

Veteran Status:

An Under-Recognized **Social Determinant of Health (SDoH)** in Medicare Advantage



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About Benelynk



BeneLynk recognizes **Veteran Status** as an important Social Determinant of Health.

We provide services to help Medicare Advantage plans identify, communicate with, and better serve their Veteran members.

Our mission is to improve lives and positively impact Social Determinants of Health barriers by providing our healthcare partners with the information they need, and people with the advocacy they deserve.



A recurrent theme in managed care is the importance of understanding not just the member's medical conditions, but the broader factors impacting the member's lifelong health. A member's [Social Determinants of Health](#) (SDoH) drive up to 80% of health status. Often the phrase "Social Determinants of Health" serves as another way of saying low-income. However, at BeneLynk we think of the Social Determinants of Health more broadly as an individual's life story – both past and present.

Sometimes, an individual's story involves service in the United States Military: a defining life experience.

Military service is a meaningful part of a Veteran's identity, a piece of their healthcare puzzle, and a keystone to a wide variety of benefits available through the Department of Veterans Affairs (VA) and other sources.

This context impacts the way that members access healthcare and, more importantly, how to engage them in meaningful discussion.

MEDICARE ADVANTAGE POPULATION

29 M covered by Medicare Advantage



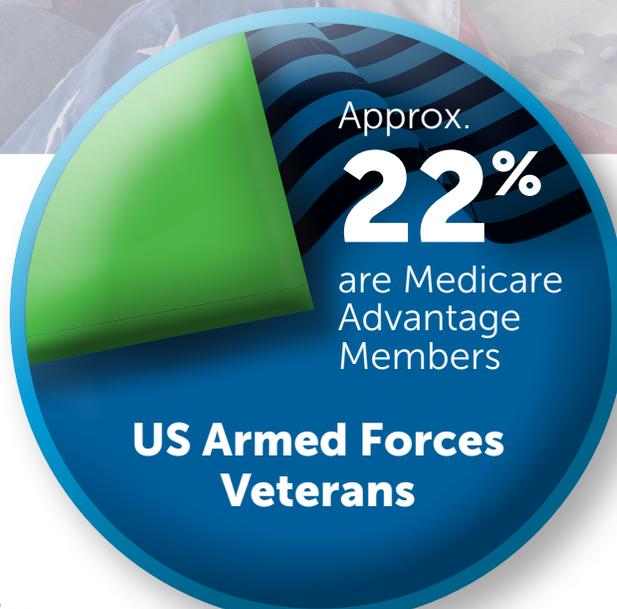
12 M are Dual Eligible



6.5 M MA members and growing are enrolled in VA Healthcare



1.5 M MA members and growing use VA Healthcare for some or all of their needs annually



Identifying Veteran Populations

According to data from the US Census Bureau, approximately **22% of Medicare Advantage (MA) members are Veterans of the United States Armed Forces**. These members have had a unique life experience – one that can increase prevalence of a wide variety of medical and behavioral health conditions. Currently, the majority of MA plans have no systematic understanding of who, within their population, are Veterans. The ability to identify, engage, and communicate with both the [Veteran members and their VA facility](#) requires a unique understanding and comprehensive, systematic approach.

= One Million Lives



Understanding Veteran Healthcare at the VA

The Veterans Health Administration is America's largest integrated health care system, providing care at 1,293 health care facilities, including 171 medical centers and 1,112 outpatient sites of care of varying complexity, serving 9 million enrolled Veterans each year.

According to the Journal of the American Medical Association, of the 29 million Medicare Advantage members, 8.3% were enrolled in Veterans Health coverage through the Department of Veterans Affairs. And over 60% of this population accesses VA healthcare in a given year. In other words, **5% of the Medicare Advantage population receives some or all of their care at a VA facility each year.**



The Challenge: Care Coordination Between the VA and MA

For many Veterans the VA provides care at a low cost, or even for free. Many Veterans begin using the VA upon separation from the military and build a long-standing relationship with providers there. When these Veterans become Medicare eligible, many choose to follow the guidance of both CMS and the VA in maintaining both coverages. These Veterans make a range of decisions around what care to access within the VA and Medicare. Since there is no coordination of benefits between the VA and Medicare, VA care is invisible to Medicare Advantage plans. Five percent of all Medicare Advantage members receive medical care that is not systematically communicated to the plan!

This invisible care prevents MA plans from documenting all member medical conditions. These members often look like healthy non-users but their lack of engagement might impact retention, participation in care management initiatives to improve their health, and your ability to accurately capture HEDIS measurements.

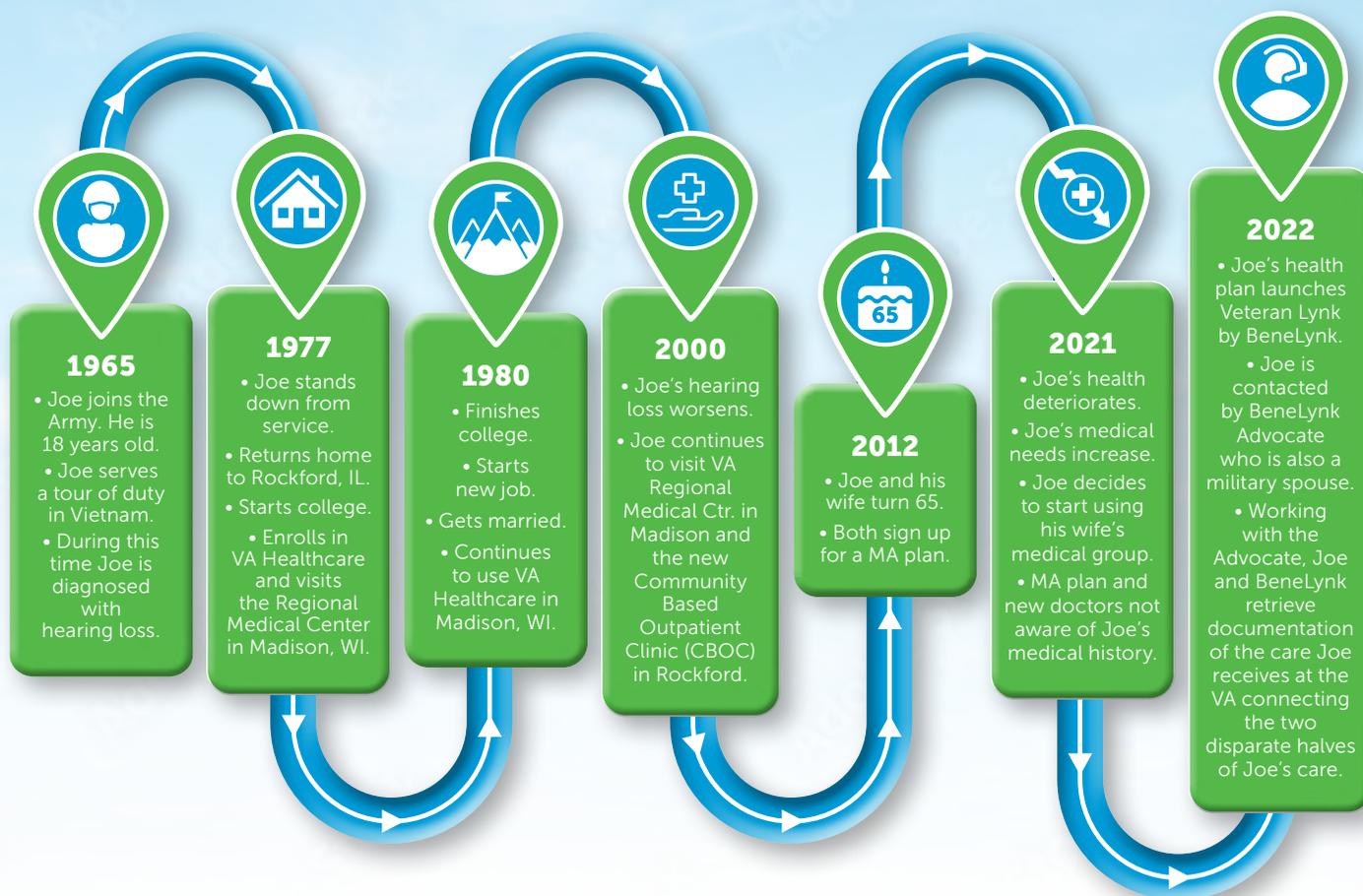
This gap can adversely impact Star Measures and prevent MA plans from accurately reflecting the appropriate risk score for these members. Finally, it prevents MA plans from performing their fundamental mission of providing excellent, coordinated, medical care to Medicare recipients.

The Value of Understanding All Member Care

As our healthcare delivery model continues to evolve, we learn more and more about the importance of understanding the whole patient. Medicare members who have served our country have access to a wide array of healthcare and other benefit programs — most notably [services from the Department of Veterans Affairs](#). Finding this population, getting them to engage with your plan, and building a communication bridge is the first step in delivering optimal healthcare to our nation's Veterans.



Member Journey



Meet Joe the Veteran

"I'm Joe! In **1965** I joined the Army at 18".

In **1977**, a couple years after the end of the Vietnam war, Joe stands down from service and returns to his hometown of Rockford, IL. Joe attends college and uses the nearby VA Regional Medical Center in Madison, WI (The William S. Middleton Memorial Hospital) for his medical care.

He likes visiting the VA as many others that served in Vietnam are receiving care there. The staff is friendly and recognize that being a Veteran is an important part of who Joe is. He feels welcome and understood.

While on tour in Vietnam, like many soldiers, Joe tested positive for Hepatitis C. Unfortunately, he also suffered hearing loss.

After finishing college in **1980**, Joe is offered a position at a large local employer and receives employer sponsored healthcare. He continues to visit the VA facility in Madison for most of his care. He gets married, raises a family, and decides to retire early in 2005. He is 58 years old.

In **2000**, the VA added a new community-based outpatient clinic (CBOC) in Rockford which Joe visits occasionally. For treatment of his liver disease and his newest challenge, Type 2 Diabetes. Joe continues to visit the VA Regional Medical Center in Madison, WI.

In **2012**, both Joe and his wife turn 65. They do their research and learn about Medicare. They both sign up for a Medicare Advantage plan.

By **2022**, Joe's health is deteriorating. He wants to visit local specialists for his increasing medical needs and starts to see the medical group his wife has used for years. Joe's chronic illnesses are not new, but his health plan has just become aware of them. To his Medicare Advantage plan, Joe looked like a healthy guy!

Joe's plan wants to help him receive the care and help he needs to live his best life. To understand how to help him, they need data! They didn't even know Joe was a Veteran. The plan needs Joe's medical records to understand his medical and SDoH history.





Veterans Helping Veterans

At BeneLynk, we [conduct outreach to identify Veterans](#) through live-agent conversations with advocates located entirely within the United States. [We recruit heavily within the Veteran and military spouse communities.](#) In addition to knowing that this is an excellent labor pool from which to draw, we have found that the shared life experience (either of being a Veteran or having a spouse actively serving) [leads to a strong connection and builds trust](#) between our advocates and members.

BeneLynk recognizes [Veteran status as an important Social Determinant of Health.](#) We provide services to help MA plans identify, communicate with, and better serve their Veteran members.

We go the extra mile by [retrieving documentation of VA care directly from the VA.](#) All of this is accomplished in direct conversation with the member, asking them about when they served, in what branch, and where they receive care through the Department of Veterans Affairs. Then, we're able to link members with a wide array of Veteran-specific benefit programs to help them meet any challenges they may be facing. We're committed to serving Veterans and helping MA plans find and connect their Veteran population with the benefits they deserve.



22% of Medicare Advantage Members are Veterans of the U.S. Armed Forces.

Veteran Status

To learn more about our **SDoH solutions**, please click on any of the icons to follow us on social media or visit our website at [BeneLynk.com](https://www.BeneLynk.com)



About BeneLynk

BeneLynk is a national provider of social determinant of health (SDoH) solutions for Medicare Advantage and Managed Medicaid health plans. We serve plans and their members by creating a human-to-human connection and providing the assistance a member needs to get the benefits they deserve.

By employing one dynamic conversation that flows organically to meet social determinant of health challenges, we build stronger human connections that are supported by innovative technology.

All of our services are customized to the specific geography where we provide services and provide the members with the specific information they need to keep their benefits in place.

