

Analysis of VA Health Care Utilization among Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), and Operation New Dawn (OND) Veterans

Cumulative from 1st Qtr FY 2002 through 4th Qtr FY 2011 (October 1, 2001 – September 30, 2011)

Released November 2011

**Epidemiology Program
Post-Deployment Health Group
Office of Public Health
Veterans Health Administration
Department of Veterans Affairs**
<http://www.publichealth.va.gov/epidemiology>



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Introduction

This is a quarterly report on Veterans who have used Department of Veterans Affairs (VA) health care and who served in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), or Operation New Dawn (OND). Veterans are presenting to VA with a wide variety of physical and psychological health conditions. The data represent the use of health care resources.

The data only apply to OEF/OIF/OND Veterans who have accessed VA health care, and do not represent all recent Veterans who have become eligible for VA health care. This report is created by comparing a Department of Defense (DoD) roster of returning Veterans to VA's electronic inpatient and outpatient health records.

Suggested citation: Epidemiology Program, Post Deployment Health Strategic Healthcare Group, Office of Public Health, Veterans Health Administration, Department of Veterans Affairs. (2011). *Analysis of VA Health Care Utilization among Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn Veterans, from 1st Qtr FY 2002 through 4th Qtr FY 2011*. Washington, DC: Author. Retrieved from (URL)

Check <http://www.publichealth.va.gov/epidemiology> for updates.

Current DoD Roster of Recent Veterans

Evolving roster development by DoD Defense Manpower Data Center (DMDC)

- In September 2003, DMDC developed an initial file of Veterans who had been deployed to the Iraqi and Afghan theater of operations using proxy files: Active Duty and Reserve Pay, Combat Zone Tax Exclusion, and Imminent Danger Pay.
- In September 2004, DMDC revised procedures for creating periodic updates of the roster and now mainly utilizes direct reports from service branches of Veterans who served in OEF/OIF/OND troops.
- VA Office of Public Health is working with DMDC to improve the accuracy and completeness of the roster and the variables provided.

Latest update of roster

- Provided to VA Office of Public Health, Post Deployment Health Strategic Healthcare Group, Epidemiology Program on October 4, 2011.

DoD's OEF/OIF/OND deployment roster

- Contains a list of Veterans who have left active duty and does not include currently serving active duty personnel.
- Does not distinguish between OEF, OIF, or OND Veterans.
- Roster only includes separated OEF/OIF/OND Veterans with out-of-theater dates through August 2011.
- Beginning with the 3rd Quarter Fiscal Year (FY) 2009 report, Veterans who received health care but subsequently died in-theater are being included in the quarterly analysis.
- The number of individuals who died in-theater from FY 2002 through 4th Quarter FY 2011 (October 1, 2001 – September 30, 2011) is 5,584.

How VA uses the DoD Roster of Veterans Who Have Left Active Duty

- The DoD roster is compared to VA's electronic inpatient and outpatient health records in which the standard International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM) diagnostic codes are used to classify health problems in order to determine which OEF/OIF/OND Veterans accessed VA health care as of September 30, 2011.
- The data available for this analysis are mainly administrative data obtained from Veterans' VA medical records and are not based on a review of patient records or a confirmation of diagnoses. However, every clinical evaluation is captured in VA's computerized patient record. The data used in this analysis are appropriate for health care planning purposes because the ICD-9-CM administrative data reflect the use of health care resources.
- These administrative data have to be interpreted with caution because they ***only apply to those OEF/OIF/OND Veterans who have accessed VA health care***. These data do not represent all 1,396,477 OEF/OIF/OND Veterans who have become eligible for VA health care since FY 2002 (beginning October 1, 2001) or the approximately 2.3 million troops (as of August 31, 2011) who have served or are serving in the two theaters of operation since the beginning of the conflicts in Iraq and Afghanistan¹.
- Because VA health data are not representative of the Veterans who have not accessed VA health care, epidemiological studies are required to answer specific questions about the health of all OEF/OIF/OND Veterans.
- Analyses based on this updated roster are not directly comparable to prior reports because the denominator (number of OEF/OIF/OND Veterans eligible for VA health care) and numerator (number of Veterans enrolling for VA health care) change with each update.
- This report presents data from VA's health care facilities and does not include Vet Center data or DoD health care data.

¹ Source: CTS Deployment File Baseline Report, Defense Manpower Data Center. Provided to Epidemiology Program by the Armed Force Health Surveillance Center, 10/25/2011.
VA Health Care Utilization among OEF/OIF/OND Veterans
Cumulative from 1st Qtr FY 2002-4th Qtr FY 2011, Released November 2011

How VA uses the DoD Roster of Veterans Who Have Left Active Duty

- These health care data are “***cumulative totals***” since FY 2002 and do not represent data from any single year.
- The numbers provided in this report should not be manipulated to provide new data without first checking on the validity of the manipulations with VA’s Office of Public Health.
- Updated Roster of OEF/OIF/OND Veterans Who Have Left Active Duty through August 31, 2011
 - **1,396,477** OEF/OIF//OND Veterans have left active duty and become eligible for VA health care since FY 2002
 - **766,081 (~55%)²** Former Active Duty troops
 - **630,396 (~45%)²** Reserve and National Guard

² Percentage reported is approximate due to rounding.
VA Health Care Utilization among OEF/OIF/OND Veterans
Cumulative from 1st Qtr FY 2002-4th Qtr FY 2011, Released November 2011

VA Health Care Utilization from FY 2002 – 4th Qtr FY 2011 among OEF/OIF/OND Veterans

Among all 1,396,477 separated OEF/OIF/OND Veterans

- **741,954 (~53%)³** of total separated OEF/OIF/OND Veterans have obtained VA health care since FY 2002 (cumulative total).
 - **766,081 Former Active Duty in DMDC roster**
 - **411,701 (~54%)³** have sought VA health care since FY 2002 (cumulative total).
 - **630,396 Reserve/National Guard in DMDC roster⁴**
 - **330,253 (~52%)³** have sought VA health care since FY 2002 (cumulative total).

Among the 741,954 OEF/OIF/OND Veterans who received health care since FY 2002

- **694,726 of 741,954 (~94%)³** have been seen only as outpatients by VA.
- **47,228 of 741,954 (~6%)³** have been hospitalized at least once in a VA health care facility.

Comparison of VA Health Care Utilization

- Of the cumulative total of 741,954 OEF/OIF/OND Veterans who utilized VA health care from FY 2002 through 4th Qtr FY 2011, 460,940 Veterans accessed care during the past year (FY 2011, October 1, 2010-September 30, 2011). This represents about 8% of the ~6 million individuals who received VA health care during FY 2010 (October 1, 2009 – September 30, 2010).⁵

³ Percentage reported is approximate due to rounding.

⁴ May include both former and current Reserve/National Guard Members.

⁵ The most recent full fiscal year for which data are available. Obtained from Office of the Assistant Deputy Under Secretary for Health Policy and Planning.

Frequency Distribution of OEF/OIF/OND Veterans by Veterans Integrated Service Network (VISN) Providing Treatment

OEF/OIF/OND Veterans Treated at a VA Facility^{6, 7}

Treatment Site	Frequency	Percent
VISN 1: VA New England Healthcare System	31,724	4.3
VISN 2: VA Healthcare Network Upstate New York	20,220	2.7
VISN 3: VA New York/New Jersey Healthcare System	27,209	3.7
VISN 4: VA Stars & Stripes Healthcare System	38,063	5.1
VISN 5: VA Capitol Health Care System	26,513	3.6
VISN 6: VA Mid-Atlantic Health Care Network	50,370	6.8
VISN 7: VA Southeast Network	58,984	7.9
VISN 8: VA Sunshine Healthcare Network	57,881	7.8
VISN 9: VA MidSouth Healthcare Network	43,270	5.8
VISN 10: VA Healthcare System of Ohio	23,995	3.2
VISN 11: Veterans in Partnership Healthcare Network	33,911	4.6
VISN 12: VA Great Lakes Health Care System	39,076	5.3
VISN 15: VA Heartland Network	31,972	4.3
VISN 16: South Central VA Health Care Network	69,232	9.3
VISN 17: VA Heart of Texas Health Care Network	57,449	7.7
VISN 18: VA Southeast Health Care Network	41,332	5.6
VISN 19: VA Rocky Mountain Network	35,990	4.9
VISN 20: VA Northwest Health Network	43,114	5.8
VISN 21: VA Sierra Pacific Network	37,127	5.0
VISN 22: VA Desert Pacific Healthcare Network	64,784	8.7
VISN 23: VA Midwest Health Care Network ⁸	44,177	6.0

⁶ The total number of OEF/OIF/OND Veterans who received treatment (n = 741,954) was used to calculate the percentage treated in any one VISN. A Veteran can be treated in multiple VISNs, but is counted only once in any single VISN.

⁷ Percentages reported are approximate due to rounding.

⁸ In 2002, VA merged VISNs 13 and 14 to form VISN 23.

Demographic Characteristics of OEF/OIF/OND Veterans Utilizing VA Health Care⁹

	% OEF/OIF/OND (n=741,954)		% OEF/OIF/OND (n=741,954)
Sex		Unit Type	
Male	88.0	Active Duty	55.5
Female	12.0	Reserve/Guard	44.5
Birth Year Cohort¹⁰		Branch	
1980-1995	46.3	Air Force	12.5
1970-1979	25.9	Army	60.7
1960-1969	20.7	Marines	13.6
1950-1959	6.2	Navy	13.1
1926-1949	1.0		
Rank			
Enlisted	91.2		
Officer	8.8		

⁹ Hospitalization and outpatient visits recorded as of September 30, 2011.

¹⁰ Beginning in the 3rd Qtr FY 2009 (April 1, 2009-June 30, 2009), a range of birth years is reported rather than a range of ages, in order to account for younger Veterans.

Diagnostic Data

- Veterans of recent military conflicts have presented to VA for outpatient and inpatient care with a wide range of medical and psychological conditions.
- Diagnoses have encompassed more than 8,000 discrete ICD-9-CM diagnostic codes.
- The three most common diagnoses of Veterans were musculoskeletal ailments (principally joint and back disorders), mental disorders, and “Symptoms, Signs and Ill-Defined Conditions.”
- As in other outpatient populations, the ICD-9-CM diagnostic category, “Symptoms, Signs and Ill-Defined Conditions,” was commonly reported. This is not a diagnosis of an unknown syndrome or unusual illness. This ICD-9-CM code includes symptoms and clinical findings that are not coded elsewhere. It is a diverse, catch-all category that is commonly used for the diagnosis of outpatient populations. It encompasses more than 160 sub-categories and primarily consists of common symptoms that do not have an immediately obvious cause during a clinic visit or of laboratory test abnormalities that do not point to a particular disease process and may be transient.

Frequency of Diagnoses among OEF/OIF/OND Veterans

Disease Category (ICD-9-CM Categories)	% OEF/OIF/OND (n=741,954)	
	Frequency	Percent
Infectious and Parasitic Diseases (001-139)	113,175	15.3
Malignant Neoplasms (140-209)	9,939	1.3
Benign Neoplasms (210-239)	47,337	6.4
Diseases of Endocrine/Nutritional/Metabolic Systems (240-279)	232,680	31.4
Diseases of Blood and Blood Forming Organs (280-289)	26,747	3.6
Mental Disorders (290-319)	385,711	52.0
Diseases of Nervous System/ Sense Organs (320-389)	326,438	44.0
Diseases of Circulatory System (390-459)	155,194	20.9
Diseases of Respiratory System (460-519)	190,744	25.7
Diseases of Digestive System (520-579)	264,756	35.7
Diseases of the Genitourinary System (580-629)	108,908	14.7
Diseases of Skin (680-709)	156,160	21.0
Diseases of Musculoskeletal System Connective Tissue (710-739)	415,685	56.0
Symptoms, Signs and Ill Defined Conditions (780-799)	378,542	51.0
Injury/Poisonings (800-999)	211,586	28.5

Frequency of Mental Disorders¹¹ among OEF/OIF/OND Veterans Evaluated at VA Facilities Since 2002¹²

Diagnosis (ICD-9-CM)	Total Number of OEF/OIF/OND Veterans¹³
Post-traumatic stress disorder (PTSD) (309.81) ¹⁴	207,161
Depressive Disorders (311)	156,189
Neurotic Disorders (300)	134,754
Affective Psychoses (296)	94,486
Alcohol Dependence Syndrome (303)	44,169
Nondependent Abuse of Drugs (305) ¹⁵	30,870
Special Symptoms, Not Elsewhere Classified (307)	26,577
Specific Nonpsychotic Mental Disorder due to Organic Brain Damage (310)	26,039
Drug Dependence (304)	22,974
Sexual Deviations and Disorders (302)	22,310

¹¹ Includes both provisional and confirmed diagnoses.

¹² These are cumulative data since FY 2002. ICD-9-CM diagnoses used in these analyses are obtained from computerized administrative data. Although diagnoses are made by trained health care providers, up to one-third of initial diagnostic codes may not be confirmed because the diagnosis is provisional, pending further evaluation.

¹³ The total will be higher than the 385,711 unique patients who received a diagnosis of a possible mental disorder. A Veteran may have more than one mental disorder diagnosis and each diagnosis is entered separately in this table.

¹⁴ This row of data does not include a) information on PTSD from VA's Vet Centers, b) data from Veterans not enrolled for VA health care, or c) Veterans who received only a diagnosis of adjustment reaction, ICD-9-CM 309 (n=48,194).

¹⁵ This category currently excludes Veterans who have a diagnosis of a) tobacco use disorder only, ICD-9-CM 305.1 (n=103,905); b) alcohol abuse only, ICD-9-CM 305.0, (n=26,293); or both tobacco use disorder and alcohol abuse, ICD-9-CM 305.0 and 305.1, (n=20,947).

Summary

- Recent OEF/OIF/OND Veterans are presenting to VA with a wide range of medical and psychological conditions.
- The 741,954 OEF/OIF/OND Veterans who have accessed VA health care do not constitute a representative sample of all OEF/OIF/OND Veterans.
- For example, the fact that 44% of VA patient encounters were coded as being related to diseases of the nervous system/sense organs does not indicate that 44% of all recent Veterans are suffering from this health problem. Only epidemiological studies can evaluate the overall health of OEF/OIF/OND Veterans.
- Percentages of VA health care utilization by recent OEF/OIF/OND Veterans may be influenced by combat Veterans' enhanced access to VA health care enrollment (in January 2008, this authority was extended from two years to five years post discharge) and exemption from co-pay charges for any health problem possibly related to their military service.
- Also, an extensive outreach effort has been developed by VA to inform these Veterans of their benefits, including briefings for returning Veterans who have left active duty, phone calls to OEF/OIF/OND Veterans not currently in VA health care to inform them of benefits and link them to local VA services, educational events at colleges/universities, returning Service Members welcome home events, a comprehensive website at (<http://www.oefoif.va.gov>), and the mailing of a personal letter from VA's Secretary informing Veterans of their benefits.
- When a combat Veteran's enhanced health care eligibility expires, the Veteran is moved to their appropriate priority group and charged all co-payments as applicable. If their financial circumstances place them in Priority Group 8, their enrollment in VA will be continued, regardless of the date of their original VA application.