Colorado January 2012

Demographic I	nformation
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Demographic information	JII																	
What is your organization's o			llment statu	ıs in the W	e Ho		_	paign	1?									
	#	%				#	%				#	%					#	%
I'm not familiar with the We Honor	1	7%		Level 1 Pa	rtner	3	20%			Level 3 Partner	0	0%	Ιc	lon't k	now wł	nat level we are	0	0%
Recruit	4 2	27%		Level 2 Pa	artner	2	13%			Level 4 Partner	4	27%		Not :		hope to ify soon	1	7%
What type of organization ar	e von	1?						#	%								#	%
	5 5 5 5				Fre	e-stana	ling hospice	10	63%				Home	health-	based i	hospice	5	31%
							sed hospice	0	0%				Other hea			_	1	6%
Is your organization urban, r	ural,	mixed						#	%								#	%
or highly rural?							Urban	5	31%							Mixed	7	44%
							Rural	2	13%						Highl	y Rural	2	13%
Does your organization serve	Vete	rans in			#	%		#	%									
rural areas?	7 000	iung in		Yes	13	87%	No	2	13%									
Indicate VISN identified in se	arvica	agraa			#	%		#	%									
mulcate v 151 v Identified in Se	71 VICC	arca		VISN18	1	10%	VISN19	9	90%									
					.,	•		.,	•		,,			,,				
Driving distance (miles) from	-				#	%		#	%		#	%		#	%			
organization to nearest VA M	ledic	al Ctr		0 - 10	4	25%	11 - 20	1	6%	21 - 40	5	31%	>40	6	38%			
Driving distance (miles) to ne	arest	t VA			#	%		#	%		#	%		#	%			
outpatient clinic				0 - 10	7	44%	11 - 20	3	19%	21 - 40	3	19%	>40	3	19%			
Type of formal relationship, i	if anv	, vou			#	%		#	%		#	%		#	%			
have with your local VA Med	-			Contract	5	31%	PA	4	25%	None	5	31%	Other:	2	13%			
Does your organization partic	cinat	e in a			#	%		#	%									
Hospice-Veteran Partnership	-	· 111 · ·		Yes	13	81%	No	3	19%		1		2	3		4		5
				105	10	0170	110		1,7,0	# of	•		-			Fair		Great
			Ml	EAN						Resp	None		Little	Some		amount		deal
How much emphasis do you f	ieel y	our stat	e 4	.00						16	0		2	2		6		6
organization places on end-of	i-life	care for	•								0%		13%	13%		38%		38%
Veterans?	T.	XEY:	Negative (1 + 2)	No	ıtral (3)	D _O	oitiv	e (4+5)									
	r	XL 1.	riegative (174)	INCL	itiai (3 _,	PO	SILIVE	. (4 ±3)									

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Veteran Emphasis							
Within the last two years, which, if any, of the follo	owing has taken place with your organization?		1	2	3	4	5
	MEAN	# of Resp	Mana	T :++1a	Sama	Fair amount	Great
		Resp	None 0	Little 1	Some 4	amount 6	deal 2
Have increased our Veteran caseload	3.69		0%	8%	31%	46%	15%
		13	3	1	2	3	4
Have received referrals from VA staff	3.31		23%	8%	15%	23%	31%
Have experienced increased awareness of	4.71	14	0	0	1	2	11
the unique needs of Veterans	4,/1		0%	0%	7%	14%	79%
Have found it easier to work with our local	3.29	14	4	1	1	3	5
VA Medical Center or outpatient clinic	Sia		29%	7%	7%	21%	36%
VA/Community Interface							
How do you rate your organization's understandin	ng in the following areas?		1	2	3	4	5
-		# of	Very	_		~ .	Very
	MEAN	Resp 13	Poor 0	Poor 0	Fair 2	Good 5	Good 6
Benefits to which Veterans are entitled	4.31	13	0%	0%	2 15%	38%	46%
relients to which recording the character		-	070	070	1370	3070	-1070
T 4	4.46	13	0	0	2	3	8
How to assist Veterans access their penefits	4.46		0%	0%	15%	23%	62%
	4.15	13	0	1	2	4	6
How to assist Veterans enroll in VA	4.15	A	0%	8%	15%	31%	46%

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VA/Community Interface (cont.)			# of	1 Very	2	3	4 Good	5 Very		
How to assist terminally ill Veterans with expedited enrollment in VA	3.69		Resp 13	Poor 1 8%	Poor 0 0%	Fair 5 38%	3 23%	Good 4 31%		
The needs of Veterans by war, trauma, or opulation	4.00		13	0 0%	0 0%	5 38%	3 23%	5 38%		
ractical use of the Military History Thecklist	3.92		13	1 8%	1 8%	2 15%	3 23%	6 46%		
Ley aspects of the VA's national hospice and palliative care program	4.00		13	0 0%	0 0%	5 38%	3 23%	5 38%		
Ley aspects of the hospice and palliative are program(s) of the VA Medical denter(s) closest to you	3.58		12	0 0%	3 25%	2 17%	4 33%	3 25%		
enefits of community organizations artnering with VA to better serve eterans	4.08		13	0 0%	2 15%	0 0%	6 46%	5 38%		
Business Relationship Iow do you rate each of the following?				1	2	3	4	5		
	MEAN		# of Resp	Very Poor	Poor	Fair	Good	Very Good		
our organization's ability to help eterans access needed resources	4.13		15	0 0%	1 7%	2 13%	6 40%	6 40%		
Availability of information outlining tools and processes hospices need to know to do outliness with VA	3.93		15	0 0%	1 7%	5 33%	3 20%	6 40%		

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Business Relationship (cont.)		±	# of	1 Very	2	3	4	5 Very
	MEAN	Re	Resp	Poor	Poor	Fair	Good	Good
Reliability and accuracy of contact information for the VA staff your organization needs to work with	3.79		14	1 7%	1 7%	3 21%	4 29%	5 36%
Approvals for VA-Paid hospice admissions to community hospice	3.85	1	13	0 0%	2 15%	3 23%	3 23%	5 38%
Approvals for VA-Paid hospice changes in levels of care	3.77	1	13	0 0%	2 15%	3 23%	4 31%	4 31%
Process for determining continued need for hospice services	4.21	1	14	0 0%	1 7%	1 7%	6 43%	6 43%
Reimbursement			_	1	2	3	4	5
	MEAN		# of Resp	Very Poor	Poor	Fair	Good	Very Good
Timeliness of VA reimbursement for VA- Paid hospice care	3.09		11	1 9%	2 18%	4 36%	3 27%	1 9%
Access to reimbursement for all four levels of VA-Paid hospice care	3.40		10	0 0%	2 20%	3 30%	4 40%	1 10%
Your organization's experience in billing your local VA Medical Center	3.00	1	11	3 27%	2 18%	0 0%	4 36%	2 18%

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Continuity of Care		# of	1 Very	2	3	4	5 Very			
Process to coordinate the transition of Veterans' care between your organization and your local VA Medical Center	MEAN 3.55	Resp 11	Poor 0 0%	Poor 2 18%	Fair 3 27%	Good 4 36%	Good 2 18%			
Process to coordinate VA-Paid admission to your organization's hospice inpatient unit	3.33	6	0 0%	1 17%	2 33%	3 50%	0 0%			
Process to coordinate admission from the community to VA facility (inpatient HPC unit, acute care, long term care)	3.67	9	0 0%	0 0%	4 44%	4 44%	1 11%			
Process to provide after-hour coverage for Veterans whose primary care is provided by a VA physician	3.20	10	0 0%	2 20%	5 50%	2 20%	1 10%			

We Honor Veterans State Survey

Written Comments January 2012

Colorado

Veteran Emphasis

We would like to establish a stonger relationship with local VA providers. Would also like to be able to get a hospice order from VA physician in a more timely manner.

Cooordinating relationship with local clinic staff becomes stronger with time. A learning process for both parties.

Our organization has a collaborative relationship with the VAMC for greater than 18 years.

Business Relationship

Contact information in the form of a list for the local VA contacts, we were told does not exist.

Reimbursement

Some difficulty when the VAMC had a change in billing providers. Out contact with the VAMC helped our organization to work out these issues.

Continuity of Care

Our VAMC provides inpatient hospice services and does not refer unless they are full. If a veteran wants to utilize our inpatient it is not covered under VA coverage if they have services available. We look at options for medicare/medicaid and have a sliding scale so all patients have access is needed.