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2017 Survey of Veteran Enrollees' Health and Use of Health Care

Data Findings Report

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Executive Summary

The 2017 Survey of Veteran Enrollees' Health and Use of Health Care (Survey of Enrollees) provides an overall characterization of Veterans who are enrolled in VA health care. Findings from the 2017 Survey of Enrollees are generally consistent with those from prior years. Central topics that are covered in the survey include enrollees' health insurance coverage, prescription drug use, smoking and health status, priorities when experiencing and considering the use of VA health services, and enrollees' readiness to engage with VA health care resources through digital platforms. Survey findings are based on a wide range of demographic indicators and factors that are relevant to enrollees when determining their use of VA health care services. The findings presented in this report provide the VA with additional insight on current efforts to strengthen and expand its infrastructure to meet the needs of the changing demographics of VA enrollees.

Overview of the Survey of Enrollees

The Survey of Enrollees provides an in-depth picture of enrollees' characteristics, their health status, available health care options, and their use and perceptions of VA health care.

The Department of Veterans Affairs (VA) operates the country's largest, most comprehensive, integrated health care system through the Veterans Health Administration (VHA). Veterans who served on active duty for at least 24 continuous months and who were honorably discharged from military service are eligible to enroll in the VA for health care.

VA uses a priority-based enrollment system comprised of eight priority groups, which gives some Veterans an enhanced eligibility status based on service-connected or other disabilities or exposures, income, and other factors, such as prisoner of war status or receipt of a Purple Heart. Priority groups are numbered from 1-8, with 1 being the highest priority for enrollment.

Conducted by the office of the Assistant Deputy Undersecretary for Health (ADUSH) for Policy and Planning, the Survey of Enrollees is an annual survey of more than 42,000 Veterans who are enrolled in VA's health care system. The Survey of Enrollees was initially designed to give VHA the information it needed to predict the demand for services in the future. The data are used to develop health care budgets and to assist VA with its annual enrollment decisions. Over the years, the VHA has also used the Survey of Enrollees to analyze policy decisions, provide insights into specific populations and their perspectives, and inform management decisions affecting delivery of care. In addition to collecting basic demographic information, the survey explores insurance coverage, pharmaceutical use, use of health care inside and outside of VA, perceived health status, trends in smoking, digital access, and perceptions about VA services among Veterans enrolled in the VA health care system. VHA uses this information to understand enrolled Veterans' health care needs and the factors that influence the variability in their access, utilization, and perceptions of VA health care services.

Methodology

There have been 15 cycles of the Survey of Enrollees (1999, 2000, 2002, 2003, 2005, 2007, 2008, and annually from 2010 to 2017). Through 2011, the survey was conducted using a telephone interview. In 2012, a multi-mode design was introduced, consisting of Computer-Assisted Telephone Interviewing (CATI), mail, and web data collection. Since 2015, the primary modes of data collection were mail and web data collection, with emphasis placed on effective strategies for maximizing responses obtained online.

The sampling frame for VA's 2017 Survey of Enrollees was selected from the VHA enrollment file as of September 2016. Enrollees living outside the United States and Puerto Rico, those missing variables needed for stratification, or those with invalid addresses were excluded from the sampling frame. The 2017 enrollee population included in the sampling frame at the time of weighting (September 30, 2016) was 8,345,428. The sample was stratified by VISN, priority group, and geographical healthcare markets. Data collection for the 2017 Survey of Enrollees began on March 29, 2017, and ended on July 17, 2017. In total, 131,336 enrollees were invited to participate in two mailings and 43,654 enrollees submitted or returned a completed survey. The data are weighted so that the findings are representative of the entire enrollee survey frame.

Demographic and Socioeconomic Characteristics of the Enrollees

Based on the 2017 Survey of Enrollees administrative data, enrollees classified in Priority Groups 1-3 remained the largest proportion of enrollees at 48 percent. The proportion of enrollees in Priority Group 1 continued its steady increase, reaching 25 percent in 2017 from 18 percent in 2013, while enrollees in Priority Groups 7-8 continued to decrease from 26 to 23 percent over this five year period. Demographically, enrollees are getting younger. The proportion of those younger than 45 years old has steadily increased from 15 percent to 20 percent over the last 5 years. Though some of these younger enrollees have priority ratings indicating higher levels of disability, they represent a smaller proportion of all enrollees compared with the overall enrollee population.

Approximately 49 percent of the enrollees reported an annual household income of $35,000 or higher, a two percent increase from 2016. While national trends show a slight decrease in unemployment among civilians and Veterans, VA enrollee unemployment remained at 9 percent, about the same as that reported in the previous two survey cycles.

Consistent with findings from 2016, the majority of enrollees were male, married, White and non-Hispanic. While the single largest service era component of the enrollee population remained those who served during the Vietnam War (38%), enrollees who served during the post-2001 era continued an upward trend from 19 percent in 2014 to 23 percent in 2016 and 26 percent in 2017.

Health Insurance Coverage

Veterans have varied health insurance coverage, including Medicare, Medicaid, TRICARE, and private insurance. The availability of other public or private insurance coverage is an important factor related to enrollee use of VA health care services.

In 2017, 20 percent of enrollees reported having no other public or private insurance coverage, reflecting no change from 2016. Also similar to 2016, the lack of insurance coverage was much higher among enrollees who were under age 65 and had lower household incomes (less than $35,000). Enrollees in Priority Groups 4-6 were more likely to be uninsured than those in Priority Groups 1-3 or Priority Groups 7-8.

Prescription Drug Coverage and Use

To understand enrollees' reliance on the VA for prescription drugs, the 2017 Survey of Enrollees included questions about prescription drug coverage and using prescription drugs obtained from community sources as well as through the VA. Most enrollees (approximately 80%) reported having health insurance, but prescription drug coverage rates varied significantly by insurance type. While most (82%) of enrollees' private health insurance plans included coverage of prescription medication, about one-third (32%) of enrollees with Medicare reported having prescription drug coverage under Medicare Part D. Both types of coverage for prescription drugs remained the same as 2016.

Of the enrolled Veterans who reported taking at least one prescription drug in the last 30 days, approximately two-thirds (63%) obtained one or more of their prescription medications from the VA. These enrollees reported receiving an average of 3.4 prescription medications from the VA.

Cigarette Smoking

The questions about smoking habits in the 2016 and 2017 Survey of Enrollees are in alignment with the Behavioral Risk Factor Surveillance Survey (BRFSS), a national health survey conducted by Centers for Disease Control (CDC). Enrollees were classified into five groups based on their responses to the smoking questions: (1) never smokers, (2) ever smokers, (3) current smokers, (4) recent unsuccessful quitters, (5) former smokers, and (6) recent successful quitters.

In 2017, 61 percent of enrollees were classified as ever smokers and 16 percent were current smokers. Results continue to show a six-year decline, down from 67 percent ever smokers and 19 percent current smokers in 2012. Fifty-two percent of current smokers made a recent quit attempt but were unsuccessful, a 6 percentage point decrease from 2016. Continued resources to help enrollees with intentions to quit may sustain this decline in unsuccessful quit attempts. Enrollees who are current smokers are more heavily represented by those who are under 65 years of age, American Indian/Alaska Native Non-Hispanic, and those who are lower income earners, uninsured, or unemployed.

Smoking rates continue a steady decline among enrollees over the past six years. In 2017, 61 percent of enrollees reported having ever smoked and 16 percent reported being current smokers. This represents a 6 and 3 percentage point decrease, respectively, since 2012.

Health Status

Veterans' perceived health status in 2017 continued the steady upward trend over the past several years, with 74 percent reporting that they have "good," "very good," or "excellent" health relative to other people their own age. This is an increase of 7 percentage points since 2013.

Veterans' health status continued the steady upward trend, with the proportion reporting good health or better rising 7 percentage points since 2013.

As in the previous year, 12 percent of enrollees were categorized as having one or more disabilities, based on their needs for assistance on Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL). ADLs represent the fundamental functions of self-care and IADLs represent tasks necessary for independent functioning as a member of a community.

Digital Access to VA Information and Resources

Access to the Internet

Seventy-seven percent of enrollees reported using the internet on an occasional or more frequent basis. However, internet use varied with age, income and priority group. Enrollees who were younger and had higher-incomes, and enrollees in the highest priority groups (Priority Groups 1-3) claimed the highest rates of internet use. Enrollees who were internet users accessed the internet most frequently from home (93%), from a mobile device (48%), and from work (32%). Most enrollee internet users access the internet on a daily basis (63% with a cell phone, 53% with a computer, and 21% with a tablet device).

Activities Performed through the Internet

Among the 77 percent of enrollees who used the internet at least occasionally, the most popular uses of the internet were non-health related activities such as sending emails (88%), getting travel directions (84%), and weather reports (81%). Fewer enrollees used the internet to perform health-related activities, such as looking up health information (77%), accessing personal health records (45%), and making medical appointments (33%).

Readiness to Use Internet for VA Information and Activities

Enrollees who used the internet reported much higher willingness to perform health related tasks over the internet, compared to their actual reported use. For instance, 78 percent and 77 percent of enrollee internet users indicated that they were willing to access their personal health records and make appointments over the internet, respectively. The large majority (84%) reported being willing to obtain information on VA benefits or look for health information on the VA website, both increases from 2016. Higher levels of willingness were associated with those who were younger, those in higher priority groups, and those with higher incomes.

Use of My Health*e*Vet Website

The 2017 Survey of Enrollees included several questions about the My Health*e*Vet (MHV) website, an online personal health record for Veterans and active duty service members, as well as their health care providers and dependents. In response to questions about MHV, fifty-four percent of enrollees said that they were aware of it. Among the enrollees who were aware of MHV, 56 percent said that they used it. The top reasons for using MHV were to refill prescriptions (73% of MHV users), look for health information (67%), and view scheduled appointments with the VA (67%).

Enrollees' Views of VA Healthcare

Experience and Satisfaction with VA

Enrollees who used any VA health care services in 2016 responded to a series of questions to assess their experiences and satisfaction with VA health care. Among the 62 percent of enrollees who responded to these questions, a large majority responded favorably about their experiences with scheduling appointments and their visits to the VA or VA-approved facility. Regarding factors related to appointment scheduling, the experience was positive for 75 percent to 88 percent of respondents across the three related items. More than 81 percent of enrollees also expressed positive views on ease of access to these facilities. Eighty-six percent indicated that personnel were welcoming and helpful during their visit.

In terms of satisfaction with their experiences, those who used VA services reported being most satisfied with the way in which their privacy was respected (90%), and in their interactions with their care providers (ranging from 80% to 86%). Approximately 80 percent of enrollees also expressed high satisfaction in their ability to participate in their own health care decision making. The lowest satisfaction among respondents was related to their ability to get referrals for specialist care or special equipment (65%).

Patterns were generally consistent across demographic groups such that the lowest priority groups (Priority Group 7-8) and those who were 65 years and older were more likely to report positive experiences and higher levels of satisfaction with the VA health care services they received. There was variation in how enrolled Veterans of different racial and ethnic groups responded, but no one pattern emerged. Further analysis would be recommended to better understand these differences.

Reasons for Using Health Care Services Other Than Those Provided by VA

Among enrollees who indicated that they used health care services other than those provided by the VA, the top two reasons were because that they found these facilities provided "easier access to care" (67%), and that they had an existing provider outside VA who they "really like and trust" (64%). Enrollees in higher priority groups and those with higher income levels were more likely to respond in this manner. A smaller percentage of enrollees used other facilities due to reasons related to perceived ineligibility. These enrollees tended to be in Priority Groups 4-6 and 7-8 and have lower levels of income.

Important Factors for Selecting Health Care Provider

The professionalism of healthcare providers (84%) and having insurance coverage for the health service needed (82%) were ranked as the most important factors for selecting a health care provider. Other important factors were convenient location, professionalism of office staff, and travel time or distance. While concerns about cost did not rise to one of the top-ranked factors of consideration, still almost three-quarters of enrollees (74%) indicated that out-of-pocket costs was an important factor for choosing health care services.

Current and Planned Future Use of VA

Consistent across previous years, about one-third (30%) of enrollees said that they currently use VA services to meet all of their health care needs. In terms of planned future use, 41 percent of all enrollees said that they plan to use VA health care as their primary source of health care. This was followed by 14 percent who said that they would use it as a safety net, and 13 percent who indicated that they plan to use it for service-related disability or physical or mental health condition. Enrollees in Priority Groups 1-3 and 4-6 were more likely to plan to use VA as their primary source of care, as with enrollees younger than 65 years of age, and those with lower income levels.

Trust in VA

Of all enrollees, 72 percent indicated that they either "strongly agreed" or "somewhat agreed" that they trusted VA to fulfill our country's commitment to Veterans, an increase from 68 percent in 2016. Enrollees in Priority Groups 4-6, those who were 65 years and older, and those with incomes less than $35,000 expressed the highest levels of trust "strongly agree" in the VA to fulfill our country's commitment to Veterans.

Overview of the Survey of Enrollees 1

VA operates the country's largest, most comprehensive, integrated health care system through the Veterans Health Administration (VHA). All Veterans who served on active duty for at least 24 continuous months and who were honorably discharged from military service are eligible to enroll in the VA. Given that more than 14 million Veterans currently are eligible to receive care from the VA, it is important for VHA to understand their health care needs. In addition, the influence of demographic and socioeconomic factors on enrolled Veterans' health care usage patterns is critical for informing VHA's planning and future projections.

To assist in determining Veterans' healthcare usage patterns, the Assistant Deputy Undersecretary for Health (ADUSH) for Policy and Planning conducts the Survey of Veteran Enrollees' Health and Use of Health Care (Survey of Enrollees) annually with more than 42,000 Veterans who are enrolled in VA's health care system. The Survey of Enrollees is designed to provide VHA an in-depth understanding of enrollee demographics, available health care options, perceptions of VA health care, and self-reported health status. The survey was initially developed in 1999 to support VHA's planning efforts and to inform the VA Enrollee Health Care Projection Model (EHCPM), VHA's tool for projecting enrollment, utilization, and expenditures. However, over the years, the data have also been used to analyze policy decisions, provide insights into specific populations, and inform management decisions affecting VHA's delivery of care. The purpose of this report is to present findings from the 2017 Survey of Enrollees.

1.1 VA Enrollment

In Fiscal Year (FY) 1999, VA began to use a priority-based enrollment system, established by the *Veterans' Health Care Eligibility Act of 1996* (Public Law 104-262). Some Veterans have an enhanced eligibility status based on the existence of service-connected or other disabilities or exposures, income, and other factors, such as prisoner of war status or receipt of a Purple Heart. Each Veteran is assigned a priority group, which is numbered from 1 to 8, with 1 being the highest priority group. The priority groups include: Veterans with service-connected disabilities (Priority Groups 1 and 2); prisoners of war and recipients of the Purple Heart (Priority Group 3); Veterans with catastrophic disabilities unrelated to service (Priority Group 4); low-income veterans (Priority Group 5); Veterans who meet specific criteria, such as having served in specific conflicts or who were exposed to radiation (Priority Group 6); and all other Veterans (Priority Groups 7 and 8). Priority Group 1 has no copay for care, whereas Priority Groups 7 and 8 are generally expected to pay copays for the care they receive. Veterans in Priority Groups 2 through 6 have required copays depending on the type of care, service-connected disability, and other factors. Figure 1-1 summarizes the priority groups.

VA provides primary and specialty care, a comprehensive pharmaceutical benefits package, and ancillary services to its enrollees through a network of 1,243 healthcare facilities, including 170 medical centers and 1,063 outpatient clinics.[1,2] For administrative purposes, the VA is divided into 18 geographically divided administrative areas called Veterans Integrated Service Networks (VISNs).[3] Between 2003 and 2010, an estimated 1.9 million Veterans who served in Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn (OEF/OIF/OND) have become eligible for VA health care, and about 61 percent of these Veterans have obtained health care from VA. OEF/OIF/OND Veterans are most likely to seek treatment for mental health conditions, such as post-traumatic stress disorder (PTSD) and depression,[4] suggesting that as this group of Veterans continues to grow, so will the demand for mental health care. Many Veterans who use VA health care also access health care funded through public and private insurance, which has implications for the extent to which they will turn to VA for their health care needs.

[1] https://www.va.gov/budget/products.asp

[2] https://www.va.gov/health/

[3] https://www.va.gov/directory/guide/division.asp?dnum=1

[4] Lee, S. E., Fonseca, V. P., Wolters, C. L., Dougherty, D. D., Peterson, M. R., Schneiderman, A. I., & Ishii, E. K. (2015). Health care utilization behavior of veterans who deployed to Afghanistan and Iraq. *Military Medicine*, *180*(4), 374-379. doi:10.7205/milmed-d-14-00250.

Figure 1-1. VA eligibility categories and priority groups

Priority Group	Eligibility
Priority Group 1	• Veterans with service-connected disabilities rated 50% or more disabling
Priority Group 2	• Veterans with service-connected disabilities rated 30% to 40% disabling
Priority Group 3	• Veterans who are former prisoners of war • Veterans awarded a Purple Heart medal or Medal of Honor • Veterans whose discharge was for a disability that was incurred or aggravated in the line of duty • Veterans with a service-connected disabilities rating of 10% to 20% disabling • Veterans awarded special eligibility classification under Title 38, U.S.C., Section 1151, "benefits for individuals disabled by treatment or vocational rehabilitation"
Priority Group 4	• Veterans who are receiving aid and attendance or household benefits • Veterans who have been determined by VA to be catastrophically disabled
Priority Group 5	• Veterans with nonservice-connected disabilities and Veterans with noncompensable service-connected disabilities rated 0% disabled by VA with annual income below the VA's and geographically (based on your resident zip code) adjusted income limits • Veterans receiving VA pension benefits • Veterans eligible for Medicaid programs
Priority Group 6	• Veterans with 0% compensable service-connected disabilities • Veterans exposed to ionizing radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki • Project 112/SHAD participants • Veterans who served in the Republic of Vietnam between January 9, 1962 and May 7, 1975 • Veterans of the Persian Gulf War who served between August 2, 1990 and November 11, 1998 • Veterans for served on active duty at Camp Lejeune between August 1, 1953 and December 31, 1987 • Veterans who served in a theater of combat operations and discharged from active duty on or after January 28, 2003, for five years post discharge
Priority Group 7	• Veterans with gross household income below the geographically-adjusted income limits (GMT) for their resident location and who agree to pay copays
Priority Group 8	• Veterans with gross household income above the VA and the geographically-adjusted income limits for their resident location and who agree to pay copays

1.2 Background of the Survey of Enrollees

The Survey of Enrollees was initially designed to give VHA the information it needed to predict the demand for services in the future. The data are used to develop health care budgets and to assist VA with its annual enrollment decisions. In addition to collecting basic demographic information, the survey explores insurance coverage, VA and community health care use, pharmaceutical use, attitudes and perceptions about VHA services, perceived health status, and smoking habits of Veterans enrolled in the VHA system. Additional topics are added depending on the information needs of VA. The purpose of the current survey is to provide critical and essential information on enrolled Veteran utilization of health services. This information supports annual VHA projections of enrollment, utilization, and expenditures, as well as a variety of high level VHA budget and policy related analyses.

There have been 15 cycles of the survey (1999, 2000, 2002, 2003, 2005, 2007, 2008, and annually from 2010 to 2017), which is conducted by the Office of the Assistant Deputy Under Secretary for Health for Policy and Planning. Through 2011, the survey was conducted using a telephone interview. In 2012, a multi-mode design was introduced, consisting of telephone, mail, and web data collection. The methodology for 2015, 2016, and 2017 employed web and mail data collection, with emphasis placed on effective strategies for maximizing responses obtained online. In 2016 and 2017, a small number of Computer Assisted Telephone Interviews (CATI) were utilized at the end of data collection in order to meet minimum targets across markets. Markets are healthcare areas within each VISN that have a sufficient population and geographic size to benefit from the coordination and planning of health care services and to support a full healthcare delivery system.

1.3 Methodology

The sampling frame for VA's 2017 Survey of Enrollees was selected from the VHA enrollment file and contained all Veterans enrolled in VA health care as of September 2016, with the exception of those living outside the United States or Puerto Rico, those whose records lacked variables needed for stratification, or those with invalid addresses. The sample was stratified by VISN, geographical healthcare markets, and priority group and was designed to meet the following three goals:

- Guarantee an effective sample size of at least 315 completes within each market and for each priority group within a VISN, where the effective sample size was the number of completes adjusted for the oversampling of subgroups.

- Ensure that at least 30 percent of the completed surveys were pre-enrollees.
- Provide a total sample size large enough to ensure 42,000 completed surveys.

Consistent with the 2015 and 2016 surveys, the 2017 survey used a multimode design. As in 2016, the survey was initially launched via the web to all sampled enrollees. Also consistent with the methodology employed in 2016, the sample was released in two waves to allow better targeting of the sample stratification cells and ensure that all cells quotas were met. To ensure the target number of completes for each sample cell, the survey team conducted telephone interviews with 46 respondents in three markets. All data collection targets (i.e., number of completed interviews in each VISN and market) were met. Table 1-1 provides a comparison of the 2015, 2016, and 2017 designs.

Table 1-1. Comparison of survey of enrollees design, 2015, 2016, and 2017

	2015	2016	2017
Weighted population of Veteran enrollees	8,442,380	8,401,553	8,345,428
Weighted population as of:	September 2014	September 2015	September 2016
Stratified sample size	138,918	172,350	131,336
Sample stratified by:	VISN, market, priority group, pre- and post-enrollee	VISN, market, priority group, pre- and post-enrollee	VISN, market, priority group, pre- and post-enrollee
Number of completed surveys/interviews	50,673	46,571	43,654
Response rate	36.4%	27.0%	33.4%
Surveys/Interviews collected during the following timeframe	March 2015 to June 2015	March 2016 to July 2016	March 2017 to July 2017
Mode of data collection	Web and mail	Web, mail, and CATI*	Web, mail, and CATI**

* In 2016, 26 CATI interviews were conducted in two markets.

**In 2017, 46 CATI interviews were conducted in three markets.

Data collection for the 2017 Survey of Enrollees began on March 29, 2017, and ended on July 17, 2017. In total, 131,336 enrolled Veterans were included in the sample. The first wave (Wave 1) was released on March 29, 2017 and included 96,573 sampled enrollees. Wave 2, released on May 8, 2017, included an additional 34,763 sampled enrollees. Completed interviews for each wave were accepted through the end of the data collection period.

Even after achieving the targeted number of completed surveys by VISN and market, Westat continued data collection for more than a week to allow sufficient time for mailed surveys to come in. At the conclusion of data collection, 43,654 enrolled Veterans had submitted or returned a completed survey. Overall, 36.2 percent completed the web version of the questionnaire, 63.7 percent completed the mail survey and 0.1 percent completed a telephone survey.

Although the survey design emphasized a specific number of completed surveys, as opposed to reaching a target response rate, non-response bias is still a concern, as with any scientific study that uses survey methodology. Rigorous, sound research practice dictates that studies based on survey methodology employ the use of survey weights to adjust for differential rates of response among various subgroups, and thereby reduce the potential for bias. Therefore, we examined response rates by strata and constructed survey weights to adjust for non-response. When analyzing and reporting on findings from the survey data, survey weights allow us to adjust the survey data to represent the population from which the same was drawn. Hence, although the survey was administered to a sample of enrollees, analysis of the survey data using survey weights allow us to generalize the findings to the entire enrollee population.

1.4 Recent VA Policy Changes

Many VA enrollees get a significant share (or all) of their healthcare from other health systems. Veterans' access to health insurance coverage is a critical factor determining whether they use the VA. As a result, Veterans who rely heavily on the VA for their care tend not to have health insurance coverage, are less well-off financially and are less healthy than the general civilian population.[5] Moreover, the health care needs of VA patients with service-connected disabilities are different from those of the civilian population.[6] Recent health care reform and policy changes are likely to create increased choices for uninsured Veterans to obtain health care. These include a realignment under the MyVA Initiative, the Veterans Access, Choice and Accountability Act of 2014 (Choice Act), and the Affordable Care Act. It is important to understand the potential impact that these three policy changes are having on enrollees' use of VA health care. In the sections below, we briefly discuss these changes as context for interpreting results from the 2017 Survey of Enrollees.

[5] Agha, Z., Lofgren, R. P., VanRuiswyk, J. V., & Layde, P. M. (2000). Are patients at the Veterans Affairs medical centers sicker? A comparative analysis of health status and medical resource use. *Archives of Internal Medicine, 160,* 3252–3257.

[6] Angrist, J. D. (1990). Lifetime earnings and the Vietnam-era draft lottery: Evidence from Social Security administrative records. *American Economic Review, 80*(3), 313-336.

1.4.1 Veterans Choice and Quality Employment Act

To improve access to and timeliness of health care for Veterans, the Veterans Access, Choice and Accountability Act of 2014 requires VA to offer authorization to receive care from community providers to Veterans who are unable to secure an appointment at a VA medical facility within 30 days or who live more than 40 miles from the nearest VA medical facility. To expand VA's internal capacity to provide timely care to Veterans, the bill provided $5 billion to VA to increase access to care through the hiring of physicians and other medical staff and by improving VA's physical infrastructure, and authorizes the leases of 27 major medical facilities in 18 states and Puerto Rico.[7] A 2015 amendment to the Choice Act provides Veterans access to VA funded health care with alternative health care systems when the nearest VA facility is within 40 miles, but unable to provide the care sought by the Veteran. On August 12, 2017, the President signed the VA Choice and Quality Employment Act, to extend the Choice Program through January 2018, and authorized $2.1 billion in additional funding for the Choice Program.[8] The extension also grants the VA additional time to propose amendments to the program in an effort to improve the way VA interacts with the private sector.[9]

1.4.2 Affordable Care Act

The Affordable Care Act (ACA),[10] signed into law by in 2010, was designed to increase health insurance coverage, reduce health care costs, and improve health care quality. While the ACA did not change VA benefits, aspects of the law may have impacted the way veterans choose to access health care. For example, under the Shared Responsibility Provision, Veterans may be prompted to enroll in VA healthcare to satisfy the requirement to have health insurance coverage. On the other hand, the addition of health care exchanges that provide individual health care plans and tax credits to help pay for these plans introduces alternatives to some Veterans, and could lead to fewer Veterans utilizing VA health care. Further, the expansion of Medicaid under the ACA provides another alternative to some Veterans. Nearly 50 percent of uninsured Veterans and approximately

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7 https://veterans.house.gov/the-veterans-access-choice-and-accountability-act-of-2014-highlights

8 https://www.va.gov/opa/choiceact/

9 http://www.npr.org/sections/health-shots/2017/04/19/524738537/trump-extends-troubled-va-program-that-pays-private-doctors

10 https://www.hhs.gov/healthcare/about-the-law/read-the-law/

one-third of their family members are estimated to be newly eligible for Medicaid under the Medicaid expansion provision, for those living in states opting to expand.[11]

The net impact of the ACA on Veterans' reliance on the VA is unclear. The ACA does not affect current VA health care benefits, eligibility, or cost to beneficiaries. On the one hand, the individual shared responsibility provision of the ACA could result in a greater number of applications for enrollment in VA health care, since it satisfies the minimum essential coverage requirement. On the other hand, the ACA will clearly create a greater number of alternatives for uninsured Veterans. A Veteran's decision to use VA versus another health care system will likely depend on their individual health care needs, proximity to the medical facilities that provide needed care, and personal preference. The net result of these two opposing potential effects is unclear.

In addition, at the time of this report being finalized, Congress was contemplating legislative changes that might impact implementation of the ACA.

It is important to examine changes in uninsured rates and use of VA health care services relative to community health care services based on the 2017 Survey of Enrollees with these policy changes in mind.

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[11] http://www.urban.org/sites/default/files/alfresco/publication-pdfs/412775-Uninsured-Veterans-and-Family-Members-State-and-National-Estimates-of-Expanded-Medicaid-Eligibility-Under-the-ACA.pdf

Demographic and Socioeconomic Characteristics of the Enrollee Population 2

The demographic and socioeconomic information provides insights into the Veteran enrollee population and their potential healthcare needs. Veterans are assigned a priority group for health care enrollment based on specific criteria such as income, service-connected disability, benefits received from VA, active duty period of service, and OEF/OIF/OND status. This chapter examines the key characteristics of the VA enrollees and compares the 2017 results to years prior.

2.1 Demographic Overview

Results of the 2017 Survey of Enrollees are weighted to represent the population of Veterans enrolled in the VA health care system. The enrollee sample frame at the time of weighting[12] was 8,345,428, a decrease of 56,125 enrollees from the 2016 report. Below are notable statistics about the 2017 enrollees.

Profile of the Average Enrollee

- **Male**
- **61 years old**
- **White, non-Hispanic**
- **Married with dependents**

- Women[13] represented 8 percent of the enrollee population, but comprised 12 percent of enrollees who served in OEF/OIF/OND.
- The majority of enrollees were married (61%), had at least one dependent (54%), and lived in an urban area (67%).
- Seventy percent of the enrollees reported only one active duty period of service. More than one-third (38%) served during the Vietnam era, the most frequently reported period of service, and 16 percent of enrollees reported serving in OEF/OIF/OND.
- Nearly half of the enrollees (48%) reported exposure to combat during their military service.

[12]The 2017 sampling frame contained all Veterans enrolled in VA health care and living in the United States as of September 30, 2016, with the exception of those enrollees for whom VA did not have key strata variables such as address or priority assignment.

[13]Gender, Urban/Rural, OEF/OIF/OND, Age, and priority group came from VA administrative data file.

2.1.1 Priority Groups

The Veterans' Health Care Eligibility Act of 1996 mandated the VA to establish and implement a priority-based enrollment system to ensure each Veteran is enrolled based on the enrollee's specific eligibility status. Priority Groups range from 1 to 8, with 1 being the highest priority for enrollment. Priority Groups 1-3 are Veterans generally with service-connected disabilities. Veterans in Priority Groups 4-6 are those with nonservice-connected disabilities who have an annual income below the established VA Means Test threshold.[14] Veterans in Priority Groups 7-8 generally are those with no service-connected disability and who have an annual income above the threshold.

In 2017, the largest proportion of enrollees was in Priority Groups 1-3 at 48 percent (Table 2-1). This is an increase from 46 percent in 2016.

Table 2-1. Enrollees by priority groups (1-3, 4-6, 7-8)

Priority group	N	%
1–3	3,993,805	47.9
4–6	2,454,604	29.4
7-8	1,897,020	22.7
Total	8,345,429	100.0

This largest proportion of enrollees are in Priority Group 1, which contains 25 percent of enrollees. Priority Group 5 and 6 are the next two largest groups, with 21 percent and 23 percent of enrollees respectively (Figure 2-1).

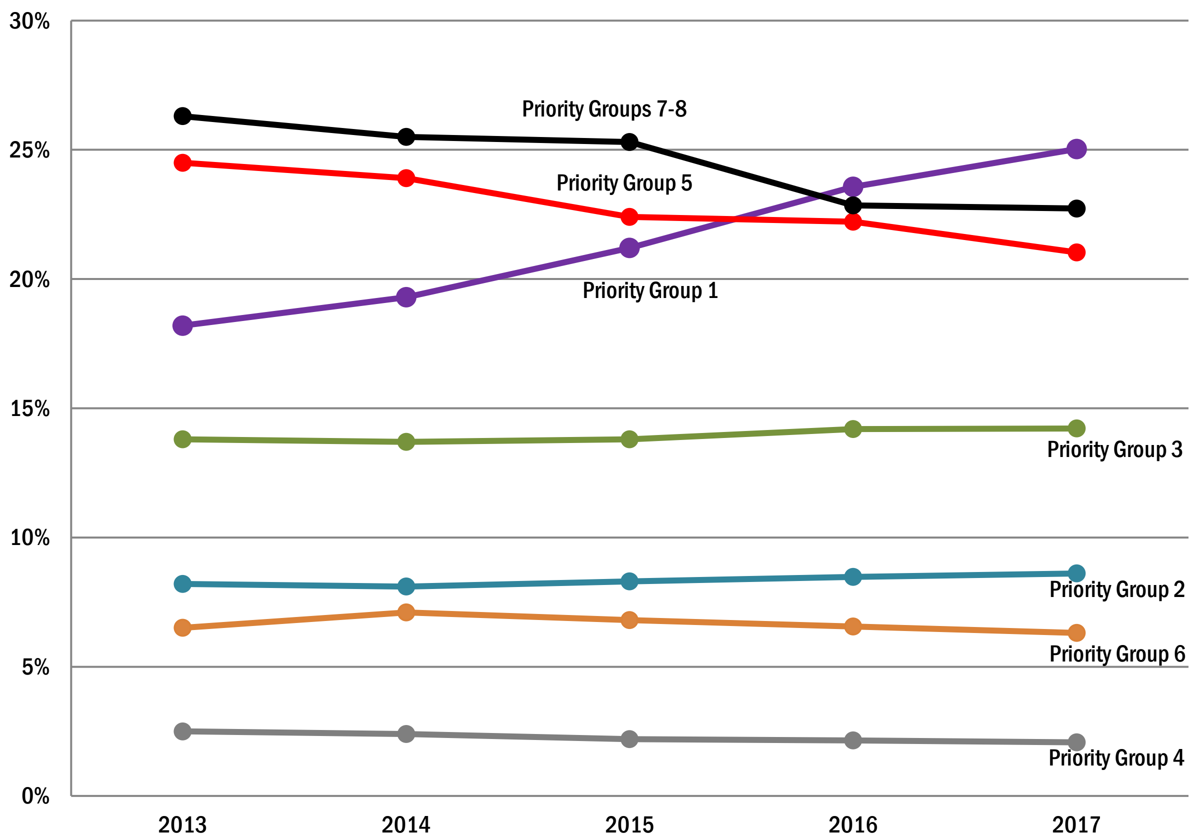
[14] VA uses the MT threshold for the current calendar year to determine whether the Veteran is considered unable to defray the expenses of necessary care. The 2017 VA National Income Threshold for Veterans with one dependent is $38,489.

Figure 2-1. Enrollees by priority groups

Priority group	Number of enrollees	Percent of enrollees by priority group
1	2,089,045	25.0%
2	718,309	8.6%
3	1,186,451	14.2%
4	173,069	2.1%
5	1,755,173	21.0%
6	526,361	6.3%
7-8	1,897,019	22.7%
Total	8,345,428	

Changes in Priority Groups. Although the distribution of enrollees has not changed greatly across the Priority Group categories 1-3, 4-6, and 7-8, this is driven by the stability of Priority Groups 2, 3, 4 and 6 (see Figure 2-2). Priority Group 1 has grown steadily over time and it has seen the highest increase in percentage of enrollees out of all other Priority Groups – a change from 18 percent of the enrollee population in 2013 to 25 percent in 2017. In contrast, two priority groups have continued to experience a slower decline in the number of enrollees. In 2013, Priority Group 5 consisted of 25 percent of enrollees and Priority Groups 7-8 consisted of 26 percent of enrollees, which have both decreased to 21 percent and 23 percent in 2017, respectively. Over the past five years, the distribution of enrollees has shifted slightly to higher priority groups with 74 percent of enrollees in Priority Groups 1-6 in 2013 as compared to 77 percent in 2017. Figure 2-2 compares the enrollee priority distributions through the past five survey cycles.

Figure 2-2. Percentage of enrollees by priority groups from 2012 to 2017



A closer look at Priority Group 1 reveals that these enrollees are more likely to be in the younger age group (<45), have served in the OEF/OIF/OND conflicts, and to have served in a combat zone. According to the National Center for Veterans Analysis and Statistics, the number of Veterans with a service-connected disability has been on the rise, particularly among those with a disability rating of 50 percent or higher.[15] The VA considers each injury, illness, or other condition or disability and gives it a numerical disability rating, based on the extent to which it diminishes the ability to work and perform daily activities.[16] The disability rating is a key determinant of the compensation benefits that Veterans receive from the VA.[17]

Priority Groups 7 and 8 are combined for the analysis in this report because they are more similar to one another than to other priority groups. Eligibility for Priority Group 7 versus 8 is solely based on income and the time of enrollment, Veterans are eligible to be assigned to Priority Group 7 if they

[15]http://www.va.gov/vetdata/docs/QuickFacts/SCD_trends_FINAL_2014.PDF

[16]http://themilitarywallet.com/va-math-combined-disability-ratings/

[17]http://www.benefits.va.gov/compensation/rates-index.asp#howcalc

have incomes below the geographically adjusted income threshold, called the geographic means test (GMT), and Veterans with incomes above GMT are eligible to be placed in Priority Group 8.[18,19] Enrollees in both Priority Groups 7 and 8 are also subject to similar copay rates, with the exception of inpatient services.[20,21] For these reasons, Priority Groups 7 and 8 are collapsed into a single category in the analyses involving priority groups. In contrast, eligibility for Priority Groups 1-6 depends on multiple factors, including the level of service-connected disability, period(s) of service, awards received for duty, other benefits received, and other qualifying injuries and exposures.

2.1.2 Priority Groups by VISN

Figure 2-3 shows the 2017 enrollee distribution in Priority Groups 1-6 by VISN. VISNs 7, 17 and 20 ranked the highest in percentage of enrollees (all 82%), while VISN 2 had the lowest percentage of enrollees (65%) in Priority Groups 1-6. The range of enrollee enrollment is consistent with findings from 2016.

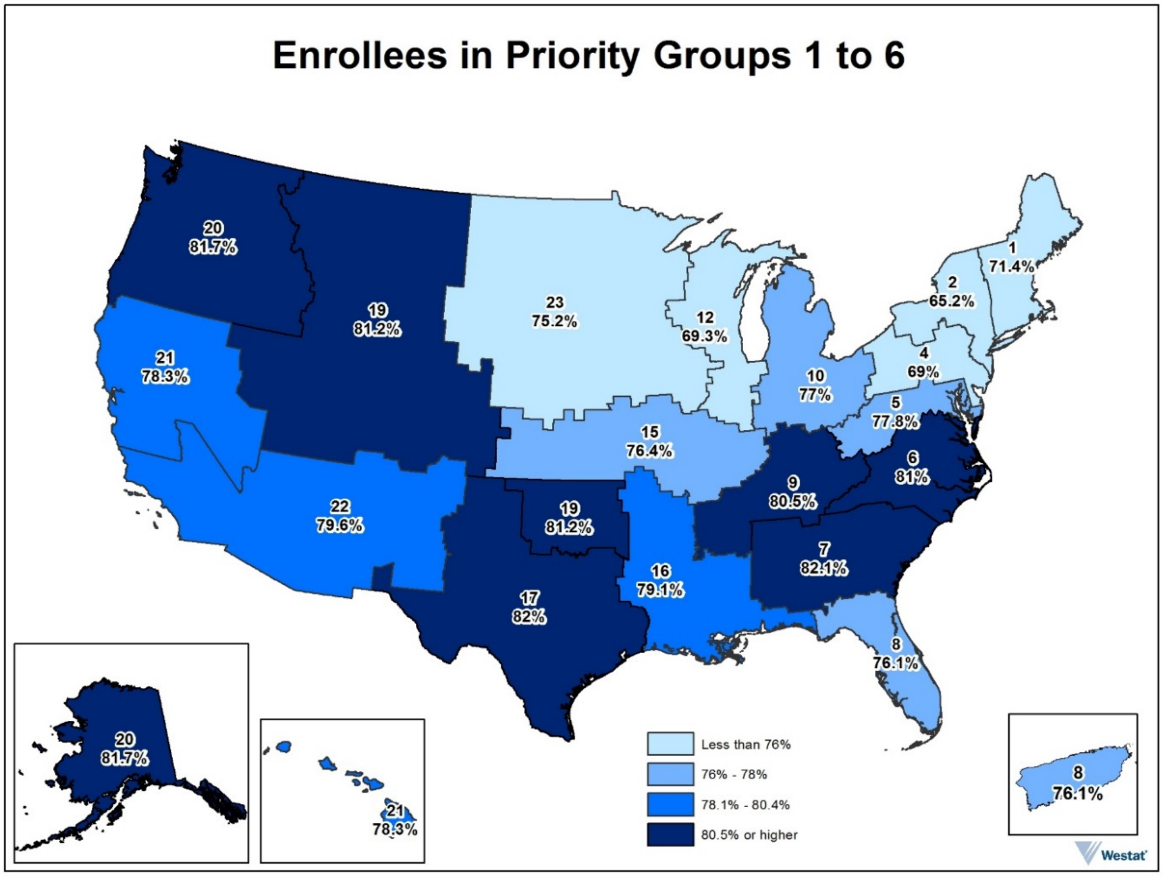
[18] http://www.va.gov/healthbenefits/resources/priority_groups.asp

[19] https://veterans.maryland.gov/wp-content/uploads/sites/2/2013/10/USVAHealthcareBenefitsGuide.pdf

[20] http://www.va.gov/healthbenefits/cost/copay_rates.asp

[21] http://www.va.gov/healthbenefits/resources/publications/IB10-185_health_care_overview_2016_apr_v2_web.pdf

Figure 2-3. Enrollees in priority groups 1-6 by VISN



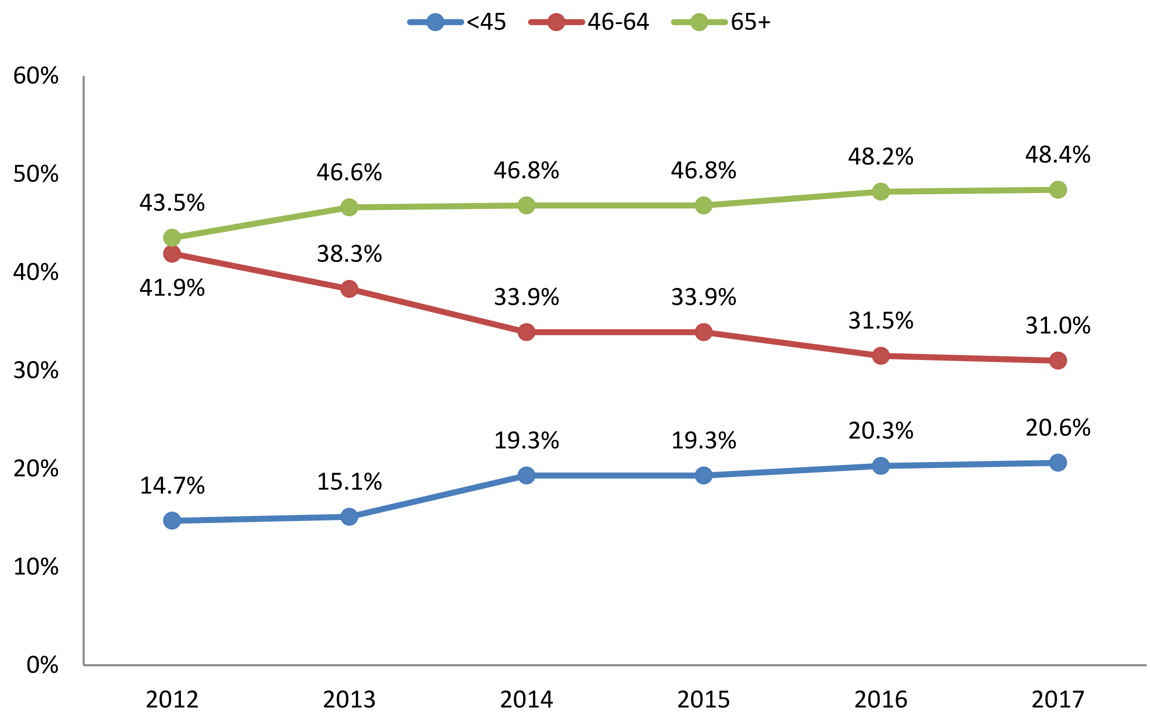
2.1.3 Age

Approximately 48 percent of 2017 enrollees were ages 65 or over, 31 percent were between 45 and 64 years of age, and 21 percent were under 45 years of age (Table 2-2). The percentage of enrollees younger than age 45 and the percentage of enrollees age 65 or older have generally increased over the past five years and are both higher in 2017 than they were between 2013-2017, whereas the percentage of enrollees ages 46 to 64 has declined (Figure 2-4) over the same period of time.

Table 2-2. Enrollees by age group

Age group	N	%
<45	1,717,194	20.6
45–64	2,585,948	31.0
65+	4,042,286	48.4
Total	8,345,428	100.0

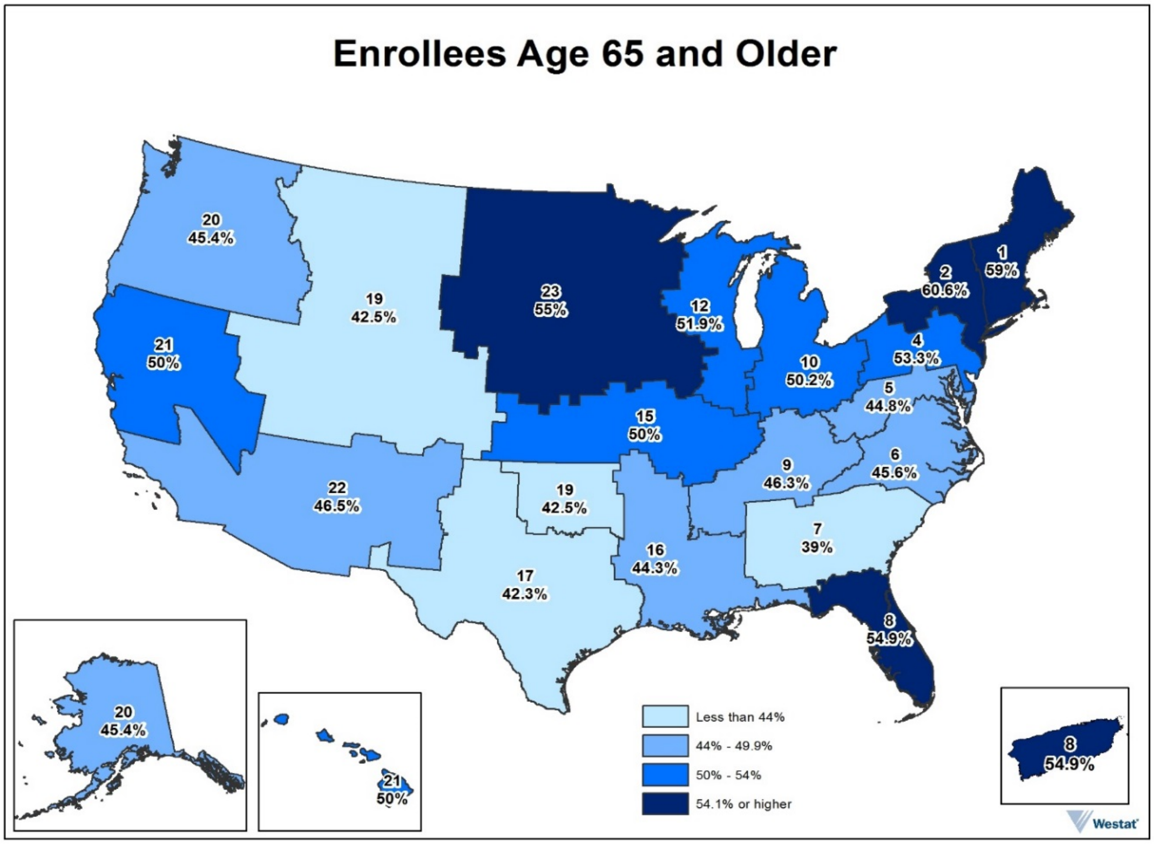
Figure 2-4. Percentage of enrollees by age from 2013 to 2017



2.1.4 Age Group by VISN

Figure 2-5 shows the 2017 enrollees age 65 or older by VISN. VISN 2 ranked highest in the percentage of enrollees age 65 or older (61%), followed by VISN 1 (59%), VISN 8 (55%), and VISN 23 (55%). VISN 7 had the lowest percentage of enrollees age 65 or older at 39 percent.

Figure 2-5. Enrollees age 65 and older by VISN



2.1.5 Income

As with the 2016 survey, income was defined as an enrollee's total annual household income.[22] Income is a factor that affects one's eligibility for enrollment. The VA National Income Thresholds for Calendar Year 2016 (based on Income Year 2016) that was used to determine eligibility for Priority Group 5 is $32,074.[23] To be eligible for services in Priority Group 8, a Veteran's household income cannot be more than 10 percent of the VA National Income Threshold or $35,281. The closest survey income range to this threshold is the $35,000 to $49,000 category. Therefore, we use the break point of $35,000 as a key demarcation in examining the distribution of income of Veterans.

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[22]Prior to 2016, income was asked as an open-ended question. This format was revised to a series of income ranges in 2016 to reduce extreme outliers. However, this change precludes a detailed analysis of income in years prior to 2016.

[23]http://nationalincomelimits.vaftl.us/LegacyVAThresholds/Index?FiscalYear=2017

Results of the 2017 Survey of Enrollees showed that approximately 49 percent of the enrollees reported a household income of $35,000 or higher (Table 2-3) and an even distribution of enrollees on both sides of the $35,000 threshold. At a more granular level, the distribution of enrollees ranged between 15 and 17 percent in each reported income category (Figure 2-6). Information on income is missing for 5 percent of enrollees. Compared to 2016 enrollees, this is a small decrease in the percentage of enrollees earning $15,000 - $24,999 and a small increase in each income groups over $35,000.[24]

Table 2-3. Enrollees by income group

Income group	N	%
<$35,000	3,902,506	46.8
35,000+	4,056,193	48.6
Missing	386,729	4.6
Total	8,345,428	100.0

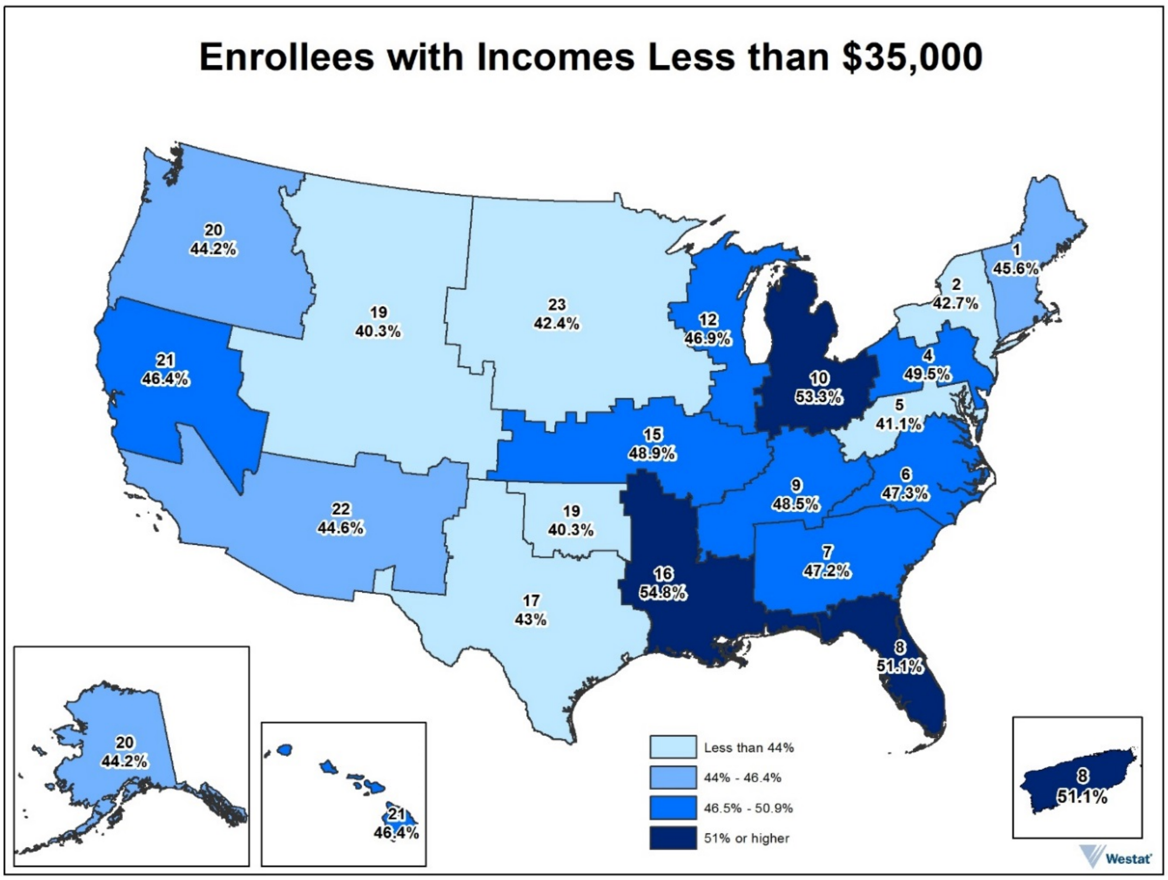
Figure 2-6. Percentage of enrollees by income

[24]Income levels cannot be trended over time prior to 2015 due to differences in question format between the 2015 and 2016 survey cycles. The 2016 Survey of Enrollees included one question about income that asks enrollees to select one of eight response options to indicate the income range that best described their total annual household income in 2015. Income was considered missing if enrollees did not select one of the response options. The 2015 survey cycle and surveys from prior years included two questions about income that asked respondents to: (1) report the amount of total household income in 2014; and (2) indicate the range that best described their income. Income was considered missing if enrollees reported neither the amount nor the range of income.

2.1.6 Income Group by VISN

Figure 2-7 shows the 2017 enrollees with income less than $35,000 by VISN. Overall, there are 3 VISNs in which 50 percent or more of enrollees reported incomes below $35,000. These include VISN 16 (55%), followed by VISN 10 (53%), and VISN 8 (51%). VISN 19 had the lowest percentage of enrollees with income less than $35,000 at 40 percent.

Figure 2-7. Enrollees with income less than $35,000 by VISN



2.1.7 Marital Status and Dependents

In 2017, married enrollees continued to represent the majority of the enrollee population. Sixty-one percent of the enrollees reported being married, followed by 15 percent who reported being divorced, 9 percent who reported never married, and 7 percent who reported being widowed (Table 2-4). Enrollees were also asked to report the number of dependents they currently have, defined as anyone who relied on the enrollee for at least half of that person's financial support. Approximately 54 percent of the enrollees reported having at least one dependent. In addition, 18 percent of enrollees have one or more dependents under 18 years of age; 46 percent of enrollees have at least one dependent ages 18 and older (not shown).

Table 2-4. Enrollees by marital status and dependents

Marital status	N	%
Married	5,084,492	60.9
Divorced	1,251,223	15.0
Widowed	563,591	6.8
Separated	181,462	2.2
Never married	752,604	9.0
Civil commitment or union	339,252	4.1
Missing	172,804	2.1
Total	8,345,428	100.0
Dependents	**N**	**%**
0	3,628,158	43.5
1 – 4	4,407,352	52.8
5 or more	111,351	1.3
Missing	198,568	2.4
Total	8,345,429	100.0

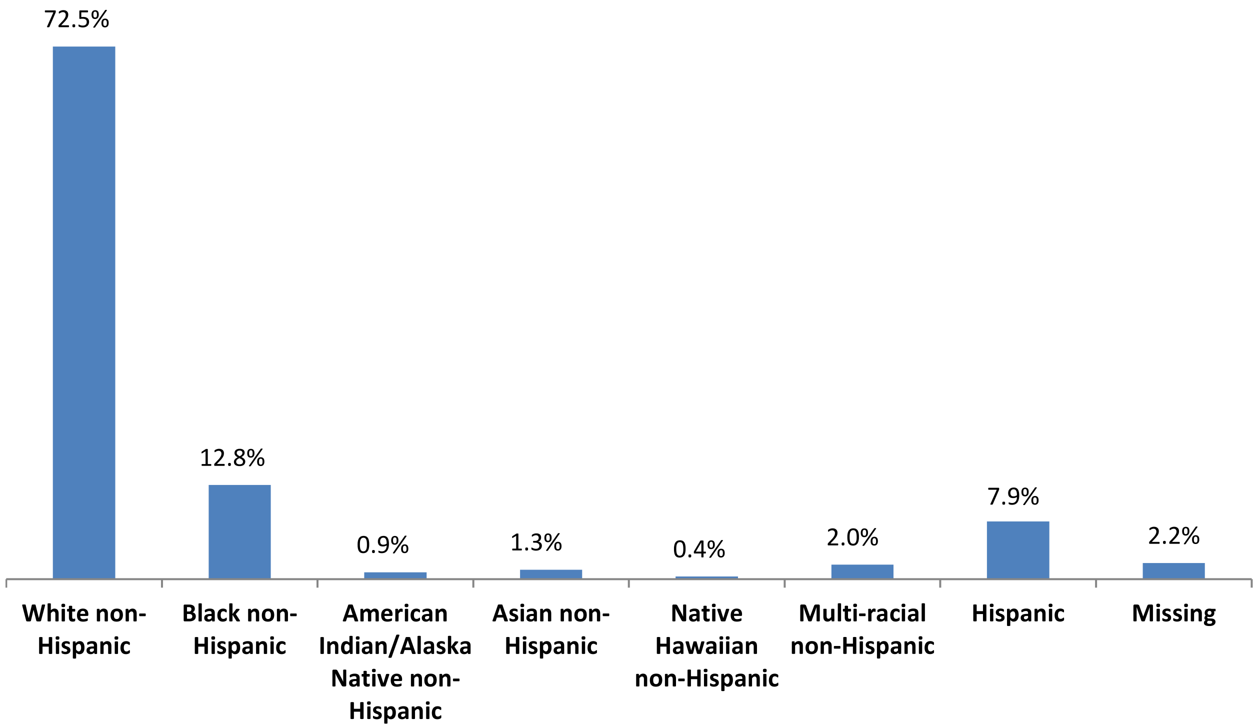
2.1.8 Ethnicity and Race

As previously stated in the demographic overview, the average enrollee is White and non-Hispanic.[25] Two questions in the survey were designed to ascertain the race and ethnicity of the enrollee. The first question asked enrollees whether enrollees identified themselves as Hispanic or Latino. Approximately 8 percent responded "Yes" to this question (not shown). The next question asked enrollees to identify their race by selecting any of the categories provided. Among these responses (not shown), 2 percent of enrollees self-identified with two or more races. Eighty percent of enrollees identified themselves as White, 14 percent identified themselves as Black, and 5 percent identified themselves as another of the available race category choices. Figure 2-8 shows the

[25] White non-Hispanic refers to someone who is non-Hispanic and White only.

mutually exclusive percentage of enrollees by race.[26] About 73 percent of enrollees were White non-Hispanic, 13 percent were Black non-Hispanic, and 8 percent were Hispanic.

Figure 2-8. Percentage of enrollees by race and ethnicity (mutually exclusive)



Note: Denominator is all enrollees. Weighted n= 8,345,428 enrollees.

The racial and ethnic mix of enrollees varied by age, with the majority of older enrollees being White and non-Hispanic, while younger enrollees are racially and ethnically more diverse. Younger enrollees, under the age of 45, are more likely to be of Hispanic or Latino ethnicity than those 45 or older. Approximately 12 percent of the younger age group described themselves as Hispanic or Latino. Additionally, enrollees who are non-Hispanic are more likely to be age 65 or older, specifically those who are White non-Hispanic. Eighty-two percent of those 65 or older described themselves as White non-Hispanic. Black non-Hispanic enrollees are more likely to be in the middle age group of 45-64, with 20 percent of that age group who described themselves as Black non-Hispanic. Table 2-5 shows the percentage of enrollees by ethnicity and race by age.

[26]Enrollees were considered to have missing race/ethnicity if they were missing race only. Enrollees who did not answer the question about ethnicity were considered to be non-Hispanic.

Table 2-5. Ethnicity and race of enrollees by age group (mutually exclusive)

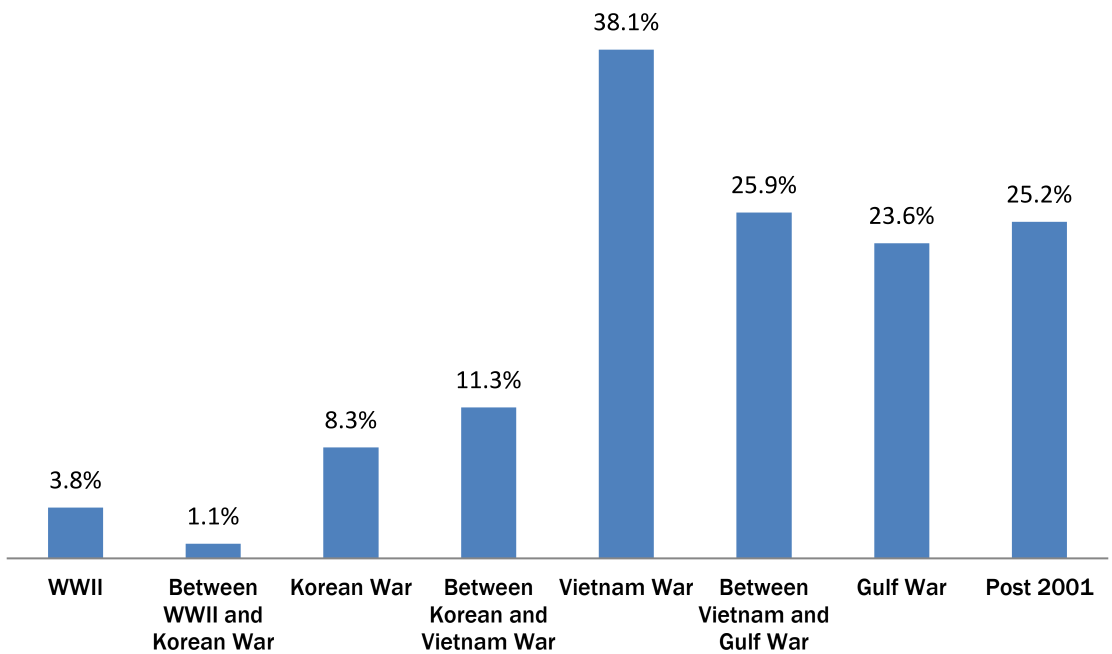
Category	<45		45-64		65+		Total
	N	%	N	%	N	%	
White non-Hispanic	1,099,526	64.0	1,632,160	63.1	3,322,648	82.2	6,054,334
Black non-Hispanic	232,941	13.6	525,900	20.3	310,158	7.7	1,068,999
American Indian/Alaska Native non-Hispanic	NA	NA	30,380	1.2	26,064	0.6	79,184
Asian non-Hispanic	49,479	2.9	30,036	1.2	28,314	0.7	107,829
Native Hawaiian non-Hispanic	NA	NA	11,991	0.5	9,083	0.2	29,485
Multi-racial non-Hispanic	57,369	3.3	63,364	2.5	44,640	1.1	165,373
Hispanic	207,027	12.1	219,532	8.5	230,740	5.7	657,299
Missing	NA	NA	72,586	2.8	70,638	1.7	182,924
Age Group Total	1,717,193		2,585,949		4,042,285		8,345,427

Note: "NA" denotes cells that do not have enough respondents to provide a reliable estimate. Percentages may not add to 100 percent due to rounding.

2.1.9 Active Duty Period of Service/Combat Exposure

Enrollees were asked to provide information on the period(s) of their active duty military service. They were asked to answer "Yes" or "No" to whether or not they served on active duty during periods such as September 2001 or later, Gulf War Era, Vietnam Era, etc. The results of the 2017 Survey of Enrollees revealed that the single largest service era component of the enrollee population (38%) served during the Vietnam War, as was true in previous survey years. Of the remaining periods of service, 26 percent served between Vietnam and the Gulf War, 24 percent served during the Gulf War Era, and 25 percent served post 2001 (Figure 2-9). It is possible for enrollees to have served in more than one period of service. Most enrollees (70%) reported just one period, followed by 18 percent who reported two and 8 percent who reported three. Less than 2 percent reported four or more.

Figure 2-9. Percentage of enrollees by period of service (not mutually exclusive)



Note: Percentages do not add to 100 percent because enrollees may have responded with multiple periods of service.

WWII (1942-1946). Between WWII and Korean War (1947-1950). Korean War (1951-1954). tween Korean and Vietnam War (1955-1964) Vietnam War (1965-1974). tween Vietnam and Gulf War (1975-1990. Gulf War (1991-2001). Post 2001 (>2001).

Not surprisingly, as time passes, there is a trend in the percentage of enrollees who served on active duty pre- and post-Vietnam. In general, the percentage of enrollees serving in the pre-Vietnam era has been decreasing, and conversely, the percentage of enrollees in post-Vietnam periods has been slightly increasing. The largest shifts occurred for enrollees from the era between Korean and Vietnam War, dropping from 20 percent in 2014 and 12 percent in 2016 to 11 percent in 2017. The post-2001 era also seems to have changed, increasing from 19 percent in 2014 to 23 percent in 2016 and 26 percent in 2017.

Combat exposure rate of the enrollees has increased over the last few years. In 2016, 47 percent of the enrollees reported that they had been involved in, or exposed to, combat during their active duty service, whereas in 2017, 48 percent reported combat exposure. It is not unexpected that more enrollees reported seeing combat as the number of separated OEF/OIF/OND Veterans enrolled in the VA health care has increased over time.

OEF/OIF/OND Enrollees. Operation Enduring Freedom (OEF) in Afghanistan took place during the period between October 2001 and December 2014. Operation Iraqi Freedom (OIF) began in March 2003 and ended in August 2010, when Operation New Dawn (OND) began. OND represents a shift from a predominantly military U.S. presence to one that is predominantly civilian. Given that enrollment of the post-2001 Veterans continues to increase resulting from the withdrawal of U.S. service members and their release from active duty, a distinct subset of that population includes the OEF/OIF/OND Veterans. Here are some interesting statistics about the 2017 OEF/OIF/OND enrollee population:

- The 2017 Survey estimates indicated that of the 2,099,993 enrollees who served post 2001, more than half (63%) have OEF/OIF/OND status.
- Approximately 16 percent of the total enrollee population served in the OEF/OIF/OND conflicts, an increase from 15 percent in 2016.

OEF/OIF/OND Enrollees

- 39 years old (average age)
- 12% are female
- 96% served in a combat zone
- 12% are Hispanic

- Twelve percent of the OEF/OIF/OND enrollee population is female, higher than the 8 percent of the total enrollee population that are female.
- Enrollees with OEF/OIF/OND status are more likely to be in the younger age group (under 45); making up 57 percent of the enrollees age 44 or under.
- While the majority (67%) of the OEF/OIF/OND enrollees are White non-Hispanic, 12 percent identified themselves as Hispanic, whereas Hispanics account for just 8 percent of the non-OEF/OIF/OND enrollee population.
- OEF/OIF/OND enrollees self-reported an unemployment rate of 8 percent, which is lower than the unemployment rate of the total enrollee population (9%).

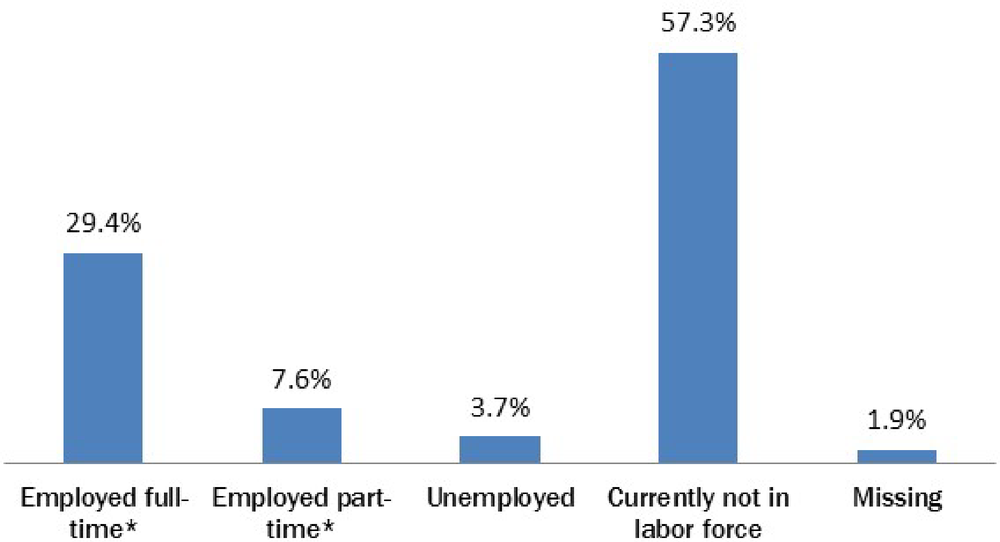
2.1.10 Employment Status

The U.S. economic and employment climates likely have a potential impact on the number of enrollees seeking health care benefits from VA, given most Americans with health insurance get coverage from their employer.[27] Employment status is calculated out of the entire enrollee population. Approximately 41 percent of the total enrollees were in the labor force in 2017 while the

[27]http://www.americanhealthpolicy.org/Content/documents/resources/ESI_CHRO_Concerns_2016.pdf

majority of enrollees (57%) were not in the labor force.[28] The employment status of those in the labor force remained mostly unchanged from 2016. Thirty-seven percent of enrollees reported being either full-time or part-time employed and 4 percent reported being unemployed, both unchanged from 2016. Figure 2-10 shows the percentage of enrollees by employment status.

Figure 2-10. Percentage of enrollees by employment status



* Includes those who are self-employed.

Note: The percent of unemployed is out of the total enrollee population, and is not reflective of the unemployment rate. Unemployment rate is the percent of only the population in the labor force, which is described in the following section.

Employment status varies across age groups. As expected, Veterans over the age of 65 are generally not in the labor force (85%). Furthermore, the younger age group (<45) is more likely to be in the labor force (79%) and employed (71%). The middle age group (45-64) is split between being in the labor force (58%) and not being in the labor force (40%). Table 2-6 shows the employment status by age.

[28]This includes enrollees who are employed full-time, part-time, and those who are unemployed, looking for work, or laid off. This excludes only those who are currently not seeking employment (i.e., retired, homemaker, student, or on disability).

Table 2-6. Employment status of enrollees by age group

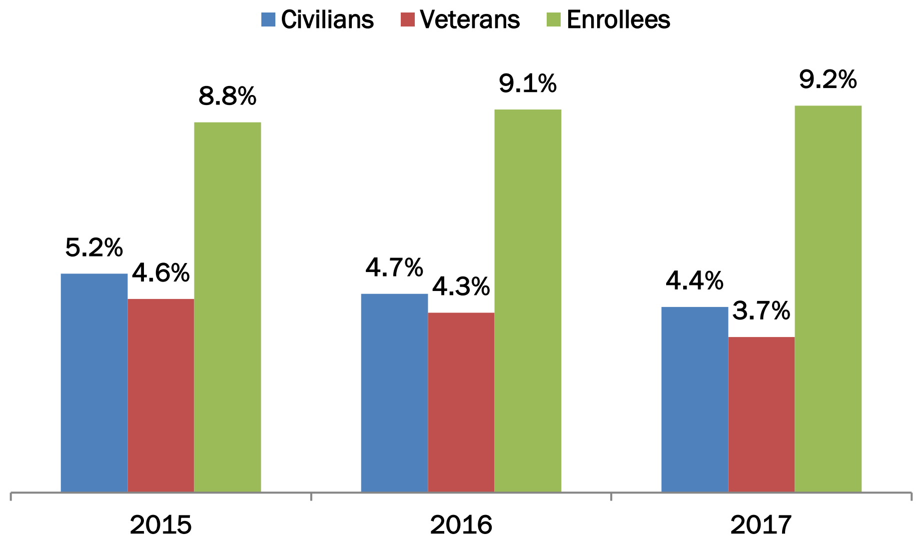
Category	<45		45–64		65+		Total
	N	%	N	%	N	%	
Employed full-time	1,090,172	63.5	1,154,623	44.6	207,196	5.1	2,451,991
Employed part-time	127,811	7.4	201,359	7.8	307,652	7.6	636,822
Unemployed	139,798	8.1	141,325	5.5	31,718	0.8	312,841
Currently not in labor force	324,096	18.9	1,039,383	40.2	3,421,181	84.6	4,784,660
Missing	35,316	2.1	49,259	1.9	74,538	1.8	159,113
Employment total	1,717,193		2,585,949		4,042,285		8,345,427

Note: Percentages may not add to 100 percent due to rounding.

Unemployment Rate. The Bureau of Labor Statistics (BLS) of the U.S. Department of Labor defines unemployment rate as the number of individuals who do not have a job but are available for work and are actively seeking it, divided by the total number of people in the labor force. One is in the labor force if they are employed or actively looking for a job. BLS data show that unemployment rates have declined starting in 2010 in both the populations of Veterans and civilians.

Figure 2-11 shows the unemployment rates by enrollees, all Veterans, and civilians over the past two years. The unemployment rate of the enrollee population has been consistently higher than the rate for all Veterans and civilians. While the unemployment rate for this group has increased between 2015 and 2017, unemployment rates for all Veterans and civilians have dropped over the years. Across the three groups, all Veterans continue to have the lowest unemployment rate at 3.7 percent in 2017.

Figure 2-11. Unemployment rates by population from 2015 to 2017



Source: Bureau of Labor Statistics, Labor Force Statistics. Accessed from http://www.bls.gov/webapps/legacy/cpsatab5.htm.

Note: 2015 and 2016 unemployment rates shown for Veterans and civilians are the average annual unemployment rates; 2017 unemployment rates are based on 9 months of available data (January-September).

Table 2-7 shows the unemployment rates for enrollees by various demographics. Unemployment rate is highest among enrollees in Priority Group 4 (28%), and those younger than 30 (19%). Only 2.1 percent of enrollees are in Priority Group 4, so while it is important to observe that this group has a relatively high unemployment rate, the absolute number of unemployed enrollees in this group is relatively small.

Table 2-7. Enrollee unemployment rates by demographics

Category	Enrollees in labor force	Unemployed enrollees	Unemployment rates
Age group			
<30	186,099	35,862	19.3
30–49	1,493,997	128,824	8.6
50–64	1,174,993	116,437	9.9
65+	546,567	31,718	5.8
Priority group			
Priority Group 1	794,136	68,830	8.7
Priority Group 2	402,467	26,807	6.7
Priority Group 3	619,003	51,427	8.3
Priority Group 4	15,499	NA	NA
Priority Group 5	621,110	109,516	17.6
Priority Group 6	275,502	NA	NA
Priority Group 7	118,662	NA	NA
Priority Group 8	555,277	28,000	5.0
Period of service[1]			
Prior to Vietnam War	128,594	7,760	6.0
Vietnam War	693,956	47,331	6.8
Between Vietnam and Gulf War	1,169,066	106,125	9.1
Gulf War	1,396,884	100,685	7.2
Post 2001	1,603,924	156,237	9.7
Race (mutually exclusive)			
White non-Hispanic	2,355,822	175,378	7.4
Black non-Hispanic	512,186	74,241	14.5
American Indian/Alaska Native non-Hispanic	39,221	NA	NA
Asian non-Hispanic	66,412	NA	NA
Native Hawaiian or Other Pacific Islander, non-Hispanic	13,429	NA	NA
Multi-Racial non-Hispanic	73,762	NA	NA
Hispanic	299,506	29,369	9.8

Table 2-7. Enrollee unemployment rates by demographics (continued)

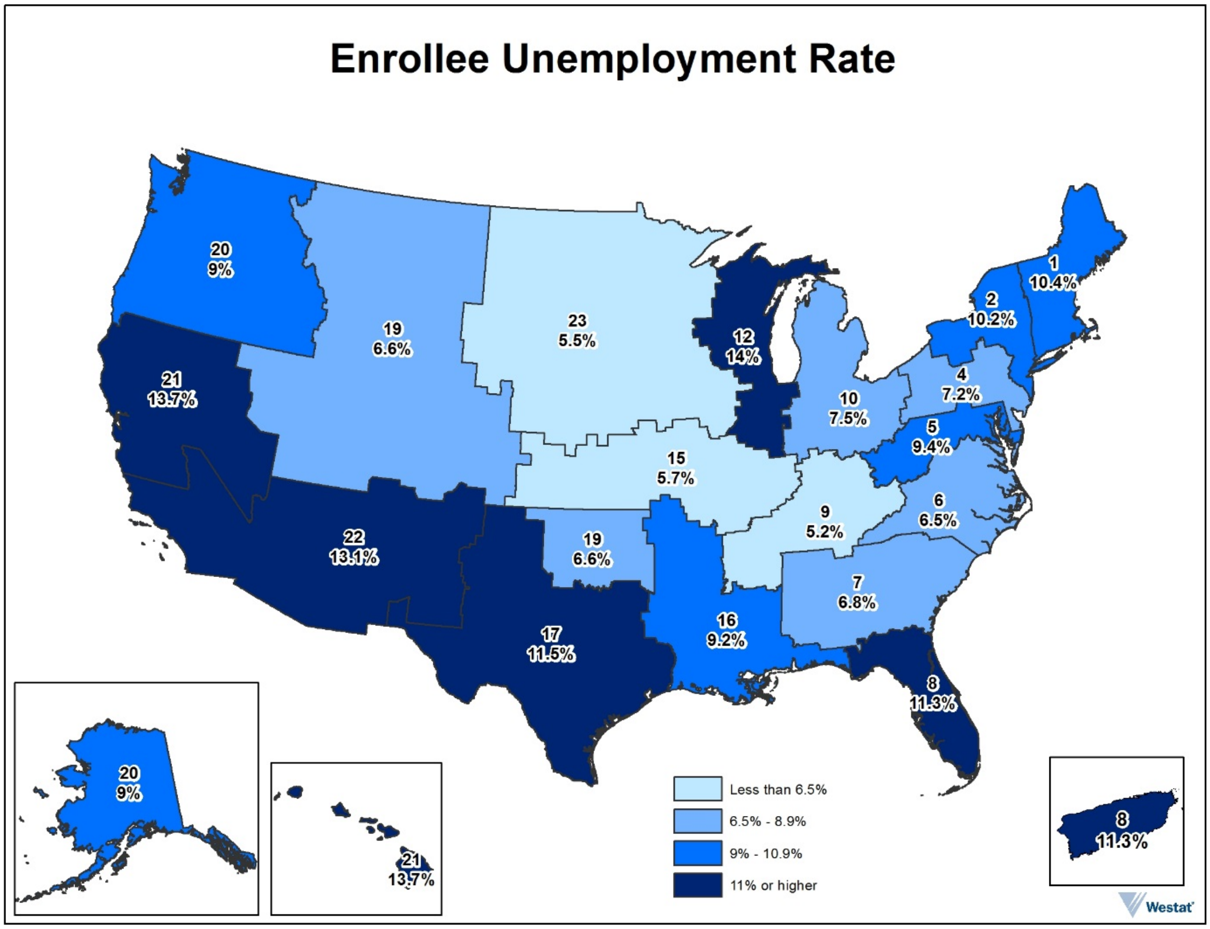
Category	Enrollees in labor force	Unemployed enrollees	Unemployment rates
Ethnicity			
Hispanic	299,506	29,396	9.8
Non-Hispanic	3,053,294	278,238	9.1
Urban/rural			
Urban	2,362,641	239,764	10.1
Rural	1,005,929	71,650	7.1
Highly rural	33,085	1,428	4.3

Note: Denominator is all enrollees. Weighted n= 8,345,428 enrollees. "NA" denotes cells that do not have enough respondents to provide a reliable estimate. [1] A relatively small segment of enrollees who served prior to the Vietnam War period reported still being in the labor force, so respondents from all Pre-Vietnam War periods of service were combined. Categories not mutually exclusive.

2.1.11 Unemployment Rates by VISN

Figure 2-12 shows the 2017 enrollee unemployment rates by VISN. While the national unemployment rate among enrollees was 9.2 percent, unemployment was substantially higher in some VISNs. VISNs 12 and 21 had the highest unemployment rates (14 %), followed by VISNs 22, 17, and 8 with unemployment rates between 11 percent and 13 percent. VISNs 9 and 23 had the lowest unemployment rates at 5 and 6 percent, respectively.

Figure 2-12. Enrollee unemployment rates by VISN



Public and Private Health Insurance Coverage 3

Veteran enrollees have varied health insurance options, ranging from many with private insurance, TRICARE, to those who are eligible for Medicare or Medicaid. Having insurance coverage, which may be a proxy for being employed, has been found to be associated with less reliance on VA health care.[29,30] This may in part be due to alternative or lower-cost care options that are available outside of VA. These alternatives to VA health care may include private insurance purchased through the marketplace or through the Medicaid expansion for Veterans who reside in a participating state. Veterans with dual or even triple eligibility could experience challenges in continuity and coordination of care. It is therefore important to understand the insurance coverage of VA enrollees and how it has changed over time. We discuss some of the insurance options available to VA enrollees below and how each interacts with VA health care.

Health Insurance Options

- TRICARE
- Medicare
- Medicaid
- Private insurance

TRICARE. Tricare is the Department of Defense's (DoD) health care program that serves active duty military and active members of the reserves and National Guard. Veterans are eligible for TRICARE if they are military retirees who have served for at least 20 years. While active duty military and their families are enrolled in TRICARE at no cost, retirees and their dependents must pay an annual premium. In 2001, enrollment was extended to retirees over age 65 with the advent of TRICARE for Life, which is wrap-around coverage for those in Medicare. TRICARE for Life pays for costs not covered by Medicare.

Medicare. Medicare is a Federal health insurance program for individuals age 65 and older and those under age 65 with certain disabilities. There are two ways to enroll in Medicare: Original Medicare and Medicare Advantage. Original Medicare is a fee-for-service program that includes Part A (hospital) and Part B (medical) coverage. Part A covers hospital stays but not doctor's care. Beneficiaries are automatically enrolled in Part A when they sign up for Medicare. Part A

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[29]Borowsky, S. J., & Cowper, D. C. (1999). Dual Use of VA and Non-VA Primary Care. *Journal of General Internal Medicine*, *14*(5), 274–280. http://doi.org/10.1046/j.1525-1497.1999.00335.x.

[30]Shen, Y., Hendricks, A., Wang, F., Gardner, J., & Kazis, L. E. (2008). The Impact of Private Insurance Coverage on Veterans' Use of VA Care: Insurance and Selection Effects. *Health Services Research*, *43*(1 Pt 1), 267–286. http://doi.org/10.1111/j.1475-6773.2007.00743.x.

beneficiaries do not pay a premium but must meet a deductible before Medicare will cover hospitalization costs. Part B is optional and requires a monthly premium and deductibles. Individuals under the age of 65 who receive disability benefits from Social Security for two years are automatically enrolled in Medicare Part A and Part B. Medicare Advantage (Part C) is a managed care option consisting of plans offered by private companies that contract with Medicare to provide Part A and Part B coverage. Prescription drug coverage is available separately under Medicare Part D. Some Medicare enrollees may purchase Medicare Supplemental Insurance, or Medigap, to cover some of the costs that Original Medicare does not cover.

Medicaid. Medicaid is a state-administered health plan for individuals and families with low incomes and limited resources. Veterans who qualify for Medicaid do not pay copayments for VA health care. Prior to the ACA, Medicaid coverage for adults was limited. However, the ACA provides states with additional funding to expand Medicaid to adults with incomes up to 138 percent of the Federal Poverty Level (FPL). This accounts for nearly half of uninsured Veterans and about one third of their family members who are eligible for Medicaid coverage under the ACA in states with the expanded coverage.[31] In most states, individuals with disabilities who receive Social Security Insurance (SSI) are automatically qualified for Medicaid coverage.

Private Insurance. Finally, private insurance is available when provided through a Veteran's employer, spouse, or other non-Federal source. About one quarter (23%) of Veteran Enrollees reported being covered through private insurance.

3.1 VA Enrollment

As in previous years, the 2017 Survey of Enrollees first asked respondents whether they were enrolled in VA health care. Despite the fact that all respondents are enrolled according to administrative records and have access to VA health care services, 4 percent indicated that they were not enrolled and another 7 percent indicated that they could not remember enrolling. (One percent of enrollees did not answer the question.) Taken together, 12 percent of enrollees indicated that they were not enrolled in VA health care. Respondents who said that they were not enrolled were more likely to report having public or private insurance coverage. This suggests that the lack of knowledge

[31] Haley, J., Kenney, G.M. (May 2012). Uninsured Veterans and Family Members: Who Are They and Where Do They Live? (Timely Analysis of Immediate Health Policy Issues). Washington, DC: Robert Wood Johnson Foundation/Urban Institute. http://www.urban.org/sites/default/files/alfresco/publication-pdfs/412577-Uninsured-Veterans-and-Family-Members-Who-Are-They-and-Where-Do-They-Live-.pdf.

about enrollment may be due to a lesser need for VA health care. For example, among respondents who said that they were not enrolled, 92 percent (not shown) reported having public or private insurance coverage compared to 79 percent (not shown) of respondents who were enrolled.

3.2 Public and Private Insurance Coverage

> **Twenty percent of enrollees reported that they were uninsured (no public or private insurance coverage)**
>
> **The percentage of uninsured enrollees remained steady in 2017, maintaining the 2 percentage point decrease from 2014**

The availability of other public or private insurance coverage is likely the most important factor related to enrollee use of VA health care services. As in previous years, the survey asked enrollees whether they are covered by various public and private insurance plans. Most enrollees (80%) reported that they had some type of public or private insurance coverage. Table 3-1 shows that just more than half (51%) of enrollees reported Medicare coverage; 7 percent reported Medicaid coverage; 20 percent reported TRICARE coverage; and 28 percent reported private insurance coverage. Among those with Medicare, 32 percent reported Medicare Part D Coverage. Since the implementation of Medicare Part D coverage in 2006, the percentage of enrollees with this type of coverage has increased.

Table 3-1. Percentage of enrollees reporting each type of insurance coverage

	N	%
Medicare[1]	4,256,512	51.0
Medicare Advantage[2]	1,345,115	31.6
Medicare Part A[2]	2,325,206	54.6
Medicare Part B[2]	2,026,687	47.6
Medigap[2]	1,019,122	23.9
Medicare Part D[2]	1,356,742	31.9
Medicaid[1]	548,917	6.6
Tricare[1]	1,648,580	19.8
Private coverage[1]	2,336,567	28.0
Private drug coverage[1]	1,925,722	23.1
No coverage[1]	1,688,123	20.2

[1] Denominator is all enrollees. Weighted n= 8,345,428 enrollees.

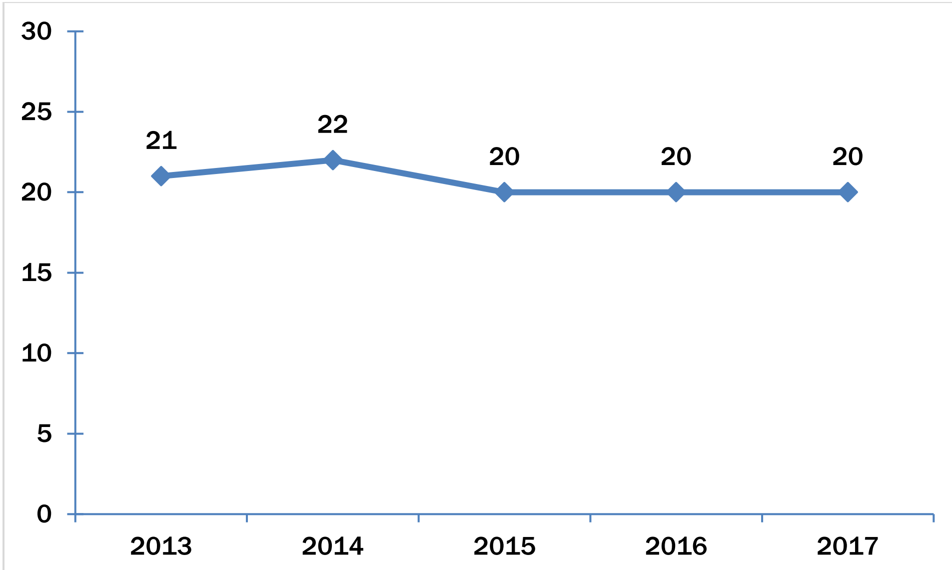
[2] Denominator is enrollees with Medicare. Weighted n= 4,256,512 enrollees.

3.2.1 Insurance Status

In this report, “uninsured” refers to the lack of any alternative insurance coverage, either public or private. Enrollees who did not report that they had Medicare, Medicaid, TRICARE, or private insurance coverage are considered to be uninsured.[32] In 2017, 20 percent of enrollees reported no public or private insurance coverage. The percentage of enrollees with no insurance coverage was examined over time to understand impacts of health care reform and policy changes on enrollee insurance status. Open enrollment for the health insurance marketplace began on October 1, 2013 for 2014, and coverage under the Medicaid expansion began on January 1, 2014. The percentage of uninsured enrollees decreased from 22 percent in 2014 to 20 percent in 2015, but has since remained stable at approximately 20 percent from 2015 to 2017 (Figure 3-1).

[32]Enrollees who did not answer the questions about insurance were considered to be uninsured as they did not report alternative insurance coverage. This includes enrollees who did not answer any of the questions or who answered “No” to some of the questions and did not answer other questions as insurance could not be determined. This was done to be consistent with the definition of no insurance coverage in previous reports by ICF International and VHA so that trends could be examined. Approximately 2 percent of enrollees did not answer the questions on insurance status. Excluding these enrollees would decrease the percent with no coverage from 20 percent to 18 percent.

Figure 3-1. Percentage of enrollees with no insurance coverage, by year



Note: Denominator is all enrollees. Weighted n= 8,345,428 enrollees.

The most recent data available from the U.S. Census Bureau indicate that Veterans are more likely to be uninsured than the U.S. population. In recent years, this disparity in the uninsured rate between the general U.S. population and Veterans has grown because the rate of uninsured has decreased among the U.S. population. In 2013, 14.5 percent of the U.S. population lacked public or private health insurance.[33] This decreased to 9.1 percent of the U.S. population in 2015, and further to 8.8 percent in 2016.[34]

Insurance Coverage by Demographic and Socioeconomic Characteristics. Insurance coverage was examined by demographic and socioeconomic characteristics of enrollees. Table 3-2 shows that enrollees in Priority Groups 4 to 6 were more likely to be uninsured than those in Priority Groups 1 to 3 or Priority Groups 7 to 8. Priority Group 5 includes Veterans with service-connected disability ratings of 0 percent whose incomes are below VA's geographically adjusted income limits, Veterans receiving VA pension benefits, and Veterans eligible for Medicaid.[35] Unisured rates are higher among younger and poorer enrollees. Compared with 37 percent of under-45 year-olds and 30 percent of 45-60 year-olds, only 6 percent of enrollees age 65 or older lack other public or private insurance coverage. This low rate of uninsurance is explained by the near universal coverage by Medicare of enrollees in this age group. (Medicare coverage and differences by age are discussed in

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[33]https://www.census.gov/content/dam/Census/library/publications/2014/demo/p60-250.pdf

[34]https://www.census.gov/content/dam/Census/library/publications/2017/demo/p60-260.pdf

[35]https://www.va.gov/healthbenefits/resources/priority_groups.asp

greater detail in the next section.) Not surprisingly, uninsured rates were higher among enrollees whose incomes were less than $35,000 per year compared to enrollees whose incomes were $35,000 or greater.

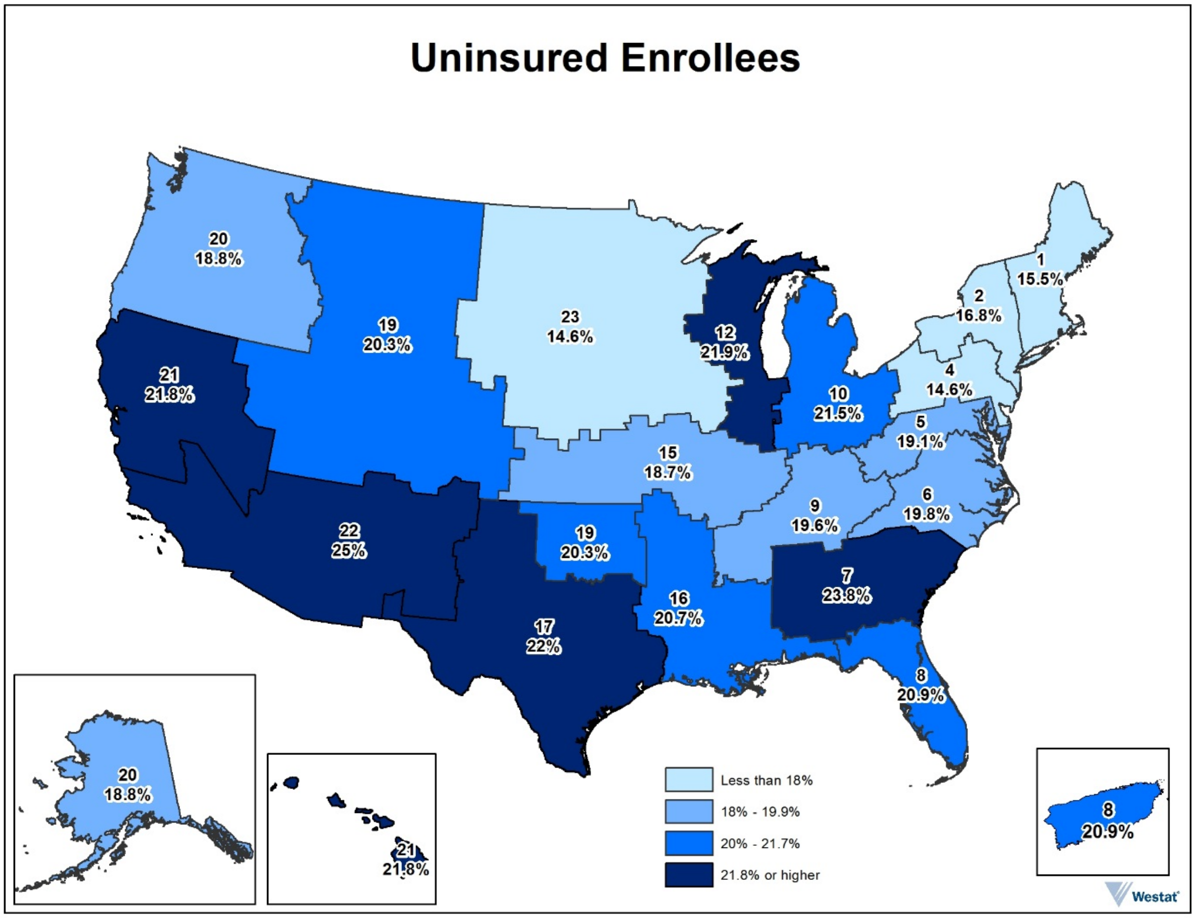
Table 3-2. Percentage of enrollees with no insurance coverage, by priority group, age, and income

	Uninsured		Total
	#	%	
Priority group			
P1-P3	767,872	19.2	3,993,805
P4-P6	672,279	27.4	2,454,604
P7-P8	247,971	13.1	1,897,020
Age			
<45	639,119	37.2	1,717,194
45-64	785,780	30.4	2,585,948
65+	263,223	6.5	4,042,286
Income			
<$35,000	1,160,809	29.7	3,902,506
$35,000+	466,228	11.5	4,056,193
Missing	61,086	15.8	386,729

Note: Denominator is all enrollees. Weighted n= 8,345,428 enrollees.

Figure 3-2 shows that there is considerable variation in the enrollee uninsurance rate by VISN. Uninsurance ranges from 15 percent in VISNs 4 and 23 to 25 percent in VISN 22.

Figure 3-2. Percentage of enrollees with no insurance coverage, by VISN



3.2.2 Medicare Coverage

Individuals ages 65 or older can choose to get their Medicare through Original Medicare, with or without Medigap, or a Medicare Advantage plan. Original Medicare is a fee-for-service program that includes Part A (hospital) and Part B (outpatient) coverage. Part A covers hospital stays but not doctor's care. Beneficiaries are automatically enrolled in Part A when they sign up for Medicare. Part A beneficiaries do not pay a premium but must meet a deductible before Medicare will cover hospitalization costs. Part B is optional and requires a monthly premium and deductibles. Individuals have the option to augment Medicare by purchasing Medigap, which is bought from private insurers to pay health care costs not covered by Medicare, such as co-payments, deductibles, and health care for travel outside the United States. Some individuals prefer to purchase Medicare Advantage, which are usually Health Management or Preferred Provider Organizations that are approved by Medicare to provide Part A and Part B coverage. Some Medicare Advantage plans may also provide Medicare Part D coverage.

The Medicare Prescription Drug, Improvement, and Modernization Act of 2003, otherwise known as the Medicare Modernization Act (MMA), expanded the Medicare program by creating the prescription medication benefit, called Part D. Prior to this law, Medicare did not offer a prescription drug benefit. Medicare Part D is a voluntary prescription drug benefit program available to anyone enrolled in both Medicare Part A and Part B. Since 2006, Medicare beneficiaries have been able to receive coverage for their prescription medications through these private plans. Medicare Part D is discussed in greater detail in Chapter 4 on Prescription Drug Coverage and Use.

The survey asked respondents whether they were enrolled in Medicare and, if so, whether they were enrolled in a Medicare Advantage plan. For those not in a Medicare Advantage plan, the survey asked about enrollment in Part A, Part B, and Medigap. Table 3-3 shows the percentage of enrollees in Medicare by demographic groups; Table 3-4 shows the specific type of Medicare coverage for those who are covered by Medicare.

Table 3-3. Percentage of enrollees with Medicare coverage, by priority group, age, and income

	Medicare		Total
	#	%	
Priority group			
P1-P3	1,683,666	42.2	3,993,805
P4-P6	1,326,082	54.0	2,454,604
P7-P8	1,246,764	65.7	1,897,020
Age			
<45	95,949	5.6	1,717,194
45-64	489,265	18.9	2,585,948
65+	3,671,297	90.8	4,042,286
Income			
Less than $10,000	2,196,248	56.3	2,196,248
$10,000 - $14,999	1,836,106	45.3	1,836,106
Missing	224,158	58.0	224,158

Note: Denominator is all enrollees. Weighted n= 8,345,428 enrollees.

Table 3-4. Percentage of enrollees with Medicare coverage

	Medicare Part A and B		Medicare Part A only		Medigap		Medicare Advantage		Total
	#	%	#	%	#	%	#	%	
Priority group									
P1-P3	831,211	49.4	157,762	9.4	358,826	21.3	445,220	26.4	1,683,666
P4-P6	524,903	39.6	146,390	11.0	246,278	18.6	462,344	34.9	1,326,082
P7-P8	579,572	46.5	66,299	5.3	414,018	33.2	437,552	35.1	1,246,764
Age									
<45	31,778	33.1	NA	NA	NA	NA	NA	NA	95,949
45-64	204,640	41.8	75,464	15.4	48,368	9.9	128,475	26.3	489,265
65+	1,699,268	46.3	277,965	7.6	961,980	26.2	1,187,240	32.3	3,671,297
Income									
<$35,000	872,406	39.7	227,309	10.3	428,860	19.5	754,294	34.3	2,196,248
$35,000+	961,844	52.4	129,400	7.0	53,2591	29.0	518,731	28.3	1,836,106
Missing	101,436	45.3	13,742	6.1	57,671	25.7	72,090	32.2	224,158

Note: "NA" denotes cells that do not have enough respondents to provide a reliable estimate. Total is enrollees with Medicare.

3.2.3 Medicaid Coverage

Table 3-5 shows that the percentage of enrollees with Medicaid coverage was related to priority group. Not surprisingly, enrollees in Priority Groups 4-6 were more likely to report Medicaid enrollment compared to those in other priority groups. Priority Group 5 includes enrollees with nonservice connected disabilities who are eligible for Medicaid. The percentage of enrollees on Medicaid was also strongly related to income. Ten percent of enrollees with incomes less than $35,000 were enrolled in Medicaid versus 3 percent of those with incomes of $35,000 or higher. Enrollees ages 65 or older were more likely than those in younger age groups to report enrollment in Medicaid. Although the majority of enrollees age 65 or older are enrolled in Medicare, some enrollees may be eligible for **both** Medicare and state Medicaid coverage. For such individuals, Medicaid helps to cover the costs of Medicare premiums and cost sharing as well as services that Medicare does not cover, such as long-term care.

Table 3-5. Percentage of enrollees with Medicaid coverage, by priority group, age, and income

	Medicaid coverage		Total
	#	%	
Priority group			
P1-P3	180,567	4.52	3,993,805
P4-P6	281,591	11.47	2,454,604
P7-P8	86,759	4.57	1,897,020
Age			
<45	82,598	4.81	1,717,194
45-64	164,988	6.38	2,585,948
65+	301,331	7.45	4,042,286
Income			
<$35,000	406,417	10.41	3,902,506
$35,000+	116,897	2.88	4,056,193
Missing	25,604	6.62	386,729

Note: Denominator is all enrollees. Weighted n= 8,345,428 enrollees.

3.2.4 TRICARE Coverage

Twenty percent of enrollees reported that they had TRICARE or TRICARE for Life coverage available to them. Table 3-6 shows that TRICARE coverage was most common among enrollees in Priority Groups 1-3. These enrollees generally have service-connected disabilities. Enrollees with higher incomes were more likely to have TRICARE coverage. Twenty-eight percent of enrollees aged 45 to 64 reported having TRICARE coverage, significantly more than the other age groups. Enrollees in the lower income bracket were also more likely (24%) to have TRICARE Coverage than those in the higher income bracket (10%).

Table 3-6. Percentage of enrollees with TRICARE coverage, by priority group, age, and income

	TRICARE		Total
	#	%	
Priority group			
P1-P3	1,259,114	31.53	3,993,805
P4-P6	196,874	8.02	2,454,604
P7-P8	192,592	10.15	1,897,020
Age			
<45	309,798	18.04	1,717,194
45-64	729,373	28.21	2,585,948
65+	609,410	15.08	4,042,286
Income			
<$35,000	384,580	9.85	3,902,506
$35,000+	1,169,977	28.84	4,056,193
Missing	94,023	24.31	386,729

Note: Denominator is all enrollees. Weighted n= 8,345,428 enrollees.

3.2.5 Private Individual or Group Health Plans

Enrollees were asked about whether they were currently covered by any other individual or group health plan through an employer, spouse or domestic partner's employer, union, or someone else. Overall, 28 percent of enrollees (not shown) reported they purchased some other private health care coverage. Similar to patterns for Medicare supplements, enrollees younger than 45 years and with higher incomes were more likely to have private insurance. Enrollees in Priority Groups 4-6 were less likely to have private insurance compared with enrollees in Priority Groups 7-8 and 1-3 (Table 3-7).

Table 3-7. Percentage of enrollees with other types of insurance coverage, by priority group, age, and income

	Other types of health coverage		Total
	#	%	
Priority group			
P1-P3	1,205,676	30.19	3,993,805
P4-P6	494,349	20.14	2,454,604
P7-P8	636,542	33.55	1,897,020
Age			
<45	720,205	41.94	1,717,194
45-64	792,290	30.64	2,585,948
65+	824,072	20.39	4,042,286
Income			
<$35,000	581,489	14.90	3,902,506
$35,000+	1,651,139	40.71	4,056,193
Missing	103,939	26.88	386,729

Note: Denominator is all enrollees. Weighted n= 8,345,428 enrollees.

3.2.6 Long-term Care Coverage

Long-term care insurance includes coverage for care in residential settings, such as nursing homes or assisted living facilities, in adult day care programs, or in the home by paid caregivers. However, the median annual cost for long-term care services in the U.S. varies by the type of service, and is generally unaffordable for most middle-class Americans. While Medicare covers care from skilled nursing facilities or home care following an inpatient hospitalization, most individuals "spend down" their private resources to pay for long-term care or rely on Medicaid to cover these costs.

The 2017 Survey of Enrollees asked respondents about whether they had a long-term care policy that covers nursing home care, assisted living, or long-term care services in the home. Overall, 8 percent of enrollees said that they had a long-term care policy, which is roughly equivalent to the 7-8 percent of the overall U.S. population estimated to have long-term care insurance.[36] Table 3-8 shows the percentage of enrollees who had a long-term policy by age group. Among enrollees less

[36]http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2014/rwjf410654

than age 65, 6 percent had a long-term care policy, 9 percent of those ages 65 to 74, 13 percent for those ages 75 to 84, and 15 percent for those ages 85 and older (Table 3-8).

Table 3-8. Percentage of enrollees with a long-term care policy

Age	Long-term care policy		Total
	#	%	
<65	244,930	5.7	4,303,142
65-74	205,617	8.7	2,350,212
75-84	140,794	13.1	1,071,990
85+	93,591	15.1	620,084

Note: Denominator is all enrollees. Weighted n= 8,345,428 enrollees.

Prescription Drug Coverage and Use 4

The VA covers prescriptions written by VA health care providers. This prescription drug benefit helps to make prescription medications accessible. Some enrollees with a service-connected disability are eligible to receive their prescription medications free of charge. According to the VA's 2017 Copayment Rates, enrollees in Priority Group 1 do not pay for medications, as was the case in the previous year. For enrollees in Priority Groups 2 to 8, medication copayment rates changed to a tiered system as of February 27, 2017. Preferred generic medications (Tier 1) have a $5 copay, non-preferred generics (Tier 2) have an $8 copay, and brand name drugs (Tier 3) have an $11 copay for each 30-day supply for treatment of nonservice-connected conditions.[37] Veterans in Priority Groups 2 to 8 are limited to $700 annual cap.[38] A list of Tier 1 medications and tier assignments for medications can be found on the VA Health Benefits web page.[39] In 2016, there was a flat $8 copay with a $960 medication copay annual cap for enrollees in Priority Groups 2-6, and a flat $9 copay for Priority Groups 7-8 (with no medication copay annual cap).[40]

VA facilities have pharmacies to fill prescriptions immediately, or requests can be made remotely by way of mail order, telephone, or online through the My Health*e*Vet website. VA will also fill prescriptions prescribed by a non-VA provider if the patient is enrolled in VA health benefits, has an assigned Primary Care Provider, supplied the VA health care provider with their medical records from their non-VA provider, and the VA health care provider agrees with the medication prescribed by the non-VA provider. VA health care providers are not obligated to prescribe a medication recommended by a non-VA provider.[41]

As in previous years, the 2017 Survey of Enrollees included questions about the availability of prescription drug coverage through private insurance or Medicare Part D, the number of prescriptions from VA pharmacies and community pharmacies used in the past 30 days, and

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[37] https://www.pbm.va.gov/PBM/Tiered_Copay/Tier_1_CO-PAY_MEDICATION_LIST.pdf

[38] https://www.va.gov/HEALTHBENEFITS/resources/publications/IB10-430_copay_rates.pdf

[39] https://www.va.gov/HEALTHBENEFITS/cost/copay_rates.asp

[40] 2016 Survey of Veteran Enrollees' Health and Use of Health Care: https://www.va.gov/HEALTHPOLICYPLANNING/SoE2016/2016_Survey_of_Veteran_Enrollees_Health_and_Health_Care.pdf

[41] http://www.va.gov/healthbenefits/access/prescriptions.asp

monthly out-of-pocket drug costs. It is important to understand the extent to which enrollees rely on VA for prescription medications. VA prescription medication reliance was calculated as the number of prescriptions from VA pharmacies in the past 30 days divided by the total number of prescriptions in the past 30 days. The measure of VA prescription medication reliance was calculated only for enrollees who had prescription medications in the past 30 days. It excludes those with no prescriptions, and those who did not answer the questions about the number of prescriptions from VA or total number of prescriptions used in the past 30 days.

4.1 Private Insurance Prescription Drug Coverage

As discussed in Section 3, about 80 percent of enrollees have health insurance coverage. Enrollees who reported having private health insurance coverage were asked if their coverage included prescription drug coverage. Table 4-1 shows that among enrollees who said they had private insurance coverage in 2017, the majority (82%) indicated their coverage included a prescription benefit. About 7 percent of enrollees did not answer the question. Out of all enrollees, about 23 percent report having a private insurance prescription benefit (not shown).

Table 4-1. Among enrollees with private insurance coverage, the percentage with coverage that includes a prescription benefit

Private insurance includes prescription drug benefit	#	%
Yes	1,925,722	82.4
No	258,973	11.1
Missing	151,873	6.5
Total	2,336,567	100.0

The appendix tables in section A.3 show that in all VISNs, the majority of enrollees who had private insurance coverage also reported prescription drug coverage, although there is some variation. Enrollees in VISN 10 reported the lowest rate of prescription drug coverage with their private insurance coverage (78%), whereas enrollees in VISN 9 had the highest rate of prescription drug coverage (89%).

4.2 Medicare Part D Coverage

The Medicare Prescription Drug, Improvement, and Modernization Act of 2003, otherwise known as the Medicare Modernization Act (MMA), expanded the federal Medicare program by creating the prescription medication benefit called Part D. Prior to this law, Medicare did not offer a prescription drug benefit. Medicare Part D is a voluntary program available to anyone enrolled in Medicare Part A and/or Part B. Although most Medicare Advantage plans contain a prescription coverage plan, Part D is available to those whose plans do not cover prescriptions. There are numerous Part D plans available depending on the recipient's specific needs, income and region. Since 2006, Medicare beneficiaries have been able to receive coverage for their prescription medications through Medicare Part D. In 2017, more than 42 million Medicare beneficiaries were enrolled in Medicare Part D.[42]

The VA prescription drug benefit is considered to be "creditable" coverage, which means that, on average, it provides benefits that meet or exceed those provided by Medicare Part D. Enrollees can have both VA prescription drug benefits and Medicare Part D coverage. However, VA prescription benefits and Medicare Part D do not work together. VA prescription drug benefits covers medications obtained through VA providers, whereas Medicare Part D coverage generally does not cover medications obtained through VA providers. Although the VA pharmacy benefit is deemed equivalent to Medicare Part D, Veterans who meet low-income assistance thresholds under Medicare Part D may reduce out-of-pocket expenses under Medicare Part D compared to using the VA pharmacy, thereby making Medicare Part D more attractive.[43]

Some Medicare Part D beneficiaries who have cost-shared past a certain threshold (in 2017, this threshold was $3,700) enter the coverage gap, colloquially called the "doughnut hole". To get out of the coverage gap, the beneficiary must pay a greater portion out-of-pocket until they reach the gap ceiling ($4,950 in 2017), after which they are covered under Part D again.[44] The ACA has been endeavoring to phase out the gap in coverage by requiring manufacturers to maintain a discount on the price of covered brand-name drugs in the coverage gap, reducing copayments for brand-name and generic drugs in the gap, and gradually lowering copayments to the level that applies before the gap. In 2017, beneficiaries paid 40% for brand-name drugs and 51% for generic drugs in the

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[42] https://www.kff.org/medicare/fact-sheet/the-medicare-prescription-drug-benefit-fact-sheet/

[43] http://www.ncbi.nlm.nih.gov/pubmed/17909387

[44] http://www.medicare.gov/part-d/costs/coverage-gap/part-d-coverage-gap.html

coverage gap. The goal is to reduce the coverage gap in Part D benefits by lowering coinsurance rates to 25% for both brand-name and generic drugs in the coverage gap by 2020.[45]

Enrollees who had Medicare coverage, whether it is through the Original Medicare Plan (with Parts A and B) or through a Medicare Advantage plan, were asked if they have Medicare Part D. Table 4-2 shows that among enrollees with Medicare coverage in 2017, 32 percent reported that they had Medicare Part D coverage.

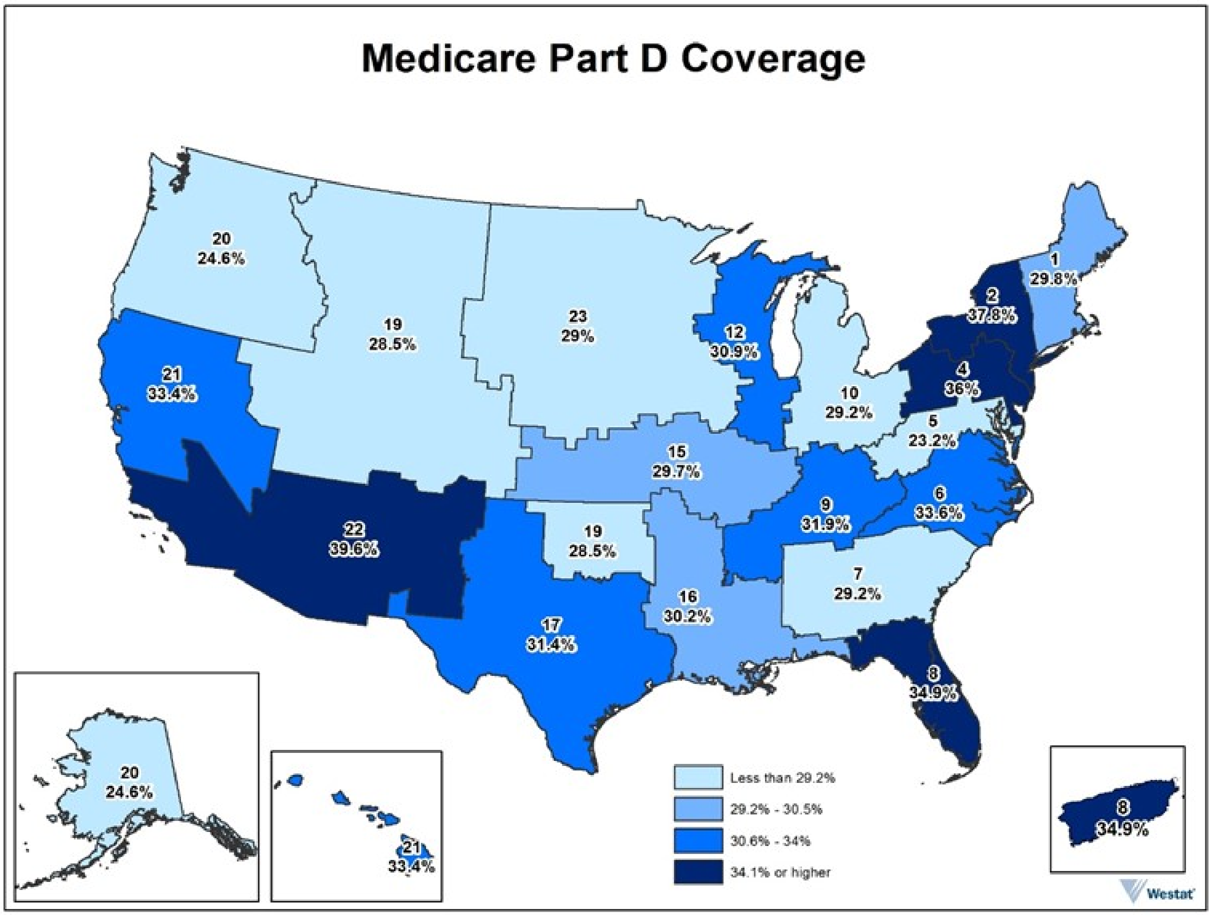
Table 4-2. Among enrollees with Medicare, the percentage with Medicare Part D coverage

Medicare Part D coverage	#	%
Yes	1,356,742	31.9
No	2,509,884	59.0
Missing	389,886	9.2
Total	4,256,512	100.0

Figure 4-1 shows that there was considerable variation in Medicare Part D coverage by VISN. Part D coverage rates ranged between 23 percent in VISN 5 and approximately 40 percent in VISN 22.

[45] https://www.medicare.gov/part-d/costs/coverage-gap/more-drug-savings-in-2020.html

Figure 4-1. Among enrollees with Medicare, the percentage with Medicare Part D coverage, by VISN



4.2.1 Medicare Part D Coverage by Socioeconomic Characteristics

Table 4-3 shows Medicare Part D coverage rates by socioeconomic and demographic characteristics of enrollees. Among enrollees with Medicare, those in Priority Groups 1 to 3 are less likely than those in Priority Groups 4 to 6 or Priority Groups 7-8 to have Medicare Part D coverage (25% versus 35% and 38%, respectively). Among enrollees who have Medicare coverage, Medicare Part D coverage is less prevalent among enrollees younger than age 45 (23%) than among those age 45 to 64 (28%) or age 65 and older (33%). As discussed in Section 3, individuals younger than 65 who have disabilities can qualify for Medicare. The rates of Medicare Part D coverage are similar across enrollees who reported making less than $35,000 in annual income and those earning more than $35,000 (33% versus 31%, respectively).

Table 4-3. Among enrollees with Medicare, the percentage with Medicare Part D coverage by priority group, age, and income

	Medicare Part D coverage		
	#	%	Total
Priority group			
P1-P3	417,372	24.8	1,683,666
P4-P6	460,906	34.8	1,326,082
P7-P8	478,464	38.4	1,246,764
Age			
<45	NA	NA	95,949
45-64	135,162	27.6	489,265
65+	1,199,386	32.7	3,671,297
Income			
<$35,000	713,834	32.5	2,196,248
$35,000+	569,204	31.0	1,836,106
Missing	73,704	32.9	224,158

Note: Weighted *n* = 4,256,512 enrollees receiving Medicare. “NA” denotes cells that do not have enough respondents to provide a reliable estimate.

4.3 Prescription Medication Use

The survey asked enrollees the number of prescription medications they had used in the last 30 days and the number they had obtained from the VA pharmacies. Table 4-4 shows that among all enrollees, 43 percent reported using five or more prescription medications in the past month. Another 18 percent reported taking 1 to 2 prescription medications in the past month and 19 percent reported taking 3 to 4 prescription medications. Only 16 percent of enrollees reported taking no prescription medications in the past month. The average (mean) number of prescription medications taken by enrollees in the past 30 days was 4.9. The mean includes those who took 0 prescription medications.

Table 4-4. Number of prescription medications used in the last 30 days

Number of prescriptions in last 30 days	#	%
0	1,325,375	15.9
1 – 2	1,503,679	18.0
3 – 4	1,622,931	19.4
5 or more	3,597,765	43.1
Missing	295,678	3.5
Total	8,345,428	100.0
Mean = 4.9		

Note: The total and the mean include enrollees who used 0 prescriptions in the last 30 days and enrollees who had missing data on the question about number of prescriptions.

Enrollees who reported taking at least one prescription medication in the past 30 days were asked about the number of prescription medications they obtained from VA pharmacies. Table 4-5 shows that among these enrollees, 30 percent obtained 5 or more of their prescription medications from VA pharmacies. Another 18 percent obtained 1 to 2 prescription medications from VA and 16 percent obtained 3 to 4 prescription medications from VA. Thirty-six percent obtained no prescription medications from VA. For those who reported using 1 or more prescription drugs in the last 30 days, enrollees obtained an average of 3.4 prescriptions from the VA. The next section explores the topic of VA prescription medication reliance in greater detail.

Table 4-5. Among enrollees who used prescription medications in the past 30 days, the number of prescription medications from VA

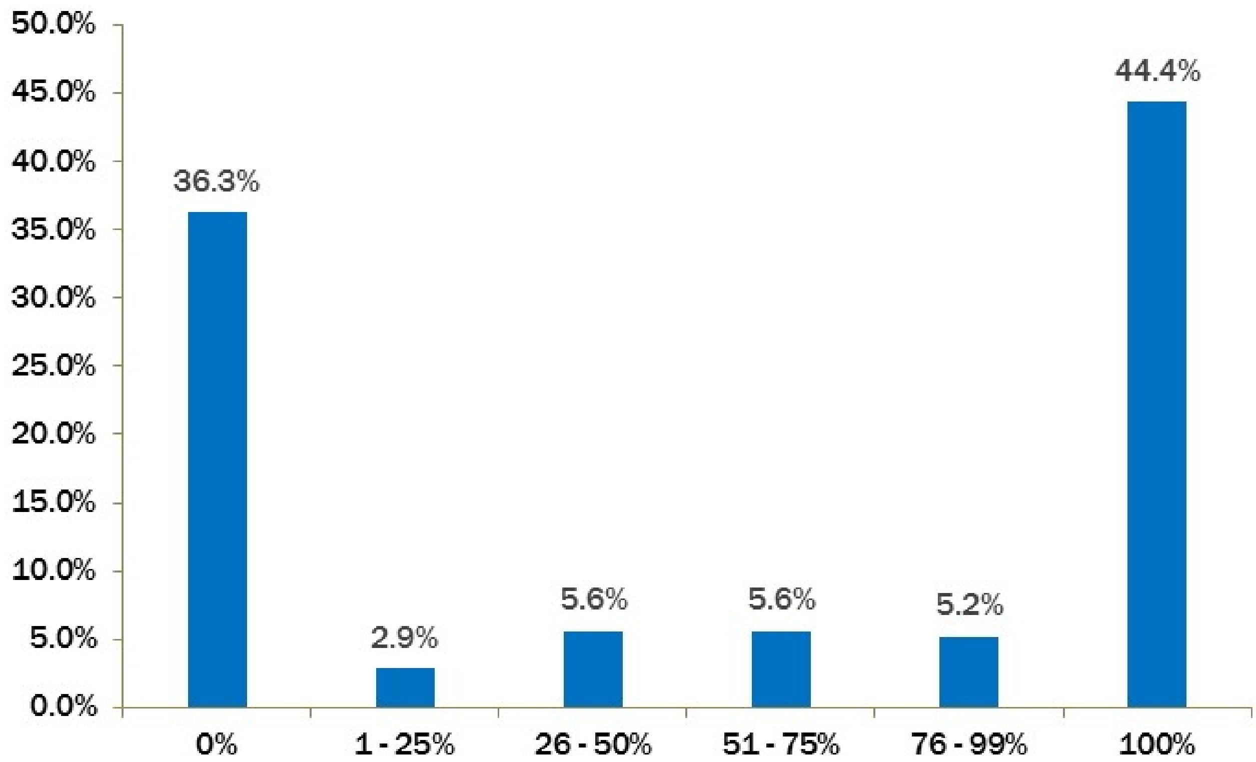
Number of prescriptions from VA in last 30 days	#	%
0	2,413,410	35.9
1 – 2	1,195,141	17.8
3 – 4	1,039,276	15.5
5 or more	2,009,274	29.9
Missing	67,275	1.0
Total	6,724,375	100.0
Mean = 3.4		

Note: The total and the mean exclude enrollees who used 0 prescriptions in the past 30 days and enrollees who had missing data on the question about number of prescriptions.

4.4 VA Prescription Medication Use

To better understand the reliance on the VA for prescription medications, VA prescription drug reliance was calculated as the number of prescription medications obtained from VA in the past 30 days divided by the total number of prescriptions in the past 30 days. The measure of VA prescription drug reliance is calculated only for enrollees who used prescription medications in the past 30 days. Figure 4-2 shows a bimodal distribution of VA prescription medication reliance. That is, enrollees tend to obtain either all of their prescription medications from VA or none of their prescription medications from VA, more than being partially reliant on both. For example, 44 percent of enrollees reported being entirely reliant on the VA for their prescription medications in the past 30 days. Another 36 percent of enrollees obtained none of their prescription medications from VA. About 19 percent of enrollees can be described as "dual" users, obtaining some of their prescription medications from VA pharmacies and some from outside pharmacies.

Figure 4-2. VA prescription medication reliance, 2017



Note: Weighted *n* = 6,657,100 enrollees who used prescription medication in the past 30 days and had non-missing data on both number of prescriptions from VA and outside sources.

Cigarette Smoking 5

Despite the steady decrease in smoking prevalence over the years, cigarette smoking remains an important health measure in assessing the health of VA enrollees. While smoking rates among the Veteran population tend to be similar to that of the general population,[46] smoking is nevertheless a significant health problem for both Veterans and nonveterans. The Centers for Disease Control and Prevention (CDC) estimates cigarette smoking to cause approximately one in five deaths each year in the U.S., and remains the leading preventable cause of death in the U.S.[47] Although most young smokers start smoking prior to age 18, many in the military begin during their period of service.[48,49] VA recognizes the importance in providing support to enrollees who wish to quit smoking and offers several services such as smoking cessation medication, counseling, a smoking Quit VET quitline, and text messages through SmokefreeVET. The Survey of Enrollees serves as an important source of data on the prevalence of smoking among the enrollee population.

5.1 Cigarette Smoking Status Overview

Enrollees were asked a series of questions about their smoking habits in the 2017 Survey. As in 2016, the questions about cigarette smoking are modeled after the Behavioral Risk Factor Surveillance Survey (BRFSS), a national health survey conducted by CDC.[50] Enrollees were first asked whether they smoked at least 100 cigarettes in their lifetime. Enrollees who indicated that they had not smoked 100 cigarettes in their lifetime were not asked any further questions about smoking. Enrollees who indicated that they had smoked at least 100 cigarettes were asked three additional questions about their smoking habits. Specifically, they were asked whether they currently smoked every day, some days, or not at all. Those who indicated that they smoked at least some days were considered to be current smokers. Current smokers were asked about any quit attempts in the past

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[46] http://www.publichealth.va.gov/smoking/professionals/tobacco-use.asp

[47] http://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/

[48] http://www.publichealth.va.gov/smoking/about-tobacco/index.asp

[49] http://uthscsa.edu/hscnews/pdf/IOMReport_CombatingTobaccoUseinMilitaryandVeteranPopulations.pdf

[50] http://www.cdc.gov/brfss/

12 months.[51] Those who were not current smokers were asked about the length of time since they last smoked regularly.

Based on their responses to the series of questions, enrollees were classified into six groups: (1) never smokers, (2) ever smokers, (3) current smokers, (4) recent unsuccessful quitters, (5) former smokers, and (6) recent successful quitters. Figure 5-1 depicts the stratification of enrollees into these six groups.

Have you smoked at least 100 cigarettes in your life?

1. Enrollees who answer "No" are **"never smokers"**

2. Enrollees who answer "Yes" are **"ever smokers"**

Of "ever smokers": *Do you now smoke cigarettes every day, some days, or not at all?*

3. Enrollees who answer "every day" or "some days" are **"current smokers"**

4. Enrollees who answer "not at all" are **"former smokers"**

Of "current smokers": *During the past 12 months, have you stopped smoking for more than a day because you were trying to quit smoking?*

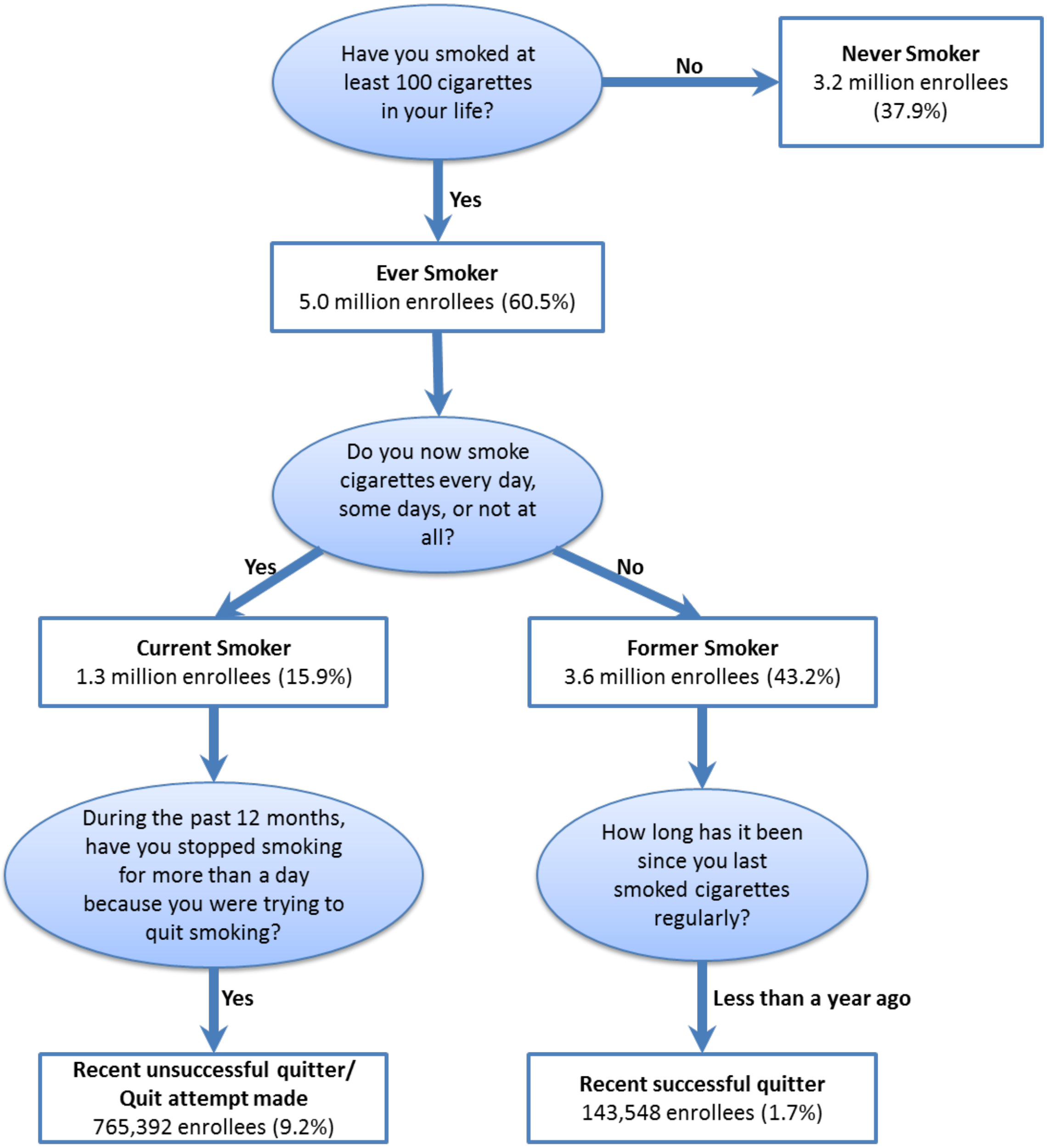
5. Enrollees who answer "Yes" are **"recent unsuccessful quitters"**

Of "former smokers": *How long has it been since you last smoked cigarettes regularly?*

6. Enrollees who answer "Less than a year ago" are **"recent successful quitters"**

[51] In the 2010-2015 survey cycles, all ever smokers were asked the question about recently quitting ("During the past 12 months, have you stopped smoking for more than one day because you were trying to quit smoking?"). In 2016-2017, only current smokers were asked this question, which translates to the percentage of current smokers who made a recent quit attempt, or are "unsuccessful quitters."

Figure 5-1. Smoker status classification



Note: Denominator is all enrollees, excluding missing respondents.

In 2017, 61 percent of enrollees were classified as ever smokers. Using all enrollees as the denominator, current smokers make up 16 percent of the total enrollee population, which is just slightly higher than the percent current smoking rate of adults in the U.S. over the age of 18. The prevalence of current smoking has declined among VA enrollees as it has among the overall adult population in the U.S., from 20 percent in 2011 to 16 percent in 2017.[52]

Most former smokers, 67 percent (not shown), reported successfully quitting smoking 10 years ago or more, and 9 percent of former smokers last smoked 1 to 4 years ago. Only 4 percent of former smokers, or 2 percent of the enrollee population, reported having successfully quit smoking in the recent past 12 months. The proportion of those who had recently made a quit attempt is much higher in current smokers. Fifty-two percent of current smokers, or 8 percent of the enrollee population, had made a recent quit attempt but were unsuccessful.

Table 5-1 shows smoking status over the past 5 survey cycles in which the questions about smoking were asked. (The 2013 survey did not include questions about smoking.) The results from prior survey years show a steady decrease in the percentage of ever smokers, a decrease in current smokers, and an increase in the percentage of enrollees who have never smoked. Results from the 2017 survey generally hold to the six year trends, with decreases in ever smokers, and increase in never smokers.

There are notable differences in smoking across different priority groups, age groups, and income groups (Table 5-2). Enrollees under 45 years of age and enrollees who earn more than $35,000 per year are less likely to have ever smoked than their older and poorer counterparts. There are some notable but more nuanced differences in smoking habits across priority groups. Similar to findings from the 2016 Survey of Enrollees data, Priority Groups 7-8, those who are least affected by service-related conditions, have the lowest percentage of current smokers (10% of all enrollees in Priority Groups 7-8, compared with 16% in Priority Groups 1-3 and 21% in Priority Groups 4-6). Priority Groups 7-8 also has the highest percentage of former smokers (49% of all enrollees).

[52] Centers for Disease Control and Prevention. Current Cigarette Smoking Among Adults—United States, 2005–2015. Morbidity and Mortality Weekly Report 2016;65(44):1205–1211; https://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm

Table 5-1. Enrollee smoking status, by year

Smoking status	2012	2014	2015	2016	2017
Never smoked	**2,683,958**	**3,092,288**	**3,086,199**	**3,194,692**	**3,164,520**
% Enrollee population	33.5%	36.4%	36.6%	38.0%	37.9%
Ever smokers	**5,329,350**	**5,394,677**	**5,223,149**	**5,067,294**	**5,049,630**
% Enrollee population	66.5%	63.6%	61.9%	60.3%	60.5%
Current smokers	**1,525,628**	**1,521,919**	**1,415,952**	**1,252,816**	**1,326,435**
% Ever smoker population	28.6%	28.2%	27.1%	24.7%	26.3%
% Enrollee population	19.0%	17.9%	16.8%	14.9%	15.9%
Recent unsuccessful quitters	–	–	–	**720,587**	**772,615**
% Current smoker population	–	–	–	57.5%	58.3%
% Enrollee population	–	–	–	8.6%	9.3%
Former smokers	**3,721,315**	**3,765,995**	**3,680,338**	**3,736,691**	**3,603,294**
% Ever smoker population	69.8%	69.8%	70.5%	73.7%	71.4%
% Enrollee population	46.4%	44.4%	43.6%	44.5%	43.2%
Recent successful quitters	–	–	–	**145,991**	**143,548**
% Former smokers	–	–	–	3.9%	4.0%
% Enrollee population	–	–	–	1.7%	1.7%
Enrollee population	**8,013,308**	**8,486,965**	**8,442,380**	**8,401,553**	**8,345,428**

Table 5-2. Enrollee smoking status, by priority group, age, and income

	Priority group			Age group			Income group	
	1-3	4-6	7-8	<45	45-64	65+	<$35,000	$35,000+
Never smoked	**1,621,711**	**825,675**	**717,134**	**854,226**	**1,077,578**	**1,232,716**	**1,249,498**	**1,763,351**
% Enrollee population	40.6%	33.6%	37.8%	49.7%	41.7%	30.5%	32.0%	43.5%
Ever smokers	**2,322,700**	**1,578,864**	**1,148,067**	**846,763**	**1,478,483**	**2,724,383**	**2,583,851**	**2,259,480**
% Enrollee population	58.2%	64.3%	60.5%	49.3%	57.2%	67.4%	66.2%	55.7%
Current smokers	**618,710**	**512,286**	**195,439**	**365,307**	**569,189**	**391,939**	**824,474**	**462,099**
% Ever smokers	26.6%	32.4%	17.0%	43.1%	38.5%	14.4%	31.9%	20.5%
% Enrollee population	15.5%	20.9%	10.3%	21.3%	22.0%	9.7%	21.1%	11.4%
Recent unsuccessful quitters	**381,763**	**281,514**	**102,114**	**262,031**	**309,731**	**193,629**	**472,322**	**272,143**
% Current smokers	61.7%	55.0%	52.2%	71.7%	54.4%	49.4%	57.3%	58.9%
% Enrollee population	9.6%	11.5%	5.4%	15.3%	12.0%	4.8%	12.1%	6.7%
Former smokers	**1,661,112**	**1,019,729**	**922,454**	**394,078**	**751,616**	**2,042,417**	**1,685,308**	**1,755,838**
% Ever smokers	71.5%	64.6%	80.3%	46.5%	50.8%	75.0%	65.2%	77.7%
% Enrollee population	41.6%	41.5%	48.6%	22.9%	29.1%	50.5%	43.2%	43.3%
Recent successful quitters	**74,856**	**52,767**	**15,925**	**56,417**	**50,328**	**36,803**	**86,508**	**49,805**
% Former smokers	4.5%	5.2%	1.7%	14.3%	6.7%	1.8%	5.1%	2.8%
% Enrollee population	1.9%	2.1%	0.8%	3.3%	1.9%	0.9%	2.2%	1.2%
Enrollee population	**3,993,805**	**2,454,604**	**1,897,020**	**1,717,194**	**2,585,948**	**4,042,286**	**3,902,506**	**4,056,193**

Note: Missing income group not shown.

When comparing current smoker status among VA enrollees by specific demographic characteristics, notable differences across groups emerged (Table 5-3). Enrollees who are uninsured and unemployed were more likely to be current smokers than their respective counterparts. Across all racial and ethnic groups, Black Non-Hispanics, American Indian/Alaska Native Non-Hispanics, Native Hawaiian Non-Hispanics, and Multi-Racial Non-Hispanics were most likely to be current smokers. In terms of health status, enrollees who reported having fair or poor health and those who were enrolled in the VA health system were more likely to be current smokers than those in good health and those who did not access the VA health system.

Table 5-3. Current smoker status, by special populations

	Current smoker		Total enrollees
	N	%	N
Gender			
Female	114,718	16.9	680,005
Male	1,211,716	15.8	7,660,262
Race and ethnicity			
White Non-Hispanic	894,026	14.8	6,054,334
Black Non-Hispanic	231,126	21.6	1,068,999
American Indian/Alaska Native Non-Hispanic	23,190	29.3	79,185
Asian Non-Hispanic	18,967	17.6	107,830
Native Hawaiian Non-Hispanic	NA	NA	29,485
Multi-Racial Non-Hispanic	34,444	20.8	165,374
Hispanic	98,902	15.0	657,299
Missing	19,605	10.7	182,924
Insurance status			
Insured	879,474	13.2	6,657,306
Not insured	446,961	26.5	1,688,123
OEF/OIF/OND status			
Yes	256,450	18.8	1,365,456
No	1,069,985	15.3	6,979,972
Health status			
Good/Very good/Excellent	815,778	13.1	6,242,682
Fair/Poor	432,085	21.3	2,096,831

Table 5-3. Current smoker status, by special populations (continued)

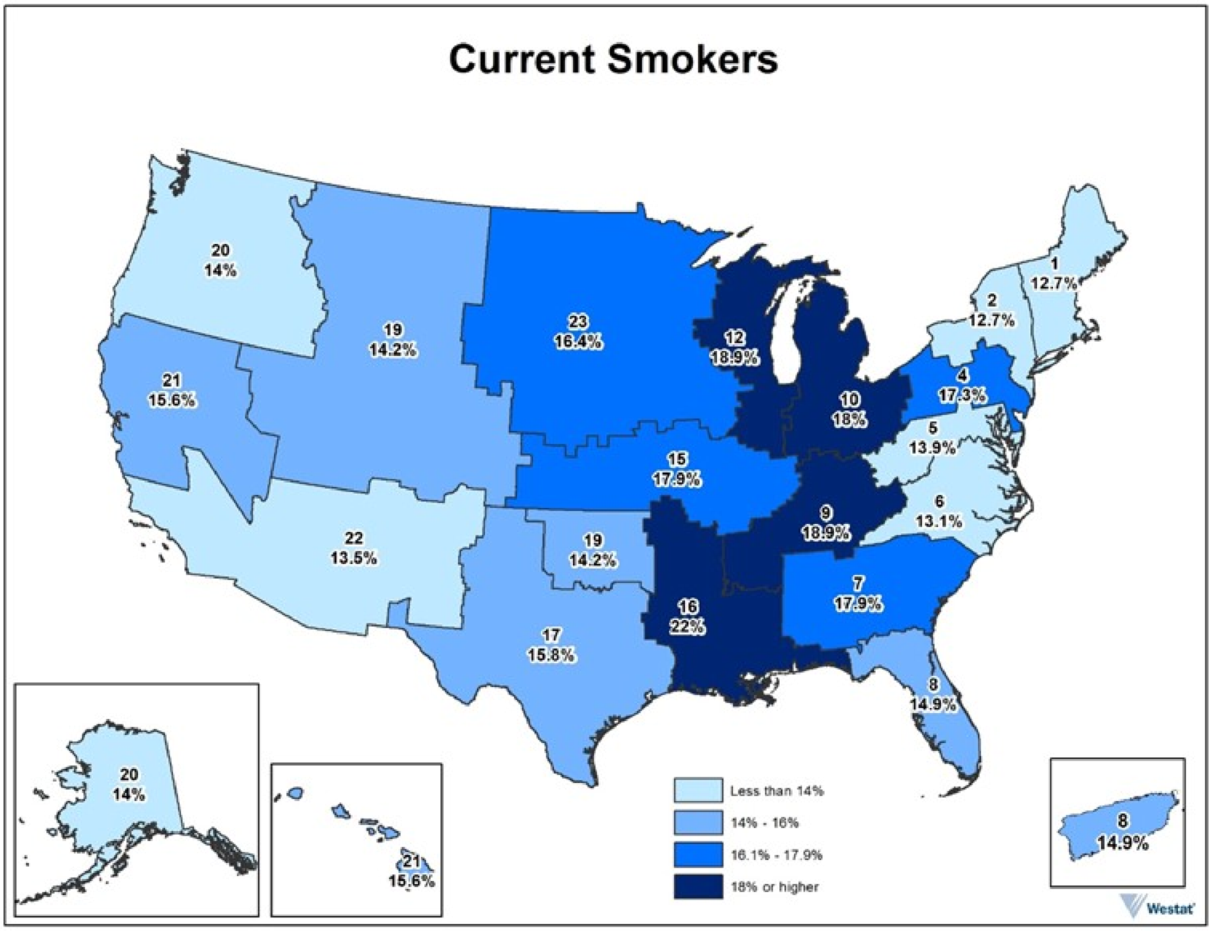
	Current smoker		Total enrollees
	N	%	N
Employment status			
Employed, full-time or part-time	475,761	15.5	3,078,166
Unemployed	84,377	27.5	306,932
Recent patient status (used VA within the past year)			
VA patient	1,007,244	17.5	5,765,774
Not a VA patient	319,191	12.4	2,579,654

Note: Denominator is all enrollees. Weighted *n* = 8,345,428 enrollees. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

5.1.1 Cigarette Smoking Status by VISN

Figure 5-2 shows the percentage of total enrollees who are current smokers by VISN. The percentages of current smokers range from 13 percent (VISN 1 and 2) to 22 percent (VISN 16) of the enrollee population. The percentage of current smokers is less than 15 percent (the overall national average of current smokers) of the enrollee population in 10 out of the 18 VISNs.

Figure 5-2. Percentage of enrollees who are current smokers, by VISN



Health Status 6

Self-reported health status is another important determinant of enrollees' use of VA health care services. Previous research indicates that Veterans who use the VA for all of their health care are more likely to be in poor health than Veterans who use the VA for only some or none of their health care.[53] As in previous years, the 2017 Survey of Enrollees gathered information about enrollees' perceived health status and functional limitations. Health status was assessed with a question that asked enrollees to rate their health relative to other people their own age. Functional limitations were assessed with a series of questions about the level of difficulty they experienced with Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs). These health status variables are standard measures in socioeconomic and health interview surveys that are used to predict potential health care needs.

6.1 Perceived Health Status

Enrollees rated their current health status relative to other people their own age as "excellent," "very good," "good," "fair," or "poor." Figure 6-1 displays the last 5 years of the relative health status of enrollees after categorization into two broader groups: (1) those who reported that their health was "excellent," "very good," or "good" and (2) those who reported that their health was "fair" or "poor." Since 2013, the proportion of enrollees reporting "excellent," "very good," or "good" health increased by about seven percentage points, and the proportion reporting "fair" or "poor" health decreased by about 7 percentage points. Similar to 2016, approximately three quarters of enrollees reported that their health care was at least "good."

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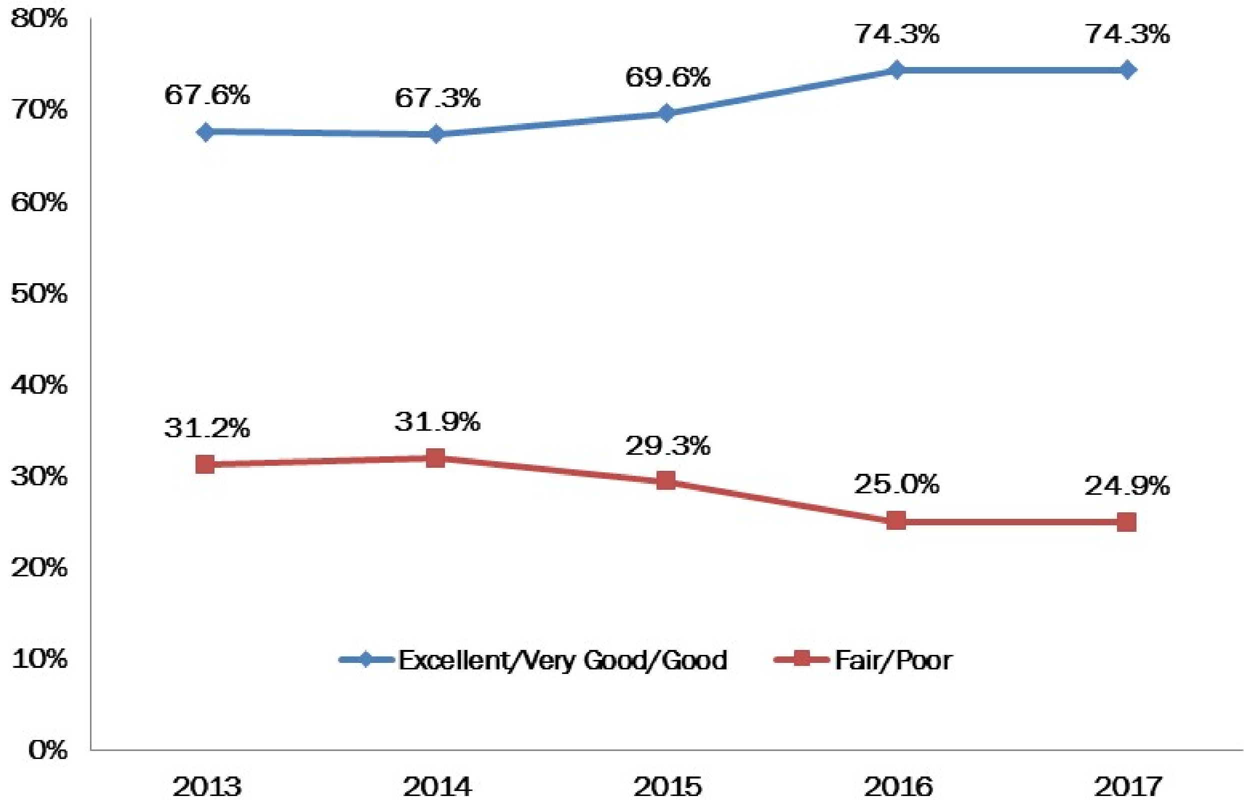
[53]Nelson, K. M., Starkebaum, G. A., and Reiber, G. E. (2007). Veterans using and uninsured veterans not using Veterans Affairs (VA) health care. Public Health Reports, 122(1), 93-100. http://journals.sagepub.com/doi/abs/10.1177/003335490712200113

Figure 6-1. Perceived health status of enrollees grouped, by year



Note: Denominator is all enrollees. Weighted *n* = 8,345,428 enrollees. Percentages of enrollees with excellent/Very good/Good health and fair/poor health do not total to 100 because of missing data, which is not shown.

Table 6-1 shows responses to the health status question disaggregated by each of the response choices. Over the past 5 years, the percentage of enrollees that reported "very good" and "good" health increased, while the percentage reporting "fair" or "poor" health decreased. The proportion of enrollees that reported "very good" health increased from 26 percent in 2013 to 29 percent in 2017 and the proportion that reported "good" health increased from 31 percent in 2013 to 34 percent in 2017. Likewise, the percentage that reported "poor" or "fair" health respectively decreased from 10 percent to 6 percent and from 21 percent in to 19 percent across these years.

Table 6-1. Perceived health status of enrollees, by year

	2013		2014		2015		2016		2017	
	N	%	N	%	N	%	N	%	N	%
Excellent	914,154	11.0	897,450	10.6	761,544	9.0	912,180	10.9	930,222	11.1
Very good	2,126,544	25.6	2,106,452	24.8	2,222,432	26.4	2,482,320	29.5	2,395,655	28.7
Good	2,574,314	31.0	2,711,052	31.9	2,893,377	34.3	2,848,183	33.9	2,874,628	34.4
Fair	1,759,815	21.2	1,880,200	22.2	1,833,904	21.8	1,604,522	19.1	1,576,206	18.9
Poor	831,083	10.0	830,041	9.8	639,263	7.6	492,308	5.9	504,783	6.0
Missing	98,047	1.2	61,771	0.7	79,372	0.9	62,040	0.7	63,934	0.8
Total	8,303,957	100.0	8,486,966	100.0	8,429,892	100.0	8,401,553	100.0	8,345,428	100.0

6.1.1 Perceived Health Status by Priority, Age, and Income

Table 6-2 shows health status by enrollee socioeconomic characteristics. While the majority of enrollees in general reported being in “good” health, those in Priority Groups 1-3 were less likely to perceive themselves in “excellent,” “very good,” or “good” health compared to the two other lower priority groups. Enrollees under age 45, on average, reported the best perceived health status compared to other age groups, with 78 percent of enrollees in this group reporting “excellent,” “very good,” or “good” health. Enrollees earning less than $35,000 reported a “fair” or “poor” health status at a higher rate compared to higher earning enrollees.

6.1.2 Perceived Health Status by VISN

Figure 6-2 shows that there was little variation in perceived health status by VISN. In all VISNs, the majority of enrollees reported being in “good,” “very good,” or “excellent” health. These percentages ranged from 68 percent in VISN 16, to 80 percent in VISN 12.

6.2 Functional Limitations

As in the previous year, the 2017 Survey of Enrollees asked enrollees about their level of difficulty with functional tasks, including Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs). ADLs represent the fundamental functions of self-care and IADLs represent tasks necessary for independent functioning as a member of a community. Enrollees were asked how much assistance they needed to conduct the following ADLs: bathing, eating, transferring (i.e., getting in or out of bed or a chair), dressing, walking around the house, and using the toilet. They were also asked how much help they needed to conduct the following IADLs: preparing meals, managing money, doing light housework, using the telephone, taking medications properly, getting to places in the community, scheduling medical services, and driving or using public transportation. Having difficulty with ADLs or IADLs means the enrollee requires some, or was completely dependent on, assistance of another person or special equipment to perform daily activities. The tasks requiring, at minimum, some help were tallied for each enrollee to create a disability index. The disability index has a value of 0 for enrollees reporting no ADL or IADL limitations. The disability index has a value of 1 for enrollees reporting one or more IADLs but no ADL limitations. This was referred to as having a “low level disability.” The disability index was coded 2 for enrollees who have 1 ADL, 3 for enrollees who have 2 ADLs, and so forth.

Table 6-2. Perceived health status of enrollees, by priority, age, and income

	Excellent/Very good/Good		Fair/Poor		Missing		Total
	N	%	N	%	N	%	
Priority group							
P1-P3	2,810,920	70.4	1,153,777	28.9	29,107	0.7	3,993,805
P4-P6	1,842,002	75.0	590,860	24.1	21,741	0.9	2,454,604
P7-P8	1,547,582	81.6	336,351	17.7	13,086	0.7	1,897,019
Age							
<45	1,339,942	78.0	373,858	21.8	NA	NA	1,717,194
45-64	1,852,253	71.6	714,582	27.6	19,113	0.7	2,585,948
65+	3,008,310	74.4	992,548	24.6	41,427	1.0	4,042,286
Income							
<$35,000	2,695,262	69.1	1,173,318	30.1	33,926	0.9	3,902,506
$35,000+	3,233,900	79.7	809,600	20.0	12,694	0.3	4,056,193
Unknown	271,343	70.2	98,071	25.4	17,315	4.5	386,729

Note: Denominator is all enrollees. Weighted *n* = 8,345,428 enrollees. "NA" denotes cells that do not have enough respondents to provide a reliable estimate. Percentages may not add to 100 percent due to rounding.

Figure 6-2. Perceived health status of enrollees, by VISN

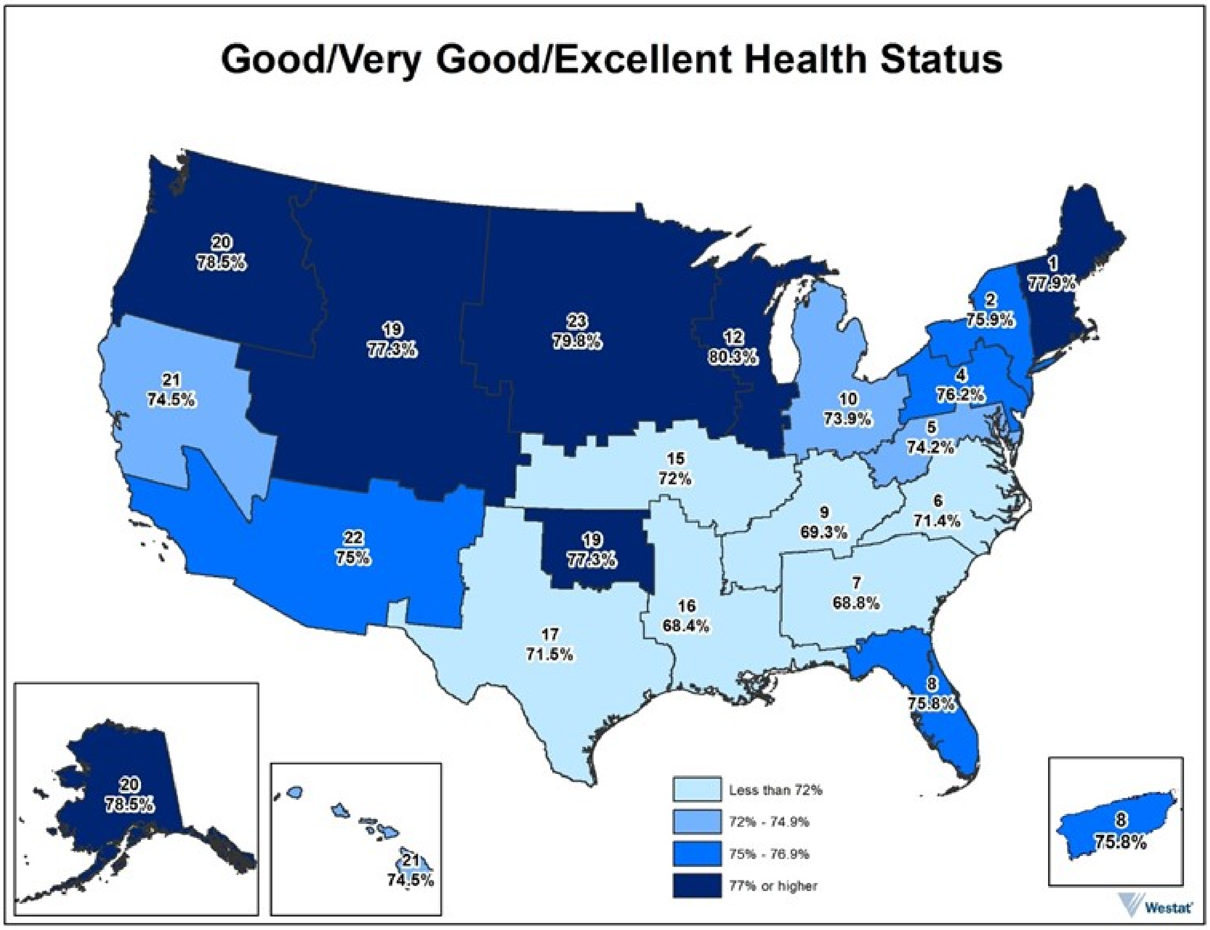


Table 6-3 shows the percentage of enrollees at each level of the disability index. As in 2016, 88 percent of enrollees have no disability or have a low-level disability. The rate of enrollees with disabilities remained the same as 2016. The proportion of enrollees with 1 or 2 disabilities remained at 8 percent and the proportion of enrollees with 3, 4, or 5 ADL disabilities was approximately 4 percent in both 2016 and 2017.[54]

[54]ADL and IADL scores were not compared with years prior to 2016 due to differences in questions. Three additional IADLs were added to the 2016 Survey of Enrollees: "Getting to places in the community," "Scheduling medical services," and "Driving or using public transportation."

Table 6-3. Percentage of enrollees with ADL and IADL disabilities

Disability index	Description	2016		2017	
		N	%	N	%
0	No ADL or IADL	5,662,615	67.4	5,472,325	65.6
1	IADL but no ADL	1,756,161	20.9	1,856,018	22.2
0-1	No or low level disability	7,418,776	88.3	7,328,343	87.8
2	One ADL disability	419,637	5.0	471,680	5.7
3	Two ADL disabilities	225,357	2.7	202,982	2.4
2-3	1 or 2 ADL disabilities	644,994	7.7	674,662	8.1
4	Three ADL disabilities	126,248	1.5	122,548	1.5
5	Four ADL disabilities	102,477	1.2	104,636	1.3
6	Five ADL disabilities	109,057	1.3	115,240	1.4
4-6	3, 4, or 5 ADL disabilities	337,782	4.0	342,424	4.1
	Total	8,401,553	100.0	8,345,428	100.0

In addition to the indicators for ADLS and IADLs, the 2017 Survey of Enrollees asked about the degree to which enrollees needed assistance on emotional and cognitive functioning from family, friends, neighbors, or others in a typical week. These percentages across both 2016 and 2017 are displayed in Table 6-4. In 2017, the percentage of enrollees who expressed a need for emotional and cognitive support increased by approximately two to three percentage points, compared to the year before.

Table 6-4. Percentage of enrollees with emotional and cognitive needs

Description	2016		2017	
	N	%	N	%
Coping with stressful situation	2,121,440	25.3	2,394,680	28.7
Avoiding triggers of anxiety	2,008,990	23.9	2,201,121	26.4
Coping with memory loss	1,806,736	21.5	1,948,668	23.4

Note: Denominator is all enrollees. Weighted n = 8,345,428 enrollees.

6.2.1 Functional Limitations by Age, Priority, and Income

Table 6-5 shows the percentage of enrollees with ADL and IADL disabilities by priority, age, and income. The lack of disability (no ADL or IADL disability) was most prevalent among enrollees in the lowest priority groups (7-8), those who were less than 45 years old, and those with higher levels of income ($35,000 or more). While having three or more ADL disabilities was less common, the rate of having three to five ADL disabilities was higher among enrollees in Priority Groups 1-3, enrollees 65 or older, and those earning less than $35,000 per year.

Table 6-5. Percentage of enrollees with ADL and IADL disabilities, by priority, age, and income

	No ADL or IADL disability		IADL but no ADL disability		1 or 2 ADL disabilities		3, 4 or 5 ADL disabilities		Total
	N	%	N	%	N	%	N	%	
Priority group									
P1-P3	2,453,714	61.4	948,416	23.7	393,674	9.9	198,001	5.0	3,993,805
P4-P6	1,612,128	65.7	563,363	23.0	180,973	7.4	98,140	4.0	2,454,604
P7-P8	1,406,483	74.1	344,239	18.1	100,015	5.3	46,284	2.4	1,897,020
Age									
<45	1,206,799	70.3	351,757	20.5	119,676	7.0	38,962	2.3	1,717,194
45-64	1,726,398	66.8	517,349	20.0	232,349	9.0	109,853	4.2	2,585,948
65+	2,539,129	62.8	986,912	24.4	322,636	8.0	193,609	4.8	4,042,286
Income									
<$35,000	2,258,317	57.9	1,039,445	26.6	392,810	10.1	211,934	5.4	3,902,506
$35,000+	2,960,991	73.0	726,552	17.9	253,442	6.2	115,208	2.8	4,056,193
Missing	253,018	65.4	90,021	23.3	28,409	7.3	15,281	4.0	386,729

Note: Denominator is all enrollees. Weighted n = 8,345,428 enrollees.

Enrollees' Digital Access to VA Information and Resources 7

Since the Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009, the federal government has made significant investments in the adoption of health information technology (HIT), with the aim of transforming health care delivery and promoting person-centered and self-managed health. Health providers and hospitals have followed suit by transitioning to, or improving their existing electronic systems. For example, the VA is making medical records more accessible through the Blue Button Initiative,[55] increasing its capacity for secure information exchange of health records with external (non-VA) providers and other outside entities, and updating its IT systems so that patients can use mobile platforms to access health information and services.[56] However, health IT has not been adopted and implemented ubiquitously, due to barriers that affect both providers and patients. Barriers for providers include cost pressures, time limitations, cultural differences, poor usability, and lack of steady and consistent access for patient users.[57] As more providers adopt health information technologies and make healthcare more available through remote means (e.g., email, phone consultations, mobile applications and video), it has become increasingly important to understand how Veterans access the internet, the frequency of and reasons for internet use, and how internet use varies across subgroups of Veterans.

An early study of Veteran internet use found little differences compared to non-Veterans. However, the proportion of internet users among Veterans receiving care in VA health care system (59%) was significantly lower compared to Veterans receiving care from a community provider outside the VA health care system (71%). Additionally, Veterans in the VA health care system tend to have lower educational attainment, lower incomes, and are more likely to report fair or poor health status compared with Veterans who receive care outside the VA.[58]

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[55] http://www.va.gov/bluebutton/

[56] https://www.va.gov/op3/docs/strategicplanning/va2014-2020strategicplan.pdf

[57] *Federal Health IT Strategic Plan 2015-2020*. Prepared by The Office of the National Coordinator for Health Information Technology (ONC), Office of the Secretary, United States Department of Health and Human Services. https://www.healthit.gov/sites/default/files/9-5-federalhealthitstratplanfinal_0.pdf

[58] Houston, T. K., Volkman, J. E., Feng, H., Nazi, K. M., Shaimada, S. L., & Fox, S. (2013). Veteran internet use and engagement with health information online. *Military Medicine, 178*(4), 394-400. doi: 10.7205/MILMED-D-12-00377.

As in the 2016 Survey, the 2017 Survey of Enrollees included questions about enrollees' use of the internet and willingness to use the internet to access VA information and resources. This section reports on these findings as well as those on enrollees' awareness and use of My Health*e*Vet (MHV), an online personal health record for Veterans and active duty service members, their health care providers, and dependents.

7.1 Access to the Internet and Text Messaging

Similar to 2016, 77 percent (not shown) of enrollees reported using the internet, at least occasionally. Table 7-1 shows the percentage of enrollee internet users by age, Priority Group, and income. Internet usage was most prevalent among enrollees that were younger, with higher incomes, and among those in Priority Groups 1-3. Approximately 98 percent of enrollees under the age of 45 said they use the internet, compared with just 62 percent of enrollees 65 years of age or older. Additionally, internet use for enrollees with an annual income of $35,000 or more was 20 percentage points higher than the rate of internet use among lower income enrollees. These findings are consistent with prior studies showing that Veterans who are younger, have higher educational attainment, and earn higher incomes to be more likely to use the internet than older, less-educated, and poorer Veterans.[59,60]

Table 7-1. Enrollee use of the internet, by age, priority group, and income

	Use the internet, at least occasionally		Total
	N	%	
Age			
<45	1,675,573	97.6	1,717,194
45 to 64	2,205,594	85.3	2,585,948
65+	2,521,395	62.4	4,042,286

[59] McInnes, D. K., Gifford, A. L., Kazis, L. E., & Wagner, T. H. (2010). Disparities in health-related internet use by US veterans: Results from a national survey. *Informatics in Primary Care, 18*(1), 59-68.

[60] Tsai, J., & Rosenheck, R. A. (2012). Use of the internet and an online personal health record system by US veterans: Comparison of Veterans Affairs mental health service users and other veterans nationally. *Journal of the American Medical Informatics Association, 19*(6), 1089-1094.

Table 7-1. Enrollee use of the internet, by age, priority group, and income (continued)

	Use the internet, at least occasionally		Total
	N	%	
Priority group			
P1-3	3,340,315	83.6	3,993,805
P4-6	1,684,807	68.6	2,454,604
P7-8	1,377,439	72.6	1,897,020
Income			
<$35,000	2,597,093	66.5	3,902,506
$35,000+	3,553,289	87.6	4,056,193
Missing	252,180	65.2	386,729

Note: Denominator is all enrollees. Weighted *n* = 8,345,428 enrollees.

The 2017 Survey of Enrollees also asked about enrollee use of text messaging.[61] Table 7-2 shows the rate of text message use by Priority Group, age, and income. Approximately 67 percent of enrollees indicated that they send or receive text messages. Use of text messages varies with age, Priority Group, and income. Text messaging was higher among enrollees under 45, enrollees in Priority Groups 1-3, and enrollees that earned over $35,000. Text message use varied mostly by age, as 96 percent of enrollees under 45 reporting their use of text messaging, compared to only 47 percent of enrollees over 65.

Table 7-2. Use of text messages by priority group, age, and income

	Sends/Receives text messages		Total
	N	%	
Age			
<45	1,638,302	95.4	1,717,194
45-64	2,141,661	82.8	2,585,948
65+	1,882,557	46.6	4,042,286

[61] **Note:** In the 2017 survey, all respondents received the question about text message use. This reflects a change from the 2016 survey, in which only internet users received this question.

Table 7-2. Use of text messages by priority group, age, and income (continued)

	Sends/Receives text messages		Total
	N	%	
Priority group			
P1-P3	3,056,737	76.5	3,993,805
P4-P6	1,521,740	62.0	2,454,604
P7-P8	1,084,042	57.1	1,897,020
Income			
<$35,000	2,299,063	58.9	3,902,506
$35,000+	3,165,615	78.0	4,056,193
Missing	197,841	51.2	386,729

Note: Denominator is all enrollees. Weighted *n* = 8,345,428 enrollees.

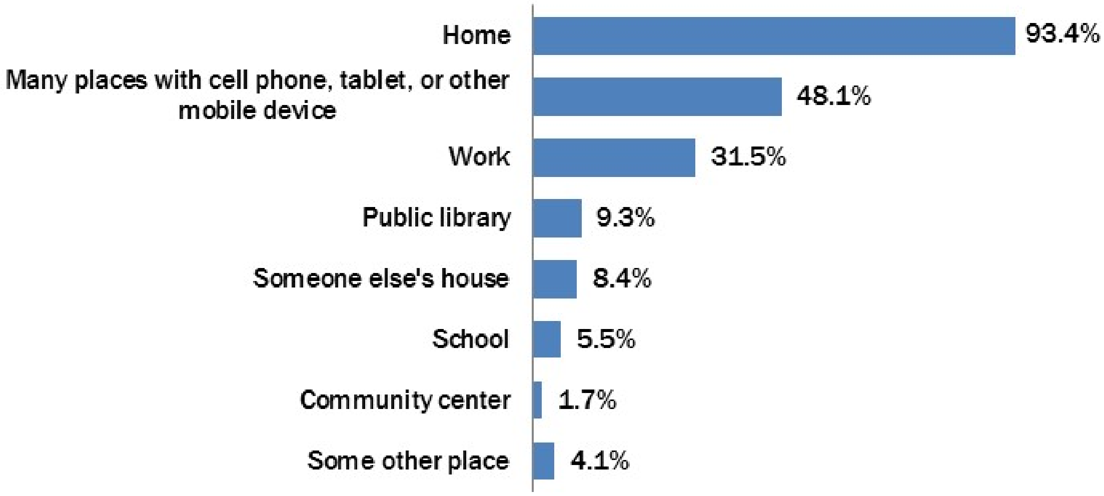
The remainder of this chapter describes responses to several questions related to internet use among the 78 percent of all enrollees who indicated that they use the internet at least occasionally. Henceforth in this chapter, they are referred to as enrollee internet users, internet users, or enrollees who self-identify as internet users.

7.1.1 Places where Enrollees Access the Internet

As shown in Figure 7-1, the most common place where enrollees accessed the internet was at home (93%). Enrollees also reported accessing the internet through mobile devices such as through a cell phone or tablet (48%) and at work (32%). A much smaller share of enrollees reported accessing the internet at a public library, someone else's house, a school, a community center, or some other place.

Table 7-3 shows places where enrollee internet users accessed the internet by Priority Group, age and income. Across Priority Group, age group, and income, home was the most frequent place where enrollees accessed the internet. However, there were notable differences across income and age groups for other locations. For example, lower income enrollee internet users were more likely to access the internet at the public library and less likely to access the internet at work compared to higher income enrollee internet users. The rate at which higher income enrollee internet users accessed the internet at work was about 25 percentage points higher compared to lower income enrollee internet users.

Figure 7-1. Among enrollee internet users, the places where they access the internet



Note: Denominator is enrollees who are internet users. Weighted *n* = 6,402,562 enrollees.

Older enrollee internet users were much less likely to access the internet on cell phones, tablets, or other mobile devices, at school, at a public library, at work, and at somebody else's house compared to younger enrollee internet users. The greatest differences were observed in their access to the internet over mobile devices (e.g., cell phones and tablets) across age groups. Seventy-three percent of enrollee internet users under 45 accessed the internet through mobile devices compared to 51 percent of enrollee internet users aged 45 to 64 and only 29 percent of enrollee internet users over 65. Similarly, there was a difference across age groups in the rates at which enrollees accessed the internet at work. Only 7 percent of enrollee internet users over 65 accessed the internet at work compared to 39 percent of enrollee internet users aged 45 to 64 and 59 percent of enrollees under 45. Enrollee internet users in Priority Groups 1-3 were most likely to access the internet from home, through mobile devices, and from work, compared with those in other Priority Groups.

Table 7-3. Places where enrollees access the internet by priority group, age, and income

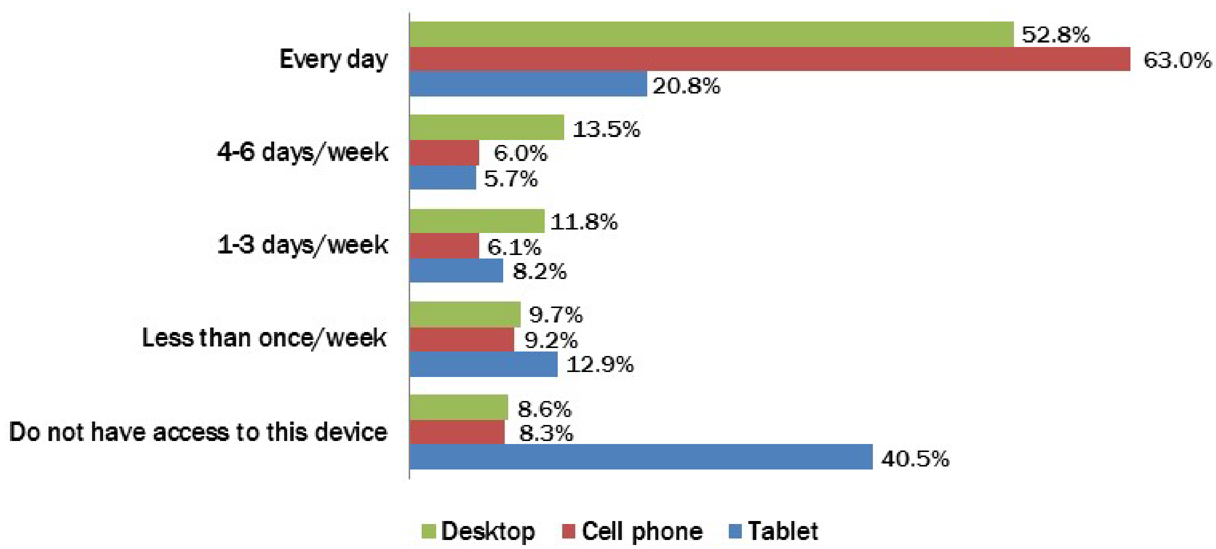
	Priority group			Age group			Income group	
	1-3	4-6	7-8	<45	45–64	65+	<$35K	$35K+
Home	3,176,069	1,506,543	1,299,273	1,584,086	2,019,171	2,378,628	2,338,919	3,412,364
% Internet users	95.1	89.4	94.3	94.5	91.5	94.3	90.1	96.0
Cell phone, tablet, other mobile device	1,777,541	752,216	552,158	1,227,824	1,122,197	731,893	1,069,427	1,919,255
% Internet users	53.2	44.6	40.1	73.3	50.9	29.0	41.2	54.0
Work	1,241,152	425,491	351,933	982,539	849,611	186,425	451,520	1,500,754
% Internet users	37.2	25.3	25.5	58.6	38.5	7.4	17.4	42.2
Public library	270,844	230,925	95,602	207,658	244,504	145,209	359,667	223,282
% Internet users	8.1	13.7	6.9	12.4	11.1	5.8	13.8	6.3
Someone else's house	298,649	170,212	71,800	279,217	160,110	101,334	247,710	275,884
% Internet users	8.9	10.1	5.2	16.7	7.3	4.0	9.5	7.8
School	232,504	86,217	30,920	279,125	62,106	8,409	188,957	150,306
% Internet users	7.0	5.1	2.2	16.7	2.8	0.3	7.3	4.2
Some other place	141,848	68,157	50,212	103,108	92,322	64,788	111,545	136,614
% Internet users	4.2	4.0	3.6	6.2	4.2	2.6	4.3	3.8
Community center	51,486	43,980	14,765	50,487	35,456	24,289	69,803	39,007
% Internet users	1.5	2.6	1.1	3.0	1.6	1.0	2.7	1.1

Note: Denominator is enrollees who are internet users. Weighted *n* = 6,402,562 enrollees.

7.1.2 Frequency of Internet Use

Of the enrollees who self-identified as internet users, Figure 7-2 shows the frequencies at which enrollees access the internet through a desktop computer, cell phone, and tablet. The majority of enrollee internet users reported accessing the internet every day through a desktop computer (53%) or cell phone (63%), while 21 percent of enrollees accessed the internet every day via a tablet. While cell phones were the most popular method of accessing the internet every day, approximately 41 percent of enrollee internet users reported not having access to a tablet.

Figure 7-2. Among enrollee internet users, the frequency of use in a typical week, by device

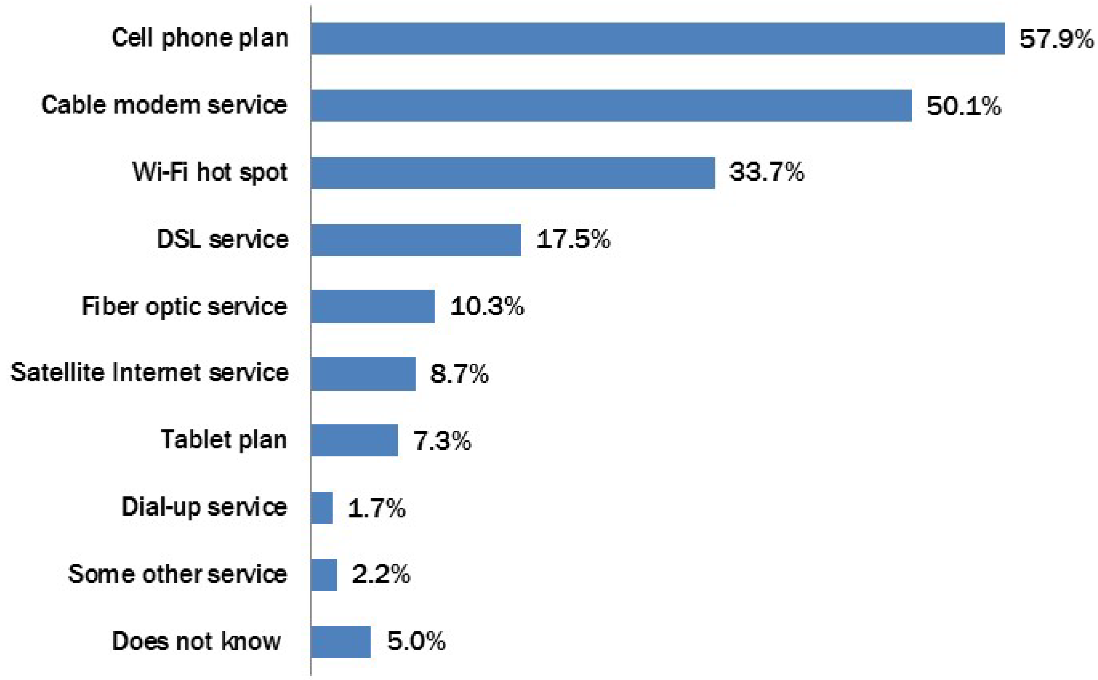


Note: Denominator is enrollees who are internet users. The sum of frequencies by device do not total 100 because of missing data. Weighted *n* = 6,402,562 enrollees.

7.1.3 Services Used to Access the Internet

Enrollees who reported using the internet at least occasionally were asked what types of services they used to access the internet. As shown in Figure 7-3, the three most common types of services that enrollee internet users reported using was through a cell phone plan (58%), a cable modem (50%), and a Wi-Fi hot spot (34%). The percentage of enrollee interest users with a cell phone plan reflects a slight increase from 54 percent in 2016. Approximately 18 percent use a DSL service and one-tenth use a fiber optic service. Other types of services that enrollees that use the internet used include satellite internet services, tablet plans, and dial-up services.

Figure 7-3. Among enrollee internet users, the services used to access the internet



Note: Denominator is enrollees who are internet users. Weighted *n* = 6,402,562 enrollees.

7.2 Activities Performed Through the Internet

Health-related uses for the internet include accessing general health information, information about minor health issues as well as serious conditions. Individuals also use the internet to connect with and acquire information from others with the same health condition. More than one-third of adults in the United States (35%) have reported using the internet specifically for the purpose of self-diagnosing a medical condition or diagnosing another person. Based on a 2013 study, women, White adults, younger adults, adults living in households earning $75,000 or more, and adults with a college degree or more advanced education levels are more likely to use the internet to diagnose their own or someone else's medical condition.[62] Veterans with more education have also been found to be more likely to use the internet for health-related purposes. Residence in an urban area and having poor health are also factors associated with a higher likelihood of a Veteran using the internet for health-related purposes.[63] Among those who use the internet for health-related purposes, Veterans

[62] http://www.pewinternet.org/files/old-media//Files/Reports/PIP_HealthOnline.pdf

[63] McInnes, D. K., Gifford, A. L., Kazis, L. E., & Wagner, T. H. (2010). Disparities in health-related internet use by US veterans: Results from a national survey. *Informatics in Primary Care, 18*(1), 59-68.

in the VA health care system are approximately three times more likely to seek information related to Alzheimer's disease, dementia and memory loss, and less likely to use the internet to look for information about health insurance, when compared with Veterans not in the VA health care system.[64]

In the 2017 Survey of Enrollees, enrollees who were internet users indicated whether they use the internet to perform a list of health and non-health related tasks (Figure 7-4). The majority of enrollee internet users were comfortable using the internet. For example, 88 percent of enrollees that use the internet used it in the last year to send emails, which was the most commonly performed task. Other popular reasons for internet use were to get travel directions (84%) and weather reports (81%). Further, 69 percent of enrollee internet users were comfortable paying bills online, a task that may involve sharing personal information such as a credit card number or checking account. However, while 60 percent of enrollees that used the internet used it to make reservations, only 33 percent of enrollees that use the internet used it to make medical appointments. In terms of other health related activities through the internet, 77 percent of enrollee internet users reported accessing health information on the internet, a slight increase from 76 percent in 2016. However, there was no change (45%) in the percentage of enrollee internet users who accessed their personal health record online. This suggests an opportunity for continued growth in remote health care delivery and person-centered, self-managed health, as the majority of enrollees were comfortable performing tasks over the internet, but do not regularly perform health related tasks online.

[64]Houston, T. K., Volkman, J. E., Feng, H., Nazi, K. M., Shaimada, S. L., & Fox, S. (2013). Veteran internet use and engagement with health information online. *Military Medicine, 178*(4), 394-400. doi: 10.7205/MILMED-D-12-00377.

Figure 7-4. Among enrollee internet users, the use of the internet to perform health and non-health related tasks

Note: Denominator is enrollees who are internet users. Weighted *n* = 6,402,562 enrollees.

Enrollees' use of the internet and text messaging for health-related purposes varies with income and age, and across Priority Groups. Compared to the average enrollee population, younger and higher-income enrollee internet users were more likely to perform tasks on the internet (Table 7-4). Further, in every task, enrollee internet users in the youngest age group used the internet to perform the task at the highest rate, while the opposite was true among the oldest age group. Similarly, lower income enrollee internet users were less likely to perform a task on the internet compared to higher income enrollee internet users. Priority Groups 1-3 reported the highest rates of using the internet to perform both health and non-health related tasks relative to Priority Groups 4-6 and 7-8. These patterns are consistent with those reported in 2016.

Table 7-4. Percentage of enrollees used the internet to perform health and non-health related tasks by priority group, age, and income

	Priority group			Age group			Income group	
	1-3	4-6	7-8	<45	45-64	65+	<$35K	$35K+
Send emails	**3,021,673**	**1,423,041**	**1,189,329**	**1,600,934**	**1,950,547**	**2,082,562**	**2,144,079**	**3,275,743**
% Internet users	90.5	84.5	86.3	95.5	88.4	82.6	82.6	92.2
Get travel directions	**2,889,251**	**1,338,149**	**1,117,831**	**1,566,437**	**1,878,890**	**1,899,903**	**1,999,677**	**3,150,999**
% Internet users	86.5	79.4	81.2	93.5	85.2	75.4	77.0	88.7
Get weather reports	**2,783,326**	**1,335,232**	**1,082,097**	**1,535,726**	**1,826,338**	**1,838,591**	**1,966,979**	**3,051,750**
% Internet users	83.3	79.3	78.6	91.7	82.8	72.9	75.7	85.9
Look up health information	**2,672,777**	**1,233,730**	**1,011,909**	**1,388,621**	**1,737,644**	**1,792,151**	**1,867,797**	**2,879,876**
% Internet users	80.0	73.2	73.5	82.9	78.8	71.1	71.9	81.0
Track delivery of purchases	**2,568,245**	**1,126,383**	**933,456**	**1,463,802**	**1,623,051**	**1,541,230**	**1,643,863**	**2,819,745**
% Internet users	76.9	66.9	67.8	87.4	73.6	61.1	63.3	79.4
Purchase household goods/services	**2,473,674**	**1,051,057**	**939,525**	**1,378,820**	**1,526,886**	**1,558,550**	**1,512,947**	**2,793,457**
% Internet users	74.1	62.4	68.2	82.3	69.2	61.8	58.3	78.6
Pay bills online	**2,476,655**	**1,076,365**	**874,858**	**1,489,125**	**1,572,906**	**1,365,846**	**1,587,876**	**2,697,097**
% Internet users	74.1	63.9	63.5	88.9	71.3	54.2	61.1	75.9
Airline/hotel/other reservations	**2,246,360**	**816,083**	**794,477**	**1,290,574**	**1,328,019**	**1,238,328**	**1,136,202**	**2,579,247**
% Internet users	67.2	48.4	57.7	77.0	60.2	49.1	43.7	72.6
Access personal health record	**1,663,154**	**657,794**	**545,792**	**926,749**	**975,659**	**964,332**	**964,445**	**1,804,569**
% Internet users	49.8	39.0	39.6	55.3	44.2	38.2	37.1	50.8
Make medical appointments	**1,215,204**	**459,972**	**404,444**	**689,719**	**727,458**	**662,442**	**633,951**	**1,382,168**
% Internet users	36.4	27.3	29.4	41.2	33.0	26.3	24.4	38.9

Note: Excludes enrollees who indicated they do not use the internet. Weighted *n* = 6,402,562 enrollees.

7.3 Readiness to Use Internet for VA information and Activities

Telehealth is one of VA's efforts to shift health care from a provider-centric delivery model to a patient-centric one where Veterans' personal health goals are taken into consideration and their health care needs are better met through more timely care, improved access, and higher quality.[65] Telehealth is a term used to describe various technologies such as Home Telehealth, Clinical Video Telehealth, and Store-and-Forward Telehealth (enabling sites in need of specialized consults to forward clinical data, images, and/or videos), all of which use "modern technology to provide clinical care and patient education when the patient and provider are in separate locations."[66] Telehealth enables patients to receive medical exams from primary care providers, consult with specialists, participate in counseling, monitor chronic conditions, and share/receive diagnostic information, while circumventing barriers such as stigma, geographic distance, and travel costs. VHA telehealth services have seen a steady annual growth in the last several years,[67] and have been a critical resource for delivering clinical programs and services to meet the psychosocial and health needs of Veterans and their caregivers.[68,69,70]

In the 2017 Survey, enrollee internet users were asked if they would be willing to perform a series of health related tasks using a computer or mobile device. Compared with enrollee internet users' reported *use* of the internet to complete health related tasks (Figure 7-4), enrollee internet users' *willingness* to perform health related tasks over the internet was much higher (Figure 7-5). This was true even when considering both enrollees users and non-users. For example, while only 45 percent of enrollee internet users accessed their personal health records on the internet, 78 percent of enrollee internet users indicated that they were willing to access this information over the internet. Similarly, while only 33 percent of enrollee internet users made medical appointments over the internet, 77 percent of enrollees expressed their willingness to make appointments over the internet. Over 75 percent of enrollee internet users were willing to perform most of the health related tasks

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[65] http://www.mdedge.com/fedprac/article/101082/health-policy/madhulika-agarwal-telehealth-vha

[66] http://www.northflorida.va.gov/NORTHFLORIDA/services/telehealth.asp

[67] Darkins, A. (2014). The growth of telehealth services in the Veterans Health Administration between 1994 and 2014: a study in the diffusion of innovation. Telemedicine and e-Health, 20(9), 761-768.

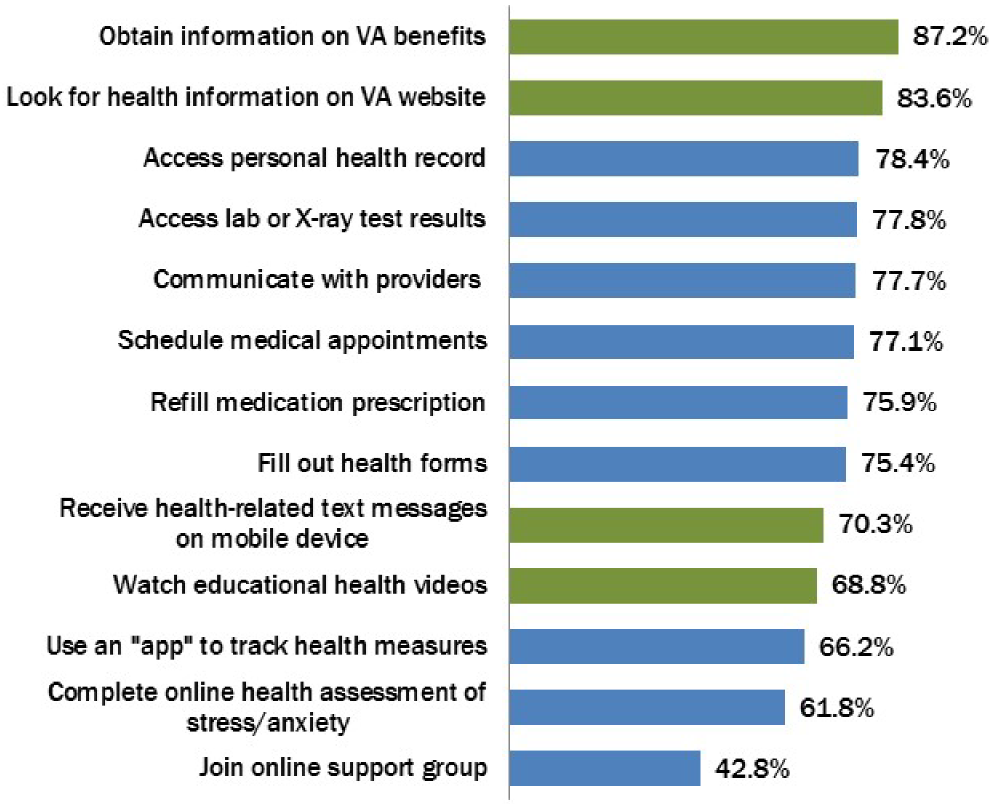
[68] Yuen, E. K., Gros, D. F., Price, M., Zeigler, S., Tuerk, P. W., Foa, E. B., & Acierno, R. (2015). Randomized controlled trial of home-based telehealth versus in-person prolonged exposure for combat-related PTSD in veterans: Preliminary results. Journal of clinical psychology, 71(6), 500-512.

[69] Hernandez, H., Scholten, J., & Moore, E. (2015). Home Clinical Video Telehealth Promotes Education and Communication with Caregivers of Veterans with TBI. TELEMEDICINE and e-HEALTH, 21(9), 761-766.

[70] Dang, S., Gomez-Orozco, C. A., van Zuilen, M. H., & Levis, S. (2017). Providing Dementia Consultations to Veterans Using Clinical Video Telehealth: Results from a Clinical Demonstration Project. Telemedicine and e-Health.

listed in the survey. However, the task that enrollee internet users were least willing to perform was joining online support groups. Four of the tasks (obtaining information on VA benefits, looking for health information, receiving health-related text messages, and watching educational health videos) increased by two or more percent of enrollee internet users, compared to findings from 2016.

Figure 7-5. Among enrollee internet users, the willingness to perform (tele)health-related tasks



Note: Denominator is enrollees who are internet users. Weighted *n* = 6,402,562 enrollees. Green bars denote increases in two or more percentage points when compared to findings from the 2016 Survey of Enrollees.

Table 7-5 shows the willingness of enrollee internet users to perform telehealth services, telemedicine, or perform health-related tasks using the internet. The willingness of enrollee internet users to perform these tasks varied across Priority Groups. Priority Group 1-3 enrollee internet users had the highest willingness rates for all of the health tasks or telehealth services in the survey question, while Priority Groups 7-8 had the lowest willingness rates for all tasks. Furthermore, enrollee internet users in Priority Group 1-3 were more willing to perform health related tasks on the internet compared to the average enrollee internet user (displayed in Figure 7-5). These differences in willingness were similar of all enrollees (internet users and non-users) were included in the analysis.

Table 7-5. Percentage of enrollees willing to perform (tele)health-related tasks by priority group, age, and income

	Priority group			Age group			Income group	
	1-3	4-6	7-8	<45	45-64	65+	<$35K	$35K+
Obtain information on VA benefits	**2,983,769**	**1,455,156**	**1,145,932**	**1,567,565**	**1,983,151**	**2,034,141**	**2,220,489**	**3,197,675**
% Internet users	89.3	86.4	83.2	93.6	89.9	80.7	85.5	90.0
Look for health information on VA website	**2,888,661**	**1,390,473**	**1,076,349**	**1,539,248**	**1,931,937**	**1,884,298**	**2,114,178**	**3,082,380**
% Internet users	86.5	82.5	78.1	91.9	87.6	74.7	81.4	86.7
Access personal health record	**2,718,681**	**1,292,978**	**1,010,357**	**1,482,013**	**1,783,452**	**1,756,552**	**1,946,530**	**2,941,625**
% Internet users	81.4	76.7	73.4	88.4	80.9	69.7	75.0	82.8
Access lab or X-ray test results	**2,688,861**	**1,286,261**	**1,003,641**	**1,478,839**	**1,771,403**	**1,728,522**	**1,922,603**	**2,924,129**
% Internet users	80.5	76.3	72.9	88.3	80.3	68.6	74.0	82.3
Communicate with providers	**2,722,590**	**1,265,496**	**989,794**	**1,500,822**	**1,820,876**	**1,656,181**	**1,903,359**	**2,935,075**
% Internet users	81.5	75.1	71.9	89.6	82.6	65.7	73.3	82.6
Schedule medical appointments	**2,685,962**	**1,281,375**	**971,335**	**1,520,073**	**1,784,017**	**1,634,582**	**1,908,625**	**2,899,125**
% Internet users	80.4	76.1	70.5	90.7	80.9	64.8	73.5	81.6
Refill medication prescription	**2,661,064**	**1,248,014**	**947,542**	**1,443,303**	**1,780,838**	**1,632,479**	**1,885,744**	**2,829,217**
% Internet users	79.7	74.1	68.8	86.1	80.7	64.7	72.6	79.6
Fill out health forms	**2,607,815**	**1,252,702**	**968,089**	**1,472,048**	**1,739,963**	**1,616,595**	**1,849,318**	**2,851,967**
% Internet users	78.1	74.4	70.3	87.9	78.9	64.1	71.2	80.3

Table 7-5. Percentage of enrollees willing to perform (tele)health-related tasks by priority group, age, and income (continued)

	Priority group			Age group			Income group	
	1-3	4-6	7-8	<45	45-64	65+	<$35K	$35K+
Watch educational health videos	**2,386,734**	**1,125,735**	**895,337**	**1,303,125**	**1,624,315**	**1,480,367**	**1,684,896**	**2,605,374**
% Internet users	71.5	66.8	65.0	77.8	73.6	58.7	64.9	73.3
Receive health-related text messages on mobile device	**2,482,607**	**1,151,159**	**866,001**	**1,399,448**	**1,675,828**	**1,424,492**	**1,724,964**	**2,645,795**
% Internet users	74.3	68.3	62.9	83.5	76.0	56.5	66.4	74.5
Use app to track health measures	**2,345,283**	**1,086,710**	**804,610**	**1,363,639**	**1,551,760**	**1,321,204**	**1,614,286**	**2,517,524**
% Internet users	70.2	64.5	58.4	81.4	70.4	52.4	62.2	70.9
Complete online health assessment to measure stress/anxiety	**2,226,424**	**1,013,507**	**713,949**	**1,345,739**	**1,467,016**	**1,141,125**	**1,520,607**	**2,344,093**
% Internet users	66.7	60.2	51.8	80.3	66.5	45.3	58.6	66.0
Join online support group	**1,523,157**	**719,134**	**496,658**	**946,809**	**1,029,297**	**762,843**	**1,115,755**	**1,564,411**
% Internet users	45.6	42.7	36.1	56.5	46.7	30.3	43.0	44.0

Note: Excludes enrollees who indicated they do not use the internet. Weighted *n* = 6,402,562 enrollees.

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Younger enrollee internet users were most willing to conduct (tele)health related tasks on the internet. With the exception of joining online support groups, over 78 percent of enrollee internet users under 45 were willing to conduct the other surveyed health related tasks on the internet. Correspondingly, VA enrollee internet users ages 65 and up, were less likely to be willing to use the internet to perform the daily health and non-health related tasks listed, compared with both younger age groups. The rates of willingness between the oldest enrollee internet users (65 years of age or older) and youngest enrollee internets (under 45) differed by more than 10 percentage points for all tasks and 20 percentage points for most tasks. The difference in willingness by age increased when all enrollees were included in the analysis (not shown), which suggests that most older enrollees that do not use the internet were less likely to perform (tele)health related tasks.

The majority of enrollee internet users across high and low income levels were willing to perform most (tele)health tasks on the internet. However, higher-income enrollee internet users were more willing to conduct all health-related and telemedicine tasks on the internet compared to the lower-income enrollees. Willingness rates differed as many as 9 percentage points for communicating with providers and for filling out health forms. Enrollee internet users differed the least by income groups in willingness to join an online support group (1 percentage point difference). Again, these differences increased when all enrollees were included in the analysis (not shown), suggesting that lower income enrollees that do not use the internet were less willing to perform health related tasks over the internet.

Telehealth has the potential to improve access to services and help reduce the inequalities in health care use, and ultimately outcomes, attributable to socioeconomic, geographic, and demographic differences among VA enrollees. However, in order for these benefits to be realized, it is important for these technologies to reach Veteran subgroups who are disproportionately less willing or able to adopt these new practices by providing the information and support they need in order to overcome any barriers to access and use.

7.4 Use of the My Health*e*Vet Website

My Health*e*Vet (MHV) is an online personal health record for Veterans and active duty service members, as well as their health care providers and dependents. The objective of MHV is to provide patients with easy access to accurate health information, and the tools that are needed to make informed decisions. MHV provides an online platform where enrollees can record, access, and share important health information and communicate with their health care provider. Health-related information includes family health history, healthcare providers, health insurance, immunizations, lab reports and tests, medical events, medications, military health history, health goals, and current medical or health conditions.[71]

A new pilot program was launched in December 2015 to allow patients with diabetes to track their blood sugar levels and to update their health care providers on glucose levels through a Secure Messaging feature.[72] Since the initial pilot (2000-2010), the My Health*e*Vet program has demonstrated the value of providing patients with easier access to information contained in their VA health record. Furthermore, patients are encouraged to import laboratory test results from the VA electronic health record (EHR) system into a personal health record (PHR) system, which enable patients to manage their own health information. While the VA manages the overall MHV system, the content of the PHR is the property of the Veteran.[73] Among the Veterans who participated, the overall level of satisfaction with this pilot program was high. Eighty-four percent agreed the information and services provided were helpful, the majority indicated that the pilot program helped to improve their care, and 90 percent said they would recommend it to another Veteran. The pilot portal's ability to import from the VA EHR system ranked especially high on the list of features.[74] This feature is currently available for "premium" account holders of MHV. The premium account gives users the highest level of access and full use of MHV features, and requires account holders to have their identification verified in order to link their MHV account with their VA/DoD records.[75] Only veterans and/or VA patients can hold advanced and premium level accounts, however, anyone who registers on MHV can have a basic account, which has limited access to MHV features, with functionalities for the account holder to enter and view their self-reported health information.

[71] http://catalog.data.gov/dataset/my-healthevet-mhv

[72] https://www.myhealth.va.gov/mhv-portal-web/improving-diabetes-management-while-increasing-access?inheritRedirect=true

[73] Nazi, K. M., Hogan, T. P., Wagner, T. H., McInnes, D. K., Smith, B. M., Haggstrom, D., … Weaver, F. M. (2010). Embracing a health services research perspective on personal health records: Lessons learned from the VA My Health*e*Vet system. *Journal of General Internal Medicine, 25* (Suppl. 1), 62-67.

[74] Nazi, K. M., Hogan, T. P., McInnes, D. K., Woods, S. S., & Graham, G. (2013). Evaluating patient access to electronic health records: Results from a survey of veterans. *Medical Care, 51*(3, Suppl. 1), S52-S56. doi: 10.1097/MLR.0b013e31827808db.

[75] https://www.myhealth.va.gov/web/myhealthevet/my-healthevet-offers-three-account-types

The 2017 Survey of Enrollees asked questions about awareness and use of the MHV website.[76] Similar to 2016, 54 percent (not shown) of enrollee internet users reported being aware of the MHV website in 2017, and of those who were aware of MHV, 57 percent (not shown) said that they used it (compared to 56 percent of enrollee internet users in 2016). Awareness of the MHV website varied by age. Table 7-6 shows that younger enrollee internet users were more likely to be aware of MHV compared to older enrollees. Specifically, 62 percent of enrollee internet users age 45 or younger were aware of the MHV website compared to 47 percent of enrollee internet users age 65 or over. The rate of MHV use varied less compared to awareness. Sixty percent of enrollee internet users under 45 were aware of the MHV website and used the website compared to 53 percent of enrollee internet users over 65 the that were both aware of and used the MHV website.

As shown in Table 7-6, enrollee internet users in higher Priority Groups were more likely to be aware of and use MHV. The majority of enrollee internet users in Priority Group 1-3 reported being aware of MHV (60%), and of those who were aware, most (60%) said they used MHV. In contrast, only 40 percent of Priority Group 7-8 enrollee internet users said they were aware of MHV, and 50 percent of those that were aware of MHV reported using the site.

Similar to findings from the 2016 Survey, differences in awareness of MHV across income levels persisted. A greater percentage of lower income enrollee internet users were aware of MHV (59%) compared to higher income enrollee internet users (51%). Despite differences in awareness levels, among those who were aware of MHV, reported similar use of the website across income levels.

Figure 7-6 shows 2016 and 2017 findings on the reported reasons for using the MHV among MHV users. In 2017, 71 percent of MHV users reordered prescriptions, 71 percent looked at VA appointments, 68 percent looked for health information, and 61 percent looked at lab results. The majority of MHV users also used MHV to communicate with their healthcare provider through MHV. Overall, there were slight increases in the majority of reported reasons, with the greatest increase in using MHV to see VA appointments, an increase from 67 percent to 71 percent.

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[76]The 2017 Survey of Enrollees only asks My Health*e*Vet-related questions of the enrollees that responded “Yes” to “Do you use the My Health*e*Vet Web site?” The 2015 and previous survey cycles asked MHV-related questions of everyone.

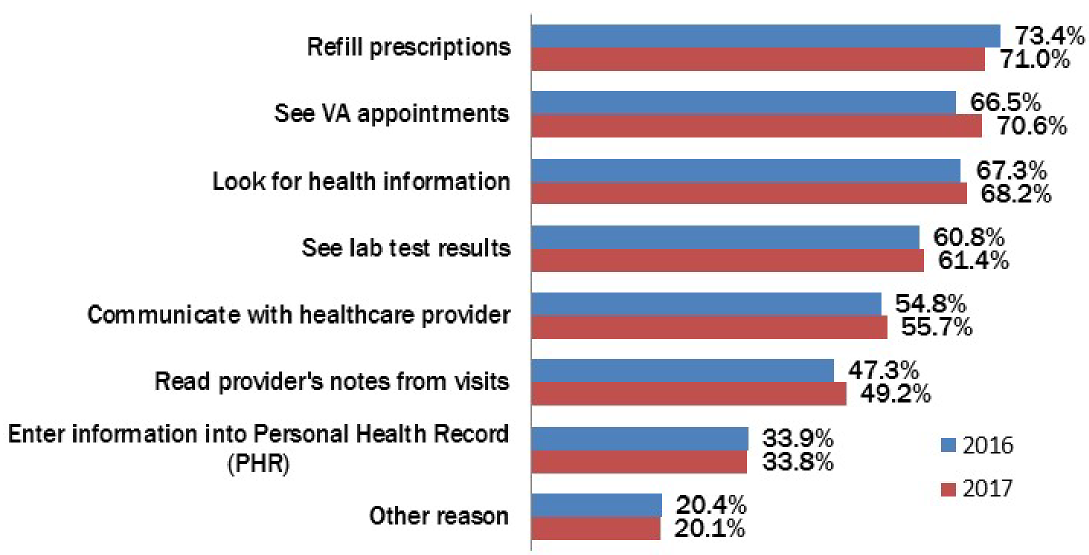
Table 7-6. Among enrollee internet users, the percentage who are aware of and use the My HealtheVet website, by age, priority group, and income

	Aware of MHV[1]		Total	Among aware, used MHV[2]		Total
	N	%		N	%	
Age						
<45	1,033,820	61.7	1,675,573	617,893	59.8	1,033,820
45 to 64	1,228,687	55.7	2,205,594	706,161	57.5	1,228,687
65+	1,177,716	46.7	2,521,395	626,688	53.2	1,177,716
Priority group						
P1-3	2,002,049	59.9	3,340,315	1,207,078	60.3	2,002,049
P4-6	888,604	52.7	1,684,807	471,823	53.1	888,604
P7-8	549,570	39.9	1,377,439	271,841	49.5	549,570
Income						
<$35,000	1,516,740	58.4	2,597,093	852,689	56.2	1,516,740
$35,000+	1,808,483	50.9	3,553,289	1,041,723	57.6	1,808,483
Missing	114,999	45.6	252,180	56,329	49.0	114,999

[1] Denominator is enrollees who use the internet. Weighted *n* = 6,402,562 enrollees.

[2] Denominator is enrollees who use the internet who were aware of the My HealtheVet web site. Weighted *n* = 3,440,223 enrollees.

Figure 7-6. Among MHV users, the reported reasons for using the My HealtheVet website



Note: Denominator is enrollees who are internet users and who indicated they were both aware and users of My HealtheVet. Weighted *n* = 1,950,742 enrollees.

Table 7-7 displays the variation in ways that enrollees use the MHV across Priority Groups, income, and age. While MHV users in Priority Groups 1-3 use MHV more frequently, differences were most often less than 8 percentage points. The greatest difference by Priority Group was in the use of MHV to see VA appointments. Similarly, for most reasons, differences between the oldest and youngest users of MHV were less than 8 percentage points. With the exception of using MHV for refilling prescriptions, lower income enrollees generally selected less reasons for using MHV compared to higher income users.

7.4.1 Use of the My Health*e*Vet Website by VISN

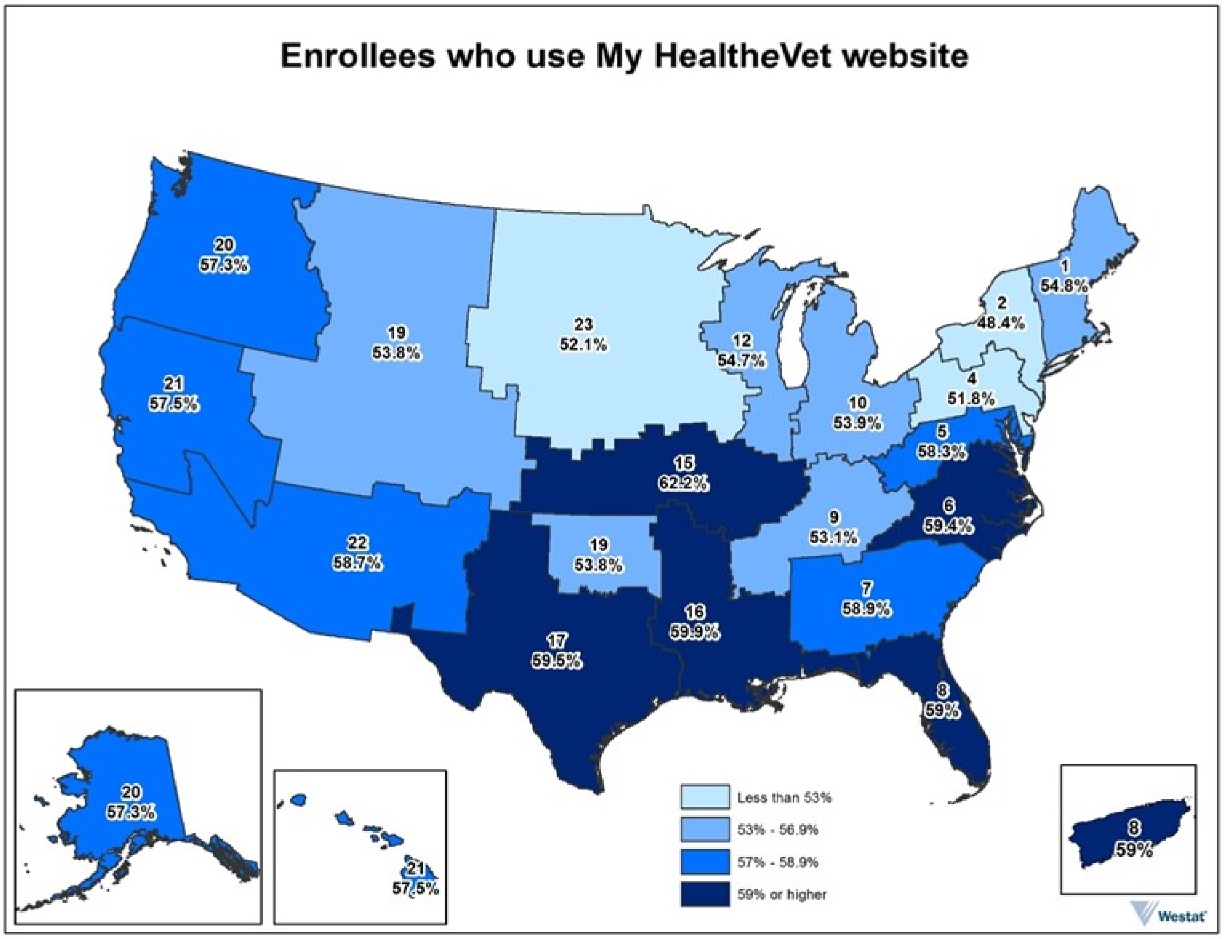
Figure 7-7 shows the percentage of enrollees who use the My Health*e*Vet website among those who reported both using the internet and being aware of My Health*e*Vet. The lowest percentage of enrollees using the MHV website in any VISN was 48 percent (VISN 2), and the highest was 62 percent (VISN 15). On average, approximately 57 percent of enrollees aware of MHV used the website. VISNs 6, 8, 15, 16, and 17 had the highest percentages of enrollees using MHV, and VISNs 2, 4, and 23 had the lowest. The rate of MHV use was over 50 percent in 17 of the 18 VISNs.

Table 7-7. Percentage of enrollees reporting on reasons for using My HealtheVet website (MHV)

	Priority group			Age group			Income group	
	1-3	4-6	7-8	<45	45-64	65+	<$35K	$35K+
Refill prescriptions	**884,559**	**321,988**	**178,128**	**434,576**	**510,084**	**440,016**	**618,740**	**724,837**
% MHV users	73.3	68.2	65.5	70.3	72.2	70.2	72.6	69.6
Look for health information	**838,090**	**319,473**	**172,401**	**439,127**	**495,105**	**395,733**	**583,100**	**712,306**
% MHV users	69.4	67.7	63.4	71.1	70.1	63.1	68.4	68.4
See VA appointments	**879,797**	**327,570**	**169,037**	**452,041**	**508,074**	**416,289**	**600,551**	**741,778**
% MHV users	72.9	69.4	62.2	73.2	71.9	66.4	70.4	71.2
See lab test results	**747,217**	**285,966**	**165,061**	**395,118**	**434,832**	**368,294**	**512,331**	**653,655**
% MHV users	61.9	60.6	60.7	63.9	61.6	58.8	60.1	62.7
Communicate with healthcare provider	**689,633**	**255,269**	**140,722**	**344,967**	**419,538**	**321,118**	**460,398**	**594,816**
% MHV users	57.1	54.1	51.8	55.8	59.4	51.2	54.0	57.1
Read provider's notes	**622,708**	**215,818**	**121,649**	**335,207**	**348,416**	**276,552**	**395,718**	**539,298**
% MHV users	51.6	45.7	44.7	54.3	49.3	44.1	46.4	51.8
Enter information into PHR	**405,442**	**168,761**	**85,860**	**263,099**	**233,092**	**163,872**	**285,777**	**364,217**
% MHV users	33.6	35.8	31.6	42.6	33.0	26.1	33.5	35.0
Other reason	**267,079**	**79,351**	**44,797**	**173,808**	**145,771**	**71,648**	**167,440**	**216,377**
% MHV users	22.1	16.8	16.5	28.1	20.6	11.4	19.6	20.8

Note: Includes only enrollees who are internet users and who indicated they were both aware and users of My HealtheVet. Weighted *n* = 1,950,742 enrollees.

Figure 7-7. Percentage of enrollees who use the My Health*e*Vet website



Enrollees' Views of VA Healthcare 8

In 2010, the VA adopted the Patient-Centered Medical Home model and branded it the Patient Aligned Care Teams (PACT) initiative, with the goal of changing its primary care practices. Under this initiative, the VA has committed to using a patient-centered approach, improving access, and fostering support networks to ensure that it provides high-quality care to over 5.3 million primary care patients.[77] Primary care teams, comprised of four trained health professionals, communicate with patients to understand their individual health goals and deliver coordinated care. Patients can still access care by way of an in-person appointment, but can also receive services through additional channels, such as in person group visits and tele-consultations. This approach is intended to transform the process of delivering and receiving care, resulting in better health outcomes and higher patient satisfaction.

The VA funded five demonstration sites to develop an evidence base and evaluations strategies under the PACT model and to deliver accessible, patient-centered, coordinated, and team-based care through telemedicine and secure messaging methods to serve rural patients. The sites have produced some promising initial results that include a 20 percent reduction in urgent care visits, an increase in the percentage of Veterans using secure messaging to receive virtual care, and a majority (70%) of Veterans who are able to get an appointment on the same day if requested.[78] However, studies have shown mixed results[79,80] and processes would need to be standardized if the model were to be used system-wide, to ensure that the patient experience is more consistent across VA medical centers. Some business, operational, and other processes (e.g., contacting newly enrolled veterans to schedule

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[77]Schectman, G., & Stark, R. (2014). Orchestrating large organizational change in primary care: The Veterans' Health Administration experience implementing a patient-centered medical home. *Journal of General Internal Medicine, 29* (Suppl. 2), 550–551. http://doi.org/10.1007/s11606-014-2828-7

[78]https://pcmh.ahrq.gov/sites/default/files/attachments/VA_PCMH_Activities_Public_Final(1).pdf

[79]Werner, R. M., Duggan, M., Duey, K., Zhu, J., & Stuart, E.A. (2013). The patient-centered medical home: An evaluation of a single private payer demonstration in New Jersey. *Medical Care, 51,* 487-493.

[80]Day, J., Scammon, D. L., Kim, J., Sheets-Mervis, A., Day, R., Tomoaia, A., … Magill, M. K. (2013). Quality, satisfaction, and financial efficiency associated with elements of primary care practice transformation: Preliminary findings. *Annals of Family Medicine, 11*(Suppl. 1), S50-S59.

appointments) have been found to be inconsistent with VHA policy and/or inconsistent across VA medical centers.[81,82]

The 2017 Survey of Enrollees included a series of questions about enrollees' views on health care and reasons for using or not using services provided through the VA health system. Two sets of questions were designed for enrollees who indicated that they used any VA health care services at a VA facility or a community provider that was paid by the VA on or after January 1, 2016. A total of 62 percent of enrollees responded to these questions regarding enrollees' general experience with using the VA services, and their satisfaction with the care they received.

8.1 Experience with Using the VA

VA has several existing programs to help enrollees better access VA health care services. In 2014, Congress enacted the Veterans Access, Choice, and Accountability Act, which provided $15 billion in new funding for Department of Veterans Affairs (VA) health care.[83] In general, this law requires VA to offer Veterans the option to receive hospital care and medical services from a non-VA provider when a VA facility cannot provide an appointment within 30 days, or when Veterans reside more than 40 miles from the nearest VA facility.[84] The VA Beneficiary Travel program reimburses eligible enrollees for certain transportation expenses to travel to VA-provided or VA-authorized outpatient and inpatient medical services.[85]

In response to these policies, the 2017 Survey of Enrollees included seven questions to assess perceptions of availability and accessibility of VA health care among enrollees who used VA services in the past year. The questions asked about their general experience with VA health care services from scheduling the appointment to their experience on the actual day of the visit.

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[81] Independent Assessment of the Health Care Delivery Systems and Management Processes of the Department of Veterans Affairs. Volume I: Integrated Report. Prepared for the U.S. Department of Veterans Affairs by the CMS Alliance to Modernize Healthcare Federally Funded Research and Development Center. September 1, 2015.

[82] VA Health Care: Actions Needed to Improve Newly Enrolled Veterans Access to Primary Care. Report to the Chairman, Subcommittee on Oversight & Investigations, Committee on Veterans' Affairs, House of Representatives. United States Government Accountability Office. March 2016.

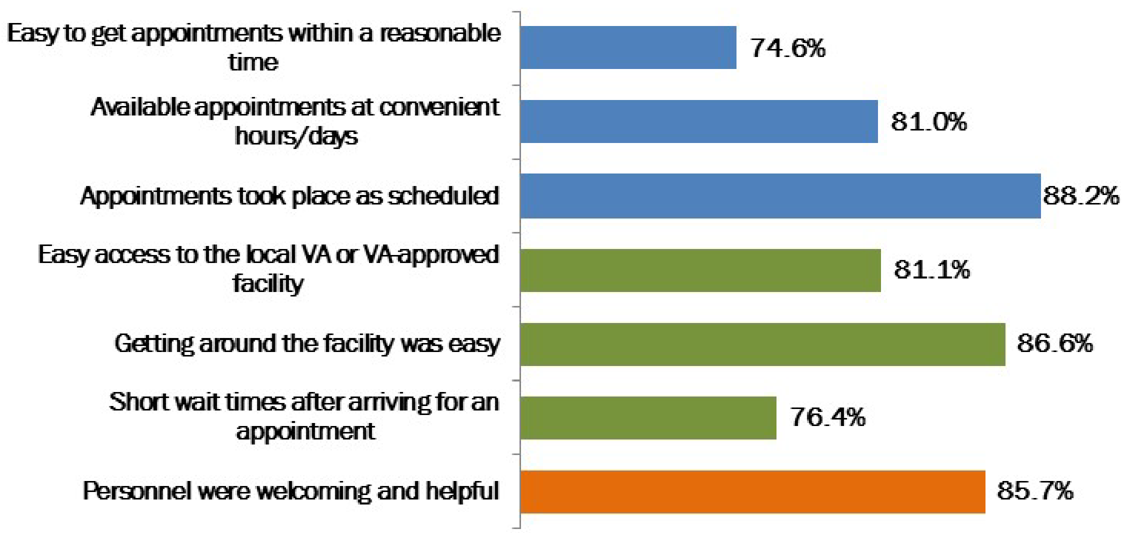
[83] http://www.gao.gov/highrisk/managing_risks_improving_va_health_care/why_did_study

[84] https://www.va.gov/opa/choiceact/for_veterans.asp

[85] http://www.va.gov/HEALTHBENEFITS/vtp/beneficiary_travel.asp

Figure 8-1 shows that among enrollees who used VA health care services, a majority responded favorably about their experiences with scheduling appointments and accessibility on the day of their visit to the VA or VA-approved facility. Regarding factors related to appointment scheduling (blue bars), about 75 percent were able to get appointments within a reasonable time "most of the time" or "nearly always or always," 81 percent indicated that they were able to find appointments at convenient times and days, and 88 percent indicated that their appointments took place as scheduled. Regarding accessibility (green bars), 81 percent of enrollees indicated that the VA or VA-approved facility was easy to access, 87 percent indicated that it was easy getting around the facility, and 76 percent experienced short wait times after arriving for an appointment. Eighty-six percent indicated that personnel were welcoming and helpful during their visits to VA or VA-approved facility (orange bar). All indicators of enrollees' experiences with their VA health care experiences increased slightly, between 0.2 to 1.5 percentage points, from 2016 (not shown).

Figure 8-1. Among VA users, the percentage of enrollees who indicated "most of the time" or "always/nearly always" about their VA health care experiences with scheduling, access, and interactions with personnel



Note: Denominator is enrollees who used any VA health care services on or after January 1, 2016 at a VA facility or a community provide that was paid by the VA. Weighted *n* = 5,136,516 of enrollees.

8.1.1 VA Experience by Priority Group, Age, Income, Race and Ethnicity

As shown in Table 8-1, perceptions about scheduling appointments were least positive for Priority Groups 1-3. Sixty-nine percent of enrollees in Priority Groups 1-3 reported that it was easy to get appointments within a reasonable time, compared to 78 percent of enrollees in Priority Groups 4-6 and 84 percent of enrollees in Priority Groups 7-8. Likewise, 78 percent of those in Priority Groups 1-3 indicated that they were able to schedule appointments at convenient days and times, compared to 83 percent of enrollees in Priority Groups 4-6 and 88 percent of enrollees in Priority Groups 7-8. There were also noticeable differences across age groups. Over 82 percent of enrollees ages 65 and up reported that in most or all cases, it was easy to schedule appointments within a reasonable time, and at convenient times and days. This contrasts with younger respondents, where only 60 percent and 69 percent had favorable experiences in response to the same two questions, respectively. Perceptions of scheduling varied less across income level. Low and high-income enrollees perceptions of appointment scheduling varied by less than 2 percentage points in each question. In general, enrolled Veterans of minority racial and ethnic groups were less likely than their White counterparts to experience convenience with their appointments. The exception was that enrolled Veterans who identified as Native Hawaiian and American Indian/Alaska Native were more likely than their counterparts to indicate that their appointments took place as scheduled.

Table 8-1. Among VA health care users, the percentage of enrollees reporting on perceptions of appointment scheduling, by priority group, age, income, race, and ethnicity

	Easy to get appointments within a reasonable time	Available appointments at convenient hours/days	Appointments took place as scheduled	Total
Priority group				
P1-P3	69.3	77.5	86.9	2,671,118
P4-P6	78.4	82.7	88.7	1,529,994
P7-P8	83.7	88.2	91.1	935,405
Age				
<45	59.7	69.3	85.4	1,094,937
45-64	72.2	78.9	87.2	1,558,825
65+	82.7	87.4	90.1	2,482,755
Income				
<$35,000	75.4	81.4	87.2	2,672,357
$35,000+	74.2	80.8	89.5	2,243,692
Missing	69.6	77.6	86.7	220,467
Race (mutually exclusive)				
White non-Hispanic	76.1	82.2	89.5	3,680,003
Black non-Hispanic	72.6	80.5	86.9	692,016
American Indian/Alaska Native non-Hispanic	64.9	80.5	90.4	52,183
Asian non-Hispanic	62.1	77.1	77.3	60,539
Native Hawaiian non-Hispanic	65.1	61.8	91.7	18,237
Multi-racial non-Hispanic	70.9	75.6	85.8	106,107
Hispanic	71.1	75.0	80.8	418,669
Missing	67.2	77.3	89.4	108,762

Note: Weighted *n* = 5,136,516 of enrollees who used any VA health care services on or after January 1, 2016 at a VA facility or a community provide that was paid by the VA. Responses represent a combination of enrollees who answered “Always and Nearly Always” and “Most of the Time.”

Table 8-2 shows similar patterns for factors relating to accessibility across the priority groups. Veterans in Priority Groups 1-3 and 4-6 responded less favorably about their experiences with getting to and getting around the VA or VA-approved facilities, as well as with their wait times after arriving for an appointment, compared to those in Priority Group 7-8. The greatest disparity in perceptions about accessibility to VA facilities and experiences with VA personnel can be seen across age groups. For all four indicators displayed in Table 9-2, younger enrollees were more likely to report poorer experiences overall, and enrollees ages 65 and older were most likely to report that their experiences were consistently (mostly or always) positive in regards to accessing the VA facilities, wait times, and in their interactions with VA personnel. Enrollee perceptions of accessibility were fairly consistent across income levels, though slightly fewer lower-income enrollees reported positively about accessibility compared to their higher-income counterparts. There were noticeable differences among racial and ethnic group responses about accessibility experiences. In particular, less than 60% of American Indian/Alaska Native enrollees said they experienced a short wait upon arriving for their appointment.

Table 8-2. **Percentage of enrollees reporting on perceptions of VA accessibility, by priority group, age, income, race, and ethnicity**

	Easy access to the local VA or VA-approved facility	Short wait times after arriving for an appointment	Getting around the facility was easy	Personnel were welcoming and helpful	Total
Priority group					
P1-P3	79.5	73.2	84.7	83.1	2,671,118
P4-P6	81.1	77.8	87.6	86.9	1,529,994
P7-P8	85.6	83.5	90.5	91.1	935,405
Age					
<45	78.6	66.5	82.3	77.0	1,094,937
45-64	80.0	74.0	86.4	84.3	1,558,825
65+	82.9	82.4	88.7	90.4	2,482,755
Income					
<$35,000	79.8	75.8	86.2	85.8	2,672,357
$35,000+	83.1	77.8	87.7	85.9	2,243,692
Missing	76.2	69.9	80.4	83.1	220,467

Table 8-2. Percentage of enrollees reporting on perceptions of VA accessibility, by priority group, age, income, race, and ethnicity (continued)

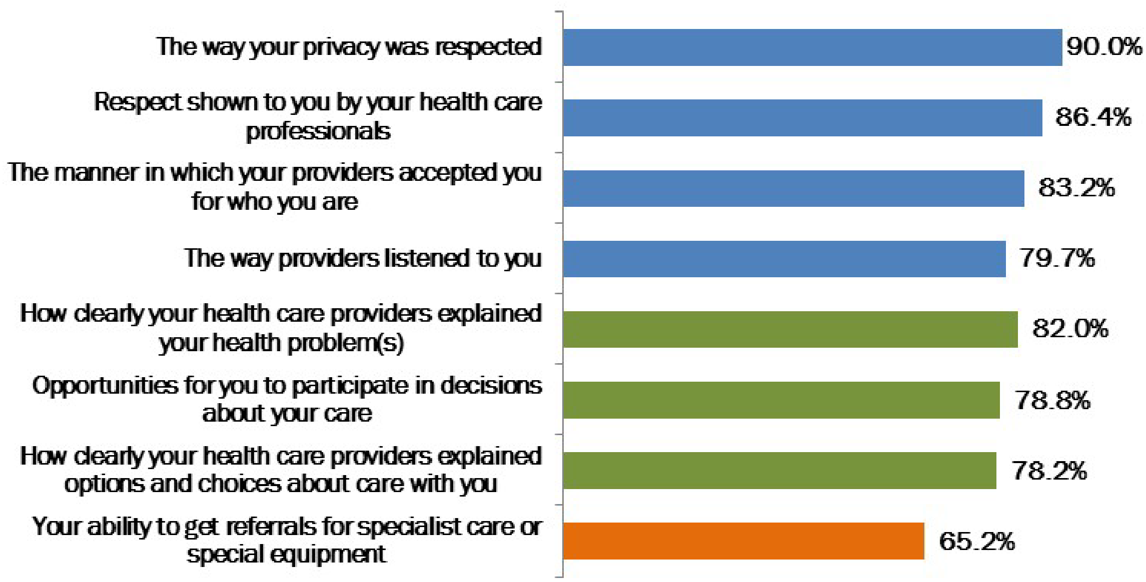
	Easy access to the local VA or VA-approved facility	Short wait times after arriving for an appointment	Getting around the facility was easy	Personnel were welcoming and helpful	Total
Race (mutually exclusive)					
White non-Hispanic	81.4	78.6	87.7	86.4	3,680,003
Black non-Hispanic	83.1	72.6	85.4	84.0	692,016
American Indian/Alaska Native non-Hispanic	73.7	56.6	78.5	77.0	52,183
Asian non-Hispanic	69.9	70.8	76.9	77.0	60,539
Native Hawaiian non-Hispanic	79.0	NA	92.2	80.4	18,237
Multi-racial non-Hispanic	78.8	70.8	81.4	86.1	106,107
Hispanic	78.8	69.9	84.2	84.7	418,669
Missing	80.8	74.4	82.3	86.7	108,762

Note: Weighted *n* = 5,136,516 of enrollees who used any VA health care services on or after January 1, 2016 at a VA facility or a community provide that was paid by the VA. Responses represent a combination of enrollees who answered "Always and Nearly Always" and "Most of the Time."

8.2 Satisfaction with Health Care Received Through VA Services

Similar to the format for the statements about enrollees' experience when using VA services, the 2017 Survey of Enrollees included a second set of statements that assessed general levels of satisfaction of enrollees' experiences with the health care they received at a VA facility. As displayed in Figure 8-2, statements are categorized into three groups, and ranked from highest to lowest level of satisfaction within each group. The first group included four statements that asked about the interactions between providers and enrollees on their visit (blue bars). Enrollees were most satisfied with the way in which their privacy was respected (90%). Enrollees also felt satisfied in the way that they were shown respect (86%), accepted for who they were (83%), and in the way that their providers listened to them during their visits (80%). The majority of enrollees (78% to 82%), also generally expressed high satisfaction in participation in decision-making about their health issues (green bars). Participation included the degree to which their providers clearly explained their health problem(s), how clearly providers explained the options and choices about care, and the degree they were presented with opportunities to participate in their own health care decision making. Lastly, one statement assessed the enrollees' ability to get referrals for specialist care or special equipment (orange bar). Among the enrollees who used VA services in 2016, a little less than two-thirds (65%) indicated that they were satisfied with this aspect of the VA health care services. These findings are largely the same as those reported in 2016.

Figure 8-2. Among VA users, the percentage of enrollees who indicated "moderately satisfied" or "very satisfied" with their interactions and decision-making process with providers, and referrals received at a VA health care facility



Note: Denominator is enrollees who used any VA health care services on or after January 1, 2016 at a VA facility or a community provide that was paid by the VA. Weighted *n* = 5,136,516 of enrollees.

8.2.1 Satisfaction by Priority Group, Age, Income, Race and Ethnicity

> In general, Veterans in Priority Groups 1-3 expressed lower positive experiences and less satisfaction
>
> Older Veterans were more satisfied and reported better experiences
>
> Younger Veterans reported more reasons for using non-VA services
>
> There is variation in satisfaction among racial and ethnic groups of enrolled Veterans

When examined by socio-demographic characteristics, enrollees in lower priority groups (Priority Groups 4-6 and 7-8), ages 65 and older, and those with higher incomes, generally had higher levels of satisfaction of VA health care. For example, as Table 8-3 shows more than 85 to 92 percent of enrollees ages 65 and older indicated that they were moderately or very satisfied with their interactions with VA providers. In contrast, 70 to 90 percent of the younger age groups reported equivalent levels of satisfaction. In general, enrollees who are White were slightly more likely to express satisfaction with their VA health care experiences than enrollees in other racial and ethnic groups.

Table 8-3. Among VA health care users, percentage of enrollees reporting on VA satisfaction, by priority group, age, income, race, and ethnicity

	Your privacy was respected	Respect shown to you	Accepted you for who you are	The way providers listened to you	Total
Priority group					
P1-P3	88.8	83.9	80.2	76.1	2,671,118
P4-P6	90.6	87.6	84.5	81.4	1,529,994
P7-P8	92.5	91.4	89.4	87.0	935,405
Age					
<45	90.0	80.2	74.3	69.7	1,094,937
45-64	87.4	84.6	81.7	78.1	1,558,825
65+	91.6	90.3	87.9	85.1	2,482,755
Income					
<$35,000	89.5	85.6	82.4	78.4	2,672,357
$35,000+	91.1	87.4	84.4	81.4	2,243,692
Missing	84.9	85.0	79.2	77.7	220,467

Table 8-3. Among VA health care users, percentage of enrollees reporting on VA satisfaction, by priority group, age, income, race, and ethnicity (continued)

	Your privacy was respected	Respect shown to you	Accepted you for who you are	The way providers listened to you	Total
Race (mutually exclusive)					
White non-Hispanic	91.1	87.1	84.1	80.3	3,680,003
Black non-Hispanic	87.9	84.9	81.1	78.4	692,016
American Indian/Alaska Native non-Hispanic	86.8	83.5	69.2	69.4	52,183
Asian non-Hispanic	85.7	85.3	81.3	81.8	60,539
Native Hawaiian non-Hispanic	94.1	81.5	68.6	56.0	18,237
Multi-racial non-Hispanic	85.4	83.7	77.7	75.5	106,107
Hispanic	87.2	84.2	83.4	79.7	418,669
Missing	86.2	84.2	79.8	78.7	108,762

Note: Weighted *n* = 5,136,516 of enrollees who used any VA health care services on or after January 1, 2016 at a VA facility or a community provide that was paid by the VA. Responses represent a combination of enrollees who answered "Very Satisfied" and "Mostly Satisfied."

Table 8-4 shows the responses for the statements about understanding and involvement in their health care decision process. Again, older enrollees generally had more positive levels of satisfaction of these processes compared to younger enrollees. Enrollees ages 65 and older were more satisfied with VA health care (ranging from 83% to 86%) than those younger than age 45 (69% to 72%). Similarly, Priority Group 1-3 enrollees were less likely to be satisfied (ranging from 75% to 79%) compared to those in Priority Group 7-8 (ranging from 84% to 88% in satisfaction). Further, enrollees in Priority Group 1-3 and those younger than 45 years old also expressed less satisfaction that the other groups regarding referrals for a specialist or special equipment. Satisfaction of lower income enrollees was similar to satisfaction of higher income enrollees. As with other experience and satisfaction factors, there was variation among racial and ethnic groups in their satisfaction with the way they were kept involved with their health care. Of note, Native Hawaiians were far less satisfied (58%) with the way their health care problems were explained and American Indian/Alaska Native enrollees were far less satisfied with their ability to get referrals than enrollees in other racial and ethnic groups.

Table 8-4. Percentage of enrollees reporting on VA satisfaction, by priority group, age, income, race, and ethnicity

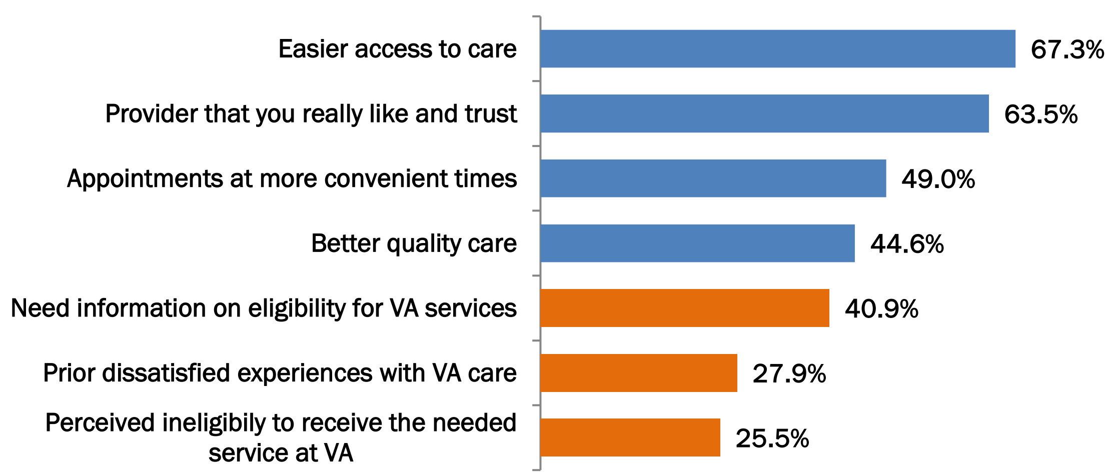
	Explanation of health problem(s)	Participation in decisions about your care	Explanation of options about care	Referrals for specialist or special equipment	Total
Priority group					
P1-P3	79.1	75.4	75.7	63.1	2,671,118
P4-P6	82.7	81.2	78.9	68.4	1,529,994
P7-P8	87.5	84.2	84.1	65.6	935,405
Age					
<45	72.4	70.1	68.5	58.4	1,094,937
45-64	80.9	78.9	77.1	65.8	1,158,825
65+	86.4	82.5	83.2	67.7	2,482,755
Income					
<$35,000	81.0	78.3	77.5	66.2	2,672,357
$35,000+	83.0	79.6	79.3	64.3	2,243,692
Missing	78.0	75.8	75.2	61.2	220,467
Race (mutually exclusive)					
White non-Hispanic	82.5	79.2	78.5	64.2	3,680,003
Black non-Hispanic	80.2	79.3	77.9	68.3	692,016
American Indian/Alaska Native non-Hispanic	72.6	70.4	71.1	54.3	52,183
Asian non-Hispanic	76.4	76.6	78.5	65.0	60,539
Native Hawaiian non-Hispanic	58.1	89.9	76.0	63.9	18,237
Multi-racial non-Hispanic	76.6	70.9	70.0	59.0	106,107
Hispanic	82.2	77.8	79.3	71.0	418,669
Missing	80.1	76.8	76.8	67.2	108,762

Note: Weighted *n* = 5,136,516 of enrollees who used any VA health care services on or after January 1, 2016 at a VA facility or a community provide that was paid by the VA. Responses represent a combination of enrollees who answered “Very Satisfied” and “Mostly Satisfied.”

8.3 Reasons for Using Health Care Services Other Than Those Provided by the VA

Similar to the 2016, 2017 findings show that 63 percent of enrollees indicated that they had used health care services other than those provided or paid by VA. These enrollees responded about possible reasons they chose to use other health care services for some or all of their health care. Figure 8-3 shows that the responses to these statements spanned from 67 percent agreement to a low of 26 percent agreement. Among the positive aspects of using non-VA facilities (blue bars), the top two reasons that enrollees indicated was because that they found these facilities provided "easier access to care" (67%), and that they had an existing provider outside VA who they "really like and trust" (64%). About half of enrollees who responded to this question indicated that they used other health care services because appointments were available at more convenient times (49%) and 45 percent indicated that they provided better quality of care than VA health facilities.

Figure 8-3. Among VA health care users, reasons for using other health care services and barriers to using VA services



Note: Denominator excludes enrollees who never used healthcare services other than those provided or paid for by VA. Weighted *n* = 5,179,878 enrollees.

Three remaining statements were phrased as perceived barriers (orange bars) to using VA services. About 41 percent of enrollees indicated that they did not have sufficient information about their eligibility for VA services, and about 26 percent selected a similar statement about not being eligible at all to receive the needed services at VA. Around 28 percent of enrollees indicated they were dissatisfied in prior experiences with VA care. As with previous survey items, findings from the 2017 Survey were similar to those reported in 2016 (not shown).

8.3.1 Reasons for Using Other Health Care Services, by Priority Group, Age, Income, Race, and Ethnicity

As shown in Table 8-5, among enrollees who reported using other health care services, a greater proportion of enrollees in Priority Group 1-3 agreed with the reasons for using non-VA services compared to enrollees in the lower priority groups. While the youngest enrollee group (those under 45 years of age) were also more likely to select these reasons for using other health care services, enrollees who were 65 years and older placed a higher importance on having a "provider that [they] really like and trust" as their reason for using other health care services. Across the board, higher-income respondents were also more likely to agree with these reasons compared with the lower-income respondents. Although variation exists among racial and ethnic groups, a higher percentage in each group noted easier access to care as a reason to use a provider other than VHA.

Table 8-5. Percentage of enrollees reporting on reasons for using other health care services by priority group, age, income, race, and ethnicity

	Easier access to care	Provider that you really like and trust	Appointments at more convenient times	Better quality care	Total
Priority group					
P1-P3	70.6	63.8	54.5	49.9	2,548,809
P4-P6	63.9	60.2	42.6	37.7	1,268,573
P7-P8	64.3	66.2	44.6	41.0	1,362,496
Age					
<45	73.8	52.6	61.4	55.6	941,616
45-64	66.4	59.6	51.0	45.2	1,422,762
65+	65.6	69.1	43.8	40.6	2,815,500
Income					
<$35,000	63.3	57.4	43.2	37.4	1,932,179
$35,000+	69.7	67.2	52.6	49.0	2,993,988
Missing	69.3	66.6	50.2	46.6	253,711

Table 8-5. Percentage of enrollees reporting on reasons for using other health care services by priority group, age, income, race, and ethnicity (continued)

	Easier access to care	Provider that you really like and trust	Appointments at more convenient times	Better quality care	Total
Race (mutually exclusive)					
White non-Hispanic	68.1	65.2	47.9	44.7	3,953,323
Black non-Hispanic	59.2	58.2	50.6	40.7	533,603
American Indian/Alaska Native non-Hispanic	74.7	52.9	69.1	45.6	51,254
Asian non-Hispanic	70.4	56.2	55.1	42.8	57,987
Native Hawaiian non-Hispanic	77.4	40.2	52.0	67.0	17,516
Multi-racial non-Hispanic	64.5	58.5	51.6	48.4	93,936
Hispanic	68.5	59.1	52.1	45.2	362,861
Missing	68.9	61.1	54.5	48.1	109,398

Note: Weighted *n* = 5,179,878 of enrollees. Excludes enrollees who never used healthcare services other than those provided or paid for by VA.

A more varied pattern emerged for the negatively phrased statements. Table 8-6 shows that lower priority groups (Priority Groups 4-6 and 7-8) identified with the need for more information on eligibility for VA services and their perceived ineligibility to receive needed services at the VA. However, the highest priority group (Priority Group 1-3) expressed that "prior dissatisfaction with VA care" was a more important reason for using other health care services compared to the lower priority groups. Younger enrollees expressed need for more information on eligibility and dissatisfaction with prior VA care experiences as reasons for using a non-VA health service. Enrollees with a household income less than $35,000 annual income were more likely to experience barriers related to navigating eligibility requirements for VA services and being dissatisfied in prior experiences with VA care, compared to higher income enrollees. Enrollees from all racial and ethnic groups were more likely to cite needing information on their eligibility as a reason for using a provider other than VHA over negative attributes such as dissatisfaction with prior experience and perceived ineligibility.

Table 8-6. Percentage of enrollees reporting on reasons for using other health care services by priority group, age, income, race, and ethnicity

	Need information on eligibility for VA services	Prior dissatisfied experiences with VA care	Perceived ineligibility to receive the needed service at VA	Total
Priority group				
P1-P3	39.2	33.7	22.0	2,548,809
P4-P6	43.4	24.0	28.6	1,268,573
P7-P8	42.0	20.5	28.9	1,362,496
Age				
<45	48.4	40.3	26.3	941,616
45-64	45.5	31.0	26.7	1,422,762
65+	36.2	22.1	24.5	2,815,500
Income				
<$35,000	43.3	29.5	27.0	1,932,179
$35,000+	39.9	26.8	24.8	2,993,988
Missing	34.9	28.5	21.2	253,711
Race (mutually exclusive)				
White non-Hispanic	39.2	25.9	24.8	3,953,323
Black non-Hispanic	45.4	30.9	27.5	533,603
American Indian/Alaska Native non-Hispanic	50.3	49.1	23.1	51,254
Asian non-Hispanic	61.9	33.7	38.8	57,987
Native Hawaiian non-Hispanic	65.2	NA	NA	17,516
Multi-racial non-Hispanic	50.6	43.0	33.6	93,936
Hispanic	47.9	35.0	26.0	362,861
Missing	31.9	33.0	22.8	109,398

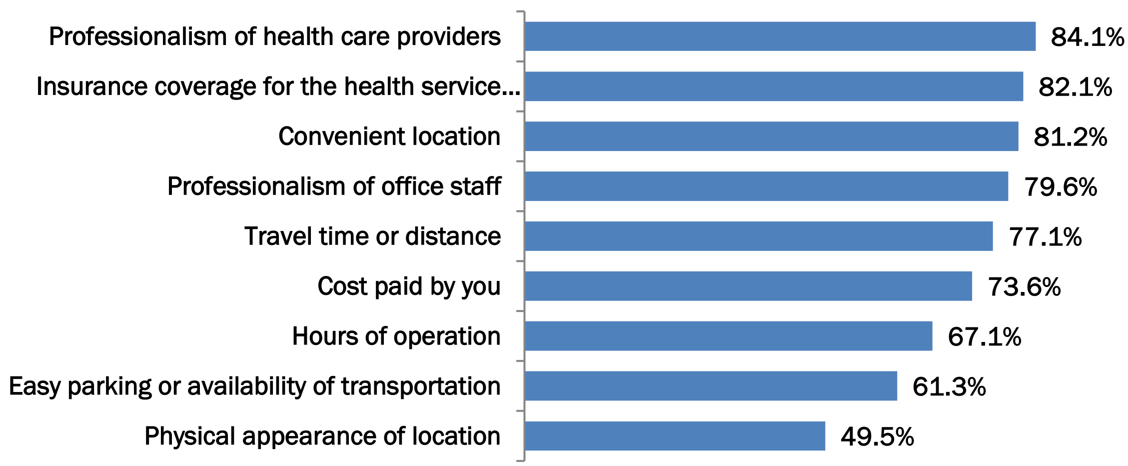
Note: Weighted *n* = 5,179,878 of enrollees. Excludes enrollees who never used healthcare services other than those provided or paid for by VA.

8.4 Factors Considered in Selecting Health Care Provider

All enrollees were asked about the factors that they consider when selecting a health care provider, how much they currently use the VA to meet their needs, how they plan to use VA in the future, and the degree of trust they have in the VA to fulfill our country's commitment to Veterans.

The question about factors considered when selecting a health care provider included nine statements. Similar to the format described in the previous section, respondents were given the option to select "yes" or "no" to the statement. Figure 8-4 displays the responses by the percent of enrollees that selected the statement as a factor that they considered in selecting a health care provider. The professionalism of healthcare providers (84%) and insurance coverage (82%) were ranked as the two most important factors for selecting a health care provider. Factors relating to accessibility and availability, such as convenient location (81%), travel time or distance (77%), hours of operation (67%), and ease of parking or transportation (61%) were also important factors.

Figure 8-4. Factors considered when selecting a health care provider



Note: Denominator is the national enrollee population. Weighted *n* = 8,345,428 enrollees.

While concerns about cost did not rise as one of the top-ranked factors of consideration, out-of-pocket costs were an important factor for choosing health care services for approximately 74 percent of enrollees. This is interesting to note in the context of the health benefits that many enrollees qualify for, such as cost-free health care services based on a compensable service-connected condition, income, or other factors. While enrollees do not pay premiums for VA care, some enrollees are required to make copayments for medical services and outpatient medications related to the treatment of nonservice-connected conditions.

8.4.1 Factors for Selecting a Health Care Provider, by Priority Group, Age, Income, Race, and Ethnicity

In general, there were few differences among the factors that enrollees considered important by demographic groups (Table 8-7). When comparing levels of agreement across the three priority groups, enrollees in Priority Group 1-3 more frequently considered professionalism of health care providers (87%), office staff (83%), and accessibility compared with the other priority groups. In terms of differences by age group, enrollees younger than 45 years of age consistently expressed greater importance on all issues besides ease of parking when selecting a health care provider. Furthermore, higher percentage of enrollees earning $35,000 or more indicated agreement that the surveyed factors were important when considering their health care providers compared to lower-income enrollees. The only indicators in which higher income enrollees expressed less concern were the ease of parking and the physical appearance of the location. Professionalism of Health Care Providers was chosen more than any other characteristic by all racial and ethnic groups.

8.5 Current and Planned Future Use of VA

According to the FY 2014-2020 Strategic Plan, the VA projects the Veteran population will change dramatically by gender, race/ethnicity, and age in the coming decades.[86] Increases in the diversity of the Veteran population will result in the need for more diverse services, outreach, communications, research, and development. To understand the needs of a changing Veteran population, it is crucial to examine enrollees' reasons for current and future use of VA care. The 2017 Survey of Enrollees asked enrollees to respond about how much they currently use VA services to meet their health care needs.

Table 8-8 shows the trending of this question over a five-year period. Consistent across previous years, nearly one-third (30%) of enrollees said that they currently use VA services to meet all of their health care needs. Furthermore, trends across 2013 and 2017 show minimal fluctuation, when responses of "all" and "most of my health care needs" are combined.

[86] http://www.va.gov/op3/docs/StrategicPlanning/VA2014-2020strategicPlan.pdf

Table 8-7. Percentage of enrollees reporting on factors considered when selecting a health care provider, by priority group, age, income, race, and ethnicity

	Profession-alism of health care providers	Insurance coverage for the health service needed	Profession-alism of office staff	Convenient location	Travel time or distance	Cost paid by you	Hours of operation	Easy parking or availability of trans-portation	Physical appearance of location	Total
Priority group										
P1-P3	86.9	82.4	83.2	83.5	79.5	72.5	71.1	61.2	51.5	3,993,805
P4-P6	82.3	79.7	77.8	79.5	75.7	75.1	64.8	61.7	48.8	2,454,604
P7-P8	80.3	84.3	74.3	78.7	73.7	74.1	61.6	61.0	46.1	1,897,020
Age										
<45	92.2	88.6	89.4	88.1	85.4	82.8	76.7	54.1	54.0	1,717,194
45-64	87.9	83.0	84.4	83.1	78.4	76.9	71.0	61.4	53.2	2,585,948
65+	78.1	87.6	72.3	77.1	72.7	67.6	60.5	64.2	45.2	4,042,286
Income										
<$35,000	81.3	77.3	77.2	78.8	75.6	73.4	65.0	63.9	50.1	3,902,506
$35,000+	87.2	87.1	82.4	84.1	79.1	74.4	69.5	59.0	49.1	4,056,193
Missing	79.5	76.1	74.5	75.8	70.9	67.5	62.8	58.5	47.2	386,729
Race (mutually exclusive)										
White non-Hispanic	83.2	82.3	78.3	80.5	76.2	73.4	64.8	59.8	45.9	6,054,334
Black non-Hispanic	86.4	80.1	83.5	82.2	78.6	73.7	73.6	64.3	60.7	1,068,999
American Indian/Alaska Native non-Hispanic	87.3	70.0	85.3	84.2	81.1	69.7	72.1	73.2	45.1	79,185
Asian non-Hispanic	86.9	80.0	84.2	92.5	83.5	76.8	75.8	70.2	62.9	107,830
Native Hawaiian non-Hispanic	94.2	81.3	90.2	91.9	91.2	75.1	88.4	72.8	69.3	29,485
Multi-racial non-Hispanic	85.4	84.9	81.3	83.0	83.7	74.9	69.1	63.0	51.8	165,374
Hispanic	86.8	85.4	82.5	83.9	79.8	75.5	74.9	67.6	61.4	657,299
Missing	84.4	78.5	78.6	78.4	73.0	70.2	65.6	57.6	47.5	182,924

Note: Denominator is the national enrollee population. Weighted *n* = 8,345,428 enrollees.

Table 8-8. Percentage of enrollees' current use of VA services to meet health care needs, by year

	2013	2014	2015	2016	2017
All of my health care needs	29.5	30.3	32.5	28.5	29.5
Most of my health care needs	15.4	15.4	14.6	19.0	18.4
Some of my health care needs	27.5	26.9	25.7	25.5	26.1
None of my health care needs	21.4	21.5	22.1	23.0	22.1
I have no health care needs	4.8	4.8	3.7	2.3	2.1
Missing	1.2	1.1	1.4	1.7	1.7
Total Enrollees	8,303,957	8,486,965	8,442,380	8,401,553	8,345,428

Table 8-9 shows the results of current use of VA services when examined by socioeconomic characteristics of enrollees. Enrollees in high priority groups (Priority Groups 1-3 and 4-6) were more likely to report that they used VA for all of their health care needs than those in the low priority group (Priority Group 7-8). Enrollees who were ages 65 or older were least likely of all the age groups to report that they used VA services to meet all of their health care needs. Additionally, enrollees with incomes less than $35,000 were more likely to use the VA for all of their health care needs (41%) compared to enrollees with incomes of $35,000 or more (19%). Black enrollees were more likely than any other racial or ethnic group to indicate they currently use VA health care for all of their needs.

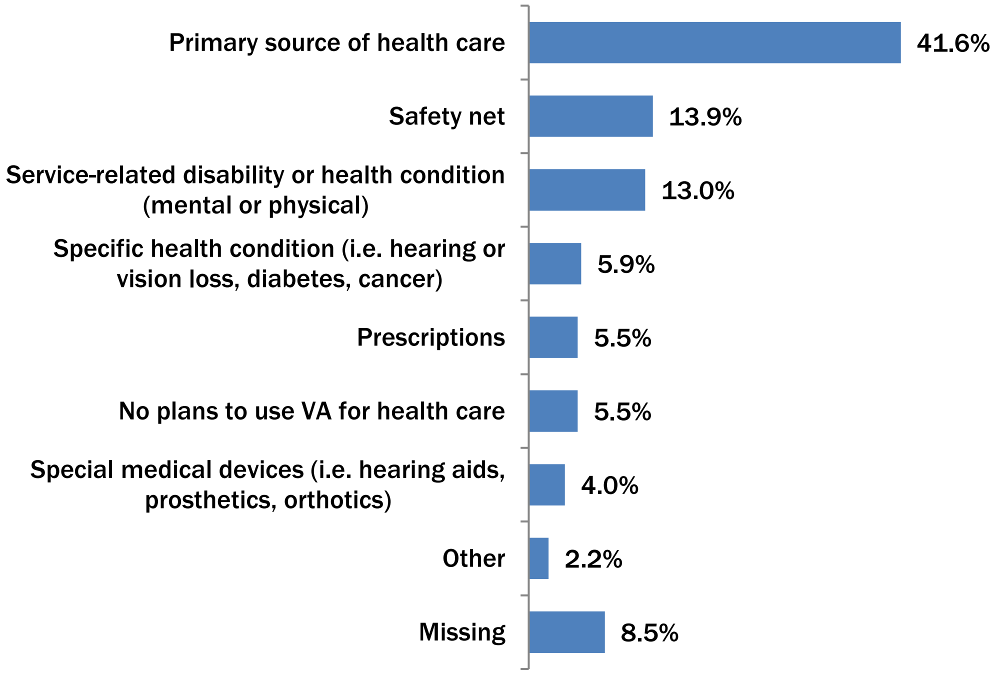
The 2017 Survey of Enrollees asked enrollees to select one option that best represented how they plan to use VA health care in the future. Items included in this question are displayed in Figure 8-5 ordered by the most to the least planned use. Forty-two percent of enrollees said that they plan to use VA health care as the primary source of health care. This was followed by 14 percent who said that they would use it as a safety net and 13 percent that they plan to use VA health care for service-related disability or physical or mental health condition. Less than six percent of enrollees plan to use VA health care for prescriptions or for special medical devices such as hearing aids, prosthetics or orthotics.

Table 8-9. Percentage of enrollees report on current use of VA services to meet health care needs, by priority, age, income, race, and ethnicity

	Have no needs	None of needs	Some needs	Most needs	All needs	Total
Priority group						
P1-P3	1.2	19.1	27.9	20.6	30.1	3,993,805
P4-P6	3.0	19.1	20.0	18.1	37.8	2,454,604
P7-P8	3.0	32.5	30.4	14.2	17.7	1,897,020
Age						
<45	3.1	20.2	23.8	22.2	30.2	1,717,194
46-64	2.4	22.5	18.6	17.1	37.8	2,585,948
65+	1.6	22.7	31.9	17.7	24.0	4,042,286
Income						
< $35,000	2.0	13.3	21.3	20.3	41.2	3,902,506
$35,000 +	2.4	30.6	30.4	16.6	18.8	4,056,193
Unknown	1.1	22.6	30.3	18.5	24.0	386,729
Race (mutually exclusive)						
White non-Hispanic	2.2	24.6	27.2	18.3	26.3	6,054,334
Black non-Hispanic	1.0	13.9	22.8	18.4	41.1	1,068,999
American Indian/Alaska Native non-Hispanic	NA	15.6	22.3	27.7	30.8	79,185
Asian non-Hispanic	NA	22.1	25.5	14.4	33.0	107,830
Native Hawaiian non-Hispanic	NA	NA	27.7	NA	37.3	29,485
Multi-racial non-Hispanic	NA	19.7	24.5	17.2	34.7	165,374
Hispanic	2.8	14.3	22.9	18.9	38.1	657,299
Missing	NA	24.1	24.3	19.1	28.8	182,924

Note: Denominator is the national enrollee population. Weighted *n* = 8,345,428 enrollees. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Figure 8-5. Percentage of enrollees by planned future use of VA health care



Note: Denominator is the national enrollee population. Weighted *n* = 8,345,428 enrollees.

Table 8-10 shows that planned future use is related to enrollee socioeconomic characteristics. In general, enrollees in Priority Group 7-8, who are 65 years and older, and those who have an annual income of $35,000 and above, were less likely to use the VA health care services. Enrollees in Priority Group 4-6 were most likely to use VA as their primary source of care (50%), while enrollees in Priority Group 7-8 were most likely to report that they plan to use VA as a "safety net" (22%). Older enrollees were also more likely to report that they will use VA for prescriptions, compared to younger enrollees. Finally, enrollees with incomes below $35,000 are more likely to use VA as their primary source of care, whereas those with incomes of $35,000 or more are more likely to report that they will use VA as a safety net (18%) and for service-related disabilities or health conditions (18%). Black, Native Hawaiian, and American Indian/Alaska Native were all more likely to indicate they planned to use VA as their primary source of health care.

Table 8-10. Percentage of enrollee report on future use of VA health care, by priority, age, income, race, and ethnicity

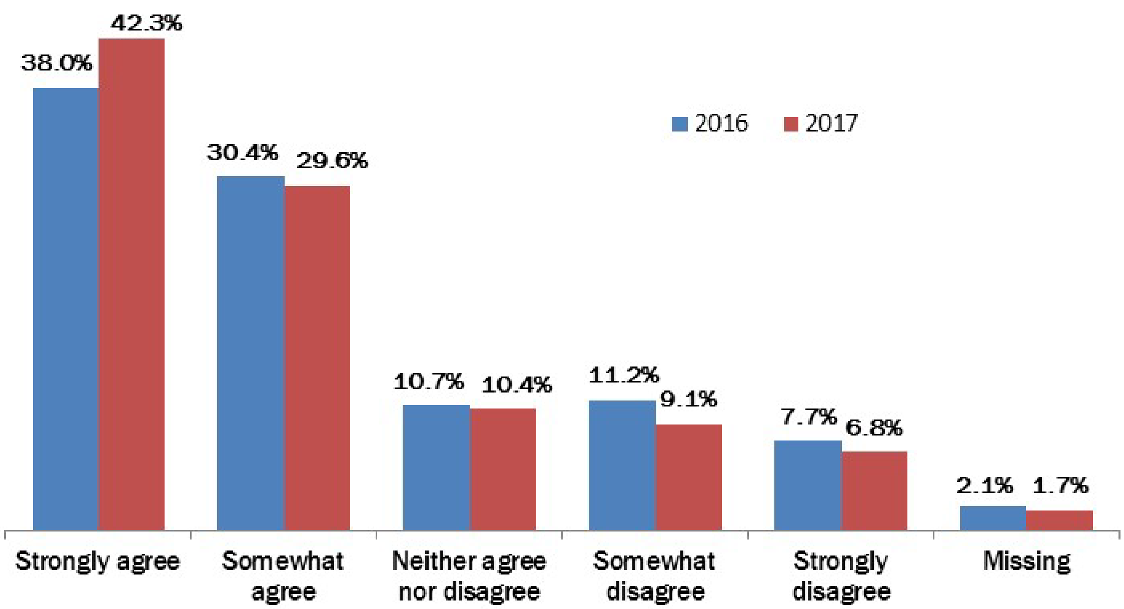
	Primary source	Safety net	Service-related health condition	Prescriptions	Specific health condition	Special medical devices	No plans to use	Total
Priority group								
P1-P3	41.7	10.0	22.0	3.7	5.3	3.8	4.1	3,993,805
P4-P6	49.9	14.0	5.6	5.1	5.9	3.2	4.9	2,454,604
P7-P8	30.4	21.9	3.8	9.7	7.0	5.6	9.0	1,897,020
Age								
<45	45.9	12.9	25.9	1.7	1.5	0.9	4.5	1,717,194
46-64	51.0	13.4	14.0	2.7	4.0	1.5	4.3	2,585,948
65+	33.7	14.5	7.0	8.8	8.9	7.0	6.6	4,042,286
Income								
< $35,000	52.2	9.8	8.3	5.6	5.5	3.1	3.6	3,902,506
$35,000 +	32.0	18.0	17.6	5.3	6.2	4.9	6.9	4,056,193
Missing	33.4	10.5	12.1	6.4	6.2	4.7	9.2	386,729
Race (mutually exclusive)								
White non-Hispanic	39.3	15.2	10.9	6.4	6.1	4.9	6.2	6,054,334
Black non-Hispanic	52.1	8.3	18.7	2.5	4.2	1.1	2.5	1,068,999
American Indian/Alaska Native non-Hispanic	47.5	15.7	16.3	NA	NA	NA	NA	79,185
Asian non-Hispanic	30.8	13.4	21.0	NA	NA	NA	NA	107,830
Native Hawaiian non-Hispanic	49.7	NA	NA	NA	NA	NA	NA	29,485
Multi-racial non-Hispanic	43.3	13.1	21.9	NA	5.2	NA	NA	165,374
Hispanic	46.6	11.8	17.3	3.2	6.0	2.1	3.5	657,299
Missing	37.5	8.7	16.4	4.4	6.0	2.4	10.6	182,924

Note: Denominator is the national enrollee population. Weighted *n* = 8,345,428 enrollees. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

8.6 Trust in VA

In the 2017 survey, enrollees rated the degree to which enrollees agreed that they “trust VA to fulfill our country’s commitment to Veterans.” As shown in Figure 9-6, 72 percent of all respondents either “strongly agreed” or “somewhat agreed” with this statement, a slight increase from 68 percent in 2016.

Figure 8-6. Percentage of enrollees’ responses to: “I trust VA to fulfill our country’s commitment to Veterans”



Note: Denominator is the national enrollee population. Weighted *n* = 8,345,428 enrollees.

Trust in the VA by Priority Group, age, and income is displayed in Table 8-11. Within each demographic group, patterns were similar to the overall response displayed in Figure 8-6. Enrollees in Priority Group 4-6 expressed the highest level of trust in the VA, while enrollees in Priority Group 1-3 expressed the most variation in VA trust. In terms of age differences, the youngest enrollees expressed the most variation in trust, while more older enrollees “strongly agreed” that they trust the VA to fulfill its commitment to Veterans at a higher rate compared to other younger enrollees. Enrollees with incomes less than $35,000 expressed more trust in the VA compared to enrollees with income over $35,000. Veterans from American Indian/Alaska Native (32%), Multi-racial (34%), and White (41%) racial groups were least likely to strongly agree that they trusted VA to carry out its mission to Veterans.

Table 8-11. Percentage of enrollees’’ responses to: “I trust VA to fulfill our country’s commitment to Veterans,” by priority, age, income, race, and ethnicity

	Strongly agree	Somewhat agree	Neither agree nor disagree	Somewhat disagree	Strongly disagree	Total
Priority group						
P1-P3	37.7	30.8	10.7	10.6	8.3	3,993,805
P4-P6	48.3	27.3	9.6	7.8	5.5	2,454,604
P7-P8	44.2	30.1	11.0	7.6	5.3	1,897,020
Age						
<45	31.0	29.0	13.1	13.6	12.0	1,717,194
46-64	41.3	31.0	9.5	9.0	7.2	2,585,948
65+	47.8	29.0	9.9	7.3	4.3	4,042,286
Income						
< $35,000	49.5	26.5	9.2	8.0	6.2	3,902,506
$35,000+	36.8	33.5	11.4	10.5	7.2	4,056,193
Missing	27.0	20.4	13.3	5.9	8.4	386,729
Race (mutually exclusive)						
White non-Hispanic	41.4	30.3	10.8	9.8	6.9	6,054,334
Black non-Hispanic	48.6	29.8	8.4	7.1	4.6	1,068,999
American Indian/Alaska Native non-Hispanic	32.1	22.9	13.0	18.4	NA	79,185
Asian non-Hispanic	47.8	24.1	19.6	NA	NA	107,830
Native Hawaiian non-Hispanic	55.1	15.9	NA	NA	NA	29,485
Multi-racial non-Hispanic	33.9	27.8	14.1	10.2	13.3	165,374
Hispanic	48.8	28.2	9.0	6.8	6.1	657,299
Missing	19.8	20.2	6.7	6.4	10.0	182,924

Note: Denominator is the national enrollee population. Weighted *n* = 8,345,428 enrollees. “NA” denotes cells that do not have enough respondents to provide a reliable estimate.

Appendix A

VISN Tables

Appendix A
VISN Tables

A.1 Demographics

Table A.1-1. Enrollees by priority group and VISN

VISN	VISN total	Priority group					
		P1-3		P4-6		P7-8	
1	323,759	140,445	43.4%	90,648	28.0%	92,665	28.6%
2	440,518	151,825	34.5%	135,527	30.8%	153,166	34.8%
4	393,149	147,125	37.4%	124,142	31.6%	121,882	31.0%
5	296,991	153,520	51.7%	77,561	26.1%	65,910	22.2%
6	499,061	268,385	53.8%	135,835	27.2%	94,841	19.0%
7	580,575	317,608	54.7%	158,874	27.4%	104,093	17.9%
8	708,711	310,749	43.8%	228,789	32.3%	169,172	23.9%
9	351,350	175,279	49.9%	107,376	30.6%	68,695	19.6%
10	642,419	273,538	42.6%	221,371	34.5%	147,510	23.0%
12	358,238	132,665	37.0%	115,453	32.2%	110,120	30.7%
15	312,841	143,272	45.8%	95,614	30.6%	73,955	23.6%
16	403,839	197,103	48.8%	122,543	30.3%	84,193	20.8%
17	677,448	380,865	56.2%	174,687	25.8%	121,896	18.0%
19	413,706	230,107	55.6%	105,611	25.5%	77,988	18.9%
20	411,251	219,092	53.3%	116,807	28.4%	75,353	18.3%
21	431,383	206,234	47.8%	131,463	30.5%	93,686	21.7%
22	694,677	336,467	48.4%	216,724	31.2%	141,486	20.4%
23	405,512	209,524	51.7%	95,578	23.6%	100,410	24.8%
National	8,345,428	3,993,805	47.8%	2,454,604	29.4%	1,897,020	22.7%

Denominator is the enrollee population by VISN.

Percentages may not total 100 percent due to rounding.

Table A.1-2. Enrollees by age and VISN

VISN	VISN total	Age group					
		<45		45-64		65+	
1	323,759	52,539	16.2%	80,361	24.8%	190,858	59.0%
2	440,518	68,750	15.6%	105,145	23.9%	266,623	60.5%
4	393,149	84,786	21.6%	99,116	25.2%	209,247	53.2%
5	296,991	58,979	19.9%	105,251	35.4%	132,761	44.7%
6	499,061	101,075	20.3%	185,629	37.2%	212,357	42.6%
7	580,575	123,305	21.2%	230,896	39.8%	226,374	39.0%
8	708,711	83,079	11.7%	236,704	33.4%	388,928	54.9%
9	351,350	66,218	18.8%	122,715	34.9%	162,417	46.2%
10	642,419	127,551	19.9%	192,741	30.0%	322,127	50.1%
12	358,238	88,499	24.7%	83,999	23.4%	185,739	51.8%
15	312,841	64,388	20.6%	92,137	29.5%	156,316	50.0%
16	403,839	87,828	21.7%	137,165	34.0%	178,847	44.3%
17	677,448	150,561	22.2%	240,388	35.5%	286,498	42.3%
19	413,706	119,673	28.9%	118,393	28.6%	175,641	42.5%
20	411,251	100,339	24.4%	124,220	30.2%	186,692	45.4%
21	431,383	91,999	21.3%	124,058	28.8%	215,326	49.9%
22	694,677	151,261	21.8%	220,842	31.8%	322,574	46.4%
23	405,512	96,363	23.8%	86,189	21.3%	222,960	55.0%
National	8,345,428	1,717,194	20.6%	2,585,948	31.0%	4,042,286	48.4%

Denominator is the enrollee population by VISN.

Percentages may not total 100 percent due to rounding.

Table A.1-3. Enrollees by income and VISN

VISN	VISN total	Income group					
		<$35,000		$35,000+		Missing	
1	331,024	147,615	45.6%	162,803	50.3%	13,340	4.1%
2	451,118	188,055	42.7%	231,010	52.4%	21,453	4.9%
4	401,424	194,565	49.5%	183,454	46.7%	15,130	3.8%
5	302,340	122,214	41.2%	159,578	53.7%	15,198	5.1%
6	496,067	236,166	47.3%	244,181	48.9%	18,715	3.7%
7	578,388	274,064	47.2%	279,041	48.1%	27,470	4.7%
8	712,664	362,386	51.1%	311,232	43.9%	35,093	5.0%
9	354,608	170,375	48.5%	161,519	46.0%	19,456	5.5%
10	647,970	342,403	53.3%	272,376	42.4%	27,639	4.3%
12	365,881	168,178	46.9%	171,636	47.9%	18,425	5.1%
15	321,928	152,877	48.9%	143,653	45.9%	16,311	5.2%
16	412,589	221,266	54.8%	170,872	42.3%	11,701	2.9%
17	672,424	291,495	43.0%	354,947	52.4%	31,005	4.6%
19	411,191	166,575	40.3%	223,681	54.1%	23,450	5.7%
20	411,786	181,954	44.2%	211,409	51.4%	17,889	4.3%
21	429,747	200,289	46.4%	217,311	50.4%	13,783	3.2%
22	688,990	309,988	44.6%	343,130	49.4%	41,559	6.0%
23	411,413	172,040	42.4%	214,362	52.9%	19,110	4.7%
National	8,401,553	3,902,506	46.8%	4,056,193	48.6%	386,729	4.6%

Denominator is the enrollee population by VISN.

Percentages may not total 100 percent due to rounding.

Table A.1-4. Enrollees by period of service and VISN

VISN	Period of service							
	WWII era		Korean War era		Between Korean and Vietnam War		Vietnam War	
1	14,171	4.40%	37,379	11.50%	44,030	13.60%	127,734	39.50%
2	29,163	6.60%	55,878	12.70%	55,386	12.60%	165,602	37.60%
4	20,996	5.30%	41,385	10.50%	53,682	13.70%	142,103	36.10%
5	7,625	2.60%	22,852	7.70%	29,015	9.80%	109,012	36.70%
6	13,145	2.60%	33,113	6.60%	47,333	9.50%	188,326	37.70%
7	14,954	2.60%	37,011	6.40%	55,092	9.50%	201,404	34.70%
8	32,813	4.60%	77,084	10.90%	96,124	13.60%	280,362	39.60%
9	7,007	2.00%	24,621	7.00%	38,814	11.00%	141,847	40.40%
10	23,038	3.60%	51,819	8.10%	67,458	10.50%	265,291	41.30%
12	14,626	4.10%	34,427	9.60%	40,049	11.20%	133,339	37.20%
15	10,757	3.40%	26,783	8.60%	35,555	11.40%	122,833	39.30%
16	11,529	2.90%	29,726	7.40%	44,958	11.10%	154,181	38.20%
17	18,195	2.70%	49,459	7.30%	74,215	11.00%	242,948	35.90%
19	11,241	2.70%	31,460	7.60%	39,806	9.60%	147,309	35.60%
20	12,950	3.10%	25,958	6.30%	44,554	10.80%	176,683	43.00%
21	17,589	4.10%	38,417	8.90%	51,380	11.90%	171,059	39.70%
22	27,032	3.90%	58,997	8.50%	74,405	10.70%	261,367	37.60%
23	15,460	3.80%	48,257	11.90%	48,256	11.90%	151,333	37.30%
National	302,290	3.62%	724,626	8.68%	940,113	11.30%	3,182,732	38.10%

Denominator is the enrollee population by VISN.

Percentages do not total 100 percent because enrollees may have responded with multiple periods of service.

WII Era includes all WWII Veterans and a small number of enrollees who reported serving prior to WWII.

Korean War Era includes all Korean War Veterans and a small number of enrollees who reported serving between WWII and the Korean War.

Table A.1-4. Enrollees by period of service and VISN (continued)

VISN	Period of service (continued)							
	Between Vietnam and Gulf War		Gulf War		Post 2001		Combat status	
1	68,535	21.20%	49,339	15.20%	63,797	19.70%	128,904	39.80%
2	79,654	18.10%	55,191	12.50%	79,809	18.10%	179,361	40.70%
4	75,226	19.10%	70,004	17.80%	83,521	21.20%	176,129	44.80%
5	96,357	32.40%	86,449	29.10%	81,551	27.50%	146,691	49.40%
6	153,595	30.80%	154,042	30.90%	146,517	29.40%	252,250	50.50%
7	196,491	33.80%	188,319	32.40%	166,240	28.60%	281,477	48.50%
8	205,224	29.00%	164,427	23.20%	134,084	18.90%	306,662	43.30%
9	97,747	27.80%	94,133	26.80%	87,925	25.00%	174,775	49.70%
10	153,229	23.90%	130,063	20.20%	137,441	21.40%	313,095	48.70%
12	61,867	17.30%	59,090	16.50%	92,945	25.90%	162,516	45.40%
15	74,606	23.80%	70,316	22.50%	79,859	25.50%	158,377	50.60%
16	110,471	27.40%	103,939	25.70%	115,605	28.60%	196,678	48.70%
17	203,782	30.10%	193,558	28.60%	204,322	30.20%	344,911	50.90%
19	104,707	25.30%	122,657	29.60%	133,730	32.30%	222,870	53.90%
20	109,014	26.50%	108,376	26.40%	102,315	24.90%	211,026	51.30%
21	106,629	24.70%	90,973	21.10%	105,290	24.40%	214,021	49.60%
22	192,941	27.80%	160,653	23.10%	183,994	26.50%	324,044	46.60%
23	72,029	17.80%	71,042	17.50%	101,048	24.90%	190,333	46.90%
National	2,162,106	25.90%	1,972,570	23.60%	2,099,993	25.20%	3,984,121	47.70%

Denominator is the enrollee population by VISN.

Percentages do not total 100 percent because enrollees may have responded with multiple periods of service.

Table A.1-5. Enrollees by race and VISN

VISN	Race – mutually exclusive							
	White non-Hispanic		Black non-Hispanic		American Indian/Alaska Native non-Hispanic		Asian non-Hispanic	
1	285,966	88.3%	13,546	4.2%	NA	NA	NA	NA
2	328,831	74.6%	54,662	12.4%	NA	NA	NA	NA
4	329,512	83.8%	38,019	9.7%	NA	NA	NA	NA
5	197,121	66.4%	66,333	22.3%	NA	NA	NA	NA
6	323,172	64.8%	119,250	23.9%	NA	NA	NA	NA
7	331,768	57.1%	176,940	30.5%	NA	NA	NA	NA
8	478,864	67.6%	83,993	11.9%	NA	NA	NA	NA
9	280,268	79.8%	49,257	14.0%	NA	NA	NA	NA
10	544,639	84.8%	55,941	8.7%	NA	NA	NA	NA
12	281,028	78.4%	46,269	12.9%	NA	NA	NA	NA
15	264,199	84.5%	26,916	8.6%	NA	NA	NA	NA
16	273,326	67.7%	91,116	22.6%	NA	NA	NA	NA
17	406,928	60.1%	114,894	17.0%	NA	NA	NA	NA
19	319,082	77.1%	23,888	5.8%	4,243	1.0%	NA	NA
20	351,147	85.4%	9,584	2.3%	6,904	1.7%	NA	NA
21	276,992	64.2%	31,576	7.3%	NA	NA	29,140	6.8%
22	409,863	59.0%	61,640	8.9%	9,846	1.4%	33,914	4.9%
23	371,627	91.6%	5,174	1.3%	NA	NA	NA	NA
National	6,054,334	72.5%	1,068,999	12.8%	79,185	0.9%	107,830	1.3%

Denominator is the enrollee population by VISN.

"NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.1-5. Enrollees by race and VISN (continued)

VISN	Race – mutually exclusive (continued)							
	Native Hawaiian non-Hispanic		Multi-racial non-Hispanic		Hispanic		Missing	
1	NA	NA	6,962	2.2%	10,235	3.2%	5,580	1.7%
2	NA	NA	5,316	1.2%	37,506	8.5%	7,553	1.7%
4	NA	NA	NA	NA	9,122	2.3%	NA	NA
5	NA	NA	7,989	2.7%	7,504	2.5%	10,743	3.6%
6	NA	NA	5,979	1.2%	33,097	6.6%	8,413	1.7%
7	NA	NA	15,926	2.7%	16,374	2.8%	17,068	2.9%
8	NA	NA	NA	NA	118,269	16.7%	14,363	2.0%
9	NA	NA	NA	NA	4,611	1.3%	NA	NA
10	NA	NA	12,506	1.9%	10,844	1.7%	13,419	2.1%
12	NA	NA	NA	NA	18,533	5.2%	6,088	1.7%
15	NA	NA	NA	NA	9,516	3.0%	4,440	1.4%
16	NA	NA	9,393	2.3%	11,003	2.7%	9,749	2.4%
17	NA	NA	8,523	1.3%	119,419	17.6%	11,630	1.7%
19	NA	NA	15,159	3.7%	34,437	8.3%	8,387	2.0%
20	NA	NA	11,570	2.8%	16,297	4.0%	10,953	2.7%
21	8,104	1.9%	19,429	4.5%	55,937	13.0%	7,128	1.7%
22	NA	NA	15,460	2.2%	137,332	19.8%	22,658	3.3%
23	NA	NA	4,700	1.2%	7,263	1.8%	9,411	2.3%
National	29,485	0.4%	165,374	2.0%	657,299	7.9%	182,924	2.2%

Denominator is the enrollee population by VISN.

Percentages do not total 100 percent because enrollees may have responded with multiple periods of service.

"NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.1-6. Enrollees by employment status and VISN

VISN	Employment status			
	Full-time employed		Part-time employed	
1	80,128	24.7%	27,304	8.4%
2	108,593	24.7%	30,588	6.9%
4	99,061	25.2%	35,273	9.0%
5	109,496	36.9%	19,308	6.5%
6	174,092	34.9%	39,091	7.8%
7	179,921	31.0%	39,923	6.9%
8	155,013	21.9%	57,008	8.0%
9	109,498	31.2%	23,054	6.6%
10	171,511	26.7%	52,319	8.1%
12	101,506	28.3%	26,943	7.5%
15	93,838	30.0%	25,611	8.2%
16	115,650	28.6%	33,536	8.3%
17	238,553	35.2%	44,860	6.6%
19	153,790	37.2%	32,857	7.9%
20	128,231	31.2%	29,662	7.2%
21	101,699	23.6%	36,919	8.6%
22	203,306	29.3%	44,121	6.4%
23	128,105	31.6%	38,445	9.5%
National	2,451,992	29.4%	636,823	7.6%

Denominator is the enrollee population by VISN.

Percentages may not total 100 percent due to rounding.

Table A.1-6. Enrollees by employment status and VISN (continued)

VISN	Employment status (continued)							
	Unemployed		Not in the labor force		Missing		Unemployment rate	
1	12,466	3.9%	199,,602	61.7%	4,259	1.3%	12,466	10.4%
2	15,774	3.6%	278156	63.1%	7,407	1.7%	15,774	10.2%
4	10,482	2.7%	242,955	61.8%	5,378	1.4%	10,482	7.2%
5	13,319	4.5%	150,324	50.6%	4,545	1.5%	13,319	9.4%
6	14,838	3.0%	264,751	53.0%	6,289	1.3%	14,838	6.5%
7	16,030	2.8%	331,901	57.2%	12,799	2.2%	16,030	6.8%
8	26,993	3.8%	448,512	63.3%	21,185	3.0%	26,993	11.3%
9	NA	NA	204,823	58.3%	6,741	1.9%	NA	NA
10	18,068	2.8%	391,435	60.9%	9,086	1.4%	18,068	7.5%
12	20,859	5.8%	203,038	56.7%	5,891	1.6%	20,859	14.0%
15	NA	NA	182,341	58.3%	3,847	1.2%	NA	NA
16	15,193	3.8%	232,976	57.7%	6,484	1.6%	15,193	9.2%
17	36,683	5.4%	343,989	50.8%	13,362	2.0%	36,683	11.5%
19	13,117	3.2%	205,717	49.7%	8,225	2.0%	13,117	6.6%
20	15,688	3.8%	232,055	56.4%	5,615	1.4%	15,688	9.0%
21	21,953	5.1%	261,191	60.5%	9,622	2.2%	21,953	13.7%
22	37,237	5.4%	390,729	56.2%	19,284	2.8%	37,237	13.1%
23	9,704	2.4%	220,166	54.3%	9,093	2.2%	9,704	5.5%
National	312,842	3.8%	4,784,660	57.3%	159,113	1.9%	312,842	9.2%

Denominator is the enrollee population by VISN.

Percentages may not total 100 percent due to rounding.

"NA" denotes cells that do not have enough respondents to provide a reliable estimate.

A.2 Health Benefits

Table A.2-1. Enrollees by health insurance coverage, priority group, and VISN

VISN	Medicare						Medicaid					
	P1-3		P4-6		P7-8		P1-3		P4-6		P7-8	
1	68,941	49.1%	55,627	61.4%	64,938	70.1%	9,816	7.0%	13,760	15.2%	6,091	6.6%
2	67,445	44.4%	85,127	62.8%	113,128	73.9%	9,850	6.5%	20,092	14.8%	8,299	5.4%
4	62,238	42.3%	79,415	64.0%	87,071	71.4%	6,798	4.6%	14,667	11.8%	6,604	5.4%
5	58,623	38.2%	38,654	49.8%	41,489	62.9%	9,365	6.1%	9,344	12.0%	4,179	6.3%
6	97,495	36.3%	75,391	55.5%	60,361	63.6%	10,840	4.0%	10,719	7.9%	5,050	5.3%
7	116,118	36.6%	83,825	52.8%	61,803	59.4%	NA	NA	11,905	7.5%	4,501	4.3%
8	157,973	50.8%	121,105	52.9%	122,571	72.5%	14,947	4.8%	26,178	11.4%	10,143	6.0%
9	77,498	44.2%	55,813	52.0%	43,682	63.6%	5,654	3.2%	11,322	10.5%	NA	NA
10	128,598	47.0%	110,937	50.1%	98,388	66.7%	15,115	5.5%	34,886	15.8%	7,521	5.1%
12	53,076	40.0%	61,228	53.0%	75,823	68.9%	5,243	4.0%	12,636	10.9%	NA	NA
15	66,593	46.5%	55,842	58.4%	49,794	67.3%	6,050	4.2%	8,361	8.7%	NA	NA
16	86,366	43.8%	65,264	53.3%	50,231	59.7%	9,644	4.9%	17,369	14.2%	NA	NA
17	140,665	36.9%	87,571	50.1%	72,995	59.9%	10,977	2.9%	16,795	9.6%	5,331	4.4%
19	93,097	40.5%	48,407	45.8%	44,005	56.4%	9,758	4.2%	6,476	6.1%	2,283	2.9%
20	93,475	42.7%	63,849	54.7%	46,437	61.6%	7,442	3.4%	12,834	11.0%	2,390	3.2%
21	82,210	39.9%	76,414	58.1%	58,715	62.7%	11,836	5.7%	18,215	13.9%	3,324	3.5%
22	127,622	37.9%	112,572	51.9%	86,294	61.0%	16,637	4.9%	25,005	11.5%	NA	NA
23	105,634	50.4%	49,041	51.3%	69,038	68.8%	10,212	4.9%	11,026	11.5%	4,673	4.7%
National	1,683,666	42.2%	1,326,082	54.0%	1,246,76	65.7%	180,567	4.5%	281,591	11.5%	86,759	4.6%

Denominator is the enrollee population by priority group and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple coverage. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.2-1. Enrollees by health insurance coverage, priority group, and VISN (continued)

VISN	TRICARE						Private Insurance					
	P1-3		P4-6		P7-8		P1-3		P4-6		P7-8	
1	23,587	16.8%	6,005	6.6%	8,126	8.8%	51,620	36.8%	21,897	24.2%	32,989	35.6%
2	26,453	17.4%	7,513	5.5%	6,195	4.0%	58,921	38.8%	33,451	24.7%	69,263	45.2%
4	32,184	21.9%	10,635	8.6%	8,681	7.1%	58,411	39.7%	28,257	22.8%	41,678	34.2%
5	53,710	35.0%	5,981	7.7%	9,442	14.3%	49,635	32.3%	19,978	25.8%	26,187	39.7%
6	106,777	39.8%	14,893	11.0%	12,521	13.2%	70,001	26.1%	28,923	21.3%	30,676	32.3%
7	115,174	36.3%	14,150	8.9%	17,506	16.8%	89,224	28.1%	27,611	17.4%	33,689	32.4%
8	115,377	37.1%	16,730	7.3%	12,914	7.6%	78,537	25.3%	35,723	15.6%	46,673	27.6%
9	58,569	33.4%	10,676	9.9%	10,420	15.2%	51,506	29.4%	22,590	21.0%	18,492	26.9%
10	53,196	19.4%	6,807	3.1%	15,144	10.3%	87,538	32.0%	39,808	18.0%	54,809	37.2%
12	29,662	22.4%	NA	NA	NA	NA	40,311	30.4%	26,708	23.1%	33,264	30.2%
15	40,899	28.5%	9,415	9.8%	6,369	8.6%	45,197	31.5%	14,989	15.7%	25,447	34.4%
16	76,198	38.7%	12,610	10.3%	13,612	16.2%	55,345	28.1%	18,942	15.5%	25,344	30.1%
17	152,880	40.1%	13,593	7.8%	13,765	11.3%	112,371	29.5%	38,646	22.1%	42,861	35.2%
19	88,106	38.3%	9,939	9.4%	11,818	15.2%	63,441	27.6%	23,791	22.5%	22,705	29.1%
20	73,561	33.6%	12,240	10.5%	10,257	13.6%	72,734	33.2%	25,434	21.8%	22,681	30.1%
21	63,772	30.9%	9,394	7.1%	10,105	10.8%	61,884	30.0%	25,907	19.7%	34,646	37.0%
22	104,014	30.9%	21,649	10.0%	15,767	11.1%	90,588	26.9%	35,884	16.6%	43,045	30.4%
23	44,998	21.5%	9,752	10.2%	5,335	5.3%	68,412	32.7%	25,811	27.0%	32,091	32.0%
National	1,259,114	31.5%	196,874	8.0%	192,592	10.2%	1,205,676	30.2%	494,349	20.1%	636,542	33.6%

Denominator is the enrollee population by priority group and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple coverage. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.2-1. Enrollees by health insurance coverage, priority group, and VISN (continued)

VISN	No coverage					
	P1-3		P4-6		P7-8	
1	24,817	17.7%	17,648	19.5%	7,767	8.4%
2	32,937	21.7%	29,083	21.5%	12,112	7.9%
4	22,892	15.6%	21,423	17.3%	13,079	10.7%
5	30,489	19.9%	19,969	25.7%	6,249	9.5%
6	55,568	20.7%	32,206	23.7%	10,862	11.5%
7	69,298	21.8%	52,524	33.1%	16,473	15.8%
8	49,195	15.8%	74,843	32.7%	24,322	14.4%
9	27,542	15.7%	29,998	27.9%	11,246	16.4%
10	57,428	21.0%	66,357	30.0%	14,122	9.6%
12	30,578	23.0%	31,298	27.1%	16,465	15.0%
15	26,597	18.6%	25,414	26.6%	6,561	8.9%
16	33,447	17.0%	36,995	30.2%	13,242	15.7%
17	74,026	19.4%	54,532	31.2%	20,398	16.7%
19	37,991	16.5%	33,114	31.4%	12,885	16.5%
20	38,163	17.4%	25,759	22.1%	13,580	18.0%
21	47,639	23.1%	32,972	25.1%	13,373	14.3%
22	81,082	24.1%	68,067	31.4%	24,439	17.3%
23	28,184	13.5%	20,074	21.0%	10,796	10.8%
National	767,872	19.2%	672,279	27.4%	247,971	13.1%

Denominator is the enrollee population by priority group and VISN.

Percentages do not total 100 percent because enrollees may have responded with multiple coverage.

Table A.2-2. Enrollees by health insurance coverage, age, and VISN

VISN	Medicare						Medicaid					
	<45		45-64		65+		<45		45-64		65+	
1	NA	NA	12,177	15.2%	174,994	91.7%	NA	NA	NA	NA	20,399	10.7%
2	NA	NA	21,161	20.1%	243,706	91.4%	NA	NA	9,713	9.2%	25,006	9.4%
4	NA	NA	27,624	27.9%	195,310	93.3%	NA	NA	NA	NA	15,045	7.2%
5	NA	NA	14,949	14.2%	120,938	91.1%	NA	NA	8,997	8.5%	9,699	7.3%
6	NA	NA	34,195	18.4%	194,578	91.6%	NA	NA	9,772	5.3%	15,487	7.3%
7	NA	NA	45,668	19.8%	208,139	91.9%	NA	NA	NA	NA	15,933	7.0%
8	NA	NA	42,571	18.0%	350,160	90.0%	NA	NA	11,308	4.8%	32,626	8.4%
9	NA	NA	28,453	23.2%	147,489	90.8%	NA	NA	6,623	5.4%	11,514	7.1%
10	NA	NA	35,538	18.4%	294,385	91.4%	NA	NA	16,148	8.4%	26,594	8.3%
12	NA	NA	15,441	18.4%	170,258	91.7%	NA	NA	6,525	7.8%	11,068	6.0%
15	NA	NA	21,839	23.7%	144,293	92.3%	NA	NA	NA	NA	8,932	5.7%
16	NA	NA	32,070	23.4%	161,662	90.4%	NA	NA	10,044	7.3%	15,707	8.8%
17	NA	NA	36,418	15.1%	256,850	89.7%	NA	NA	9,093	3.8%	18,383	6.4%
19	NA	NA	17,016	14.4%	159,655	90.9%	NA	NA	5,451	4.6%	10,422	5.9%
20	NA	NA	26,832	21.6%	169,612	90.9%	NA	NA	8,625	6.9%	10,610	5.7%
21	NA	NA	23,105	18.6%	186,101	86.4%	NA	NA	12,082	9.7%	13,608	6.3%
22	NA	NA	38,672	17.5%	286,703	88.9%	NA	NA	17,269	7.8%	25,514	7.9%
23	NA	NA	15,539	18.0%	206,465	92.6%	NA	NA	4,930	5.7%	14,783	6.6%
National	95,949	5.6%	489,265	18.9%	3,671,297	90.8%	82,598	4.8%	164,988	6.4%	301,331	7.5%

Denominator is the enrollee population by age and VISN.

Percentages do not total 100 percent because enrollees may have responded with multiple coverage.

"NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.2-2. Enrollees by health insurance coverage, age, and VISN (continued)

VISN	TRICARE						Private insurance					
	<45		45-64		65+		<45		45-64		65+	
1	NA	NA	16,794	20.9%	15,722	8.2%	NA	NA	33,994	42.3%	46,943	24.6%
2	NA	NA	15,134	14.4%	16,509	6.2%	29,517	42.9%	44,534	42.4%	87,584	32.8%
4	NA	NA	16,606	16.8%	17,764	8.5%	42,494	50.1%	36,770	37.1%	49,083	23.5%
5	NA	NA	36,606	34.8%	26,051	19.6%	NA	NA	38,783	36.8%	36,741	27.7%
6	NA	NA	73,109	39.4%	34,194	16.1%	41,625	41.2%	48,628	26.2%	39,347	18.5%
7	NA	NA	77,785	33.7%	51,212	22.6%	53,608	43.5%	55,269	23.9%	41,648	18.4%
8	NA	NA	68,678	29.0%	66,542	17.1%	NA	NA	63,258	26.7%	66,614	17.1%
9	NA	NA	37,260	30.4%	33,730	20.8%	37,757	57.0%	29,653	24.2%	25,178	15.5%
10	NA	NA	35,552	18.4%	29,222	9.1%	51,142	40.1%	59,672	31.0%	71,341	22.1%
12	NA	NA	9,459	11.3%	11,761	6.3%	29,154	32.9%	33,668	40.1%	37,462	20.2%
15	NA	NA	21,200	23.0%	21,952	14.0%	NA	NA	33,340	36.2%	28,954	18.5%
16	NA	NA	41,996	30.6%	40,663	22.7%	NA	NA	32,057	23.4%	28,960	16.2%
17	NA	NA	86,044	35.8%	62,045	21.7%	62,593	41.6%	73,357	30.5%	57,928	20.2%
19	NA	NA	43,580	36.8%	31,837	18.1%	47,339	39.6%	33,019	27.9%	29,579	16.8%
20	NA	NA	34,795	28.0%	40,287	21.6%	50,067	49.9%	41,689	33.6%	29,094	15.6%
21	NA	NA	33,057	26.6%	33,095	15.4%	33,111	36.0%	38,635	31.1%	50,690	23.5%
22	NA	NA	63,321	28.7%	58,395	18.1%	55,065	36.4%	60,315	27.3%	54,137	16.8%
23	NA	NA	18,396	21.3%	18,428	8.3%	47,875	49.7%	35,650	41.4%	42,789	19.2%
National	309,798	18.0%	729,373	28.2%	609,410	15.1%	720,205	41.9%	792,290	30.6%	824,072	20.4%

Denominator is the enrollee population by age and VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.2-2. Enrollees by health insurance coverage, age, and VISN (continued)

VISN	No coverage					
	<45		45-64		65+	
1	NA	NA	23,592	29.4%	8,846	4.6%
2	31,228	45.4%	28,706	27.3%	14,198	5.3%
4	NA	NA	27,393	27.6%	8,025	3.8%
5	27,917	47.3%	21,880	20.8%	6,910	5.2%
6	NA	NA	53,734	28.9%	10,830	5.1%
7	NA	NA	72,200	31.3%	14,654	6.5%
8	NA	NA	84,401	35.7%	28,283	7.3%
9	NA	NA	36,448	29.7%	11,424	7.0%
10	49,579	38.9%	68,255	35.4%	20,072	6.2%
12	36,694	41.5%	28,358	33.8%	13,290	7.2%
15	NA	NA	26,690	29.0%	8,748	5.6%
16	NA	NA	44,323	32.3%	11,627	6.5%
17	57,688	38.3%	70,737	29.4%	20,532	7.2%
19	35,915	30.0%	35,727	30.2%	12,348	7.0%
20	31,830	31.7%	32,727	26.3%	12,945	6.9%
21	NA	NA	37,274	30.0%	21,827	10.1%
22	75,254	49.8%	71,356	32.3%	26,978	8.4%
23	NA	NA	21,978	25.5%	11,685	5.2%
National	639,119	37.2%	785,780	30.4%	263,223	6.5%

Denominator is the enrollee population by age and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple coverage. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.2-3. Enrollees by health insurance coverage, income, and VISN

VISN	Medicare						Medicaid					
	<$35,000		$35,000+		Missing		<$35,000		$35,000+		Missing	
1	97,505	66.1%	81,694	50.2%	10,307	77.3%	21,839	14.8%	7,086	4.4%	NA	NA
2	122,910	65.4%	126,851	54.9%	15,939	74.3%	24,944	13.3%	11,786	5.1%	NA	NA
4	126,231	64.9%	91,150	49.7%	11,342	75.0%	21,719	11.2%	NA	NA	NA	NA
5	63,490	51.9%	67,598	42.4%	7,677	50.5%	14,588	11.9%	7,258	4.5%	NA	NA
6	122,910	52.0%	99,118	40.6%	11,219	59.9%	17,547	7.4%	8,088	3.3%	NA	NA
7	136,736	49.9%	109,406	39.2%	15,605	56.8%	16,782	6.1%	7,513	2.7%	NA	NA
8	205,971	56.8%	172,370	55.4%	23,308	66.4%	37,910	10.5%	10,048	3.2%	NA	NA
9	102,250	60.0%	66,128	40.9%	8,615	44.3%	16,388	9.6%	NA	NA	NA	NA
10	190,587	55.7%	129,480	47.5%	17,856	64.6%	49,156	14.4%	6,208	2.3%	NA	NA
12	98,436	58.5%	82,575	48.1%	9,116	49.5%	17,417	10.4%	NA	NA	NA	NA
15	90,006	58.9%	70,736	49.2%	11,487	70.4%	11,039	7.2%	NA	NA	NA	NA
16	120,855	54.6%	73,816	43.2%	7,190	61.4%	25,775	11.6%	NA	NA	NA	NA
17	147,139	50.5%	139,405	39.3%	14,687	47.4%	19,839	6.8%	11,014	3.1%	NA	NA
19	88,325	53.0%	88,232	39.4%	8,952	38.2%	10,801	6.5%	7,221	3.2%	NA	NA
20	102,707	56.4%	89,829	42.5%	11,225	62.7%	17,933	9.9%	3,941	1.9%	NA	NA
21	104,419	52.1%	104,534	48.1%	8,387	60.8%	27,947	14.0%	4,494	2.1%	NA	NA
22	161,115	52.0%	144,636	42.2%	20,737	49.9%	34,434	11.1%	8,472	2.5%	NA	NA
23	114,654	66.6%	98,549	46.0%	10,510	55.0%	20,361	11.8%	4,386	2.0%	NA	NA
National	2,196,248	56.3%	1,836,106	45.3%	224,158	58.0%	406,417	10.4%	116,897	2.9%	25,604	6.6%

Denominator is the enrollee population by income and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple coverage. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.2-3. Enrollees by health insurance coverage, income, and VISN (continued)

VISN	TRICARE						Private insurance					
	<$35,000		$35,000+		Missing		<$35,000		$35,000+		Missing	
1	7,535	5.1%	27,990	17.2%	NA	NA	28,924	19.6%	73,313	45.0%	NA	NA
2	7,340	3.9%	31,060	13.4%	NA	NA	39,111	20.8%	113,700	49.2%	8,824	41.1%
4	13,413	6.9%	36,301	19.8%	NA	NA	34,257	17.6%	89,051	48.5%	5,039	NA
5	11,429	9.4%	53,458	33.5%	NA	NA	17,963	14.7%	72,891	45.7%	4,946	32.5%
6	25,773	10.9%	101,979	41.8%	NA	NA	29,108	12.3%	96,949	39.7%	NA	NA
7	31,866	11.6%	106,123	38.0%	8,840	NA	38,572	14.1%	105,382	37.8%	NA	NA
8	30,133	8.3%	104,858	33.7%	10,030	NA	59,602	16.4%	93,921	30.2%	NA	NA
9	20,878	12.3%	52,005	32.2%	NA	NA	27,595	16.2%	61,623	38.2%	NA	NA
10	16,847	4.9%	53,752	19.7%	NA	NA	51,833	15.1%	122,083	44.8%	8,239	29.8%
12	13,806	8.2%	20,366	11.9%	NA	NA	19,469	11.6%	75,777	44.2%	NA	NA
15	16,521	10.8%	37,728	26.3%	NA	NA	22,711	14.9%	56,224	39.1%	6,698	41.1%
16	35,850	16.2%	65,295	38.2%	NA	10.9%	33,271	15.0%	62,216	36.4%	NA	NA
17	41,867	14.4%	129,225	36.4%	9,145	29.5%	45,210	15.5%	143,521	40.4%	NA	NA
19	20,351	12.2%	82,143	36.7%	NA	31.4%	26,516	15.9%	78,037	34.9%	NA	NA
20	25,152	13.8%	66,030	31.2%	NA	27.3%	24,790	13.6%	90,902	43.0%	NA	NA
21	22,616	11.3%	56,688	26.1%	NA	28.8%	21,948	11.0%	97,159	44.7%	NA	NA
22	34,599	11.2%	94,445	27.5%	12,386	29.8%	36,665	11.8%	124,565	36.3%	NA	NA
23	8,602	5.0%	50,533	23.6%	NA	NA	23,945	13.9%	93,827	43.8%	8,542	44.7%
National	384,580	9.9%	1,169,977	28.8%	94,023	24.3%	581,489	14.9%	1,651,139	40.7%	103,939	26.9%

Denominator is the enrollee population by income and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple coverage. “NA” denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.2-3. Enrollees by health insurance coverage, income, and VISN (continued)

VISN	No coverage					
	<$35,000		$35,000+		Missing	
1	32,302	21.9%	17,410	10.7%	NA	NA
2	46,239	24.6%	26,202	11.3%	NA	NA
4	41,340	21.2%	15,142	8.3%	NA	NA
5	40,684	33.3%	13,678	8.6%	NA	NA
6	80,535	34.1%	15,501	6.3%	NA	NA
7	102,154	37.3%	32,986	11.8%	NA	NA
8	110,080	30.4%	31,026	10.0%	NA	NA
9	43,272	25.4%	21,372	13.2%	NA	NA
10	100,221	29.3%	32,463	11.9%	NA	NA
12	49,495	29.4%	26,506	15.4%	NA	NA
15	44,613	29.2%	13,142	9.1%	NA	NA
16	61,404	27.8%	20,566	12.0%	NA	NA
17	94,677	32.5%	46,769	13.2%	NA	NA
19	52,428	31.5%	25,606	11.4%	NA	NA
20	50,662	27.8%	25,487	12.1%	NA	NA
21	64,950	32.4%	26,346	12.1%	NA	NA
22	105,347	34.0%	59,467	17.3%	NA	NA
23	40,408	23.5%	16,560	7.7%	NA	NA
National	1,160,809	29.7%	466,228	11.5%	61,086	15.8%

Denominator is the enrollee population by income and VISN. Percentages do not total 100 percent because enrollees may have responded with multiple coverage. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

A.3 Prescription Drug Coverage and Use

Table A.3-1. Enrollees with private insurance drug coverage, by priority group, age, income, and VISN

VISN	Priority group						Age group					
	1-3		4-6		7-8		<45		45-64		65+	
1	44,480	86.2%	18,417	84.1%	23,797	72.1%	NA	NA	29,967	88.2%	32,702	69.7%
2	47,981	81.4%	28,105	84.0%	53,806	77.7%	NA	NA	36,142	81.2%	66,156	75.5%
4	52,946	90.6%	22,379	79.2%	33,826	81.2%	40,349	95.0%	32,277	87.8%	36,525	74.4%
5	42,464	85.6%	15,322	76.7%	21,334	81.5%	NA	NA	33,452	86.3%	28,518	77.6%
6	58,230	83.2%	21,584	74.6%	24,963	81.4%	NA	NA	36,412	74.9%	29,012	73.7%
7	83,352	93.4%	21,220	76.9%	27,895	82.8%	51,897	96.8%	50,110	90.7%	30,460	73.1%
8	63,251	80.5%	28,478	79.7%	37,353	80.0%	NA	NA	53,411	84.4%	48,568	72.9%
9	47,802	92.8%	19,615	86.8%	14,944	80.8%	NA	NA	25,797	87.0%	19,135	76.0%
10	68,147	77.8%	31,594	79.4%	42,763	78.0%	42,856	83.8%	48,559	81.4%	51,089	71.6%
12	32,796	81.4%	23,739	88.9%	26,170	78.7%	27,171	93.2%	28,287	84.0%	27,248	72.7%
15	34,312	75.9%	12,338	82.3%	21,716	85.3%	NA	NA	27,825	83.5%	21,455	74.1%
16	46,634	84.3%	13,568	71.6%	18,793	74.2%	NA	NA	24,003	74.9%	20,855	72.0%
17	95,476	85.0%	29,500	76.3%	34,768	81.1%	53,185	85.0%	63,244	86.2%	43,315	74.8%
19	51,893	81.8%	18,590	78.1%	18,891	83.2%	40,691	86.0%	26,876	81.4%	21,807	73.7%
20	61,210	84.2%	20,054	78.9%	18,175	80.1%	43,114	86.1%	33,871	81.2%	22,454	77.2%
21	54,052	87.3%	23,544	90.9%	29,408	84.9%	29,518	89.1%	35,596	92.1%	41,889	82.6%
22	79,017	87.2%	25,898	72.2%	33,836	78.6%	NA	NA	51,336	85.1%	43,579	80.5%
23	57,572	84.2%	22,166	85.9%	25,557	79.6%	46,379	96.9%	29,777	83.5%	29,139	68.1%
National	1,021,615	84.7%	396,113	80.1%	507,994	79.8%	644,877	89.5%	666,939	84.2%	613,906	74.5%

Denominator is the enrollee population with Private Insurance by priority group, age, or income, and by VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.3-1. Enrollees with private insurance drug coverage, by priority group, age, income, and VISN (continued)

VISN	Income group					
	<$35,000		$35,000+		Missing	
1	20,171	69.7%	62,563	85.3%	NA	NA
2	28,570	73.0%	93,521	82.3%	7,802	88.4%
4	27,227	79.5%	78,839	88.5%	NA	NA
5	12,232	68.1%	62,740	86.1%	4,147	83.8%
6	20,645	70.9%	81,098	83.7%	NA	NA
7	29,694	77.0%	96,970	92.0%	NA	NA
8	44,979	75.5%	79,036	84.2%	NA	NA
9	22,652	82.1%	56,598	91.8%	NA	NA
10	39,742	76.7%	97,432	79.8%	NA	NA
12	13,509	69.4%	64,953	85.7%	NA	NA
15	15,519	68.3%	49,040	87.2%	NA	NA
16	27,215	81.8%	48,113	77.3%	NA	NA
17	35,517	78.6%	120,198	83.7%	NA	NA
19	16,801	63.4%	68,018	87.2%	NA	NA
20	14,257	57.5%	80,939	89.0%	NA	NA
21	17,149	78.1%	86,991	89.5%	NA	NA
22	22,648	61.8%	109,000	87.5%	NA	NA
23	15,751	65.8%	82,548	88.0%	NA	NA
National	424,275	73.0%	1,418,596	85.9%	82,850	79.7%

Denominator is the enrollee population with Private Insurance by priority group, age, or income, and by VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.3-2. Enrollees with Medicare Part D drug coverage, by priority group, age, income, and VISN

VISN	Priority group						Age group					
	P1-3		P4-6		P7-8		<45		45-64		65+	
1	15,389	22.3%	18,144	32.6%	22,868	35.2%	NA	NA	NA	NA	53,214	30.4%
2	16,067	23.8%	32,565	38.3%	51,843	45.8%	NA	NA	6,987	33.0%	92,766	38.1%
4	17,890	28.7%	28,736	36.2%	35,766	41.1%	NA	NA	11,741	42.5%	68,657	35.2%
5	10,444	17.8%	10,375	26.8%	11,382	27.4%	NA	NA	3,931	26.3%	27,492	22.7%
6	28,780	29.5%	26,676	35.4%	22,896	37.9%	NA	NA	11,941	34.9%	66,411	34.1%
7	21,913	18.9%	29,311	35.0%	25,269	40.9%	NA	NA	11,467	25.1%	65,026	31.2%
8	43,838	27.8%	49,050	40.5%	47,229	38.5%	NA	NA	NA	NA	130,782	37.3%
9	19,805	25.6%	19,715	35.3%	16,918	38.7%	NA	NA	10,674	37.5%	44,713	30.3%
10	29,850	23.2%	34,901	31.5%	34,071	34.6%	NA	NA	8,149	22.9%	90,028	30.6%
12	12,710	23.9%	18,254	29.8%	27,770	36.6%	NA	NA	NA	NA	55,442	32.6%
15	14,697	22.1%	17,400	31.2%	19,022	38.2%	NA	NA	NA	NA	42,225	29.3%
16	20,310	23.5%	22,462	34.4%	18,138	36.1%	NA	NA	9,074	28.3%	49,415	30.6%
17	30,917	22.0%	33,861	38.7%	29,825	40.9%	NA	NA	7,596	20.9%	84,661	33.0%
19	24,628	26.5%	12,770	26.4%	15,416	35.0%	NA	NA	5,615	33.0%	44,013	27.6%
20	16,441	17.6%	19,309	30.2%	14,439	31.1%	NA	NA	4,806	17.9%	44,118	26.0%
21	21,402	26.0%	28,931	37.9%	22,200	37.8%	NA	NA	NA	NA	64,102	34.4%
22	42,365	33.2%	44,100	39.2%	42,742	49.5%	NA	NA	12,500	32.3%	116,706	40.7%
23	29,927	28.3%	14,346	29.3%	20,670	29.9%	NA	NA	NA	NA	59,615	28.9%
National	417,372	24.8%	460,906	34.8%	478,464	38.4%	NA	NA	135,162	27.6%	1,199,386	32.7%

Denominator is the enrollee population with Medicare by priority group, age, or income, and by VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.3-2. Enrollees with Medicare part D drug coverage, by priority group, income, and VISN (continued)

VISN	Income group					
	<$35,000		$35,000+		Missing	
1	28,993	29.7%	24,962	30.6%	NA	NA
2	46,554	37.9%	47,145	37.2%	6,776	42.5%
4	46,589	36.9%	31,836	34.9%	NA	NA
5	16,355	25.8%	14,358	21.2%	NA	NA
6	45,459	37.0%	29,599	29.9%	NA	NA
7	41,737	30.5%	30,490	27.9%	NA	NA
8	74,521	36.2%	57,769	33.5%	7,826	33.6%
9	34,211	33.5%	19,864	30.0%	NA	NA
10	54,480	28.6%	37,878	29.3%	6,464	36.2%
12	26,288	26.7%	28,938	35.0%	NA	NA
15	24,851	27.6%	23,310	33.0%	NA	NA
16	38,957	32.2%	19,941	27.0%	NA	NA
17	48,810	33.2%	40,279	28.9%	NA	NA
19	26,060	29.5%	23,516	26.7%	3,238	36.2%
20	24,173	23.5%	22,649	25.2%	NA	NA
21	35,475	34.0%	34,309	32.8%	NA	NA
22	68,390	42.4%	52,647	36.4%	8,169	39.4%
23	31,930	27.8%	29,716	30.2%	3,297	31.4%
National	713,834	32.5%	569,204	31.0%	73,704	32.9%

Denominator is the enrollee population with Medicare by priority group, age, or income, and by VISN. “NA” denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.3-3. Enrollee use of prescription medications, by VISN

VISN	Prescription medications in the last 30 days									
	0		1-2		3-4		5 or more		Missing	
1	59,256	18.3%	63,076	19.5%	64,256	19.8%	125,086	38.6%	12,084	3.7%
2	67,679	15.4%	80,745	18.3%	92,199	20.9%	185,602	42.1%	14,293	3.2%
4	58,340	14.8%	72,800	18.5%	79,273	20.2%	167,921	42.7%	14,814	3.8%
5	43,912	14.8%	51,976	17.5%	66,691	22.5%	122,741	41.3%	11,671	3.9%
6	60,524	12.1%	110,340	22.1%	99,375	19.9%	207,785	41.6%	21,038	4.2%
7	79,110	13.6%	86,443	14.9%	117,541	20.2%	271,528	46.8%	25,952	4.5%
8	102,116	14.4%	101,125	14.3%	135,511	19.1%	336,508	47.5%	33,451	4.7%
9	42,820	12.2%	54,553	15.5%	64,214	18.3%	175,450	49.9%	14,313	4.1%
10	96,083	15.0%	130,092	20.3%	118,515	18.4%	276,226	43.0%	21,503	3.3%
12	71,830	20.1%	71,544	20.0%	63,542	17.7%	141,034	39.4%	10,288	2.9%
15	45,680	14.6%	50,264	16.1%	54,310	17.4%	152,387	48.7%	10,200	3.3%
16	53,230	13.2%	71,024	17.6%	72,403	17.9%	195,346	48.4%	11,837	2.9%
17	99,212	14.6%	109,571	16.2%	143,007	21.1%	303,382	44.8%	22,276	3.3%
19	68,786	16.6%	79,579	19.2%	82,476	19.9%	172,417	41.7%	10,449	2.5%
20	84,466	20.5%	84,526	20.6%	70,658	17.2%	159,435	38.8%	12,167	3.0%
21	77,315	17.9%	88,383	20.5%	85,884	19.9%	165,629	38.4%	14,172	3.3%
22	141,945	20.4%	124,536	17.9%	127,254	18.3%	278,514	40.1%	22,428	3.2%
23	73,070	18.0%	73,102	18.0%	85,822	21.2%	160,774	39.6%	12,743	3.1%
National	1,325,375	15.8%	1,503,679	18.0%	1,622,931	19.5%	3,597,765	43.1%	295,678	3.5%

Denominator is the enrollee population by VISN. Percentages may not total 100 percent due to rounding.

Table A.3-4. Enrollee use of prescription medications obtained from VA, by VISN

VISN	Prescription medications in the last 30 days from VA									
	0		1-2		3-4		5 or more		Missing	
1	101,868	40.4%	44,880	17.8%	35,106	13.9%	67,042	26.6%	NA	NA
2	171,679	47.9%	49,425	13.8%	48,367	13.5%	86,846	24.2%	NA	NA
4	132,201	41.3%	55,268	17.3%	51,584	16.1%	78,252	24.5%	NA	NA
5	104,551	43.3%	31,743	13.1%	36,875	15.3%	66,686	27.6%	NA	NA
6	151,211	36.2%	80,739	19.3%	59,081	14.2%	123,990	29.7%	NA	NA
7	165,263	34.8%	71,272	15.0%	80,575	16.9%	155,451	32.7%	NA	NA
8	189,342	33.0%	94,818	16.5%	87,472	15.3%	195,892	34.2%	NA	NA
9	99,531	33.8%	49,391	16.8%	41,629	14.1%	100,991	34.3%	NA	NA
10	162,099	30.9%	106,530	20.3%	82,125	15.6%	167,823	32.0%	6,257	1.2%
12	83,473	30.2%	62,144	22.5%	41,354	15.0%	84,467	30.6%	NA	NA
15	90,081	35.1%	40,541	15.8%	37,008	14.4%	86,693	33.7%	NA	NA
16	108,580	32.1%	63,304	18.7%	49,579	14.6%	113,048	33.4%	NA	NA
17	201,739	36.3%	90,085	16.2%	88,596	15.9%	170,468	30.7%	NA	NA
19	102,448	30.6%	67,892	20.3%	68,945	20.6%	92,911	27.8%	2,276	0.7%
20	114,604	36.4%	60,498	19.2%	43,383	13.8%	93,031	29.6%	NA	NA
21	130,282	38.3%	65,582	19.3%	50,756	14.9%	88,145	25.9%	5,130	1.5%
22	208,082	39.2%	100,964	19.0%	75,501	14.2%	139,583	26.3%	NA	NA
23	96,375	30.1%	60,066	18.8%	61,341	19.2%	97,955	30.6%	3,963	1.2%
National	2,413,410	35.9%	1,195,141	17.8%	1,039,276	15.5%	2,009,274	29.9%	67,275	1.0%

Denominator is the enrollee population who reported using prescription medications in the last 30 days by VISN. Percentages may not total 100 percent due to rounding. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

A.4 Cigarette Smoking

Table A.4-1. Enrollees who ever smoked, by priority group, age, income, and VISN

VISN	Priority group						Age group					
	P1-3		P4-6		P7-8		<45		45-64		65+	
1	81,674	58.2%	57,244	63.1%	58,895	63.6%	NA	NA	45,559	56.7%	130,481	68.4%
2	89,266	58.8%	91,590	67.6%	90,364	59.0%	31,922	46.4%	60,533	57.6%	178,765	67.0%
4	81,106	55.1%	80,707	65.0%	77,678	63.7%	36,113	42.6%	63,259	63.8%	140,119	67.0%
5	77,642	50.6%	51,719	66.7%	35,286	53.5%	29,401	49.8%	47,335	45.0%	87,911	66.2%
6	146,453	54.6%	85,368	62.8%	55,345	58.4%	44,414	43.9%	96,940	52.2%	145,812	68.7%
7	179,780	56.6%	104,562	65.8%	64,010	61.5%	NA	NA	130,123	56.4%	151,012	66.7%
8	197,453	63.5%	131,626	57.5%	110,457	65.3%	34,501	41.5%	150,644	63.6%	254,390	65.4%
9	109,767	62.6%	76,865	71.6%	44,963	65.5%	40,903	61.8%	74,334	60.6%	116,357	71.6%
10	174,065	63.6%	160,248	72.4%	88,015	59.7%	74,665	58.5%	126,166	65.5%	221,497	68.8%
12	77,597	58.5%	74,044	64.1%	70,060	63.6%	42,855	48.4%	53,224	63.4%	125,622	67.6%
15	88,894	62.0%	64,626	67.6%	45,729	61.8%	34,775	54.0%	54,776	59.5%	109,696	70.2%
16	121,124	61.5%	84,174	68.7%	51,522	61.2%	56,038	63.8%	79,681	58.1%	121,101	67.7%
17	209,019	54.9%	104,470	59.8%	69,805	57.3%	69,476	46.1%	127,418	53.0%	186,400	65.1%
19	129,377	56.2%	58,601	55.5%	43,460	55.7%	47,658	39.8%	67,219	56.8%	116,562	66.4%
20	133,077	60.7%	78,981	67.6%	47,983	63.7%	56,785	56.6%	72,836	58.6%	130,420	69.9%
21	118,815	57.6%	84,662	64.4%	53,776	57.4%	46,977	51.1%	72,266	58.3%	138,009	64.1%
22	173,523	51.6%	122,302	56.4%	78,621	55.6%	57,991	38.3%	101,931	46.2%	214,524	66.5%
23	134,068	64.0%	67,075	70.2%	62,098	61.8%	53,298	55.3%	54,239	62.9%	155,704	69.8%
National	2,322,700	58.2%	1,578,864	64.3%	1,148,067	60.5%	846,763	49.3%	1,478,483	57.2%	2,724,383	67.4%

Denominator is the enrollee population by priority group, age, or income, and by VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.4-1. Enrollees who ever smoked, by priority group, age, income, and VISN (continued)

VISN	Income group					
	<$35,000		$35,000+		Missing	
1	99,358	67.3%	91,318	56.1%	7,136	53.5%
2	127,889	68.0%	132,276	57.3%	11,055	51.5%
4	128,629	66.1%	102,849	56.1%	8,013	53.0%
5	84,023	68.8%	72,177	45.2%	8,447	55.6%
6	148,138	62.7%	129,587	53.1%	9,442	50.5%
7	186,331	68.0%	147,697	52.9%	14,323	52.1%
8	234,806	64.8%	185,121	59.5%	19,610	55.9%
9	117,722	69.1%	103,882	64.3%	9,991	51.4%
10	246,954	72.1%	156,262	57.4%	19,112	69.1%
12	109,164	64.9%	100,154	58.4%	12,384	67.2%
15	100,785	65.9%	88,156	61.4%	10,306	63.2%
16	144,183	65.2%	104,388	61.1%	8,250	70.5%
17	182,345	62.6%	185,359	52.2%	15,590	50.3%
19	107,801	64.7%	112,958	50.5%	10,678	45.5%
20	126,337	69.4%	124,768	59.0%	8,935	49.9%
21	132,132	66.0%	118,404	54.5%	6,717	48.7%
22	183,248	59.1%	173,855	50.7%	17,343	41.7%
23	124,006	72.1%	130,267	60.8%	8,967	46.9%
National	2,583,851	66.2%	2,259,480	55.7%	206,300	53.3%

Denominator is the enrollee population by priority group, age, or income, and by VISN. “NA” denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.4-2. Enrollees who are current smokers, by priority group, age, income, and VISN

VISN	Priority group						Age group					
	P1-3		P4-6		P7-8		<45		45-64		65+	
1	18,534	22.7%	15,067	26.3%	7,422	12.6%	NA	NA	16,252	35.7%	15,725	12.1%
2	21,641	24.2%	26,803	29.3%	7,606	8.4%	NA	NA	20,577	34.0%	24,200	13.5%
4	25,484	31.4%	27,857	34.5%	14,536	18.7%	NA	NA	25,400	40.2%	20,120	14.4%
5	21,726	28.0%	14,901	28.8%	4,724	13.4%	NA	NA	17,601	37.2%	13,961	15.9%
6	26,692	18.2%	26,001	30.5%	12,622	22.8%	NA	NA	30,362	31.3%	20,512	14.1%
7	51,712	28.8%	37,259	35.6%	14,935	23.3%	NA	NA	50,775	39.0%	21,798	14.4%
8	43,537	22.0%	43,396	33.0%	18,626	16.9%	NA	NA	49,022	32.5%	33,756	13.3%
9	32,221	29.4%	26,064	33.9%	8,242	18.3%	NA	NA	32,800	44.1%	18,469	15.9%
10	45,331	26.0%	55,013	34.3%	15,321	17.4%	NA	NA	53,711	42.6%	38,445	17.4%
12	25,271	32.6%	28,844	39.0%	13,558	19.4%	NA	NA	24,304	45.7%	21,571	17.2%
15	25,920	29.2%	23,522	36.4%	6,618	14.5%	NA	NA	24,725	45.1%	18,259	16.6%
16	43,652	36.0%	33,751	40.1%	11,369	22.1%	NA	NA	33,026	41.4%	19,681	16.3%
17	63,626	30.4%	30,818	29.5%	12,529	17.9%	NA	NA	48,754	38.3%	23,816	12.8%
19	33,151	25.6%	17,630	30.1%	8,015	18.4%	NA	NA	24,501	36.4%	16,699	14.3%
20	29,848	22.4%	20,926	26.5%	6,804	14.2%	NA	NA	22,455	30.8%	19,477	14.9%
21	34,954	29.4%	23,200	27.4%	8,980	16.7%	NA	NA	27,804	38.5%	18,222	13.2%
22	44,600	25.7%	37,302	30.5%	11,617	14.8%	NA	NA	46,675	45.8%	27,610	12.9%
23	30,810	23.0%	23,931	35.7%	11,916	19.2%	NA	NA	20,444	37.7%	19,618	12.6%
National	618,710	26.6%	512,286	32.4%	195,439	17.0%	365,307	43.1%	569,189	38.5%	391,939	14.4%

Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life by VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.4-2. Enrollees who are current smokers, by priority group, age, income, and VISN (continued)

VISN	Income group					
	<$35,000		$35,000+		Missing	
1	24,160	24.3%	16,084	17.6%	NA	NA
2	35,819	28.0%	18,369	13.9%	NA	NA
4	49,362	38.4%	17,682	17.2%	NA	NA
5	26,913	32.0%	13,504	18.7%	NA	NA
6	42,233	28.5%	21,634	16.7%	NA	NA
7	66,921	35.9%	34,507	23.4%	NA	NA
8	72,773	31.0%	28,451	15.4%	NA	NA
9	37,915	32.2%	26,893	25.9%	NA	NA
10	71,846	29.1%	37,628	24.1%	NA	NA
12	39,285	36.0%	25,230	25.2%	NA	NA
15	36,979	36.7%	17,925	20.3%	NA	NA
16	60,755	42.1%	26,110	25.0%	NA	NA
17	63,218	34.7%	41,916	22.6%	NA	NA
19	32,030	29.7%	23,062	20.4%	NA	NA
20	30,878	24.4%	25,279	20.3%	NA	NA
21	42,289	32.0%	23,783	20.1%	NA	NA
22	60,035	32.8%	30,397	17.5%	NA	NA
23	31,064	25.1%	33,645	25.8%	NA	NA
National	824,474	31.9%	462,099	20.5%	39,862	19.3%

Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life by VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.4-3. Enrollees who are former smokers, by priority group, age, income, and VISN

VISN	Priority group						Age group					
	P1-3		P4-6		P7-8		<45		45-64		65+	
1	61,781	75.6%	39,473	68.9%	48,538	82.4%	12,726	58.5%	27,490	60.3%	109,576	84.0%
2	63,726	71.3%	62,211	67.9%	79,621	88.1%	19,194	60.1%	37,194	61.4%	149,170	83.4%
4	53,731	66.3%	50,473	62.5%	60,908	78.4%	13,756	38.1%	36,657	57.9%	114,699	81.9%
5	54,347	70.0%	35,422	68.5%	29,404	83.3%	18,775	63.9%	28,299	59.8%	72100	82.0%
6	116,332	79.4%	57,378	67.2%	41,512	75.0%	29,973	67.5%	63,741	65.8%	121,509	83.3%
7	125,022	69.5%	63,321	60.6%	47,879	74.8%	35,883	53.4%	75,506	58.0%	124,833	82.7%
8	152,674	77.3%	85,644	65.1%	89,353	80.9%	11,720	34.0%	99,754	66.2%	216,197	85.0%
9	74,148	67.6%	48,723	63.4%	34,472	76.7%	25,646	62.7%	37,619	50.6%	94,078	80.9%
10	125,408	72.1%	99,377	62.0%	69,115	78.5%	51,156	68.5%	66,103	52.4%	176,642	79.7%
12	51,166	65.9%	42,485	57.4%	55,645	79.4%	21,058	49.1%	26,807	50.4%	101,430	80.7%
15	59,886	67.4%	39,232	60.7%	37,912	82.9%	20,343	58.5%	27,143	49.6%	89,545	81.6%
16	76,866	63.5%	47,572	56.5%	39,539	76.7%	19,973	35.6%	44,243	55.5%	99,761	82.4%
17	141,656	67.8%	69,618	66.6%	56,251	80.6%	35,073	50.5%	75,390	59.2%	157,062	84.3%
19	93,683	72.4%	39,313	67.1%	34,442	79.3%	30,062	63.1%	41,270	61.4%	96,106	82.5%
20	99,416	74.7%	55,580	70.4%	40,185	83.8%	40,281	70.9%	47,602	65.4%	107,297	82.3%
21	83,102	69.9%	59,892	70.7%	42,816	79.6%	25,365	54.0%	42,919	59.4%	117,525	85.2%
22	127,419	73.4%	82,504	67.5%	65,777	83.7%	38,758	66.8%	54,024	53.0%	182,919	85.3%
23	100,749	75.1%	41,512	61.9%	49,084	79.0%	25,777	48.4%	32,568	60.0%	132,999	85.4%
National	1,661,112	71.5%	1,019,729	64.6%	922,454	80.4%	475,518	56.2%	864,329	58.5%	2,263,448	83.1%

Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life by VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.4-3. Enrollees who are former smokers, by priority group, age, income, and VISN (continued)

VISN	Income group					
	<$35,000		$35,000+		Missing	
1	71,608	72.1%	72,011	78.9%	6,174	86.5%
2	88,550	69.2%	108,142	81.8%	8,866	80.2%
4	75,093	58.4%	83,045	80.7%	6,975	87.0%
5	54,894	65.3%	56,884	78.8%	7,396	87.6%
6	102,290	69.1%	105,126	81.1%	7,806	82.7%
7	113,028	60.7%	111,830	75.7%	11,364	79.3%
8	157,029	66.9%	155,889	84.2%	14,753	75.2%
9	74,262	63.1%	75,352	72.5%	7,727	77.3%
10	165,718	67.1%	115,662	74.0%	12,520	65.5%
12	67,400	61.7%	72,669	72.6%	9,226	74.5%
15	60,256	59.8%	67,624	76.7%	9,150	88.8%
16	80,251	55.7%	77,384	74.1%	6,343	76.9%
17	114,283	62.7%	140,433	75.8%	12,809	82.2%
19	72,469	67.2%	87,996	77.9%	6,974	65.3%
20	91,148	72.1%	96,795	77.6%	7,237	81.0%
21	87,738	66.4%	92,470	78.1%	5,600	83.4%
22	119,565	65.2%	141,879	81.6%	14,256	82.2%
23	89,726	72.4%	94,648	72.7%	6,971	77.7%
National	1,685,308	65.2%	1,755,838	77.7%	162,148	78.6%

Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life by VISN. “NA” denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.4-4. Enrollees who are unsuccessful quitters, by priority group, age, income, and VISN

VISN	Priority group						Age group					
	P1-3		P4-6		P7-8		<45		45-64		65+	
1	13,424	72.4%	8,485	56.3%	NA	NA	NA	NA	9,244	56.9%	8,986	57.1%
2	14,297	66.1%	18,453	68.8%	NA	NA	NA	NA	12,064	58.6%	13,668	56.5%
4	16,055	63.0%	15,987	57.4%	NA	NA	NA	NA	15,783	62.1%	10,090	50.2%
5	10,935	50.3%	8,297	55.7%	2,822	59.7%	NA	NA	10,466	59.5%	5,908	42.3%
6	17,372	65.1%	15,581	59.9%	7,230	57.3%	NA	NA	15,469	50.9%	12,015	58.6%
7	32,286	62.4%	21,648	58.1%	NA	NA	NA	NA	28,802	56.7%	9,318	42.7%
8	23,364	53.7%	26,458	61.0%	10,131	54.4%	NA	NA	31,699	64.7%	16,017	47.4%
9	20,793	64.5%	12,842	49.3%	3,291	39.9%	NA	NA	18,737	57.1%	9,016	48.8%
10	28,647	63.2%	29,941	54.4%	8,454	55.2%	NA	NA	27,799	51.8%	19,710	51.3%
12	14,980	59.3%	15,840	54.9%	NA	NA	NA	NA	14,761	60.7%	11,701	54.2%
15	13,109	50.6%	10,283	43.7%	NA	NA	NA	NA	10,611	42.9%	7,923	43.4%
16	28,664	65.7%	22,443	66.5%	5,541	48.7%	NA	NA	19,916	60.3%	10,470	53.2%
17	44,719	70.3%	14,311	46.4%	5,396	43.1%	NA	NA	25,790	52.9%	9,490	39.8%
19	18,583	56.1%	8,907	50.5%	4,119	51.4%	NA	NA	10,405	42.5%	7,824	46.9%
20	12,060	40.4%	10,826	51.7%	3,453	50.8%	NA	NA	9,875	44.0%	9,711	49.9%
21	26,458	75.7%	9,700	41.8%	4,922	54.8%	NA	NA	12,353	44.4%	9,255	50.8%
22	30,086	67.5%	18,838	50.5%	5,962	51.3%	NA	NA	26,145	56.0%	14,278	51.7%
23	15,932	51.7%	12,674	53.0%	6,674	56.0%	NA	NA	9,811	48.0%	8,248	42.0%
National	381,763	61.7%	281,514	55.0%	102,114	52.2%	262,031	71.7%	309,731	54.4%	193,629	49.4%

Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life and currently smoke, by VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.4-4. Enrollees who are unsuccessful quitters, by priority group, age, income, and VISN (continued)

VISN	Income group					
	<$35,000		$35,000+		Missing	
1	14,651	60.6%	11,230	69.8%	NA	NA
2	22,936	64.0%	11,918	64.9%	NA	NA
4	30,319	61.4%	11,873	67.1%	NA	NA
5	15,133	56.2%	6,422	47.6%	NA	NA
6	26,153	61.9%	13,525	62.5%	NA	NA
7	36,154	54.0%	21,636	62.7%	NA	NA
8	43,731	60.1%	14,386	50.6%	NA	NA
9	20,373	53.7%	15,463	57.5%	NA	NA
10	41,827	58.2%	20,843	55.4%	NA	NA
12	23,212	59.1%	14,838	58.8%	NA	NA
15	17,236	46.6%	8,704	48.6%	NA	NA
16	41,550	68.4%	14,030	53.7%	NA	NA
17	36,570	57.8%	26,886	64.1%	NA	NA
19	16,672	52.1%	11,487	49.8%	NA	NA
20	14,688	47.6%	11,174	44.2%	NA	NA
21	22,783	53.9%	18,108	76.1%	NA	NA
22	36,102	60.1%	17,913	58.9%	NA	NA
23	12,232	39.4%	21,706	64.5%	NA	NA
National	472,322	57.3%	272,143	58.9%	20,927	52.5%

Denominator is the enrollee population who reported that they smoked at least 100 cigarettes in their entire life and currently smoke, by VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

A.5 Health Status

Table A.5-1. Enrollees' perceived health status, by priority group and VISN

VISN	Priority groups 1-3			
	Excellent/Very good/Good		Fair/Poor	
1	104,643	74.5%	35,113	25.0%
2	109,245	72.0%	41,702	27.5%
4	106,357	72.3%	39,250	26.7%
5	108,512	70.7%	42,523	27.7%
6	182,611	68.0%	85,274	31.8%
7	208,203	65.6%	108,574	34.2%
8	224,136	72.1%	84,507	27.2%
9	110,754	63.2%	61,013	34.8%
10	190,448	69.6%	80,059	29.3%
12	95,270	71.8%	36,638	27.6%
15	96,437	67.3%	45,650	31.9%
16	126,243	64.0%	70,079	35.6%
17	259,520	68.1%	118,462	31.1%
19	173,859	75.6%	55,539	24.1%
20	172,784	78.9%	45,243	20.7%
21	147,737	71.6%	56,287	27.3%
22	229,877	68.3%	103,874	30.9%
23	164,285	78.4%	43,990	21.0%
National	2,810,920	70.4%	1,153,777	28.9%

Denominator is the enrollee population by priority group and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question.

Table A.5-1. Enrollees' perceived health status, by priority group and VISN (continued)

VISN	Priority groups 4-6			
	Excellent/Very good/Good		Fair/Poor	
1	69,598	76.8%	19,550	21.6%
2	99,333	73.3%	35,350	26.1%
4	98,689	79.5%	24,815	20.0%
5	58,861	75.9%	17,514	22.6%
6	98,977	72.9%	35,745	26.3%
7	111,936	70.5%	44,515	28.0%
8	174,037	76.1%	52,125	22.8%
9	78,530	73.1%	27,267	25.4%
10	166,162	75.1%	53,201	24.0%
12	98,019	84.9%	16,725	14.5%
15	67,232	70.3%	27,427	28.7%
16	82,463	67.3%	39,605	32.3%
17	126,484	72.4%	47,043	26.9%
19	82,519	78.1%	21,974	20.8%
20	85,494	73.2%	31,049	26.6%
21	96,985	73.8%	33,565	25.5%
22	170,366	78.6%	45,370	20.9%
23	76,318	79.8%	18,021	18.9%
National	1,842,002	75.0%	590,860	24.1%

Denominator is the enrollee population by priority group and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question.

Table A.5-1. Enrollees' perceived health status, by priority group and VISN (continued)

VISN	Priority groups 7-8			
	Excellent/Very good/Good		Fair/Poor	
1	77,955	84.1%	14,245	15.4%
2	125,763	82.1%	26,116	17.1%
4	94,660	77.7%	26,438	21.7%
5	53,067	80.5%	12,479	18.9%
6	74,859	78.9%	19,315	20.4%
7	79,582	76.5%	23,696	22.8%
8	139,364	82.4%	29,538	17.5%
9	54,079	78.7%	14,362	20.9%
10	118,275	80.2%	26,922	18.3%
12	94,369	85.7%	15,025	13.6%
15	61,469	83.1%	11,981	16.2%
16	67,342	80.0%	16,094	19.1%
17	98,545	80.8%	22,755	18.7%
19	63,288	81.1%	14,141	18.1%
20	64,535	85.6%	10,336	13.7%
21	76,692	81.9%	15,832	16.9%
22	120,823	85.4%	20,209	14.3%
23	82,916	82.6%	16,868	16.8%
National	1,547,582	81.6%	336,351	17.7%

Denominator is the enrollee population by priority group and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question.

Table A.5-2. Enrollees with ADL and IADL disabilities, by priority group and VISN

VISN	Priority groups 1-3							
	IADL but no ADL disability		1 or 2 ADL disabilities		3, 4 or 5 ADL disabilities		Missing	
1	31,005	22.1%	14,647	10.4%	4,519	3.2%	90,274	64.3%
2	39,239	25.8%	16,466	10.8%	4,989	3.3%	91,132	60.0%
4	35,379	24.0%	15,939	10.8%	8,622	5.9%	87,185	59.3%
5	29,755	19.4%	14,743	9.6%	8,681	5.7%	100,341	65.4%
6	64,081	23.9%	34,780	13.0%	16,230	6.0%	153,294	57.1%
7	87,424	27.5%	30,946	9.7%	18,741	5.9%	180,497	56.8%
8	72,422	23.3%	37,096	11.9%	24,229	7.8%	177,001	57.0%
9	43,853	25.0%	26,289	15.0%	8,563	4.9%	96,574	55.1%
10	71,117	26.0%	25,339	9.3%	10,707	3.9%	166,375	60.8%
12	29,916	22.6%	8,976	6.8%	7,686	5.8%	86,087	64.9%
15	34,344	24.0%	11,942	8.3%	6,627	4.6%	90,359	63.1%
16	51,369	26.1%	21,092	10.7%	10,164	5.2%	114,478	58.1%
17	80,900	21.2%	43,273	11.4%	24,722	6.5%	231,970	60.9%
19	57,571	25.0%	18,238	7.9%	6,567	2.9%	147,731	64.2%
20	45,132	20.6%	13,467	6.1%	7,300	3.3%	153,194	69.9%
21	42,105	20.4%	21,014	10.2%	10,672	5.2%	132,442	64.2%
22	97,448	29.0%	23,205	6.9%	14,014	4.2%	201,799	60.0%
23	35,355	16.9%	16,224	7.7%	4,966	2.4%	152,980	73.0%
National	948,416	23.7%	393,674	9.9%	198,000	5.0%	2,453,714	61.4%

Denominator is the enrollee population by priority group and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question.

Table A.5-2. Enrollees with ADL and IADL disabilities, by priority group and VISN (continued)

VISN	Priority groups 4-6							
	IADL but no ADL disability		1 or 2 ADL disabilities		3, 4 or 5 ADL disabilities		Missing	
1	16,838	18.6%	5,627	6.2%	NA	NA	65,560	72.3%
2	35,257	26.0%	12,028	8.9%	7,390	5.5%	80,853	59.7%
4	26,044	21.0%	8,634	7.0%	NA	NA	83,948	67.6%
5	15,357	19.8%	4,426	5.7%	2,595	3.3%	55,183	71.1%
6	32,721	24.1%	7,783	5.7%	6,760	5.0%	88,572	65.2%
7	41,592	26.2%	12,682	8.0%	8,864	5.6%	95,736	60.3%
8	61,998	27.1%	13,932	6.1%	15,024	6.6%	137,835	60.2%
9	22,969	21.4%	7,696	7.2%	NA	NA	73,059	68.0%
10	48,310	21.8%	17,790	8.0%	5,286	2.4%	149,985	67.8%
12	25,655	22.2%	4,592	4.0%	NA	NA	82,063	71.1%
15	19,740	20.6%	9,670	10.1%	NA	NA	62,801	65.7%
16	33,459	27.3%	14,270	11.6%	4,679	3.8%	70,135	57.2%
17	43,689	25.0%	13,630	7.8%	7,835	4.5%	109,533	62.7%
19	22,935	21.7%	6,372	6.0%	2,584	2.4%	73,720	69.8%
20	29,732	25.5%	9,753	8.3%	NA	NA	74,098	63.4%
21	31,764	24.2%	9,839	7.5%	4,528	3.4%	85,331	64.9%
22	39,274	18.1%	17,401	8.0%	8,274	3.8%	151,775	70.0%
23	16,029	16.8%	4,848	5.1%	2,758	2.9%	71,943	75.3%
National	563,363	23.0%	180,973	7.4%	98,140	4.0%	1,612,128	65.7%

Denominator is the enrollee population by priority group and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question.
"NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.5-2. Enrollees with ADL and IADL disabilities, by priority group and VISN (continued)

VISN	Priority groups 7-8							
	IADL but no ADL disability		1 or 2 ADL disabilities		3, 4 or 5 ADL disabilities		Missing	
1	18,998	20.5%	NA	NA	NA	NA	70,062	75.6%
2	25,886	16.9%	8,411	5.5%	3,361	2.2%	115,509	75.4%
4	24,626	20.2%	9,498	7.8%	NA	NA	85,111	69.8%
5	11,464	17.4%	3,024	4.6%	NA	NA	48,421	73.5%
6	15,786	16.6%	4,469	4.7%	NA	NA	72,108	76.0%
7	20,279	19.5%	6,887	6.6%	NA	NA	74,556	71.6%
8	34,753	20.5%	10,168	6.0%	NA	NA	119,233	70.5%
9	12,365	18.0%	4,939	7.2%	NA	NA	49,870	72.6%
10	28,736	19.5%	8,267	5.6%	NA	NA	107,453	72.8%
12	20,320	18.5%	4,509	4.1%	NA	NA	82,501	74.9%
15	10,306	13.9%	2,969	4.0%	NA	NA	59,371	80.3%
16	14,562	17.3%	3,146	3.7%	NA	NA	63,124	75.0%
17	18,630	15.3%	9,365	7.7%	NA	NA	91,022	74.7%
19	12,375	15.9%	4,185	5.4%	NA	NA	60,015	77.0%
20	13,995	18.6%	3,167	4.2%	NA	NA	56,954	75.6%
21	14,866	15.9%	4,187	4.5%	NA	NA	71,799	76.6%
22	26,067	18.4%	6,250	4.4%	NA	NA	105,689	74.7%
23	20,227	20.1%	4,277	4.3%	NA	NA	73,685	73.4%
National	344,239	18.1%	100,015	5.3%	46,283	2.4%	1,406,483	74.1%

Denominator is the enrollee population by priority group and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question.
"NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.5-3. Enrollees perceived health status, by age and VISN

VISN	<45			
	Excellent/Very good/Good		Fair/Poor	
1	42,461	80.8%	NA	NA
2	57,060	83.0%	NA	NA
4	65,898	77.7%	NA	NA
5	46,909	79.5%	NA	NA
6	76,055	75.2%	NA	NA
7	87,251	70.8%	NA	NA
8	67,040	80.7%	NA	NA
9	56,731	85.7%	NA	NA
10	95,910	75.2%	NA	NA
12	72,359	81.8%	NA	NA
15	44,813	69.6%	NA	NA
16	66,753	76.0%	NA	NA
17	113,499	75.4%	37,062	24.6%
19	100,578	84.0%	NA	NA
20	88,324	88.0%	NA	NA
21	68,230	74.2%	NA	NA
22	109,357	72.3%	NA	NA
23	80,713	83.8%	NA	NA
National	1,339,942	78.0%	373,858	21.8%

Denominator is the enrollee population by age and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.5-3. Enrollees perceived health status, by age and VISN (continued)

VISN	45-64			
	Excellent/Very good/Good		Fair/Poor	
1	64,119	79.8%	15,436	19.2%
2	80,002	76.1%	24,784	23.6%
4	76,881	77.6%	21,157	21.3%
5	76,206	72.4%	27,277	25.9%
6	126,062	67.9%	59,458	32.0%
7	154,260	66.8%	74,865	32.4%
8	179,011	75.6%	56,423	23.8%
9	75,275	61.3%	45,283	36.9%
10	142,089	73.7%	49,134	25.5%
12	67,589	80.5%	16,091	19.2%
15	63,630	69.1%	26,855	29.1%
16	88,667	64.6%	48,026	35.0%
17	166,727	69.4%	72,191	30.0%
19	88,123	74.4%	29,685	25.1%
20	86,585	69.7%	36,980	29.8%
21	92,341	74.4%	30,761	24.8%
22	161,122	73.0%	57,848	26.2%
23	63,563	73.7%	22,329	25.9%
National	1,852,253	71.6%	714,582	27.6%

Denominator is the enrollee population by age and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question.

Table A.5-3. Enrollees perceived health status, by age and VISN (continued)

VISN	65+			
	Excellent/Very good/Good		Fair/Poor	
1	145,615	76.3%	43,394	22.7%
2	197,278	74.0%	66,695	25.0%
4	156,927	75.0%	50,458	24.1%
5	97,325	73.3%	33,462	25.2%
6	154,330	72.7%	55,857	26.3%
7	158,210	69.9%	65,865	29.1%
8	291,486	74.9%	93,708	24.1%
9	111,357	68.6%	49,301	30.4%
10	236,886	73.5%	80,254	24.9%
12	147,710	79.5%	36,156	19.5%
15	116,695	74.7%	38,628	24.7%
16	120,629	67.4%	56,677	31.7%
17	204,323	71.3%	79,006	27.6%
19	130,964	74.6%	42,875	24.4%
20	147,903	79.2%	37,633	20.2%
21	160,844	74.7%	51,541	23.9%
22	250,587	77.7%	69,702	21.6%
23	179,242	80.4%	41,338	18.5%
National	3,008,310	74.4%	992,548	24.6%

Denominator is the enrollee population by age and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question.

Table A.5-4. Enrollees with ADL and IADL disabilities, by age and VISN

VISN	<45							
	IADL but no ADL disability		1 or 2 ADL disabilities		3, 4 or 5 ADL disabilities		Missing	
1	NA	NA	NA	NA	NA	NA	38,070	72.5%
2	NA	NA	NA	NA	NA	NA	48,022	69.9%
4	NA	NA	NA	NA	NA	NA	51,949	61.3%
5	NA	NA	NA	NA	NA	NA	42,829	72.6%
6	NA	NA	NA	NA	NA	NA	66,485	65.8%
7	NA	NA	NA	NA	NA	NA	74,090	60.1%
8	NA	NA	NA	NA	NA	NA	48,226	58.0%
9	NA	NA	NA	NA	NA	NA	46,948	70.9%
10	NA	NA	NA	NA	NA	NA	84,162	66.0%
12	NA	NA	NA	NA	NA	NA	70,503	79.7%
15	NA	NA	NA	NA	NA	NA	46,823	72.7%
16	NA	NA	NA	NA	NA	NA	56,491	64.3%
17	NA	NA	NA	NA	NA	NA	117,447	78.0%
19	NA	NA	NA	NA	NA	NA	81,816	68.4%
20	NA	NA	NA	NA	NA	NA	78,286	78.0%
21	NA	NA	NA	NA	NA	NA	66,181	71.9%
22	NA	NA	NA	NA	NA	NA	105,902	70.0%
23	NA	NA	NA	NA	NA	NA	82,570	85.7%
National	351,757	20.5%	119,676	7.0%	38,962	2.3%	1,206,799	70.3%

Denominator is the enrollee population by age and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question. “NA” denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.5-4. Enrollees with ADL and IADL disabilities, by age and VISN (continued)

VISN	45-64							
	IADL but no ADL disability		1 or 2 ADL disabilities		3, 4 or 5 ADL disabilities		Missing	
1	15,972	19.9%	NA	NA	NA	NA	60,261	75.0%
2	19,620	18.7%	10,721	10.2%	NA	NA	72,087	68.6%
4	21,046	21.2%	NA	NA	NA	NA	68,654	69.3%
5	16,462	15.6%	5,620	5.3%	NA	NA	77,011	73.2%
6	33,536	18.1%	23,472	12.6%	11,829	6.4%	116,792	62.9%
7	55,852	24.2%	20,712	9.0%	NA	NA	141,013	61.1%
8	41,281	17.4%	23,399	9.9%	11,765	5.0%	160,259	67.7%
9	27,492	22.4%	14,087	11.5%	NA	NA	74,334	60.6%
10	42,390	22.0%	15,084	7.8%	NA	NA	130,047	67.5%
12	17,657	21.0%	NA	NA	NA	NA	58,100	69.2%
15	16,575	18.0%	8,279	9.0%	NA	NA	63,797	69.2%
16	34,057	24.8%	13,578	9.9%	NA	NA	83,074	60.6%
17	53,240	22.1%	32,351	13.5%	10,990	4.6%	143,807	59.8%
19	18,977	16.0%	9,010	7.6%	NA	NA	87,852	74.2%
20	28,785	23.2%	7,983	6.4%	NA	NA	83,210	67.0%
21	21,847	17.6%	12,453	10.0%	NA	NA	85,124	68.6%
22	38,758	17.6%	16,063	7.3%	NA	NA	156,329	70.8%
23	13,802	16.0%	5,940	6.9%	NA	NA	64,645	75.0%
National	517,349	20.0%	232,349	9.0%	109,853	4.2%	1,726,398	66.8%

Denominator is the enrollee population by age and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question. “NA” denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.5-4. Enrollees with ADL and IADL disabilities, by age and VISN (continued)

VISN	65+							
	IADL but no ADL disability		1 or 2 ADL disabilities		3, 4 or 5 ADL disabilities		Missing	
1	42,371	22.2%	13,396	7.0%	7,525	3.9%	127,565	66.8%
2	64,985	24.4%	21,409	8.0%	12,845	4.8%	167,384	62.8%
4	49,761	23.8%	16,366	7.8%	7,478	3.6%	135,642	64.8%
5	30,539	23.0%	11,874	8.9%	6,244	4.7%	84,105	63.4%
6	55,057	25.9%	16,697	7.9%	9,907	4.7%	130,697	61.5%
7	59,755	26.4%	18,127	8.0%	12,806	5.7%	135,687	59.9%
8	105,827	27.2%	33,030	8.5%	24,488	6.3%	225,584	58.0%
9	38,956	24.0%	18,305	11.3%	6,936	4.3%	98,220	60.5%
10	74,077	23.0%	24,998	7.8%	13,449	4.2%	209,604	65.1%
12	46,043	24.8%	10,700	5.8%	6,949	3.7%	122,048	65.7%
15	36,570	23.4%	11,268	7.2%	6,566	4.2%	101,912	65.2%
16	42,603	23.8%	16,323	9.1%	11,748	6.6%	108,173	60.5%
17	66,713	23.3%	28,298	9.9%	20,216	7.1%	171,271	59.8%
19	45,691	26.0%	11,388	6.5%	6,764	3.9%	111,798	63.7%
20	45,395	24.3%	13,352	7.2%	5,195	2.8%	122,749	65.7%
21	50,928	23.7%	15,141	7.0%	10,991	5.1%	138,267	64.2%
22	81,758	25.3%	28,424	8.8%	15,360	4.8%	197,032	61.1%
23	49,883	22.4%	13,542	6.1%	8,143	3.7%	151,392	67.9%
National	986,912	24.4%	322,636	8.0%	193,609	4.8%	2,539,129	62.8%

Denominator is the enrollee population by age and VISN. Some rows sum to less than 100% due to a small percentage of enrollees (<1%) who did not respond to this question. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.5-5. Enrollees perceived health status, by income and VISN

VISN	<$35,000						$35,000+					
	Excellent/Very good/Good		Fair/Poor		Missing		Excellent/Very good/Good		Fair/Poor		Missing	
1	106,471	72.1%	38,931	26.4%	NA	NA	136,626	83.9%	26,107	16.0%	NA	NA
2	132,500	70.5%	54,322	28.9%	NA	NA	185,674	80.4%	44,297	19.2%	NA	NA
4	139,443	71.7%	53,868	27.7%	NA	NA	149,393	81.4%	33,075	18.0%	NA	NA
5	81,809	66.9%	38,924	31.8%	NA	NA	130,122	81.5%	28,605	17.9%	NA	NA
6	146,841	62.2%	87,567	37.1%	NA	NA	196,851	80.6%	47,082	19.3%	NA	NA
7	169,605	61.9%	102,278	37.3%	NA	NA	212,418	76.1%	66,105	23.7%	NA	NA
8	268,274	74.0%	91,055	25.1%	NA	NA	243,188	78.1%	66,855	21.5%	NA	NA
9	108,793	63.9%	59,708	35.0%	NA	NA	125,375	77.6%	35,504	22.0%	NA	NA
10	237,885	69.5%	99,729	29.1%	4,789	1.4%	219,570	80.6%	51,956	19.1%	NA	NA
12	128,607	76.5%	38,044	22.6%	NA	NA	144,602	84.2%	26,867	15.7%	NA	NA
15	104,419	68.3%	47,506	31.1%	NA	NA	107,850	75.1%	34,736	24.2%	NA	NA
16	142,160	64.2%	78,135	35.3%	NA	NA	126,800	74.2%	43,607	25.5%	NA	NA
17	196,126	67.3%	92,480	31.7%	NA	NA	265,919	74.9%	88,754	25.0%	NA	NA
19	119,000	71.4%	45,883	27.5%	NA	NA	182,277	81.5%	40,863	18.3%	NA	NA
20	133,239	73.2%	48,187	26.5%	NA	NA	175,892	83.2%	34,639	16.4%	NA	NA
21	136,051	67.9%	61,771	30.8%	NA	NA	175,993	81.0%	40,364	18.6%	NA	NA
22	218,961	70.6%	89,755	29.0%	NA	NA	271,113	79.0%	70,781	20.6%	NA	NA
23	125,079	72.7%	45,174	26.3%	NA	NA	184,237	85.9%	29,405	13.7%	NA	NA
National	2,695,262	69.1%	1,173,318	30.1%	33,926	0.9%	3,233,900	79.7%	809,600	20.0%	12,694	0.3%

Denominator is the enrollee population by income and VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.5-6. Enrollees with ADL and IADL disabilities, by income and VISN

VISN	<$35,000							
	IADL but no ADL disability		1 or 2 ADL disabilities		3, 4 or 5 ADL disabilities		Missing	
1	42,002	28.5%	14,517	9.8%	4,192	2.8%	86,904	58.9%
2	53,959	28.7%	17,763	9.4%	10,186	5.4%	106,147	56.4%
4	51,538	26.5%	21,961	11.3%	NA	NA	112,171	57.7%
5	31,277	25.6%	12,188	10.0%	6,603	5.4%	72,146	59.0%
6	64,483	27.3%	24,784	10.5%	NA	NA	129,859	55.0%
7	84,895	31.0%	32,078	11.7%	NA	NA	139,510	50.9%
8	100,186	27.6%	27,265	7.5%	30,762	8.5%	204,172	56.3%
9	45,169	26.5%	22,694	13.3%	NA	NA	93,373	54.8%
10	92,957	27.1%	31,800	9.3%	13,291	3.9%	204,355	59.7%
12	41,584	24.7%	9,643	5.7%	NA	NA	106,098	63.1%
15	36,812	24.1%	14,828	9.7%	NA	NA	94,484	61.8%
16	58,492	26.4%	27,401	12.4%	11,483	5.2%	123,890	56.0%
17	65,541	22.5%	41,578	14.3%	17,991	6.2%	166,385	57.1%
19	43,825	26.3%	13,369	8.0%	NA	NA	101,734	61.1%
20	50,013	27.5%	14,859	8.2%	NA	NA	111,185	61.1%
21	52,913	26.4%	21,264	10.6%	10,291	5.1%	115,821	57.8%
22	83,983	27.1%	29,955	9.7%	NA	NA	179,255	57.8%
23	39,814	23.1%	14,861	8.6%	NA	NA	110,829	64.4%
National	1,039,445	26.6%	392,810	10.1%	211,934	5.4%	2,258,317	57.9%

Denominator is the enrollee population by income and VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.5-6. Enrollees with ADL and IADL disabilities, by income and VISN (continued)

VISN	$35,000+							
	IADL but no ADL disability		1 or 2 ADL disabilities		3, 4 or 5 ADL disabilities		Missing	
1	22,027	13.5%	7,134	4.4%	3,535	2.2%	130,107	79.9%
2	41,060	17.8%	17,907	7.8%	5,123	2.2%	166,921	72.3%
4	30,602	16.7%	11,144	6.1%	NA	NA	134,668	73.4%
5	22,209	13.9%	9,138	5.7%	6,884	4.3%	121,347	76.0%
6	40,831	16.7%	19,936	8.2%	NA	NA	175,739	72.0%
7	54,083	19.4%	15,850	5.7%	NA	NA	197,324	70.7%
8	59,365	19.1%	30,241	9.7%	11,994	3.9%	209,632	67.4%
9	31,141	19.3%	14,700	9.1%	NA	NA	112,529	69.7%
10	47,676	17.5%	17,437	6.4%	5,634	2.1%	201,629	74.0%
12	30,536	17.8%	7,306	4.3%	NA	NA	131,798	76.8%
15	25,322	17.6%	8,770	6.1%	NA	NA	105,568	73.5%
16	37,825	22.1%	9,683	5.7%	6,002	3.5%	117,360	68.7%
17	71,065	20.0%	21,770	6.1%	16,158	4.6%	245,954	69.3%
19	46,667	20.9%	14,310	6.4%	NA	NA	160,306	71.7%
20	34,275	16.2%	10,353	4.9%	NA	NA	161,169	76.2%
21	33,318	15.3%	12,749	5.9%	7,060	3.2%	164,184	75.6%
22	70,155	20.4%	14,656	4.3%	NA	NA	251,325	73.2%
23	28,394	13.2%	10,358	4.8%	NA	NA	173,429	80.9%
National	726,552	17.9%	253,442	6.2%	115,208	2.8%	2,960,991	73.0%

Denominator is the enrollee population by income and VISN. “NA” denotes cells that do not have enough respondents to provide a reliable estimate.

A.6 Digital Access

Table A.6-1. Enrollees' awareness and use of My HealtheVet website, by age and VISN

VISN	Aware of My HealtheVet[1]						Use My HealtheVet[2]					
	<45		45-64		65+		<45		45-64		65+	
1	32,430	61.7%	34,155	52.6%	65,008	55.1%	NA	NA	21,063	54.6%	33,510	42.6%
2	40,333	59.1%	47,732	54.1%	63,303	38.4%	NA	NA	27,207	51.4%	28,369	36.9%
4	48,724	60.4%	37,879	47.0%	53,390	45.4%	27,529	55.1%	18,852	44.1%	28,086	41.0%
5	32,524	57.3%	48,206	51.6%	33,125	41.2%	NA	NA	28,060	53.5%	17,447	40.5%
6	66,823	67.0%	78,575	49.9%	62,571	48.0%	NA	NA	46,300	51.8%	39,188	50.6%
7	81,559	66.1%	118,389	59.4%	67,249	49.3%	49,097	60.2%	73,598	56.8%	40,835	47.1%
8	62,563	76.2%	140,160	66.9%	149,690	56.1%	NA	NA	94,152	62.6%	88,435	50.9%
9	NA	NA	54,221	54.3%	47,384	48.3%	NA	NA	34,362	57.8%	22,975	40.2%
10	83,226	66.4%	98,478	60.8%	98,035	51.4%	46,804	56.2%	55,235	50.1%	53,301	41.4%
12	46,064	52.0%	38,322	54.0%	52,623	47.7%	28,424	61.7%	21,042	49.6%	28,155	43.5%
15	32,246	56.3%	42,685	54.0%	37,061	42.0%	NA	NA	25,809	56.6%	21,939	46.5%
16	50,216	58.5%	56,720	50.4%	42,091	39.3%	NA	NA	29,616	47.4%	25,379	46.4%
17	99,504	67.3%	121,683	57.8%	82,555	45.9%	64,159	63.8%	73,157	55.6%	47,318	48.2%
19	72,156	62.9%	46,741	44.3%	40,438	37.4%	38,683	52.1%	26,700	52.5%	22,328	44.8%
20	50,667	51.1%	56,528	51.5%	61,864	48.1%	NA	NA	29,647	50.1%	35,320	49.4%
21	55,802	62.0%	51,936	49.1%	65,235	44.9%	NA	NA	32,078	55.0%	38,548	50.9%
22	99,073	66.0%	115,462	62.0%	93,600	42.0%	62,551	62.5%	67,378	55.4%	55,633	49.9%
23	46,324	50.6%	40,815	58.2%	62,493	48.8%	22,697	49.0%	21,950	47.7%	36,409	46.0%
National	1,033,820	61.7%	1,228,687	55.7%	1,177,716	46.7%	620,159	59.3%	726,205	54.0%	663,174	46.0%

[1] Denominator is the enrollee population who reported that they use the internet at least occasionally by VISN.

[2] Denominator is the enrollee population who reported that they use the internet at least occasionally, and are aware of the My HealtheVet website by VISN. "NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.6-2. Enrollees' awareness and use of My Health*e*Vet website, by priority group and VISN

VISN	Aware of My Health*e*Vet[1]						Use My Health*e*Vet[2]					
	P1-3		P4-6		P7-8		P1-3		P4-6		P7-8	
1	71,791	62.1%	34,967	59.3%	24,834	40.8%	43,623	55.5%	17,825	42.3%	13,111	45.1%
2	78,528	61.3%	39,833	46.7%	33,007	30.6%	39,783	46.7%	21,986	45.3%	13,261	36.1%
4	73,620	61.5%	38,266	51.1%	28,107	33.3%	43,130	52.6%	16,946	36.0%	14,390	44.7%
5	72,182	54.8%	23,143	44.0%	18,530	40.1%	45,425	57.6%	13,642	48.2%	8,947	42.6%
6	130,575	58.3%	48,959	51.5%	28,436	41.5%	84,335	57.1%	32,029	57.5%	14,657	47.3%
7	170,047	62.0%	61,909	57.0%	35,241	46.3%	113,358	60.9%	33,933	46.2%	16,240	42.4%
8	177,843	68.5%	108,354	66.0%	66,216	49.1%	122,093	63.3%	55,773	44.7%	34,498	50.0%
9	82,547	59.2%	33,297	45.0%	19,345	41.7%	45,900	51.9%	18,724	45.8%	9,007	40.8%
10	147,383	65.9%	89,036	59.2%	43,321	41.7%	84,032	51.4%	48,774	44.7%	22,533	45.2%
12	66,813	57.7%	43,039	56.0%	27,157	35.1%	40,811	58.4%	20,810	40.1%	16,000	50.8%
15	69,013	61.5%	26,064	42.3%	16,914	33.3%	47,395	60.7%	15,116	47.9%	9,482	49.9%
16	89,430	54.4%	38,809	47.4%	20,789	35.0%	60,217	60.7%	21,049	46.8%	11,180	47.3%
17	200,632	62.1%	66,686	55.4%	36,424	38.4%	120,418	56.2%	42,623	56.2%	21,593	53.8%
19	101,354	53.1%	35,535	45.3%	22,447	37.9%	59,822	54.5%	19,017	47.7%	8,872	35.0%
20	104,750	54.6%	41,722	47.8%	22,587	38.8%	65,038	58.7%	22,506	48.8%	10,778	44.1%
21	100,253	57.6%	45,806	48.9%	26,914	36.6%	62,226	57.0%	25,644	49.7%	14,368	49.5%
22	177,306	61.5%	84,307	52.8%	46,523	41.8%	111,341	59.2%	48,929	51.8%	25,291	49.6%
23	87,982	53.6%	28,872	46.9%	32,778	51.3%	50,851	51.2%	15,507	44.2%	14,699	39.7%
National	2,002,049	59.9%	888,604	52.7%	549,570	39.9%	1,239,797	56.8%	490,834	47.1%	278,906	45.7%

[1] Denominator is the enrollee population who reported that they use the internet at least occasionally by VISN.

[2] Denominator is the enrollee population who reported that they use the internet at least occasionally, and are aware of the My HealtheVet website by VISN.

Table A.6-3. Enrollees' awareness and use of My HealtheVet website, by income and VISN

VISN	Aware of My HealtheVet[1]				Use My HealtheVet[2]			
	<$35,000		$35,000+		<$35,000		$35,000+	
1	59,879	64.2%	68,140	50.6%	32,400	45.4%	40,671	55.0%
2	66,416	59.0%	79,654	40.9%	35,511	45.1%	37,540	43.9%
4	59,241	52.2%	76,613	49.0%	33,936	45.8%	38,916	47.2%
5	47,684	60.4%	61,965	43.4%	30,870	53.2%	34,511	53.2%
6	88,192	55.7%	113,389	52.5%	55,710	51.8%	71,566	59.9%
7	122,415	65.4%	138,724	54.3%	76,378	52.8%	83,472	58.4%
8	178,072	68.4%	160,797	58.4%	100,666	49.3%	105,206	62.8%
9	58,652	54.8%	70,510	50.5%	28,913	41.2%	40,900	54.7%
10	139,325	62.6%	131,428	55.4%	79,213	46.7%	72,677	51.2%
12	61,894	56.0%	67,747	46.5%	36,033	48.4%	37,746	53.2%
15	51,592	54.4%	56,539	47.2%	33,504	52.2%	36,752	61.5%
16	76,173	50.1%	70,890	48.7%	48,431	54.6%	42,824	56.0%
17	118,388	59.7%	175,684	54.9%	69,022	50.2%	107,280	59.3%
19	51,023	46.0%	100,817	51.0%	28,276	45.5%	56,192	53.9%
20	65,259	49.2%	98,370	51.3%	36,567	50.2%	58,632	57.6%
21	79,680	56.5%	90,069	47.0%	43,865	48.8%	56,250	58.7%
22	135,901	60.7%	159,074	51.7%	88,373	57.9%	91,633	55.2%
23	56,956	57.6%	88,073	48.7%	30,078	42.3%	47,564	50.4%
National	1,516,740	58.4%	1,808,483	50.9%	887,745	49.5%	1,060,334	55.7%

[1] Denominator is the enrollee population who reported that they use the internet at least occasionally by VISN.

[2] Denominator is the enrollee population who reported that they use the internet at least occasionally, and are aware of the My HealtheVet website by VISN.

Table A.6-4. Enrollees' readiness to use internet for VA information and (tele) health-related activities, by VISN

VISN	Obtain information on VA benefits		Fill out health forms		Look for health information on VA website		Refill medication prescription		Watch educational health videos	
1	199,646	84.8%	165,788	70.4%	193,172	82.1%	167,809	71.3%	151,164	64.2%
2	274,344	85.4%	229,323	71.4%	262,296	81.7%	219,285	68.3%	215,275	67.0%
4	244,246	87.6%	203,332	72.9%	231,794	83.1%	203,994	73.1%	183,874	65.9%
5	206,561	89.6%	179,565	77.9%	201,958	87.6%	180,330	78.2%	172,964	75.0%
6	348,450	89.9%	296,735	76.6%	337,966	87.2%	300,131	77.5%	275,434	71.1%
7	416,272	90.7%	359,997	78.4%	400,606	87.3%	374,815	81.7%	337,705	73.6%
8	482,855	86.4%	425,882	76.2%	456,982	81.8%	427,183	76.5%	384,469	68.8%
9	219,657	84.6%	179,854	69.3%	209,745	80.8%	187,728	72.3%	168,623	64.9%
10	402,624	84.3%	335,387	70.2%	387,296	81.0%	341,323	71.4%	303,527	63.5%
12	230,762	85.5%	196,416	72.8%	220,018	81.5%	187,202	69.4%	179,327	66.5%
15	192,058	85.5%	162,833	72.5%	184,988	82.3%	161,985	72.1%	148,989	66.3%
16	262,732	86.0%	229,267	75.1%	257,194	84.2%	232,587	76.2%	200,950	65.8%
17	479,905	89.2%	430,356	80.0%	460,691	85.6%	433,901	80.6%	399,142	74.2%
19	289,470	88.2%	260,922	79.5%	277,921	84.6%	262,873	80.1%	224,198	68.3%
20	297,203	88.1%	260,252	77.1%	287,355	85.2%	261,846	77.6%	243,649	72.2%
21	295,772	86.7%	256,122	75.1%	278,280	81.6%	257,001	75.3%	233,994	68.6%
22	501,106	89.6%	446,704	79.9%	474,008	84.8%	443,840	79.4%	402,969	72.1%
23	241,194	83.3%	209,872	72.5%	233,211	80.5%	212,788	73.5%	181,555	62.7%
National	5,584,857	87.2%	4,828,606	75.4%	5,355,483	83.7%	4,856,620	75.9%	4,407,806	68.8%

Denominator is the enrollee population who reported that they use the internet at least occasionally by VISN.

Table A.6-4. Enrollees' readiness to use internet for VA information and (tele) health-related activities, by VISN (continued)

VISN	Join online support group		Complete online health assessment to measure stress/anxiety		Schedule medical appointments		Access personal health record		Access lab or X-ray test results	
1	87,197	37.0%	134,551	57.2%	171,093	72.7%	177,857	75.6%	178,769	75.9%
2	124,961	38.9%	184,263	57.4%	232,116	72.3%	241,702	75.3%	238,641	74.3%
4	119,026	42.7%	171,243	61.4%	208,674	74.8%	211,378	75.8%	210,189	75.4%
5	112,844	48.9%	152,695	66.2%	189,623	82.2%	190,538	82.6%	186,320	80.8%
6	182,606	47.1%	244,602	63.1%	311,787	80.5%	315,648	81.5%	312,809	80.7%
7	228,031	49.7%	308,388	67.2%	369,669	80.5%	373,896	81.5%	370,549	80.7%
8	228,251	40.9%	335,026	60.0%	434,338	77.7%	441,142	79.0%	432,502	77.4%
9	113,565	43.7%	156,011	60.1%	186,211	71.7%	194,103	74.7%	190,365	73.3%
10	181,522	38.0%	275,407	57.6%	352,465	73.8%	363,653	76.1%	359,571	75.2%
12	107,284	39.8%	150,099	55.6%	199,118	73.8%	199,732	74.0%	200,342	74.3%
15	88,510	39.4%	135,478	60.3%	163,927	73.0%	169,468	75.4%	169,360	75.4%
16	121,340	39.7%	193,083	63.2%	233,907	76.6%	234,842	76.9%	231,048	75.7%
17	258,453	48.0%	363,568	67.5%	441,454	82.0%	433,417	80.5%	425,708	79.1%
19	124,032	37.8%	213,399	65.0%	259,911	79.2%	260,904	79.5%	261,063	79.5%
20	141,858	42.0%	212,484	63.0%	264,030	78.3%	272,443	80.8%	271,360	80.4%
21	148,630	43.6%	212,488	62.3%	265,945	78.0%	270,932	79.4%	271,812	79.7%
22	262,779	47.0%	351,339	62.8%	450,025	80.5%	454,829	81.3%	455,357	81.4%
23	108,062	37.3%	159,754	55.2%	204,378	70.6%	215,534	74.4%	212,999	73.5%
National	2,738,950	42.8%	3,953,880	61.8%	4,938,672	77.1%	5,022,017	78.4%	4,978,763	77.8%

Denominator is the enrollee population who reported that they use the internet at least occasionally by VISN.

Table A.6-4. Enrollees' readiness to use internet for VA information and (tele) health-related activities, by VISN (continued)

VISN	Use "app" to track health measures		Receive health-related text messages on mobile device		Communicate with providers	
1	140,434	59.7%	150,122	63.8%	171,354	72.8%
2	195,761	61.0%	206,981	64.4%	232,823	72.5%
4	174,605	62.6%	190,502	68.3%	206,192	73.9%
5	158,925	68.9%	164,882	71.5%	186,800	81.0%
6	261,889	67.6%	282,278	72.9%	315,119	81.3%
7	328,636	71.6%	345,689	75.3%	374,733	81.6%
8	366,424	65.6%	399,122	71.4%	436,595	78.2%
9	162,826	62.7%	180,587	69.5%	184,190	70.9%
10	303,641	63.5%	309,599	64.8%	355,020	74.3%
12	170,763	63.3%	188,337	69.8%	203,423	75.4%
15	139,887	62.3%	157,397	70.1%	168,108	74.8%
16	208,720	68.3%	222,971	73.0%	227,969	74.6%
17	392,532	72.9%	414,520	77.0%	444,643	82.6%
19	224,558	68.4%	235,492	71.7%	259,951	79.2%
20	224,020	66.4%	232,517	68.9%	273,099	80.9%
21	229,947	67.4%	236,263	69.3%	268,153	78.6%
22	378,164	67.6%	397,436	71.1%	455,357	81.4%
23	174,869	60.4%	185,072	63.9%	214,350	74.0%
National	4,236,603	66.2%	4,499,768	70.3%	4,977,879	77.8%

Denominator is the enrollee population who reported that they use the internet at least occasionally by VISN.

Table A.6-5. Enrollees' reported reasons for using My HealtheVet website, by VISN

VISN	Look for health information		Communicate with healthcare provider		See lab test results		Read provider's notes from visits		See VA appointments	
1	49,872	66.9%	45,809	61.4%	45,499	61.0%	38,869	52.1%	54,974	73.7%
2	52,602	70.1%	37,855	50.5%	52,109	69.5%	40,006	53.3%	51,239	68.3%
4	51,700	69.4%	31,579	42.4%	40,667	54.6%	34,506	46.3%	48,210	64.7%
5	48,704	71.6%	34,648	50.9%	42,087	61.9%	32,412	47.7%	45,604	67.1%
6	86,428	66.0%	77,701	59.3%	82,187	62.7%	68,430	52.2%	96,923	74.0%
7	105,789	64.7%	95,788	58.6%	96,812	59.2%	74,875	45.8%	124,871	76.4%
8	136,405	64.2%	118,314	55.7%	115,395	54.3%	97,210	45.8%	147,304	69.4%
9	52,449	71.2%	41,275	56.1%	50,923	69.2%	34,841	47.3%	54,552	74.1%
10	99,817	64.3%	87,506	56.3%	101,782	65.5%	77,305	49.8%	107,268	69.1%
12	51,944	66.9%	41,195	53.1%	48,658	62.7%	40,348	52.0%	54,772	70.6%
15	57,562	80.0%	37,212	51.7%	44,368	61.6%	38,490	53.5%	54,728	76.0%
16	69,529	75.2%	43,490	47.0%	52,392	56.7%	42,731	46.2%	67,694	73.2%
17	123,413	66.8%	120,954	65.5%	122,630	66.4%	103,804	56.2%	142,646	77.3%
19	65,477	74.7%	42,768	48.8%	44,420	50.6%	32,697	37.3%	56,445	64.4%
20	63,020	64.1%	58,489	59.5%	60,026	61.1%	47,876	48.7%	64,167	65.3%
21	71,033	69.5%	62,100	60.7%	65,804	64.4%	50,918	49.8%	66,962	65.5%
22	119,817	64.6%	92,083	49.6%	113,830	61.3%	87,299	47.0%	119,665	64.5%
23	54,210	66.9%	42,453	52.4%	48,677	60.1%	40,165	49.6%	52,634	64.9%
National	1,359,771	67.7%	1,111,220	55.3%	1,228,267	61.1%	982,783	48.9%	1,410,657	70.2%

Denominator is the enrollee population who reported that they use the My HealtheVet website.

Table A.6-5. Enrollees' reported reasons for using My HealtheVet website, by VISN (continued)

VISN	Refill prescriptions		Enter information into Personal Health Record (PHR)		Some other reason	
1	51,391	68.9%	22,833	30.6%	15,748	21.1%
2	53,437	71.2%	28,540	38.0%	15,918	21.2%
4	53,883	72.4%	20,377	27.4%	10,330	13.9%
5	44,899	66.0%	25,216	37.1%	15,964	23.5%
6	96,966	74.0%	46,286	35.3%	13,899	10.6%
7	119,639	73.2%	54,317	33.2%	43,742	26.7%
8	138,106	65.0%	61,931	29.2%	33,003	15.5%
9	51,092	69.4%	15,726	21.4%	10,447	14.2%
10	113,464	73.0%	45,114	29.0%	22,607	14.6%
12	51,554	66.4%	23,694	30.5%	10,518	13.6%
15	52,734	73.2%	31,692	44.0%	21,406	29.7%
16	65,812	71.2%	37,808	40.9%	27,991	30.3%
17	140,985	76.4%	64,408	34.9%	46,580	25.2%
19	66,595	75.9%	23,488	26.8%	11,414	13.0%
20	75,053	76.3%	32,171	32.7%	21,622	22.0%
21	71,870	70.3%	40,426	39.5%	25,397	24.8%
22	118,491	63.9%	75,322	40.6%	39,149	21.1%
23	59,473	73.4%	25,333	31.3%	12,694	15.7%
National	1,425,443	70.9%	674,684	33.6%	398,430	19.8%

Denominator is the enrollee population who reported that they use the My HealtheVet website.

A.7 Enrollees' Views of VA Healthcare

Table A.7-1. Enrollees' perceptions of VA services, by VISN

VISN	Easy to get appointments within reasonable time		Available appointments at convenient hours/days		Appointments took place as scheduled		Easy access to local VA or VA-approved facility		Short wait times after arriving for appointment	
1	161,003	83.6%	162,206	84.2%	176,690	91.7%	162,737	84.5%	154,854	80.4%
2	185,967	79.7%	197,077	84.5%	203,471	87.2%	179,963	77.2%	186,120	79.8%
4	190,624	81.0%	192,141	81.6%	209,545	89.0%	195,669	83.1%	190,782	81.1%
5	123,325	77.7%	134,358	84.7%	141,798	89.4%	125,548	79.1%	123,832	78.1%
6	214,505	70.2%	232,691	76.2%	260,324	85.3%	259,917	85.1%	236,214	77.4%
7	240,836	67.3%	281,468	78.7%	313,064	87.5%	279,327	78.1%	255,339	71.4%
8	355,679	76.1%	386,377	82.6%	403,665	86.3%	380,472	81.4%	344,955	73.8%
9	172,565	77.4%	184,578	82.8%	196,995	88.4%	186,143	83.5%	173,726	77.9%
10	327,672	77.7%	349,011	82.7%	379,942	90.0%	358,051	84.9%	339,286	80.4%
12	192,235	83.7%	198,428	86.4%	210,877	91.8%	193,405	84.2%	184,974	80.5%
15	158,498	80.0%	167,997	84.8%	179,136	90.4%	165,943	83.7%	156,224	78.8%
16	186,316	71.5%	211,907	81.3%	236,005	90.5%	217,316	83.3%	186,913	71.7%
17	273,563	67.7%	306,911	75.9%	339,780	84.0%	309,352	76.5%	275,817	68.2%
19	172,598	66.1%	198,437	76.0%	222,061	85.0%	200,010	76.6%	191,538	73.4%
20	183,077	70.2%	200,014	76.7%	227,757	87.4%	201,008	77.1%	203,329	78.0%
21	195,743	75.1%	207,976	79.8%	230,299	88.3%	214,171	82.2%	201,981	77.5%
22	279,412	70.2%	312,839	78.7%	348,322	87.6%	309,590	77.8%	295,691	74.3%
23	219,394	81.9%	235,187	87.8%	251,837	94.0%	227,553	84.9%	224,220	83.7%
National	3,833,011	74.6%	4,159,601	81.0%	4,531,570	88.2%	4,166,173	81.1%	3,925,793	76.4%

Denominator is the enrollee population that used any VA healthcare services (at a VA facility or community provider paid by the VA) on/after January 1, 2015.

Table A.7-1. Enrollees' perceptions of VA services, by VISN (continued)

VISN	Getting around facility was easy		Personnel were welcoming and helpful	
1	167,913	87.2%	172,360	89.5%
2	203,383	87.2%	205,881	88.3%
4	207,494	88.2%	206,697	87.8%
5	137,526	86.7%	136,149	85.8%
6	263,986	86.5%	255,387	83.6%
7	299,687	83.8%	290,542	81.2%
8	408,860	87.4%	395,079	84.5%
9	182,933	82.1%	191,109	85.7%
10	376,219	89.2%	373,631	88.5%
12	206,050	89.7%	203,428	88.5%
15	175,539	88.6%	174,558	88.1%
16	231,321	88.7%	216,685	83.1%
17	330,915	81.8%	328,736	81.3%
19	222,235	85.1%	220,222	84.3%
20	221,255	84.9%	217,179	83.3%
21	236,253	90.6%	231,390	88.8%
22	337,215	84.8%	336,593	84.6%
23	240,340	89.7%	247,664	92.4%
National	4,449,123	86.6%	4,403,290	85.7%

Denominator is the enrollee population that used any VA healthcare services (at a VA facility or community provider paid by the VA) on/after January 1, 2015.

Table A.7-2. Enrollees who indicated "moderately satisfied" or "very satisfied" about the health care received at VA health care services, by VISN

VISN	Respect shown to you by health care professionals		How clearly your health care providers explained your health problems		How clearly your health care providers explained options and choices about care with you		Opportunities for you to participate in decisions about your care		The way providers listened to you	
1	174,167	90.4%	167,202	86.8%	157,567	81.8%	160,060	83.1%	164,411	85.3%
2	202,679	86.9%	191,005	81.9%	187,346	80.3%	187,616	80.5%	194,722	83.5%
4	206,186	87.6%	195,958	83.3%	188,088	79.9%	188,634	80.2%	190,942	81.1%
5	140,371	88.5%	135,968	85.7%	129,872	81.9%	127,800	80.6%	130,799	82.5%
6	261,408	85.6%	249,944	81.9%	235,819	77.2%	235,363	77.1%	239,234	78.3%
7	302,691	84.6%	271,424	75.9%	265,116	74.1%	264,105	73.8%	253,534	70.9%
8	411,114	87.9%	389,914	83.4%	380,639	81.4%	371,917	79.5%	379,937	81.3%
9	189,937	85.2%	182,693	82.0%	172,363	77.3%	175,104	78.6%	175,634	78.8%
10	377,541	89.5%	353,670	83.8%	334,764	79.3%	336,675	79.8%	347,551	82.4%
12	202,375	88.1%	199,718	86.9%	188,983	82.3%	194,968	84.9%	195,590	85.1%
15	164,204	82.9%	159,990	80.7%	151,512	76.5%	154,339	77.9%	152,205	76.8%
16	220,536	84.6%	205,471	78.8%	201,819	77.4%	202,179	77.5%	203,440	78.0%
17	330,446	81.7%	304,104	75.2%	292,931	72.4%	295,235	73.0%	295,865	73.2%
19	210,628	80.7%	194,603	74.5%	181,774	69.6%	186,772	71.5%	191,180	73.2%
20	221,710	85.0%	212,537	81.5%	198,994	76.3%	208,214	79.9%	209,447	80.3%
21	232,783	89.3%	219,897	84.4%	208,729	80.1%	213,272	81.8%	214,471	82.3%
22	343,709	86.4%	330,057	83.0%	316,363	79.5%	313,496	78.8%	320,620	80.6%
23	244,742	91.3%	233,681	87.2%	223,883	83.5%	229,952	85.8%	233,384	87.1%
National	4,437,226	86.3%	4,197,834	81.7%	4,016,562	78.2%	4,045, 702	78.8%	4,092,966	79.7%

Denominator is the enrollee population that used any VA healthcare services (at a VA facility or community provider paid by the VA) on/after January 1, 2015.

Table A.7-2. Enrollees who indicated "moderately satisfied" or "very satisfied" about the health care received at VA health care services, by VISN (continued)

VISN	The manner in which your providers accepted you for who you are		The way your privacy was respected		Your ability to get referrals for specialist care or special equipment	
1	166,982	86.7%	178,175	92.5%	129,381	67.2%
2	204,064	87.5%	206,121	88.4%	157,784	67.7%
4	199,342	84.7%	215,392	91.5%	146,778	62.4%
5	136,382	86.0%	142,166	89.6%	111,014	70.0%
6	247,451	81.0%	271,316	88.9%	199,680	65.4%
7	277,006	77.4%	307,132	85.9%	206,366	57.7%
8	395,561	84.6%	422,018	90.3%	308,413	66.0%
9	180,006	80.8%	197,953	88.8%	142,077	63.7%
10	356,848	84.6%	390,572	92.6%	285,904	67.8%
12	205,702	89.5%	209,493	91.2%	158,794	69.1%
15	165,856	83.7%	180,510	91.1%	127,256	64.2%
16	209,793	80.5%	238,805	91.6%	166,048	63.7%
17	313,581	77.5%	354,827	87.7%	245,015	60.6%
19	205,860	78.8%	231,069	88.5%	154,401	59.1%
20	213,544	81.9%	233,994	89.7%	169,966	65.2%
21	222,592	85.4%	237,060	90.9%	186,454	71.5%
22	333,227	83.8%	356,068	89.5%	270,717	68.1%
23	237,274	88.5%	250,462	93.5%	180,645	67.4%
National	4,271,070	83.2%	4,623,133	90.0%	3,346,693	65.2%

Denominator is the enrollee population that used any VA healthcare services (at a VA facility or community provider paid by the VA) on/after January 1, 2015.

Table A.7-3. Enrollees' planned future use of VA health care services, by VISN

VISN	Primary		Service-related disability		Specific condition		Medical devices	
1	119,898	37.0%	35,233	10.9%	16,867	5.2%	14,410	4.5%
2	147,810	33.6%	45,036	10.2%	32,137	7.3%	19,485	4.4%
4	137,993	35.1%	44,599	11.3%	26,852	6.8%	19,007	4.8%
5	111,656	37.6%	47,089	15.9%	14,598	4.9%	10,887	3.7%
6	215,989	43.3%	75,184	15.1%	34,278	6.9%	16,152	3.2%
7	236,924	40.8%	110,364	19.0%	31,723	5.5%	17,093	2.9%
8	317,307	44.8%	78,710	11.1%	40,717	5.7%	31,253	4.4%
9	161,247	45.9%	41,235	11.7%	18,067	5.1%	12,379	3.5%
10	281,015	43.7%	71,573	11.1%	41,087	6.4%	23,629	3.7%
12	178,299	49.8%	32,698	9.1%	20,286	5.7%	10,081	2.8%
15	125,859	40.2%	34,717	11.1%	16,628	5.3%	12,895	4.1%
16	185,682	46.0%	51,650	12.8%	19,881	4.9%	19,389	4.8%
17	284,062	41.9%	102,834	15.2%	32,150	4.7%	24,183	3.6%
19	156,188	37.8%	67,273	16.3%	23,891	5.8%	18,914	4.6%
20	165,337	40.2%	59,819	14.5%	23,509	5.7%	22,057	5.4%
21	181,209	42.0%	57,542	13.3%	20,741	4.8%	14,452	3.4%
22	301,489	43.4%	78,583	11.3%	45,864	6.6%	31,939	4.6%
23	161,152	39.7%	52,833	13.0%	29,595	7.3%	18,106	4.5%
National	3,469,114	41.6%	1,086,972	13.0%	488,871	5.9%	336,312	4.0%

Denominator is the enrollee population by VISN.

Table A.7-3. Enrollees' planned future use of VA health care services, by VISN (continued)

VISN	Prescriptions		Safety net		No plan to use VA	
1	20,612	6.4%	58,798	18.2%	17,626	5.4%
2	26,211	6.0%	76,219	17.3%	39,672	9.0%
4	35,393	9.0%	64,723	16.5%	18,640	4.7%
5	15,785	5.3%	50,829	17.1%	17,060	5.7%
6	19,694	3.9%	72,660	14.6%	19,617	3.9%
7	24,329	4.2%	61,463	10.6%	33,469	5.8%
8	32,791	4.6%	86,861	12.3%	39,218	5.5%
9	17,036	4.8%	44,517	12.7%	22,245	6.3%
10	36,098	5.6%	82,703	12.9%	31,125	4.8%
12	23,906	6.7%	43,162	12.0%	17,884	5.0%
15	23,046	7.4%	45,789	14.6%	20,849	6.7%
16	26,273	6.5%	42,566	10.5%	15,331	3.8%
17	30,722	4.5%	81,015	12.0%	48,247	7.1%
19	23,621	5.7%	57,436	13.9%	18,615	4.5%
20	20,359	5.0%	67,223	16.3%	15,837	3.9%
21	15,668	3.6%	68,038	15.8%	28,395	6.6%
22	27,406	3.9%	108,890	15.7%	32,303	4.7%
23	37,698	9.3%	43,482	10.7%	19,468	4.8%
National	456,647	5.5%	1,156,374	13.9%	455,601	5.5%

Denominator is the enrollee population by VISN.

Table A.7-3. Enrollees' planned future use of VA health care services, by VISN (continued)

VISN	Other		Missing	
1	10,151	3.1%	30,165	9.3%
2	8,889	2.0%	45,059	10.2%
4	6,737	1.7%	39,205	10.0%
5	4,337	1.5%	24,749	8.3%
6	7,953	1.6%	37,535	7.5%
7	11,286	1.9%	53,923	9.3%
8	19,208	2.7%	62,647	8.8%
9	NA	NA	31,320	8.9%
10	16,187	2.5%	59,002	9.2%
12	5,384	1.5%	26,538	7.4%
15	5,899	1.9%	27,158	8.7%
16	8,445	2.1%	34,622	8.6%
17	16,984	2.5%	57,250	8.5%
19	10,309	2.5%	37,460	9.1%
20	10,988	2.7%	26,124	6.4%
21	12,376	2.9%	32,962	7.6%
22	16,401	2.4%	51,802	7.5%
23	11,002	2.7%	32,176	7.9%
National	185,841	2.2%	709,697	8.5%

"NA" denotes cells that do not have enough respondents to provide a reliable estimate.

Table A.7-4. Enrollees' use of VA services to meet their health care needs, by VISN

VISN	All		Most		Some		None	
1	84,250	26.0%	51,741	16.0%	89,152	27.5%	83,061	25.7%
2	106,311	24.1%	61,741	14.0%	119,517	27.1%	133,490	30.3%
4	85,309	21.7%	71,719	18.2%	119,647	30.4%	96,845	24.6%
5	87,834	29.6%	45,378	15.3%	64,913	21.9%	88,973	30.0%
6	146,620	29.4%	109,985	22.0%	113,540	22.8%	113,740	22.8%
7	170,681	29.4%	107,489	18.5%	151,265	26.1%	134,871	23.2%
8	221,728	31.3%	155,025	21.9%	181,485	25.6%	123,288	17.4%
9	112,147	31.9%	62,331	17.7%	85,837	24.4%	76,146	21.7%
10	215,662	33.6%	119,087	18.5%	166,480	25.9%	122,131	19.0%
12	121,242	33.8%	68,667	19.2%	82,641	23.1%	69,312	19.3%
15	103,855	33.2%	44,360	14.2%	85,661	27.4%	68,372	21.9%
16	135,774	33.6%	76,252	18.9%	104,377	25.8%	79,076	19.6%
17	177,244	26.2%	124,102	18.3%	186,155	27.5%	167,734	24.8%
19	114,385	27.6%	72,332	17.5%	125,942	30.4%	80,050	19.3%
20	118,497	28.8%	81,011	19.7%	103,846	25.3%	88,942	21.6%
21	129,078	29.9%	81,313	18.8%	93,283	21.6%	108,261	25.1%
22	227,540	32.8%	119,101	17.1%	187,032	26.9%	137,380	19.8%
23	105,204	25.9%	85,153	21.0%	119,383	29.4%	75,855	18.7%
National	2,463,362	29.5%	1,536,788	18.4%	2,180,157	26.1%	1,847,527	22.1%

Denominator is the enrollee population by VISN.