

Warrior-Family Roundtable (WFR) Information Paper

Topic: “Top Care Coordination Needs Of Our Wounded, Ill and Injured”

When: Thursday, December 8, 2016
8:45 a.m. (light breakfast)
9:00 a.m. – 12:00 p.m. Discussion

Where: The Chicago School of Professional
Psychology, 1015 15th Street NW
Washington, DC 20005

Background: The WFR expands on previous MOAA forums and efforts to improve the physical, psychological, and overall well-being of our warriors and their families. A *not-for-attribution, invitation only venue*, the Roundtable is a networking and discussion forum aimed at enhancing communication in the public and private sectors, offering key leaders or influencers an opportunity to generate new insights and leverage strengths and resources at addressing contemporary, cross-cutting and emergent issues.

Meeting Purpose: This final forum concludes the three-part year long series on wounded, ill and injured (WII) care coordination.

The April 29, 2016 Roundtable provided an update on care coordination between the Departments of Defense (DoD) and Veterans Affairs (VA), including information on the new Joint Care Coordination Committee (IC3) Lead Coordinator initiative.

At the September 23, 2016 Roundtable, DoD and Service WII Program, RAND Corporation, and the Center for a New American Security (CNAS) experts engaged attendees in an interactive discussion on how the WII population and their needs have changed over time.

Over the course of the two forums, attendees formulated a list of short and long-term unmet or emerging needs for this population, their families and caregivers.

This Roundtable will fine-tune these issues to produce two lists on WII Care Coordination:

- Top Care Coordination Needs and Solutions Governmental Agencies Should Focus on Over the Next 2-5 Years
- Top Care Coordination Needs and Solutions Non-Governmental Organizations (NGOs) Should Focus on Over the Next 2-5 Years

Format:

Continental Breakfast

Welcome/Introductions

Needs and Solutions Brainstorming Session—Breakout Group 1:

Top Care Coordination Needs and Solutions Governmental Agencies Should Focus on Over the Next 2-5 Years

1. Comprehensive research on posttraumatic stress (PTS)
2. PTS and traumatic brain injury (TBI) are not one and the same—conditions may co-exist but are unique and separate conditions
3. Conduct a research study similar to the “National Vietnam Study” for current war Veteran population
4. Develop and adopt a common language in DoD-VA WII Programs

5. Provide a continuum of care coordination and expand current government and community support programs
6. Establish a single DoD-VA Caregiver Support Program, synchronizing services between the departments for veterans of all eras
7. Fully implement interoperability of electronic health records between DoD, VA and community providers
8. Expand long-term health care and support services
9. Establish a short and long-term integrated network of health care
10. Ease restriction of DOD-VA collaboration, partnership and gifting with non-profit sector
11. Address recruits with pre-existing behavioral health issues
12. Include Veterans, family members and survivors in the national defense budget
13. Review effectiveness of Temporary Disability Retirement List (TDRL) and Integrated Disability Evaluation System (IDES)
14. Evaluate and mitigate disruption in care among various federal medical benefits (e.g., TRICARE, VA, Medicare, etc.), integrating systems where possible

Needs and Solutions Brainstorming Session—Breakout Group 2:

Top Care Coordination Needs and Solutions NGOs Should Focus on Over the Next 2-5 Years

1. Leverage organizational platforms to advocate for a coordinated government research effort on toxic exposure and other service-connected illnesses and diseases
2. Amplify communications and outreach efforts to educate and improve government and the public awareness of the WII population and their needs
3. NGOs increase collaboration at the national level, emphasizing quality services and establishing national policies for local implementation
4. Inform and educate at the national level on what services and gaps exist in support provided by NGOs
5. Establish regional NGO representatives within the VA Benefits and Health Systems District Offices to improve collaboration and cooperation
6. Create a dedicated online forum for NGO's to provide updates and improvements to the National Resource Directory (NRD)
7. Establish centralized uniform Memorandum of Understanding/Agreements (MOU/MOA) process and format with government agencies to maximize NGO resources and capabilities to rapidly respond to changing demands and real-time needs of the Veteran population to fill gaps in government support programs
8. Combine federal, state and local care coordination efforts to improve collaboration between government and NGOs to streamline and maximize programs and resources
9. Focus on Veterans 65 or older
10. Keep resource lists current

Group Reports

Round The Room—Ideas for Sharing Lists and/2016 WFR Reflections Discussion

2017 WFR Series—America's Health Rankings: Health of Those Who Have Served Report, United Health Foundation and MOAA

Wrap-Up Remarks

Information discussed during the Roundtable will be summarized and available for distribution to better serve military, veterans, and their families and caregivers.