the VA to change and expand Care in the Community (CIC) will improve our veterans' timely access to healthcare. While the push enhances the service mission of the VA, there has been little discussion on how it will affect the education and training of our future physicians and other healthcare providers. Most physicians trained in the United States received an important part of their experience in the VA system and almost all the VA facilities providing tertiary care have a close affiliation with a university. Many of the university physicians staffing the care of our veterans and overseeing the training of students, residents, and fellows are at the top of their fields and generate the research that produces new diagnostic techniques and therapies that are applied world-wide. Our trainees provide round-the-clock care to our hospitalized veterans and follow them in our clinics. Clearly, the relationship between the VA and academia runs deep with benefits to both.

On March 24, 2017, Secretary Shulkin distributed an open letter to our academic affiliates seeking ideas on how to enhance VA-affiliate partnerships. I would argue that there is much room to reshape the VA-affiliate relationship to improve both the academic experience of the affiliates' trainees and timeliness of access to patient-centric healthcare to our veterans. We must loosen the constraints that prevent veterans from taking full advantage of the clinical resources and expertise that affiliated universities offer. Complex diagnostics and therapies currently contracted to few places around the country, such as organ transplantation, can be done locally and more conveniently for the veteran and his or her family. The same physicians performing the complex services are frequently credentialed with the VA partner, so the continuum of care remains strong. Importantly, providing more services within the affiliation enhances the learning experience for trainees in all fields of healthcare.

Expanded sole-source contracting and developing specialty Community Based Outpatient Care centers at our teaching affiliates are ways to enhance both the teaching mission of the VA and timeliness of veteran access to healthcare. For the latter, the affiliate becomes an important piece of the CIC model. As community partners, university affiliates have certain advantages over non-affiliated community organizations in the following ways:

1. Affiliated clinicians are “known quantities” who have been vetted and credentialed with their respective privileges. They tend to be dedicated academicians as teachers and researchers who may have Merit, Career Development, or other awards that encourage them to stay in the system for a long time. Their Ongoing Professional Performance Evaluations hold them to the highest care standards and deficiencies are quickly identified and corrected.
2. Affiliated clinicians and their trainees know our veterans in clinic which only enhances care when/if they require hospitalization.
3. Affiliates know how to use VA record systems, so information delivery is efficient and hospital care and length of stay is optimized.
4. Greater economies of scale as neighboring affiliates share expertise and resources that only their center may offer.
5. University affiliates are best positioned to provide educational resources to veterans and even opportunities to participate in clinical trials if wish.

I have been engaged as a VA trainee and then provider going on 35 years. The VA has been “home base” for me not only as a clinician to our great veterans, but as a platform to pursue teaching and scholarship through strong university affiliations. The relationship between the VA and its affiliates is symbiotic; one will not succeed without the other.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Rafael Perez', with a stylized flourish at the end.

Rafael Perez, MD