Q: How long has HUD-VASH been around?
A: HUD-VASH is a collaborative program between HUD and VA combines vouchers with VA supportive services to help Veterans who are homeless and their families find and sustain permanent housing. HUD-VASH has been around for at least 10 years.

Q: Are we having our staff do special training on PTSD to decrease Veteran suicide rates?
A: While any substance abuse or mental health diagnosis including PTSD is associated with added risk of suicide, the number one diagnosis associated with suicide is depression. All staff are trained in recognizing and responding to signs of suicidality.

Also, the yearly PTSD screen includes the PHQ 2 + I9 which if positive leads to the Columbia suicide severity rating scale which if positive leads to the Suicide risk evaluation and all appropriate suicide risk mitigation interventions.

Q: How can a homeless Veteran be verified over the telephone?
A: We can verify by using their full Social Security number to see if they have enrolled with any Department of Veterans Affairs facility.

Q: How can Veterans enroll if they do not have their DD214?
A: Admissions and Eligibility staff have access to DEERS (Defense Enrollment Eligibility Reporting System) to verify prior service. They also can request a copy of the Veteran’s DD214 however, you can request your own copy from the National Archives (www.archives.gov).

Q: What is the estimated timeline of the Stockton Clinic?
A: Construction for the Stockton Community-Based Outpatient Clinic is estimated to begin Fall 2019 and scheduled to be completed Spring 2022.

Q: Once the Livermore Division is closed, where is the nearest CLC?
A: Once the Livermore Division is decommissioned, the nearest Community Living Center will be located at the Stockton CBOC.

Q: In our VFW meetings, they always talk about the Martinez VA not communicating with Palo Alto? Why do they not communicate with each other?
A: It should be noted that Martinez is part of the VA Northern California Health Care System. However, a VAPAHCS provider may enter an interfacility consult (IFC) to be seen by another VA if needed.
Q: What is going on with the Vet Center in Oakland?
A: *The Oakland Vet Center does not fall under the Palo Alto Health Care System, but the Veteran Integrated Service Network 21 (VISN 21) – our local region. Therefore, we do not oversee their services.*

Q: How many buses go to Palo Alto from Livermore.
A: *Per day, there are four shuttles that travel from Livermore to Palo Alto. The A shuttle departs at 6:45 AM, the B-AM shuttle departs at 8:45 AM, the C shuttle departs at 9:30 AM and the B-PM shuttle departs at 12:45 PM.*

Q: For the buses with restrooms, will they be wheelchair accessible?
A: *Yes, we are mandated to ensure our buses are ADA compliant.*

Q: Are the VA buses in our health care system wheelchair accessible?
A: *Yes, all of our buses are wheelchair accessible.*

Q: Can we partner with Gillig for our buses?
A: *Yes, we can partner with Gillig if they are willing to partner with us to become an authorized vendor. We only have certain routes where Gillig’s current product offerings would be a suitable option. Gillig mainly specializes in city transit buses, so for the Valley routes, their buses are not suitable for the highway and heavy-duty usage that our equipment is subjected to.*

Q: Will someone from the Community Care Contact Center (C4) number be able to authorize/extend community care visits? Because it seems that we are only authorized three or four visits and then that’s when the problems occur.
A: *No, someone from the C4 number will not be able to extend the number of your community care visits. That is because there is no set number of authorized visits. In most cases the community care authorization last for the entire episode of care. The length of authorizations is typically between 90 days to an entire year—depending on the service.*

Q: Is the C4 number operated 24/7?
A: *No, the C4 number is not operated 24/7. However, should you have any medical question/emergency please contact the advice nurse. The advice nurse number is operated 24/7.*

Q: Are local hospitals aware if Veterans walk in with a medical emergency, they first need to contact the VA for approval?
A: *No, they are not aware. It is the responsibility of the Veteran to tell them that they are a Veteran. However, their transfer coordinators typically contact VAPAHCs transfer coordinators to inform them that the Veteran has received service. We are working on a wallet card with the number to call to help ensure no matter where a Veteran presents with a medical emergency, we can be properly notified.*
Q: Is VAPAHCS working on a plan to improve the payment process so that local community providers can get paid in a timely manner? For example, my dentist is considering turning away Veterans because he has not been getting paid in a timely manner.

A: We are working on standardizing the process so that it becomes automated. One particular issue with dental providers is that most dental providers are small family owned offices and they are not following through with the process to become vendorized and the only way we can pay them is if they are in our vendor list.

UPDATE: The VA MISSION Act will consolidate all community care programs into one single program that will be much easier to navigate. This includes payments.

Q: Is there any update regarding the Sonora CBOC moving?

A: At this time, we have extended the lease for our current location. However, we are working with our Office of Facility Planning and Development (OFPD) to identify a larger location into which we can relocate the clinic. OFPD is attempting to locate an existing building that can accommodate the Patient Aligned Care Team (PACT) Model. If they cannot find an existing building, then we will move forward into building our own building.

Q: Is the Sonora CBOC fully staffed?

A: With the addition of Dr. Villapena-Cid we are fully staffed for primary care. We have a new Mental Health Social Worker starting soon—they are currently in the pre-employment process. The Admin Specialist position has closed, and we are waiting to receive the certs so we can conduct interviews. Lastly, we have one vacancy at the front desk which

Q: How does one get referred to Dental outside the VA?

A: You have to have a referral from a VA doctor and also see if you are eligible. If you are then you can opt for Choice.

Q: What happens when my doctor leaves the Modesto VA Clinic at the end of April? Will I have to go somewhere else for my care?

The leadership team at the Modesto VA Clinic has been actively recruiting new providers. If we do not have a new provider in place by the time your current provider retires, you will be reassigned a temporary provider at the clinic. As an established VA patient, you will not need to be reassigned to a provider in the community. New VA patients (Veterans who recently enroll in VA care) may be offered care in the community until a new provider is hired.

Q: What are we doing to improve hand hygiene?

A: At the VA Palo Alto Health Care System (VAPAHCS) we have a hand hygiene campaign that markets and educates proper hand hygiene techniques to staff and Veterans. With this campaign, we strive to eliminate hospital acquired infections and promote a healthy and safe workforce and environment for those we serve.
Q: Is the new Mission Act moving forward?
A: The Mission Act is moving forward. We are waiting to hear who will earn the third-party administrator (TPA) for this initiative. To ensure there is no gap in service between The Veterans Choice Program and the new Mission Act, TriWest will continue to serve as the TPA until a new TPA is in place.

Q: Are there still plans to expand the CVS Minute Clinic to this [Modesto] area?
A: The closest CVS Minute Clinic is in Elk Grove, CA or San Ramon, CA. We are working with TriWest to set up a way for Veterans to receive urgent care visits in the community, like the way the CVS Minute Clinic is set up. Our goal is to allow Veterans to receive up to 3 urgent care visits in the community for free. Once this process is finalized, we will share more information with staff and Veterans.

Q: What happened with payment for dental services in the community? It took a while for my dentist to get paid.
A: The delays in payment for dental services in the community were due to staffing shortages in our billing department. Now that the department is fully-staffed, there should be improvements in the timeliness of payments. We apologize for any inconvenience this may have caused for our Veterans and the dental providers in the community. If your dentist is still experiencing delays in payment, please have them contact 1-877-881-7618, which is the Community Care Contact Center (C4).

Q: Has VA hired a new dental hygienist for Livermore?
A: No, VAPAHCS has not yet hired a new dental hygienist for Livermore. We are still actively recruiting for one.

Q: What options are available for Veterans who miss the VA shuttle and have no way of getting home?
A: Veterans who miss the VA shuttle may contact the VA patient advocate or any other VA staff for assistance with rides. These staff members can contact our Emergency Room Social Worker, Susan Harrison, who can pay for Lyft rides for patients who have no other means of transportation. Soon, our administrators of the day (AODs) will have the same authority as Ms. Harrison. Once they do, staff will be trained on how to contact the AODs for rides.

Q: Why doesn’t the VA publicize Susan’s contact information?
A: This option is available as a last resort. VAPAHCS is developing a new Veterans Transportation Program that will offer rides to Veterans who are not eligible for beneficial travel. As soon as this new program is implemented, we will share information widely with both staff and our Veterans.
Q: Veterans need to know what services are available at the clinics. What is VA doing to improve educating Veterans on what’s available?
A: We currently offer primary care, mental health, x-ray, ultrasound, HUD-VASH, home-based primary care, audiology, and telehealth services at our Modesto VA Clinic. We will work with our new Public Affairs Officer on doing a better job publicizing and education the public on the services we provide.

Q: Construction start time for the Stockton clinic now says fall of 2020 but on your website was originally scheduled for winter 2020, can you explain that?
A: All the parties involved were able to resolve all of the items necessary to push the project along and we are now a bit ahead of schedule.

Q: Completion construction will take place on spring 2022 and first patient be seen in fall 2022? Why such a big delay between completion of construction and the first patient?
A: After completion, we have what is called clinic activation. This includes furnishing the clinic and making sure everything is functional and safe for our Veterans. We will be transparent as that time comes and will let you know what is milestones are occurring as they come.

Q: Noticed in the past that the website hasn’t been kept up to date monthly, do you promise to keep it up to date on a monthly basis? So, we can make sure that this project is moving right along. We want to make sure that people can see the progress on the project on the website.
A: Yes. We have worked with all parties involved to ensure there is a process for timely updates. Make sure to visit www.paloalto.va.gov/construction.asp to find these updates.

Q: Will the new clinic have some type of water therapy?
A: There will be no pool at this facility but there is possibility of partnership in the community to support this.

Q: Why does it take so long to get a doctor’s appointment at the Stockton VA? Also, why is it that the Doctor tells me that I can only address one specific problem at my visit?
A: First let me apologize that is not how we do business and we will look into that specific case. – Appt made with assistance of local Nurse Manager.

Q: Any updates on the interregional computer systems? Example VA being able to see outside medical centers records? The system takes too long to download the records. Even offered to log into my own computer and log into MyHealthEVet is there a system that will make it easier for our providers to get the information easier.
A: We have a system called JLV (Joint Legacy Viewer) that does this currently.
Q: If I am seeing an outside Chiropractor in the community and although Stockton VA has one, why can’t I continue to see this outside provider who knows my history for the past 2 years?

A from Director Fitzgerald: I made the decision as the health care director, to adapt a whole health care practice in Palo Alto, so that people don’t have to go out, not dispute but we are trying to have our Veterans receive their care at our facility. So that you can have it there rather than have to go out to get the care. With the MISSION Act the access criteria will be changing. It’s currently in a public review comment stage. But, when it does become finalized the new access standards, there will be more primary care, mental health care, and non-institutionalized care; that will be calculated based on average drive time of 30 minutes form your home to the clinic that can provide that service. For specialty care that will be changing, the average drive time from your home to that specialty service care location is within 60 minutes. If the VA cannot meet those access criteria, then that Veteran will be eligible to receive that care in the community. As far as your specific case will have to meet with Chiropractic Care chief to review it is in a case by case basis.

Q: What services will be in the Stockton clinic?

A: Will be added on the fact sheet. Will continue to have Primary Care, Radiology, and contracted pharmacy once the Community Living Center (CLC) is built. We will not have every specialty, but we are still developing our model of care and partnering with the community to see what services they offer and how we can leverage their support.

Q: What do we have a Livermore that we don’t have here [at Stockton].

A: We are realigning services. We won’t have the same services, or we may have the same but the way we provide the service may be different. For example, cardiology is offered in Livermore face to face, it may not be offered face to face in the new clinic but through telehealth. Where the provider is at Palo Alto and the patient is in Stockton. So, the goal is to provide all the same services we currently offer at Livermore it is just the mode in which we offer that service that may be different, and that is due to the challenges we have with recruiting providers in this area.

Q: Why aren’t Hematology available in Stockton?

A: It was available in the past via Telehealth but the Nurse Practitioner that provided the clinic moved to the Modesto clinic. To provide this clinic through Telehealth, you have to have a doctor on one side and the Nurse Practitioner on the patient side. Currently we don’t have a Nurse Practitioner or MD in the Stockton clinic to provide this clinic. The closest is Modesto with the Nurse Practitioner there with the patient and the MD at Palo Alto. Also, in our new clinic every exam room will have telehealth capabilities.