Recommended Wording for Veteran Status Screening Question

UDS Table 4: Selected Patient Characteristics, Line 25 (Total Veterans)

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Health centers are required to conduct and use regular needs assessments and patient intake screenings

- To identify special and vulnerable populations
- To identify needed partnerships
- To inform sites, services, changes in hours, etc.
- To make the case for new or different funding
- To engage the board in strategic decision-making
- To inform strategic planning

**QUESTION:** Is your health center accurately assessing the number and percentage of Military Veterans in your community or existing patient population?

**WHY ACCURACY MATTERS:** Veterans can be a vulnerable population that may need tailored services or require your staff to have military cultural awareness. If you are aware of your patients’ Veteran status, you can prepare and better support them/their family’s unique needs and concerns.
Reported Health Center Veteran Patients = 395,216 (CY22)  
**Is this an underreport?**

<table>
<thead>
<tr>
<th>State</th>
<th>Percent of Patients that are Veterans</th>
</tr>
</thead>
<tbody>
<tr>
<td>ME</td>
<td>5.7%</td>
</tr>
<tr>
<td>MT</td>
<td>4.5%</td>
</tr>
<tr>
<td>ID</td>
<td>4.3%</td>
</tr>
<tr>
<td>AK</td>
<td>4.0%</td>
</tr>
<tr>
<td>VT</td>
<td>3.6%</td>
</tr>
<tr>
<td>OR</td>
<td>3.3%</td>
</tr>
<tr>
<td>WY</td>
<td>3.1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State</th>
<th>Highest Number of Veterans served</th>
</tr>
</thead>
<tbody>
<tr>
<td>CA</td>
<td>32,791</td>
</tr>
<tr>
<td>WA</td>
<td>23,803</td>
</tr>
<tr>
<td>NY</td>
<td>21,624</td>
</tr>
<tr>
<td>TX</td>
<td>17,222</td>
</tr>
<tr>
<td>PA</td>
<td>14,926</td>
</tr>
<tr>
<td>AZ</td>
<td>14,042</td>
</tr>
</tbody>
</table>

Rural Health Centers see more Veterans as % of their total patient population
Veteran Status Screening Question: Wording Matters!

Improved accuracy in Veteran Patient Characteristic is proven when using the recommended wording

RECOMMENDED (SHORT VERSION)

Have you served in the United States military, armed forces, or uniformed services? (yes/ no)

RECOMMENDED [ADD ON to SHORT VERSION]

This includes: Air Force, Army, Coast Guard, Marines, Navy, Space Force, National Guard, Reserves, or the US Public Health Service and National Oceanic & Atmospheric Association. (yes/ no)

NOT RECOMMENDED

Are you a Veteran?

RATIONALE: The US Department of Veterans Affairs (VA) has conducted research that shows individuals do not always consider themselves a “Veteran” for a variety of reasons (ie: unsure what a “Veteran” is; misunderstanding that it’s a “VA-designation” or applied only to individuals with honorable discharge).

As a result, VA recommends simply asking “Have you Served”, with the wording provided above.
Example: Community Health Centers of Southeastern Iowa (CHC/SEIA)
Research project between CHC/SEIA and Veterans Rural Health Resource Center/Iowa City VA Medical Center showed doubling and then consistent annual increase of Veteran status in patients upon universal implementation of “HAVE YOU SERVED” in CY2017 (UDS).

Patients Identified as Veterans at CHC/SEIA

<table>
<thead>
<tr>
<th>Reporting Year</th>
<th>Number of Unique Patients (less children under age 18)</th>
<th>Number of Veterans identified</th>
<th>Percentage of total patients</th>
<th>Percentage of adult patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>17,459 (11,937)</td>
<td>56</td>
<td>.32%</td>
<td>.46%</td>
</tr>
<tr>
<td>2016</td>
<td>16,221 (11,306)</td>
<td>229</td>
<td>1.41%</td>
<td>2.01%</td>
</tr>
<tr>
<td>2017</td>
<td>16,827 (11,370)</td>
<td>506</td>
<td>3.01%</td>
<td>4.45%</td>
</tr>
<tr>
<td>2018</td>
<td>17,976 (12,182)</td>
<td>527</td>
<td>2.93%</td>
<td>4.37%</td>
</tr>
<tr>
<td>2019</td>
<td>17,641 (11,461)</td>
<td>555</td>
<td>3.14%</td>
<td>4.84%</td>
</tr>
</tbody>
</table>

The change was made to the EMR in February 2017

Publication: Introduction of Military Veterans Upon Implementation of a Standardized Screening Process in a Federally Qualified Health Center, M. Bryant Howren, et al. Journal of Community Health Published online 16 October 2019
https://articulateusercontent.com/rise/courses/5msBCyAQYyS77tCB7MPuXpfjlPOCC-bi/0-2H2XNTEx3ci4rO-Article_Identificationof-MilitaryVeterans_J-Comm-Health.pdf
Call to Action: Utilize the Recommended Veteran Screening Question in CY2024 across your Health Center – Update your Tool

“Have you served in the United States military, armed forces or unformed services”?

For additional clarification and to be consistent with the all-inclusive intent of UDS:

“This includes: Air Force, Army, Coast Guard, Marines, Navy, Space Force, National Guard, or Reserves or the US Public Health Service (PHS) and National Oceanic and Atmospheric Administration (NOAA).”

CURRENT HAPPENINGS NATIONALLY:

• NACHC in conversation with HRSA/BPHC to provide this recommended wording as a technical note in the CY2024 UDS Manual

• PCAs/JSI encouraged to raise awareness with health centers during UDS trainings

• PRAPARE Social Determinants of Health (SDOH) screening tool is revising its Veterans question to reflect the recommended wording in its next update SPRING 2024
Health Centers Serving Veterans: Other Resources and Networking Opportunities from NACHC

Join the Veterans Interest Group
Sign up for quarterly updates and opportunities related to serving Veterans! Email trainings@nachc.org to subscribe.

Resource Webpage
Visit www.nachc.org for publications, policy updates, and more!

https://www.nachc.org/resource/supporting-our-nations-veterans/

Health Center Resource Clearinghouse
Search ‘veterans’ to access toolkits, archived webinars, fact sheets and other resources!

On-Demand Resources
Serving Veterans in Health Centers: A Compendium of Success Stories
Veterans and the Community Care Network (CCN): A Fact Sheet and Toolkit for FQHCs

Email trainings@nachc.org or Veterans point of contact:
Gina Capra, Gcapra@nachc.org, 240-565-5154 mobile

Email trainings@nachc.org or Veterans point of contact:
NACHC’s STRATEGIC PILLARS

1. **Equity and Social Justice**
   - Center everything we do in a renewed commitment to equity and social justice

2. **Empowered Infrastructure**
   - Strengthen and reinforce the infrastructure for leading and coordinating the Community Health Center Movement, notably consumer boards and NACHC itself

3. **Skilled and Mission-driven Workforce**
   - Develop a highly skilled, adaptive, and mission-driven workforce reflecting the communities served

4. **Reliable and Sustainable Funding**
   - Secure reliable and sustainable funding to meet increasing demands for Community Health Center services

5. **Improved Care Models**
   - Update and improve care models to meet the evolving needs of the communities served

6. **Supportive Partnerships**
   - Cultivate new and strengthen existing mutually beneficial partnerships to advance the shared mission of improving community health

To learn more about NACHC’s Strategic Pillars visit [https://www.nachc.org/about/about-nachc/](https://www.nachc.org/about/about-nachc/)
THANK YOU!

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