



Federal Health Matters

VA NY/NJ Network Awarded for Palliative Care

This summer, the VISN 3 palliative care program received the prestigious Circle of Life Citation of Honor. During a reception held at the James J. Peter VA Medical Center in Bronx, NY on September 12, VISN 3 Director James Farsetta accepted the award, on behalf of the palliative care teams, from American Hospital Association (AHA) Chairman-elect William Petasnick.

Since 2000, the Circle of Life program—which is sponsored by the AHA in conjunction with the American Association of Homes and Services for the Aging, the AMA, and the National Hospice and Palliative Care Organization and funded by grants from the Robert Wood Johnson Foundation—recognizes programs that exemplify commitment, expertise, and innovation in the field of palliative and end-of-life care. Each year, the program awards three cash prizes and several citations of honor. The goal is to foster patient-centered, timely, safe, and efficient care, as well as collaboration across all of fields of health care. All 2006 awards and citations were originally presented at the AHA Leadership Summit in San Francisco, CA on June 14.

The palliative care program of VISN 3—which includes facilities in Brooklyn, Bronx, Manhattan, Queens, Castle Point, Montrose, and Northport, NY and East Orange and Lyons, NJ—was honored for its strong ties with community hospices and local veterans groups, its work in staff training, and its commitment to offering palliative care to long-term patients in home- and community-based programs. A strong emphasis on data

collection is another hallmark of the program. VA caregivers fill out clinical templates that guide comprehensive palliative care consultations and collect psychosocial and spiritual information about patients. Palliative care teams use the resulting data to track program developments and make necessary improvements. “Once you can see your progress,” says Carol Luhrs, MD, director of palliative care for VISN 3, “you’re really empowered to do better.”

Expanded TRICARE Reserve Select Program Takes Effect

As of October 1, the DoD will begin providing health care coverage to members of the Selected Reserves who qualify for the expanded TRICARE Reserve Select (TRS) program, which was approved earlier this year by Congress. When it was first implemented in 2005, TRS offered a premium-based TRICARE coverage option to members who had completed at least 90 consecutive days of active duty service in support of a contingency operation since September 11, 2001 and entered into a new service agreement with their reserve component. Now, TRS coverage has been extended to other Selected Reserve members, using a three-tiered premium system.

Under this system, members who completed active duty service as part of a contingency operation (now for a minimum of 30 days) are considered Tier 1, and pay the lowest premiums. Members who qualify for Tier 2 are those with specific circumstances, including members who are unemployed, are self-employed, or do not have health insurance provided by their employer. All other Selected Reserve members fall into Tier 3, which has

the highest premiums. For each tier, members can choose individual or family coverage, and all TRS beneficiaries pay an annual deductible, which varies according to members’ rank.

The October 1 start date applies to Tier 2 and Tier 3 members who submitted their paperwork and premium payment by September 25. Those who apply by November 25 will start coverage on January 1, 2007. Tier 1 coverage began in April this year. Coverage for Tier 2 and 3 members lasts for one year—but can be renewed by requalifying through the Reserve personnel office.

House of Representatives Greenlights VA Facility Projects

The Department of Veterans Affairs Medical Facility Authorization Act of 2006 (H.R. 5815) passed unanimously in the House on September 13. The bill authorizes funding for the new medical facilities planned in Las Vegas, NV and Orlando, FL, as well as other projects that are part of the Capital Asset Realignment for Enhanced Services Initiative. In addition, it supports efforts to increase VA collaboration with other agencies and organizations by authorizing: the restoration of the Biloxi VA Medical Center as a shared facility with Keesler Air Force Base; the planning and site preparation for a joint-use facility in or near New Orleans, LA; and the planning of another shared facility in Charleston, SC. House VA Subcommittee on Health Chair Henry Brown (R-SC) said, “So long as we remain true to the distinct identity of the VA and ensure the continued quality associated with VA care, collaboration will be mutually advantageous for all organizations involved.” ●