

Department of Veterans Affairs

Gulf War Era Veterans
Supplemental Pre-9/11 Report

July 2015



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Report Introduction

Gulf War Era Review

On August 2, 1990, the Republic of Iraq invaded and occupied the State of Kuwait. Following international condemnation of the invasion, the United States began deployment of American military forces to the Persian Gulf region as part of Operation Desert Shield, beginning what is now referred to as the Gulf War era. After unsuccessful attempts from the world community to diplomatically resolve the situation, the United States led an international military coalition in Operation Desert Storm aimed at liberating Kuwait. This military campaign swiftly ended in February 1991, however, to date, Congress has not declared an official ending to the Gulf War era.

As America's armed forces made their tremendous contribution to the historic victory of the United Nations coalition, VA geared up to fulfill its mission of providing contingency support for the U.S. military medical program. Fortunately, U.S. casualties were light, and VA was able to refocus these intensified efforts on preparing to meet the needs of returning Veterans. The nation owes its full, unequivocal support to those we send to war.

VA worked closely with the Department of Defense (DoD) to expedite benefits and services to our Servicemembers wounded, ill and injured in Operation Desert Storm and to provide all possible assistance to the families of those who died. As the troops from the Persian Gulf War came home, VA took special steps to ensure all were apprised in filing claims or for other services. VA showed the way to achieving a new level of responsiveness and efficiency in serving Veterans.

Based upon a collaborative relationship with the DoD Manpower Data Center, the Department of Veterans Affairs (VA) has identified 6.5 million Veterans with at least one day of service during the Pre-9/11 period ranging from August 2, 1990 through September 10, 2001. VA provides a range of benefits and services to address the various needs of these Veterans. This report provides a snapshot of Pre-9/11 Gulf War Era Veterans and how VA serves them with compensation, healthcare, education, insurance, loan guaranty, and vocational rehabilitation programs.

Gulf War Reporting Requirement

The Veterans Health Care Act of 1992 required a series of reports on Gulf War Veterans shortly after enactment of the legislation. A specific obligation from this Law that remains is an annual report on VA health research for the Gulf War Era population (Title VII 707). There also remains a general obligation to report data from the "Persian Gulf War Veterans Health Registry" which contains the names of individuals who served as a member of the Armed Forces in the Persian Gulf Theater of operations during the Persian Gulf War and who –

- a. Applies for medical care services from VA under Chapter 17 of 38 U.S.C.

- b. Files a claim for disability compensation under Chapter 11 of 38 U.S.C. on the basis of any disability which may be associated with such service;
- c. Dies and is survived by a spouse, child, or parent who files a claim for dependency and indemnity compensation under Chapter 13 of 38 U.S.C. of such title on the basis of such service;
- d. Requests from VA a health examination under section 703; or receives from DoD a health examination similar to the health examination referred to in subparagraph (D) and requests inclusion in the Registry.

This supplemental report supports VA's general obligation to provide information about Gulf War Era Veterans.

Supplemental Report Overview

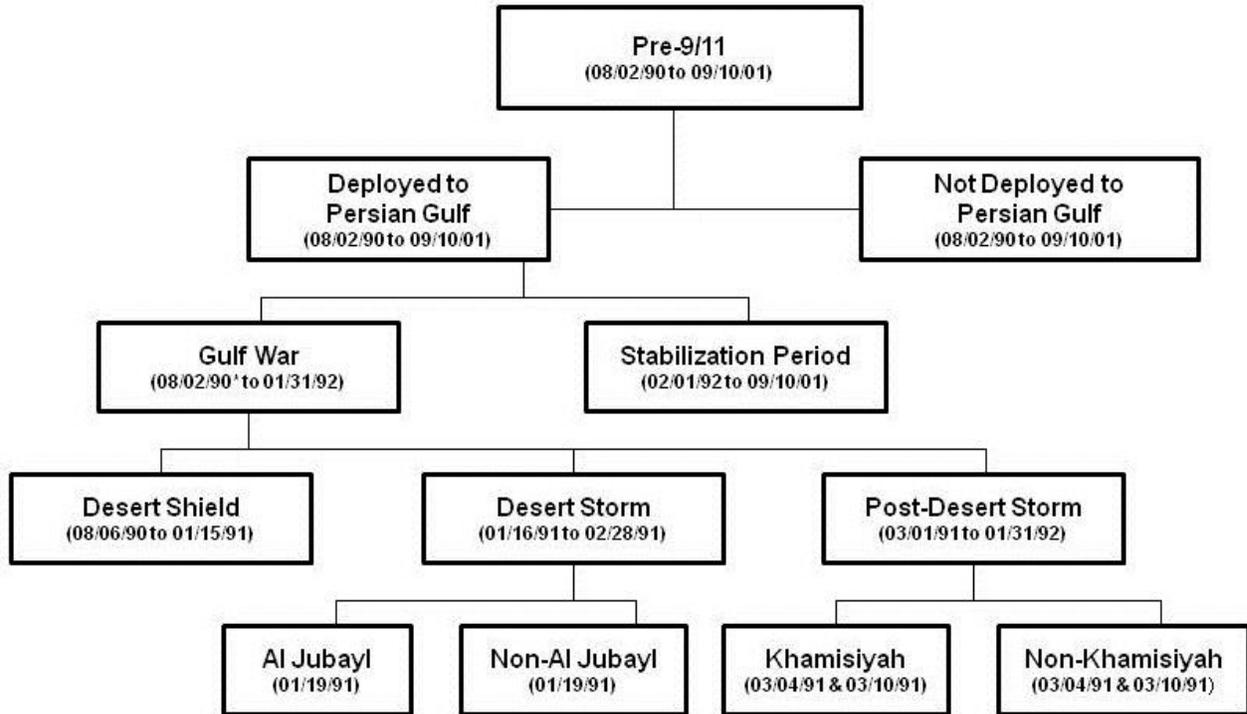
This report supplements VA's February 2011 Gulf War Era Pre-9/11 Report that provided comprehensive statistics on the utilization of VA benefits and healthcare services. This supplement provides an update of the base report, not a reissue of it. For example, the February 2011 Report has a map of the Southwest Asia theater of operations, "State of Record at Discharge," and "Race/Ethnicity data for the Pre- 9/11 Cohort" that are static historical variables; therefore, an update was not needed since these variables are not expected to change.

The purpose of this report is to provide statistics on the utilization of VA benefits and healthcare services by Gulf War Era Pre-9/11 Veterans. This report provides analyses of disability compensation, pension, education and healthcare data to include enrollment characteristics. The data used in this report were obtained from multiple internal and external sources. More information regarding data can be found in the "Data Sources, Assumptions and Limitations" section. The tables shown in this report contain Veteran counts by cohort and sub-cohort.

For reference, the Gulf War Era Pre-9/11 Report can be found at:
http://www.va.gov/vetdata/docs/SpecialReports/GW_Pre911_report.pdf.

Cohort Structure

The Cohort Structure shows the relationship of Pre-9/11 Veteran cohorts and sub-cohorts for different types of military service, operational periods, conflicts and significant exposure events such as Al Jubayl, Saudi Arabia and Khamisiyah, Iraq. The Pre-9/11 cohort is disaggregated by Deployed vs Not-Deployed status.



*The start date for the Gulf War period of service as outlined in Title 38 Code of Federal Regulations (CFR) §3.2(i).

Pre-9/11: Identifies Veterans with military service during the period August 2, 1990 to September 10, 2001.

Deployed to Persian Gulf: Identifies Veterans who served in Persian Gulf region during the period August 2, 1990 to January 31, 1992 or Stabilization Period from February 1, 1992 to September 10, 2001.

Not Deployed to Persian Gulf: Identifies Pre-9/11 Veterans who did not deploy to the Persian Gulf region between August 2, 1990 to September 10, 2001.

Gulf War Component: Served in Operation Desert Shield (August 2, 1990 to January 15, 1991), Operation Desert Storm (January 16, 1991 to February 28, 1991) and/or in the Post-Desert Storm Period (March 1, 1991 to January 31, 1992).

Exposure Events: Identified by DoD as potentially exposed to toxins during service in Al Jubayl, Saudi Arabia or Khamisiyah, Iraq on one of the dates noted above.

Veteran Profile – FY 2013

The following tables present major demographics by cohort. The way to read the table is as follows. The Pre-9/11 cohort (6,510,889) includes both the not deployed cohort (5,382,345) and the deployed cohort (1,128,544) combined. The Desert Shield and Desert Storm (DS/DS) cohorts are included in the deployed cohort. The Al Jubayl cohort is included in the DS/DS cohort. The Khamisiyah cohort is included in the deployed cohort, but not the DS/DS cohort. They are part of the Post-Desert Storm cohort.

The 'Vital Stats' table allocates Pre-9/11 populations into those living, deceased and unknown status. The tables that follow provide information on Veterans' Gender and Service Branches. These numbers may vary slightly from other published reports due to varying data collection methods. To calculate the percent, we did not include unknown.

Vital Stats FY 2013	Pre-9/11	Not Deployed	Deployed	DS/DS	Al Jubayl	Khamisiyah
Deceased	266,770 (4.1%)	223,296 (4.2%)	43,474 (3.9%)	28,754 (4.6%)	93 (7.0%)	7,230 (5%)
Living	6,231,666 (95.9%)	5,147,240 (95.8%)	1,084,426 (96.1%)	592,920 (95.4%)	1,240 (93%)	137,990 (95%)
Unknown	12,453	11,809	644	285	0	66
All	6,510,889	5,382,345	1,128,544	621,959	1,333	145,286

For the Pre-9/11 and the Not Deployed cohorts, the percent male is between 81 and 83 percent. For the DS/DS and the Deployed cohorts, the percent male is 92. For Al Jubayl, Saudi Arabia exposure site, it is 99 percent male and for the Khamisiyah, Iraq exposure site, it is 90 percent male.

Gender FY 2013	Pre-9/11	Not Deployed	Deployed	DS/DS	Al Jubayl	Khamisiyah
Female	945,754 (14.9%)	862,022 (16.5%)	83,732 (7.5%)	44,952 (7.3%)	<10	13,582 (9.4%)
Male	5,406,397 (83.2%)	4,368,395 (81.3%)	1,038,002 (92%)	574,710 (92.5%)	1,323 (99.3%)	131,300 (90.4%)
Unknown	158,738	151,928	6,810	2,297	<10	404
All	6,510,889	5,382,345	1,128,544	621,959	1,323	145,286

The Pre-9/11 population consists of 6.5 million Veterans with at least one day of military service during the period August 2, 1990 to September 10, 2001. More than 1.1 million Veterans deployed to the Persian Gulf region and 621,959 participated in Operations Desert Shield/Desert Storm. For each cohort, the percent living is between 93 to 96 percent.

Service Branch FY 2013	Pre-9/11	Not Deployed	Deployed	DS/DS	Al Jubayl	Khamisiyah
Army	2,917,635 (44.8%)	2,506,578 (46.6%)	411,057 (36.4%)	325,884 (52.4%)	55 (4.1%)	141,287 (97.3%)
Navy	1,407,327 (21.6%)	1,023,772 (19%)	383,555 (34%)	133,069 (21.4%)	1,255 (94.2%)	430 (.3%)
Air Force	1,252,421 (19.2%)	1,046,587 (19.4%)	205,834 (18.3%)	73,182 (11.8%)	<10	1,975 (1.4%)
Marines	677,004 (10.4%)	557,734 (10.4%)	119,270 (10.6%)	86,513 (13.9%)	<10	1,086 (.8%)
Other*	256,502 (3.9%)	247,674 (4.6%)	8,828 (.8%)	3,311 (.5%)	<10	508 (.4%)
All	6,510,889	5,382,345	1,128,544	621,959	1,333	145,286

*The 'Other' category includes Public Health Service, NOAA and service branch unknown

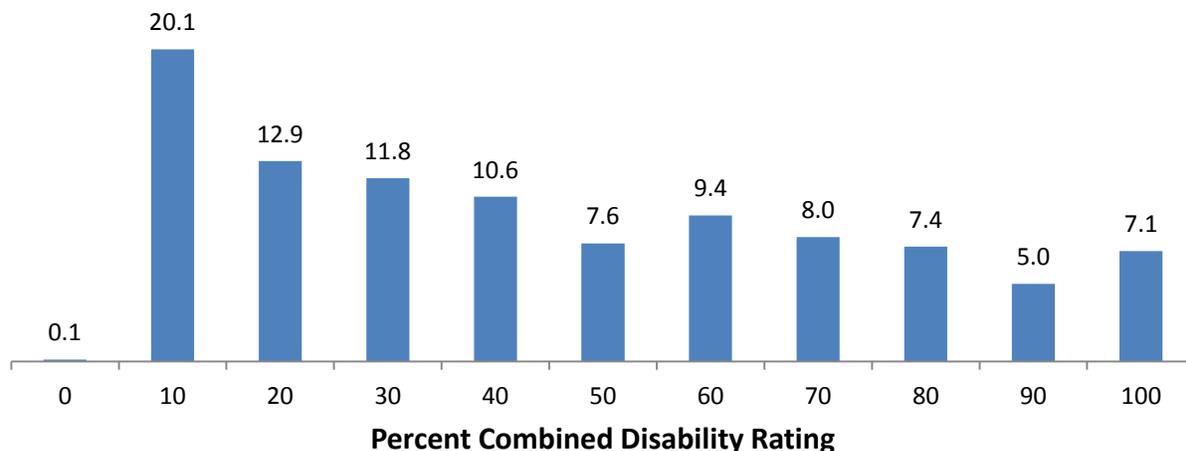
Veterans Receiving Compensation by Combined Evaluation – FY 2013

Disability Compensation is a tax free monetary benefit paid to Veterans with disabilities resulting from disease or injury associated with active military service. From FY 2000 to 2009, the number of Pre-9/11 Veterans receiving compensation increased 135 percent from 469,000 to 1.1 million. From FY 2009 to FY 2013 the number of Veterans receiving compensation increased an additional 35 percent from 1.1 to 1.5 million.

Combined Rating (in percent)	Pre-9/11	Not Deployed	Deployed	DS/DS	AI Jubayl	Khamisiyah
0	1,710	1,269	441	236	0	56
10	293,177	223,850	69,327	39,068	79	9,195
20	188,245	141,567	46,678	25,503	43	6,084
30	172,616	126,416	46,200	25,649	49	6,224
40	155,234	114,284	40,950	22,964	44	5,716
50	110,906	79,369	31,537	18,130	21	4,723
60	136,639	97,056	39,583	22,174	37	5,678
70	117,476	81,894	35,582	21,534	35	6,047
80	108,492	75,427	33,065	20,067	34	5,537
90	72,281	50,458	21,823	13,515	22	4,030
100	103,677	75,817	27,860	19,066	52	5,790
Total	1,460,453	1,067,407	393,046	227,906	416	59,080

For those receiving a combined rating in percent, the breakout for the Pre-9/11 cohort is shown in the chart below. The 0 percent combined rating is almost zero. The 10 percent combined rating is the highest percentage at over 20 percent. Over 55 percent of the Veterans have a combined rating of 10 to 40 percent.

Distribution of Pre-9/11 Gulf War Veterans Receiving Compensation by Disability Rating in FY13 (in percent)



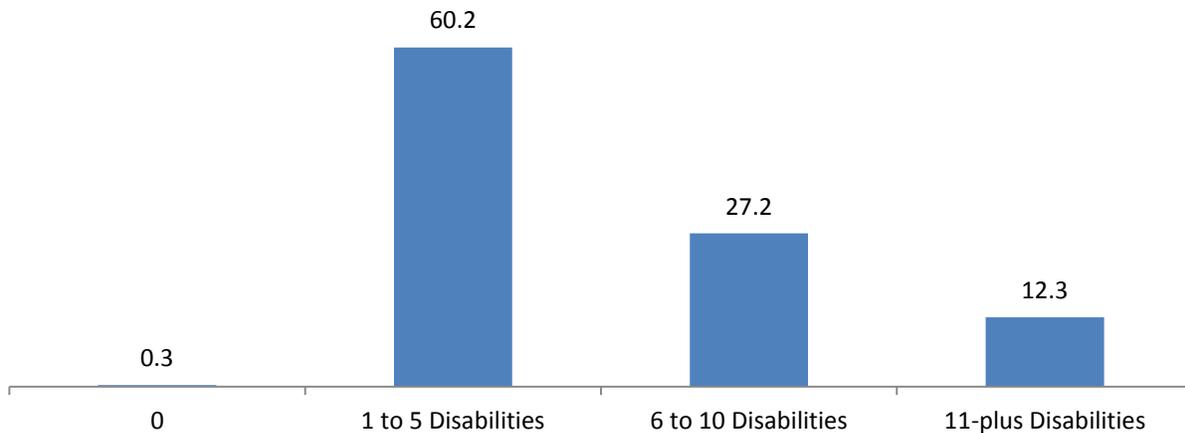
The following table shows the number of disabilities per Veteran in defined groups for FY 2013. Most of the Pre-9/11 Veterans fall into the 1 to 5 number of disabilities per Veteran group.

Number of Disabilities per Veteran – FY 2013

Number of Disabilities	Pre-9/11	Not Deployed	Deployed	DS/DS	AI Jubayl	Khamisiyah
0	4,284	3,113	1,171	609	0	140
1-5	869,860	663,439	206,421	124,451	255	32,875
6-10	392,701	273,661	119,040	65,819	110	16,435
11+	178,182	115,986	62,196	34,115	46	8,813

The following chart shows the number of disabilities per Veteran in defined groups by percentage for the Pre-9/11 cohort. Over 60 percent of the Pre-9/11 Veterans are in the 1 to 5 disabilities per Veteran category and nearly 30 percent are in the 6 to 10 disabilities per Veteran category.

Distribution of Pre-9/11 Gulf War Veterans by Number of Disabilities per Veteran in FY13 (in percent)



Non-Service-Connected Pension by Cohort and Fiscal Year

Veterans' Pension is a tax-free monetary benefit paid to low-income wartime Veterans who meet disability and other criteria to help families cope with financial challenges. Less than one percent of Pre-9/11 Veterans receive benefits under VA Pension programs.

Non-Service-Connected Pension by Cohort and Fiscal Year

FY	Pre-9/11	Not Deployed	Deployed	DS/DS	Al Jubayl	Khamisiyah
2010	11,660	8,294	3,366	2,419	<10	721
2011	12,802	9,129	3,673	2,610	<10	758
2012	14,109	10,164	3,945	2,764	<10	800
2013	15,426	11,208	4,218	2,912	<10	817

The non-service-connected pension percentage change from 2010 to 2013 increased for the following cohorts: 33 percent increase for the Pre-9/11 cohort; 20 percent increase for the DS/DS cohort; 25 percent increase for the Deployed cohort; 35 percent increase for the Not Deployed cohort; and 13 percent increase for the Khamisiyah cohort. There was no percentage change for the Al Jubayl cohort.

Education Programs by Cohort – FY 2013

VA pays benefits to eligible Veterans pursuing an approved education or training program. The table below reviews educational benefits provided to Pre-9/11 Veterans using the following primary programs: Post-9/11 GI Bill (Chapter 33); Montgomery GI Bill-Active Duty (Chapter 30); and Selected Reserve Programs (Chapter 1606/1607).

The Post-9/11 GI Bill program, which began making payments in 2009, provides financial assistance towards tuition and fees, books, and supplies and provides a monthly housing allowance to help offset educational costs. It also allows Veterans to transfer unused Post-9/11 GI Bill benefits to an eligible spouse or child.

Education Programs	Pre-9/11	Not Deployed	Deployed	DS/DS	AI Jubayl	Khamisiyah
Montgomery GI Bill (Ch30)	50,194	43,742	6,452	2,528	<10	677
Post 9/11 GI Bill (Ch33)	237,744	194,595	43,149	18,437	23	4,101
Reservist Programs (Ch1606/1607)	6,386	5,889	497	286	0	78

From FY 2009 to FY 2013, use of the Post-9/11 GI Bill (Ch33) program by Pre-9/11 Veterans has increased 329 percent from 55,400 to 237,744 while use of the Montgomery GI Bill (Ch30) program has decreased 74 percent from 191,800 to 50,200 over the same period.

Vocational Rehabilitation Programs by Cohort – FY 2013

VA assists Veterans with service-connected disabilities to prepare for, obtain, and maintain suitable employment through the Vocational Rehabilitation and Employment program. From FY 2009 to FY 2013, participation of Pre-9/11 Veterans in the Vocational Rehabilitation program decreased 33.5 percent from 123,286 to 82,013. Participation in the Post-9/11 GI Bill program increased 329 percent from 55,400 to 237,744.

Vocational Rehabilitation Programs – FY 2013

	Pre-9/11	Not Deployed	Deployed	DS/DS	Al Jubayl	Khamisiyah
VocRehab Veterans	82,013	62,220	19,793	11,616	17	3,230
Total Veterans	6,510,889	5,382,345	1,128,544	621,959	1,333	145,286
Percentage	1.26%	1.16%	1.75%	1.87%	1.28%	2.22%

Roughly 1.3 percent of Pre-9/11 Veteran cohort participated in the Vocational Rehabilitation Program in FY13.

Inpatient and Outpatient Healthcare by Cohort – FY 2013

VHA provides healthcare treatment at medical centers, community based clinics, Vet Centers, mobile vans as well as through other means. In FY 2013, more than 2.3 million Pre-9/11 Veterans were enrolled in VA Healthcare programs. The following two tables below contrast how many Veterans use VA Inpatient and Outpatient health services (Unique) to the total number of Inpatient/Outpatient services (Encounters) utilized.

Veterans Receiving Inpatient Treatment

Inpatient Care	Pre-9/11	Not Deployed	Deployed	DS/DS	Al Jubayl	Khamisiyah
Inpatient Unique	65,883	50,368	15,515	10,583	23	3,009
Inpatient Encounters	99,354	75,992	23,362	15,955	31	4,606

Inpatient healthcare utilization for the Pre-9/11 population from FY 2009 to 2013 has increased as follows:

- Inpatient Unique Veterans increased 60.7 percent from 41,000 to 65,883.
- Inpatient encounters increased 69.8 percent from 58,500 to 99,354.

Veterans Receiving Outpatient Treatment

Outpatient Care	Pre-9/11	Not Deployed	Deployed	DS/DS	Al Jubayl	Khamisiyah
Outpatient Unique	1,197,576	904,497	293,079	186,354	390	52,091
Outpatient Encounters	14,608,808	11,095,626	3,513,182	2,352,838	4,827	692,995

Outpatient healthcare utilization for the Pre-9/11 population from FY 2009 to 2013 has increased as follows:

- Outpatient Unique Veterans increased 42.3 percent from 843,000 to 1.2 million
- Outpatient encounters increased 94.7 percent from 7.5 million to 14.6 million

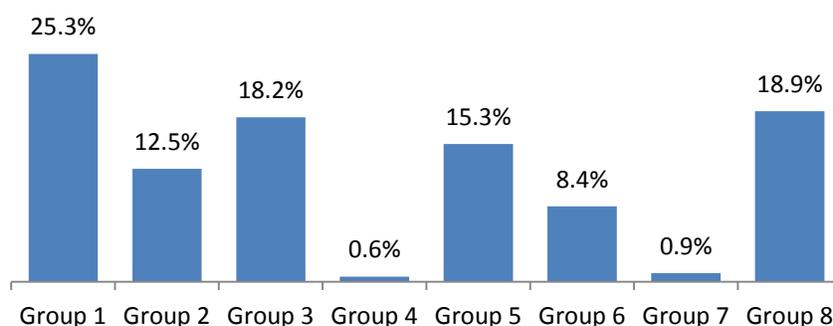
Healthcare Enrollment by Priority Group by Cohort – FY 2013

VA healthcare enrollment Priority groups are used to balance demand with resources with Priority Group 1 representing the most seriously injured and ill Veterans. Priority Group 1 contains the highest portion (25.3%) of Pre-9/11 Veterans healthcare enrollees. Of the 595,553 Pre-9/11 Veterans in Priority Group 1, 71 percent (425,771) were from the Not-Deployed cohort and 29 percent (169,782) were from the Deployed cohort. Veterans who served in Operations Desert Storm/Desert Shield make up 18 percent of the Pre-9/11 Veterans in Priority Group 1. Priority Groups are defined in the Definitions and Abbreviations section of this Report.

Distribution of Cohorts by Priority Groups

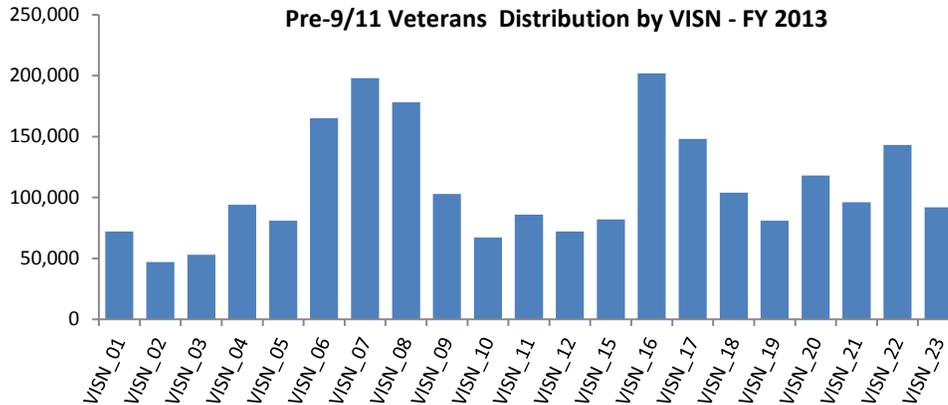
	Pre-9/11	Not Deployed	Deployed	DS/DS	Al Jubayl	Khamisiyah
Group 1	595,553	425,771	169,782	104,642	191	29,822
Group 2	294,586	218,985	75,601	43,162	92	10,971
Group 3	430,370	330,084	100,286	57,201	120	13,959
Group 4	13,298	10,424	2,874	1,928	0	507
Group 5	359,853	286,519	73,334	41,542	77	10,366
Group 6	197,460	143,018	54,442	38,014	119	11,026
Group 7	21,917	18,221	3,696	2,062	<10	450
Group 8	446,202	358,457	87,745	52,161	138	12,483

Percentage of Pre-9/11 Veterans by Priority Group



Veterans Healthcare by VISN and Cohort – FY 2013

VA Veterans Health Administration (VHA) medical facilities are divided into 21 Veteran Integrated Service Networks (VISN) that oversee operations in distinct areas of the country. Of the 2.4 million Pre-9/11 Veterans enrolled in VA healthcare, 330,767 enrollees served in Desert Shield/Desert Storm. VISN 16 had the highest number of Pre-9/11 Veterans using healthcare with 202,209 Veterans.



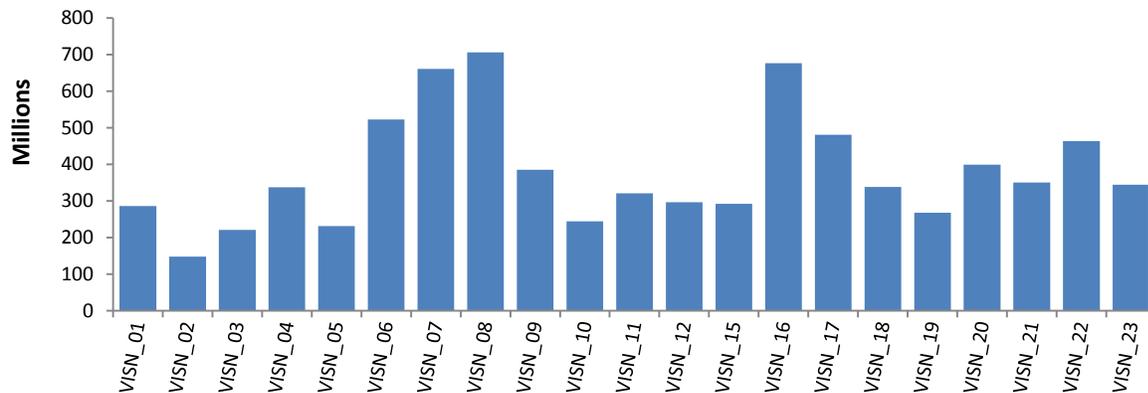
VA Healthcare Use by VISN – FY 2013

VISN	Pre-9/11	Not Deployed	Deployed	DS/DS	Al Jubayl	Khamisiyah
VISN_01	72,404	59,218	13,186	7,587	11	1,959
VISN_02	46,762	37,472	9,290	5,682	<10	1,458
VISN_03	52,642	43,370	9,272	5,807	<10	1,469
VISN_04	93,686	74,017	19,669	12,189	<10	3,212
VISN_05	81,468	63,734	17,734	10,375	12	2,850
VISN_06	165,409	117,977	47,432	30,831	92	7,600
VISN_07	198,068	145,797	52,271	35,762	159	11,444
VISN_08	178,405	136,472	41,933	23,932	27	5,901
VISN_09	103,173	76,367	26,806	18,810	93	6,027
VISN_10	67,047	51,683	15,364	9,443	<10	2,579
VISN_11	86,189	66,533	19,656	12,758	16	3,353
VISN_12	71,973	56,199	15,774	9,648	16	2,239
VISN_15	82,420	62,385	20,035	12,924	21	3,908
VISN_16	202,209	152,730	49,479	30,621	41	7,938
VISN_17	148,465	111,662	36,803	23,189	17	8,293
VISN_18	103,815	77,443	26,372	15,197	20	4,180
VISN_19	81,456	63,728	17,728	9,796	12	2,582
VISN_20	118,451	90,987	27,464	14,460	33	3,304
VISN_21	95,831	73,712	22,119	11,239	26	2,006
VISN_22	143,349	103,186	40,163	19,072	72	2,040
VISN_23	91,955	72,930	19,025	11,445	25	2,914
Total	2,285,177	1,737,602	547,575	330,767	693	87,256

VISN Healthcare Costs by Cohort – FY 2013

Healthcare related annual costs for Pre-9/11 Veterans have increased from \$5.4 billion in FY 2009 to \$8 billion in FY 2013 at an average cost of \$6,600 per patient. The tables below show the healthcare costs associated with each VHA VISN. The highest VISN healthcare cost for the Pre-9/11 cohort is VISN 08 at \$706,381,552.

Pre-9/11 Veterans Healthcare Costs by VISN - FY 2013



VISN Healthcare Costs by Cohort – FY 2013

VISN	Pre-9/11	Not Deployed	Deployed	DS/DS	Al Jubayl	Khamisiyah
VISN_01	\$285,562,087	\$233,021,767	\$52,540,320	\$33,598,608	\$28,306	\$9,022,499
VISN_02	\$148,030,458	\$118,200,234	\$29,830,224	\$19,578,180	\$9,658	\$4,970,470
VISN_03	\$220,637,798	\$178,495,688	\$42,142,110	\$28,248,866	\$40,987	\$7,823,529
VISN_04	\$337,422,428	\$268,384,433	\$69,037,995	\$46,279,910	\$14,992	\$15,681,441
VISN_05	\$230,715,169	\$182,410,440	\$48,304,728	\$32,922,851	\$38,724	\$11,106,443
VISN_06	\$522,385,087	\$377,606,052	\$144,779,034	\$103,347,230	\$384,500	\$28,906,425
VISN_07	\$661,170,976	\$480,931,144	\$180,239,832	\$134,325,969	\$497,343	\$47,035,420
VISN_08	\$706,381,552	\$546,508,530	\$159,873,022	\$103,282,514	\$120,833	\$29,284,748
VISN_09	\$385,424,974	\$281,712,867	\$103,712,107	\$75,057,501	\$359,181	\$24,624,878
VISN_10	\$243,910,040	\$186,260,966	\$57,649,074	\$40,650,678	\$7,316	\$11,149,299
VISN_11	\$320,836,369	\$244,571,773	\$76,264,596	\$52,136,577	\$63,872	\$15,498,127
VISN_12	\$296,451,913	\$230,542,818	\$65,909,095	\$42,695,765	\$32,450	\$10,348,527
VISN_15	\$291,923,779	\$222,220,820	\$69,702,959	\$47,693,772	\$66,201	\$14,383,475
VISN_16	\$676,211,659	\$509,736,397	\$166,475,263	\$115,664,029	\$137,557	\$36,918,412
VISN_17	\$480,913,778	\$360,211,846	\$120,701,932	\$85,683,772	\$19,470	\$32,796,387
VISN_18	\$337,909,471	\$256,120,770	\$81,788,701	\$52,460,026	\$45,234	\$15,469,352
VISN_19	\$268,046,519	\$209,080,621	\$58,965,898	\$37,942,798	\$29,049	\$10,270,234
VISN_20	\$399,081,600	\$313,305,498	\$85,776,102	\$49,547,848	\$247,201	\$12,169,694
VISN_21	\$350,621,162	\$275,060,681	\$75,560,481	\$44,603,823	\$94,771	\$9,495,809
VISN_22	\$463,726,293	\$342,368,613	\$121,357,681	\$66,162,888	\$412,292	\$9,073,801
VISN_23	\$343,969,633	\$269,896,062	\$74,073,571	\$49,577,140	\$108,501	\$12,842,462

Veterans with Long-Term Care – FY 2013

Long Term Care (LTC) includes a range of services such as help with everyday tasks and support for managing an illness. LTC is provided for an extended period when a Veteran is not able to perform everyday tasks and can be provided in many settings. LTC Home and Community Based Services are part of VA's Medical Benefits Package where it is available for enrolled Veterans who have a clinical need for it.

VA standard Long Term Care services include geriatric evaluation to assess care needs for adult day healthcare, respite care and skilled home healthcare as well as other services. Some services are prioritized based on the level of VA service-connected disability.

Of the Pre-9/11 Veterans that have used LTC services, there is an average of 26 services used per Veteran. Although the Khamisiyah Veteran cohort is much smaller in number than most of the other cohorts, this cohort uses LTC services at a rate of 30.4 uses per Veteran.

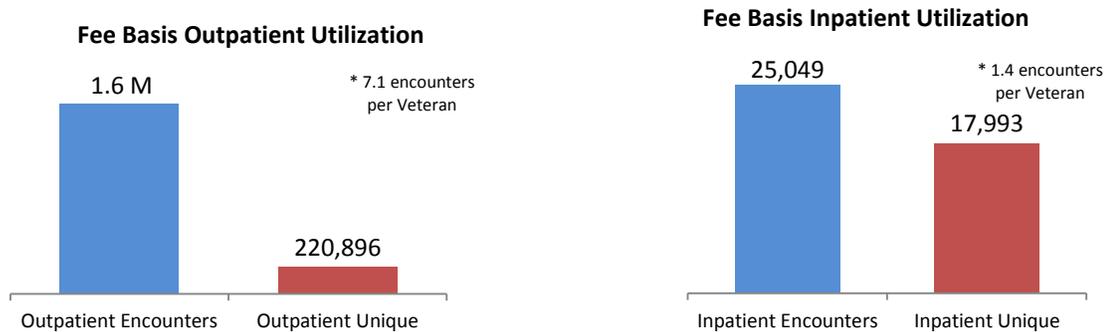
Long-Term Care by Cohort – FY 2013

	Pre-9/11	Not Deployed	Deployed	DS/DS	AI Jubayl	Khamisiyah
LTC Uniques	2,332	1,786	546	387	0	113
LTC Encounters	60,630	46,482	14,148	9,841	0	3,437
LTC Use per Veteran	26	26	25.9	25.4	0	30.4

Note: The Unique count represents the actual number of Veterans that utilized the program. Since a Veteran may use the program multiple times, Encounters count represents the total number of times the program was used.

Veterans with VA Fee Basis Care by Cohort – FY 2013

VA may authorize payment for medical care in private sector facilities to ensure timely and accessible care. The Non-VA Medical Care Program is described in the Abbreviations and Definitions section of this report. In FY 2009 approximately 165,000 Veterans received 1.04 million instances of VA Fee Basis outpatient care. This increased to 220,896 Veterans and 1.6 million in FY 2013.



Veterans with VA Fee Basis Care by Cohort – FY 2013

Fee Basis	Pre-9/11	Not Deployed	Deployed	DS/DS	Al Jubayl	Khamisiyah
Inpatient Unique	17,993	14,033	3,960	2,648	<10	796
Inpatient Encounters	25,049	19,409	5,640	3,675	10	1,114
Outpatient Unique	220,896	169,872	51,024	33,157	63	9,742
Outpatient Encounters	1,562,575	1,199,072	363,503	244,559	645	71,785

Note: The 'Unique' count represents the actual number of Veterans that utilized the program. Since a Veteran may use the program multiple times, the "Encounters" count represents the total number of times the program was used.

Definitions and Abbreviations

The following appendix provides high-level descriptions for major terms that may have been used in this report:

Cohorts

- **Pre-9/11:** Veterans who served during the inclusive period of August 2, 1990 to September 10, 2001.
- **Deployed to Persian Gulf:** Veterans deployed to the Southwest Asia Theater of operations as part of the Gulf War (August 2, 1990 to January 31, 1992) and the Stabilization Period (February 1, 1992 to September 10, 2001).
- **Desert Shield:** Veterans deployed to the Southwest Asia theater of operations, as defined by 38 CFR §3.317, from August 6, 1990 to January 15, 1991 and participated in Operation Desert Shield.
- **Desert Storm:** Veterans deployed to the Southwest Asia Theater of Operations from January 16, 1991 to February 28, 1991 and participated in Operation Desert Storm.
- **Al Jubayl:** Veterans identified by DoD who served in and around Al Jubayl, Saudi Arabia on or about January 19, 1991 during an event classified as a possible “Iraqi chemical warfare agent attack.” Additional information regarding these events may be accessed at following DoD website: http://www.gulflink.osd.mil/story/scud_irfna.jsp
- **Khamisiyah:** Veterans identified by DoD who served at the Khamisiyah Ammunition Supply Point, Iraq on March 4, 1991, and on March 10, 1991. Military Servicemembers destroyed Iraqi “chemical warfare agent rockets,” possibly exposing military personnel to low levels of chemical warfare agents. Additional information about the current Khamisiyah analysis can be viewed at DoD’s web site: http://www.gulflink.osd.mil/khamisiyah_iii/.

Disability Compensation: A monetary benefit paid to Veterans disabled by an injury or illness that was incurred or aggravated during active military service.

DMDC: Known as the Defense Management Data Center, this DoD entity is the central source for identifying, authenticating, authorizing, and providing information on personnel. Additional information may be found at the following site: <https://dmdc.osd.mil/appj/dwp/index.jsp>

DoD: Department of Defense.

DS/DS: Operations Desert Shield/Desert Storm

Fee-Basis: A VA program that pays for medically necessary care at non-VA facilities for certain Veterans when they meet certain conditions and criteria. Non-VA medical care is care provided to eligible Veterans outside of VA when VA facilities are not feasibly available. All VA Medical Centers (VAMCs) can use this program when needed. The

use of non-VA medical care is governed by federal laws containing eligibility criteria and other policies specifying when and why it can be used. A preapproval for treatment in the community is required for non-VA medical care – unless the medical event is an emergency. Emergency events may be reimbursed on behalf of the Veteran in certain cases.

Gulf War (Persian Gulf War): A period of war defined by Title 38 U.S.C. based upon active military service from August 2, 1990, through a date to be prescribed by Presidential proclamation or law.

Healthcare Enrollment: The process of establishing eligibility for VA healthcare.

Healthcare Priority Groups: VA healthcare enrollment groups are used to balance demand with resources as follows:

- Group 1: Veterans with VA-rated service-connected disabilities 50 percent or more disabling; and Veterans determined by VA to be unemployable due to service-connected conditions.
- Group 2: Veterans with VA-rated service-connected disabilities 30 percent or 40 percent disabling
- Group 3: Veterans who are Former Prisoners of War; Veterans awarded a Purple Heart medal; Veterans whose discharge was for a disability that was incurred or aggravated in the line of duty; Veterans with VA-rated service-connected disabilities 10 percent or 20 percent disabling; Veterans awarded special “benefits for individuals disabled by treatment or vocational rehabilitation;” and Veterans awarded the Medal Of Honor.
- Group 4: Veterans who are receiving aid and attendance or housebound benefits from VA; and Veterans determined by VA to be catastrophically disabled.
- Group 5: NSC Veterans and non-compensable service-connected Veterans rated 0 percent disabled by VA with annual income and/or net worth below VA’s national income threshold and geographically-adjusted income threshold for their resident location; Veterans receiving VA pension benefits; and Veterans eligible for Medicaid programs.
- Group 6: World War I Veterans; Compensable 0 percent service-connected Veterans; Veterans exposed to ionizing radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki; Project 112/Shipboard Hazard and Defense (SHAD) participants; Veterans exposed to the defoliant Agent Orange while serving in the Republic of Vietnam between 1962 and 1975; Veterans of the Gulf War that served between August 2, 1990 and November 11, 1998; Certain Veterans who served in a theater of combat operations after November 11, 1998. Note: At the end of this enhanced enrollment priority group placement time period, Veterans will be assigned to the highest Priority Group their unique eligibility status at that time qualifies for.

- Group 7: Veterans with gross household income below the geographically-adjusted income threshold (GMT) for their resident location and who agree to pay co-pays.
- Group 8: Veterans with gross household income above VA's national income threshold and the geographically-adjusted income threshold for their resident location and who agrees to pay co-pays.

Race/Ethnicity: OMB-designation for describing the identity of the American population.

Rank: A designation of position and responsibility within a branch of military service.

Reserve/Guard: Components within the Armed Forces who may or may not be Federally-activated to military service.

Service Connection (S/C): Under VA statutes and regulations, "Service-connected" means that a disability or death resulted from active military, naval, or air service. S/C disabilities and diseases are expressed as a percentage from zero percent to 100 percent in increments of 10 percent.

Southwest Asia Theater of operations: for the purposes of rendering a decision on disability compensation claims based upon undiagnosed illnesses, the locations are as follows: Iraq, Kuwait, Saudi Arabia, the neutral zone between Iraq and Saudi Arabia, Bahrain, Qatar, the United Arab Emirates, Oman, the Gulf of Aden, the Gulf of Oman, the Persian Gulf, the Arabian Sea, the Red Sea, and the airspace above these locations. *Note:* The neutral zone between Iraq and Saudi Arabia no longer exists.

Undiagnosed Illnesses (UDX): Under Title 38 CFR §3.317 Veterans may be granted compensation for a chronic disability which manifested either during active military, naval, or air service in the Southwest Asia theater of operations during the Gulf War, or to a degree of 10 percent or more not later than December 31, 2011. Additionally, the disability cannot be attributed to any known clinical diagnosis by history, physical examination, and laboratory tests.

VA Regional Office (VARO): A collection of 56 VA benefits offices that provide benefits information and process claims. VAROs can be found in each state, the District of Columbia, Puerto Rico, and the Republic of the Philippines.

Veterans Health Care Act of 1992 full reference citation: Veterans Health Care Act of 1992 Pub. L. No. 102 – 585 § 106 STAT. 4943

VISN: Veteran Integrated Service Networks are organizational elements within VA's healthcare system. There are a total of 21 VISNs which provide geographic oversight to a collection of healthcare facilities within the established jurisdictions.

Data Sources, Assumptions and Limitations

This report does not cite statutes or regulations for terms and definitions. The terms and definitions used in this document are intended for this report only and should not be relied upon for any other purpose.

Data used in this report was compiled from DOD and VA data sources with the primary data sources described below:

DoD Data

When defining the Veteran populations for the Pre-9/11 cohort and all sub-cohorts, DoD served as the sole source of Servicemember verification. This included the historic Khamisiyah and Al Jubayl rosters as well. DMDC information was matched using the social security number (SSN) and the primary key.

Healthcare Data

To capture the various types of healthcare information, administrative data from enrollment and VHA utilization files were utilized.

The Office of the Assistant Deputy Under Secretary for Health maintains the VHA Enrollment data files that contain records of patient characteristics (such as sex, Veteran status, VHA user status, date of birth, service-connected disability status). The Enrollment file used in this report is Fiscal Year 2013 (FY13). During enrollment, each Veteran is assigned to a Priority Group that is used to balance demand for VA healthcare enrollment with resources.

VHA Utilization File: The Utilization file contains data that show how Veterans access and use VA healthcare across the Nation. Specific data are provided on outpatient care, inpatient care, long-term care and fee-based care. The file is prepared annually and specially for use by NCVAS with data related to Outpatient Care, Inpatient Care, Long-Term Care, and Fee-Based Care.

Benefits Data

VETSNET Corporate Records: The corporate database is the repository for VBA data that can store an unlimited number of disability conditions identified by eight-digit diagnostic codes. This report uses up to six diagnostic conditions, which means that not every VBA diagnostic code in each Veteran's benefit record was counted. As a result, VBA diagnostic code tallies do not reflect every condition for which disability compensation is being paid. The Corporate data system has built-in edits to ensure that diagnostic codes are valid and stores sufficient data to properly identify each condition. Part of the subsystem deployment was phased in and its use was not mandatory for over one year due to various factors. Data from the initial deployment until mid-2003 is incomplete due to this limitation.

Compensation & Pension: The VBA Office of Performance Analysis and Integrity provides records of Veterans who receive VA Disability Compensation or Pension payments for each fiscal year. Veterans with pending or denied claims are not included.

Education: The VBA Office of Performance Analysis and Integrity provides records of Veterans who receive education benefits under Chapters 30, 32, 33, 1606, and 1607.

Contact Information

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