# ADMINISTRATIVE SUMMARY OF INVESTIGATION BY THE VA OFFICE OF INSPECTOR GENERAL IN RESPONSE TO ALLEGATIONS REGARDING PATIENT WAIT TIMES



# VA Medical Centers in Leavenworth/Topeka, Kansas March 22, 2016

## 1. Summary of Why the Investigation Was Initiated

The investigation was initiated based on information provided by an anonymous complainant via the Department of Veterans Affairs (VA) Office of Inspector General (OIG) Hotline regarding the improper canceling of appointments by clinics within VA Medical Center (VAMC) Leavenworth and VAMC Topeka. The complainant asserted that the clinics/facilities have a long-standing unofficial policy to report clinic appointments that are canceled by doctors or other staff members as "cancelled by patient," instead of correctly listing those appointments as "cancelled by clinic." The clinic/facility is allegedly paid for the provider's time if the appointment is canceled by patient, instead of not getting paid if the clinic was canceled by the provider.

# 2. Description of the Conduct of the Investigation

**Interviews Conducted:** VA OIG interviewed a senior leader, Eastern Kansas Healthcare System (EKHS); a Health Administration Services (HAS) manager; a financial manager, EKHS; and the EKHS Director.

### 3. Summary of the Evidence Obtained From the Investigation

# **Interviews Conducted**

- A senior leader, EKHS, stated that the allegation didn't make sense. He explained that the facilities only were paid if they saw patients. It didn't matter how or why appointments were canceled as that had no bearing on the funding. The funding mechanism for the facility was through the Veterans Equitable Resource Allocation (VERA) system and the Medical Center Allocation System (MCAS), which came down to a Relative Value Unit (RVU) system based on the amount of work completed by seeing patients. The method of canceling appointments had no bearing on this system. It was solely based on what work was completed.
- A HAS manager stated that she oversaw the training of medical support assistants (MSAs), which included scheduling procedures. The MSAs must complete four online training courses in the Talent Management System (TMS) before she would approve their key to access the scheduling system. She also had developed an additional course for MSAs that specifically taught that an appointment was not canceled by patient when the clinic canceled the appointment. The course also explained what *canceled by patient* means and what *canceled by clinic* means. During the time that she had served in her position, she had not heard of the aforementioned allegations from any of the MSAs or supervisors in HAS. She advised her employees that if a provider requested to cancel

several days of appointments, he/she must get approval from the Service Line manager before entering the cancelations in the systems.

In regard to the funding received by the clinic for canceling appointments by patient when the clinic was at fault, she stated that this action would not affect the pay of the providers who worked for VA. These providers were on salary and were paid whether the appointments were canceled by the patient or by the clinic. However, the fee providers were only paid on the patients they saw. If an appointment were canceled, the fee providers would not be paid. It didn't matter if it was canceled by patient or canceled by clinic, they would lose money for the cancellation.

- A financial manager for the EKHS stated that it was not possible in the way the VA funding system worked for the clinics to receive any funding by entering canceled appointment as canceled by patient instead of canceled by clinic. The cancellation of appointments does not affect funding at all. VA had two different funding models: VERA and MCAS. Neither one of these systems was affected by the cancellation of appointments. If the appointments were canceled, the facility would not earn any RVUs and this would not affect the VAMC's funding.
- The EKHS Director stated that he had not heard of these allegations before and that he had recently visited more than 25 clinics within the EKHS. During these visits, no one voiced such concerns. In addition, he did not believe that these allegations were even possible. He explained that, based upon his understanding of the VA funding and reimbursement process, the process of canceling appointments by patient or by clinic would not be tied to any type of payment. Based upon VERA, only the completion of work would increase the amount of dollars to the Veterans Integrated Service Networks (VISN) and not to the specific facility. The canceling of appointments, whether by the patient or the clinic, had no bearing on funding because the work was not completed. He stated he hadn't seen much change in the percentage of appointments canceled by clinics over the past year.

### 4. Conclusion

This investigation revealed no evidence to support the anonymous allegations. VA clinics do not receive funding based on appointments being canceled by patient and not by clinic. The VA funding and reimbursement process was not based on the classification of canceled appointments, but rather on the completion of appointments, which would increase the amount of dollars to the VISN and not to the specific facility under the VERA system. The VISN then decided how to distribute the funds to the VAMCs within its area of responsibility.

Cancellation of appointments, whether by the patient or the clinic, had no bearing on funding at the facility because the work was not completed. Furthermore, there was no indication that appointments canceled by clinics had increased over the past year.

The OIG referred the Report of Investigation to VA's Office of Accountability Review on January 30, 2015.

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For more information about this summary, please contact the Office of Inspector General at (202) 461-4720.