

VOICES OF VISN 6

— Excellent Care – Earned by Veterans – Delivered Here —



VA's Top Executive Takes a Moment To Spend time at SALEM VA MEDICAL CENTER



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COVER STORY | By Steve Wilkins and Brett Robbins | VISN 6 PUBLIC AFFAIRS

VA Secretary Robert Wilkie observed D-Day's 75th Anniversary devoted to making sure Veterans know he cares. He attended an emotional ceremony in Bedford, Va., with Vice President Mike Pence. Known as the Bedford Boys, 35 Bedford men stormed the beaches with the 116th Infantry during the June 6 invasion. Bedford lost 19 of its own that day.

Moving quickly from Bedford, Va., to Salem VA Medical Center, the VA's top executive then joined VISN 6 Network Director DeAnne Seekins and Salem VA Medical Center Director Rebecca Stackhouse to support the implementation of the *Maintaining Internal Systems and Strengthening Integrated Outside Networks* (MISSION) Act of 2018. The MISSION Act represents a transformation in VA's service to Veterans, putting

TOP PHOTO: VA Secretary Robert Wilkie is flanked by Salem VAMC Director Rebecca Stackhouse (L) and VISN 6 Director DeAnne Seekins (R) during his visit in support of MISSION Act implementation June 6. **Photo by Brett Robbins**

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Message from the Network Director

As you know, VA designated May as “MISSION May”. I am so proud of our staff with the way in which they embraced the new law, and all of the activities with the implementation.

Nationally, the “Mission Act” went live on June 6. It was a big day for us, as this is the most complex law VHA has ever been tasked to implement in an expedited manner. I felt as though all eyes were on VA that day; VSOs, media, congressional staff, watchdog bloggers and our beloved Veterans, who we have been working so diligently to serve. In the end, it turned out that our efforts paid off, as “MISSION Day” was a great success. Schedulers and providers worked effectively with our third-party

administrator, TriWest to implement the new rules. Last-minute changes went into effect and questions at all levels got answers. Through the coming weeks our staff will continue to tweak and prod, turn and adjust. Each day our staff grow more comfortable with the changes, and I believe Veterans will notice a considerable difference with the coordination of their care and see that VA continues to provide care second to none! When it is clinically the best decision to coordinate care with the community, there are mechanisms in place to create a seamless transition. The first weekend, 450 Veterans visited community urgent care clinics. Their success in doing so means better access for our Veterans in need of urgent care services. The Fayetteville

Health Care Center showcased their work by hosting Dr. Steve Lieberman, Acting, PDUSH and Salem hosted Mr. Robert Wilkie, SecVA for Mission Day. Senior Executive Leadership Members from the VISN toured other sites, interacting with staff and observing the great work which had taken place in preparation for Mission launch day. All left each site feeling pleased and proud of our staff. Thank you for your support as we continue to work to improve Veterans’ care and provide health care systems which allow Veterans to live healthier and happier lives.

– DeAnne M Seekins
Network Director

Hampton VA Medical Center

Wins National Award For Environmental Sustainability

Sustainability is at the heart of our healing mission — and we’re proud to share that our sustainability strategies have won us a national award. Hampton VA Medical Center received the Greenhealth Emerald Award from Practice Greenhealth, the nation’s leading organization dedicated to environmental sustainability in health care.

The Greenhealth Emerald Award recognizes health care facilities that are setting the standard in eliminating mercury, reducing and recycling waste, sustainable sourcing, and other areas. Winning hospitals have demonstrated a strong commitment to sustainability and shown leadership in the local community and in the health care sector.

In health care, sustainability means eliminating mercury, reducing and recycling solid waste, cutting down on regulated and chemical waste, lowering energy and water consumption, sourcing food and products sustainably, and establishing green purchasing policies. At the Hampton VA Medical Center, we know that sustainability is essential to better care for our patients, for our communities, and for the planet. In recent years, we have made great

strides toward reducing our impact on the environment, and we are committed to doing even more. Last year, we rebooted the Green Environmental Management System (GEMS) Committee and focused its efforts towards closing gaps in environmental regulatory requirements as well as waste diversion efforts such as strengthening our recycling program. We also have made progress in reducing our use of hazardous chemicals by using environmentally

friendly alternatives and increasing our energy and water efficiencies.

The Environmental Excellence Awards recognize health care facilities for their efforts in environmental stewardship and sustainability. The award will be formally presented at the Environmental Excellence Awards Gala May 9 in Nashville during CleanMed, the premier national conference for leaders in health care sustainability.



Greenhealth Emerald Award winners: Scott Brown, Dr. Taquisa Simmons, Amaris Rodriguez, James Duggan, Shannon Combee, Bill Orson and Dr. Natasha Harrigan.

VA's top Executive Takes a Moment To Spend Time at Salem VA Medical Center



Katherine Luci, Interim Chief of GEC & Kenneth Terry, Chief Nurse for GEC takes a moment to answer questions from Secretary Robert Wilkie. Photo by Brett Robbins

them at the center of their care in a way that enhances their health care experience, and delivers exceptional care in the shortest time, with dignity.

Wilkie, Seekins, Stackhouse and a host of other executives toured the medical center, met with staff and received a briefing on the operational status of the program as it transitions to using the components of the MISSION Act at Salem VA from Medical Center.

"Today was implementation day for the community care network part of the MISSION Act," said Stackhouse. "It provides an

urgent care benefit for our veterans and helps us really look at how we can strengthen both our workforce and infrastructure. Later in the Fall, we will begin expanding the caregiver support program."

VA is dedicated to optimizing health care delivery for our Nation's Heroes, so they receive high quality care as soon as it is available with greatest convenience.

Seekins and her staff believe the day is significant because it immediately affects where and how Veterans receive their health care. It provides expanded choices in and

outside VA, empowering them to participate in what their health care looks like and how they will stay healthy.

An Air Force Reserve officer himself, and son of a Veteran, Wilkie's D-Day observance culminated in meeting a World War II hero face-to-face at medical center's Community Living Center when he met Brig. Gen. (Ret.) Leo LaCasse, a WWII Veteran who, as a pilot with the 385th Bomb Group, survived three crash landings and evaded 4,000 enemy troops. The two sat down to talk like old friends catching up on a summer day. LaCasse was awarded the French Legion of Honour Medal in June 2016.

Seekins is optimistic about the implementation of the MISSION Act. VISN 6 staff across North Carolina and Virginia have worked hard and trained diligently so that, although Veterans may notice some changes in the way they set appointments and interact with their health care teams, their experience should be seamless.



LEFT PHOTO: VA Secretary Robert Wilkie and retired General Leo Lacasse chat on the Salem CLC Porch. Photo by Brett Robbins



PRIDE MONTH IN VA

Affirms Appreciation for All Veteran Contributions

By Dr. Tiffany Lange-Altman | HAMPTON VAMC PUBLIC AFFAIRS

The LGBT community – both those who serve Veterans and the Veterans we serve – is a vital and vibrant part of the Veterans Affairs. Estimates suggest there are more than one million Lesbian, Gay, Bisexual, and Transgender (LGBT) Veterans in the United States; many will seek culturally competent services from the VA. A provider’s knowledge of a patient’s LGBT status is essential to providing appropriate prevention screening and care yet, about 1 in 4 LGBT Veterans have not disclosed their sexual orientation or gender identity status to any VA provider (Sherman, Kauth, Shipherd, & Street, 2014).

To meet the unique needs of the population, each VA facility has the benefit of a LGBT Veteran Care Coordinator (LGBT VCC) who serves as a point of contact about VA policies and best practices for serving LGBT Veterans. You can find out who your facility LGBT VCC is [here](#). VA is committed to being a national leader in healthcare for LGBT Veterans by delivering personal, high-quality care in a welcoming environment.

VA recognizes June as Pride Month and June 28, 2019, marks the 50th anniversary of the Stonewall Riots. The historical event became a turning point for the LGBT rights movement, and Pride Month is an opportunity to recognize the ongoing struggles for equality. VHA facilities across the country host events to honor the service of our LGBT Veterans during this special observance. For example, Hampton VA Medical Center has recognized June Pride Month through hosting its second an-

nual healthcare awareness event for LGBT Veterans. The “PRIDE In All Who Served” event, which featured 24 vendors, was an opportunity to strengthen partnerships between VA departments and community organizations. More than 100 individuals attended the event and celebrated the growth of the LGBT Veteran Program at the Hampton VA.

Recognizing the struggles and triumphs of the LGBT community can extend beyond June Pride Month. There are several ways to embody an affirmative care approach every day when working with LGBT Veterans. Here are some suggestions:

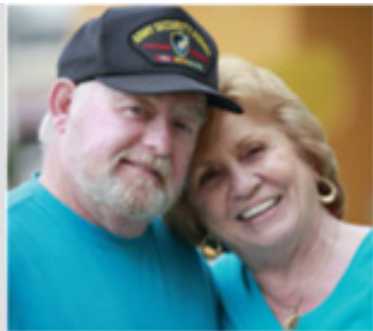
- Participate in LGBT-related trainings.
- Know and understand the difference between sexual orientation and gender identity.
- Create a safe zone in your workspace to visibly show LGBT individuals they are welcomed.
- Do not assume the identity and / or pronouns of others.
- Admit shortcoming and apologize when you make a mistake.
- Engage in self-reflection about personal privilege and assumptions.
- Validate unique strengths of LGBT people.
- Make use of LGB and Transgender Sharepoint sites
- Be aware of LGBT-friendly community resources to address psychosocial needs (e.g., housing) to supplement VHA services.
- Allow for paperwork and electronic records to indicate a person’s desired name and pronouns.
- Be open about commitment to affirmative care.
- Get involved in social activism.
- Become familiar with the culture (e.g., attend local Pride event).
- Challenge negative remarks that are homophobic, transphobic, biphobic, etc.
- Include LGBT literature in waiting rooms.
- Display LGBT Veterans [posters](#) and include LGBT literature in waiting rooms.

PHOTO ABOVE: Hampton VAMC staff got together June 17 to celebrate Pride in All Who Served, an occasion to recognize the valuable service and contributions of soldiers, sailors, airmen and Marines who are also members of the LGBT community. VA is committed to being a national leader in health care for LGBT Veterans.

**WE SERVE
ALL WHO SERVED**

www.patientcare.va.gov/LGBT
VAlgbtprogram@va.gov

VA  U.S. Department of Veterans Affairs



PTSD AWARENESS MONTH

June Is PTSD Awareness Month

Story by Keith Gottschalk | PITTSBURGH VAMC PUBLIC AFFAIRS

There are currently about 8 million people in the United States with PTSD.

Even though PTSD treatments work, most people who have PTSD don't get the help they need. June is PTSD Awareness Month. Help us spread the word that effective PTSD treatments are available. Everyone with PTSD — whether they are Veterans or civilian survivors of sexual assault, serious accidents, natural disasters or other traumatic events — needs to know that treatments really do work and can lead to a better quality of life.

Join Us

During PTSD Awareness Month, and throughout the entire year, help raise awareness about the many different PTSD treatment options. You can make a difference in the lives of Veterans and others who have experienced trauma. Everyone can help.

Is It PTSD?

When you have PTSD, it's hard to feel safe. The traumatic event — natural disaster, combat, sexual assault, accident — can take hold, and you find you can't stop thinking about it. Maybe you have nightmares and trouble sleeping. Maybe you feel on edge and unsettled, or don't find pleasure in things you used to enjoy. Maybe you feel it's just easier to be alone. Feelings like these are common after going through a trauma. For most people, they pass in a few weeks or months,

but for others they are long-lasting.

PTSD symptoms fall into four categories: reliving or re-experiencing the event, avoiding things or places that remind you of the event, negative changes in beliefs and feelings, and hyperarousal or being on guard. For someone to be diagnosed with PTSD, they need to have symptoms in all four categories.

PTSD symptoms can happen at any age, and they come and go. Only a mental health care provider can diagnose you with PTSD. And, knowing if you have PTSD is the first step to getting effective treatment. So, it is important to talk with a doctor if you think you have symptoms. There are effective treatments even if you have been living with symptoms for years.

Keep in mind that you're not alone. And that there are treatments that will help you feel better and take back control of your life. Be the advocate — take that first step for yourself.

Learn more about PTSD symptoms at the National Center for PTSD. The PTSD Coach app and PTSD Coach Online can also help you learn about PTSD symptoms and practice skills to manage those symptoms. You can even track your PTSD symptoms in the app. The PTSD Treatment Decision Aid is another online tool that can help you decide which treatment is best for you. Other useful resources are the Understanding PTSD and PTSD Treatment booklet, and the National Center for PTSD's whiteboard videos.

Understanding PTSD and PTSD Treatment



Understanding PTSD and PTSD Treatment (PDF)

A complete guide to PTSD basics.

ABOUT FACE



About Face

Hear from Veterans who have turned their lives around with PTSD treatment.



PTSD Coach

Learn about and manage PTSD symptoms.

There's Always a Place for Telehealth

Story by Keith Gottschalk | PITTSBURGH VAMC PUBLIC AFFAIRS

Although the VA doesn't have a Star Trek-like transporter or a time machine, using telehealth, time and space can be transformed for Veterans.

No longer must Veterans travel long distances or schedule their lives around appointments. With a computer screen or a smartphone, they can consult with a clinician anytime and literally anywhere.

The TeleRehabilitation program is funded by the VA's Office of Rural Health to increase access to specialized rehabilitation services through the use of telehealth, according to program manager Jessica Barton.

McGuire was selected as one of four hub sites for what has become known as TREWI – TeleRehabilitation Enterprise Wide Initiative. There are seven total spoke sites within TREWI with McGuire serving the Louis A. Johnson VA Medical Center in Clarksburg, WVA. The TeleRehabilitation program at McGuire has been fully staffed since 2017.

Barton and her staff were able to set up more than 50 TeleRehabilitation clinics throughout Physical Medicine and Rehabilitation (PM&R) within the first year. Those telehealth clinics both serve local Veterans, as well as, Veterans at other medical centers who do not have access to certain specialty care services. The idea is simple – use telehealth technology wherever medically appropriate to better serve our Veterans.

“TeleRehabilitation can really enhance the overall rehab process,” said Barton. “It allows the provider to see the Veteran in their home or community environment actually following through with their recommendations. This could be an exercise plan, equipment issued or even follow up after discharge from an inpatient unit.”

Occupational therapist Brian Niedermayer has provided Veterans with durable medical equipment through telehealth, and he can tell if a piece of equipment is being safely and correctly used by seeing inside Veterans' homes.

“The Veteran can walk through their house with their smart phone and show me the set up in their bathroom, we can see at a glance if there's enough room for other equipment in the bathroom as well” said Niedermayer. “Before telehealth we could have a Veteran come into the clinic and tell us they have a regular toilet when they really have an oblong.”

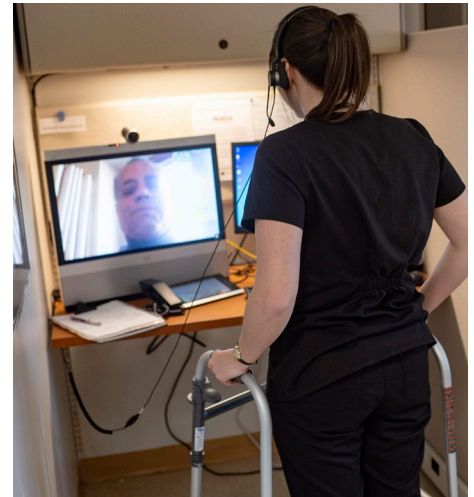
Another benefit of TeleRehabilitation is being able to include the Veteran's family in the rehab process.

“For instance, when a speech therapist issues a communication device there is a lot of training necessary for both the Veteran and family on how to use the device,” said Barton. “By using telehealth, we can incorporate the caregiver and any other family members into that training.”

Occupational therapist John Moosa, of the wheelchair mobility clinic, remembered a telehealth session with an outside facility where the Veteran's daughter was able to join the telehealth appointment from out of state to help order her dad a new wheelchair.

“The daughter really spoke up on the Veteran's behalf and her input for her father was vital,” said Moosa. “The supply representative was there too, and we were able to make sure that the Veteran received the correct wheelchair.”

Providers are using their clinical judgement when it comes to recommending telehealth to their Veterans, Barton said. Safety



Chelsea Boyd, kinesiologist, connects with Veterans via telehealth prior to hip and knee surgery to review necessary durable medical equipment that may be needed for their home after surgery.

is always the number one priority. “With the use of telehealth, we are now able to serve our Veterans in a way we were not able to before,” Barton said. “It really bridges the gap between home and clinic.”

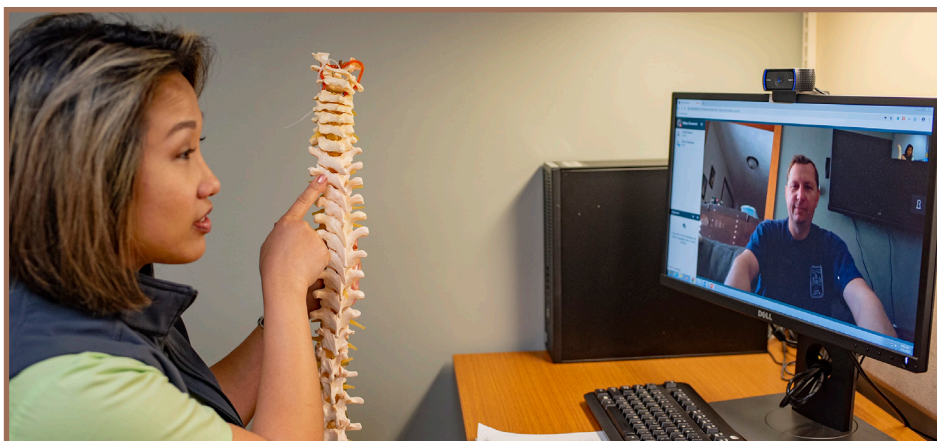
Barton has been spreading information about the ways TeleRehabilitation can simplify care for Veterans. Between marketing efforts, a newsletter and her own staff's word of mouth, she's seeing progress. But if Veterans ask for telehealth, that would be the biggest boost, she said.

“I want Veterans to feel they can ask their providers about it – we're seeing that in little spurts,” said Barton. “One Veteran wrote and encouraged us to find a way to communicate this service to more Vets. He said, ‘it saved me so much time!’”

Barton said her team's goal is to have 100 percent of the clinical staff in PM&R ‘tele-ready’ by the end of the year. “We want it to be embraced in their care plans when appropriate,” said Barton. “We know telehealth can improve access for Veterans by saving drive time, but we also feel telehealth can improve the quality of care we are providing.”

No matter where if it's an initial consult, a follow up appointment, staff training or specialty care, Barton said she is sure of one thing: “There's always a place for telehealth.”

LEFT PHOTO: Karissa Serio, physical therapist, is providing patient education on spine anatomy via telehealth in preparation for a Veteran's treatment to address neck pain.



Honor the Sacrifice of Women Veterans . . .



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Women's Health Week in the VISN, May 12-18

VHA observed Women's Health Week the week of May 12-18. Each VISN 6 facility hosted special events that week and throughout the month of May to engage women Veterans and their families, and to raise public awareness of women Veterans' service to this great nation.

In Fayetteville, Women Veteran program staff distributed educational materials and answered questions for visitors at the Hamlet, Robeson County, Goldsboro and Brunswick clinics, the Wilmington HCC, as well as the Jacksonville and Sanford clinics. The 9th Annual VA2K Walk & Roll event hosted a Women's Health table at the Fayetteville HCC and the Jacksonville CBOC hosted a Baby Shower in honor of Maternity Care Awareness Month.

But Hampton VA staff also contributed in a big way to the 6th Annual Virginia Women's Health Summit, held May 16-17. This event was the epitome of state, federal, private, public and community partnership. Approximately 1,200 Women Veterans were registered, and 57 exhibitors were in attendance.

The Greenville Health Care Center Women's Health program hosted an outreach event May 14. It included an educational table in the main lobby (outside of the Women's Health Clinic). Veterans and family members picked up information about topics like Primary care, Gynecological care, Breast care, Infertility services, Military Sexual Trauma. The facility also hosted a Women's Health Clinic open house.

Salem VAMC used its weekly appearance on the television show, "Living Local" to highlight Skin Cancer Awareness Day with Beth Holt Wright, Women Veterans Program Manager and Patricia Cox, Women's

Health Nurse Practitioner. And organizers said the event at Charles George VA Medical Center in Asheville was a perfect way to help veterans who feel isolated after coming home.

"There's just an amazing array of experience here and stories, unheard stories," VA chaplain Lea Brown said. "Women veterans tend to feel very invisible. So, we want to help them feel more empowered because that will help them through their journeys, as well."

Organizers said it was also a great way for them to get feedback about how the VA can do a better job connecting with female veterans. "It is important for women Veterans to feel welcome in VA, wherever they are and whatever their condition," said Shenekia Williams-Johnson, VISN 6 Women's Health coordinator. "As we have said for so long, they served and they deserve, they have earned VA care." Johnson, who is a Navy Veteran, added that every Veteran has the right to walk in for care with their head held high and the expectation they will receive the best service in a welcoming environment. That is the standard our nation owes every Veteran," she said.



VHA's Top Exec Backs North Carolina's Warfighter Support Mission

By Steve Wilkins | VISN 6 PUBLIC AFFAIRS

According to one speaker, fields of battle will expand in future conflicts, injuries will be more horrific and our military's ability to evacuate wounded warriors would be diminished due to enemy technological capabilities challenging their transport. The new weaponry, in all its forms, makes it difficult to predict just what the effects would be to those injured soldiers, but attendees of the Support the Warfighter Symposium learned from VHA's top executive that VA is dedicated to caring for them upon their end of service, for the rest of their lives, regardless.

VA's Executive in Charge of the Veterans Health Administration, Dr. Richard Stone, presented the keynote address on June 12, 2019, to the Medical, Biomedical & Biodefense: Support to the Warfighter Symposium in Chapel Hill, N.C. The annual event is intended to encourage collaboration among N.C. industrialists, in production and services that will enhance our nation's military performance. Maj. Gen. Daniel Dire, deputy surgeon general for mobilization, readiness

and Army Reserve affairs opened the day with the morning feature discussion.

Presenters throughout the day related their perspective on the event's mission; bringing to bear the greatest capabilities that enable our military to responsibly and responsibly create, develop, deliver and sustain warfighter capability and readiness — to select, modify and procure medical materiel and products. Going forward, it seemed the greatest need, according to the theme first mentioned above, that equipment is needed to create mobile surgical units with extreme capabilities, and enough trained advanced medics who know what to do with them.

Stone piggy-backed perfectly, adding that VA is and must continue to be ready to face the evolving nature of our Veterans' battle wounds, and so the priorities are still suicide prevention and health education, but also how we deal with end-of-life situations and what we do to prepare for them. He reiterated a message trumpeted by Womack Army Medical Center Commander Col. John

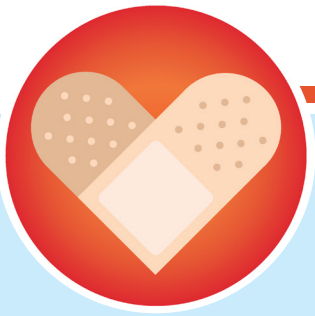
TOP PHOTO: VISN 6 Director DeAnne Seekins (center) joined Salisbury VAHCS Joe Vaughn (left), Durham VAHCS Director Paul Crews (2nd fr. left) and Newly selected Fayetteville VAMC Director Daniel Ducker to welcome VHA Executive in Charge Richard Stone (2nd fr. Right) to North Carolina's Triangle region and the Medical, Biomedical & Biodefense: Support to the Warfighter Symposium in Chapel Hill, N.C.

Melton, that community partnerships are essential in today's environment not only for the way so many community facility services compliment military services, but it is also the most efficient manner in delivering care to our nation's heroes. As he described the variety of alternative modes of care VA uses to keep Veterans healthy, Stone drove home the need to meet Veterans where they are so that they receive the best care with greatest immediacy.

Discussing the many partnerships VA nurtures throughout the country, he emphasized its academic affiliations as partnerships essential to the educational foundation of the American medical system. With that, he assured guests that VA Health Care is here to stay.



VHA Executive in Charge Richard Stone addressed guests at North Carolina's Medical, Biomedical & Biodefense: Support to the Warfighter Symposium in Chapel Hill, N.C.



McGuire VA Medical Center helps Veterans Treat Wounds

McGuire VA Medical Center is currently operating an outpatient wound care clinic for Veterans. This specialized clinic treats chronic wounds and is operated as part of McGuire’s Wound Healing Program. The Outpatient Wound Care Clinic manages select chronic wounds and evaluates ostomy complications. The team, which consists of a doctor, three nurses and a physical therapist, are focused on treating non-healing wounds that have been around for at least six weeks or longer.

The clinic operates with select hours, five days a week in the hospital, and the team can call in a host of ancillary services when needed, such as a social worker and nutritionist.

“Our goal is to significantly improve the quality of life of Veterans with chronic

wounds and hopefully to return them to their style of life before the wound,” said Kimberly Williford, who works in the clinic and holds a doctorate of physical therapy.

Clinic Hours:

Mon., Wed. & Fri.: Specialty Clinic Area, from 8:30 a.m. – 12 noon.

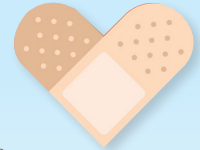
Tues. & Thurs: iK clinic area on the first floor (by appointment only).

Services:

- Specialized Dressings
- Advanced Wraps
- Debridement
- Negative Pressure Wound Therapy

Wounds treated:

- Diabetic Wounds
- Complex Chronic Wounds
- Surgical Wounds
- Pressure Ulcers
- Venous Stasis
- Arterial Ulcers
- Insect/Spider Bites
- Neuropathic Ulcers



Staff Members:

- Dr. Joseph Boykin, Jr FACS
- Gina Middlebrook, MSN, RN, FNP-BC
- Connie Landon, RN, CWOCN
- Carol Oliver, RN, CWOCN
- Kimberly Williford, PT, DPT, CCI

Veterans May Visit Urgent Care Clinics in the Community Starting June 6

As part of the VA MISSION Act of 2018, VA now offers an urgent care benefit providing eligible Veterans with greater choice and access to timely, high quality care.

Locate the nearest VA-approved Urgent Care: [HERE](#)

Veterans must have been seen in the VA system or by a VA community care provider within the last 24 months in order to use this benefit.



The VA MISSION Act enables Veterans to visit their community urgent care clinics.

The urgent care benefit covers treatment of non-emergent symptoms such as flu-like symptoms (coughs and colds), wheezing, sprains, sore throats, painful urination, bumps and bruises, ear pain, and mild skin irritations, which are typically addressed by urgent care facilities and walk-in retail health clinics. Preventive and dental services are excluded from the benefit.

While urgent care is a convenient benefit for the treatment of non-emergent symptoms, Veterans should always consider talking with or seeing their primary care provider if they are concerned that the community provider will not understand the complexities of their medical history or medications.

In addition, if you believe your life or health is in danger, call 911 or go to the nearest emergency department right away.

Eligible Veterans will be able to receive urgent care from an urgent care provider that is part of VA’s contracted network of community providers without prior authorization from VA. VA can only pay for an urgent care claim if:

- The Veteran is eligible for the benefit
- The urgent care provider is in VA’s contracted network; and
- The services are not excluded (example: preventive services and dental services).
- For more information click here: [VA MISSION Act Urgent Care Fact Sheet](#)

Veterans who experience difficulty after they arrive at an urgent care network location to receive care can call 866-620-2071 for assistance.

Va Now Transplanting Kidneys That Are Positive For Hepatitis C

Some Veterans on waiting list may be eligible for procedure

Underscoring its mission of improving the quality of life for Veterans, the U.S. Department of Veterans Affairs (VA) recently began offering a new option to patients awaiting kidney transplants: organs that are positive for hepatitis (hep) C.

In early March, a team from the [Iowa City VA \(ICVA\) Health Care System](#) (HCS) successfully transplanted hep C positive kidneys into four Veteran patients, then immediately began the [treatment process to cure the viral infection](#) that causes liver inflammation.

“At VA, we have the ability to quickly adopt medical advancements almost as soon as they are reported in medical literature,” said VA Secretary Robert Wilkie. “Providing high quality procedures, such as innovative organ transplants, illustrates the good stewardship of our resources and VA’s commitment to Veterans and the American people.”

Dr. Daniel Katz, transplant surgery director for the ICVAHCS, said VA was quick to understand the bigger picture and the long-term, cost-savings potential of the new procedure.

“The high cost of hep C treatment may hinder rapid adoption of this practice in the

private sector, where the transplant center may not be reimbursed for the hep C treatment,” Katz said. “Even with the hep C treatment, though, there will be cost savings over time by removing patients from dialysis.”

The ICVAHCS transplant team has successfully conducted more than 475 organ transplants and is on track to reach 500 in 2020. The hepatitis C virus (HCV) is the most common bloodborne disease in the United States. VA has treated and cured more HCV patients than any other HCS in the country, and is [on track to eliminate the HCV in about a month](#) in all Veterans willing and able to be treated. As of March 3, nearly 116,000 Veterans started all-oral hep C medications in VA, of which 96,654 Veterans completed treatment and have been cured.

Part of a VA treatment program, U.S. Navy Veteran Jack Jones was cured of hep C more than two years ago. But Jones still needed a new kidney.

On March 8, the ICVAHCS offered to transplant his kidney, then cure the hep C that it carried through a similar process that had cured him before. Jones jumped at the chance, and his transplant was successfully

completed the next day.

“I would recommend this [procedure], and the VA, to anyone,” said Jones, who is now back to his regular life at home in Asheville, North Carolina.

Other VA Transplant Centers also provide Veterans the opportunity to choose to receive hep C positive donor organs with post-transplant treatment. Participating centers include William S. Middleton Memorial Veterans Hospital in Madison, Wisconsin (liver and heart); Hunter Holmes McGuire VA Medical Center in Richmond, Virginia (heart); VA Portland Health Care System in Portland, Oregon (liver); Tennessee Valley Healthcare System in Nashville, Tennessee (liver and heart); and VA Pittsburgh Healthcare System (liver).

Visit www.iowacity.va.gov for more information about the hep C organ transplant team.

VA leads the country in hepatitis screening, testing, treatment, research and prevention. For more information about VA’s research in this area, visit <https://www.hepatitis.va.gov/>.

Va Health Care Facilities To Go Smoke-Free

VHA Modifies Policies to Increase Quality of Care to Veterans

WASHINGTON — As part of the U.S. Department of Veterans Affairs’ (VA) commitment to provide excellent health care for Veterans, the department will implement a new policy restricting smoking by patients, visitors, volunteers, contractors and vendors at its health care facilities by October.

Although VA has historically permitted smoking in designated areas, there is growing evidence that smoking and exposure to secondhand and thirdhand smoke creates significant medical risks, and risks to safety and direct patient care that are inconsistent with medical requirements and limitations. Accordingly, VA’s Veterans Health Administration (VHA) has collaborated with key stakeholders to update and recertify the policy to be consistent with the department’s commitment to Veterans and the community.

A recent VA survey revealed that approximately 85% of responding facility leadership support smoke-free campuses, and this new policy for patients, visitors, volunteers, contractors and vendors allows VA to ensure the health and well-being of VA staff, patients and the public.

“We are not alone in recognizing the importance of creating a smoke-free campus,” said VA Secretary Robert Wilkie. “As of 2014, 4,000 health care facilities and four national health care systems in the U.S. have implemented smoke-free grounds. This policy change coincides with additional VHA efforts to help us become the provider of choice for Veterans and the reason why Veterans will ChooseVA.”

VHA’s new smoke-free policy applies to cigarettes, cigars, pipes, any other com-

bustion of tobacco and non-Federal Drug Administration approved electronic nicotine delivery systems (ENDS), including but not limited to electronic or e-cigarettes, vape pens or e-cigars.

To learn more about health risks associated with smoking, visit the Surgeon General’s website at <https://www.hhs.gov/surgeongeneral/reports-and-publications/tobacco/index.html> or <https://smokefree.gov/>.

VHA has extensive resources and programs to assist Veterans in their smoke-free journey. They can be found at <https://www.mentalhealth.va.gov/quit-tobacco/>.

For additional information about the policy visit: https://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=8242



Dan Dücker

Daniel L. Dücker, new NC VA Coastal Health Care System Director

By Jeff Melvin | FAYETTEVILLE NC VA COASTAL HEALTH CARE SYSTEM PUBLIC AFFAIRS

The Department of Veterans Affairs is pleased to announce the appointment of [Daniel L. Dücker](#) as the new director of the Fayetteville NC VA Medical Center. He will oversee delivery of health care to nearly 75,000 Veterans with an operating budget of \$332.8 million. Mr. Dücker is expected to take the helm at Fayetteville in late June.

“We are thrilled to bring Mr. Dücker (pronounced Deeker) on board as the new medical center director,” said DeAnne Seekins, VA Mid-Atlantic Health Care Network (VISN 6) Director. “Dan has incredible experience handling critical jobs in a variety of service lines and programs for some of VA’s greatest facilities. We look forward to his steady leadership.”

Dücker is a 33-year Army Veteran whose recent appointments in VA include service as Acting Deputy Network Director, VA Mid-Atlantic Health Care Network (VISN 6) from January to May 2019, and Interim Director for the Maine VA Health Care System in Togus, Maine, from September 2018 to January 2019. He was previously appointed as the Associate Director there in July 2017. Prior to his tenure in Maine, Dücker served as the Clinical Operations and Business Analyst/Group Practice Manager for one of the largest VA Medical Centers in the country, the James A. Haley Veterans’ Hospital in Tampa, Fla. Mr. Dücker joined James A. Haley in 2009.

A proven health care administrator with formidable executive experience, Dücker earned masters’ degrees in Higher Education Administration at the University of South Carolina and Strategic Studies from the U.S. Army War College. He is a member of the American College of Healthcare Executives, Reserve Officers Association, the American Legion and the Military Officers Association of America.

The Fayetteville NC VA Coastal Healthcare System serves a 19-county area of southeastern North Carolina. The medical center specializes in general medicine, surgery and mental health in conjunction with its 10 community clinics.

VA Announces Final Community Care Regulations Under MISSION Act

WASHINGTON — Today the U.S. Department of Veterans Affairs (VA) announced the publication in the [Federal Register](#) of two final regulations as part of its new Veterans Community Care Program under the [VA Maintaining Internal Systems and Strengthening Integrated Outside Networks \(MISSION\) Act](#) of 2018.

Signed into law on June 6, 2018, the MISSION Act strengthens VA’s ability to deliver trusted, easy-to-access, high-quality care at VA facilities, virtually through telehealth, and in Veterans’ communities. The law makes several improvements to VA care that began on June 6, 2019.

“President Trump promised to give Veterans greater choice,” said VA Secretary Robert Wilkie. “We are honoring that promise by making sure Veterans have access to timely, high-quality care, whether from our VA facilities or our community providers.”

A key component of the MISSION Act is a new [urgent care benefit](#) that provides eligible Veterans with greater choice and access to timely, high-quality care. With urgent care, Veterans have a new option for care for the treatment of minor injuries and illnesses, such as colds, sore throats and minor skin infections. The benefit is offered in addition to the opportunity to receive care from a VA provider, as VA also offers same-day services.

VA also published the final regulation for the [Veterans Community Care Program](#) governing how eligible Veterans receive necessary hospital care, medical services, and extended care services from non-VA entities or providers in the community. The new Veterans Community Care Program replaces the Veterans Choice Program that expired June 6, 2019.

VA previously published an interim final rule for [Veterans Care Agreements](#) (VCA) on May 14, 2019. VA may use VCAs to order care when that care is not otherwise feasibly available through VA’s contracted network. VCAs are intended to be used in limited situations. VA will purchase most community care for Veterans through its contracted network as part of its strong partnerships with third-party administrators.

Currently, these administrators are TriWest Healthcare Alliance and Optum Public Sector Solutions.

VA is implementing improvements to its community care program as required by the VA MISSION Act. Veterans can find detailed information on urgent care eligibility, community care eligibility and MISSION Act implementation at www.missionact.va.gov



VA Launches New Health Care Options Under MISSION ACT

The U.S. Department of Veterans Affairs (VA) launched its new and improved Veterans Community Care Program on June 6, 2019, implementing portions of the VA Maintaining Internal Systems and Strengthening Integrated Outside Networks Act of 2018 (MISSION Act), which both ends the Veterans Choice Program and establishes a new Veterans Community Care Program.

The MISSION Act will strengthen the nationwide VA Health Care System by empowering Veterans with more health care options.

“The changes not only improve our ability to provide the health care Veterans need, but also when and where they need it,” said VA Secretary Robert Wilkie. “It will also put Veterans at the center of their care and offer options, including expanded telehealth and urgent care, so they can find the balance in the system that is right for them.”

Under the new Veterans Community Care Program, Veterans can work with their VA health care provider or other VA staff to see if they are eligible to receive community care based on new criteria. Eligibility for community care does not require a Veteran to receive that care in the community; Veterans can still choose to have VA provide their care.

Veterans may elect to receive care in the community if they meet any of the following six eligibility criteria:

1. A Veteran needs a service not available at any VA medical facility.
2. A Veteran lives in a U.S. state or territory without a full-service VA medical facility. Specifically, this would apply to Veterans living in Alaska, Hawaii, New Hampshire and the U.S. territories of Guam, American Samoa, the Northern Mariana Islands and the U.S. Virgin Islands.
3. A Veteran qualifies under the “grandfather” provision related to distance eligibility under the Veterans Choice Program.
4. VA cannot furnish care within certain designated access standards. The specific access standards are described below:
- 5.

Drive time to a specific VA medical facility

- Thirty-minute average drive time for primary care, mental health and non-institutional extended care services.
- Sixty-minute average drive time for specialty care.
- Note: Drive times are calculated using geomapping software.

Appointment wait time at a specific VA medical facility

- Twenty days from the date of request for primary care, mental health care and non-institutional extended care services, unless the Veteran agrees to a later date in consultation with his or her VA health care provider.
- Twenty-eight days for specialty care from the date of request, unless the Veteran agrees to a later date in consultation with his or her VA health care provider.
- The Veteran and the referring clinician agree it is in the best medical interest of the Veteran to receive community care based on defined factors.
- VA has determined that a VA medical service line is not providing care in a manner that complies with VA’s standards for quality based on specific conditions.

In preparation for this landmark initiative, senior VA leaders will visit more than 30 VA hospitals across the country to provide in-person support for the rollout.

The VA MISSION Act:

- Strengthens VA’s ability to recruit and retain clinicians.
- Authorizes “Anywhere to Anywhere” telehealth across state lines.
- Empowers Veterans with increased access to community care.
- Establishes a new urgent care benefit that eligible Veterans can access through VA’s network of urgent care providers in the community.

VA serves approximately 9 million enrolled Veterans at 1,255 health care facilities around the country every year. For more information, visit www.missionact.va.gov.



U.S. Department of Veterans Affairs

Raleigh STRIVE Conference Enhances Veteran Education Benefits

By Joshua D. Edson | DURHAM VAHCS PUBLIC AFFAIRS

Aiming to create a seamless transition for Veterans returning to the community, the North Carolina Student Transition Resource Initiative For Veteran's Education (NC STRIVE) held its fifth annual conference at North Carolina State University in Raleigh, June 6. Attendees included Durham VA Health Care System staff, behavioral health experts, and educators and administrators of various local universities.

Focusing on outreach to student Veterans, attendees discussed topics including: transferring college credits to local universities, expanding services to Student Veterans, and accommodating the unique physical and mental health challenges that are part and parcel of many student Veterans' experiences. The conference also gave Veterans a chance to meet with a wide variety of employers and state agencies dedicated to smoothing their transition into civilian life by providing employment and community support.

Durham VAHCS director Paul Crews assured the audience of more than 300 attendees that the VA was there to help ensure

that Veterans were healthy and successful in their education journey.

We are honored to assist returning Veterans with school, health care, counseling and employment. We want every transitioning service member to know that we are a viable place of employment.

Founded in 2014, NC STRIVE provides services and support to help Student Veterans succeed academically and simplify their transition into civilian life. The program is a collaborative effort, of community colleges, local universities, Department of Health officials, VA staff and various Veteran advocacy organizations. The program comprises four committees covering the state. Their annual conferences help committee members coordinate their efforts to ensure the success of Veterans earning a degree and moving into their post-service lives.

The success of NC STRIVE is especially important to the Durham VAHCS. "About 20 percent of the entire U.S. active-duty military is stationed within five hours of Durham," said Crews, addressing committee members at the Raleigh conference. "North Carolina also has a robust military reserve component as well. We would be honored to assist these Veterans in their education, health care and employment needs."

Recognizing the unique challenges that Veteran students often face, Durham VAHCS Operation Enduring Freedom/Operation Iraqi Freedom (OEF/OIF) program staff saw the need to combine efforts ensuring Veteran student success, in and out of the classroom. Despite being an all-volunteer effort with virtually no consistent funding, the program steadily grows.

"We want your help to support our Veterans, your students," says Mr. Crews. "As these fine women and men begin the chapter of their lives that follows military service, I thank you for your commitment to them and their future."

Paul Crews, Director of Durham VAHCS meets with North Carolina State faculty members during the 2019 NC STRIVE conference. NC STRIVE provides services to help Student Veterans achieve success in the classroom and their communities.



VISN 6 Sites Of Care & VA Vet Centers

MEDICAL CENTERS

Asheville VAMC

1100 Tunnel Road
Asheville, NC 28805
828-298-7911 | 800-932-6408
www.asheville.va.gov

Durham VAMC

508 Fulton Street
Durham, NC 27705
919-286-0411 | 888-878-6890
www.durham.va.gov

Fayetteville VAMC

2300 Ramsey Street
Fayetteville, NC 28301
910-488-2120 | 800-771-6106
www.fayettevilleenc.va.gov

Hampton VAMC

100 Emancipation Dr.
Hampton, VA 23667
757-722-9961 | 866-544-9961
www.hampton.va.gov

Richmond VAMC

1201 Broad Rock Blvd.
Richmond, VA 23249
804-675-5000 | 800-784-8381
www.richmond.va.gov

Salem VAMC

1970 Roanoke Blvd.
Salem, VA 24153
540-982-2463 | 888-982-2463
www.salem.va.gov

Salisbury VAMC

1601 Brenner Ave.
Salisbury, NC 28144
704-638-9000 | 800-469-8262
www.salisbury.va.gov

OUTPATIENT CLINICS

Albemarle CBOC

1845 W City Drive
Elizabeth City, NC 27909
252-331-2191

Brunswick County CBOC

18 Doctors Cl., Units 2 & 3
Supply, NC 28462 | 910-754-6141

Charlotte CBOC

8601 University East Drive
Charlotte, NC 28213
704-597-3500

Charlotte HCC

3506 W. Tyvola Rd.
Charlotte, NC 28208
704-329-1300

Charlottesville CBOC

590 Peter Jefferson Pkwy
Charlottesville, VA 22911
434-293-3890

Chesapeake CBOC

1987 S. Military Highway
Chesapeake, VA 23320
757-722-9961

Danville CBOC

705 Piney Forest Rd.
Danville, VA 24540
434-710-4210

Emporia CBOC

1746 East Atlantic Street
Emporia, VA 23847
434-348-1500

Fayetteville HCC

7300 So. Raeford Rd
Fayetteville NC 28304
910-488-2120 | 800-771-6106

Fayetteville Rehabilitation Clinic

4101 Raeford Rd. Ste 100-B
Fayetteville NC 28304
910-908-2222

Franklin CBOC

647 Wayah Street
Franklin, NC 28734-3390
828-369-1781

Fredericksburg CBOC

130 Executive Center Pkwy
Fredericksburg, VA 22401
540-370-4468

Fredericksburg at Southpoint CBOC

10401 Spotsylvania Ave, Ste 300
Fredericksburg, VA 22408
540-370-4468

Goldsboro CBOC

2610 Hospital Road
Goldsboro, NC 27909
919-731-4809

Greenville HCC

401 Moye Blvd.
Greenville, NC 27834
252-830-2149

Hamlet CBOC

100 Jefferson Street
Hamlet, NC 28345
910-582-3536

Hickory CBOC

2440 Century Place,
SE Hickory, NC 28602
828-431-5600

Hillandale Rd. Annex

1824 Hillandale Road Durham
North Carolina 27705
919-383-6107

Jacksonville CBOC

4006 Henderson Drive
Jacksonville, NC 28546
910-353-6406

Jacksonville 2 VA Clinic

306 Brynn Marr Road
Jacksonville, NC 28546
910-353-6406

Jacksonville 3 VA Clinic

4 Josh Court
Jacksonville, NC 28546
910-353-6406

Kernersville HCC

1695 Kernersville Medical Pkwy
Kernersville, NC 27284
336-515-5000

Lynchburg CBOC

1600 Lakeside Drive
Lynchburg, VA 24501
434-316-5000

Morehead City CBOC

5420 U.S. 70
Morehead City, NC 28557
252-240-2349

Raleigh CBOC

3305 Sungate Blvd.
Raleigh, NC 27610
919-212-0129

Raleigh II Annex

3040 Hammond Business Place
Raleigh, NC 27603
919-899-6259

Raleigh III CBOC

2600 Atlantic Ave, Ste 200
Raleigh, NC 27604
919-755-2620

Robeson County CBOC

139 Three Hunts Drive
Pembroke, NC 28372
910-272-3220

Rutherford County CBOC

374 Charlotte Road
Rutherfordton, NC 28139
828-288-2780

Sanford CBOC

3112 Tramway
Road Sanford, NC 27332
919-775-6160

Staunton CBOC

102 Lacy B. King Way
Staunton, VA 24401
540-886-5777

Tazewell CBOC

141 Ben Bolt Ave.
Tazewell, VA 24651
276-988-8860

Virginia Beach CBOC

244 Clearfield Avenue
Virginia Beach, VA
757-722-9961

Wilmington HCC

1705 Gardner Rd.
Wilmington, NC 28405
910-343-5300

Wytheville CBOC

165 Peppers Ferry Rd.
Wytheville, VA 24382-2363
276-223-5400

DIALYSIS CENTERS

VA Dialysis and Blind Rehabilitation Clinics at Brier Creek

8081 Arco Corporate Drive
Raleigh, NC 27617
919-286-5220

VA Dialysis Clinic Fayetteville

2301 Robeson Street, Ste. 101
Fayetteville, NC 28305, 910-483-9727

VET CENTERS

Charlotte Vet Center

2114 Ben Craig Dr.
Charlotte, NC 28262
704-549-8025

Fayetteville Vet Center

2301 Robeson Street
Fayetteville, NC 28305
910-488-6252

Greensboro Vet Center

3515 W Market Street, Suite 120
Greensboro, NC 27403
336-333-5366

Greenville Vet Center

1021 W.H. Smith Blvd.
Greenville, NC 27834
252-355-7920

Jacksonville, N.C. Vet Center

110-A Branchwood Drive
Jacksonville, NC 28546
910-577-1100

Norfolk Vet Center

1711 Church Street
Norfolk, VA 23504
757-623-7584

Raleigh Vet Center

8851 Ellistree Lane
Raleigh, NC 27617
(919) 361-6419

Roanoke Vet Center

350 Albemarle Ave.
SW Roanoke, VA 24016
540-342-9726

Virginia Beach Vet Center

324 Southport Circle, Suite 102
Virginia Beach, VA 23452
757-248-3665

VISN 6 Newsletter

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Questions or comments about the newsletter, email steppen.wilkinsz@va.gov or call 919-956-5541

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