

Title

Participation of Veterans Affairs medical centers in coordinated care networks to address veterans' social needs

Abstract

Background

AmericaServes is a coordinated care network of public and private organizations working to meet health-related social needs of United States military and Veteran communities. The extent to which Veteran Affairs Medical Centers (VAMCs) participate in AmericaServes is unknown.

Objective

Characterize VAMC participation in AmericaServes Networks, identify participation facilitators and barriers, and explore the benefits of VAMC participation for Veterans.

Methods

We conducted a convergent parallel mixed-methods study guided by Himmelman's Developmental Continuum of Change Strategies. We interviewed 17 staff across 7 AmericaServes regional coordination centers and 14 staff from VAMCs in those regions. Using rapid qualitative analysis, we categorized VAMC participation in AmericaServes into levels of increasing intensity and complexity (i.e., networking, coordinating, cooperating, or collaborating) and identified participation barriers and facilitators. We also compared AmericaServes referral resolution rates across VAMC participation levels, overall and stratified by whether referrals were for Veterans dually served by AmericaServes and VAMCs (N=4,296) or for Veterans only served by AmericaServes (N=1,974).

Results

Across seven regions, VAMC participation in AmericaServes was categorized as networking in three, coordinating in two, cooperating in one, and collaborating in one. Barriers to collaborating included navigating VA bureaucracy, gaining VA leadership buy-in, and reluctance to adopt AmericaServes' referral platform. Having clear communication channels and ongoing engagement between organizations facilitated VAMC participation. Referral resolution rates were higher in regions where VAMCs participated more fully (83.09% vs 65.29% in collaborating vs. networking regions). Referral resolution rates were also higher for dually served Veterans (vs. AmericaServes only) in regions with higher VAMC participation.

Conclusions

VAMC participation in AmericaServes varies widely. This study suggests that Veterans may benefit when VAMCs participate more fully. Barriers and facilitators to collaboration identified in this study will guide future efforts to foster stronger participation of VAMCs in cross-sector coordinated care networks such as AmericaServes.