The Long Journey Home XI
Treatment of Posttraumatic Stress Disorder in the Department of Veterans Affairs: Fiscal Year 2002 Service Delivery and Performance

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Executive Summary

In the decades since the end of the Vietnam conflict, the treatment of veterans suffering from war-related Posttraumatic Stress Disorder (PTSD) has become a major priority for the Department of Veterans Affairs (VA) health care system. Starting October 1, 1995, the Veterans Health Administration (VHA) of VA underwent a major reorganization into 22 semi-autonomous Veterans Integrated Service Networks (VISNs). FY 2002 saw further reorganization with the consolidation of VISNs 13 and 14 into the newly designated VISN 23. The implementation of the VA reorganization and the budget stresses during recent years have stimulated a major review of VA mental health care programs at the VAMC, VISN, and national levels. The shift of the locus of service from costly inpatient programs to more accessible outpatient and community-based clinics is a national VHA goal and continues as a major focus of activity, with a large number of the Millennium Bill programs becoming operational in FY 2002. In the past several years the spectrum of programs for the treatment of PTSD in VA has substantially widened to include a rich array of outpatient clinics, short-term hospital programs, and non-hospital residential rehabilitation programs, gradually replacing the once widely established Specialized Inpatient PTSD Units (SIPUs). Evaluation studies have shown that long-term inpatient treatment of PTSD is not more effective than shorter term hospital treatment with outpatient follow-up care, and is considerably more costly (Fontana and Rosenheck, 1997a). These findings have stimulated significant reallocation of resources for PTSD treatment.

This summary of data on VA treatment programs for PTSD is a component of the National VA Mental Health Program Performance Monitoring System (Rosenheck and Greenberg, 2003), and has been prepared to assist clinicians, administrators and planners in their review of programmatic options for treating PTSD. Information is presented in four sections: (1) A national overview and performance assessment of PTSD treatment in VA including utilization data on both specialized and non-specialized programs; (2) A review of patients treated and services delivered by the Specialized Outpatient PTSD Programs; (3) A review of changes in VA's programmatic capacity to provide treatment for PTSD, and (4) Outcomes monitoring of Specialized Intensive PTSD Programs.

In this report we present information on:

(1) the population of veterans residing in each VISN, including the number and percent who are service connected or low income (27.5% of all US veterans), the total number who receive VA compensation for PTSD (180,155), and the proportion who use VA mental health services annually (10.0% of all eligible veterans; 60.5% of all those service connected for PTSD);

(2) the distribution of specialized PTSD programs, and their funding, across VISNs (there are 150 specialized programs nationwide, ranging from 4-13 per VISN);

(3) population coverage and workload of specialized *outpatient* PTSD programs (67,449 veterans were seen in FY 2002, a 16.7% increase over FY 2001, and 51,016 veterans were treated [seen more than once] in FY 2002, a 15.2% increase over FY 2001);

(4) workload and cost data on treatment provided by specialized *outpatient* PTSD programs (there were 629,403 visits in FY 2002, an 11.8% increase over FY 2001; the average cost per visit was $78 and the average cost per capita was $956)`;

(5) population coverage and utilization of *inpatient* treatment for PTSD (VA Census data show 229 occupied general psychiatry *beds* are used to treat veterans with a primary diagnosis of PTSD, a 17.0% decrease from FY 2001, constituting 7.1% of all general psychiatry beds. Discharge data show a total of 7175 *episodes* of inpatient treatment for PTSD in FY 2002, compared to 7597 in FY 2001, a 5.6% decrease);

(6) workload and cost data on treatment provided by *specialized* inpatient and residential PTSD programs (there were 4650 admissions in FY 2002 at an average cost of $5005 per admission and $132 per day);

(7) a summary PTSD performance score which evaluates each VISN on its delivery of both inpatient and outpatient PTSD services;

(8) the characteristics of patients treated in VA's specialized outpatient PTSD programs;

(9) changes in PTSD program workload, staffing and costs during the past two years, and

(10) outcomes of PTSD treatment in specialized intensive programs;

(11) the total number of outpatients treated for PTSD in the VA system broken out by whether they received treatment in a specialized PTSD program (59,431), from a PTSD specialist (13,428), from a mental health program other than the above (110,711), or from a non-mental health program (19,292) [see Appendix E].

For ease of reference, Appendix B presents the goals for the Special Emphasis Programs for PTSD as introduced in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*, and as modified subsequently with the approval of the Clinical Quality Improvement Specialist, Office of Performance and Quality, VA Headquarters.

PTSD is one of the most prevalent of war-related illnesses. Providing high quality treatment for PTSD will remain a top priority for VA as it builds on the clinical experience and expertise it has developed during the past decade. The data presented here suggest considerable variability across VISNs in the delivery of some PTSD services. It is the task of thoughtful planning, performance assessment, and clinical care to assure that, as VA passes through a period of major change during the years to come, the treatment provided to veterans with PTSD is equitably distributed, accessible, effective and, efficient.

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Treatment of Posttraumatic Stress Disorder in the Department of Veterans Affairs

In the decades since the end of the Vietnam conflict, the treatment of veterans suffering from war-related Posttraumatic Stress Disorder (PTSD) has become a major priority for the Department of Veterans Affairs (VA) health care system. With both clinical recognition and clear scientific demonstration that the effects of war zone trauma can be long lasting and severe (Wilson & Raphael, 1994; Kulka et al., 1990), VA has increasingly directed substantial clinical, educational, and research resources towards treatment of the only psychiatric illness directly related to war-zone experience.

For many thousands of veterans, PTSD is a chronic disorder resulting directly from their military service that causes substantial psychological suffering and social disability. The national network of specialized PTSD programs that has been established by VA is unique in the world. Studies have shown that veterans are very well pleased with the services received, significantly more so than they are with services from nonspecialized psychiatry programs (Fontana & Rosenheck, 1996a). The availability of specialized PTSD programs is an important indicator of the quality of health care provided by VA. At the close of FY 2002, VA's Specialized Outpatient PTSD Programs (SOPPs) consisted of 109 clinical teams: 98 PTSD Clinical Teams (PCTs), 6 Substance Use PTSD Teams (SUPTs) and 5 Women's Stress Disorder Treatment Teams (WSDTTs). At the close of FY 2002, VA's Specialized Intensive PTSD Programs (SIPPs) consisted of 4 Evaluation and Brief Treatment PTSD Units (EBTPUs), 16 Rehabilitation Programs (PRRPs), 7 PTSD Day Hospitals, 7 PTSD Domiciliary (PTSD Dom) (which replaced the PTSD/Substance Abuse Unit), 5 Specialized Inpatient PTSD Units (SIPUs), 1 dual-diagnosis PTSD Day Hospital with a substance abuse component (DHsa), and 1 Women's Trauma Recovery Program (WTRP). The central mission of these teams as defined by Headquarters and the VA Special Committee on PTSD is to provide specialized PTSD treatment services to underserved veterans with PTSD due to military-related trauma.

Since 1988, the Northeast Program Evaluation Center, which also serves as the Evaluation Division of the National Center for PTSD, has been monitoring and evaluating the implementation and performance of specialized VA programs for the treatment of war-zone related PTSD under the auspices of VA's Strategic Health Care Group for Mental Health (Fontana, Rosenheck & Spencer, 1990, 1991, 1993; Fontana, Rosenheck, Spencer, & Gray, 1995; Fontana & Rosenheck, 1994, 1996a; Rosenheck & Fontana, 1994a, 1994b, 1996).

Reorganization of the Veterans Health Administration (VHA)

About five years ago, in October 1995, the Veterans Health Administration (VHA) of VA underwent a major reorganization into 22 semi-autonomous Veterans Integrated Service Networks (VISNs) (Kizer, 1995). In 2002, VISNs 13 and 14 combined to form VISN 23. All of the VISNs are charged with developing cost-effective health care programs that are responsive to both the national mission of the Department of Veterans Affairs and to local circumstances and trends in health care service delivery. The implementation of the VA reorganization, and the anticipation of possible budget reductions during the coming years, has stimulated a major review of VA health care programs (mental health programs among them) at the VAMC, VISN, and national levels. The shift of the locus of service from costly inpatient

programs to more accessible outpatient and community-based clinics has been identified as a national corporate goal and is emerging as a major goal of planning at the VISN level.

Organizational change is invariably a complex and difficult process. Clear, accurate and relevant data are essential to the success of such a process. In this summary report we have assembled a variety of types of information on the operation of VA's PTSD treatment programs to aid clinicians and administrators at various stages of planning for the future of VA treatment of PTSD. [1]

Structure, Process and Outcome in the Evaluation of Health Care Service Delivery

For the past 20 years, the evaluation of health care systems has been conceptualized as assessing three dimensions of care: (1) structure, the resources needed to provide care, (2) process, the delivery of services, and (3) outcome, the impact of treatment on the well-being of patients (Donabedian, 1988). The data presented in sections I - III of this report primarily focus on structure and process of treatment and on population-based rates of service utilization. Outcome has been addressed extensively in previous and ongoing studies conducted at NEPEC, and in Part IV of this report. The first of these studies addressed the performance of VA's PTSD Clinical Teams in considerable breadth and depth (Fontana, Rosenheck & Spencer, 1990, 1991, 1993; Fontana, Rosenheck, Spencer, & Gray, 1995; Fontana & Rosenheck, 1996a). Evaluation data showed that the programs were serving their intended target population and that treatment was associated with significant improvement in PTSD symptoms and other life domains. Further, a major study of the cost and effectiveness of different approaches to inpatient PTSD treatment has been published (Fontana & Rosenheck, 1996a, 1997a; Rosenheck & Fontana, 1995b). In addition, a comprehensive outcome monitoring system has been implemented for inpatient PTSD treatment at 62 VA medical centers (Fontana & Rosenheck, 1997b), and additional outcome data are presented in Part IV of this report.

A recent discussion of health care performance assessment in cardiac surgery in VA, however, has refocused attention away from the "tyranny of outcomes" (Berwick, 1988) by drawing attention to the fact that outcomes can only be influenced by changes in clinical process and clinical structures (Hammermeister et al., 1995). There is thus substantial need for basic information on the structure and process of PTSD treatment, in addition to data on outcome performance. Issues of basic structure and program design are especially important since they have the greatest impact on total service costs. With anticipated reductions in Medicare and Medicaid funding and the growth of the number of Americans without health care coverage continuing at a rate of 1 million persons per year, VA will become the provider of last resort for an increasing number of veterans. This is especially true in the mental health area, in which major reductions in funding for State Mental Health Agencies have been under way for several years. It will thus be important to maximize the efficiency of service delivery if VA is to expand its treatment capacity to help the growing number of eligible veterans for whom it is the provider

[1] This report is part of a larger effort to provide VA managers with data on performance in the mental health area and is part of a more general National Mental Health Program Performance Monitoring system that addresses the core aspects of VA mental health care, including both specialized and non-specialized programs (Rosenheck & DiLella, 2000).

of last resort.

A recent national survey of veterans examined why veterans chose to use VA services and found that while 19.4% of VA system users reported low cost as the main reason, the second largest proportion (18.4%) chose VA because it "provided services not found elsewhere" (US Department of Veterans Affairs, 1995, p. 53). Several other studies have found that veterans with war zone service (Rosenheck & Massari, 1993) and, more specifically, Vietnam veterans with PTSD (Rosenheck & Fontana, 1995a) are significantly more likely to use VA rather than non-VA mental health services. VA services for PTSD are thus likely to be in high demand during the coming years and major efforts are needed to assure that services are available to the greatest extent possible.

PART I: AN OVERVIEW OF VA TREATMENT OF PTSD

Population Characteristics

Table 1 presents basic information on the population of veterans in each VISN, on the number who are eligible for VA services, the number and proportion who are service connected for a psychiatric disorder, and who are specifically service connected for PTSD. While there are substantial differences in the total veteran population in each VISN, differences in the proportions who are eligible for VA services or who are service connected are small to moderate. More detailed data on sociodemographic characteristics of veterans in each VISN are available in the report on the full mental health monitoring system (Rosenheck & DiLella, 2000).

Additional data on use of *VA mental health services* among all veterans and, more specifically, among those service-connected for PTSD are also presented in Table 1. Here too variations in population coverage between VISNs are modest, as evidenced by the small coefficients of variation (the standard deviation of the mean of all VISNs divided by the mean of all VISNs). Outlier values are defined as those that are 1 standard deviation below the mean of all VISNs, reflecting especially low population coverage, and are indicated by being framed in Table 1.[2]

Specialized Treatment Programs for PTSD in VA

The initial task for system planners is to identify the location and distribution of existing programs. VA programs that treat patients with PTSD can be divided into two types: general psychiatry programs and "specialized programs." General programs are standard VA inpatient and outpatient programs that treat veterans with PTSD in the same settings in which they treat veterans with other mental health problems. The "specialized programs" are staffed by experts who have concentrated their clinical work in the area of PTSD treatment. Such specialization has long been recognized as an essential feature in treatment of war-related PTSD. Treatment of PTSD requires specific familiarity with the kinds of trauma veterans encountered in various US wars, and special skills and experience to address the effects of these traumas.

Tables 2-3 present summary information on the number and types of specialized PTSD programs in each VISN and at each medical center. VISNs with especially small numbers of specialized programs are framed in Table 2. Table 2a shows changes from FY 2001- FY 2002 in the number of programs operating in each VISN. There was a net gain of 2 PCTs, 1 PTSD Dom, and 2 PRRPs. There was a net loss of 1 EBTPU and 1 SIPU. The number of SUPTs, of WSDTTs, of PTSD DHs, and the Dhsa and WTRP remained the same. Additional data on changes in program staffing are presented in Part III of this report. Table A1 in Appendix A shows changes from FY 1995 to FY 2002 in the number of programs operating in each VISN.

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[2]One standard deviation is used as the criterion for identifying outliers throughout Part I. Since most comparisons reported here are one-tailed, one standard deviation identifies the extreme 15% of each distribution.

Tables 4-5 present data on FY 2002 expenditures by VISN and by each of these programs. Fiscal data presented in Tables 4 and 5 reflect expenditure of special Congressionally appropriated funds along with locally generated funds for PTSD treatment as reported by each medical center in its annual program summary to NEPEC. These data are combined in Table 4 with population data to evaluate population-based per capita spending on specialized PTSD treatment in each VISN. While these funds account for the great majority of expenditures on specialized PTSD outpatient programs, they often constitute only part of the funding of inpatient programs. Bolding/underlining is used to indicate VISNs that spend especially high proportions of special funds on inpatient care. Framed/highlighted values reflect low per capita levels of funding.

In past reports, Table 6 presented data from VA's Cost Distribution report (CDR) on all VA expenditures for inpatient PTSD programs (including both locally allocated funds and funds allocated by a peer review process from special Congressionally appropriated funds). Separate cost centers for these programs were initiated in FY 1994 and many sites have not fully used these cost centers in their CDR distributions. As a result, substantial discrepancies have been observed in some instances between total funding as reported on the CDR, and total funding as reported in annual program reports to NEPEC. These data were presented in Long Journey Home in the past, in part, to stimulate more careful reporting of expenditures in the proper cost accounts in the CDR. Unfortunately, incongruities between the CDR reports and the annual program reports continue to exist and reliable data for FY 2002 were not available. For this reason, Table 6 is not included in this year's report.

Specialized PTSD Outpatient Programs

Tables 7 through 8 present summary workload data on the work of Specialized Outpatient PTSD Programs (SOPP): the PTSD Clinical Teams (PCT) program, the Substance Use PTSD Teams (SUPT) program, and the Women's Stress Disorder Treatment Teams (WSDTT) program. Table 7 presents basic information from computerized VA workload data (the outpatient file) on the number of veterans seen, the number of visits received, and the number of visits per veteran for the SOPPs in each VISN. Data are also presented (Table 7a) on workload changes from FY 2001 to FY 2002. Overall these programs saw 16.7% more patients in FY 2002 than in FY 2001. The intensity of contact improved as evidenced by an increase of 14.6% in the number of visits. Table A2 in Appendix A presents summary workload data and the changes from FY 1995 to FY 2002.

Table 8 presents workload data for specialized PTSD programs by medical center within each VISN. Teams that saw especially low numbers of veterans in FY 2002, or that deliver low intensity services, are framed/highlighted.

Inpatient and Residential Treatment of PTSD

As noted above, inpatient treatment of PTSD in VA takes place in both specialized programs for PTSD and general psychiatry programs. National VA workload data do not allow differentiation of treatment in different types of PTSD programs, although new bed section codes, introduced in FY 1994, will allow such differentiation in the future. In this section we

first present data on inpatient and residential PTSD treatment overall, without differentiating various types of specialized programs. Data on specialized programs are presented subsequently.

Census Data. Tables 9 and 10 present data from the FY 2002 end-of-year national census of VA inpatients (conducted on patients hospitalized at midnight on September 30). Table 9 presents data on the number of occupied general psychiatry beds[3] in each VISN and the number and proportion of beds occupied by patients whose primary diagnosis is PTSD (ICD-9 code 309.81). This year data are also presented on the number of occupied domiciliary and PRRP beds in each VISN and the number and proportion of beds occupied by patients whose primary diagnosis is PTSD (ICD-9 code 309.81). Data are also presented on the length of stay for these patients *up to the time of the census*.[4] Since these are one-day cross-sectional data it should be borne in mind that they weight data from long-stay patients more heavily than data averaging care delivered during the entire year (e.g., the data presented in Tables 11, 11-2, 12, and 12-2). VISNs with especially long lengths of stay for PTSD (1 standard deviation above the mean of all VISNs) are signaled by bolding/underlining. Table 9 also presents population data on beds per capita among eligible veterans in the general population. VISNs with especially high numbers of beds per capita occupied by PTSD patients are bolded/underlined, while VISNs with especially low numbers of PTSD beds per capita are framed/highlighted. While the advantage of census data is that they present information on occupied beds, the representativeness of a one-day sample is limited. Additional information is available, however, from the discharge abstract file -- the Patient Treatment File (PTF). Table 9a presents data on changes from FY 2001-FY 2002 in beds devoted to PTSD treatment. There was a 15.2% decline in the total number of general psychiatry beds in VA; a 2.1% decrease in the proportion of general psychiatry beds used for PTSD treatment; and a 2.6% increase in length of stay. There was an .7% increase in the total number of domiciliary and PRRP beds in VA; an 14.5% increase in the proportion of domiciliary and PRRP beds used for PTSD treatment; and a 6.0% decrease in length of stay. Additional data are presented in Table A3 in Appendix A.

Discharge Abstract Data. Tables 11 through 12-2 present data on <u>all</u> completed episodes of inpatient, domiciliary, and PRRP treatment in FY 2002. Data are presented on the total number of discharges for all diagnoses, and average length of stay[5]. Data are also presented on the unique (unduplicated) veterans treated and their cumulative bed days of care during the year. The next two columns present the proportion of all episodes of care and the proportion of all unique veterans who received inpatient treatment for PTSD. VISNs treating especially low proportions of PTSD patients are indicated by framed/highlighted values. The next series of columns present data on average length of stay, and cumulative days per veteran per year for PTSD treatment. VISNs with long stays and high bed days of care for inpatient utilization are marked by bolding/underlining.

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[3] Bed section codes 70-71, 75-79, 89 and 91-93. Domiciliary, PRRP and Hoptel care are not included.

[4] These data are truncated at 365 days to reflect care delivered during FY 2002 only.

[5] These measures are also truncated at 365 days, as are the cumulative bed days of care, described below. Very few PTSD patients have such long lengths of stay minimizing censoring problems in these data.

The next pair of columns presents data on the *ratio* of average length of stay and cumulative bed days of care for PTSD to average length of stay and cumulative bed days of care for all general psychiatry patients. These ratios reflect systematic differences in patterns of inpatient care for PTSD as compared to inpatient care for all psychiatric disorders. High values are marked by bolding/underlining. Finally, Table 11-2 presents data on the number of episodes of PTSD treatment per Category A veteran in the general population, for each VISN. Equivalent data are presented by VAMC in Tables 12 and 12-2 (although population-based treatment estimates are not available for individual medical centers).

Tables 11a and 11b present data on the change from, FY 2001 to FY 2002, in the number and percent of patients receiving treatment for PTSD in general psychiatry inpatient beds and PRRP and domiciliary beds. VA provided a total of 7175 episodes of inpatient treatment for PTSD in FY 2002 compared to 7,597 in FY 2001, a 5.6% decrease. The average length of stay of 13.6 in FY 2001 decreased to 12.4 in FY 2002. A total of 3,736 episodes of domiciliary and PRRP treatment for PTSD was provided in FY 2002 compared to 3,580 in FY 2001, a 4.4% increase. Average length of stay decreased from 58.8 in FY 2001 to 57.7 in FY 2002. Additional data are in Tables A4 and A5 in Appendix A.

Specialized Inpatient PTSD Programs

Tables 2 and 3 presented data on the distribution of four different types of inpatient PTSD programs in VA; Specialized Inpatient PTSD Units (SIPUs); the PTSD Domiciliary (PTSD Dom) (which replaced the PTSD/Substance Abuse Unit), PTSD Substance Abuse Units (PSUs); PTSD Residential Rehabilitation Programs (PRRPs) and Evaluation and Brief Treatment PTSD Units (EBTPUs). In this section we present additional information on these specialized programs from annual program summaries submitted to NEPEC.

As with Table 6, Table 13 is not being presented this fiscal year. Table 13 contained data on the number of operating beds and the number of admissions to specialized programs, based on data from annual report submissions to NEPEC. Additional data were presented from the CDR report of the current fiscal year. As noted with Table 6, many medical centers have not yet fully implemented procedures for accurately distributing costs to specific PTSD programs on the CDR. Because this is case, reliable data were unavailable for FY 2002 and Table 13 is not included in this report.

Performance Data on PTSD Treatment in VA

Tables 14-20 present performance assessment data on VA treatment of PTSD, by VISN and by VAMC. These data address both inpatient and outpatient care provided to an unduplicated sample of *all* veterans discharged from general psychiatry inpatient units (which include the specialized inpatient PTSD units) with a primary diagnosis of PTSD between October 1, 2001 and March 31, 2002.[6] The monitors focus on service use and outcomes during

[6] These data thus differ from those presented above in that they are based on a more intensively studied sample, which includes only veterans discharged during the first half of the fiscal year, about half of the unique veterans whose care was addressed in Tables 11-12.

the six months after the initial discharge. These measures are based on those used to evaluate performance in all VA mental health programs and are described more fully in VA's National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 2000).

Inpatient Performance. Tables 14 and 15 present data on inpatient care, by VISN and by VAMC, that include:

(1) the number of unduplicated veterans discharged with a diagnosis of PTSD,

(2) the average length of stay of the index episode,

(3) bed days of psychiatric care during the six months after discharge,

(4) the change in bed days of psychiatric care from the six months before discharge to the six months after discharge,

(5) the number of additional psychiatric hospital discharges during the six months after the index discharge,

(6) readmission rates to general psychiatry bed sections at 14 days, 30 days and 180 days, after discharge, and

(7) the number of days to first readmission among those readmitted to psychiatry bed sections.

Outlier performance is defined, for descriptive purposes, as any value that is 1 standard deviation from the mean of all VISNs (and all VAMCs, where indicated). Such outliers are identified in Tables 14 and 15 by framed values. A summary inpatient performance score for each VISN is derived by averaging the standard scores across all measures (see last column of Table 14).[7]

Outpatient Performance. Tables 16 and 17 present data on outpatient care among discharged veterans, by VISN and by VAMC, that include:

(1) the proportion of discharged veterans who received any VA outpatient general psychiatric treatment during the 6 months following discharge,

(2) the proportion of discharged veterans who received any VA outpatient general psychiatric treatment during the 30 days following discharge,

[7]These standard scores are z-scores, the site mean less the average of all site means divided by the standard deviation of all site means. Some measures are weighted more heavily in these averages than others, based on their importance and independence of other measures. Measures that address common factors (such as the readmission rates at 14, 30 and 180 days) are combined to form one measure in the overall average. For a full explanation of methods used for combining performance measures see Rosenheck & DiLella, 1998.

(3) the number of days from discharge to the first general psychiatric visit during the six months after the index discharge, among those with at least one such visit,

(4) the number of general psychiatric visits received by veterans who received at least one visit during the 6 months following discharge,

(5) continuity of care, as measured by the number of two month periods (during the first six months after discharge) in which the veteran received two or more general psychiatry outpatient visits,

(6) the proportion of veterans with a secondary diagnosis of alcohol or drug abuse in addition to their primary diagnosis of PTSD,

(7) receipt of any substance abuse services during the six months following discharge,

(8) the ratio of the proportion of veterans who received substance abuse treatment to the proportion who were dually diagnosed, and

(9) the number of substance abuse outpatient services received during those six months among those who received any outpatient substance abuse services.[8]

Outlier performances are defined, as above, as a mean performance that is 1 standard deviation from the mean of all VISNs or all VAMCs and are identified in Tables 16 and 17 by framed values. As above, a summary outpatient performance score is derived by averaging the standard scores across all pertinent measures and is presented in the last column of Table 16 (see note 8, for details).

Outpatient Continuity of Care. Tables 16A-16B and Tables 17A-17B present a series of monitors that address continuity of care provided to outpatients with PTSD within the outpatient treatment setting. Thus, in contrast to the conventional HEDIS measures that evaluate the timeliness of entry into outpatient treatment following discharge from the hospital, these measures address continuity of care among patients with PTSD during the six months following their first outpatient visit in each fiscal year. These address the number of visits, the distribution of those visits across time, and the number of different providers involved. It is assumed that seriously mentally ill patients are best served by having regular contacts with the same provider over an extended period of time.

Continuity of care is widely regarded as a crucial ingredient in the treatment of patients with severe mental illness (Bachrach, 1981). A recent review of the literature on continuity of care for people with severe mental illness identified two broad components of continuity of care for such

[8] General psychiatry outpatient visits (which include visits to specialized PTSD outpatient programs) are defined by outpatient file stop codes 501-506; 509-510; 515-516, 520-521, 525, 529, 531, 540-541; 550-554, 557-558; 561-563; 573-578; and 580-581. Substance abuse outpatient visits are defined by stop codes 507-508; 513-514; 517-519; 522-523; 555-556, 560.

patients: (1) a cross sectional component involving adequate communication between providers and access to a comprehensive array of needed services; and (2) a longitudinal component involving continuous contact over time, constancy of service providers, continuity through discharges and transfers and implementation of service plans (Johnson S. et al., 1997). We have developed a series of measures that specifically address several aspects of the longitudinal component of continuity of care.

The sample examined for this monitor includes all veterans who had at least two visits in a specialty outpatient clinic (500 series DSS identifier) in which the primary diagnosis was PTSD (ICD 9 code 309.81). Data were then compiled from the encounter forms on all mental health specialty visits and all unique providers seen by the veteran during the 6 months following the first contact of the year. These data were used to construct indicators that reflect: (1) the number of outpatient visits, (2) the number of different days on which the veteran had an outpatient visit; (3) the number of two-month periods in which the veteran had 2 or more visits (range 0-3); (4) the number of months in which the veteran had one mental health visit; and (5) whether the veteran concluded treatment, defined operationally as having no specialty mental health visits for 6 months. In addition two composite indices of continuity of care based on both the number of visits and the number of providers were constructed. The first of these measures, (6) the Continuity of Care (COC) index is based in the following formula developed by Bice and Boxerman (1977):

$$COC = \frac{\sum_{j=1}^{s} n_j^2 - n}{n\,(n-1)}$$

where n equals the total number of visits and n_j is the total visits to the jth provider.

This measure generates a continuity of care score from 0-1, with one representing more visits with fewer providers and zero represents few visits with each of several providers.

The second index (7) is the Modified Modified Continuity Index (MMCI) developed by Magill and Senf (1987):

$$MMCI = \frac{1 - (n\ of\ providers\ /\ [n\ of\ visits + 0.1]}{1 - (1\ /\ [n\ of\ visits + 0.1])}$$

This index takes a somewhat different approach to calculating a measure based on a 0-1 scale in which one represents more visits with fewer providers and zero represents few visits with numerous providers. After risk adjustment for patient demographic and diagnostic characteristics, standardized scores of these seven measures are averaged to represent an overall index of continuity of care among seriously mentally ill VA outpatients receiving services from specialty mental health clinics.

Overall PTSD Performance Score

An overall PTSD performance score is presented in Table 18. This score averages the two summary outpatient scores (for which desirable performance is in the positive direction) from Table 16 and Table 16A, with the negative of the inpatient score presented in Table 14. The sign of the inpatient score is reversed because the direction of desirable performance on the inpatient summary score presented in Table 14 is in the negative direction. Positive scores on the overall inpatient and outpatient PTSD performance score thus reflect high outpatient service provision/outcome and low inpatient service provision/outcome while negative scores reflect the opposite -- high levels of inpatient utilization/outcome and readmission, and low outpatient service delivery -- a pattern which runs counter to VA corporate goals (Kizer, 1995).

Out-of-VISN Treatment

As a result of their specialized focus, PTSD programs sometimes treat patients who reside in other VISNs. Tables 19 and 20 present data on the proportion of veterans who received treatment for PTSD, but reside outside of the VISN in which they were treated. For comparison, data are also presented on the proportion of such "in-VISN" veterans among those who were discharged from general psychiatry units but whose primary diagnosis was not PTSD, and among those who were discharged from substance abuse units. These data have not changed substantially since FY 2001.

Treatment of PTSD Inside and Outside of Specialized Programs

For ease of reference, Appendix E presents information regarding differentiation of treatment in different types of settings as specified in VHA Directive 2000-004, “Definition of Levels of Specialization in Post-Traumatic Stress Disorder (PTSD) Services”. This directive delineates the types of outpatient PTSD services available in VA.

Appendix E Table E1 presents the total number of unique veterans with a primary diagnosis of PTSD receiving outpatient PTSD treatment in the VA system broken out by whether they received treatment in a specialized outpatient PTSD program, from a PTSD specialist, from a mental health program other than the above, or from a non-mental health program, by VISN, for FY 2002. Tables E2 and E3 present the total number of veterans who, <u>regardless of primary diagnosis</u>, received outpatient individual and group treatment from PTSD specialists by VISN and by facility, respectively, and the number of visits those veterans received, for FY 2002. Table E3 also indicates if a Specialized Outpatient PTSD Program (PCT, SUPT or WSDTT) was operating at each of those facilities during FY 2002.

Table 1. Veteran Population Characteristics and Use of VA Services: FY 2002 Census.

VISN	Total Vet Population 1990	Total Vet Population 2000	SC/Low Inc† 1990††	Percent SC/Low Inc† 1990†† #	Service Connected Illness				Used VA MH Services.		(%) SC Veterans Used VA MH Services*	
					All Psych	(%) SC/Psych#	PTSD	(%)SC/PTSD#	All Vets	SC PTSD	Low Income	Of SC PTSD
1	1,500,892	1,327,933	358,094	23.9%	30,874	2.3%	11,075	0.83%	39,068	6,779	10.9%	61.2%
2	697,421	617,040	194,415	27.9%	11,774	1.9%	4,439	0.72%	19,566	2,725	10.1%	61.4%
3	1,595,593	1,230,989	335,211	21.0%	26,633	2.2%	8,335	0.68%	32,199	5,113	9.6%	61.3%
4	1,819,870	1,635,354	497,402	27.3%	26,742	1.6%	9,795	0.60%	38,806	6,228	7.8%	63.6%
5	857,564	827,066	168,218	19.6%	10,157	1.2%	3,656	0.44%	18,679	2,203	11.1%	60.3%
6	1,251,189	1,383,878	360,885	28.8%	23,310	1.7%	9,010	0.65%	35,327	5,463	9.8%	60.6%
7	1,367,528	1,501,145	399,439	29.2%	26,528	1.8%	11,201	0.75%	43,789	7,177	11.0%	64.1%
8	1,634,357	1,935,726	482,839	29.5%	43,162	2.2%	11,084	0.57%	66,686	7,150	13.8%	64.5%
9	1,060,416	1,099,248	367,654	34.7%	21,517	2.0%	8,515	0.77%	33,223	5,461	9.0%	64.1%
10	1,151,473	1,066,077	318,983	27.7%	15,706	1.5%	4,725	0.44%	34,431	2,760	10.8%	58.4%
11	1,651,186	1,533,351	427,356	25.9%	17,844	1.2%	4,901	0.32%	30,710	2,926	7.2%	59.7%
12	1,362,314	1,221,864	319,235	23.4%	14,788	1.2%	5,027	0.41%	29,039	3,116	9.1%	62.0%
15	1,071,604	1,030,765	329,293	30.7%	15,620	1.5%	6,359	0.62%	30,540	4,092	9.3%	64.3%
16	1,887,301	1,946,911	651,983	34.5%	41,812	2.1%	18,596	0.96%	65,702	11,047	10.1%	59.4%
17	1,026,699	1,092,479	321,378	31.3%	19,072	1.7%	8,263	0.76%	30,196	5,144	9.4%	62.3%
18	842,132	948,529	276,151	32.8%	17,575	1.9%	8,358	0.88%	31,716	5,189	11.5%	62.1%
19	731,842	799,369	215,445	29.4%	12,549	1.6%	6,066	0.76%	20,506	3,476	9.5%	57.3%
20	1,191,422	1,248,708	342,926	28.8%	24,273	1.9%	14,071	1.13%	37,427	7,821	10.9%	55.6%
21	1,418,772	1,280,265	338,504	23.9%	20,798	1.6%	10,824	0.85%	33,080	6,001	9.8%	55.4%
22	1,841,007	1,638,730	418,847	22.8%	21,789	1.3%	8,804	0.54%	44,085	4,936	10.5%	56.1%
23	1,223,080	1,184,277	363,908	29.7%	18,248	1.5%	7,051	0.60%	31,516	4,209	8.7%	59.7%
ALL VA	27,183,662	26,549,704	7,488,166	27.5%	460,771	1.7%	180,155	0.68%	746,291	109,016	10.0%	60.5%
AVERAGE	1,294,460	1,264,272	356,579	27.8%	21,941	1.7%	8,579	0.68%	35,538	5,191	10.0%	60.6%
SD	361,272	348,416	106,743	4.2%	8,712	0.3%	3,555	0.19%	12,221	2,109	1.4%	2.8%
CV	0.28	0.28	0.30	0.15	0.40	0.20	0.41	0.29	0.34	0.41	0.14	0.05

† = Service Connected and Low-Income veterans are not unduplicated. †† = These data were not yet available for 2000.
# = Percentages based on total veteran population living in the VISN.
* Outlined/highlighted values are 1 SD below the mean of all VISNs and indicate VISNs with low population coverage.

Table 2. SPECIALIZED PTSD PROGRAMS, BY VISN: FY 2002

VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DOM	PTSD DH	PRRP	SIPU	WTRP	OTHER	SUM VISN
1	6	2	1	0	0	2	1	1	0	0	13
2	3	0	0	0	0	0	1	0	0	0	4
3	5	0	0	0	2	0	0	0	0	0	7
4	3	1	0	0	0	0	2	0	0	0	6
5	3	0	0	0	1	0	1	0	0	0	5
6	5	0	0	0	0	0	0	2	0	0	7
7	7	0	0	0	0	1	0	0	0	0	8
8	4	1	0	0	1	0	1	0	0	0	7
9	5	0	0	0	0	0	0	0	0	0	5
10	5	0	1	0	0	3	0	0	0	1	10
11	5	0	0	0	0	0	1	0	0	0	6
12	2	0	1	0	1	0	2	0	0	0	6
15	5	0	0	0	0	0	0	1	0	0	6
16	7	0	1	1	1	0	2	0	0	0	12
17	5	0	0	0	0	0	1	0	0	0	6
18	4	0	0	1	0	0	0	0	0	0	5
19	4	0	0	0	0	1	0	0	0	0	5
20	4	0	0	2	1	0	0	1	0	0	8
21	4	1	0	0	0	0	2	0	1	0	8
22	5	0	1	0	0	0	0	0	0	0	6
23	7	1	0	0	0	0	2	0	0	0	10
ALL VA	98	6	5	4	7	7	16	5	1	1	150
AVERAGE	5	0	0	0	0	0	1	0	0	0	7
SD	1	1	0	1	1	1	1	1	0	0	2

Note: VISNs 13 & 14 combined to form VISN 23 in FY 2002.
* Outlined/highlighted values are 1 s.d. below the mean of all VISNs and indicate VISNs with low numbers of Specialized PTSD programs.

PCT = PTSD Clinical Team
SUPT = Substance Use PTSD Team
WSDTT = Women's Stress Disorder Treatment Team
EBTPU = Evaluation & Brief Treatment Unit
PTSD DH = PTSD Day Hospital
PTSD DOM = PTSD Domiciliary
PRRP = PTSD Residential Rehabilitation Program
SIPU = Specialized PTSD Inpatient Unit
WTRP = Women's Trauma Recovery Program
OTHER = Refers to a Specialized Intensive PTSD substance abuse unit.

Table 2a. VA SPECIALIZED PTSD PROGRAMS BY VISN: FY 2001, FY 2002 and FY 2002-2001 change.

Fiscal Year 2002

VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VISN
1	6	2	1	0	2	0	1	1	0	0	13
2	3	0	0	0	0	0	1	0	0	0	4
3	5	0	0	0	0	2	0	0	0	0	7
4	3	1	0	0	0	0	2	0	0	0	6
5	3	0	0	0	0	1	1	0	0	0	5
6	5	0	0	0	0	0	0	2	0	0	7
7	7	0	0	0	1	0	0	0	0	0	8
8	4	1	0	0	0	1	1	0	0	0	7
9	5	0	0	0	0	0	0	0	0	0	5
10	5	0	1	0	3	0	0	0	0	1	10
11	5	0	0	0	0	0	1	0	0	0	6
12	2	0	1	0	0	1	2	0	0	0	6
15	5	0	0	0	0	0	0	1	0	0	6
16	7	0	1	1	0	1	2	0	0	0	12
17	5	0	0	0	0	0	1	0	0	0	6
18	4	0	0	1	0	0	0	0	0	0	5
19	4	0	0	0	1	0	0	0	0	0	5
20	4	0	0	2	0	1	0	1	0	0	8
21	4	1	0	0	0	0	2	0	1	0	8
22	5	0	1	0	0	0	0	0	0	0	6
23	7	1	0	0	0	0	2	0	0	0	10
ALL VA	98	6	5	4	7	7	16	5	1	1	150
AVERAGE	5	0	0	0	0	0	1	0	0	0	7
SD	1	1	0	1	1	1	1	1	0	0	2

Fiscal Year 2001

VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VISN
1	6	2	1	0	2	0	1	1	0	0	13
2	2	0	0	0	0	0	1	0	0	0	3
3	5	0	0	0	0	1	1	0	0	0	7
4	3	1	0	0	0	0	2	0	0	0	6
5	3	0	0	1	0	1	0	0	0	0	5
6	5	0	0	0	0	0	0	2	0	0	7
7	7	0	0	0	1	0	0	0	0	0	8
8	4	1	0	0	0	1	1	0	0	0	7
9	4	0	0	0	0	0	0	0	0	0	4
10	5	0	1	0	3	0	0	0	0	1	10
11	5	0	0	0	0	0	0	1	0	0	6
12	2	0	1	0	0	1	2	0	0	0	6
15	5	0	0	0	0	0	0	1	0	0	6
16	7	0	1	1	0	1	2	0	0	0	12
17	5	0	0	0	0	0	1	0	0	0	6
18	5	0	0	1	0	0	0	0	0	0	6
19	3	0	0	0	1	0	0	0	0	0	4
20	4	0	0	2	0	1	0	1	0	0	8
21	4	1	0	0	0	0	2	0	1	0	8
22	5	0	1	0	0	0	0	0	0	0	6
23	7	1	0	0	0	0	1	0	0	0	9
ALL VA	96	6	5	5	7	6	14	6	1	1	147
AVERAGE	5	0	0	0	0	0	1	0	0	0	7
SD	1	1	0	1	1	0	1	1	0	0	2

Change in Number of Programs

VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VISN
1	0	0	0	0	-2	2	0	0	0	0	0
2	1	0	0	0	0	0	0	0	0	0	1
3	0	0	0	0	2	-1	-1	0	0	0	0
4	0	0	0	0	0	0	0	0	0	0	0
5	0	0	0	-1	1	-1	1	0	0	0	0
6	0	0	0	0	0	0	0	0	0	0	0
7	0	0	0	0	-1	1	0	0	0	0	0
8	0	0	0	0	1	-1	0	0	0	0	0
9	1	0	0	0	0	0	0	0	0	0	1
10	0	0	0	0	-3	3	0	0	0	0	0
11	0	0	0	0	0	0	1	-1	0	0	0
12	0	0	0	0	1	-1	0	0	0	0	0
15	0	0	0	0	0	0	0	0	0	0	0
16	0	0	0	0	1	-1	0	0	0	0	0
17	0	0	0	0	0	0	0	0	0	0	0
18	-1	0	0	0	0	0	0	0	0	0	-1
19	1	0	0	0	-1	1	0	0	0	0	1
20	0	0	0	0	1	-1	0	0	0	0	0
21	0	0	0	0	0	0	0	0	0	0	0
22	0	0	0	0	0	0	0	0	0	0	0
23	0	0	0	0	0	0	1	0	0	0	1
ALL VA	2	0	0	-1	0	1	2	-1	0	0	3

Note: VISNs 13 & 14 combined to form VISN 23 in FY 2002. In order to compute the difference between years, data preceding FY 2002 for VISNs 13 & 14 were combined as VISN 23.

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2002: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER*	SUM VAMC
1	Boston HCS	523	2	1	1								4
1	Connecticut HCS	689	1	1					1				3
1	Manchester	608	1										1
1	Northampton	631								1			1
1	Providence	650	1										1
1	Togus	402					1						1
1	White River Junction	405	1				1						2
2	Canandaigua	528A5	1										1
2	Syracuse	528A7	1										1
2	Western New York HCS	528A4	1						1				2
3	Bronx	526	1										1
3	Hudson Valley HCS	620/620A4	1					1					2
3	New Jersey HCS	561	1					1					2
3	New York Harbor HCS	630/630A4	2										2
4	Clarksburg	540							1				1
4	Coatesville	542	1						1				2
4	Philadelphia	642	1										1
4	Pittsburgh HCS	646A5	1	1									2
5	Martinsburg	613						1					1
5	Maryland HCS	512	2			1**			1				3
5	Washington	688	1										1
6	Asheville	637	1										1
6	Durham	558	1										1
6	Fayetteville (NC)	565	1										1
6	Hampton	590	1										1
6	Salem	658								1			1
6	Salisbury	659	1							1			2
7	Atlanta	508	1										1
7	Augusta	509	1										1
7	Birmingham	521	1										1
7	Central Alabama Veterans HCS	619A4	1										1
7	Charleston	534	1										1
7	Dublin	557	1										1
7	Tuscaloosa	679	1				1						2
8	Bay Pines	516		1				1					2
8	Miami	546	1						1				2
8	No. Florida/So. Georgia Veterans HCS	573	1										1
8	San Juan	672	1										1
8	Tampa	673	1										1

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2002: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER*	SUM VAMC
9	Huntington	581	1										1
9	Lexington	596	1										1
9	Louisville	603	1										1
9	Memphis	614	1										1
9	Mountain Home	621	1										1
10	Brecksville	541	1		1		1					1	4
10	Chillicothe	538	1										1
10	Cincinnati	539	1				1						2
10	Columbus	757	1										1
10	Dayton	552	1				1						2
11	Ann Arbor HCS	506	1										1
11	Battle Creek	515	1						1				2
11	Danville	550	1										1
11	Northern Indiana HCS	610/610A4	2										2
12	Chicago HCS	537	1										1
12	Hines	578	1										1
12	Madison	607			1								1
12	Milwaukee	695						1					1
12	North Chicago	556							1				1
12	Tomah	676							1				1
15	Eastern Kansas HCS	589A5	1							1			2
15	Kansas City	589	1										1
15	Poplar Bluff	657A4	1										1
15	St. Louis	657	1										1
15	Wichita	589A7	1										1
16	Central Arkansas Veterans HCS	598	1					1					2
16	Fayetteville (AR)	564	1										1
16	Gulf Coast Veterans HCS	520	1										1
16	Houston	580	1										1
16	Jackson	586	1			1			1				3
16	New Orleans	629	1		1				1				3
16	Oklahoma City	635	1										1
17	Central Texas Veterans HCS	674	3						1				4
17	North Texas HCS	549	1										1
17	South Texas Veterans HCS	671	1										1
18	El Paso Veterans HCS	756	1										1
18	New Mexico HCS	501	1										1
18	Phoenix	644	1										1
18	Southern Arizona HCS	678	1			1							2

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2002: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER*	SUM VAMC
19	Cheyenne	442	1										1
19	Denver	554					1						1
19	Grand Junction	575	1										1
19	Southern Colorado HCS	554GD	1										1
19	Salt Lake City HCS	660	1										1
20	Boise	531	1			1							2
20	Portland	648	1										1
20	Puget Sound HCS	663	1			1		1					3
20	Roseburg HCS	653								1			1
20	Spokane	668	1										1
21	Hilo	459GB							1				1
21	Honolulu	459	1										1
21	Northern California HCS	612	1										1
21	Palo Alto HCS	640	1						1		1		3
21	San Francisco	662	1	1									2
22	Greater Los Angeles HCS	691	2										2
22	Loma Linda	605	1		1								2
22	San Diego HCS	664	1										1
22	Southern NV HCS	593	1										1
23	Black Hills HCS	568	1	1					1				3
23	Central Iowa HCS	636A6/A7	1						1				2
23	Iowa City	636A8	1										1
23	Minneapolis	618	1										1
23	Nebraska-Western Iowa HCS	636/636A5	2										2
23	Sioux Falls	438	1										1

Note: VISNs 13 & 14 combined to form VISN 23 in FY 2002.

* OTHER = Refers to a Specialized Intensive PTSD Program with a substance abuse unit.

** This program closed during FY 2002..

Table 4. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VISN, FY 2002.

VISN	Specialized Program FY 2002 Expenditures † Outpatient	Intensive	Total	% Intensive/ Outpatient	Total Vet Population 1990**	SC/Low Inc 1990**	Expenditures Per SC/Low Income Veteran*** Outpatient	Intensive	Total
1	$3,275,073	$1,198,871	$4,473,944	26.8%	1,500,892	358,094	**$9.15**	$3.35	$12.49
2	$970,476	$656,749	$1,627,225	40.4%	697,421	194,415	$4.99	$3.38	$8.37
3	$2,360,269	$1,861,878	$4,222,146	44.1%	1,595,593	335,211	$7.04	**$5.55**	$12.60
4	$2,481,865	$1,945,283	$4,427,148	43.9%	1,819,870	497,402	$4.99	$3.91	$8.90
5	$985,197	$689,446	$1,674,644	41.2%	857,564	168,218	$5.86	$4.10	$9.96
6	$1,527,295	$1,929,130	$3,456,425	55.8%	1,251,189	360,885	$4.23	$5.35	$9.58
7	$3,337,960	$227,814	$3,565,775	6.4%	1,367,528	399,439	$8.36	$0.57	$8.93
8	$2,277,600	$1,080,152	$3,357,752	32.2%	1,634,357	482,839	$4.72	$2.24	$6.95
9	$1,558,374	$0	$1,558,374	NA	1,060,416	367,654	$4.24	$0.00	$4.24
10	$3,287,847	$1,032,367	$4,320,214	23.9%	1,151,473	318,983	**$10.31**	$3.24	**$13.54**
11	$1,544,918	$1,065,745	$2,610,663	40.8%	1,651,186	427,356	$3.62	$2.49	$6.11
12	$1,258,096	$1,651,398	$2,909,495	56.8%	1,362,314	319,235	$3.94	$5.17	$9.11
15	$1,952,618	$1,218,716	$3,171,333	38.4%	1,071,604	329,293	$5.93	$3.70	$9.63
16	$5,406,499	$1,335,544	$6,742,043	19.8%	1,887,301	651,983	$8.29	$2.05	$10.34
17	$1,846,761	$1,034,417	$2,881,178	35.9%	1,026,699	321,378	$5.75	$3.22	$8.97
18	$2,287,819	$314,327	$2,602,145	12.1%	842,132	276,151	$8.28	$1.14	$9.42
19	$1,394,533	$531,353	$1,925,886	27.6%	731,842	215,445	$6.47	$2.47	$8.94
20	$3,333,860	$2,079,485	$5,413,344	38.4%	1,191,422	342,926	**$9.72**	**$6.06**	**$15.79**
21	$2,550,180	$3,020,085	$5,570,266	54.2%	1,418,772	338,504	$7.53	**$8.92**	**$16.46**
22	$2,379,890	$0	$2,379,890	NA	1,841,007	418,847	$5.68	$0.00	$5.68
23	$2,764,860	$398,592	$3,163,452	12.6%	1,223,080	363,908	$7.60	$1.10	$8.69
ALL VA	$48,781,991	$23,271,352	$72,053,342	32.3%	27,183,662	7,488,166	$6.51	$3.11	$9.62
AVERAGE	$2,322,952	$1,108,160	$3,431,112	34.3%	1,294,460	356,579	$6.51	$3.24	$9.75
SD	$1,036,331	$774,575	$1,383,448	14.7%	361,272	106,743	$1.99	$2.19	$3.05
CV	0.45	0.70	0.40	0.43	0.28	0.30	0.31	0.68	0.31

Note: No specialized Intensive PTSD Program was opened in VISNs 9 or 22 for this time period.

† Expenditures = "All Other dollars" plus total salary dollars for both centrally-funded and station-funded FTEE as reported in the FY 2002 Annual Report for Specialized Programs.

**Data were from the 1990 census, as 2000 census data were unavailable.

*** Bolded/underlined values are 1 SD above the mean of all VISNs; outlined/highlighted values are 1 SD below the mean.

Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, FY 2002.

VISN	FACILITY/STATE	PCT	SUPT	WSDTT	PTSD DH	EBTPU	PRRP	PTSD DOM	SIPU	WTRP	SUM VAMC
1	BOSTON (MA) HCS: Boston	$409,957		$298,326							$708,283
1	BOSTON (MA) HCS: Brockton	$300,031	$176,771								$476,802
1	CONNECTICUT HCS: West Haven	$554,469	$543,850				$275,677				$1,373,996
1	MANCHESTER, NH	$192,779									$192,779
1	NORTHAMPTON, MA								$537,161		$537,161
1	PROVIDENCE, RI	$525,868									$525,868
1	TOGUS, ME				$246,691						$246,691
1	WHITE RIVER JUNCTION, VT	$273,022			$139,342						$412,364
2	CANANDAIGUA, NY	$527,607									$527,607
2	SYRACUSE, NY	$192,641									$192,641
2	WESTERN NY HCS: Batavia	$250,228					$656,749				$906,977
3	BRONX, NY	$774,700									$774,700
3	HUDSON VALLEY (NY) HCS: Castle Point	$70,548									$70,548
3	HUDSON VALLEY (NY) HCS: Montrose							$927,608			$927,608
3	NEW JERSEY HCS: East Orange	$471,228									$471,228
3	NEW JERSEY HCS: Lyons							$934,270			$934,270
3	NEW YORK HARBOR HCS: Brooklyn	$433,149									$433,149
3	NEW YORK HARBOR HCS: New York	$610,644									$610,644
4	CLARKSBURG, WV						$672,357				$672,357
4	COATESVILLE, PA	$691,955					$1,272,926				$1,964,881
4	PHILADELPHIA, PA	$920,225									$920,225
4	PITTSBURGH (PA) HCS: Highland Drive	$629,419	$240,266								$869,685
5	MARTINSBURG, WV							$383,128			$383,128
5	MARYLAND HCS: Baltimore	$269,097				$190,067	$116,252				$575,416
5	MARYLAND HCS: Perry Point	$285,030									$285,030
5	WASHINGTON, DC	$431,070									$431,070
6	ASHEVILLE, NC	$191,592									$191,592
6	DURHAM, NC	$383,191									$383,191
6	FAYETTEVILLE, NC	$137,986									$137,986
6	HAMPTON, VA	$435,478									$435,478
6	SALEM, VA								$995,272		$995,272
6	SALISBURY, NC	$379,048							$933,858		$1,312,907
7	ATLANTA, GA	$316,603									$316,603
7	AUGUSTA, GA	$1,238,910									$1,238,910
7	BIRMINGHAM, AL	$380,916									$380,916
7	CENTRAL AL VETERANS HCS: Tuskegee	$270,694									$270,694
7	CHARLESTON, SC	$389,510									$389,510
7	DUBLIN, GA	$502,346									$502,346
7	TUSCALOOSA, AL	$238,983			$227,814						$466,797

Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, FY 2002.

VISN	FACILITY/STATE	PCT	SUPT	WSDTT	PTSD DH	EBTPU	PRRP	PTSD DOM	SIPU	WTRP	SUM VAMC
8	BAY PINES, FL		$711,352					$538,816			$1,250,168
8	MIAMI, FL	$389,029					$541,336				$930,365
8	NO.FL/SO.GA VETERANS HCS: Gainesville	$443,643									$443,643
8	SAN JUAN, PR	$381,122									$381,122
8	TAMPA, FL	$352,454									$352,454
9	HUNTINGTON, WV	$338,188									$338,188
9	LEXINGTON, KY	$308,432									$308,432
9	LOUISVILLE, KY	$163,324									$163,324
9	MEMPHIS, TN	$263,083									$263,083
9	MOUNTAIN HOME, TN	$485,347									$485,347
10	BRECKSVILLE, OH	$1,032,455		$268,034	$296,900						$1,597,389
10	CHILLICOTHE, OH	$415,062									$415,062
10	CINCINNATI, OH	$1,026,992			$334,882						$1,361,875
10	COLUMBUS, OH	$372,733									$372,733
10	DAYTON, OH	$172,570			$400,585						$573,155
11	ANN ARBOR (MI) HCS	$272,426									$272,426
11	BATTLE CREEK, MI	$399,054					$1,065,745				$1,464,799
11	DANVILLE, IL	$212,507									$212,507
11	NORTHERN IN HCS: Fort Wayne	$362,419									$362,419
11	NORTHERN IN HCS: Marion	$298,512									$298,512
12	CHICAGO (IL) HCS: West Side	$647,768									$647,768
12	HINES, IL	$298,323									$298,323
12	MADISON, WI			$312,006							$312,006
12	MILWAUKEE, WI							$208,671			$208,671
12	NORTH CHICAGO, IL						$1,113,267				$1,113,267
12	TOMAH, WI						$329,461				$329,461
15	EASTERN KS HCS: Topeka	$614,445							$1,218,716		$1,833,161
15	KANSAS CITY, MO	$385,811									$385,811
15	POPLAR BLUFF, MO	$184,857									$184,857
15	ST. LOUIS, MO	$503,518									$503,518
15	WICHITA, KS	$263,987									$263,987
16	CENTRAL AR VETERANS HCS (Little Rock)	$555,146						$773,264			$1,328,410
16	FAYETTEVILLE, AR	$289,213									$289,213
16	GULF COAST (MS) VETERANS HCS (Biloxi)	$523,819									$523,819
16	HOUSTON, TX	$2,030,633									$2,030,633
16	JACKSON, MS	$483,743				$44,213	$182,243				$710,199
16	NEW ORLEANS, LA	$852,940		$203,996			$335,824				$1,392,761
16	OKLAHOMA CITY, OK	$467,008									$467,008

Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, FY 2002.

VISN	FACILITY/STATE	PCT	SUPT	WSDTT	PTSD DH	EBTPU	PRRP	PTSD DOM	SIPU	WTRP	SUM VAMC
17	CENTRAL TX VETERANS HCS: Austin	$230,017									$230,017
17	CENTRAL TX VETERANS HCS: Temple	$212,021									$212,021
17	CENTRAL TX VETERANS HCS: Waco	$185,170					$1,034,417				$1,219,587
17	NORTH TX HCS: Dallas	$622,666									$622,666
17	SOUTH TX VETERANS HCS: San Antonio	$596,886									$596,886
18	EL PASO (TX) VETERANS HCS	$444,381									$444,381
18	NEW MEXICO HCS (Albuquerque)	$1,150,875									$1,150,875
18	PHOENIX, AZ	$436,873									$436,873
18	SOUTHERN AZ HCS (Tucson)	$255,690				$314,327					$570,016
19	CHEYENNE, WY	$171,913									$171,913
19	DENVER, CO				$531,353						$531,353
19	GRAND JUNCTION, CO	$363,743									$363,743
19	PUEBLO, CO	$91,994									$91,994
19	SALT LAKE CITY (UT) HCS	$766,884									$766,884
20	BOISE, ID	$466,800				$227,501					$694,300
20	PORTLAND, OR	$672,481									$672,481
20	PUGET SOUND (WA) HCS: American Lake							$542,991			$542,991
20	PUGET SOUND (WA) HCS: Seattle	$1,961,104				$954,685					$2,915,790
20	ROSEBURG (OR) HCS								$354,307		$354,307
20	SPOKANE, WA	$233,475									$233,475
21	HILO, HI						$818,504				$818,504
21	HONOLULU, HI	$490,848									$490,848
21	NORTHERN CA HCS: (Sacramento)	$226,524									$226,524
21	PALO ALTO (CA) HCS: Menlo Park						$1,861,551			$340,030	$2,201,581
21	PALO ALTO (CA) HCS: San Jose	$210,087									$210,087
21	SAN FRANCISCO, CA	$1,270,499	$352,221								$1,622,720
22	GREATER LOS ANGELES (CA) HCS: East LA	$398,288									$398,288
22	GREATER LOS ANGELES (CA) HCS: West LA	$813,166									$813,166
22	LOMA LINDA, CA	$163,277		$254,945							$418,222
22	SAN DIEGO (CA) HCS CA	$439,962									$439,962
22	SOUTHERN NV HCS (Las Vegas)	$310,252									$310,252
23	BLACK HILLS (SD) HCS: Fort Meade		$389,221								$389,221
23	BLACK HILLS (SD) HCS: Hot Springs						$216,221				$216,221
23	CENTRAL IA HCS: Des Moines						$182,371				$182,371
23	CENTRAL IA HCS: Knoxville	$95,526									$95,526
23	IOWA CITY, IA	$455,876									$455,876
23	MINNEAPOLIS, MN	$1,063,662									$1,063,662
23	NE-WESTERN IA HCS: Lincoln	$257,590									$257,590
23	NE-WESTERN IA HCS: Omaha	$376,609									$376,609
23	SIOUX FALLS, SD	$126,378									$126,378

Data for TABLE 6 are not available for this fiscal year.

Table 7. INTENSITY DATA and Population-Based Workload: SOPPs by VISN: FY 2002

	SOPPs WORKLOAD			*Total Vet*	*Eligible for*	*All VA MH*	Population-Based Workload*	
VISN	# Veterans Seen	Visits	Vis/Vet*	*Population***	*VA Services***	*Service Users*	Per 1,000 Elig.	Pct. MH Users
1	4,231	48,690	11.51	1,500,892	358,094	39,068	11.82	10.8%
2	1,065	10,649	10.00	697,421	194,415	19,566	5.48	5.4%
3	2,969	40,605	13.68	1,595,593	335,211	32,199	8.86	9.2%
4	2,874	22,965	7.99	1,819,870	497,402	38,806	5.78	7.4%
5	2,259	20,497	9.07	857,564	168,218	18,679	13.43	12.1%
6	3,318	23,781	7.17	1,251,189	360,885	35,327	9.19	9.4%
7	4,339	39,869	9.19	1,367,528	399,439	43,789	10.86	9.9%
8	3,177	24,911	7.84	1,634,357	482,839	66,686	6.58	4.8%
9	2,575	15,175	5.89	1,060,416	367,654	33,223	7.00	7.8%
10	3,044	28,068	9.22	1,151,473	318,983	34,431	9.54	8.8%
11	2,084	17,558	8.43	1,651,186	427,356	30,710	4.88	6.8%
12	1,014	12,322	12.15	1,362,314	319,235	29,039	3.18	3.5%
15	2,738	30,221	11.04	1,071,604	329,293	30,540	8.31	9.0%
16	8,230	74,253	9.02	1,887,301	651,983	65,702	12.62	12.5%
17	2,969	28,349	9.55	1,026,699	321,378	30,196	9.24	9.8%
18	3,629	29,913	8.24	842,132	276,151	31,716	13.14	11.4%
19	2,574	16,722	6.50	731,842	215,445	20,506	11.95	12.6%
20	5,252	50,279	9.57	1,191,422	342,926	37,427	15.32	14.0%
21	2,691	31,720	11.79	1,418,772	338,504	33,080	7.95	8.1%
22	3,731	34,341	9.20	1,841,007	418,847	44,085	8.91	8.5%
23	2,975	28,515	9.58	1,223,080	363,908	31,516	8.18	9.4%
ALL VA	67,449	629,403	9.33	27,183,662	7,488,166	746,291	9.01	9.0%
AVERAGE	3,226	29,972	9.36	1,294,460	356,579	35,538	9.15	9.1%
SD	1,506	14,835	1.90	361,272	106,743	12,221	3.13	2.7%
CV	0.47	0.49	0.20	0.28	0.30	0.34	0.34	0.29

* Outlined/highlighted values are 1 SD below the mean of all VISNs and reflect low intensity and low population coverage in outpatient specialized PTSD service delivery.

** These data were not yet available from the U.S. 2000 Census.

Table 7a. INTENSITY DATA: SOPPs by VISN: FY 2001, FY 2002 and FY 2002-2001 change.

VISN	FY 2001			FY 2002			% Change: FY 2002 - FY 2001		
	SOPP WORKLOAD			SOPP WORKLOAD			SOPP WORKLOAD		
	# Veterans Seen	Visits	Vis/Vet	# Veterans Seen	Visits	Vis/Vet	Veterans	Visits	Vis/Vet
1	4,125	44,885	10.88	4,231	48,690	11.51	2.6%	7.8%	5.4%
2	1,003	10,532	10.50	1,065	10,649	10.00	6.2%	1.1%	-5.0%
3	2,613	36,252	13.87	2,969	40,605	13.68	13.6%	10.7%	-1.4%
4	2,469	20,621	8.35	2,874	22,965	7.99	16.4%	10.2%	-4.5%
5	1,819	19,273	10.60	2,259	20,497	9.07	24.2%	6.0%	-16.8%
6	2,458	16,939	6.89	3,318	23,781	7.17	35.0%	28.8%	3.8%
7	3,130	29,964	9.57	4,339	39,869	9.19	38.6%	24.8%	-4.2%
8	2,955	20,475	6.93	3,177	24,911	7.84	7.5%	17.8%	11.6%
9	1,952	13,949	7.15	2,575	15,175	5.89	31.9%	8.1%	-21.3%
10	2,961	27,795	9.39	3,044	28,068	9.22	2.8%	1.0%	-1.8%
11	1,776	14,833	8.35	2,084	17,558	8.43	17.3%	15.5%	0.9%
12	904	11,597	12.83	1,014	12,322	12.15	12.2%	5.9%	-5.6%
15	2,617	28,898	11.04	2,738	30,221	11.04	4.6%	4.4%	0.0%
16	6,259	63,978	10.22	8,230	74,253	9.02	31.5%	13.8%	-13.3%
17	2,516	26,122	10.38	2,969	28,349	9.55	18.0%	7.9%	-8.7%
18	3,451	30,282	8.77	3,629	29,913	8.24	5.2%	-1.2%	-6.5%
19	1,897	14,247	7.51	2,574	16,722	6.50	35.7%	14.8%	-15.6%
20	4,869	48,925	10.05	5,252	50,279	9.57	7.9%	2.7%	-5.0%
21	2,880	29,561	10.26	2,691	31,720	11.79	-6.6%	6.8%	12.9%
22	2,747	28,216	10.27	3,731	34,341	9.20	35.8%	17.8%	-11.6%
23	2,615	25,806	9.87	2,975	28,515	9.58	13.8%	9.5%	-3.0%
ALL VA	57,783	537,344	9.30	67,449	629,403	9.33	16.7%	14.6%	0.3%
AVERAGE	2,763	26,817	9.70	3,226	29,972	9.36	16.9%	10.2%	-4.3%
SD	1,211	13,267	1.80	1,506	14,835	1.90	13.4%	7.7%	8.7%
CV	0.44	0.49	0.19	0.47	0.49	0.20	0.79	0.76	-2.04

Table 8. INTENSITY DATA: SOPPs By INDIVIDUAL PROGRAM, FY 2002.

VISN	FACILITY	PROGRAM	FY 2002 # VISITS	FY 2002 # VETS SEEN	FY 2002 VISITS/ VETERANS*
1	BOSTON (MA) HCS: Boston	PCT	5,481	604	9
1	BOSTON (MA) HCS: Boston	WSDTT	4,058	243	17
1	BOSTON (MA) HCS: Brockton	PCT	4,531	604	8
1	BOSTON (MA) HCS: Brockton	SUPT	2,504	323	8
1	CONNECTICUT HCS: West Haven	PCT	10,122	778	13
1	CONNECTICUT HCS: West Haven	SUPT	3,608	314	11
1	MANCHESTER, NH	PCT	2,913	217	13
1	PROVIDENCE, RI	PCT	12,225	1,025	12
1	WHITE RIVER JUNCTION, VT	PCT	3,248	451	7
2	CANANDAIGUA, NY	PCT	5,615	474	12
2	SYRACUSE, NY	PCT	1,979	259	8
2	WESTERN NY HCS: Batavia	PCT	3,055	356	9
3	BRONX, NY	PCT	12,183	539	23
3	HUDSON VALLEY (NY) HCS: Castle Point	PCT	641	148	4
3	NEW JERSEY HCS: East Orange	PCT	4,772	492	10
3	NEW YORK HARBOR HCS: Brooklyn	PCT	9,963	1,007	10
3	NEW YORK HARBOR HCS: New York	PCT	13,046	808	16
4	COATESVILLE, PA	PCT	4,922	494	10
4	PHILADELPHIA, PA	PCT	7,916	1,162	7
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	6,498	887	7
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	3,629	369	10
5	MARYLAND HCS: Baltimore	PCT	5,492	554	10
5	MARYLAND HCS: Perry Point	PCT	4,660	542	9
5	WASHINGTON, DC	PCT	10,345	1,229	8
6	ASHEVILLE, NC	PCT	3,542	293	12
6	DURHAM, NC	PCT	4,402	994	4
6	FAYETTEVILLE, NC	PCT	3,877	335	12
6	HAMPTON, VA	PCT	8,152	1,051	8
6	SALISBURY, NC	PCT	3,808	666	6
7	ATLANTA, GA	PCT	7,390	678	11
7	AUGUSTA, GA	PCT	10,651	988	11
7	BIRMINGHAM, AL	PCT	3,279	775	4
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	5,426	507	11
7	CHARLESTON, SC	PCT	3,637	509	7
7	DUBLIN, GA	PCT	7,443	539	14
7	TUSCALOOSA, AL	PCT	2,043	409	5
8	BAY PINES, FL	SUPT	8,878	1,236	7
8	MIAMI, FL	PCT	5,503	479	11
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	4,460	503	9
8	SAN JUAN, PR	PCT	3,447	518	7
8	TAMPA, FL	PCT	2,623	456	6
9	HUNTINGTON, WV	PCT	1,033	404	3
9	LEXINGTON, KY	PCT	2,884	284	10
9	LOUISVILLE, KY	PCT	1,072	312	3
9	MEMPHIS, TN	PCT	4,470	599	7
9	MOUNTAIN HOME, TN	PCT	5,716	977	6
10	BRECKSVILLE, OH	PCT	12,513	907	14
10	BRECKSVILLE, OH	WSDTT	1,458	184	8
10	CHILLICOTHE, OH	PCT	3,757	751	5
10	CINCINNATI, OH	PCT	5,976	620	10
10	COLUMBUS, OH	PCT	2,198	327	7
10	DAYTON, OH	PCT	2,166	383	6
11	ANN ARBOR (MI) HCS	PCT	3,651	300	12
11	BATTLE CREEK, MI	PCT	6,301	811	8
11	DANVILLE, IL	PCT	2,801	452	6
11	NORTHERN IN HCS: Fort Wayne	PCT	910	169	5
11	NORTHERN IN HCS: Marion	PCT	3,895	403	10

Table 8. INTENSITY DATA: SOPPs By INDIVIDUAL PROGRAM, FY 2002.

			FY 2002		
VISN	FACILITY	PROGRAM	# VISITS	# VETS SEEN	VISITS/ VETERANS*
12	CHICAGO (IL) HCS: West Side	PCT	8,876	516	17
12	HINES, IL	PCT	2,180	344	6
12	MADISON, WI	WSDTT	1,266	155	8
15	EASTERN KS HCS: Topeka	PCT	8,194	555	15
15	KANSAS CITY, MO	PCT	5,269	631	8
15	POPLAR BLUFF, MO	PCT	2,081	321	6
15	ST. LOUIS, MO	PCT	9,678	873	11
15	WICHITA, KS	PCT	4,999	367	14
16	CENTRAL AR VETERANS HCS (Little Rock)	PCT	5,683	1,530	4
16	FAYETTEVILLE, AR	PCT	3,374	909	4
16	GULF COAST (MS) VETERANS HCS (Biloxi)	PCT	6,659	628	11
16	HOUSTON, TX	PCT	18,290	1,845	10
16	JACKSON, MS	PCT	5,356	900	6
16	NEW ORLEANS, LA	PCT	23,402	1,842	13
16	NEW ORLEANS, LA	WSDTT	611	78	8
16	OKLAHOMA CITY, OK	PCT	10,878	576	19
17	CENTRAL TX VETERANS HCS: Austin	PCT	1,996	314	6
17	CENTRAL TX VETERANS HCS: Temple	PCT	4,155	543	8
17	CENTRAL TX VETERANS HCS: Waco	PCT	5,417	365	15
17	NORTH TX HCS: Dallas	PCT	7,095	594	12
17	SOUTH TX VETERANS HCS: San Antonio	PCT	9,686	1,259	8
18	EL PASO (TX) VETERANS HCS	PCT	5,916	720	8
18	NEW MEXICO HCS (Albuquerque)	PCT	12,439	1,634	8
18	PHOENIX, AZ	PCT	7,331	592	12
18	SOUTHERN AZ HCS (Tucson)	PCT	4,227	691	6
19	CHEYENNE, WY	PCT	1,427	221	6
19	GRAND JUNCTION, CO	PCT	1,737	516	3
19	PUEBLO, CO	PCT	5,117	699	7
19	SALT LAKE CITY (UT) HCS	PCT	8,441	1,140	7
20	BOISE, ID	PCT	2,490	363	7
20	PORTLAND, OR	PCT	9,377	1,289	7
20	PUGET SOUND (WA) HCS: Seattle	PCT	33,442	3,179	11
20	SPOKANE, WA	PCT	4,970	534	9
21	HONOLULU, HI	PCT	6,650	465	14
21	NORTHERN CA HCS: (Sacramento)	PCT	1,131	224	5
21	PALO ALTO (CA) HCS: San Jose	PCT	9,194	691	13
21	SAN FRANCISCO, CA	PCT	11,116	1,151	10
21	SAN FRANCISCO, CA	SUPT	3,629	194	19
22	GREATER LOS ANGELES (CA) HCS: East LA	PCT	6,126	624	10
22	GREATER LOS ANGELES (CA) HCS: West L	PCT	3,559	634	6
22	LOMA LINDA, CA	PCT	3,051	237	13
22	LOMA LINDA, CA	WSDTT	1,760	258	7
22	SAN DIEGO (CA) HCS CA	PCT	14,615	1,466	10
22	SOUTHERN NV HCS (Las Vegas)	PCT	5,230	549	10
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	4,863	381	13
23	CENTRAL IA HCS: Knoxville	PCT	2,370	147	16
23	IOWA CITY, IA	PCT	3,870	628	6
23	MINNEAPOLIS, MN	PCT	9,574	981	10
23	NE-WESTERN IA HCS: Lincoln	PCT	2,536	317	8
23	NE-WESTERN IA HCS: Omaha	PCT	3,847	363	11
23	SIOUX FALLS, SD	PCT	1,455	170	9
ALL VA			629,403	67,449	9
AVERAGE			5,828	638	9
SD			4,673	442	4
CV			0.80	0.69	0.39

* Outlined/highlighted cell are 1 SD below the mean.

Table 9. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 2002 Annual VA Census.*

		Inpatient PTSD Treatment			Domiciliary and PRRP Treatment							
VISN	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	Dom. and PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Total Occupied PTSD Beds	Total Vet Population	Eligible for VA Services	PTSD Beds Per 10,000 Elig.
1	246	30	12.2%	7.8	228	18	7.9%	56.8	48	1,500,892	358,094	1.34
2	77	1	1.3%	0.0	282	13	4.6%	15.7	14	697,421	194,415	0.72
3	177	3	1.7%	17.3	369	46	12.5%	52.7	49	1,595,593	335,211	1.46
4	199	6	3.0%	5.0	425	39	9.2%	32.9	45	1,819,870	497,402	0.90
5	124	5	4.0%	11.6	423	62	14.7%	**101.6**	67	857,564	168,218	**3.98**
6	222	40	18.0%	11.3	203	1	0.5%	**123.0**	41	1,251,189	360,885	1.14
7	172	7	4.1%	7.4	142	38	26.8%	25.8	45	1,367,528	399,439	1.13
8	108	6	5.6%	10.8	209	38	18.2%	44.2	44	1,634,357	482,839	0.91
9	175	8	4.6%	19.6	334	7	2.1%	88.3	15	1,060,416	367,654	0.41
10	92	4	4.3%	9.8	314	19	6.1%	46.7	23	1,151,473	318,983	0.72
11	218	4	1.8%	12.8	115	26	22.6%	22.1	30	1,651,186	427,356	0.70
12	132	7	5.3%	**30.9**	548	45	8.2%	48.3	52	1,362,314	319,235	**1.63**
15	170	34	20.0%	**40.5**	239	6	2.5%	**159.8**	40	1,071,604	329,293	1.21
16	270	6	2.2%	12.3	254	37	14.6%	25.9	43	1,887,301	651,983	0.66
17	241	13	5.4%	**63.2**	709	48	6.8%	75.8	61	1,026,699	321,378	**1.90**
18	75	8	10.7%	4.9	120	1	0.8%	74.0	9	842,132	276,151	0.33
19	112	9	8.0%	13.1	32	6	18.8%	20.7	15	731,842	215,445	0.70
20	110	24	21.8%	12.5	642	29	4.5%	**104.1**	53	1,191,422	342,926	**1.55**
21	99	3	3.0%	10.7	149	39	26.2%	42.3	42	1,418,772	338,504	1.24
22	150	9	6.0%	**33.0**	242	22	9.1%	81.5	31	1,841,007	418,847	0.74
23	67	2	3.0%	4.5	366	33	9.0%	57.7	35	1,223,080	363,908	0.96
ALL VA	3,236	229	7.1%	19.01	6345	573	9.0%	56.5	767	27,183,662	7,488,166	1.02
AVERAGE	154	11	7.0%	16.1	302	27	10.7%	61.9	38	1,294,460	356,579	1.16
SD	61	11	6.1%	14.7	174	17	8.0%	37.6	16	361,272	106,743	0.76
CV	0.40	1.02	0.88	0.91	0.58	0.64	0.74	0.61	0.41	0.28	0.30	0.66

* Bolded /underlined values are 1 SD above the mean of all VISNs, outlined/highlighted values are 1 SD below the mean.

Table 9a. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 2001, FY 2002, and FY 2002-2001 change.

	FY 2001								FY 2002								% Change: FY 2002 - FY 2001							
	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
VISN	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	Dom. and PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	Dom. and PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	Dom. and PRRP Beds	PTSD Pts.	Pct. PTSD	LOS
1	265	33	12.5%	17.7	231	9	3.9%	48.2	246	30	12.2%	7.8	228	18	7.9%	56.8	-7.2%	-9.1%	-2.1%	-55.7%	-1.3%	100.0%	102.6%	17.7%
2	92	4	4.3%	8.8	303	11	3.6%	20.9	77	1	1.3%	0.0	282	13	4.6%	15.7	-16.3%	-75.0%	-70.1%	-100.0%	-6.9%	18.2%	27.0%	-24.9%
3	233	9	3.9%	10.0	355	39	11.0%	60.7	177	3	1.7%	17.3	369	46	12.5%	52.7	-24.0%	-66.7%	-56.1%	73.3%	3.9%	17.9%	13.5%	-13.1%
4	190	4	2.1%	10.8	407	43	10.6%	46.8	199	6	3.0%	5.0	425	39	9.2%	32.9	4.7%	50.0%	43.2%	-53.5%	4.4%	-9.3%	-13.1%	-29.7%
5	168	4	2.4%	12.5	358	46	12.8%	116.7	124	5	4.0%	11.6	423	62	14.7%	101.6	-26.2%	25.0%	69.4%	-7.2%	18.2%	34.8%	14.1%	-13.0%
6	307	47	15.3%	9.3	209	0	0.0%	NA	222	40	18.0%	11.3	203	1	0.5%	123.0	-27.7%	-14.9%	17.7%	21.5%	-2.9%			
7	241	19	7.9%	26.7	132	20	15.2%	13.4	172	7	4.1%	7.4	142	38	26.8%	25.8	-28.6%	-63.2%	-48.4%	-72.2%	7.6%	90.0%	76.6%	92.7%
8	108	6	5.6%	7.0	212	36	17.0%	52.7	108	6	5.6%	10.8	209	38	18.2%	44.2	0.0%	0.0%	0.0%	54.8%	-1.4%	5.6%	7.1%	-16.1%
9	208	7	3.4%	5.3	321	4	1.2%	141.5	175	8	4.6%	19.6	334	7	2.1%	88.3	-15.9%	14.3%	35.8%	271.3%	4.0%	75.0%	68.2%	-37.6%
10	150	6	4.0%	15.3	314	16	5.1%	28.5	92	4	4.3%	9.8	314	19	6.1%	46.7	-38.7%	-33.3%	8.7%	-36.4%	0.0%	18.8%	18.8%	63.8%
11	254	5	2.0%	12.4	129	28	21.7%	21.0	218	4	1.8%	12.8	115	26	22.6%	22.1	-14.2%	-20.0%	-6.8%	2.8%	-10.9%	-7.1%	4.2%	5.1%
12	218	8	3.7%	11.0	600	42	7.0%	49.9	132	7	5.3%	30.9	548	45	8.2%	48.3	-39.4%	-12.5%	44.5%	180.5%	-8.7%	7.1%	17.3%	-3.1%
15	191	37	19.4%	29.9	237	12	5.1%	55.4	170	34	20.0%	40.5	239	6	2.5%	159.8	-11.0%	-8.1%	3.2%	35.7%	0.8%	-50.0%	-50.4%	188.4%
16	279	15	5.4%	36.3	235	43	18.3%	28.2	270	6	2.2%	12.3	254	37	14.6%	25.9	-3.2%	-60.0%	-58.7%	-66.0%	8.1%	-14.0%	-20.4%	-8.2%
17	241	12	5.0%	36.2	679	32	4.7%	70.0	241	13	5.4%	63.2	709	48	6.8%	75.8	0.0%	8.3%	8.3%	74.6%	4.4%	50.0%	43.7%	8.2%
18	66	0	0.0%	NA	132	1	0.8%	115.0	75	8	10.7%	4.9	120	1	0.8%	74.0	13.6%				-9.1%	0.0%	10.0%	-35.7%
19	116	17	14.7%	13.9	23	4	17.4%	29.8	112	9	8.0%	13.1	32	6	18.8%	20.7	-3.4%	-47.1%	-45.2%	-5.6%	39.1%	50.0%	7.8%	-30.5%
20	126	30	23.8%	16.1	703	46	6.5%	124.5	110	24	21.8%	12.5	642	29	4.5%	104.1	-12.7%	-20.0%	-8.4%	-22.4%	-8.7%	-37.0%	-31.0%	-16.4%
21	109	5	4.6%	12.0	150	36	24.0%	43.0	99	3	3.0%	10.7	149	39	26.2%	42.3	-9.2%	-40.0%	-33.9%	-11.1%	-0.7%	8.3%	9.1%	-1.5%
22	172	7	4.1%	42.6	240	9	3.8%	124.6	150	9	6.0%	33.0	242	22	9.1%	81.5	-12.8%	28.6%	47.4%	-22.5%	0.8%	144.4%	142.4%	-34.6%
23	83	1	1.2%	NA	334	20	6.0%	42.0	67	2	3.0%	4.5	366	33	9.0%	57.7	-19.3%	100.0%	147.8%	NC	9.6%	65.0%	50.6%	37.3%
ALL VA	3,817	276	7.2%	19.01	6,304	497	7.9%	60.1	3236	229	7.1%	19.5	6345	573	9.0%	56.5	-15.2%	-17.0%	-2.1%	2.6%	0.7%	15.3%	14.5%	-6.0%
AVERAGE	182	13	6.9%	17.6	300	24	9.3%	61.6	154	11	7.0%	16.1	302	27	10.7%	61.9	-13.9%	-12.2%	4.8%	13.8%	2.4%	28.4%	24.9%	7.4%
SD	71	13	6.4%	11.1	178	16	7.2%	40.1	61	11	6.1%	14.7	174	17	8.0%	37.6	13.7%	43.0%	51.9%	90.2%	11.0%	48.3%	45.6%	54.3%
CV	0.39	0.99	0.93	0.63	0.59	0.69	0.77	0.65	0.40	1.02	0.88	0.91	0.58	0.64	0.74	0.61	-0.99	-3.53	10.76	6.53	4.58	1.70	1.83	7.29

NA = Date were NOT AVAILABLE.
NC = Data were NOT CALCULATED because one of the components was missing.
Note: VISNs 13 & 14 combined to form VISN 23 in FY 2002. In order to compute the difference between years, data preceding FY 2002 for VISNs 13 & 14 were combined as VISN 23.

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2002 Census

			Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
VISN	STATION VAMC	VAMC	General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
1	518	BEDFORD	59	1	1.69%	0.0	50	10	20.00%	53.5
1	523	BOSTON HCS	47	3	6.38%	7.3	154	8	5.19%	60.9
1	689	CONNECTICUT HCS	16		0.00%		9		0.00%	
1	631	NORTHAMPTON	98	23	23.47%	8.2	15		0.00%	
1	650	PROVIDENCE	11	1	9.09%	12.0				
1	402	TOGUS	14	1	7.14%	0.0				
1	405	WHITE RIVER JCT	1	1	100.00%	13.0				
2	500	ALBANY	10		0.00%					
2	514	BATH					1		0.00%	
2	532	CANANDAIGUA	32		0.00%					
2	670	SYRACUSE	10		0.00%					
2	528	WESTERN NEW YORK HCS	25	1	4.00%	0.0	281	13	4.63%	15.7
3	526	BRONX	20	1	5.00%	26.0				
3	620	HUDSON VALLEY HCS	52	1	1.92%	18.0	102	23	22.55%	65.8
3	561	NEW JERSEY HCS	45		0.00%		149	17	11.41%	36.1
3	630	NEW YORK HARBOR HCS	27	1	3.70%	8.0	86		0.00%	
3	632	NORTHPORT	33		0.00%		32	6	18.75%	50.0
4	503	ALTOONA								
4	529	BUTLER					48		0.00%	
4	540	CLARKSBURG	6	3	50.00%	5.3	18	9	50.00%	21.6
4	542	COATESVILLE	66	1	1.52%	13.0	210	30	14.29%	36.3
4	562	ERIE								
4	595	LEBANON	20		0.00%		50		0.00%	
4	642	PHILADELPHIA	31		0.00%					
4	646	PITTSBURGH HCS	64	1	1.56%	1.0	90		0.00%	
4	693	WILKES-BARRE	12	1	8.33%	0.0	9		0.00%	
4	460	WILMINGTON								
5	613	MARTINSBURG	17	3	17.65%	9.7	291	50	17.18%	115.3
5	512	MARYLAND HCS	92		0.00%		132	12	9.09%	44.4
5	688	WASHINGTON	15	2	13.33%	14.5				
6	637	ASHEVILLE	3		0.00%		2		0.00%	
6	517	BECKLEY								
6	558	DURHAM	19		0.00%					
6	565	FAYETTEVILLE NC	8	1	12.50%	12.0				
6	590	HAMPTON	31	9	29.03%	6.8	155	1	0.65%	123.0
6	652	RICHMOND	13		0.00%					
6	658	SALEM	83	14	16.87%	13.4	16		0.00%	
6	659	SALISBURY	65	16	24.62%	11.9	30		0.00%	

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2002 Census

			Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
VISN	STATION VAMC	VAMC	General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
7	508	ATLANTA	25	3	12.00%	11.3	15		0.00%	
7	509	AUGUSTA	40	1	2.50%	3.0	58	20	34.48%	35.0
7	521	BIRMINGHAM								
7	619	CENTRAL ALABAMA VETERANS HCS	24	3	12.50%	5.0	29		0.00%	
7	534	CHARLESTON	11		0.00%					
7	544	COLUMBIA SC	11		0.00%					
7	557	DUBLIN					40	18	45.00%	15.7
7	679	TUSCALOOSA	61		0.00%					
8	516	BAY PINES	18	1	5.56%	3.0	105	19	18.10%	40.9
8	546	MIAMI	12	2	16.67%	10.5	49	18	36.73%	42.8
8	573	NO. FLORIDA/SO. GEORGIA VETERANS HCS	10		0.00%		36		0.00%	
8	672	SAN JUAN	18		0.00%					
8	673	TAMPA	35	2	5.71%	11.0	19	1	5.26%	133.0
8	548	W PALM BEACH	15	1	6.67%	19.0				
9	581	HUNTINGTON								
9	596	LEXINGTON	9		0.00%					
9	603	LOUISVILLE	14		0.00%					
9	614	MEMPHIS	18	1	5.56%	9.0	16		0.00%	
9	622	MIDDLE TENNESSEE HCS	121	6	4.96%	21.8				
9	621	MOUNTAIN HOME	13	1	7.69%	17.0	318	7	2.20%	88.3
10	538	CHILLICOTHE	18	1	5.56%	0.0	60		0.00%	
10	539	CINCINNATI	18	2	11.11%	14.0	79	9	11.39%	44.3
10	541	CLEVELAND	45	1	2.22%	11.0	110	3	2.73%	63.3
10	552	DAYTON	11		0.00%		65	7	10.77%	42.6
11	553	ALLEN PARK	21		0.00%					
11	506	ANN ARBOR HCS	15		0.00%	23.0				
11	515	BATTLE CREEK	73	1	1.37%	24.0	89	26	29.21%	22.1
11	550	ILLIANA HCS	40	1	2.50%	10.0	5		0.00%	
11	583	INDIANAPOLIS					21		0.00%	
11	610	NORTHERN INDIANA HCS	69	2	2.90%	8.5				
11	655	SAGINAW								
12	537	CHICAGO HCS	37	3	8.11%	10.0	35	3	8.57%	24.7
12	578	HINES	15		0.00%		23		0.00%	
12	585	IRON MOUNTAIN					6		0.00%	
12	607	MADISON	15		0.00%		10		0.00%	
12	695	MILWAUKEE	9		0.00%		245	5	2.04%	208.8
12	556	NORTH CHICAGO	51	3	5.88%	61.7	201	27	13.43%	21.2
12	676	TOMAH	5	1	20.00%	1.0	28	10	35.71%	48.3

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2002 Census

			Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
VISN	STATION VAMC	VAMC	General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
15	543	COLUMBIA MO	8	1	12.50%	6.0				
15	677	EASTERN KANSAS HCS	95	30	31.58%	45.2				
15	657	HEARTLAND-EAST HCS	43	3	6.98%	5.0	40		0.00%	
15	589	HEARTLAND-WEST HCS	24		0.00%		199	6	3.02%	159.8
15	609	MARION IL								
15	647	POPLAR BLUFF								
15	452	WICHITA								
16	502	ALEXANDRIA	45	1	2.22%	6.0				
16	598	CENTRAL ARKANSAS VETERANS HCS	49	1	2.04%		76	24	31.58%	17.4
16	564	FAYETTEVILLE AR	8		0.00%					
16	520	GULF COAST HCS	62	1	1.61%	3.0	145	2	1.38%	183.5
16	580	HOUSTON	37	2	5.41%	1.5				
16	586	JACKSON	18		0.00%		19	9	47.37%	12.3
16	629	NEW ORLEANS	10		0.00%		2	2	100.00%	30.5
16	635	OKLAHOMA CITY	30		0.00%		12		0.00%	
16	667	SHREVEPORT	11	1	9.09%	0.0				
17	674	CENTRAL TEXAS VETERANS HCS	178	9	5.06%	86.3	402	47	11.69%	77.0
17	549	NORTH TEXAS HCS	29	1	3.45%	4.0	296	1	0.34%	18.0
17	671	SOUTH TEXAS VETERANS HCS	34	3	8.82%	13.3	11		0.00%	
18	504	AMARILLO								
18	501	NEW MEXICO HCS	20	1	5.00%		19		0.00%	
18	649	NORTHERN ARIZONA HCS					93	1	1.08%	74.0
18	644	PHOENIX	33	2	6.06%	16.0				
18	678	SOUTHERN ARIZONA HCS	22	5	22.73%	0.2	8		0.00%	
18	519	WEST TEXAS HCS								
19	442	CHEYENNE								
19	554	DENVER	38	3	7.89%	5.7				
19	575	GRAND JUNCTION	8		0.00%					
19	436	MONTANA HCS	4		0.00%					
19	660	SALT LAKE CITY HCS	19	1	5.26%	0.0	10		0.00%	
19	666	SHERIDAN	43	5	11.63%	20.2	22	6	27.27%	20.7
20	463	ALASKA HCS & RO					44	4	9.09%	87.0
20	531	BOISE	7		0.00%		6		0.00%	
20	648	PORTLAND	14		0.00%					
20	663	PUGET SOUND HCS	55	13	23.64%	8.4	73	15	20.55%	42.3
20	653	ROSEBURG HCS	30	9	30.00%	20.3	18		0.00%	
20	668	SPOKANE	4	2	50.00%	4.0				
20	687	WALLA WALLA	0				20		0.00%	
20	692	WHITE CITY					481	10	2.08%	203.7

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2002 Census

			Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
VISN	STATION VAMC	VAMC	General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
21	570	CENTRAL CALIFORNIA HCS	9		0.00%					
21	459	HONOLULU	8		0.00%					
21	612	NORTHERN CALIFORNIA HCS								
21	640	PALO ALTO HCS	61	3	4.92%	10.7	141	39	27.66%	42.3
21	662	SAN FRANCISCO	8		0.00%		8		0.00%	
21	654	SIERRA NEVADA HCS	13		0.00%					
22	691	GREATER LOS ANGELES HCS	91	5	5.49%	56.2	242	22	9.09%	81.5
22	605	LOMA LINDA	17	2	11.76%					
22	600	LONG BEACH HCS	17		0.00%	45.0				
22	664	SAN DIEGO HCS	17		0.00%					
22	593	SOUTHERN NEVADA HCS	8	2	25.00%	3.5				
23	568	BLACK HILLS HCS	8	1	12.50%	6.0	168	11	6.55%	120.6
23	555	CENTRAL IOWA HCS	8	1	12.50%	3.0				
23	437	FARGO	1		0.00%					
23	584	IOWA CITY	7		0.00%					
23	618	MINNEAPOLIS	14		0.00%					
23	636	NEBRASKA-WESTERN IOWA	14		0.00%		66	6	9.09%	36.7
23	438	SIOUX FALLS	4		0.00%					
23	656	ST CLOUD	11		0.00%		132	16	12.12%	22.3
ALL VA			3236	229	7.08%	12.4	6345	573	9.03%	56.5
AVERAGE			29	4	7.21%	12.87	87	14	10.26%	63.9
SD			28	5	13.07%	15.62	101	12	16.73%	51.8
CV			0.97	1.49	1.81	1.21	1.16	0.87	1.63	0.81

* Outlined/highlighted values are 1 SD above the mean of all VAMCs and reflect long length of stay.

Table 11. Comparison of all inpatient general psychiatry treatment and treatment for PTSD, by VISN, FY 2002.

VISN	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Tx. of PTSD				PTSD/Gen. Psych Ratio of Bed Days per …*†	
	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans*	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	Episode	Vet/Year
1	5,052	16.65	3,353	25.1	14.6%	16.4%	737	**15.6**	551	**20.9**	0.9	0.8
2	2,201	12.08	1,485	17.9	5.0%	6.0%	110	8.8	89	10.8	0.7	0.6
3	3,667	17.99	2,518	26.2	5.8%	7.1%	212	12.0	180	14.2	0.7	0.5
4	3,785	16.50	2,712	23.0	6.5%	7.9%	245	10.2	213	11.8	0.6	0.5
5	3,802	16.48	2,485	25.2	4.7%	6.4%	179	9.1	158	10.3	0.6	0.4
6	6,993	13.04	4,519	20.2	14.8%	16.1%	1037	14.1	727	**20.1**	1.1	1.0
7	4,769	15.42	3,406	21.6	13.1%	14.5%	623	9.4	493	11.9	0.6	0.5
8	5,966	7.27	4,070	10.7	4.7%	5.5%	280	6.1	224	7.7	0.8	0.7
9	5,102	12.18	3,612	17.2	6.7%	7.7%	341	9.0	277	11.1	0.7	0.6
10	3,614	11.91	2,519	17.1	4.8%	5.5%	173	9.9	138	12.4	0.8	0.7
11	3,876	18.38	2,777	25.7	4.1%	4.7%	160	10.8	131	13.2	0.6	0.5
12	3,998	16.33	2,589	25.2	5.8%	7.1%	233	11.3	184	14.3	0.7	0.6
15	5,046	13.42	3,451	19.6	8.5%	10.3%	430	**27.6**	354	**33.5**	**2.1**	**1.7**
16	7,471	13.22	5,289	18.7	3.6%	4.5%	266	9.9	236	11.1	0.7	0.6
17	4,490	16.37	3,035	24.2	8.5%	9.9%	382	11.1	299	14.2	0.7	0.6
18	2,788	9.01	1,959	12.8	9.0%	11.2%	250	10.3	220	11.7	1.1	0.9
19	2,583	15.05	1,806	21.5	13.6%	16.4%	352	9.1	297	10.7	0.6	0.5
20	3,597	11.04	2,640	15.0	20.2%	23.5%	728	13.9	621	16.4	**1.3**	**1.1**
21	3,193	12.52	2,019	19.8	5.0%	7.0%	161	9.3	141	10.6	0.7	0.5
22	4,021	14.39	2,890	20.0	4.5%	5.4%	182	11.4	157	13.2	0.8	0.7
23	3,471	7.88	2,374	11.5	2.7%	3.3%	94	5.2	79	6.2	0.7	0.5
ALL VA	89,485	13.64	59,735	20.4	8.0%	9.5%	7175	12.4	5700	15.6	0.9	0.8
AVERAGE	4,261	13.67	2,929	19.9	7.9%	9.3%	342	11.1	275	13.6	0.8	0.7
SD	1,339	3.1	916	4.7	4.7%	5.2%	244	4.5	179	5.7	0.3	0.3
CV	0.31	0.23	0.31	0.24	0.59	0.56	0.72	0.40	0.65	0.42	0.40	0.41

*Bolded (underlined) values are 1 SD above the mean of all VISNs; outlined/highlighted values are 1 SD below the mean.
† Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Table 11-2. Comparison of all Domiciliary and PRRP treatment and treatment for PTSD, by VISN, FY 2002.

VISN	All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP Ratio of Bed Days per …*†		Veterans Treated for PTSD/		
	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans*	Episodes of Care	Bed Days/ Episode*	Unique Veterans	Bed Days/ Vet/Year*	Episode	Vet/Year	VA Eligible (SC/Low Inc)	Total PTSD Episodes of Care††	Total PTSD Episodes/ VA Eligible
1	599	88.9	550	96.8	5.8%	6.2%	35	71.1	34	73.2	0.8	0.8	358,094	772	2.16
2	1,474	72.8	1,202	89.2	18.7%	18.1%	276	14.4	218	18.3	0.2	0.2	194,415	386	1.99
3	2,162	63.3	1,793	76.3	16.1%	18.7%	349	63.5	336	65.9	1.0	0.9	335,211	561	1.67
4	2,943	50.5	2,702	55.0	8.5%	9.1%	251	58.7	247	59.6	**1.2**	1.1	497,402	496	1.00
5	1,428	71.5	1,270	80.4	11.8%	12.9%	168	**108.4**	164	**111.0**	**1.5**	**1.4**	168,218	347	2.06
6	1,659	44.4	1,548	47.6	0.5%	0.5%	8	18.3	8	18.3	0.4	0.4	360,885	1045	2.90
7	807	49.5	731	54.7	32.2%	30.0%	260	30.2	219	35.8	0.6	0.7	399,439	883	2.21
8	1,049	71.5	965	77.7	18.8%	19.6%	197	58.6	189	61.1	0.8	0.8	482,839	477	0.99
9	847	82.8	821	85.4	0.8%	0.9%	7	67.3	7	67.3	0.8	0.8	367,654	348	0.95
10	2,997	36.7	2,549	43.1	5.8%	6.7%	175	52.0	171	53.2	**1.4**	**1.2**	318,983	348	1.09
11	1,003	39.4	850	46.5	37.5%	34.0%	376	25.5	289	33.1	0.6	0.7	427,356	536	1.25
12	2,516	64.5	2,223	73.0	13.9%	14.2%	350	48.1	316	53.2	0.7	0.7	319,235	583	1.83
15	554	109.9	518	117.5	2.2%	2.3%	12	**114.3**	12	**114.3**	1.0	1.0	329,293	442	1.34
16	1,464	57.1	1,368	61.1	25.9%	27.2%	379	34.2	372	34.8	0.6	0.6	651,983	645	0.99
17	1,957	80.7	1,479	106.8	6.3%	7.6%	123	85.3	113	92.9	1.1	0.9	321,378	505	1.57
18	633	64.2	591	68.8	0.3%	0.3%	2	76.0	2	76.0	**1.2**	**1.1**	276,151	252	0.91
19	263	38.3	245	41.1	20.9%	21.6%	55	36.1	53	37.5	0.9	0.9	215,445	407	1.89
20	2,017	89.6	1,839	98.3	10.5%	10.8%	211	77.6	199	82.3	0.9	0.8	342,926	939	2.74
21	709	80.5	663	86.1	36.8%	38.0%	261	57.1	252	59.1	0.7	0.7	338,504	422	1.25
22	661	126.3	640	130.5	10.4%	10.6%	69	**143.5**	68	**145.6**	1.1	**1.1**	418,847	251	0.60
23	2,237	53.7	1,988	60.5	7.7%	8.0%	172	56.6	159	61.3	1.1	1.0	363,908	266	0.73
ALL VA	29,979	63.8	26,040	73.5	12.5%	13.0%	3,736	52.2	3,376	57.7	0.8	0.8	7,488,166	10,645	1.42
AVERAGE	1,428	68.4	1,264	76.0	13.9%	14.2%	178	61.7	163	64.5	0.9	0.8	356,579	520	1.53
SD	819	23.3	705.8	24.8	11.4%	11.1%	129.6	32.4	116.9	32.1	0.3	0.3	106,743.4	225.3	0.6
CV	0.57	0.34	0.56	0.33	0.82	0.78	0.73	0.52	0.72	0.50	0.35	0.32	0.30	0.43	0.42

*Bolded (underlined) values are 1 SD above the mean of all VISNs. Outlined/highlighted values are 1 SD below the mean.

† Ratio of bed days of care for PTSD treatment compared to bed days of care for all domiciliary and PRRP treatment.

†† Includes general psychiatry inpatient episodes (from table 11) and domiciliary and PRRP episodes for veterans with PTSD.

Table 11a. Patients treated for PTSD in general psychiatry inpatient beds and domiciliary and PRRP beds by VISN: FY 2001, FY 2002 and FY 2002-2001 change.

	General Psychiatry Inpatient Care												Domiciliary and PRRP Care											
	FY 2001				FY 2002				Change				FY 2001				FY 2002				Change			
	Episodes of Care	*Unique Veterans*	*Bed Days/ Episode*	Bed Days/ Vet/Year	*Episodes of Care*	*Unique Veterans*	*Bed Days/ Episode*	Bed Days/ Vet/Year	*Episodes of Care*	*Unique Veterans*	*Bed Days/ Episode*	Bed Days/ Vet/Year	*Episodes of Care*	*Unique Veterans*	*Bed Days/ Episode*	Bed Days/ Vet/Year	*Episodes of Care*	*Unique Veterans*	*Bed Days/ Episode*	Bed Days/ Vet/Year	*Episodes of Care*	*Unique Veterans*	*Bed Days/ Episode*	Bed Days/ Vet/Year
1	709	532	14.8	19.7	737	551	15.6	20.9	3.9%	3.6%	5.9%	6.3%	58	57	89.4	91.0	35	34	71.1	73.2	-39.7%	-40.4%	-20.5%	-19.5%
2	119	89	9.2	12.3	110	89	8.8	10.8	-7.6%	0.0%	-4.9%	-12.1%	230	182	16.1	20.3	276	218	14.4	18.3	20.0%	19.8%	-10.2%	-10.0%
3	213	176	16.4	19.8	212	180	12.0	14.2	-0.5%	2.3%	-26.6%	-28.6%	369	338	57.0	62.2	349	336	63.5	65.9	-5.4%	-0.6%	11.4%	6.0%
4	359	296	16.6	20.1	245	213	10.2	11.8	-31.8%	-28.0%	-38.3%	-41.4%	252	243	53.7	55.7	251	247	58.7	59.6	-0.4%	1.6%	9.3%	7.1%
5	179	166	11.6	12.5	179	158	9.1	10.3	0.0%	-4.8%	-21.3%	-17.3%	127	127	113.9	113.9	168	164	108.4	111.0	32.3%	29.1%	-4.8%	-2.5%
6	1028	715	16.0	22.9	1037	727	14.1	20.1	0.9%	1.7%	-11.7%	-12.4%	16	16	31.4	31.4	8	8	18.3	18.3	-50.0%	-50.0%	-41.9%	-41.9%
7	646	485	12.3	16.3	623	493	9.4	11.9	-3.6%	1.6%	-23.4%	-27.3%	163	148	34.9	38.5	260	219	30.2	35.8	59.5%	48.0%	-13.6%	-6.9%
8	356	284	6.0	7.6	280	224	6.1	7.7	-21.3%	-21.1%	1.8%	1.5%	176	171	64.8	66.7	197	189	58.6	61.1	11.9%	10.5%	-9.6%	-8.4%
9	351	276	10.4	13.2	341	277	9.0	11.1	-2.8%	0.4%	-13.1%	-15.9%	6	6	244.3	244.3	7	7	67.3	67.3	16.7%	16.7%	-72.5%	-72.5%
10	196	162	9.6	11.6	173	138	9.9	12.4	-11.7%	-14.8%	3.0%	6.7%	149	142	60.1	63.1	175	171	52.0	53.2	17.4%	20.4%	-13.6%	-15.7%
11	178	144	11.0	13.6	160	131	10.8	13.2	-10.1%	-9.0%	-1.6%	-2.8%	356	278	24.1	30.9	376	289	25.5	33.1	5.6%	4.0%	5.5%	7.1%
12	246	199	16.2	20.1	233	184	11.3	14.3	-5.3%	-7.5%	-30.6%	-28.9%	369	339	43.4	47.3	350	316	48.1	53.2	-5.1%	-6.8%	10.7%	12.6%
15	483	356	25.8	35.1	430	354	27.6	33.5	-11.0%	-0.6%	6.7%	-4.5%	28	25	81.1	90.8	12	12	114.3	114.3	-57.1%	-52.0%	40.9%	25.8%
16	264	237	11.4	12.7	266	236	9.9	11.1	0.8%	-0.4%	-13.0%	-12.0%	399	390	33.0	33.8	379	372	34.2	34.8	-5.0%	-4.6%	3.5%	3.1%
17	478	379	17.2	21.7	382	299	11.1	14.2	-20.1%	-21.1%	-35.6%	-34.8%	79	60	76.6	100.9	123	113	85.3	92.9	55.7%	88.3%	11.4%	-7.9%
18	161	143	7.3	8.2	250	220	10.3	11.7	55.3%	53.8%	41.2%	42.5%	2	2	26.5	26.5	2	2	76.0	76.0	0.0%	0.0%	186.8%	186.8%
19	387	319	8.2	9.9	352	297	9.1	10.7	-9.0%	-6.9%	10.6%	8.0%	46	46	42.0	42.0	55	53	36.1	37.5	19.6%	15.2%	-14.1%	-10.9%
20	805	687	13.3	15.6	728	621	13.9	16.4	-9.6%	-9.6%	4.9%	5.0%	245	224	63.3	69.2	211	199	77.6	82.3	-13.9%	-11.2%	22.7%	18.9%
21	166	142	9.8	11.4	161	141	9.3	10.6	-3.0%	-0.7%	-5.3%	-7.5%	292	277	56.9	59.9	261	252	57.1	59.1	-10.6%	-9.0%	0.4%	-1.4%
22	166	144	8.0	9.2	182	157	11.4	13.2	9.6%	9.0%	41.7%	42.5%	91	89	182.5	186.6	69	68	143.5	145.6	-24.2%	-23.6%	-21.4%	-22.0%
23	107	93	6.0	7.0	94	79	5.2	6.2	-12.1%	-15.1%	-13.1%	-11.5%	127	111	54.8	61.2	172	159	56.6	61.3	35.4%	43.2%	3.3%	0.2%
All VA	7597	5949	13.6	17.4	7175	5700	12.4	15.6	-5.6%	-4.2%	-8.6%	-9.9%	3,580	3,222	52.9	58.8	3736	3,376	52.2	57.7	4.4%	4.8%	-1.4%	-1.8%
AVG.	362	287	12.2	15.3	342	275	11.1	13.6	-4.2%	-3.2%	-5.9%	-6.9%	170	156	69.0	73.2	177.9	163.2	61.7	64.5	3.0%	4.7%	4.0%	2.3%
S.D.	250	183	4.7	6.6	244	179	4.5	5.7	16.5%	16.1%	21.2%	21.6%	131	120	54.3	54.3	129.56	116.9	32.4	32.1	30.5%	32.8%	47.9%	47.2%
C.V.	0.69	0.64	0.39	0.44	0.72	0.65	0.40	0.42	-3.90	-5.04	-3.63	-3.14	0.77	0.77	0.79	0.74	0.73	0.72	0.52	0.50	10.21	6.97	12.04	20.70

Table 11b. Percent treated for PTSD in inpatient general psychiatry beds and domiciliary and PRRP beds by VISN: FY 2001, FY 2002 and FY 2002-2001 change.

	Inpatient General Psychiatry						Domiciliary and PRRP					
	FY 2001 Percent Tx. for PTSD		FY 2002 Percent Tx. for PTSD		% Change: FY 2001-2000 Percent Tx. for PTSD		FY 2001 Percent Tx. for PTSD		FY 2002 Percent Tx. for PTSD		% Change: FY 2001-2000 Percent Tx. for PTSD	
VISN	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans*	All Episodes	Unique Veterans
1	13.6%	15.5%	14.6%	16.4%	7.2%	6.2%	9.4%	11.0%	5.8%	6.2%	-38.0%	-77.7%
2	5.2%	5.8%	5.0%	6.0%	-4.2%	4.2%	14.1%	14.2%	18.7%	18.1%	32.4%	21.5%
3	5.2%	6.6%	5.8%	7.1%	10.4%	8.1%	18.4%	19.7%	16.1%	18.7%	-12.3%	-5.1%
4	8.9%	10.2%	6.5%	7.9%	-27.0%	-23.3%	8.2%	8.7%	8.5%	9.1%	4.2%	4.4%
5	5.6%	8.1%	4.7%	6.4%	-15.6%	-21.4%	12.3%	13.2%	11.8%	12.9%	-4.4%	-1.9%
6	15.4%	16.4%	14.8%	16.1%	-3.7%	-2.0%	0.9%	1.0%	0.5%	0.5%	-48.4%	-99.2%
7	13.2%	14.0%	13.1%	14.5%	-1.1%	3.3%	23.5%	23.1%	32.2%	30.0%	37.2%	22.9%
8	5.9%	6.8%	4.7%	5.5%	-20.5%	-19.7%	15.6%	16.5%	18.8%	19.6%	20.1%	15.7%
9	7.1%	7.8%	6.7%	7.7%	-5.7%	-2.0%	0.6%	0.7%	0.8%	0.9%	28.9%	20.8%
10	5.6%	6.6%	4.8%	5.5%	-14.7%	-17.2%	5.3%	5.7%	5.8%	6.7%	11.1%	15.2%
11	4.3%	4.9%	4.1%	4.7%	-4.2%	-4.2%	34.5%	31.5%	37.5%	34.0%	8.6%	7.4%
12	6.0%	7.6%	5.8%	7.1%	-3.1%	-6.1%	13.5%	14.1%	13.9%	14.2%	3.4%	0.9%
15	9.6%	10.7%	8.5%	10.3%	-10.9%	-3.7%	3.3%	3.6%	2.2%	2.3%	-33.5%	-55.5%
16	3.6%	4.5%	3.6%	4.5%	-0.5%	0.3%	23.7%	24.8%	25.9%	27.2%	9.2%	8.8%
17	10.6%	12.7%	8.5%	9.9%	-19.5%	-22.4%	3.7%	3.8%	6.3%	7.6%	67.6%	50.2%
18	5.8%	7.2%	9.0%	11.2%	54.5%	55.3%	0.3%	0.3%	0.3%	0.3%	2.7%	4.7%
19	15.6%	18.1%	13.6%	16.4%	-12.7%	-9.1%	27.7%	29.5%	20.9%	21.6%	-24.5%	-36.3%
20	21.4%	24.8%	20.2%	23.5%	-5.6%	-5.1%	10.4%	10.5%	10.5%	10.8%	0.3%	2.9%
21	5.1%	6.7%	5.0%	7.0%	-1.8%	4.3%	30.0%	32.0%	36.8%	38.0%	22.5%	15.8%
22	4.1%	5.1%	4.5%	5.4%	9.8%	6.1%	10.6%	10.6%	10.4%	10.6%	-1.1%	-0.2%
23	3.4%	4.1%	2.7%	3.3%	-19.2%	-17.8%	6.6%	6.5%	7.7%	8.0%	17.4%	18.7%
ALL VA	8.5%	10.0%	8.0%	9.5%	-5.5%	-4.5%	11.4%	11.9%	12.5%	13.0%	9.2%	8.2%
AVERAGE	8.3%	9.7%	7.9%	9.3%	-4.2%	-3.2%	13.0%	13.4%	13.9%	14.2%	4.9%	-3.1%
SD	4.9%	5.4%	4.7%	5.2%	16.8%	16.9%	10.1%	10.1%	11.4%	11.1%	27.0%	35.6%
CV	0.59	0.55	0.59	0.56	-4.00	-5.34	0.77	0.75	0.82	0.78	5.48	-11.32

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2002. *

		All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio of Bed Days per …**	
VISN	VAMC	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	All Episodes	Unique Veterans	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	Episode	*Vet/Year*
1	BEDFORD	1,061	14.0	795	18.6	1.4%	1.9%	15	7.7	15	7.7	0.6	0.4
1	BOSTON HCS	1,430	18.1	930	27.8	6.1%	7.3%	87	11.3	68	14.5	0.6	0.5
1	CONNECTICUT HCS	479	17.6	347	24.3	9.0%	9.5%	43	11.5	33	15.0	0.7	0.6
1	NORTHAMPTON	934	25.9	704	34.3	47.6%	48.7%	445	20.0	343	25.9	0.8	0.8
1	PROVIDENCE	568	8.3	397	11.9	8.3%	8.3%	47	8.5	33	12.1	1.0	1.0
1	TOGUS	215	14.8	177	18.0	5.1%	6.2%	11	6.8	11	6.8	0.5	0.4
1	WHITE RIVER JCT	365	8.1	257	11.5	24.4%	22.6%	89	6.4	58	9.8	0.8	0.9
2	ALBANY	419	5.9	307	8.1	0.0%	0.0%					0.0	0.0
2	CANANDAIGUA	384	32.2	281	44.0	1.3%	1.4%	5	29.4	4	36.8	0.9	0.8
2	SYRACUSE	425	10.3	310	14.1	8.2%	9.0%	35	11.5	28	14.4	1.1	1.0
2	WESTERN NEW YORK HCS	973	7.6	657	11.2	4.2%	5.3%	41	7.7	35	9.0	1.0	0.8
3	BRONX	585	18.3	421	25.4	6.5%	7.4%	38	19.0	31	23.3	1.0	0.9
3	HUDSON VALLEY HCS	532	26.1	384	36.1	9.8%	12.8%	52	10.3	49	10.9	0.4	0.3
3	NEW JERSEY HCS	883	16.3	610	23.7	6.9%	8.9%	61	9.8	54	11.1	0.6	0.5
3	NEW YORK HARBOR HCS	1,289	11.4	982	15.0	4.0%	4.3%	51	10.5	42	12.8	0.9	0.9
3	NORTHPORT	378	32.3	270	45.3	2.6%	3.3%	10	15.7	9	17.4	0.5	0.4
4	CLARKSBURG	223	9.8	182	12.0	12.1%	13.7%	27	7.2	25	7.8	0.7	0.6
4	COATESVILLE	630	25.1	484	32.7	6.8%	8.1%	43	11.3	39	12.5	0.5	0.4
4	LEBANON	494	13.5	354	18.9	4.3%	5.1%	21	14.3	18	16.7	1.1	0.9
4	PHILADELPHIA	867	12.8	658	16.9	6.9%	8.5%	60	12.1	56	12.9	0.9	0.8
4	PITTSBURGH HCS	1,218	18.8	923	24.8	6.4%	7.5%	78	8.9	69	10.1	0.5	0.4
4	WILKES-BARRE	353	10.6	265	14.1	4.5%	4.9%	16	6.7	13	8.2	0.6	0.6
4	WILMINGTON							29	3.5	24	4.2		
5	MARTINSBURG	613	7.9	415	11.7	10.6%	13.7%	65	5.3	57	6.1	0.7	0.5
5	MARYLAND HCS	2,112	23.7	1,513	33.1	3.7%	4.9%	79	14.0	74	14.9	0.6	0.5
5	WASHINGTON	1,077	7.2	711	10.8	3.2%	4.5%	35	5.1	32	5.5	0.7	0.5

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2002. *

		All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio of Bed Days per …**	
VISN	VAMC	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	All Episodes	Unique Veterans	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	Episode	*Vet/Year*
6	ASHEVILLE	366	9.1	310	10.8	27.6%	28.7%	101	9.1	89	10.3	1.0	1.0
6	DURHAM	931	8.0	705	10.5	9.5%	10.5%	88	6.1	74	7.3	0.8	0.7
6	FAYETTEVILLE NC	728	9.2	499	13.5	5.9%	7.6%	43	7.6	38	8.6	0.8	0.6
6	HAMPTON	2,110	9.1	1,149	16.7	14.8%	14.9%	312	9.7	171	17.7	1.1	1.1
6	RICHMOND	672	6.7	479	9.5	0.3%	0.4%	2	5.0	2	5.0	0.7	0.5
6	SALEM	1,062	21.0	744	30.0	30.8%	29.3%	327	14.1	218	21.2	0.7	0.7
6	SALISBURY	1,124	24.7	907	30.6	14.6%	16.6%	164	31.5	151	34.2	1.3	1.1
7	ATLANTA	988	9.6	755	12.5	14.1%	16.0%	139	8.7	121	10.0	0.9	0.8
7	AUGUSTA	1,277	15.4	930	21.1	13.9%	15.3%	178	9.8	142	12.3	0.6	0.6
7	CENTRAL ALABAMA VETERANS HCS	979	13.5	675	19.6	17.2%	17.2%	168	9.5	116	13.8	0.7	0.7
7	CHARLESTON	567	8.1	425	10.9	7.4%	8.5%	42	5.0	36	5.8	0.6	0.5
7	COLUMBIA SC	472	7.5	377	9.4	14.2%	16.7%	67	6.8	63	7.2	0.9	0.8
7	TUSCALOOSA	486	47.4	390	59.1	6.0%	6.9%	29	22.3	27	23.9	0.5	0.4
8	BAY PINES	974	7.7	703	10.6	5.3%	7.0%	52	5.4	49	5.7	0.7	0.5
8	MIAMI	828	7.5	625	9.9	2.3%	2.9%	19	5.7	18	6.0	0.8	0.6
8	NO. FLORIDA/SO. GEORGIA VETERANS HS	1,099	4.6	817	6.2	2.6%	3.4%	29	4.2	28	4.3	0.9	0.7
8	SAN JUAN	745	11.5	582	14.7	5.5%	5.5%	41	10.2	32	13.0	0.9	0.9
8	TAMPA	1,168	7.8	812	11.2	3.5%	4.4%	41	6.8	36	7.7	0.9	0.7
8	W PALM BEACH	1,152	6.1	657	10.6	8.5%	10.0%	98	5.3	66	7.8	0.9	0.7
9	LEXINGTON	580	7.6	472	9.4	3.6%	3.6%	21	7.2	17	8.9	0.9	0.9
9	LOUISVILLE	790	6.2	566	8.6	2.9%	3.9%	23	6.4	22	6.7	1.0	0.8
9	MEMPHIS	688	10.0	518	13.3	13.5%	15.3%	93	9.8	79	11.6	1.0	0.9
9	MIDDLE TENNESSEE HCS	2,138	18.5	1,453	27.2	5.4%	6.0%	115	10.6	87	14.0	0.6	0.5
9	MOUNTAIN HOME	906	7.1	668	9.7	9.8%	10.9%	89	7.3	73	8.8	1.0	0.9
10	CHILLICOTHE	1,138	9.2	820	12.7	4.6%	5.4%	52	9.5	44	11.3	1.0	0.9
10	CINCINNATI	500	12.5	380	16.5	7.2%	7.9%	36	11.5	30	13.8	0.9	0.8
10	CLEVELAND	1,140	17.9	864	23.6	3.2%	3.7%	36	12.5	32	14.0	0.7	0.6
10	DAYTON	836	7.1	570	10.5	5.9%	6.3%	49	7.1	36	9.7	1.0	0.9
11	ALLEN PARK	755	8.7	572	11.5	2.8%	3.0%	21	6.1	17	7.6	0.7	0.7
11	ANN ARBOR HCS	559	9.8	414	13.2	2.9%	3.4%	16	6.6	14	7.6	0.7	0.6
11	BATTLE CREEK	1,385	21.4	1,002	29.6	6.3%	7.0%	87	12.2	70	15.2	0.6	0.5
11	DANVILLE, IL	428	21.5	342	26.9	0.7%	0.9%	3	9.3	3	9.3	0.4	0.3

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2002. *

		All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio of Bed Days per …**	
VISN	VAMC	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	All Episodes	Unique Veterans	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	Episode	*Vet/Year*
11	INDIANAPOLIS	380	6.3	301	7.9	5.5%	6.6%	21	4.1	20	4.3	0.7	0.5
11	NORTHERN INDIANA HCS	369	48.7	286	62.8	3.3%	3.8%	12	26.5	11	28.9	0.5	0.5
12	CHICAGO HCS	1,434	11.4	925	17.7	6.9%	9.0%	99	12.8	83	15.3	1.1	0.9
12	HINES	776	7.8	582	10.4	4.0%	4.5%	31	7.5	26	8.9	1.0	0.9
12	MADISON	405	10.7	278	15.7	6.4%	6.5%	26	8.2	18	11.9	0.8	0.8
12	MILWAUKEE	726	5.5	511	7.9	6.2%	7.4%	45	4.6	38	5.5	0.8	0.7
12	NORTH CHICAGO	443	68.0	352	85.6	4.3%	4.8%	19	25.9	17	28.9	0.4	0.3
12	TOMAH	214	20.5	179	24.5	6.1%	6.1%	13	15.8	11	18.6	0.8	0.8
15	COLUMBIA MO	370	8.2	295	10.2	6.8%	7.5%	25	8.4	22	9.5	1.0	0.9
15	EASTERN KANSAS HCS	1,761	22.0	1,215	31.8	14.3%	17.9%	252	40.2	218	46.5	1.8	1.5
15	KANSAS CITY	1,010	8.7	724	12.1	1.9%	2.3%	19	6.4	17	7.1	0.7	0.6
15	ST LOUIS	1,905	9.1	1,341	12.9	7.0%	7.5%	134	10.4	100	13.9	1.1	1.1
16	ALEXANDRIA	691	22.5	443	35.0	3.6%	5.0%	25	20.8	22	23.6	0.9	0.7
16	CENTRAL ARKANSAS VETERANS HCS	1,218	15.2	849	21.8	6.7%	8.5%	81	10.7	72	12.1	0.7	0.6
16	FAYETTEVILLE AR	400	6.9	314	8.8	5.3%	5.4%	21	5.9	17	7.3	0.9	0.8
16	GULF COAST HCS	1,033	23.0	797	29.9	0.7%	0.9%	7	23.6	7	23.6	1.0	0.8
16	HOUSTON	1,240	10.6	878	14.9	4.4%	5.2%	55	9.4	46	11.3	0.9	0.8
16	JACKSON	629	10.0	470	13.3	3.5%	4.5%	22	7.0	21	7.4	0.7	0.6
16	NEW ORLEANS	591	7.9	455	10.2	2.5%	3.3%	15	4.5	15	4.5	0.6	0.4
16	OKLAHOMA CITY	977	10.0	717	13.6	2.9%	3.3%	28	5.6	24	6.5	0.6	0.5
16	SHREVEPORT	692	6.3	539	8.1	1.7%	2.2%	12	4.3	12	4.3	0.7	0.5
17	CENTRAL TEXAS VETERANS HCS	1,356	34.1	991	46.7	9.4%	10.1%	127	16.1	100	20.4	0.5	0.4
17	NORTH TEXAS HCS	1,377	8.2	1,080	10.4	5.6%	6.3%	77	6.5	68	7.4	0.8	0.7
17	SOUTH TEXAS VETERANS HCS	1,757	9.1	1,060	15.1	10.1%	12.6%	178	9.5	134	12.6	1.0	0.8
18	NEW MEXICO HCS	653	10.1	479	13.7	6.0%	7.9%	39	6.7	38	6.9	0.7	0.5
18	PHOENIX	1,410	8.6	949	12.7	5.9%	7.4%	83	7.9	70	9.4	0.9	0.7
18	SOUTHERN ARIZONA HCS	587	9.0	450	11.7	20.6%	23.6%	121	13.3	106	15.2	1.5	1.3
18	WEST TEXAS HCS	138	8.9	118	10.4	5.1%	5.9%	7	5.9	7	5.9	0.7	0.6
19	EASTERN COLORADO HCS	926	16.5	683	22.4	24.2%	28.6%	224	8.6	195	9.9	0.5	0.4
19	GRAND JUNCTION	271	6.9	201	9.3	8.1%	9.5%	22	5.9	19	6.8	0.9	0.7
19	MONTANA HCS	132	6.0	114	7.0	3.0%	3.5%	4	8.3	4	8.3	1.4	1.2
19	SALT LAKE CITY HCS	697	8.2	492	11.7	7.6%	8.7%	53	7.1	43	8.7	0.9	0.7
19	SHERIDAN	557	27.2	434	35.0	8.8%	9.7%	49	14.8	42	17.3	0.5	0.5

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2002. *

		All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio of Bed Days per …**	
VISN	VAMC	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	All Episodes	Unique Veterans	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	Episode	*Vet/Year*
20	BOISE	369	8.8	253	12.8	17.6%	19.8%	65	13.9	50	18.1	1.6	1.4
20	PORTLAND	711	9.2	545	12.0	5.6%	6.4%	40	5.9	35	6.7	0.6	0.6
20	PUGET SOUND HCS	1,541	11.7	1,164	15.5	24.3%	29.0%	374	12.0	338	13.3	1.0	0.9
20	ROSEBURG HCS	722	13.8	539	18.5	30.7%	33.0%	222	19.6	178	24.4	1.4	1.3
20	SPOKANE	168	8.4	142	10.0	10.1%	10.6%	17	8.8	15	9.9	1.0	1.0
20	WALLA WALLA	86	6.1	67	7.8	11.6%	14.9%	10	3.2	10	3.2	0.5	0.4
21	CENTRAL CALIFORNIA HCS	361	5.9	241	8.8	2.5%	3.7%	9	4.2	9	4.2	0.7	0.5
21	HONOLULU	490	8.7	231	18.5	6.3%	10.8%	31	9.3	25	11.5	1.1	0.6
21	PALO ALTO HCS	1,414	16.9	910	26.3	5.2%	6.9%	73	11.6	63	13.5	0.7	0.5
21	SAN FRANCISCO	354	16.1	268	21.2	5.1%	6.3%	18	7.2	17	7.6	0.4	0.4
21	SIERRA NEVADA HCS	574	6.9	432	9.2	5.2%	6.3%	30	6.2	27	6.9	0.9	0.8
22	GREATER LOS ANGELES HCS	1,536	22.7	1,131	30.8	4.8%	5.7%	73	17.9	64	20.4	0.8	0.7
22	LOMA LINDA	735	5.8	538	7.9	3.0%	3.5%	22	4.7	19	5.5	0.8	0.7
22	LONG BEACH HCS	599	10.9	438	14.9	3.8%	4.1%	23	9.0	18	11.5	0.8	0.8
22	SAN DIEGO HCS	701	12.9	528	17.1	4.1%	5.1%	29	7.6	27	8.1	0.6	0.5
22	SOUTHERN NEVADA HCS	450	7.2	364	9.0	7.8%	8.5%	35	6.5	31	7.4	0.9	0.8
23	BLACK HILLS HCS	270	11.1	188	15.9	3.0%	4.3%	8	11.1	8	11.1	1.0	0.7
23	CENTRAL IOWA HCS	466	7.4	365	9.4	3.4%	3.3%	16	4.7	12	6.3	0.6	0.7
23	FARGO	272	8.3	190	11.9	1.1%	1.6%	3	7.7	3	7.7	0.9	0.6
23	IOWA CITY	372	10.9	313	13.0	2.2%	2.6%	8	5.0	8	5.0	0.5	0.4
23	MINNEAPOLIS	659	8.0	482	10.9	2.6%	3.3%	17	3.0	16	3.2	0.4	0.3
23	NEBRASKA-WESTERN IOWA HCS	401	10.8	319	13.6	3.7%	4.4%	15	6.8	14	7.3	0.6	0.5
23	SIOUX FALLS	254	5.4	182	7.5	0.8%	1.1%	2	15.5	2	15.5	2.9	2.1
23	ST CLOUD	777	4.7	480	7.6	3.2%	3.8%	25	3.0	18	4.2	0.6	0.5
ALL VA		89,485	13.6	59,735	20.4	8.0%	9.5%	7175	12.4	5700	15.6	0.9	0.8
AVERAGE		785	13.3	564	18.1	7.6%	8.6%	63	10.1	52	11.8	0.8	0.7
SD		451	9.5	305	12.4	7.2%	7.5%	76	6.2	59	7.3	0.3	0.3
CV		0.57	0.72	0.54	0.68	0.95	0.88	1.22	0.61	1.15	0.61	0.40	0.39

* Outlined/highlighted values are greater than 1 SD from the mean in the undesirable direction.

** Ratio of beds of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2002.

		All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP Ratio of Bed Days per …*	
VISN VAMC	CODE	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	All Episodes	Unique Veterans	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	Episode	Vet/Year
1 BEDFORD	518	197	82.7	194	84.0	9.1%	9.3%	18	48.1	18	48.1	0.6	0.6
1 BOSTON HCS	523	335	85.1	312	91.3	5.1%	5.4%	17	95.5	17	95.5	1.1	1.0
1 CONNECTICUT HCS	689	36	93.4	36	93.4	0.0%	0.0%						
1 NORTHAMPTON	631	31	164.7	30	170.2	0.0%	0.0%						
2 BATH	514	12	1.0	12	1.0	0.0%	0.0%					0.0	0.0
2 WESTERN NEW YORK HCS	528	1,462	73.3	1,199	89.4	18.9%	18.2%	276	14.4	218	18.3	0.2	0.2
3 HUDSON VALLEY HCS	620	575	80.3	548	84.2	28.3%	28.8%	163	82.4	158	85.0	1.0	1.0
3 NEW JERSEY HCS	561	846	65.3	768	71.9	20.1%	21.7%	170	44.3	167	45.1	0.7	0.6
3 NEW YORK HARBOR HCS	630	641	38.2	548	44.7	0.3%	0.4%	2	44.5	2	44.5	1.2	1.0
3 NORTHPORT	632	100	109.5	91	120.4	14.0%	15.4%	14	78.4	14	78.4	0.7	0.7
4 BUTLER	529	205	86.5	205	86.5	0.0%	0.0%						
4 CLARKSBURG	540	32	28.1	32	28.1	25.0%	25.0%	8	52.6	8	52.6	1.9	1.9
4 COATESVILLE	542	1,585	47.4	1,535	48.9	14.1%	14.3%	223	57.1	220	57.9	1.2	1.2
4 LEBANON	595	373	47.8	366	48.7	0.0%	0.0%						
4 PITTSBURGH	646	587	57.9	549	62.0	3.4%	3.5%	20	78.8	19	82.9	1.4	1.3
4 WILKES-BARRE	693	161	18.5	153	19.5	0.0%	0.0%						
5 MARTINSBURG	613	598	106.8	579	110.3	21.9%	22.1%	131	128.5	128	131.5	1.2	1.2
5 MARYLAND HCS	512	830	46.0	706	54.1	4.5%	5.1%	37	36.9	36	37.9	0.8	0.7
6 ASHEVILLE	637	226	24.0	221	24.6	1.3%	1.4%	3	27.3	3	27.3	1.1	1.1
6 HAMPTON	590	905	58.0	851	61.6	0.6%	0.6%	5	12.8	5	12.8	0.2	0.2
6 SALEM	658	236	24.2	230	24.8	0.0%	0.0%						
6 SALISBURY	659	292	34.4	289	34.8	0.0%	0.0%						
7 AUGUSTA	509	307	64.5	292	67.8	21.8%	20.9%	67	56.0	61	61.5	0.9	0.9
7 DUBLIN	557	500	40.3	440	45.8	38.6%	35.9%	193	21.2	158	25.9	0.5	0.6
8 BAY PINES	516	543	72.4	499	78.8	19.3%	20.0%	105	51.8	100	54.4	0.7	0.7
8 MIAMI	546	257	65.0	248	67.4	33.9%	33.9%	87	62.0	84	64.2	1.0	1.0
8 NO. FLORIDA/SO. GEORGIA VETERANS HS	573	196	60.2	166	71.1	0.5%	0.6%	1	72.0	1	72.0	1.2	1.0
8 TAMPA	673	53	135.6	53	135.6	7.5%	7.5%	4	161.5	4	161.5	1.2	1.2
9 MEMPHIS	614	319	12.8	313	13.0	0.3%	0.3%	1	14.0	1	14.0	1.1	1.1
9 MOUNTAIN HOME	621	528	125.1	509	129.8	1.1%	1.2%	6	76.2	6	76.2	0.6	0.6
10 CHILLICOTHE	538	662	26.3	557	31.3	2.1%	2.5%	14	7.4	14	7.4	0.3	0.2
10 CINCINNATI	539	663	43.4	522	55.2	11.8%	14.9%	78	46.3	78	46.3	1.1	0.8
10 CLEVELAND	541	1,181	29.8	1,045	33.7	1.4%	1.6%	17	73.9	17	73.9	2.5	2.2
10 DAYTON	552	491	58.0	473	60.2	13.4%	13.5%	66	62.5	64	64.5	1.1	1.1

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2002.

		All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP Ratio of Bed Days per …*	
VISN VAMC	CODE	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	All Episodes	Unique Veterans	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	Episode	Vet/Year
11 BATTLE CREEK	515	965	36.2	817	42.8	38.8%	35.1%	374	25.1	287	32.7	0.7	0.8
11 ILLIANA HCS	550	6	144.3	6	144.3	0.0%	0.0%						
11 INDIANAPOLIS	583	32	116.1	27	137.6	6.3%	7.4%	2	100.0	2	100.0	0.9	0.7
12 CHICAGO HCS	537	271	32.8	258	34.4	1.8%	1.9%	5	42.2	5	42.2	1.3	1.2
12 HINES	578	406	32.9	379	35.3	3.4%	2.9%	14	23.4	11	29.7	0.7	0.8
12 IRON MOUNTAIN	585	119	29.8	115	30.8	0.0%	0.0%						
12 MADISON	607	32	120.5	31	124.4	0.0%	0.0%						0.0
12 MILWAUKEE	695	537	122.8	526	125.3	4.3%	4.4%	23	202.9	23	202.9	1.7	1.6
12 NORTH CHICAGO	556	898	64.0	799	72.0	27.2%	27.5%	244	34.6	220	38.4	0.5	0.5
12 TOMAH	676	253	35.9	236	38.5	25.3%	26.3%	64	49.5	62	51.1	1.4	1.3
15 HEARTLAND-EAST HCS	657	7	74.6	7	74.6	0.0%	0.0%						
15 HEARTLAND-WEST HCS	589	547	110.3	511	118.1	2.2%	2.3%	12	114.3	12	114.3	1.0	1.0
16 CENTRAL ARKANSAS VETERANS HCS	598	653	38.9	602	42.1	35.5%	38.4%	232	31.2	231	31.3	0.8	0.7
16 GULF COAST HCS	520	423	100.5	402	105.7	0.2%	0.2%	1	239.0	1	239.0	2.4	2.3
16 HOUSTON	580	3	7.0	3	7.0	0.0%	0.0%						
16 JACKSON	586	268	26.7	258	27.8	26.5%	26.0%	71	40.8	67	43.3	1.5	1.6
16 NEW ORLEANS	629	75	34.5	73	35.4	100.0%	100.0%	75	34.5	73	35.4	1.0	1.0
16 OKLAHOMA CITY	635	42	142.4	41	145.9	0.0%	0.0%						
17 CENTRAL TEXAS HCS	674	704	122.3	659	130.6	16.9%	16.5%	119	87.5	109	95.6	0.7	0.7
17 NORTH TEXAS HCS	549	1,234	58.1	814	88.1	0.3%	0.5%	4	20.0	4	20.0	0.3	0.2
17 SOUTHERN TEXAS HCS	671	19	4.8	19	4.8	0.0%	0.0%						
18 EL PASO HCS	756	48	14.4	33	20.9	0.0%	0.0%						
18 NEW MEXICO HCS	501	144	43.9	130	48.6	1.4%	1.5%	2	76.0	2	76.0	1.7	1.6
18 NORTHERN ARIZONA HCS	649	278	109.1	269	112.7	0.0%	0.0%						
18 SOUTHERN ARIZONA HCS	678	163	20.3	163	20.3	0.0%	0.0%						
19 SALT LAKE CITY HCS	660	28	26.7	27	27.7	0.0%	0.0%						
19 SHERIDAN	666	235	39.7	218	42.8	23.4%	24.3%	55	36.1	53	37.5	0.9	0.9
20 ALASKA HCS & RO	463	153	132.1	134	150.9	10.5%	9.7%	16	147.0	13	180.9	1.1	1.2
20 BOISE	531	138	18.1	136	18.4	0.0%	0.0%						
20 PORTLAND	648	20	36.5	19	38.4	0.0%	0.0%						
20 PUGET SOUND HCS	663	487	57.2	448	62.2	32.6%	34.8%	159	48.7	156	49.7	0.9	0.8
20 ROSEBURG HCS	653	217	25.9	209	26.9	0.0%	0.0%						
20 WALLA WALLA	687	298	22.2	284	23.3	0.0%	0.0%						
20 WHITE CITY	692	704	166.5	669	175.3	5.1%	5.4%	36	174.4	36	174.4	1.0	1.0

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2002.

		All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP Ratio of Bed Days per …*	
VISN VAMC	CODE	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	All Episodes	Unique Veterans	*Episodes of Care*	*Bed Days/ Episode*	*Unique Veterans*	*Bed Days/ Vet/Year*	Episode	Vet/Year
21 HONOLULU	459	51	58.0	51	58.0	100.0%	100.0%	51	58.0	51	58.0	1.0	1.0
21 PALO ALTO HCS	640	639	80.1	593	86.3	32.4%	33.4%	207	57.1	198	59.7	0.7	0.7
21 SAN FRANCISCO	662	19	154.1	19	154.1	15.8%	15.8%	3	38.3	3	38.3	0.2	0.2
22 GREATER LA HCS	691	660	126.5	639	130.7	10.5%	10.6%	69	143.5	68	145.6	1.1	1.1
22 LOMA LINDA	605	1	6.0	1	6.0	0.0%	0.0%						
23 BLACK HILLS HCS	568	563	76.2	498	86.1	4.6%	4.8%	26	90.3	24	97.8	1.2	1.1
23 CENTRAL IOWA HCS	555	2	23.0	2	23.0	100.0%	100.0%	2	23.0	2	23.0	1.0	1.0
23 NEBRASKA-WESTERN IOWA HCS	636	830	35.4	703	41.8	8.7%	9.2%	72	37.0	65	41.0	1.0	1.0
23 ST CLOUD	656	842	56.9	799	59.9	8.6%	8.6%	72	65.0	69	67.9	1.1	1.1
ALL VA		29,979	63.8	26,040	73.5	12.5%	13.0%	3,736	52.2	3,376	57.8	0.8	0.8
AVERAGE		389	63.5	353	67.8	12.5%	12.6%	70	66.9	65	69.2	1.0	0.9
SD		360	42.4	316	44.1	21.0%	21.0%	86	49.1	75	50.1	0.5	0.5
CV		0.92	0.67	0.89	0.65	1.69	1.67	1.22	0.73	1.16	0.72	0.48	0.50

*Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Data for TABLE 13 are not available for this fiscal year.

Table 14. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2001-March 31, 2002).*

VISN	*Number of Unique Patients w PTSD Dx.*	*Average Length Of Stay (Index stay)*	*Bed Days 6 months After DC*	*Number of Admissions 6 months After D/C*	*% Readm. within 14 days*	*% Readm. within 30 days*	*% Readm. within 180 days*	*Days to Readm. First Year After D/C*	*Inpatient Summary Score Average Z: Weighted*
1	312	15.4	9.9	0.52	3.5%	7.1%	37.5%	97.0	0.67
2	48	10.3	4.0	0.33	8.3%	10.4%	29.2%	83.3	-0.19
3	97	12.6	5.9	0.47	8.2%	14.4%	27.8%	52.8	0.81
4	116	10.4	3.6	0.28	3.4%	6.0%	18.1%	81.5	-0.59
5	82	11.1	2.0	0.27	2.4%	2.4%	20.7%	68.0	-0.60
6	410	13.0	8.8	0.58	4.4%	9.5%	37.3%	66.8	1.05
7	252	11.3	4.1	0.41	4.4%	6.7%	29.8%	78.1	-0.06
8	109	6.0	3.1	0.55	9.0%	12.8%	32.1%	65.8	0.24
9	137	9.3	3.5	0.34	3.6%	5.8%	25.5%	79.2	-0.42
10	69	13.3	4.8	0.55	4.3%	7.2%	34.8%	79.8	0.36
11	58	13.1	3.1	0.29	1.7%	3.4%	20.7%	77.3	-0.49
12	100	14.8	4.2	0.49	2.0%	6.0%	31.0%	82.3	0.12
15	188	29.2	4.6	0.40	6.9%	10.6%	24.5%	61.0	1.04
16	125	11.0	3.7	0.34	3.2%	6.4%	24.0%	75.5	-0.31
17	161	12.0	5.3	0.47	6.8%	8.7%	34.2%	83.7	0.23
18	108	10.1	1.5	0.19	0.9%	4.6%	17.6%	80.9	-1.03
19	148	8.6	3.3	0.32	2.7%	6.8%	22.3%	59.7	-0.28
20	330	14.8	3.1	0.28	2.1%	3.6%	21.5%	91.6	-0.61
21	64	10.9	2.8	0.39	15.6%	17.2%	25.0%	35.5	0.69
22	78	13.3	2.2	0.31	2.6%	3.8%	21.8%	96.4	-0.77
23	38	6.4	5.1	0.55	5.3%	7.9%	39.5%	82.6	0.14
ALL VA	3,030	13.2	5.0	0.41	4.0%	7.0%	28.0%	77.0	0.12
AVERAGE	144	12.2	4.2	0.40	4.8%	7.7%	27.4%	75.2	0.00
SD	101	4.6	2.0	0.11	3.4%	3.8%	6.6%	14.6	0.61
CV	0.70	0.4	0.5	0.29	0.70	0.49	0.24	0.19	

* Outlined/highlighted values are 1 SD from the mean and reflect high levels of inpatient service use.

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2001-March 31, 2002), by VAMC.*

VISN	STATION	CODE	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 days	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C
1	BEDFORD	518	3	5.0	0.67	0.33	0.0%	0.0%	33.3%	178.00
1	BOSTON HCS	523	28	12.0	5.39	0.54	7.1%	10.7%	35.7%	89.10
1	CONNECTICUT HCS	689	22	12.8	8.05	0.55	4.5%	9.1%	31.8%	79.71
1	NORTHAMPTON	631	199	18.9	11.92	0.42	0.5%	2.5%	39.2%	110.83
1	PROVIDENCE	650	14	8.3	16.71	1.86	35.7%	50.0%	64.3%	33.11
1	TOGUS	402	6	7.0	0.00	0.00	0.0%	0.0%	0.0%	NA
1	WHITE RIVER JCT	405	40	6.2	3.73	0.60	5.0%	12.5%	30.0%	64.75
2	ALBANY	500	12	3.5	0.17	0.08	8.3%	8.3%	8.3%	13.00
2	CANANDAIGUA	532	3	27.0	26.33	1.00	33.3%	33.3%	66.7%	61.50
2	SYRACUSE	670	11	14.9	6.27	0.45	0.0%	0.0%	45.5%	112.40
2	WESTERN NEW YORK HCS	528	22	9.3	2.00	0.32	9.1%	13.6%	27.3%	78.00
3	BRONX	526	21	17.2	8.33	0.62	14.3%	23.8%	28.6%	16.33
3	HUDSON VALLEY HCS	620	26	10.3	2.38	0.19	7.7%	7.7%	11.5%	63.00
3	NEW JERSEY HCS	561	26	13.3	2.81	0.42	3.8%	3.8%	30.8%	85.13
3	NEW YORK HARBOR HCS	630	20	10.4	11.20	0.70	10.0%	25.0%	40.0%	37.88
3	NORTHPORT	632	4	9.5	8.50	0.75	0.0%	25.0%	50.0%	77.50
4	CLARKSBURG	540	16	7.3	1.00	0.19	6.3%	6.3%	18.8%	66.33
4	COATESVILLE	542	19	11.0	4.84	0.47	10.5%	15.8%	15.8%	12.33
4	LEBANON	595	9	15.4	3.11	0.11	0.0%	11.1%	11.1%	24.00
4	PHILADELPHIA	642	30	13.4	5.13	0.40	3.3%	3.3%	23.3%	103.29
4	PITTSBURGH HCS	646	37	8.1	3.38	0.19	0.0%	2.7%	18.9%	104.14
4	WILKES-BARRE	693	5	8.2	0.00	0.00	0.0%	0.0%	0.0%	NA
5	MARTINSBURG	613	21	4.6	0.95	0.24	0.0%	0.0%	19.0%	90.75
5	MARYLAND HCS	512	45	16.0	2.00	0.18	4.4%	4.4%	15.6%	61.71
5	WASHINGTON	688	16	5.8	3.63	0.56	0.0%	0.0%	37.5%	60.17
6	ASHEVILLE	637	42	9.1	0.95	0.19	0.0%	0.0%	19.0%	91.38
6	DURHAM	558	36	7.0	3.67	0.47	5.6%	5.6%	27.8%	62.30
6	FAYETTEVILLE NC	565	21	7.1	2.90	0.38	14.3%	14.3%	28.6%	51.50
6	HAMPTON	590	113	10.2	8.88	0.98	6.2%	16.8%	46.9%	63.96
6	SALEM	658	130	10.1	16.37	0.59	2.3%	8.5%	50.8%	69.74
6	SALISBURY	659	68	30.6	3.78	0.26	4.4%	5.9%	14.7%	55.90
7	ATLANTA	508	59	9.3	2.53	0.19	3.4%	5.1%	15.3%	58.78
7	AUGUSTA	509	80	11.5	4.15	0.40	3.8%	7.5%	32.5%	80.54
7	CENTRAL ALABAMA VETERANS HCS	619	61	11.2	6.57	0.74	3.3%	4.9%	44.3%	86.33
7	CHARLESTON	534	19	4.9	2.11	0.42	5.3%	10.5%	31.6%	82.33
7	COLUMBIA SC	544	27	7.6	3.48	0.22	7.4%	7.4%	18.5%	51.80
7	TUSCALOOSA	679	6	68.0	4.50	0.33	16.7%	16.7%	33.3%	74.00

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2001-March 31, 2002), by VAMC.*

VISN	STATION	CODE	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 days	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C
8	BAY PINES	516	23	5.6	2.43	0.30	8.7%	8.7%	21.7%	70.00
8	MIAMI	546	8	4.5	0.63	0.13	0.0%	0.0%	12.5%	66.00
8	NO. FLORIDA/SO. GEORGIA VETERANS HS	573	18	4.0	1.06	0.33	5.6%	16.7%	33.3%	51.67
8	SAN JUAN	672	17	12.3	2.29	0.35	5.9%	11.8%	35.3%	92.17
8	TAMPA	673	13	5.1	3.69	0.54	7.7%	7.7%	30.8%	56.75
8	W PALM BEACH	548	30	4.9	5.73	1.10	16.7%	20.0%	43.3%	61.31
9	LEXINGTON	596	6	5.2	11.67	0.83	0.0%	0.0%	50.0%	77.67
9	LOUISVILLE	603	7	5.3	1.43	0.14	0.0%	0.0%	14.3%	52.00
9	MEMPHIS	614	43	9.1	2.77	0.28	0.0%	2.3%	16.3%	79.14
9	MIDDLE TENNESSEE HCS: MURFREESBORO	626	48	11.8	4.48	0.42	8.3%	12.5%	33.3%	73.50
9	MOUNTAIN HOME	621	33	7.5	2.12	0.27	3.0%	3.0%	24.2%	94.75
10	CHILLICOTHE	538	22	13.0	6.36	0.64	4.5%	9.1%	40.9%	78.78
10	CINCINNATI	539	13	16.5	5.08	0.62	15.4%	15.4%	30.8%	60.50
10	CLEVELAND	541	18	15.9	4.00	0.33	0.0%	5.6%	22.2%	81.50
10	DAYTON	552	16	8.1	3.44	0.63	0.0%	0.0%	43.8%	91.14
11	ALLEN PARK	553	10	6.6	1.60	0.30	0.0%	0.0%	10.0%	98.00
11	ANN ARBOR HCS	506	5	9.8	1.40	0.20	0.0%	0.0%	20.0%	161.00
11	BATTLE CREEK	515	32	13.0	4.53	0.38	3.1%	6.3%	28.1%	67.22
11	DANVILLE, IL	550	3	9.3	4.33	0.33	0.0%	0.0%	33.3%	63.00
11	INDIANAPOLIS	583	4	4.5	0.00	0.00	0.0%	0.0%	0.0%	NA
11	NORTHERN INDIANA HCS	610	4	45.8	0.00	0.00	0.0%	0.0%	0.0%	NA
12	CHICAGO HCS	537	40	17.0	5.90	0.60	2.5%	10.0%	37.5%	75.73
12	HINES	578	8	8.9	4.13	0.50	0.0%	0.0%	37.5%	97.67
12	MADISON	607	10	9.3	3.60	0.70	0.0%	0.0%	40.0%	86.25
12	MILWAUKEE	695	23	5.4	1.57	0.26	0.0%	0.0%	17.4%	105.75
12	NORTH CHICAGO	556	11	35.7	4.00	0.55	9.1%	18.2%	36.4%	63.25
12	TOMAH	676	8	15.0	3.75	0.25	0.0%	0.0%	12.5%	102.00
15	COLUMBIA MO	543	13	9.2	0.15	0.08	7.7%	7.7%	7.7%	10.00
15	EASTERN KANSAS HCS	677	103	45.6	3.84	0.37	4.9%	8.7%	23.3%	70.33
15	HEARTLAND-EAST HCS	657	63	9.7	7.25	0.56	11.1%	14.3%	31.7%	54.40
15	HEARTLAND-WEST HCS	589	9	7.1	0.78	0.22	0.0%	11.1%	11.1%	20.00
16	ALEXANDRIA	502	14	24.9	5.71	0.43	7.1%	21.4%	42.9%	68.00
16	CENTRAL ARKANSAS VETERANS HCS	598	39	12.0	5.97	0.44	2.6%	5.1%	28.2%	81.82
16	FAYETTEVILLE AR	564	11	4.7	2.27	0.36	0.0%	9.1%	18.2%	95.00
16	GULF COAST HCS	520	3	18.3	3.67	0.33	0.0%	0.0%	33.3%	145.00
16	HOUSTON	580	20	11.1	2.95	0.30	5.0%	5.0%	20.0%	60.25
16	JACKSON	586	14	6.9	1.93	0.21	0.0%	0.0%	14.3%	107.00
16	NEW ORLEANS	629	8	3.3	1.38	0.25	0.0%	0.0%	12.5%	41.00
16	OKLAHOMA CITY	635	13	7.3	0.85	0.15	7.7%	7.7%	15.4%	37.00
16	SHREVEPORT	667	3	6.0	0.33	0.33	0.0%	0.0%	33.3%	53.00

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2001-March 31, 2002), by VAMC.*

VISN	STATION	CODE	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 days	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C
17	CENTRAL TEXAS VETERANS HCS	674	57	18.1	6.60	0.44	3.5%	5.3%	35.1%	113.85
17	NORTH TEXAS HCS	549	37	7.0	2.78	0.35	8.1%	10.8%	27.0%	44.10
17	SOUTH TEXAS VETERANS HCS	671	67	9.6	5.69	0.55	9.0%	10.4%	37.3%	75.44
18	NEW MEXICO HCS	501	21	6.6	1.10	0.19	0.0%	9.5%	19.0%	90.75
18	PHOENIX	644	31	8.1	2.81	0.39	0.0%	3.2%	32.3%	93.10
18	SOUTHERN ARIZONA HCS	678	51	13.3	0.92	0.10	2.0%	3.9%	9.8%	48.60
18	WEST TEXAS HCS (Big Spring)	519	5	5.0	0.00	0.00	0.0%	0.0%	0.0%	NA
19	DENVER	554	92	8.0	3.23	0.23	4.3%	7.6%	19.6%	43.78
19	GRAND JUNCTION	575	12	6.8	0.42	0.17	0.0%	0.0%	8.3%	86.00
19	MONTANA HCS	436	2	5.0	5.00	0.50	0.0%	0.0%	0.0%	NA
19	SALT LAKE CITY HCS	660	25	6.8	6.36	0.72	0.0%	8.0%	40.0%	67.50
19	SHERIDAN	666	17	15.7	1.41	0.29	0.0%	5.9%	23.5%	105.25
20	BOISE	531	34	16.6	3.65	0.56	2.9%	5.9%	32.4%	77.64
20	PORTLAND	648	17	5.9	3.00	0.35	0.0%	0.0%	35.3%	104.33
20	PUGET SOUND HCS	663	160	12.3	1.51	0.17	2.5%	3.8%	13.8%	79.45
20	ROSEBURG HCS	653	101	21.2	5.98	0.38	2.0%	4.0%	30.7%	100.35
20	SPOKANE	668	12	9.1	1.25	0.08	0.0%	0.0%	8.3%	165.00
20	WALLA WALLA	687	6	3.5	0.00	0.00	0.0%	0.0%	0.0%	NA
21	CENTRAL CALIFORNIA HCS	570	6	5.0	0.00	0.00	0.0%	0.0%	0.0%	NA
21	HONOLULU	459	11	9.6	4.00	0.55	27.3%	27.3%	36.4%	34.00
21	PALO ALTO HCS	640	28	15.7	3.82	0.46	17.9%	17.9%	28.6%	42.50
21	SAN FRANCISCO	662	5	7.2	1.20	0.40	20.0%	20.0%	20.0%	11.00
21	SIERRA NEVADA HCS	654	14	5.9	1.64	0.29	7.1%	14.3%	21.4%	27.00
22	GREATER LOS ANGELES HCS	691	35	20.5	2.69	0.20	5.7%	8.6%	14.3%	49.00
22	LOMA LINDA	605	9	5.3	0.89	0.22	0.0%	0.0%	22.2%	78.00
22	LONG BEACH HCS	600	9	8.9	3.78	0.78	0.0%	0.0%	33.3%	85.00
22	SAN DIEGO HCS	664	13	8.5	1.00	0.15	0.0%	0.0%	15.4%	142.00
22	SOUTHERN NEVADA HCS	593	12	6.8	2.00	0.50	0.0%	0.0%	41.7%	139.80
23	BLACK HILLS HCS	568	7	12.4	4.14	0.86	0.0%	0.0%	57.1%	139.25
23	CENTRAL IOWA HCS	555	7	4.9	8.29	1.00	14.3%	14.3%	71.4%	77.60
23	FARGO	437	1	6.0	0.00	0.00	0.0%	0.0%	0.0%	NA
23	IOWA CITY	584	4	5.5	18.75	0.25	0.0%	0.0%	25.0%	36.00
23	MINNEAPOLIS	618	5	3.2	2.80	0.40	20.0%	20.0%	40.0%	38.00
23	NEBRASKA-WESTERN IOWA HCS	636	6	6.8	1.00	0.17	0.0%	16.7%	16.7%	16.00
23	SIOUX FALLS	438	1	17.0	0.00	0.00	0.0%	0.0%	0.0%	NA
23	ST CLOUD	656	7	2.9	1.71	0.57	0.0%	0.0%	28.6%	83.00
ALL VA			3030	13.2	5.04	0.41	4.3%	7.5%	28.0%	77.03
AVERAGE			27	11.2	3.87	0.39	4.6%	7.3%	25.9%	73.73
SD			32	9.1	4.03	0.28	6.8%	8.4%	15.0%	33.03
CV			1.20	0.81	1.04	0.71	1.47	1.15	0.58	0.45

NA = Not Applicable.

* Outlined values are 1 SD from the mean in the undesirable direction, and reflect high levels of inpatient service use.

Table 16. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2001-March 31, 2002.*

VISN	*Any Psych. Outpatient Visit in 6 mos. After DC*	*Any Psych. Outpatient Visit in 30 Days After DC*	*Days to 1st OP Visit in 6 mos. After DC*	*Number of Visits in 6 mos. Among those w any Visits*	*Continuity: Bi-months with 2 Visits*	*Dually Diagnosed: Psychiatric & SA Disorders*	*Any SA Outpatient Visit in 30 Days After DC*	*Number of SA OP Visits Among those w any Visits*	*Outpatient Summary Score Average Z Score*
1	92.0%	70.5%	24.07	15.22	2.49	45.5%	11.9%	12.05	-0.25
2	85.4%	70.8%	17.05	29.39	2.56	62.5%	10.4%	8.90	-0.16
3	90.7%	66.0%	28.30	30.50	2.52	76.3%	29.9%	26.24	0.17
4	87.9%	70.7%	24.83	13.30	2.41	52.6%	16.4%	29.03	-0.24
5	91.5%	73.2%	22.03	16.65	2.45	45.1%	15.9%	15.43	-0.04
6	90.2%	60.2%	32.34	11.20	2.36	33.7%	6.8%	18.92	-1.08
7	94.8%	69.8%	27.36	17.09	2.50	40.5%	11.1%	23.35	-0.03
8	91.7%	72.5%	22.62	11.82	2.50	41.3%	21.1%	10.46	-0.04
9	91.9%	73.5%	22.78	9.50	2.46	29.9%	5.1%	17.92	-0.24
10	94.2%	75.4%	23.22	18.28	2.45	42.0%	18.8%	36.16	0.53
11	87.9%	70.7%	21.47	15.31	2.31	53.4%	13.8%	8.50	-0.63
12	91.0%	72.0%	22.23	26.38	2.62	56.0%	24.0%	33.97	0.68
15	96.2%	74.1%	23.67	19.67	2.55	52.1%	10.8%	23.31	0.37
16	93.6%	72.0%	27.51	16.15	2.54	53.6%	17.6%	11.49	-0.06
17	87.0%	64.6%	28.54	10.44	2.45	40.4%	13.0%	23.86	-0.69
18	95.4%	74.1%	25.87	10.44	2.45	34.3%	2.8%	9.78	-0.33
19	93.9%	77.0%	16.76	19.70	2.47	46.6%	8.1%	12.83	0.23
20	92.3%	70.9%	26.80	10.64	2.47	40.6%	10.1%	16.42	-0.34
21	95.3%	75.0%	23.75	15.02	2.39	51.6%	17.2%	8.75	-0.05
22	91.0%	75.6%	20.17	13.08	2.38	53.8%	6.4%	15.60	-0.22
23	94.7%	84.2%	11.81	71.28	2.82	60.5%	36.8%	29.05	2.43
All VA	91.9%	70.2%	25.29	15.87	2.47	45.0%	12.0%	19.59	0.00
AVG	91.9%	72.0%	23.5	19.1	2.48	48.2%	14.7%	18.7	0.00
SD	3.0%	4.8%	4.6	13.4	0.10	10.9%	8.3%	8.6	0.69
CV	0.03	0.07	0.20	0.70	0.04	0.23	0.56	0.46	

* Outlined/highlighted values are 1 SD from the mean (in the undesirable direction) of all VAMCs, and reflect low outpatient service use after discharge from inpatient treatment.

Table 16A. Deviation of outpatient continuity of care from that of the median VISN over the first six months of treatment in FY 2002, among patients with PTSD (ICD-9 code 309.81), by VISN, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

VISN	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
VISN Median	19.73	10.54	2.61	4.14	0.12	0.60	0.80	2.62	
VA National Avg.	14.91	11.61	2.61	4.14	0.13	0.58	0.81	2.68	
1	0.92	1.31	0.02	0.17	0.00	0.05	0.04	-0.02	0.67
2	1.91	1.43	0.06	0.29	-0.01	-0.05	0.01	0.52	0.60
3	4.77	3.97	0.10	0.35	-0.02	0.08	0.08	-0.16	1.83
4	-3.25	-2.08	0.01	-0.05	0.00	0.01	0.01	-0.23	-0.16
5		-0.04	-0.06	-0.12	0.04	0.06	0.03	-0.16	-0.24
6	-3.57	-2.19	-0.08	-0.35	0.01	0.03		-0.28	-0.77
7	0.02	-0.64	-0.05	-0.18	0.00	-0.07	-0.05	0.37	-0.62
8	-2.99	-1.79	-0.01	-0.19	0.00	0.01	0.00	-0.22	-0.33
9	-3.98	-3.04	-0.11	-0.39	0.02	-0.06	-0.07	-0.13	-1.58
10	1.68	0.48	-0.01	0.04	0.00	-0.05	-0.01	0.34	0.02
11	3.93	4.22	-0.03		0.02	-0.03	-0.01	0.24	0.10
12	4.49	2.51	0.05	0.21	-0.01	0.01	0.03	0.17	0.94
15	0.92	0.63	0.03	0.08	-0.01	-0.02	0.00	0.06	0.25
16	-2.35	-1.66	-0.06	-0.25	0.00	-0.06	-0.06	0.03	-0.95
17	-1.79	-0.77	-0.02	-0.08	0.01		0.00	-0.11	-0.30
18	-3.85	-1.99	-0.04	-0.13	0.02	-0.04	-0.03		-0.86
19	-0.63		0.01	0.10	0.03	-0.02	0.01	0.05	-0.13
20	-1.75	-0.48	0.04	0.11		0.07	0.05	-0.34	0.56
21	-0.51	-0.01		0.04	0.02	0.04	0.03	-0.20	0.15
22	2.31	2.22	0.02	0.05	0.01	0.04	0.04	0.05	0.56
23	5.25	0.83	0.01	0.00	-0.02	-0.06	-0.02	0.58	0.32

X = Significantly different ($p<.05$) from median VISN in the undesired direction, after adjustment for differences in patient characteristics, distance of residence from VA, diagnosis, etc.

Table 16B. Outpatient continuity of care over the first six months of treatment in FY 2002 among patients with PTSD (ICD-9 code 309.81), by VISN.

VISN	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
1	6,534	15.47	12.60	2.64	4.34	0.11	0.64	0.85	2.58
2	2,951	16.91	13.03	2.68	4.47	0.11	0.53	0.81	3.18
3	4,815	20.03	15.85	2.71	4.48	0.10	0.67	0.89	2.45
4	5,195	10.82	8.95	2.62	4.08	0.11	0.60	0.81	2.36
5	2,153	19.73	14.63	2.59	4.19	0.16	0.61	0.84	2.90
6	4,639	9.65	8.34	2.51	3.75	0.14	0.62	0.80	2.22
7	7,089	14.83	10.89	2.56	3.97	0.12	0.51	0.76	3.02
8	6,400	10.17	8.65	2.60	3.92	0.11	0.61	0.81	2.29
9	3,729	7.60	6.40	2.48	3.65	0.15	0.55	0.73	2.21
10	3,496	18.55	13.03	2.61	4.24	0.12	0.51	0.79	3.22
11	2,721	20.36	16.83	2.57	4.14	0.16	0.55	0.79	2.98
12	2,999	23.12	16.37	2.69	4.47	0.11	0.57	0.83	3.16
15	3,706	13.92	10.92	2.62	4.15	0.12	0.58	0.80	2.53
16	7,716	11.96	9.46	2.54	3.86	0.13	0.53	0.75	2.63
17	4,017	11.56	9.80	2.58	4.02	0.13	0.60	0.81	2.37
18	4,391	10.31	8.98	2.59	4.02	0.13	0.54	0.78	2.62
19	3,148	12.72	10.54	2.62	4.22	0.15	0.58	0.82	2.57
20	6,442	12.79	10.69	2.66	4.27	0.12	0.65	0.86	2.35
21	4,889	14.01	11.18	2.61	4.15	0.15	0.64	0.84	2.41
22	4,609	17.28	13.80	2.64	4.23	0.14	0.62	0.84	2.71
23	3,283	21.30	12.80	2.66	4.24	0.09	0.51	0.79	3.44
ALL VA	94,922	14.28	11.22	2.60	4.11	0.13	0.58	0.81	2.63
Avg.	4,520	14.91	11.61	2.61	4.14	0.13	0.58	0.81	2.68
S.D.	1,556	4.38	2.83	0.06	0.23	0.02	0.05	0.04	0.37
C.V	0.34	0.29	0.24	0.02	0.05	0.14	0.09	0.05	0.14

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2001-March 31, 2002). *

VISN	STATION	CODE	*Any Psych. Outpatient Visit in 6 mos.* After DC	*Any Psych. Outpatient Visit in 30* Days After DC	*Days to 1st OP Visit in 6 mos.* After DC	*Number of Visits in 6 mos. Among those* w Any Visits	*Continuity: Bi-months with* 2 Visits	*Dually Diagnosed: PTSD and* SA Disorder	*Any SA Outpatient Visit in 30 days* After DC	*Number of SA OP Visits in 6 mos. Among those* w Any Visits
1	BEDFORD	518	100.0%	100.0%	11.0	78.0	2.7	0.0%	0.0%	
1	BOSTON HCS	523	92.9%	53.6%	35.8	23.7	2.3	75.0%	21.4%	10.9
1	CONNECTICUT HCS	689	100.0%	95.5%	10.0	24.9	2.7	50.0%	59.1%	24.9
1	NORTHAMPTON	631	88.9%	65.3%	25.8	10.4	2.5	43.2%	5.0%	7.9
1	PROVIDENCE	650	92.9%	78.6%	17.6	35.5	2.9	57.1%	21.4%	12.0
1	TOGUS	402	100.0%	66.7%	69.0	2.5	2.3	83.3%	16.7%	1.0
1	WHITE RIVER JCT	405	100.0%	90.0%	12.8	16.5	2.6	27.5%	10.0%	3.8
2	ALBANY	500	83.3%	66.7%	17.5	32.6	2.5	66.7%	0.0%	
2	SYRACUSE	670	81.8%	72.7%	16.7	30.8	2.8	63.6%	18.2%	9.3
2	WESTERN NEW YORK HCS	528	86.4%	72.7%	16.1	30.3	2.4	59.1%	13.6%	6.2
3	BRONX	526	95.2%	66.7%	32.4	25.7	2.6	71.4%	19.0%	19.4
3	CANANDAIGUA	532	100.0%	66.7%	22.7	8.7	3.0	66.7%	0.0%	15.0
3	HUDSON VALLEY HCS	620	88.5%	61.5%	29.5	30.5	2.6	80.8%	53.8%	38.1
3	NEW JERSEY HCS	561	88.5%	69.2%	21.4	38.4	2.5	84.6%	26.9%	10.6
3	NEW YORK HARBOR HCS	630	90.0%	60.0%	35.9	19.6	2.3	70.0%	20.0%	30.3
3	NORTHPORT	632	100.0%	100.0%	6.3	57.8	3.0	50.0%	0.0%	39.0
4	CLARKSBURG	540	93.8%	87.5%	18.5	9.9	2.7	25.0%	0.0%	2.0
4	COATESVILLE	542	78.9%	63.2%	35.5	19.5	2.1	78.9%	5.3%	13.3
4	LEBANON	595	88.9%	88.9%	10.3	13.8	2.6	55.6%	0.0%	36.0
4	PHILADELPHIA	642	93.3%	76.7%	24.4	11.5	2.8	50.0%	36.7%	40.1
4	PITTSBURGH HCS	646	83.8%	54.1%	28.5	14.3	2.2	56.8%	18.9%	28.6
4	WILKES-BARRE	693	100.0%	100.0%	15.0	8.6	2.2	20.0%	0.0%	
5	MARTINSBURG	613	81.0%	61.9%	23.8	6.3	2.3	42.9%	9.5%	7.3
5	MARYLAND HCS	512	97.8%	80.0%	20.5	19.5	2.5	44.4%	15.6%	15.1
5	WASHINGTON	688	87.5%	68.8%	24.8	20.4	2.6	50.0%	25.0%	21.5
6	ASHEVILLE	637	100.0%	57.1%	29.8	7.9	2.5	23.8%	2.4%	18.5
6	DURHAM	558	88.9%	44.4%	41.2	5.0	2.2	58.3%	8.3%	13.6
6	FAYETTEVILLE NC	565	71.4%	57.1%	29.6	18.4	2.0	38.1%	4.8%	11.3
6	HAMPTON	590	85.8%	58.4%	34.7	13.7	2.1	67.3%	13.3%	26.3
6	SALEM	658	93.8%	59.2%	35.8	8.5	2.5	10.8%	4.6%	12.1
6	SALISBURY	659	91.2%	76.5%	19.6	16.2	2.6	13.2%	2.9%	5.7
7	ATLANTA	508	96.6%	78.0%	21.4	14.4	2.6	37.3%	16.9%	28.9
7	AUGUSTA	509	92.5%	73.8%	17.4	27.2	2.5	42.5%	5.0%	9.7

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2001-March 31, 2002). *

VISN	STATION	CODE	*Any Psych. Outpatient Visit in 6 mos.* After DC	*Any Psych. Outpatient Visit in 30* Days After DC	*Days to 1st OP Visit in 6 mos.* After DC	*Number of Visits in 6 mos. Among those* w Any Visits	*Continuity: Bi-months with* 2 Visits	*Dually Diagnosed: PTSD and* SA Disorder	*Any SA Outpatient Visit in 30 days* After DC	*Number of SA OP Visits in 6 mos. Among those* w Any Visits
7	CENTRAL ALABAMA VETERANS HCS	619	95.1%	49.2%	48.9	9.8	2.3	42.6%	13.1%	28.7
7	CHARLESTON	534	89.5%	68.4%	34.3	6.5	2.4	42.1%	10.5%	19.0
7	COLUMBIA SC	544	100.0%	85.2%	19.3	19.6	2.6	25.9%	11.1%	28.0
7	TUSCALOOSA	679	100.0%	83.3%	15.2	7.3	2.3	83.3%	16.7%	15.5
8	BAY PINES	516	87.0%	73.9%	22.4	20.2	2.5	52.2%	47.8%	9.6
8	MIAMI	546	75.0%	62.5%	23.3	6.2	2.4	50.0%	0.0%	
8	NO. FLORIDA/SO. GEORGIA VETERANS HS	573	88.9%	72.2%	22.9	6.1	2.3	50.0%	27.8%	1.6
8	SAN JUAN	672	100.0%	94.1%	13.4	6.2	2.6	17.6%	11.8%	19.0
8	TAMPA	673	92.3%	76.9%	20.3	9.3	2.3	30.8%	0.0%	7.3
8	W PALM BEACH	548	96.7%	60.0%	28.9	14.7	2.7	43.3%	16.7%	19.8
9	LEXINGTON	596	83.3%	83.3%	6.8	21.2	2.7	50.0%	0.0%	6.0
9	LOUISVILLE	603	100.0%	50.0%	26.5	3.8	2.5	42.9%	0.0%	
9	MEMPHIS	614	93.0%	74.4%	20.6	12.7	2.3	25.6%	7.0%	12.5
9	MIDDLE TENNESSEE HCS	626	89.6%	77.1%	24.4	9.0	2.4	31.3%	4.2%	30.8
9	MOUNTAIN HOME	621	93.9%	69.7%	25.3	5.2	2.6	27.3%	6.1%	14.5
10	CHILLICOTHE	538	90.9%	81.8%	19.7	6.1	2.2	45.5%	9.1%	18.4
10	CINCINNATI	539	92.3%	69.2%	26.8	34.6	2.8	46.2%	46.2%	44.0
10	CLEVELAND	541	94.4%	61.1%	33.7	22.6	2.6	38.9%	16.7%	50.6
10	DAYTON	552	100.0%	87.5%	13.9	16.6	2.4	37.5%	12.5%	31.5
11	ANN ARBOR HCS	506	80.0%	60.0%	34.0	8.5	1.6	80.0%	40.0%	3.5
11	BATTLE CREEK	515	87.5%	71.9%	19.8	15.9	2.5	43.8%	15.6%	14.2
11	DETROIT	553	90.0%	60.0%	27.2	14.7	2.1	60.0%	10.0%	2.3
11	ILLIANA HCS	550	100.0%	66.7%	16.7	34.3	2.3	100.0%	0.0%	3.0
11	INDIANAPOLIS	583	100.0%	100.0%	14.8	14.3	3.0	0.0%	0.0%	
11	NORTHERN INDIANA HCS †	610	75.0%	75.0%	16.7	3.3	1.5	100.0%	0.0%	

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2001-March 31, 2002). *

VISN	STATION	CODE	*Any Psych. Outpatient Visit in 6 mos.* After DC	*Any Psych. Outpatient Visit in 30* Days After DC	*Days to 1st OP Visit in 6 mos.* After DC	*Number of Visits in 6 mos. Among those* w Any Visits	*Continuity: Bi-months with* 2 Visits	*Dually Diagnosed: PTSD and* SA Disorder	*Any SA Outpatient Visit in 30 days* After DC	*Number of SA OP Visits in 6 mos. Among those* w Any Visits
12	CHICAGO HCS	537	90.0%	65.0%	29.8	17.0	2.5	75.0%	42.5%	40.2
12	HINES	578	87.5%	87.5%	6.3	55.1	2.9	62.5%	37.5%	37.0
12	MADISON	607	100.0%	90.0%	12.0	15.7	2.9	0.0%	10.0%	5.0
12	MILWAUKEE	695	91.3%	73.9%	19.0	31.7	2.6	52.2%	8.7%	14.0
12	NORTH CHICAGO	556	100.0%	72.7%	19.8	39.5	2.8	63.6%	0.0%	37.0
12	TOMAH	676	75.0%	62.5%	28.3	24.5	2.5	25.0%	12.5%	36.0
15	COLUMBIA MO	543	92.3%	38.5%	55.8	12.7	2.8	46.2%	7.7%	41.0
15	EASTERN KANSAS HCS	677	99.0%	79.4%	21.6	22.7	2.5	66.0%	7.8%	8.7
15	HEARTLAND-EAST HCS	657	91.8%	72.1%	21.8	15.2	2.6	34.9%	16.4%	39.9
15	HEARTLAND-WEST HCS	589	100.0%	77.8%	16.0	23.1	2.3	22.2%	11.1%	2.0
16	ALEXANDRIA	502	85.7%	64.3%	45.9	11.5	2.6	78.6%	7.1%	7.0
16	CENTRAL ARKANSAS VETERANS HCS	598	92.3%	69.2%	25.5	16.4	2.7	74.4%	28.2%	16.0
16	FAYETTEVILLE AR	564	100.0%	72.7%	25.8	6.3	2.5	63.6%	9.1%	1.4
16	GULF COAST HCS	520	100.0%	33.3%	67.7	18.0	2.3	33.3%	0.0%	
16	HOUSTON	580	95.0%	85.0%	19.4	19.4	2.5	20.0%	10.0%	3.2
16	JACKSON	586	100.0%	78.6%	23.2	7.6	2.6	14.3%	21.4%	7.5
16	NEW ORLEANS	629	87.5%	62.5%	23.4	11.4	2.1	62.5%	37.5%	13.3
16	OKLAHOMA CITY	635	100.0%	76.9%	29.2	34.4	2.4	46.2%	7.7%	51.5
16	SHREVEPORT	667	66.7%	66.7%	13.5	17.0	2.0	66.7%	0.0%	
17	CENTRAL TEXAS HCS	674	84.2%	61.4%	35.6	9.4	2.3	33.3%	24.6%	26.2
17	NORTH TEXAS HCS	549	86.5%	67.6%	17.8	14.5	2.6	56.8%	8.1%	34.1
17	SOUTH TEXAS VETERANS HCS	671	89.6%	65.7%	28.6	9.1	2.5	37.3%	6.0%	8.1
18	NEW MEXICO HCS	501	81.0%	47.6%	36.4	7.4	2.1	47.6%	4.8%	8.0
18	PHOENIX	644	100.0%	77.4%	31.0	6.7	2.5	48.4%	3.2%	15.5
18	SOUTHERN ARIZONA HCS	678	100.0%	82.4%	19.3	14.0	2.6	23.5%	0.0%	5.0
18	WEST TEXAS HCS	519	80.0%	80.0%	25.5	6.0	2.0	0.0%	20.0%	15.0
19	DENVER	554	94.6%	84.8%	10.2	27.1	2.6	47.8%	9.8%	16.0
19	GRAND JUNCTION	575	100.0%	83.3%	16.4	6.2	2.5	16.7%	8.3%	17.0
19	MONTANA HCS †	436	100.0%	50.0%	61.5	8.0	2.5	50.0%	0.0%	
19	SALT LAKE CITY HCS	660	92.0%	60.0%	27.5	6.8	2.3	48.0%	8.0%	7.7
19	SHERIDAN	666	88.2%	58.8%	32.3	8.9	2.2	58.8%	0.0%	1.7
20	BOISE	531	100.0%	85.3%	26.8	14.9	2.8	17.6%	29.4%	16.8
20	PORTLAND	648	100.0%	88.2%	19.1	10.5	2.8	52.9%	5.9%	4.5

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2001-March 31, 2002). *

VISN	STATION	CODE	*Any Psych. Outpatient Visit in 6 mos.* After DC	*Any Psych. Outpatient Visit in 30* Days After DC	*Days to 1st OP Visit in 6 mos.* After DC	*Number of Visits in 6 mos. Among those* w Any Visits	*Continuity: Bi-months with* 2 Visits	*Dually Diagnosed: PTSD and* SA Disorder	*Any SA Outpatient Visit in 30 days* After DC	*Number of SA OP Visits in 6 mos. Among those* w Any Visits
20	PUGET SOUND HCS	663	85.3%	55.8%	32.5	9.7	2.3	46.9%	10.3%	18.0
20	ROSEBURG HCS	653	98.0%	81.2%	23.9	10.4	2.6	36.6%	5.0%	14.7
20	SPOKANE	668	100.0%	100.0%	5.7	11.8	2.8	41.7%	8.3%	16.0
20	WALLA WALLA	687	100.0%	100.0%	12.7	8.0	2.2	33.3%	0.0%	9.0
21	CENTRAL CALIFORNIA HCS	570	100.0%	66.7%	38.0	5.5	2.3	16.7%	0.0%	
21	HONOLULU	459	100.0%	90.9%	13.1	24.1	2.7	45.5%	36.4%	6.4
21	PALO ALTO HCS	640	100.0%	85.7%	21.7	15.1	2.3	60.7%	3.6%	12.8
21	SAN FRANCISCO	662	60.0%	40.0%	33.0	1.3	2.2	100.0%	60.0%	16.0
21	SIERRA NEVADA HCS	654	92.9%	57.1%	28.5	14.6	2.4	35.7%	21.4%	2.3
22	GREATER LOS ANGELES HCS	691	94.3%	85.7%	17.2	19.2	2.5	57.1%	11.4%	28.3
22	LOMA LINDA	605	88.9%	77.8%	16.0	6.3	2.1	33.3%	0.0%	2.0
22	LONG BEACH HCS	600	88.9%	66.7%	15.0	11.0	2.3	44.4%	0.0%	5.0
22	SAN DIEGO HCS	664	76.9%	38.5%	38.3	3.9	2.0	76.9%	0.0%	10.0
22	SOUTHERN NEVADA HCS	593	100.0%	91.7%	19.6	9.8	2.7	41.7%	8.3%	2.3
23	BLACK HILLS HCS	568	100.0%	85.7%	13.0	84.0	2.9	71.4%	71.4%	28.3
23	CENTRAL IOWA HCS	555	100.0%	100.0%	3.6	110.6	2.9	57.1%	28.6%	24.0
23	FARGO	437	100.0%	100.0%	1.0	20.0	3.0	100.0%	100.0%	19.0
23	IOWA CITY	584	100.0%	75.0%	12.0	25.8	2.8	50.0%	25.0%	5.0
23	MINNEAPOLIS	618	80.0%	80.0%	2.0	110.3	2.6	80.0%	60.0%	51.7
23	NEBRASKA-WESTERN IOWA HCS	636	83.3%	66.7%	17.8	22.8	2.8	16.7%	0.0%	4.0
23	SIOUX FALLS	438	100.0%	100.0%	2.0	7.0	3.0	0.0%	0.0%	
23	ST CLOUD	656	100.0%	85.7%	23.0	74.1	2.9	85.7%	28.6%	49.0
ALL VA			92.0%	70.0%	25.3	15.9	2.5	44.7%	12.4%	19.6
AVERAGE			92.1%	72.9%	23.6	19.3	2.5	47.9%	14.7%	17.4
SD			8.3%	15.0%	12.1	18.9	0.3	22.9%	17.3%	13.3
CV			0.09	0.21	0.51	0.98	0.11	0.48	1.18	0.76

* Outlined/highlighted values are 1 SD in the undesirable direction from the mean of all VAMCs and reflect low outpatient service delivery.

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2002, among patients with PTSD (ICD-9 code 309.81), by Station, for patient characteristics, distance of residence from VA, diagnosis, etc.).

VISN	Station	Code	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
Median: VAMC			16.26	8.28	2.59	3.99	0.12	0.50	0.81	3.23	
VA National Avg.			14.02	10.92	2.59	4.06	0.13	0.59	0.81	2.61	
1	BEDFORD	518	8.76	6.92	0.04	0.23	-0.01	-0.04	-0.01	1.11	0.41
1	BOSTON HCS	523	1.65	1.74	0.03	0.18	-0.01	0.10	0.06	-0.27	0.42
1	CONNECTICUT HCS	689	0.34	1.75	0.06	0.24	0.00	0.11	0.06	-0.28	0.42
1	MANCHESTER	608	-0.87	-0.16	0.06	0.25	-0.03	0.05	0.03	-0.17	0.25
1	NORTHAMPTON	631	-0.22	0.59	0.01	0.03	0.00	-0.03	-0.03	0.01	-0.07
1	PROVIDENCE	650	2.00	2.61	-0.03	0.03	0.01	0.02	-0.01	0.01	0.09
1	TOGUS	402	0.41	-0.19	-0.09	-0.31	0.03	0.01	-0.02	0.10	-0.21
1	WHITE RIVER JCT	405	-0.61	0.41	0.04	0.14	-0.01	0.07	0.04	-0.03	0.24
2	ALBANY	500	1.54	1.65	0.06	0.41	0.00	0.00	0.01	0.38	0.23
2	BATH	514	0.70	0.48	0.11	0.18	-0.05	-0.13	-0.06	1.03	-0.09
2	CANANDAIGUA	532	5.43	5.05	0.05	0.30	0.00	-0.05	-0.01	0.68	0.27
2	SYRACUSE	670	1.15	0.27	0.05	0.10	-0.03	0.01	0.01	0.13	0.17
2	WESTERN NEW YORK HCS	528	2.96	1.82	0.03	0.11	0.00	-0.06	-0.02	0.53	0.03
3	BRONX	526	9.40	7.53	0.15	0.63	-0.03	0.08	0.07	0.01	0.97
3	HUDSON VALLEY HCS	620	6.99	5.33	0.07	0.40	-0.02	0.09	0.07	-0.22	0.75
3	NEW JERSEY HCS	561	1.74	1.95	0.08	0.11	-0.03	0.07	0.03	-0.08	0.39
3	NEW YORK HARBOR HCS	630	4.56	3.62	0.11	0.28	-0.01	0.09	0.07	-0.30	0.63
3	NORTHPORT	632	7.08	6.48	0.05	0.17	-0.04	0.15	0.09	-0.34	0.88
4	ALTOONA	503	0.58	1.00	0.15	0.35	-0.04	-0.02	0.02	-0.09	0.28
4	BUTLER	529	-0.03	-0.53	-0.15	-0.33	0.05	-0.02	-0.04	0.30	-0.40
4	CLARKSBURG	540	-3.13	-2.13		-0.40	-0.04	0.05	0.00	-0.29	-0.09
4	COATESVILLE	542	-0.25	0.35	0.06	0.33	0.00	0.05	0.03	-0.16	0.24
4	ERIE	562	-4.22	-2.52	-0.12	-0.21	-0.02	-0.10	-0.09	0.00	-0.59
4	LEBANON	595	-4.01	-2.47	0.03	-0.12	0.01	0.04	0.00	-0.42	-0.13
4	PHILADELPHIA	642	-4.71	-3.03	0.01	-0.03	0.02	0.03	0.00	-0.37	-0.19
4	PITTSBURGH HCS	646	-1.67	-0.53	0.01	-0.07	-0.01	0.00	0.00	-0.17	-0.05
4	WILKES-BARRE	693	-2.15	-1.08	-0.01	-0.18	-0.03	-0.05	-0.07	-0.13	-0.27
4	WILMINGTON	460	-4.80	-3.85	-0.16	-0.70	0.02	0.12	0.04	-0.66	-0.26
5	MARTINSBURG	613	-5.18	-3.44	-0.12	-0.57	0.01	0.17	0.05	-0.76	-0.11
5	MARYLAND HCS	512	2.74	2.98	0.00	0.14	0.04	0.09	0.04	-0.08	0.31
5	WASHINGTON	688	2.67	1.33	-0.08	-0.13	0.05		-0.01	0.06	-0.10

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2002, among patients with PTSD (ICD-9 code 309.81), by Station, for patient characteristics, distance of residence from VA, diagnosis, etc.).

VISN	Station	Code	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
Median: VAMC			16.26	8.28	2.59	3.99	0.12	0.50	0.81	3.23	
VA National Avg.			14.02	10.92	2.59	4.06	0.13	0.59	0.81	2.61	
6	ASHEVILLE	637	-1.95	-1.03	0.03	-0.14	-0.03	-0.01	-0.04	-0.14	-0.13
6	BECKLEY	517	-5.10	-3.77	-0.05	-0.47	-0.05	0.06	0.02	-0.47	-0.14
6	DURHAM	558	-5.75	-3.35	-0.21	-0.60	0.08	0.06	-0.01	-0.49	-0.61
6	FAYETTEVILLE NC	565	-2.07	-0.81	-0.05	-0.28	0.01	-0.03	-0.04	0.14	-0.30
6	HAMPTON	590	1.81	2.17	-0.07	-0.21	0.04	0.00	-0.02	-0.15	-0.12
6	RICHMOND	652	-2.35	-0.74	-0.06	-0.25	0.00	0.13	0.06	-0.43	0.13
6	SALEM	658	-2.89	-2.05	-0.04	-0.38	-0.05	0.04	-0.02	-0.40	-0.15
6	SALISBURY	659	-3.87	-2.23	-0.11	-0.45	0.00	0.05	0.00	-0.45	-0.27
7	ATLANTA	508	-2.06	-1.27	-0.06	-0.26	0.01	-0.01	-0.02	0.04	-0.25
7	AUGUSTA	509	12.17	7.28	-0.03	-0.01	0.00	-0.05	0.00	0.54	0.37
7	BIRMINGHAM	521	-2.47	-1.23	-0.07	-0.22	0.02	-0.07	-0.08	0.14	-0.49
7	CENTRAL ALABAMA VETERANS HCS	619	-1.35	-0.99	-0.10	-0.33	0.02	-0.11	-0.12	0.32	-0.64
7	CHARLESTON	534	-1.38	-1.37	0.06	0.09	-0.01	0.00	0.00	-0.11	0.01
7	COLUMBIA SC	544	0.56	0.64	0.00	0.02	-0.04	-0.07	-0.06	0.34	-0.13
7	DUBLIN	557	6.32	0.44	-0.02	-0.28	-0.03	0.03	0.05	0.29	0.26
7	TUSCALOOSA	679		-0.72	-0.16	-0.50	-0.01	-0.23	-0.17	1.47	-0.91
8	BAY PINES	516	-3.91	-2.27	-0.11	-0.51	0.02	0.04	-0.01	-0.23	-0.35
8	MIAMI	546	-2.64	-1.03	0.00	-0.05	0.00	0.05	0.01	-0.29	-0.01
8	NO. FLORIDA/SO. GEORGIA VETERANS HS	573	-2.14	-1.22	-0.01	-0.27	-0.02	0.01	-0.02	-0.30	-0.14
8	SAN JUAN	672	-5.47	-1.04	0.30	0.55	-0.10	-0.15	-0.09	0.72	-0.04
8	TAMPA	673	-2.07	-1.07	0.01	-0.22		0.01	-0.01	-0.26	-0.12
8	W PALM BEACH	548	-1.83	-0.93	0.03	0.01	-0.01	-0.02	-0.03	-0.11	-0.12
9	HUNTINGTON	581	-4.30	-3.01	-0.16	-0.59	0.08	-0.21	-0.23	0.20	-1.34
9	LEXINGTON	596	1.36	-0.24	-0.08	-0.10	0.01	0.13	0.04	-0.51	0.18
9	LOUISVILLE	603	-4.48	-3.24	-0.05	-0.43	-0.04	-0.11	-0.12	0.01	-0.66
9	MEMPHIS	614	-4.42	-2.34	-0.10	-0.33	-0.02	0.04	0.00	-0.39	-0.24
9	MIDDLE TENNESSEE HCS	626	-4.17	-3.09	-0.09	-0.49	0.03	-0.01	-0.04	-0.29	-0.51
9	MOUNTAIN HOME	621	-2.37	-1.08	-0.10	-0.20	0.00	-0.11	-0.10	0.06	-0.57
10	CHILLICOTHE	538	0.84	-0.11	-0.04	-0.42	-0.03	-0.03	-0.05	0.08	-0.20
10	CINCINNATI	539	3.06	2.93	-0.02	0.11	0.04	-0.01	0.00	0.29	0.08
10	CLEVELAND	541	1.73	0.36	0.02	0.16	-0.02	-0.06	-0.02	0.43	0.00
10	COLUMBUS	757	-0.28	-0.42	0.01	-0.02	-0.02	0.01	0.00	0.00	0.03
10	DAYTON	552	5.94	2.56	-0.09	-0.15	0.01	-0.07	-0.07	0.48	-0.16
11	ALLEN PARK	553	21.72	25.45	-0.02	0.04	0.13	0.21	0.07	-0.71	1.45
11	ANN ARBOR HCS	506	3.58	1.72	-0.01	0.09	-0.03	-0.04	-0.01	0.37	0.11
11	BATTLE CREEK	515	1.85	0.95	-0.08	-0.17	0.01	-0.18	-0.09	0.89	-0.50
11	ILLIANA HCS	550	-1.61	-1.23	-0.06	-0.18	0.03	0.02	-0.01	-0.30	-0.21
11	INDIANAPOLIS	583	3.51	3.15	0.03	0.21	-0.04	-0.04	-0.03	0.56	0.19
11	NORTHERN INDIANA HCS	610	0.33	0.35	0.05	0.12	0.02	-0.03	-0.02	0.19	-0.04
11	SAGINAW	655	-0.92		-0.03	-0.12	0.00	-0.04	-0.06	0.23	-0.25

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2002, among patients with PTSD (ICD-9 code 309.81), by Station, for patient characteristics, distance of residence from VA, diagnosis, etc.).

VISN	Station	Code	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
Median: VAMC			16.26	8.28	2.59	3.99	0.12	0.50	0.81	3.23	
VA National Avg.			14.02	10.92	2.59	4.06	0.13	0.59	0.81	2.61	
12	CHICAGO HCS	537	8.21	5.74	0.04	0.26	0.01	0.04	0.04	0.20	0.54
12	HINES	578	6.07	2.80	0.06	0.14	-0.02	0.09	0.06	-0.14	0.57
12	IRON MOUNTAIN	585	4.01	0.93	-0.07	0.05	0.00	-0.01		0.16	0.06
12	MADISON	607	-1.53	-1.56	0.07	0.00	-0.01	0.02	-0.02	-0.08	-0.03
12	MILWAUKEE	695	3.30	3.17	0.11	0.33	-0.02	0.07	0.05	-0.21	0.56
12	NORTH CHICAGO	556	5.57	2.96	0.01	0.08	0.02	0.00	0.00	0.50	0.20
12	TOMAH	676	6.67	3.21	0.05	0.10	-0.02	-0.09	-0.07	0.64	0.07
15	COLUMBIA MO	543	-0.17	-1.41	-0.07	-0.29	-0.01	-0.04	-0.04	0.25	-0.29
15	EASTERN KANSAS HCS	677	9.10	6.72	0.05	0.23	-0.02	-0.01	0.02	0.25	0.53
15	HEARTLAND-EAST HCS	657	3.31	2.82	-0.03	0.08	0.01	0.07	0.01	-0.07	0.26
15	HEARTLAND-WEST HCS	589	-0.21	0.38	0.04	0.14	0.03	0.07	0.03	-0.29	0.17
15	MARION IL	609	-2.63	-2.07	0.07		-0.01	-0.11	-0.10	0.14	-0.41
15	POPLAR BLUFF	647	-2.60	-1.69	0.08	0.05	-0.05	-0.06	-0.04	-0.18	-0.12
15	WICHITA	452	1.11	1.69	0.09	0.19	-0.03	-0.03	-0.01	0.28	0.17
16	ALEXANDRIA	502	-2.56	-0.72	-0.03	-0.04	0.03	0.00	-0.06	-0.04	-0.28
16	CENTRAL ARKANSAS VETERANS HCS	598	-1.88	-0.63	-0.06	-0.47	-0.01	-0.21	-0.22	0.63	-0.94
16	FAYETTEVILLE AR	564	-3.58	-2.54	-0.19	-0.55	-0.02	-0.10	-0.12	-0.08	-0.77
16	GULF COAST HCS	520	-3.10	-1.94	-0.11	-0.54	0.00	-0.06	-0.08	-0.15	-0.56
16	HOUSTON	580	0.82	0.17	-0.09	-0.33	-0.01	0.02	-0.02	-0.07	-0.11
16	JACKSON	586	-5.89	-3.45	0.11	0.07	-0.06	0.05	0.00	-0.37	0.03
16	MUSKOGEE	623	-4.44	-2.74	-0.03	-0.32	0.02	-0.06	-0.10	-0.16	-0.60
16	NEW ORLEANS	629	-1.29	0.41	0.08	0.30	0.00	-0.02	0.00	0.00	0.05
16	OKLAHOMA CITY	635	10.39	3.16	-0.11	-0.23	0.06	0.03	0.02	0.19	0.17
16	SHREVEPORT	667	-1.45	-0.50	-0.17	-0.41	0.06	-0.03	-0.04	-0.04	-0.49
17	CENTRAL TEXAS VETERANS HCS	674	-0.74	0.58	0.04	0.18	-0.01	-0.01	-0.01	-0.02	0.04
17	NORTH TEXAS HCS	549	-0.38	0.25	-0.02	-0.07	0.02	-0.02	-0.03	-0.03	-0.16
17	SOUTH TEXAS VETERANS HCS	671	-2.21	-1.11	-0.06	-0.35	0.02	0.05	0.01	-0.34	-0.14
18	AMARILLO	504	-3.79	-2.66	-0.22	-0.76	0.02	-0.07	-0.11	-0.20	-0.84
18	EL PASO HCS	756	-1.44	0.50	0.03	0.12	-0.02	0.07	0.03	-0.50	0.22
18	NEW MEXICO HCS	501	-3.94	-1.34	0.00	-0.04	0.03	-0.04	-0.04	0.19	-0.35
18	NORTHERN ARIZONA HCS	649	-0.37	-0.30	0.04	-0.11	0.03	0.13	0.07	-0.40	0.27
18	PHOENIX	644	-2.75	-1.71	-0.04	-0.18	0.01	-0.07	-0.05	0.02	-0.41
18	SOUTHERN ARIZONA	678	-4.29	-1.59	-0.01	-0.14	0.01	-0.06	-0.08	0.16	-0.45
18	WEST TEXAS HCS	519	-4.89	-3.39	-0.27	-0.81	0.09	-0.03	-0.08	-0.37	-0.95
19	CHEYENNE	442	-1.11	-0.26	0.06	0.08	0.05	0.09	0.04	-0.38	0.15
19	DENVER	554	0.69	1.11	0.03	0.21	0.02	-0.01	0.01	0.09	0.09
19	GRAND JUNCTION	575	-0.65	-0.05	-0.13	-0.31	0.02	-0.08	-0.08	0.03	-0.49
19	MONTANA HCS	436	-0.32	0.01	-0.07	0.00	0.11	0.05	-0.05	-0.35	-0.28
19	SALT LAKE CITY HCS	660	0.43	1.08	0.04	-0.02	0.00	0.00	0.01	0.01	0.07
19	SHERIDAN	666	-1.07	0.29	-0.02	0.28	0.05	-0.13	-0.12	0.63	-0.47

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2002, among patients with PTSD (ICD-9 code 309.81), by Station, for patient characteristics, distance of residence from VA, diagnosis, etc.).

VISN	Station	Code	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
Median: VAMC			16.26	8.28	2.59	3.99	0.12	0.50	0.81	3.23	
VA National Avg.			14.02	10.92	2.59	4.06	0.13	0.59	0.81	2.61	
20	ALASKA HCS & RO	463	31.87	30.55	0.84	4.00	-0.14	0.14	0.28	0.99	4.10
20	BOISE	531	-2.93	-0.90	-0.01	0.04	-0.02	0.12	0.05	-0.59	0.22
20	PORTLAND	648	-2.91	-0.94	0.09	0.13	-0.02	0.16	0.08	-0.78	0.44
20	PUGET SOUND HCS	663	0.44	1.06	0.06	0.20	0.00	0.05	0.03	-0.11	0.25
20	ROSEBURG HCS	653	-0.21	0.84	0.07	0.15	-0.01	0.09	0.05	-0.34	0.35
20	SPOKANE	668	-2.96	-1.12	-0.10	-0.35	0.05	0.09	0.04	-0.58	-0.12
20	WALLA WALLA	687	-4.45	-2.48	-0.07	-0.36	0.02	0.06	-0.01	-0.36	-0.29
20	WHITE CITY	692	2.50	3.20	0.07	0.33	-0.03	0.07	0.05	0.06	0.52
21	CENTRAL CALIFORNIA HCS	570	5.68	0.84	0.00	-0.29	0.01	0.10	0.04	-0.53	0.31
21	HONOLULU	459	36.50	33.91	0.93	4.37	-0.17	0.18	0.33	1.20	4.68
21	MANILA	358	-3.94	-5.03	-1.55	-2.92	0.88	-0.47	-0.47	0.96	-5.15
21	NORTHERN CALIFORNIA HCS	612	-3.10	-2.01	-0.08	-0.34	0.04	0.05	-0.01	-0.43	-0.28
21	PALO ALTO HCS	640	-1.06	0.63	0.04	0.21	-0.01	0.00	0.01	-0.07	0.09
21	SAN FRANCISCO	662	3.23	2.81	0.03	0.14	0.02	0.08	0.05	-0.14	0.40
21	SIERRA NEVADA HCS	654	-3.25	-0.19	-0.03	0.12	0.02	-0.01	-0.04		-0.20
22	GREATER LOS ANGELES HCS	691	6.99	5.45	0.03	0.12	0.00	0.10	0.06	0.01	0.61
22	LOMA LINDA	605	-0.97	-0.01	0.04	-0.12	0.01	0.06	0.02	-0.16	0.08
22	LONG BEACH HCS	600	0.31	0.83	-0.05	-0.16	0.03	0.05	0.01	0.01	-0.01
22	SAN DIEGO HCS	664	0.20	1.20	0.01	-0.02	0.02	0.01	0.00	0.13	0.03
22	SOUTHERN NEVADA HCS	593	-0.03	0.87	-0.03	-0.04	0.03	-0.03	-0.04	0.07	-0.20
23	BLACK HILLS HCS	568	13.16	5.78	0.06	0.21	-0.01	0.04	0.05	0.49	0.72
23	CENTRAL IOWA HCS	555	16.49	5.78	0.03	-0.07	-0.04	-0.10	-0.03	1.18	0.41
23	FARGO	437	0.50	-1.04	0.03	-0.22	0.00	-0.06	-0.07	0.29	-0.29
23	IOWA CITY	584	1.87	-0.19	0.05	0.05	-0.05	-0.05	-0.03	0.37	0.04
23	MINNEAPOLIS	618	2.71	-0.50	-0.02	-0.16	-0.01	-0.08	-0.06	0.51	-0.22
23	NEBRASKA-WESTERN IOWA HCS	636	3.19	1.20	0.13	0.30	-0.03	0.06	0.06	-0.18	0.52
23	SIOUX FALLS	438	1.42	0.36	0.11	0.31	-0.05	0.11	0.06	-0.26	0.54
23	ST CLOUD	656	9.72	2.71	-0.10	-0.21	-0.01	-0.16	-0.11	1.51	-0.26

X = Significantly different (p<.05) from median VISN in the undesired direction, after adjustment for differences in patient characteristics, distance of residence from VA, diagnosis, etc.

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2002, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
1	BEDFORD	380	27.92	20.89	2.73	4.71	0.10	0.49	0.81	4.29
1	BOSTON HCS	1948	16.95	13.53	2.66	4.45	0.10	0.68	0.89	2.40
1	CONNECTICUT HCS	431	10.85	9.32	2.67	4.43	0.08	0.65	0.86	2.23
1	MANCHESTER	581	12.00	10.41	2.61	4.15	0.12	0.57	0.80	2.46
1	NORTHAMPTON	780	13.49	12.06	2.59	4.21	0.13	0.62	0.81	2.38
1	PROVIDENCE	759	11.43	8.65	2.51	3.76	0.15	0.61	0.80	2.47
1	TOGUS	1104	18.56	15.04	2.71	4.58	0.12	0.66	0.87	2.78
1	WHITE RIVER JCT	551	11.16	9.82	2.65	4.28	0.11	0.66	0.85	2.42
2	ALBANY	922	16.05	12.63	2.69	4.65	0.13	0.56	0.83	3.14
2	BATH	316	17.41	13.16	2.73	4.42	0.09	0.44	0.76	3.79
2	CANANDAIGUA	439	21.96	17.39	2.69	4.57	0.12	0.51	0.81	3.55
2	SYRACUSE	512	14.18	10.54	2.67	4.30	0.09	0.59	0.83	2.70
2	WESTERN NEW YORK HCS	762	16.68	12.62	2.66	4.34	0.11	0.52	0.81	3.09
3	BRONX	471	24.55	19.38	2.77	4.89	0.10	0.65	0.89	2.71
3	HUDSON VALLEY HCS	1250	14.60	12.20	2.68	4.24	0.09	0.68	0.86	2.38
3	NEW JERSEY HCS	699	28.39	20.49	2.70	4.68	0.11	0.64	0.90	2.90
3	NEW YORK HARBOR HCS	1680	18.66	14.83	2.72	4.49	0.11	0.67	0.89	2.30
3	NORTHPORT	715	21.60	17.75	2.69	4.45	0.08	0.72	0.91	2.32
4	ALTOONA	119	14.49	10.36	2.46	3.86	0.18	0.55	0.78	3.02
4	BUTLER	731	8.02	6.78	2.59	3.66	0.08	0.63	0.81	2.13
4	CLARKSBURG	692	12.21	10.24	2.64	4.38	0.13	0.66	0.86	2.26
4	COATESVILLE	152	9.95	8.32	2.51	4.02	0.10	0.47	0.73	2.69
4	ERIE	176	11.14	9.80	2.74	4.45	0.10	0.57	0.83	2.25
4	LEBANON	437	8.55	7.56	2.62	3.95	0.12	0.64	0.83	2.05
4	PHILADELPHIA	1200	11.74	9.41	2.65	4.30	0.14	0.58	0.81	2.55
4	PITTSBURGH HCS	937	13.33	10.85	2.65	4.17	0.10	0.57	0.82	2.57
4	WILKES-BARRE	497	9.33	8.14	2.60	3.94	0.09	0.54	0.75	2.31
4	WILMINGTON	254	6.81	5.51	2.47	3.49	0.14	0.69	0.85	1.80
5	MARTINSBURG	665	21.44	16.79	2.65	4.49	0.17	0.64	0.86	2.94
5	MARYLAND HCS	554	9.56	7.82	2.48	3.58	0.13	0.76	0.88	1.90
5	WASHINGTON	934	24.54	17.13	2.60	4.34	0.17	0.50	0.80	3.48
6	ASHEVILLE	736	7.28	6.72	2.58	3.80	0.10	0.60	0.78	2.05
6	BECKLEY	413	5.30	4.81	2.53	3.57	0.08	0.67	0.85	1.81
6	DURHAM	821	7.56	6.82	2.39	3.54	0.21	0.63	0.80	2.19
6	FAYETTEVILLE NC	409	9.61	8.49	2.56	3.84	0.13	0.56	0.78	2.61
6	HAMPTON	686	17.31	14.04	2.53	4.00	0.17	0.57	0.79	2.61
6	RICHMOND	441	11.43	9.96	2.56	3.95	0.12	0.71	0.87	2.21
6	SALEM	434	10.94	8.80	2.57	3.86	0.08	0.59	0.79	2.34
6	SALISBURY	699	7.78	6.95	2.46	3.55	0.14	0.63	0.80	2.00

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2002, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
7	ATLANTA	1240	16.16	11.98	2.62	4.11	0.12	0.51	0.79	3.22
7	AUGUSTA	742	25.99	17.91	2.58	4.18	0.14	0.53	0.82	3.15
7	BIRMINGHAM	840	9.80	8.61	2.52	3.94	0.14	0.55	0.75	2.49
7	CENTRAL ALABAMA VETERANS HCS	614	10.39	8.13	2.64	4.18	0.12	0.59	0.82	2.33
7	CHARLESTON	1415	11.35	9.46	2.58	4.06	0.09	0.54	0.76	2.67
7	COLUMBIA SC	573	20.06	10.65	2.54	3.73	0.10	0.61	0.86	2.91
7	DUBLIN	857	12.24	9.45	2.48	3.71	0.16	0.47	0.69	2.94
7	TUSCALOOSA	808	16.26	11.41	2.46	3.73	0.12	0.29	0.63	4.44
8	BAY PINES	1329	10.43	8.75	2.54	3.78	0.13	0.60	0.80	2.52
8	MIAMI	790	13.56	11.33	2.65	4.25	0.12	0.61	0.83	2.52
8	NO. FLORIDA/SO. GEORGIA VETERANS HS	1357	9.75	8.24	2.58	3.83	0.11	0.60	0.80	2.17
8	SAN JUAN	467	7.32	6.60	2.63	3.74	0.08	0.70	0.87	1.96
8	TAMPA	1673	9.08	8.01	2.61	3.88	0.12	0.62	0.81	2.10
8	W PALM BEACH	784	11.06	9.10	2.64	4.13	0.11	0.57	0.78	2.43
9	HUNTINGTON	787	4.99	4.74	2.39	3.35	0.22	0.40	0.58	2.43
9	LEXINGTON	575	11.29	7.86	2.49	3.88	0.14	0.75	0.87	1.72
9	LOUISVILLE	411	6.74	5.83	2.53	3.62	0.09	0.48	0.70	2.39
9	MEMPHIS	469	9.11	7.93	2.51	3.80	0.10	0.60	0.81	2.31
9	MIDDLE TENNESSEE HCS	564	8.35	7.53	2.48	3.84	0.13	0.50	0.72	2.39
9	MOUNTAIN HOME	923	6.67	5.70	2.50	3.57	0.15	0.59	0.77	2.07
10	CHILLICOTHE	510	13.14	9.42	2.53	3.63	0.11	0.55	0.76	2.57
10	CINCINNATI	674	21.69	16.53	2.64	4.48	0.16	0.53	0.81	3.43
10	CLEVELAND	1470	19.30	13.08	2.66	4.44	0.11	0.48	0.80	3.47
10	COLUMBUS	357	13.40	10.13	2.62	4.13	0.11	0.58	0.81	2.72
10	DAYTON	485	21.40	13.93	2.51	4.02	0.15	0.50	0.75	3.24
11	ANN ARBOR HCS	303	17.41	12.49	2.64	4.38	0.10	0.55	0.82	2.91
11	BATTLE CREEK	711	15.40	11.26	2.46	3.86	0.15	0.41	0.73	3.49
11	DETROIT	438	53.65	48.60	2.63	4.52	0.27	0.70	0.88	3.23
11	ILLIANA HCS	382	9.80	7.73	2.50	3.82	0.17	0.60	0.80	2.15
11	INDIANAPOLIS	358	17.22	14.02	2.66	4.45	0.09	0.54	0.80	3.18
11	NORTHERN INDIANA HCS	345	11.86	9.34	2.63	4.16	0.14	0.55	0.79	2.66
11	SAGINAW	184	9.16	8.28	2.55	3.90	0.13	0.56	0.76	2.50
12	CHICAGO HCS	365	23.47	15.86	2.70	4.45	0.10	0.64	0.88	2.80
12	HINES	136	16.43	10.43	2.52	4.15	0.13	0.56	0.81	2.77
12	IRON MOUNTAIN	297	11.26	8.50	2.71	4.20	0.11	0.61	0.82	2.43
12	MADISON	575	18.84	14.98	2.72	4.53	0.10	0.65	0.87	2.54
12	MILWAUKEE	390	24.26	16.97	2.68	4.47	0.13	0.51	0.80	3.70
12	NORTH CHICAGO	407	19.11	12.69	2.62	4.12	0.10	0.49	0.74	3.18
12	TOMAH	829	32.70	22.88	2.72	4.77	0.13	0.54	0.85	3.82

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2002, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
15	COLUMBIA MO	782	25.03	18.48	2.68	4.47	0.09	0.55	0.83	3.11
15	EASTERN KANSAS HCS	363	11.77	7.64	2.50	3.70	0.13	0.54	0.77	2.79
15	HEARTLAND-EAST HCS	573	6.97	5.91	2.64	3.99	0.11	0.50	0.71	2.37
15	HEARTLAND-WEST HCS	441	7.14	6.28	2.64	3.99	0.08	0.55	0.78	2.07
15	MARION IL	552	13.54	11.34	2.53	4.07	0.14	0.68	0.83	2.18
15	POPLAR BLUFF	634	12.80	10.55	2.64	4.27	0.16	0.66	0.85	2.25
15	WICHITA	361	13.90	11.51	2.67	4.26	0.10	0.55	0.81	2.84
16	ALEXANDRIA	231	10.87	9.43	2.54	3.99	0.16	0.57	0.74	2.59
16	CENTRAL ARKANSAS VETERANS HCS	627	6.57	5.43	2.37	3.36	0.11	0.50	0.69	2.25
16	FAYETTEVILLE AR	1299	8.32	7.14	2.48	3.54	0.12	0.54	0.74	2.24
16	GULF COAST HCS	1075	14.84	11.05	2.53	3.87	0.11	0.59	0.80	2.59
16	HOUSTON	426	8.15	6.94	2.72	4.22	0.05	0.59	0.80	2.47
16	JACKSON	1044	12.22	10.07	2.52	3.62	0.12	0.36	0.59	3.33
16	MUSKOGEE	748	7.12	6.56	2.57	3.79	0.14	0.55	0.73	2.21
16	NEW ORLEANS	1449	15.60	12.90	2.68	4.49	0.13	0.53	0.81	2.93
16	OKLAHOMA CITY	443	24.30	13.31	2.49	3.92	0.17	0.61	0.84	2.74
16	SHREVEPORT	374	10.61	8.87	2.41	3.64	0.19	0.56	0.78	2.45
17	CENTRAL TEXAS VETERANS HCS	1418	14.27	11.23	2.59	4.10	0.14	0.55	0.78	2.70
17	NORTH TEXAS HCS	1492	8.91	7.98	2.54	3.75	0.13	0.66	0.83	1.98
17	SOUTH TEXAS VETERANS HCS	1107	11.64	10.43	2.63	4.28	0.12	0.58	0.81	2.46
18	AMARILLO	314	6.92	6.15	2.36	3.30	0.13	0.54	0.72	2.09
18	EL PASO HCS	514	11.72	10.79	2.65	4.30	0.10	0.66	0.85	2.06
18	NEW MEXICO HCS	1464	11.55	10.09	2.64	4.21	0.13	0.50	0.76	3.10
18	NORTHERN ARIZONA HCS	308	10.26	8.21	2.58	3.84	0.17	0.73	0.89	1.98
18	PHOENIX	1174	9.54	8.04	2.55	3.94	0.13	0.52	0.77	2.46
18	SOUTHERN ARIZONA	486	10.81	9.70	2.66	4.21	0.12	0.48	0.73	3.07
18	WEST TEXAS HCS	131	4.26	3.93	2.27	3.02	0.23	0.57	0.72	1.90
19	CHEYENNE	287	10.51	8.79	2.67	4.20	0.17	0.67	0.85	2.09
19	DENVER	1665	14.04	11.44	2.64	4.36	0.14	0.57	0.83	2.71
19	FORT HARRISON	133	12.01	9.45	2.52	4.08	0.23	0.65	0.78	2.30
19	GRAND JUNCTION	188	9.95	8.57	2.46	3.71	0.14	0.52	0.74	2.35
19	SALT LAKE CITY HCS	734	11.70	10.01	2.63	4.05	0.13	0.59	0.82	2.41
19	SHERIDAN	141	11.28	9.79	2.58	4.33	0.17	0.42	0.68	3.40
20	ALASKA HCS & RO	213	7.53	7.04	2.54	3.78	0.20	0.71	0.85	1.84
20	BOISE	402	9.93	9.08	2.61	4.20	0.11	0.69	0.86	2.00
20	PORTLAND	1342	10.92	9.52	2.72	4.33	0.10	0.71	0.89	1.98
20	PUGET SOUND HCS	2723	15.84	12.55	2.68	4.42	0.12	0.61	0.85	2.73
20	ROSEBURG HCS	500	10.71	9.17	2.54	3.87	0.17	0.63	0.85	2.23
20	SPOKANE	766	11.38	10.19	2.67	4.26	0.11	0.68	0.87	2.08
20	WALLA WALLA	234	7.05	6.51	2.49	3.64	0.16	0.65	0.81	2.09
20	WHITE CITY	262	12.56	11.00	2.62	4.20	0.12	0.65	0.84	2.44

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2002, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
21	CENTRAL CALIFORNIA HCS	368	20.02	11.77	2.60	3.86	0.13	0.69	0.86	2.13
21	HONOLULU	689	11.41	9.86	2.60	4.09	0.20	0.78	0.91	1.94
21	MANILA	3	2.33	2.33	1.33	1.67	1.00	1.00	1.00	1.00
21	NORTHERN CALIFORNIA HCS	1368	11.66	9.26	2.53	3.85	0.16	0.62	0.81	2.29
21	PALO ALTO HCS	1320	12.93	11.32	2.66	4.38	0.12	0.57	0.82	2.61
21	SAN FRANCISCO	923	18.71	14.41	2.65	4.35	0.14	0.66	0.88	2.58
21	SIERRA NEVADA HCS	218	13.64	12.05	2.64	4.47	0.13	0.51	0.75	3.23
22	GREATER LOS ANGELES HCS	1877	24.11	18.18	2.67	4.42	0.13	0.64	0.87	2.97
22	LOMA LINDA	602	12.70	11.04	2.61	4.20	0.15	0.55	0.77	2.62
22	LONG BEACH HCS	820	10.75	9.36	2.63	3.99	0.13	0.66	0.84	2.25
22	SAN DIEGO HCS	397	17.07	13.44	2.61	4.16	0.14	0.61	0.83	2.92
22	SOUTHERN NEVADA HCS	913	12.19	10.77	2.60	4.08	0.14	0.61	0.82	2.55
23	BLACK HILLS HCS	257	31.32	16.44	2.63	4.07	0.08	0.49	0.79	3.93
23	CENTRAL IOWA HCS	80	10.40	7.48	2.61	3.75	0.14	0.52	0.74	2.68
23	FARGO	367	30.27	17.84	2.69	4.42	0.12	0.58	0.86	3.58
23	IOWA CITY	256	13.32	9.16	2.66	4.17	0.07	0.53	0.78	2.84
23	MINNEAPOLIS	938	16.84	10.16	2.62	4.09	0.10	0.50	0.77	3.18
23	NEBRASKA-WESTERN IOWA HCS	200	12.90	9.22	2.71	4.34	0.08	0.70	0.88	2.15
23	SIOUX FALLS	653	29.55	16.53	2.63	4.30	0.08	0.31	0.67	5.07
23	ST CLOUD	532	16.64	11.54	2.74	4.46	0.09	0.64	0.88	2.43
All VA		94,922	14.28	11.22	2.60	4.11	0.13	0.58	0.81	2.63
Avg.		683	14.02	10.92	2.59	4.06	0.13	0.59	0.81	2.61
S.D.		446	6.83	4.89	0.14	0.39	0.08	0.09	0.06	0.57
C.V		0.65	0.49	0.45	0.05	0.10	0.62	0.16	0.08	0.22

Table 18. Overall PTSD Performance Score, by VISN†.

VISN	*Inpatient Summary Score Average Z: Weighted# (Table 14)*	*Outpatient Summary Score Average Z: Weighted (Table 16)*	*Summary Continuity of Outpatient Care Average Z (Table 16A)*	*Inpatient Summary Score Average Z: Weighted#*	*Total PTSD Summary Score Average Z: (+=desired)*	*Rank Order On Total PTSD Summary Score*
1	-0.67	-0.25	0.67	0.67	-0.08	13
2	0.19	-0.16	0.60	-0.19	0.21	6
3	-0.81	0.17	1.83	0.81	0.40	3
4	0.59	-0.24	-0.16	-0.59	0.06	9
5	0.60	-0.04	-0.24	-0.60	0.11	8
6	-1.05	-1.08	-0.77	1.05	-0.97	21
7	0.06	-0.03	-0.62	-0.06	-0.20	16
8	-0.24	-0.04	-0.33	0.24	-0.20	17
9	0.42	-0.24	-1.58	-0.42	-0.47	20
10	-0.36	0.53	0.02	0.36	0.06	10
11	0.49	-0.63	0.10	-0.49	-0.01	11
12	-0.12	0.68	0.94	0.12	0.50	2
15	-1.04	0.37	0.25	1.04	-0.14	14
16	0.31	-0.06	-0.95	-0.31	-0.23	18
17	-0.23	-0.69	-0.30	0.23	-0.41	19
18	1.03	-0.33	-0.86	-1.03	-0.06	12
19	0.28	0.23	-0.13	-0.28	0.13	7
20	0.61	-0.34	0.56	-0.61	0.28	5
21	-0.69	-0.05	0.15	0.69	-0.20	15
22	0.77	-0.22	0.56	-0.77	0.37	4
23	-0.14	2.43	0.32	0.14	0.87	1
AVG	0.0	0.0	0.0	0.0	0.00	
SD	0.6	0.0	0.8	0.6	0.39	

Sign is reversed so that high scores reflect difference in the desired direction -- low inpatient utilization.
† Rankings only comparable to FY 1998 report.

Table 19. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2001 to March 31, 2002, by PTSD diagnosis and program type, by VISN†.

	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
VISN	*Number of Unique Patients w PTSD Dx.*	*Reside in VISN in which treatment was delivered*	*Number of Unique Patients w. no PTSD Dx.*	*Reside in VISN in which treatment was delivered*	*Number of Unique Patients Any Dx.*	*Reside in VISN in which treatment was delivered*
1	312	96.8%	1,521	98.6%	403	99.5%
2	48	93.8%	793	97.1%	0	NA
3	97	90.7%	1,301	95.5%	0	NA
4	116	95.7%	1,383	96.3%	133	89.5%
5	82	84.1%	1,174	92.2%	343	85.4%
6	410	79.5%	2,097	96.2%	73	98.6%
7	252	96.0%	1,553	95.6%	111	94.6%
8	107	97.2%	1,844	98.2%	0	NA
9	137	92.0%	1,816	91.1%	186	94.1%
10	69	91.3%	1,289	94.9%	302	96.7%
11	58	96.6%	1,534	96.6%	254	100.0%
12	100	95.0%	1,343	97.6%	418	98.8%
15	188	83.5%	1,684	95.1%	0	NA
16	125	94.4%	2,693	95.8%	34	91.2%
17	161	96.3%	1,456	95.1%	315	95.6%
18	108	97.2%	963	97.3%	225	90.7%
19	148	84.5%	823	95.5%	0	NA
20	330	90.3%	1,135	97.3%	231	99.1%
21	64	96.9%	1,018	96.4%	214	98.6%
22	78	97.4%	1,451	96.5%	123	95.9%
23	38	97.4%	1,192	97.5%	26	100.0%
All VA	3,028	91.0%	30,063	93.0%	3,391	96.0%
Average	144	92.7%	1,432	96.0%	161	95.5%
S.D.	101	5.4%	440	1.8%	141	4.4%
C.V.	0.70	0.06	0.31	0.02	0.87	0.05

† Does not include PRRP and domiciliary care.

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2001 to March 31, 2002, by PTSD diagnosis and program type, by VAMC†.

			General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
VISN			*Number of Unique Patients w PTSD Dx.*	*Reside in VISN in which treatment was delivered*	*Number of Unique Patients w. no PTSD Dx.*	*Reside in VISN in which treatment was delivered*	*Number of Unique Patients Any Dx.*	*Reside in VISN in which treatment was delivered*
1	518	BEDFORD	3	100.0%	379	99.2%		
1	523	BOSTON HCS	28	96.4%	435	97.5%	335	99.4%
1	689	CONNECTICUT HCS	22	100.0%	175	98.9%	27	100.0%
1	631	NORTHAMPTON	199	96.5%	168	98.8%		
1	650	PROVIDENCE	14	100.0%	175	98.9%		
1	402	TOGUS	6	83.3%	89	100.0%	41	100.0%
1	405	WHITE RIVER JCT	40	97.5%	100	99.0%		
2	500	ALBANY	12	91.7%	149	94.6%		
2	532	CANANDAIGUA	3	100.0%	149	97.3%		
2	670	SYRACUSE	11	90.9%	152	99.3%		
2	528	WESTERN NEW YORK HCS	22	95.5%	343	97.1%		
3	526	BRONX	21	90.5%	192	97.4%		
3	620	HUDSON VALLEY HCS	26	88.5%	189	88.4%		
3	561	NEW JERSEY HCS	26	84.6%	298	96.3%		
3	630	NEW YORK HARBOR HCS	20	100.0%	467	95.5%		
3	632	NORTHPORT	4	100.0%	155	100.0%		
4	540	CLARKSBURG	16	93.8%	70	81.4%	2	50.0%
4	542	COATESVILLE	19	100.0%	228	97.4%		
4	595	LEBANON	9	88.9%	165	95.2%		
4	642	PHILADELPHIA	30	96.7%	307	96.7%		
4	646	PITTSBURGH HCS	37	94.6%	482	98.1%		
4	693	WILKES-BARRE	5	100.0%	131	96.2%	131	90.1%
5	613	MARTINSBURG	21	85.7%	170	91.2%	208	88.9%
5	512	MARYLAND HCS	45	80.0%	656	91.2%	135	80.0%
5	688	WASHINGTON DC	16	93.8%	348	94.8%		
6	637	ASHEVILLE	42	83.3%	103	88.3%		
6	558	DURHAM	36	100.0%	326	97.5%		
6	565	FAYETTEVILLE NC	21	100.0%	221	97.3%		
6	590	HAMPTON	113	100.0%	543	97.8%		
6	652	RICHMOND			264	96.6%	73	98.6%
6	658	SALEM	130	60.8%	257	94.2%		
6	659	SALISBURY	68	61.8%	383	95.6%		
7	508	ATLANTA	59	98.3%	339	96.2%	111	94.6%
7	509	AUGUSTA	80	96.3%	375	96.3%		
7	619	CENTRAL ALABAMA VETERANS HCS	61	91.8%	306	94.4%		
7	534	CHARLESTON	19	100.0%	199	98.5%		
7	544	COLUMBIA SC	27	96.3%	168	97.0%		
7	679	TUSCALOOSA	6	100.0%	166	90.4%		
8	516	BAY PINES	23	95.7%	366	98.4%		
8	546	MIAMI	6	83.3%	101	98.0%		
8	573	NO. FLORIDA/SO. GEORGIA VETERANS HS	18	94.4%	403	95.8%		
8	672	SAN JUAN	17	100.0%	283	100.0%		
8	673	TAMPA	13	100.0%	382	99.0%		
8	548	W PALM BEACH	30	100.0%	309	98.7%		
9	596	LEXINGTON	6	100.0%	236	94.1%		
9	603	LOUISVILLE	7	100.0%	283	96.8%		
9	614	MEMPHIS	43	88.4%	222	93.7%	184	94.0%
9	622	MIDDLE TENNESSEE HCS	48	93.8%	764	88.1%	2	100.0%
9	621	MOUNTAIN HOME	33	90.9%	311	89.1%		
10	538	CHILLICOTHE	22	81.8%	389	92.3%		
10	539	CINCINNATI	13	92.3%	157	95.5%	67	94.0%
10	541	CLEVELAND	18	94.4%	480	95.2%	128	97.7%
10	552	DAYTON	16	100.0%	263	97.7%	107	97.2%

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2001 to March 31, 2002, by PTSD diagnosis and program type, by VAMC†.

			General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
VISN			*Number of Unique Patients w PTSD Dx.*	*Reside in VISN in which treatment was delivered*	*Number of Unique Patients w. no PTSD Dx.*	*Reside in VISN in which treatment was delivered*	*Number of Unique Patients Any Dx.*	*Reside in VISN in which treatment was delivered*
11	553	ALLEN PARK	10	100.0%	298	99.7%	254	100.0%
11	506	ANN ARBOR HCS	5	100.0%	192	99.0%		
11	515	BATTLE CREEK	32	96.9%	572	98.6%		
11	550	ILLIANA HCS	3	66.7%	170	87.1%		
11	583	INDIANAPOLIS	4	100.0%	136	94.9%		
11	610	NORTHERN INDIANA HCS	4	100.0%	166	92.8%		
12	537	CHICAGO HCS	40	100.0%	448	98.4%		
12	578	HINES	8	100.0%	245	98.4%	246	98.8%
12	607	MADISON	10	100.0%	139	97.1%		
12	695	MILWAUKEE	23	95.7%	227	98.7%	172	98.8%
12	556	NORTH CHICAGO	11	90.9%	205	96.1%		
12	676	TOMAH	8	62.5%	79	92.4%		
15	543	COLUMBIA MO	13	100.0%	120	92.5%		
15	677	EASTERN KANSAS HCS	103	70.9%	531	94.5%		
15	657	HEARTLAND-EAST HCS	63	98.4%	658	97.3%		
15	589	HEARTLAND-WEST HCS	9	100.0%	375	92.8%		
16	502	ALEXANDRIA	14	100.0%	227	99.1%		
16	598	CENTRAL ARKANSAS VETERANS HCS	39	89.7%	400	94.5%		
16	564	FAYETTEVILLE AR	11	100.0%	155	96.8%		
16	520	GULF COAST HCS	3	100.0%	392	92.9%		
16	580	HOUSTON	20	100.0%	448	95.8%	34	91.2%
16	586	JACKSON	14	78.6%	219	94.1%		
16	629	NEW ORLEANS	8	100.0%	218	98.6%		
16	635	OKLAHOMA CITY	13	100.0%	371	97.6%		
16	667	SHREVEPORT	3	100.0%	263	95.8%		
17	674	CENTRAL TEXAS VETERANS HCS	57	94.7%	488	93.9%		
17	549	NORTH TEXAS HCS	37	94.6%	473	93.4%		
17	671	SOUTH TEXAS VETERANS HCS	67	98.5%	495	97.8%	315	95.6%
18	501	NEW MEXICO HCS	21	100.0%	235	98.3%		
18	644	PHOENIX	31	100.0%	485	97.3%		
18	678	SOUTHERN ARIZONA	51	96.1%	178	97.2%	125	96.0%
18	519	WEST TEXAS HCS	5	80.0%	65	93.8%	100	84.0%
19	554	DENVER	92	79.3%	288	97.6%		
19	575	GRAND JUNCTION	12	91.7%	86	95.3%		
19	436	MONTANA HCS	2	100.0%	44	97.7%		
19	660	SALT LAKE CITY HCS	25	92.0%	234	96.2%		
19	666	SHERIDAN	17	94.1%	171	90.6%		
20	531	BOISE	34	82.4%	110	97.3%		
20	648	PORTLAND	17	100.0%	254	98.0%		
20	663	PUGET SOUND HCS	160	97.5%	478	98.7%	200	99.0%
20	653	ROSEBURG HCS	101	78.2%	183	92.3%		
20	668	SPOKANE	12	100.0%	80	96.3%		
20	687	WALLA WALLA	6	100.0%	30	100.0%	31	100.0%
21	570	CENTRAL CALIFORNIA HCS	6	100.0%	107	92.5%	33	97.0%
21	459	HONOLULU	11	100.0%	119	98.3%		
21	640	PALO ALTO HCS	28	92.9%	463	98.1%	181	98.9%
21	662	SAN FRANCISCO	5	100.0%	118	94.1%		
21	654	SIERRA NEVADA HCS	14	100.0%	211	94.8%		
22	691	GREATER LOS ANGELES HCS	35	100.0%	560	95.5%		
22	605	LOMA LINDA	9	100.0%	246	99.2%		
22	600	LONG BEACH HCS	9	100.0%	212	98.6%		
22	664	SAN DIEGO HCS	13	92.3%	266	97.0%	123	95.9%
22	593	SOUTHERN NEVADA HCS	12	91.7%	167	92.2%		

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2001 to March 31, 2002, by PTSD diagnosis and program type, by VAMC†.

			General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
VISN			*Number of Unique Patients w PTSD Dx.*	*Reside in VISN in which treatment was delivered*	*Number of Unique Patients w. no PTSD Dx.*	*Reside in VISN in which treatment was delivered*	*Number of Unique Patients Any Dx.*	*Reside in VISN in which treatment was delivered*
23	568	BLACK HILLS HCS	7	100.0%	102	94.1%		
23	555	CENTRAL IOWA HCS	7	100.0%	134	97.0%		
23	437	FARGO	1	100.0%	110	100.0%		
23	584	IOWA CITY	4	100.0%	151	96.0%		
23	618	MINNEAPOLIS	5	100.0%	234	99.1%		
23	636	NEBRASKA-WESTERN IOWA HCS	6	83.3%	140	97.1%	26	100.0%
23	438	SIOUX FALLS	1	100.0%	89	100.0%		
23	656	ST CLOUD	7	100.0%	232	96.6%		
ALL VA			3028	91.1%	30063	96.0%	3391	95.7%
AVG			27	94.2%	264	96.0%	126	94.1%
SD			32	8.8%	149	3.2%	93	10.2%
CV			1.20	0.09	0.56	0.03	0.74	0.11

† Does not include PRRP and domiciliary care.

PART II: TREATMENT OF VETERANS BY SPECIALIZED PTSD OUTPATIENT TEAMS

Part II presents data on the clinical operation of the PTSD Clinical Team (PCT), Substance Use PTSD Team (SUPT) and Women's Stress Disorder Treatment Team (WSDTT) programs for FY 2002. The data presented in this chapter are derived from PTSD Status Forms (PSFs) that are completed by staff members for each veteran newly admitted to treatment by their specialized programs within FY 2002. A "newly admitted" veteran is defined as one who has not been in treatment with the particular specialized program in the past 12 months before this admission. This means that only one PSF per veteran per program within any 12-month period is kept in the dataset. "Treatment" is defined as more than one visit to the program for this episode of therapy. 1

Throughout the presentation, variables assessing key aspects of the programs' specialized mission are designated as critical monitors. Other variables that are descriptive of the veteran population being served are presented to provide a more extensive picture. The data are evaluated at both the program and the VISN level. Programs that deviate by more than one standard deviation from the average for all programs are identified as outliers. In addition to comparing each individual program to the other programs, each VISN is compared to other VISNs.

Comprehensive Evaluation and Monitoring Procedures

VA's Northeast Program Evaluation Center (NEPEC), the Evaluation Division of the National Center for PTSD, monitors and evaluates the administrative and clinical operation of all of the specialized programs for PTSD. The patient-specific data presented in this section of the report were collected by clinicians whose primary responsibility was delivering clinical care rather than collecting data. Although some variation in administration and reporting is to be expected, several procedures were instituted to minimize this variation:

a. *Manuals.* Detailed manuals were written describing the correct manner of administration of the questionnaire, the conventions for coding responses to ambiguous questions, and the recommended solutions to other common problems in data collection.

b. *Individualized Training*. Each program designates two staff persons to serve as the local director and data manager of the monitoring protocol. Individualized training is given over the telephone to these staff persons for each new program that is added to the national network and to each new staff member of an existing program who has been designated as director or data manager.

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1 In Part III, data are presented for "New vets treated" as determined from the Stop Code data. "New vets treated" in Part III is defined as those veterans who have more than one visit recorded in the Austin Outpatient File within FY 2002 but no visits during the previous fiscal year. It should be noted that the definition of "new vets treated" in Part III is more stringent than the definition of "newly admitted" veterans in Part II. The definition of "treated" remains the same, that is, seen more than once.

c. *Data Reporting and Management*. Data managers enter the data that have been collected by clinicians electronically into the National Mental Health Data Base located at the Pittsburgh VA Medical Center at Highland Drive. Each month, NEPEC downloads these data from Pittsburgh and appends them to a master file. The new data are reviewed at NEPEC for errors and inconsistencies. When problems are identified, they are corrected through telephone calls or letters to the programs.

d. *Contact with the programs*. Feedback on the progress of data collection and discussion of systematic changes in the conduct of the evaluation take place during monthly conference calls in which all programs are invited to participate. Tables summarizing monthly data by program are distributed by mail and displayed on the VA Intranet.

Rationale of the Monitoring Protocol

Specialized treatment of PTSD is a relatively new clinical activity, requiring considerable freedom for clinical innovation. Evaluation efforts are based on the assumption that rigid regulations or performance standards are not appropriate for the programs in their current stages of development, and that premature standardization might stifle the creative evolution of new interventions or combinations of existing interventions that would prove to be particularly efficacious. At the same time, it is important to evaluate the programs as completely and objectively as possible.

Although absolute practice standards have not been established for the treatment of PTSD, statistical norms can be derived from the distribution of data across the individual programs. The distinction between statistical norms and formal practice standards is an important one. Practice standards are established by a consensus of professionals and codify how health care should be conducted. Statistical norms, in contrast, reflect how health care is practiced on average, without specifying exactly what is and what is not acceptable practice. Practice variation can be measured and statistical outliers can be identified. The identification of statistical outliers must not be confused with the identification of practice standard violations. Statistical outliers are extremes on a continuum and, as such, deserve attention. However, without further exploration of specific circumstances, no conclusions can be drawn regarding their exact meaning.

Monitoring Instrument

A three-page PTSD Status Form (PSF) is used to monitor the most salient characteristics of the veterans being treated by the outpatient specialized PTSD programs. The PSF includes the principal demographic, military, social adjustment, and diagnostic information from the War Stress Interview - Part 1 (WSI-1). The WSI-1 was one of the primary instruments that were used in earlier, more intensive studies of the implementation and outcomes of the specialized

outpatient PTSD programs. The PSF was revised a few years ago by the addition of two questions of special interest to VA leadership: evaluation of PTSD due to military sexual trauma and evaluation of PTSD due to military noncombat nonsexual trauma.

Critical Monitors for Outpatient Programs

Through the selection of critical monitors, we have sought to highlight those features of the operation of the programs that are most relevant to their specialized mission. Eight of the evaluation measures were selected as critical monitors for outpatient programs. The first five are characteristics of the population being served: war zone service, clinical diagnosis of PTSD, diagnosis of substance abuse, prior psychiatric treatment of any type, and prior specialized PTSD treatment in particular. Three critical monitors concern the performance of program staff: validation of war zone service by the DD214, number of veterans evaluated per FTEE, and the proportion of new veterans treated who were enrolled in the monitoring protocol. The directionality of these monitors that is in accordance with the programs' mission is ***high*** percentages of war zone service, diagnoses of PTSD and substance abuse, validation of war zone service by the DD214, number of veterans monitored per FTEE, and proportion of veterans who were seen who were monitored. ***Low*** percentages of veterans who had prior specialized PTSD treatment or psychiatric treatment of any type are in accordance with the programs' defined mission.

It must, once again, be emphasized that these monitors should not necessarily be considered, by themselves, to be indicators of the appropriateness of the administrative or clinical operation of particular programs. They can properly be used only to identify statistical outliers, the importance of which must be determined by follow-up discussions with the programs. Since any modification of administrative and/or clinical practices must take place at the level of the individual program, it is essential that an evaluation examine the data at both this level as well as at the VISN level.

Comparison of VISNs and Individual Programs on Critical Monitors

Outlier performance is indicated by any value that is 1 standard deviation from the mean of all VISNs or of all specialized programs, and is marked by a boxed cell. Outlier status for the VISNs as a whole is presented in Tables 2-1, 2-3 and 2-5. The particular individual programs contributing most prominently to the VISNs' outlier status are identified in Tables 2-2, 2-4 and 2-6. Table 2-7 summarizes the number of critical monitors that are outliers for each VISN. The WSDTTs were not included in the calculation of outliers on the critical monitor War Zone Service, because until recently women did not typically serve in war zones.

VISNs 20 and 23 are outliers in veterans' ***war zone service***. The particular programs contributing most to the outlier status in these VISNs are the Boise PCT and the Portland PCT within VISN 20, and the Black Hills HCS (Fort Meade) SUPT, the Nebraska-Western IA HCS (Lincoln) PCT and the Sioux Falls PCT within VISN 23. Other individual programs which are outliers are the Maryland HCS PCTs at Baltimore and Perry Point within VISN 5; the No.FL/So. GA Veterans HCS (Gainesville) PCT within VISN 8; the Northern Indiana HCS (Fort Wayne) PCT within VISN 11; the New Mexico HCS (Albuquerque) PCT in VISN 18; the Cheyenne

PCT in VISN 19; and the Greater Los Angeles HCS (West LA) PCT within VISN 22. The percentage of veterans who have served in a war zone is lower in these VISNs and individual programs than in other VISNs and programs.

VISNs 8, 11 and 23 are outliers in ***PTSD clinical diagnosis***. The particular programs contributing most to the outlier status in these VISNs are the Tampa PCT within VISN 8; the Ann Arbor PCT within VISN 11; and the Black Hills HCS (Fort Meade) SUPT and the Minneapolis PCT within VISN 23. Individual programs which are outliers in other VISNs are the Boston WSDTT in VISN 1; the Pittsburgh HCS (Highland Drive) PCT within VISN 4; the Maryland HCS PCT at Perry Point within VISN 5; the Madison WSDTT in VISN 12; the Wichita PCT within VISN 15; the Gulf Coast Veterans HCS (Biloxi) PCT, the Houston PCT, New Orleans WSDTT and the Oklahoma City PCT within VISN 16; the Central TX Veterans HCS (Waco) PCT within VISN 17; the Boise PCT within VISN 20; and the Greater Los Angeles HCS (West LA) PCT and the Loma Linda WSDTT within VISN 22. The percentage of veterans who have a clinical diagnosis of PTSD is lower in these VISNs and individual programs than in others.

VISNs 2, 6, 10 and 19 are outliers in ***substance abuse diagnosis***. Within these VISNs the particular programs contributing most to the outlier status are the Durham PCT and the Fayetteville NC PCT within VISN 6; the Chillicothe and the Columbus PCTs in VISN 10; and the Southern Colorado HCS (Pueblo) PCT within VISN 19. Within VISN 2 no individual program was an outlier, but all programs were below the mean percentage of veterans diagnosed with a substance abuse disorder. Other individual programs which are outliers include the Manchester PCT within VISN 1; the San Juan PCT within VISN 8; the Lexington PCT within VISN 9; Poplar Bluff and the St. Louis PCTs within VISN 15; the Jackson PCT and the New Orleans PCT and WSDTT within VISN 16; and the Loma Linda WSDTT and the Southern Nevada HCS (Las Vegas) PCT within VISN 22. The percentage of veterans who are diagnosed with a substance abuse disorder is lower in these VISNs and individual programs than in others.

VISNs 3 and 18 are outliers in ***validation of war zone service by DD214***. Within these VISNs the particular programs contributing most to the outlier status are the Hudson Valley HCS (Castle Point) PCT, the New Jersey HCS (East Orange) PCT and the New York Harbor HCS (Brooklyn) PCT in VISN 3; and the Southern Arizona HCS (Tucson) PCT within VISN 18.

In addition, other programs which are outliers are the White River Junction PCT within VISN 1; the Augusta and Charleston PCTs within VISN 7; the San Juan and Tampa PCTs within VISN 8; the Northern Indiana HCS (Fort Wayne) PCT within VISN 11; the Madison WSDTT in VISN 12; the New Orleans PCT within VISN 16; the Central Texas Veterans HCS (Austin) and (Temple) PCTs within VISN 17; the Cheyenne PCT within VISN 19; the Puget Sound HCS (Seattle) PCT within VISN 20; and the Sioux Falls PCT within VISN 23. The percentage of veterans admitted to treatment without having their war zone service verified by reference to the DD214 or similar military records is lower in these VISNs and individual programs than it is in others.

VISNs 12 and 22 are outliers in admitting higher percentages of veterans who have had ***prior psychiatric treatment***. There were no individual programs in VISNs 12 or 22 that were outliers, but all of the programs in VISN 12 and five of six programs in VISN 22 were above the mean percentage for programs. In addition, other individual programs which are outliers include the Boston HCS (Boston) WSDTT and the Connecticut HCS (West Haven) SUPT within VISN 1; the Coatesville PCT and the Pittsburgh HCS (Highland Drive) SUPT in VISN 4; the Fayetteville NC PCT in VISN 6; the San Juan PCT in VISN 8; the Huntington PCT and the Memphis PCT in VISN 9; the Brecksville WSDTT within VISN 10; the Eastern Kansas (Topeka) PCT in VISN 15; the Central Arkansas Veterans HCS (No. Little Rock) PCT and the New Orleans WSDTT within VISN 16; the San Francisco SUPT in VISN 21; and the Central Iowa HCS (Knoxville) PCT within VISN 23. The percentage of veterans who have had prior psychiatric treatment was higher in these VISNs and individual programs than in others.

VISNs 16, 19 and 20 are outliers in admitting veterans who have had ***prior specialized PTSD treatment***. The particular programs contributing most to the outlier status of these VISNs are the Central Arkansas Veterans HCS (No. Little Rock) PCT, the Jackson PCT and the New Orleans WSDTT within VISN 16; the Cheyenne PCT and the Grand Junction PCT within VISN 19; and the Boise PCT within VISN 20 were outliers. Outlier programs within other VISNs include the Boston HCS (Boston) WSDTT and the Connecticut HCS (West Haven) SUPT within VISN 1; the Hudson Valley HCS (Castle Point) PCT within VISN 3; the Coatesville PCT within VISN 4; the Brecksville WSDTT within VISN 10; the Chicago HCS (West Side) PCT within VISN 12; the San Francisco SUPT within VISN 21; and the Central Iowa HCS (Knoxville) PCT within VISN 23. The percentage of veterans who have had prior specialized PTSD treatment was higher in these VISNs and individual programs than in others.

The number of critical monitors that were outliers is tabulated for each VISN in Table 2-7. Adjustment for the different number of programs across the VISNs was made by calculating the mean number of outliers for each VISN. VISNs that are outliers for the outliers themselves are VISN 8, VISN 16 and VISN 19. The mean number of outliers was higher in these VISNs than in others.

Description of Veterans' Other Characteristics

Several other veterans' characteristics are presented for descriptive purposes in Tables 2-5, 2-8, 2-10, 2-12, 2-14, 2-16, 2-18 and 2-20 for the VISNs and Tables 2-6, 2-9, 2-11, 2-13, 2-15, 2-17, 2-19 and 2-21 for individual programs. These characteristics have not been designated as critical monitors because they have not been considered critical for evaluating the operation of the programs with regard to carrying out the mission of specialized PTSD programs. Further, outliers have not been identified because it is often not possible to define one tail of the distribution as more or less desirable than the other tail. A description of the population being served by the programs can be summarized at the VISN level as follows.

Veterans averaged 54.6 years of age (sd=1.4). Eighty-nine percent (sd=3%) had a high school education or more, and 69% (sd=4%) were not working currently. Nineteen percent (sd=6%) reported difficulty controlling violent behavior. Ninety-four percent (sd=6%) were

male; and currently 55% (sd=6%) were married, 34% (sd=4%) were separated or divorced, and 8% (sd=3%) had never been married. Sixty-six percent (sd=16%) were Caucasian, 23% (sd=17%) African-American, 8% (sd=10%) Hispanic and 3% (sd=2%) were of other racial/ethnic background.

Six percent (sd=3%) served during the World War II era, 4% (sd=1%) during the Korean War era, 75% (sd=5%) during the Vietnam War era, and 9% (sd=2%) during the Persian Gulf War era. Eighty-one percent (sd=6%) were exposed to enemy/friendly fire; 7% (sd=2%) participated in atrocities; and 3% (sd=2%) were prisoners of war. Fifty-six percent (sd=5%) of the veterans were service connected.

At the time of admission to the programs, 67% (sd=10%) of the veterans were already prescribed psychotropic medications; 45% (sd=9%) were diagnosed with an Axis I nonpsychotic disorder other than PTSD; 7% (sd=2%) were diagnosed with an Axis I psychotic disorder; and 8% (sd=5%) were diagnosed with an Axis II personality disorder. Seventy-six percent (sd=12%) were referred by another VAMC program; 5% (sd=2%) were referred from a Vet Center; 15% (sd=10%) were self-referred; and 4% (sd=5%) were referred from other sources. Seventy-eight percent (sd=5%) of the veterans reported having a chronic medical problem which interfered with their lives; 15% (sd=4%) reported having been incarcerated for more than two weeks over their lifetime; 7% (sd=7%) were evaluated for PTSD due to sexual trauma which occurred during active military duty, and 9% (sd=4%) were evaluated for PTSD due to noncombat nonsexual trauma incurred in the course of military duties.

Table 2-1. War Zone Service and Clinical Diagnosis Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2002.

VISN	N	War Zone Service*	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation By DD214
1	627	76%	81%	90%	42%	56%
2	221	89%	88%	93%	24%	84%
3	652	90%	86%	91%	37%	28%
4	247	86%	84%	93%	44%	62%
5	294	87%	82%	93%	30%	67%
6	624	90%	91%	95%	26%	81%
7	734	92%	90%	96%	37%	57%
8	607	85%	72%	88%	42%	77%
9	432	92%	93%	98%	47%	90%
10	674	87%	93%	96%	26%	79%
11	335	90%	72%	85%	45%	80%
12	218	72%	87%	95%	59%	62%
15	517	89%	81%	89%	32%	64%
16	1,292	90%	82%	86%	33%	70%
17	1,091	87%	82%	91%	42%	59%
18	919	81%	89%	95%	31%	52%
19	387	87%	91%	93%	24%	85%
20	936	77%	81%	88%	49%	72%
21	410	91%	90%	96%	36%	64%
22	986	80%	83%	92%	30%	74%
23	741	78%	70%	82%	38%	82%
TOTAL	12,944					
MEAN	616	85%	84%	92%	37%	69%
S.D	302	6%	7%	4%	9%	14%

Boxed cell indicates an outlier in the undesirable direction.

*Data for WSDTTs were not included in the formulas to determine the mean and standard deviation for War Zone Service. WSDTTs were not counted as outliers for this monitor.

Table 2-2. War Zone Service and Clinical Diagnosis Among Veterans
in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	War Zone Service*	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation by DD214
1	BOSTON HCS: Boston	PCT	85	82%	73%	85%	42%	46%
1	BOSTON HCS: Boston	WSDTT	67	18%	55%	63%	35%	58%
1	BOSTON HCS: Brockton	PCT	60	93%	93%	93%	58%	60%
1	BOSTON HCS: Brockton	SUPT	42	98%	98%	100%	50%	98%
1	CONNECTICUT HCS: West Haven	PCT	93	77%	73%	84%	26%	47%
1	CONNECTICUT HCS: West Haven	SUPT	44	84%	77%	100%	93%	43%
1	MANCHESTER	PCT	49	78%	94%	100%	10%	80%
1	PROVIDENCE	PCT	139	78%	88%	96%	50%	56%
1	WHITE RIVER JUNCTION	PCT	48	83%	90%	98%	17%	33%
2	CANANDAIGUA	PCT	78	91%	83%	97%	28%	92%
2	SYRACUSE	PCT	122	88%	91%	92%	21%	82%
2	WESTERN NY HCS: Batavia	PCT	21	86%	86%	86%	24%	67%
3	BRONX	PCT	66	95%	91%	92%	20%	70%
3	HUDSON VALLEY HCS: Castle Point	PCT	82	88%	91%	93%	74%	0%
3	NEW JERSEY HCS: East Orange	PCT	171	85%	85%	86%	62%	15%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	197	96%	76%	90%	24%	10%
3	NEW YORK HARBOR HCS: New York	PCT	136	84%	96%	99%	35%	66%
4	COATESVILLE	PCT	46	93%	96%	98%	26%	96%
4	PHILADELPHIA	PCT	108	80%	93%	94%	36%	60%
4	PITTSBURGH HCS: Highland Drive	PCT	50	96%	66%	82%	32%	48%
4	PITTSBURGH HCS: Highland Drive	SUPT	43	81%	70%	98%	98%	47%
5	MARYLAND HCS: Baltimore	PCT	127	76%	71%	88%	34%	43%
5	MARYLAND HCS: Perry Point	PCT	19	63%	37%	89%	61%	47%
5	WASHINGTON DC	PCT	148	99%	97%	98%	23%	90%
6	ASHEVILLE	PCT	57	98%	100%	100%	35%	100%
6	DURHAM	PCT	171	84%	92%	95%	10%	67%
6	FAYETTEVILLE NC	PCT	113	98%	91%	96%	13%	99%
6	HAMPTON	PCT	175	85%	91%	94%	50%	79%
6	SALISBURY	PCT	108	94%	87%	95%	19%	76%
7	ATLANTA	PCT	117	90%	78%	88%	24%	52%
7	AUGUSTA	PCT	84	93%	92%	100%	21%	10%
7	BIRMINGHAM	PCT	67	91%	93%	99%	45%	61%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	145	94%	98%	99%	37%	72%
7	CHARLESTON	PCT	101	86%	70%	86%	37%	2%
7	DUBLIN	PCT	220	94%	99%	99%	47%	92%
8	BAY PINES	SUPT	264	87%	71%	88%	40%	77%
8	MIAMI	PCT	88	90%	85%	97%	36%	99%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	166	76%	73%	86%	59%	96%
8	SAN JUAN	PCT	39	97%	74%	100%	0%	18%
8	TAMPA	PCT	50	84%	48%	70%	40%	22%
9	HUNTINGTON	PCT	102	84%	88%	92%	42%	97%
9	LEXINGTON	PCT	32	94%	97%	97%	16%	59%
9	LOUISVILLE	PCT	52	100%	83%	98%	21%	100%
9	MEMPHIS	PCT	116	95%	99%	100%	63%	94%
9	MOUNTAIN HOME	PCT	130	93%	93%	100%	54%	83%
10	BRECKSVILLE	PCT	248	95%	95%	98%	35%	75%
10	BRECKSVILLE	WSDTT	29	10%	100%	100%	36%	55%
10	CHILLICOTHE	PCT	179	92%	100%	100%	2%	96%
10	CINCINNATI	PCT	111	77%	75%	79%	56%	74%
10	COLUMBUS	PCT	85	89%	95%	100%	0%	68%
10	DAYTON	PCT	22	91%	91%	95%	57%	82%
11	ANN ARBOR HCS	PCT	107	89%	54%	71%	50%	67%
11	BATTLE CREEK	PCT	57	95%	95%	100%	37%	68%
11	DANVILLE	PCT	130	91%	70%	85%	43%	96%
11	NORTHERN IN HCS: Fort Wayne	PCT	16	69%	88%	100%	56%	38%
11	NORTHERN IN HCS: Marion	PCT	25	88%	100%	100%	40%	100%

Table 2-2. War Zone Service and Clinical Diagnosis Among Veterans
in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	War Zone Service*	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation by DD214
12	CHICAGO HCS: West Side	PCT	104	98%	96%	98%	85%	87%
12	HINES	PCT	47	96%	98%	98%	51%	85%
12	MADISON	WSDTT	67	16%	64%	88%	22%	7%
15	EASTERN KS HCS: Topeka	PCT	62	94%	82%	92%	59%	68%
15	KANSAS CITY	PCT	165	83%	78%	90%	52%	70%
15	POPLAR BLUFF	PCT	33	97%	94%	100%	3%	100%
15	ST. LOUIS	PCT	165	96%	97%	100%	8%	42%
15	WICHITA	PCT	92	79%	53%	61%	32%	79%
16	CENTRAL AR VETERANS HCS:No.Little Rock	PCT	622	95%	100%	100%	38%	79%
16	FAYETTEVILLE AR	PCT	92	96%	86%	98%	37%	60%
16	GULF COAST VETERANS HCS: Biloxi	PCT	101	96%	65%	78%	25%	93%
16	HOUSTON	PCT	297	83%	59%	66%	28%	45%
16	JACKSON	PCT	31	87%	90%	94%	3%	48%
16	NEW ORLEANS	PCT	38	84%	100%	100%	8%	24%
16	NEW ORLEANS	WSDTT	33	21%	48%	48%	6%	100%
16	OKLAHOMA CITY	PCT	78	94%	55%	55%	51%	94%
17	CENTRAL TX VETERANS HCS: Austin	PCT	201	86%	93%	94%	35%	22%
17	CENTRAL TX VETERANS HCS: Temple	PCT	291	77%	70%	91%	52%	24%
17	CENTRAL TX VETERANS HCS: Waco	PCT	112	91%	63%	72%	46%	79%
17	NORTH TX HCS: Dallas	PCT	236	88%	90%	94%	30%	89%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	94%	88%	95%	44%	93%
18	EL PASO VETERANS HCS	PCT	145	89%	86%	90%	34%	48%
18	NEW MEXICO HCS: Albuquerque	PCT	476	76%	94%	99%	36%	68%
18	PHOENIX	PCT	136	93%	94%	97%	20%	46%
18	SOUTHERN AZ HCS: Tucson	PCT	162	79%	70%	90%	20%	11%
19	CHEYENNE	PCT	18	61%	94%	94%	17%	33%
19	GRAND JUNCTION	PCT	99	84%	96%	97%	49%	79%
19	SALT LAKE CITY HCS	PCT	56	91%	88%	93%	24%	64%
19	SOUTHERN CO HCS: Pueblo	PCT	214	89%	89%	92%	12%	98%
20	BOISE	PCT	82	77%	60%	79%	41%	44%
20	PORTLAND	PCT	288	66%	67%	68%	40%	98%
20	PUGET SOUND HCS: American Lake	PCT	186	80%	87%	97%	41%	78%
20	PUGET SOUND HCS: Seattle	PCT	158	78%	91%	99%	36%	13%
20	SPOKANE	PCT	222	87%	94%	99%	75%	87%
21	HONOLULU	PCT	35	100%	69%	83%	34%	100%
21	NORTHERN CA HCS	PCT	151	94%	99%	100%	23%	59%
21	PALO ALTO HCS: San Jose	PCT	63	83%	79%	92%	33%	59%
21	SAN FRANCISCO	PCT	115	88%	87%	95%	32%	69%
21	SAN FRANCISCO	SUPT	46	93%	98%	98%	98%	46%
22	GREATER LOS ANGELES HCS: East LA	PCT	79	95%	85%	89%	35%	82%
22	GREATER LOS ANGELES HCS: West LA	PCT	190	62%	57%	83%	74%	56%
22	LOMA LINDA	PCT	55	100%	96%	98%	26%	84%
22	LOMA LINDA	WSDTT	35	9%	23%	54%	12%	43%
22	SAN DIEGO HCS CA	PCT	236	84%	82%	92%	29%	47%
22	SOUTHERN NV HCS: Las Vegas	PCT	391	88%	100%	100%	13%	100%
23	BLACK HILLS HCS: Fort Meade	SUPT	124	56%	38%	40%	32%	95%
23	CENTRAL IA HCS: Knoxville	PCT	110	96%	83%	94%	34%	98%
23	IOWA CITY	PCT	151	83%	77%	89%	40%	99%
23	MINNEAPOLIS	PCT	166	79%	63%	79%	29%	42%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	88	73%	76%	99%	38%	100%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	87	86%	93%	99%	67%	83%
23	SIOUX FALLS	PCT	15	53%	80%	100%	21%	27%
TOTAL			12,944					
MEAN			120	87%	82%	91%	36%	65%
S.D.			94	10%	16%	12%	20%	28%

Boxed cell indicates an outlier in the undesirable direction.

*Data for WSDTTs were not included in the formulas to determine the mean and standard deviation for War Zone Service. WSDTTs were not counted as outliers for this monitor.

Table 2-3. Prior Treatment Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2002.

VISN	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment
1	627	73%	19%
2	221	76%	25%
3	652	59%	24%
4	247	74%	23%
5	294	75%	25%
6	624	75%	16%
7	734	71%	18%
8	607	73%	21%
9	432	80%	14%
10	674	51%	12%
11	335	77%	13%
12	218	82%	27%
15	517	75%	14%
16	1,293	79%	38%
17	1,091	75%	15%
18	919	71%	21%
19	387	67%	32%
20	936	79%	29%
21	410	70%	22%
22	986	80%	20%
23	741	71%	25%
TOTAL	12,945		
MEAN	616	73%	22%
S.D	302	7%	7%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-4. Prior Treatment Among Veterans
in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment
1	BOSTON HCS: Boston	PCT	85	80%	25%
1	BOSTON HCS: Boston	WSDTT	66	97%	39%
1	BOSTON HCS: Brockton	PCT	59	68%	20%
1	BOSTON HCS: Brockton	SUPT	42	55%	12%
1	CONNECTICUT HCS: West Haven	PCT	93	68%	14%
1	CONNECTICUT HCS: West Haven	SUPT	44	89%	34%
1	MANCHESTER	PCT	49	65%	10%
1	PROVIDENCE	PCT	138	64%	12%
1	WHITE RIVER JUNCTION	PCT	48	79%	19%
2	CANANDAIGUA	PCT	78	69%	26%
2	SYRACUSE	PCT	121	81%	26%
2	WESTERN NY HCS: Batavia	PCT	21	71%	14%
3	BRONX	PCT	66	59%	20%
3	HUDSON VALLEY HCS: Castle Point	PCT	82	80%	49%
3	NEW JERSEY HCS: East Orange	PCT	169	46%	27%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	196	59%	16%
3	NEW YORK HARBOR HCS: New York	PCT	135	64%	20%
4	COATESVILLE	PCT	46	91%	57%
4	PHILADELPHIA	PCT	108	74%	21%
4	PITTSBURGH HCS: Highland Drive	PCT	50	50%	4%
4	PITTSBURGH HCS: Highland Drive	SUPT	43	86%	14%
5	MARYLAND HCS: Baltimore	PCT	121	85%	33%
5	MARYLAND HCS: Perry Point	PCT	19	79%	26%
5	WASHINGTON DC	PCT	144	65%	18%
6	ASHEVILLE	PCT	57	77%	9%
6	DURHAM	PCT	171	73%	22%
6	FAYETTEVILLE NC	PCT	111	89%	23%
6	HAMPTON	PCT	174	71%	12%
6	SALISBURY	PCT	107	69%	9%
7	ATLANTA	PCT	117	69%	12%
7	AUGUSTA	PCT	84	64%	24%
7	BIRMINGHAM	PCT	67	76%	18%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	145	68%	18%
7	CHARLESTON	PCT	100	59%	17%
7	DUBLIN	PCT	220	82%	19%
8	BAY PINES	SUPT	262	71%	29%
8	MIAMI	PCT	88	81%	18%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	166	72%	16%
8	SAN JUAN	PCT	39	90%	15%
8	TAMPA	PCT	50	58%	10%
9	HUNTINGTON	PCT	98	98%	20%
9	LEXINGTON	PCT	32	75%	28%
9	LOUISVILLE	PCT	52	56%	13%
9	MEMPHIS	PCT	116	88%	13%
9	MOUNTAIN HOME	PCT	128	70%	8%
10	BRECKSVILLE	PCT	246	70%	15%
10	BRECKSVILLE	WSDTT	29	86%	41%
10	CHILLICOTHE	PCT	179	20%	2%
10	CINCINNATI	PCT	111	55%	14%
10	COLUMBUS	PCT	85	42%	13%
10	DAYTON	PCT	22	82%	27%
11	ANN ARBOR HCS	PCT	107	84%	18%
11	BATTLE CREEK	PCT	57	79%	9%
11	DANVILLE	PCT	130	68%	11%
11	NORTHERN IN HCS: Fort Wayne	PCT	16	75%	19%
11	NORTHERN IN HCS: Marion	PCT	25	84%	16%

Table 2-4. Prior Treatment Among Veterans
in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment
12	CHICAGO HCS: West Side	PCT	104	82%	52%
12	HINES	PCT	45	82%	6%
12	MADISON	WSDTT	67	84%	3%
15	EASTERN KS HCS: Topeka	PCT	62	89%	21%
15	KANSAS CITY	PCT	165	83%	10%
15	POPLAR BLUFF	PCT	33	82%	12%
15	ST. LOUIS	PCT	160	66%	14%
15	WICHITA	PCT	92	66%	15%
16	CENTRAL AR VETERANS HCS:No.Little Rock	PCT	620	96%	63%
16	FAYETTEVILLE AR	PCT	92	60%	18%
16	GULF COAST VETERANS HCS: Biloxi	PCT	100	54%	18%
16	HOUSTON	PCT	297	58%	10%
16	JACKSON	PCT	31	74%	35%
16	NEW ORLEANS	PCT	38	68%	8%
16	NEW ORLEANS	WSDTT	33	91%	48%
16	OKLAHOMA CITY	PCT	78	73%	9%
17	CENTRAL TX VETERANS HCS: Austin	PCT	201	82%	16%
17	CENTRAL TX VETERANS HCS: Temple	PCT	291	82%	23%
17	CENTRAL TX VETERANS HCS: Waco	PCT	109	66%	16%
17	NORTH TX HCS: Dallas	PCT	236	82%	12%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	249	56%	8%
18	EL PASO VETERANS HCS	PCT	145	74%	28%
18	NEW MEXICO HCS: Albuquerque	PCT	455	71%	17%
18	PHOENIX	PCT	104	68%	34%
18	SOUTHERN AZ HCS: Tucson	PCT	162	70%	19%
19	CHEYENNE	PCT	18	72%	44%
19	GRAND JUNCTION	PCT	98	71%	43%
19	SALT LAKE CITY HCS	PCT	56	70%	13%
19	SOUTHERN CO HCS: Pueblo	PCT	211	64%	31%
20	BOISE	PCT	81	74%	35%
20	PORTLAND	PCT	266	80%	29%
20	PUGET SOUND HCS: American Lake	PCT	186	76%	23%
20	PUGET SOUND HCS: Seattle	PCT	157	82%	29%
20	SPOKANE	PCT	222	81%	33%
21	HONOLULU	PCT	35	74%	14%
21	NORTHERN CA HCS	PCT	150	71%	17%
21	PALO ALTO HCS: San Jose	PCT	63	52%	21%
21	SAN FRANCISCO	PCT	113	68%	21%
21	SAN FRANCISCO	SUPT	46	91%	52%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	63%	22%
22	GREATER LOS ANGELES HCS: West LA	PCT	180	83%	20%
22	LOMA LINDA	PCT	55	84%	27%
22	LOMA LINDA	WSDTT	35	77%	23%
22	SAN DIEGO HCS CA	PCT	229	75%	25%
22	SOUTHERN NV HCS: Las Vegas	PCT	388	86%	15%
23	BLACK HILLS HCS: Fort Meade	SUPT	122	41%	9%
23	CENTRAL IA HCS: Knoxville	PCT	110	98%	69%
23	IOWA CITY	PCT	148	74%	24%
23	MINNEAPOLIS	PCT	165	72%	13%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	88	67%	15%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	87	80%	28%
23	SIOUX FALLS	PCT	12	67%	7%
TOTAL			12,782		
MEAN			118	73%	21%
S.D.			93	13%	13%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-5. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2002.

VISN	N	Age	High School Education Or More	Not Working	Violent Behavior
1	627	53.9	89%	61%	20%
2	221	55.3	93%	73%	16%
3	652	56.4	88%	66%	17%
4	247	53.7	91%	68%	16%
5	294	56.6	85%	66%	20%
6	624	55.0	88%	65%	32%
7	734	53.9	89%	67%	31%
8	607	55.6	92%	78%	14%
9	432	55.4	82%	72%	23%
10	674	55.3	89%	68%	11%
11	335	54.3	90%	72%	23%
12	218	50.4	93%	68%	21%
15	517	55.3	86%	64%	12%
16	1,292	54.8	86%	70%	18%
17	1,091	53.9	87%	65%	26%
18	919	54.9	92%	65%	19%
19	387	54.5	90%	68%	22%
20	936	52.2	94%	74%	20%
21	410	55.7	92%	70%	9%
22	986	55.0	86%	78%	22%
23	741	54.6	92%	66%	8%
TOTAL	12,944				
MEAN	616	54.6	89%	69%	19%
S.D	302	1.4	3%	4%	6%

Table 2-6. Sociodemographic Gackground and Social Functioning Among
Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Age	High School Education Or More	Not Working	Violent Behavior
1	BOSTON HCS: Boston	PCT	85	54.5	89%	59%	7%
1	BOSTON HCS: Boston	WSDTT	67	43.6	100%	57%	7%
1	BOSTON HCS: Brockton	PCT	60	57.2	92%	68%	15%
1	BOSTON HCS: Brockton	SUPT	42	57.4	88%	57%	60%
1	CONNECTICUT HCS: West Haven	PCT	93	54.7	91%	60%	9%
1	CONNECTICUT HCS: West Haven	SUPT	44	50.6	89%	57%	24%
1	MANCHESTER	PCT	49	54.0	100%	51%	100%
1	PROVIDENCE	PCT	139	57.2	76%	69%	5%
1	WHITE RIVER JUNCTION	PCT	48	52.0	94%	63%	7%
2	CANANDAIGUA	PCT	78	56.1	91%	73%	9%
2	SYRACUSE	PCT	122	55.0	94%	74%	20%
2	WESTERN NY HCS: Batavia	PCT	21	54.8	90%	71%	14%
3	BRONX	PCT	66	59.1	89%	80%	38%
3	HUDSON VALLEY HCS: Castle Point	PCT	82	55.2	80%	56%	18%
3	NEW JERSEY HCS: East Orange	PCT	171	56.8	94%	63%	10%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	197	55.4	81%	67%	6%
3	NEW YORK HARBOR HCS: New York	PCT	136	56.5	93%	68%	32%
4	COATESVILLE	PCT	46	53.7	93%	66%	15%
4	PHILADELPHIA	PCT	108	53.8	95%	71%	14%
4	PITTSBURGH HCS: Highland Drive	PCT	50	56.1	86%	55%	16%
4	PITTSBURGH HCS: Highland Drive	SUPT	43	50.8	86%	79%	21%
5	MARYLAND HCS: Baltimore	PCT	127	59.1	85%	73%	25%
5	MARYLAND HCS: Perry Point	PCT	19	50.6	95%	68%	32%
5	WASHINGTON DC	PCT	148	55.1	84%	61%	15%
6	ASHEVILLE	PCT	57	62.8	82%	84%	40%
6	DURHAM	PCT	171	53.3	89%	58%	46%
6	FAYETTEVILLE NC	PCT	113	55.5	96%	76%	43%
6	HAMPTON	PCT	175	52.4	91%	59%	10%
6	SALISBURY	PCT	108	56.9	77%	66%	30%
7	ATLANTA	PCT	117	54.3	87%	61%	35%
7	AUGUSTA	PCT	84	55.3	87%	63%	36%
7	BIRMINGHAM	PCT	67	54.0	99%	61%	54%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	145	53.2	89%	76%	43%
7	CHARLESTON	PCT	101	53.7	89%	53%	18%
7	DUBLIN	PCT	220	53.5	87%	74%	18%
8	BAY PINES	SUPT	264	56.3	93%	74%	17%
8	MIAMI	PCT	88	55.5	95%	67%	13%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	166	53.6	90%	86%	7%
8	SAN JUAN	PCT	39	58.1	95%	87%	15%
8	TAMPA	PCT	50	56.5	84%	84%	28%
9	HUNTINGTON	PCT	102	54.0	86%	80%	11%
9	LEXINGTON	PCT	32	56.8	72%	84%	3%
9	LOUISVILLE	PCT	52	53.4	81%	58%	53%
9	MEMPHIS	PCT	116	58.2	82%	77%	20%
9	MOUNTAIN HOME	PCT	130	54.6	81%	64%	28%
10	BRECKSVILLE	PCT	248	57.0	80%	69%	11%
10	BRECKSVILLE	WSDTT	29	41.4	100%	72%	14%
10	CHILLICOTHE	PCT	179	56.7	99%	73%	1%
10	CINCINNATI	PCT	111	52.8	86%	59%	22%
10	COLUMBUS	PCT	85	55.1	92%	65%	14%
10	DAYTON	PCT	22	55.7	82%	59%	32%
11	ANN ARBOR HCS	PCT	107	55.4	93%	76%	20%
11	BATTLE CREEK	PCT	57	54.7	93%	70%	11%
11	DANVILLE	PCT	130	54.4	93%	73%	33%
11	NORTHERN IN HCS: Fort Wayne	PCT	16	51.3	75%	69%	31%
11	NORTHERN IN HCS: Marion	PCT	25	50.6	72%	60%	4%

Table 2-6. Sociodemographic Gackground and Social Functioning Among
Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Age	High School Education Or More	Not Working	Violent Behavior
12	CHICAGO HCS: West Side	PCT	104	53.9	91%	82%	18%
12	HINES	PCT	47	53.9	85%	55%	47%
12	MADISON	WSDTT	67	42.6	100%	57%	7%
15	EASTERN KS HCS: Topeka	PCT	62	52.0	92%	58%	21%
15	KANSAS CITY	PCT	165	56.2	87%	63%	9%
15	POPLAR BLUFF	PCT	33	59.2	79%	91%	18%
15	ST. LOUIS	PCT	165	55.5	87%	62%	15%
15	WICHITA	PCT	92	54.3	84%	65%	7%
16	CENTRAL AR VETERANS HCS:No.Little Rock	PCT	622	55.7	85%	78%	20%
16	FAYETTEVILLE AR	PCT	92	56.3	80%	75%	8%
16	GULF COAST VETERANS HCS: Biloxi	PCT	101	57.3	93%	65%	37%
16	HOUSTON	PCT	297	52.5	86%	60%	14%
16	JACKSON	PCT	31	55.6	94%	63%	10%
16	NEW ORLEANS	PCT	38	57.0	84%	53%	11%
16	NEW ORLEANS	WSDTT	33	44.6	100%	61%	9%
16	OKLAHOMA CITY	PCT	78	53.1	90%	55%	23%
17	CENTRAL TX VETERANS HCS: Austin	PCT	201	53.7	92%	63%	28%
17	CENTRAL TX VETERANS HCS: Temple	PCT	291	51.8	80%	78%	24%
17	CENTRAL TX VETERANS HCS: Waco	PCT	112	54.7	85%	67%	14%
17	NORTH TX HCS: Dallas	PCT	236	55.1	91%	70%	30%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	54.8	87%	47%	30%
18	EL PASO VETERANS HCS	PCT	145	56.4	88%	64%	25%
18	NEW MEXICO HCS: Albuquerque	PCT	476	54.6	92%	62%	15%
18	PHOENIX	PCT	136	56.9	97%	76%	16%
18	SOUTHERN AZ HCS: Tucson	PCT	162	53.1	90%	69%	28%
19	CHEYENNE	PCT	18	50.3	94%	67%	6%
19	GRAND JUNCTION	PCT	99	54.0	89%	66%	17%
19	SALT LAKE CITY HCS	PCT	56	54.3	88%	52%	25%
19	SOUTHERN CO HCS: Pueblo	PCT	214	55.2	91%	73%	24%
20	BOISE	PCT	82	53.3	96%	71%	17%
20	PORTLAND	PCT	288	51.8	89%	76%	33%
20	PUGET SOUND HCS: American Lake	PCT	186	50.6	97%	67%	16%
20	PUGET SOUND HCS: Seattle	PCT	158	52.3	97%	73%	10%
20	SPOKANE	PCT	222	53.8	95%	77%	17%
21	HONOLULU	PCT	35	56.8	89%	59%	9%
21	NORTHERN CA HCS	PCT	151	56.7	92%	74%	2%
21	PALO ALTO HCS: San Jose	PCT	63	55.3	90%	60%	17%
21	SAN FRANCISCO	PCT	115	54.9	92%	65%	10%
21	SAN FRANCISCO	SUPT	46	53.8	96%	88%	20%
22	GREATER LOS ANGELES HCS: East LA	PCT	79	56.7	0%	77%	30%
22	GREATER LOS ANGELES HCS: West LA	PCT	190	53.0	91%	87%	21%
22	LOMA LINDA	PCT	55	54.4	98%	71%	45%
22	LOMA LINDA	WSDTT	35	43.7	100%	74%	9%
22	SAN DIEGO HCS CA	PCT	236	54.7	95%	72%	36%
22	SOUTHERN NV HCS: Las Vegas	PCT	391	56.8	94%	80%	10%
23	BLACK HILLS HCS: Fort Meade	SUPT	124	58.6	90%	55%	15%
23	CENTRAL IA HCS: Knoxville	PCT	110	55.5	88%	81%	3%
23	IOWA CITY	PCT	151	54.1	95%	70%	9%
23	MINNEAPOLIS	PCT	166	51.9	91%	59%	7%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	88	56.1	94%	69%	1%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	87	53.0	91%	69%	14%
23	SIOUX FALLS	PCT	15	52.9	100%	57%	0%
TOTAL			12,944				
MEAN			120	54.3	89%	68%	20%
S.D.			94	3.2	11%	9%	15%

Table 2-7. Critical Monitors: Summary of Outliers for Specialized Outpatient PTSD Programs, by VISN: FY 2002.

VISN	# of Progs.	War Zone Service*	PTSD Clinical Diagnosis	Subs. Abuse Dx	Valid. by DD214	Prior Psych. Tx	Prior Spec. PTSD Tx	Total # of Outliers	Mean # Outliers/ Program
1	9		1	1	1	2	2	7	0.8
2	3							0	0.0
3	5				3		1	4	0.8
4	4		1			2	1	4	1.0
5	3	2	1					3	1.0
6	5			2		1		3	0.6
7	6				2			2	0.3
8	5	1	1	1	2	1		6	1.2
9	5			1		2		3	0.6
10	6			2		1	1	4	0.7
11	5	1	1		1			3	0.6
12	3		1		1		1	3	1.0
15	5		1	2		1		4	0.8
16	8		4	3	1	2	3	13	1.6
17	5		1		2			3	0.6
18	4	1			1			2	0.5
19	4	1		1	1		2	5	1.3
20	5	2	1		1		1	5	1.0
21	6					1	1	2	0.3
22	6	1	2	2				5	0.8
23	7	3	2		1	1	1	8	1.1
TOTAL	109	12	17	15	17	14	14	89	
MEAN									0.8
S.D.									0.4

Boxed cell signifies an outlier in the undesirable direction.

*Data for WSDTTs were excluded from these calculations for War Zone Service. WSDTTs were not counted as outliers for this monitor.

Table 2-8. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2002.

VISN	N	Male	Married	Separated or Divorced	Never Married
1	627	87%	47%	35%	15%
2	221	98%	55%	31%	10%
3	652	98%	52%	30%	13%
4	247	94%	49%	34%	13%
5	294	97%	50%	35%	9%
6	624	99%	59%	31%	6%
7	734	97%	58%	35%	5%
8	607	97%	54%	38%	5%
9	432	99%	68%	26%	4%
10	674	93%	59%	32%	6%
11	335	98%	58%	33%	8%
12	218	70%	43%	43%	12%
15	517	98%	57%	34%	6%
16	1,292	95%	62%	31%	4%
17	1,091	95%	56%	36%	6%
18	919	91%	62%	29%	7%
19	387	95%	60%	30%	8%
20	936	93%	55%	37%	6%
21	410	97%	49%	37%	10%
22	986	94%	46%	37%	13%
23	741	94%	58%	32%	8%
TOTAL	12,944				
MEAN	616	94%	55%	34%	8%
S.D	302	6%	6%	4%	3%

Table 2-9. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Male	Married	Separated or Divorced	Never Married
1	BOSTON HCS: Boston	PCT	85	100%	40%	34%	25%
1	BOSTON HCS: Boston	WSDTT	67	0%	15%	43%	39%
1	BOSTON HCS: Brockton	PCT	60	100%	54%	36%	8%
1	BOSTON HCS: Brockton	SUPT	42	100%	64%	21%	12%
1	CONNECTICUT HCS: West Haven	PCT	93	94%	57%	36%	7%
1	CONNECTICUT HCS: West Haven	SUPT	44	98%	21%	65%	14%
1	MANCHESTER	PCT	49	96%	61%	27%	6%
1	PROVIDENCE	PCT	139	99%	53%	29%	12%
1	WHITE RIVER JUNCTION	PCT	48	98%	52%	33%	8%
2	CANANDAIGUA	PCT	78	100%	51%	27%	17%
2	SYRACUSE	PCT	122	98%	53%	35%	8%
2	WESTERN NY HCS: Batavia	PCT	21	86%	76%	24%	0%
3	BRONX	PCT	66	100%	62%	18%	9%
3	HUDSON VALLEY HCS: Castle Point	PCT	82	99%	59%	33%	4%
3	NEW JERSEY HCS: East Orange	PCT	171	98%	52%	32%	13%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	197	100%	52%	31%	11%
3	NEW YORK HARBOR HCS: New York	PCT	136	96%	44%	30%	23%
4	COATESVILLE	PCT	46	98%	59%	26%	11%
4	PHILADELPHIA	PCT	108	88%	46%	32%	16%
4	PITTSBURGH HCS: Highland Drive	PCT	50	98%	61%	31%	6%
4	PITTSBURGH HCS: Highland Drive	SUPT	43	100%	30%	49%	16%
5	MARYLAND HCS: Baltimore	PCT	127	94%	48%	30%	10%
5	MARYLAND HCS: Perry Point	PCT	19	89%	42%	53%	5%
5	WASHINGTON DC	PCT	148	100%	52%	37%	10%
6	ASHEVILLE	PCT	57	100%	81%	14%	2%
6	DURHAM	PCT	171	99%	54%	35%	7%
6	FAYETTEVILLE NC	PCT	113	99%	71%	22%	3%
6	HAMPTON	PCT	175	99%	49%	40%	10%
6	SALISBURY	PCT	108	97%	61%	30%	6%
7	ATLANTA	PCT	117	100%	58%	36%	3%
7	AUGUSTA	PCT	84	100%	64%	31%	4%
7	BIRMINGHAM	PCT	67	97%	62%	24%	12%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	145	100%	55%	38%	5%
7	CHARLESTON	PCT	101	95%	64%	27%	6%
7	DUBLIN	PCT	220	94%	52%	41%	5%
8	BAY PINES	SUPT	264	98%	50%	41%	7%
8	MIAMI	PCT	88	92%	45%	45%	8%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	166	98%	55%	42%	1%
8	SAN JUAN	PCT	39	97%	82%	10%	3%
8	TAMPA	PCT	50	92%	68%	22%	6%
9	HUNTINGTON	PCT	102	100%	83%	14%	2%
9	LEXINGTON	PCT	32	100%	72%	22%	6%
9	LOUISVILLE	PCT	52	100%	63%	35%	2%
9	MEMPHIS	PCT	116	98%	66%	27%	3%
9	MOUNTAIN HOME	PCT	130	97%	60%	31%	7%
10	BRECKSVILLE	PCT	248	100%	59%	32%	6%
10	BRECKSVILLE	WSDTT	29	0%	21%	52%	28%
10	CHILLICOTHE	PCT	179	99%	64%	30%	4%
10	CINCINNATI	PCT	111	88%	61%	31%	6%
10	COLUMBUS	PCT	85	100%	61%	29%	6%
10	DAYTON	PCT	22	95%	55%	45%	0%
11	ANN ARBOR HCS	PCT	107	97%	61%	27%	9%
11	BATTLE CREEK	PCT	57	100%	53%	39%	7%
11	DANVILLE	PCT	130	98%	62%	30%	8%
11	NORTHERN IN HCS: Fort Wayne	PCT	16	81%	56%	44%	0%
11	NORTHERN IN HCS: Marion	PCT	25	100%	36%	56%	8%

Table 2-9. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Male	Married	Separated or Divorced	Never Married
12	CHICAGO HCS: West Side	PCT	104	100%	35%	52%	13%
12	HINES	PCT	47	96%	72%	21%	4%
12	MADISON	WSDTT	67	6%	36%	44%	17%
15	EASTERN KS HCS: Topeka	PCT	62	100%	60%	31%	8%
15	KANSAS CITY	PCT	165	98%	58%	36%	4%
15	POPLAR BLUFF	PCT	33	100%	82%	18%	0%
15	ST. LOUIS	PCT	165	99%	55%	35%	7%
15	WICHITA	PCT	92	96%	49%	39%	9%
16	CENTRAL AR VETERANS HCS:No.Little Rock	PCT	622	98%	64%	30%	3%
16	FAYETTEVILLE AR	PCT	92	100%	73%	21%	4%
16	GULF COAST VETERANS HCS: Biloxi	PCT	101	100%	65%	31%	2%
16	HOUSTON	PCT	297	95%	57%	34%	7%
16	JACKSON	PCT	31	97%	60%	30%	7%
16	NEW ORLEANS	PCT	38	100%	61%	26%	8%
16	NEW ORLEANS	WSDTT	33	0%	27%	61%	6%
16	OKLAHOMA CITY	PCT	78	99%	71%	24%	3%
17	CENTRAL TX VETERANS HCS: Austin	PCT	201	91%	53%	37%	6%
17	CENTRAL TX VETERANS HCS: Temple	PCT	291	90%	41%	48%	8%
17	CENTRAL TX VETERANS HCS: Waco	PCT	112	100%	67%	28%	3%
17	NORTH TX HCS: Dallas	PCT	236	99%	60%	34%	4%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	98%	69%	26%	5%
18	EL PASO VETERANS HCS	PCT	145	87%	71%	24%	3%
18	NEW MEXICO HCS: Albuquerque	PCT	476	89%	59%	30%	9%
18	PHOENIX	PCT	136	98%	70%	23%	5%
18	SOUTHERN AZ HCS: Tucson	PCT	162	93%	56%	35%	7%
19	CHEYENNE	PCT	18	61%	50%	33%	11%
19	GRAND JUNCTION	PCT	99	94%	51%	41%	7%
19	SALT LAKE CITY HCS	PCT	56	96%	62%	35%	0%
19	SOUTHERN CO HCS: Pueblo	PCT	214	99%	65%	23%	9%
20	BOISE	PCT	82	96%	63%	32%	4%
20	PORTLAND	PCT	288	95%	53%	36%	8%
20	PUGET SOUND HCS: American Lake	PCT	186	88%	58%	36%	4%
20	PUGET SOUND HCS: Seattle	PCT	158	91%	47%	46%	6%
20	SPOKANE	PCT	222	93%	56%	35%	7%
21	HONOLULU	PCT	35	100%	54%	40%	6%
21	NORTHERN CA HCS	PCT	151	99%	62%	33%	2%
21	PALO ALTO HCS: San Jose	PCT	63	89%	40%	44%	16%
21	SAN FRANCISCO	PCT	115	95%	50%	32%	14%
21	SAN FRANCISCO	SUPT	46	100%	13%	52%	24%
22	GREATER LOS ANGELES HCS: East LA	PCT	79	96%	47%	41%	11%
22	GREATER LOS ANGELES HCS: West LA	PCT	190	97%	23%	48%	27%
22	LOMA LINDA	PCT	55	100%	49%	31%	11%
22	LOMA LINDA	WSDTT	35	11%	31%	34%	31%
22	SAN DIEGO HCS CA	PCT	236	97%	48%	36%	12%
22	SOUTHERN NV HCS: Las Vegas	PCT	391	97%	56%	33%	7%
23	BLACK HILLS HCS: Fort Meade	SUPT	124	95%	60%	24%	9%
23	CENTRAL IA HCS: Knoxville	PCT	110	100%	51%	41%	4%
23	IOWA CITY	PCT	151	93%	51%	33%	15%
23	MINNEAPOLIS	PCT	166	93%	63%	30%	6%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	88	92%	63%	26%	5%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	87	91%	57%	37%	5%
23	SIOUX FALLS	PCT	15	80%	53%	33%	7%
TOTAL			12,944				
MEAN			120	92%	55%	34%	8%
S.D.			94	20%	13%	10%	7%

Table 2-10. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2002.

VISN	N	Caucasian	African American	Hispanic	Other
1	627	87%	8%	3%	2%
2	221	88%	6%	1%	5%
3	652	51%	33%	13%	3%
4	247	62%	35%	2%	1%
5	294	34%	62%	1%	4%
6	624	48%	47%	2%	2%
7	734	47%	51%	1%	1%
8	607	68%	18%	13%	0%
9	432	82%	16%	1%	1%
10	674	82%	15%	1%	1%
11	335	86%	9%	3%	1%
12	218	52%	41%	5%	2%
15	517	76%	19%	3%	2%
16	1,292	62%	32%	3%	2%
17	1,091	53%	22%	23%	2%
18	919	52%	3%	38%	6%
19	387	70%	4%	22%	5%
20	936	79%	11%	3%	7%
21	410	63%	14%	13%	10%
22	986	59%	24%	11%	6%
23	741	89%	6%	1%	4%
TOTAL	12,944				
MEAN	616	66%	23%	8%	3%
S.D	302	16%	17%	10%	2%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-11. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Caucasian	African American	Hispanic	Other
1	BOSTON HCS: Boston	PCT	85	91%	8%	1%	0%
1	BOSTON HCS: Boston	WSDTT	67	72%	15%	6%	7%
1	BOSTON HCS: Brockton	PCT	60	92%	5%	2%	2%
1	BOSTON HCS: Brockton	SUPT	42	95%	5%	0%	0%
1	CONNECTICUT HCS: West Haven	PCT	93	78%	16%	3%	2%
1	CONNECTICUT HCS: West Haven	SUPT	44	68%	25%	5%	2%
1	MANCHESTER	PCT	49	100%	0%	0%	0%
1	PROVIDENCE	PCT	139	90%	3%	4%	3%
1	WHITE RIVER JUNCTION	PCT	48	98%	2%	0%	0%
2	CANANDAIGUA	PCT	78	86%	12%	3%	0%
2	SYRACUSE	PCT	122	88%	3%	0%	9%
2	WESTERN NY HCS: Batavia	PCT	21	100%	0%	0%	0%
3	BRONX	PCT	66	45%	33%	20%	2%
3	HUDSON VALLEY HCS: Castle Point	PCT	82	83%	6%	6%	5%
3	NEW JERSEY HCS: East Orange	PCT	171	55%	36%	7%	2%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	197	45%	34%	19%	2%
3	NEW YORK HARBOR HCS: New York	PCT	136	37%	46%	14%	4%
4	COATESVILLE	PCT	46	87%	13%	0%	0%
4	PHILADELPHIA	PCT	108	40%	55%	4%	2%
4	PITTSBURGH HCS: Highland Drive	PCT	50	86%	12%	0%	2%
4	PITTSBURGH HCS: Highland Drive	SUPT	43	63%	35%	2%	0%
5	MARYLAND HCS: Baltimore	PCT	127	51%	40%	1%	8%
5	MARYLAND HCS: Perry Point	PCT	19	74%	21%	5%	0%
5	WASHINGTON DC	PCT	148	14%	86%	0%	1%
6	ASHEVILLE	PCT	57	96%	4%	0%	0%
6	DURHAM	PCT	171	39%	56%	4%	2%
6	FAYETTEVILLE NC	PCT	113	45%	48%	2%	5%
6	HAMPTON	PCT	175	30%	65%	3%	2%
6	SALISBURY	PCT	108	70%	27%	1%	2%
7	ATLANTA	PCT	117	47%	50%	3%	0%
7	AUGUSTA	PCT	84	49%	40%	2%	8%
7	BIRMINGHAM	PCT	67	46%	49%	3%	1%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	145	37%	62%	1%	0%
7	CHARLESTON	PCT	101	47%	51%	2%	0%
7	DUBLIN	PCT	220	52%	47%	0%	0%
8	BAY PINES	SUPT	264	83%	10%	6%	0%
8	MIAMI	PCT	88	39%	47%	15%	0%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	166	75%	19%	5%	1%
8	SAN JUAN	PCT	39	0%	0%	100%	0%
8	TAMPA	PCT	50	70%	22%	8%	0%
9	HUNTINGTON	PCT	102	95%	1%	2%	2%
9	LEXINGTON	PCT	32	91%	9%	0%	0%
9	LOUISVILLE	PCT	52	85%	12%	4%	0%
9	MEMPHIS	PCT	116	58%	41%	0%	1%
9	MOUNTAIN HOME	PCT	130	90%	8%	1%	2%
10	BRECKSVILLE	PCT	248	79%	18%	2%	1%
10	BRECKSVILLE	WSDTT	29	55%	38%	7%	0%
10	CHILLICOTHE	PCT	179	97%	2%	0%	1%
10	CINCINNATI	PCT	111	78%	20%	1%	1%
10	COLUMBUS	PCT	85	81%	16%	1%	1%
10	DAYTON	PCT	22	68%	32%	0%	0%
11	ANN ARBOR HCS	PCT	107	91%	6%	3%	1%
11	BATTLE CREEK	PCT	57	72%	18%	7%	4%
11	DANVILLE	PCT	130	87%	11%	2%	1%
11	NORTHERN IN HCS: Fort Wayne	PCT	16	81%	6%	13%	0%
11	NORTHERN IN HCS: Marion	PCT	25	100%	0%	0%	0%

Table 2-11. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Caucasian	African American	Hispanic	Other
12	CHICAGO HCS: West Side	PCT	104	15%	80%	5%	0%
12	HINES	PCT	47	74%	9%	13%	4%
12	MADISON	WSDTT	67	93%	4%	0%	3%
15	EASTERN KS HCS: Topeka	PCT	62	76%	15%	6%	3%
15	KANSAS CITY	PCT	165	76%	20%	4%	0%
15	POPLAR BLUFF	PCT	33	94%	0%	3%	3%
15	ST. LOUIS	PCT	165	68%	27%	2%	3%
15	WICHITA	PCT	92	82%	13%	3%	2%
16	CENTRAL AR VETERANS HCS:No.Little Rock	PCT	622	67%	30%	1%	2%
16	FAYETTEVILLE AR	PCT	92	93%	1%	0%	5%
16	GULF COAST VETERANS HCS: Biloxi	PCT	101	73%	23%	1%	3%
16	HOUSTON	PCT	297	45%	43%	10%	1%
16	JACKSON	PCT	31	39%	58%	0%	3%
16	NEW ORLEANS	PCT	38	39%	61%	0%	0%
16	NEW ORLEANS	WSDTT	33	30%	64%	0%	6%
16	OKLAHOMA CITY	PCT	78	72%	18%	1%	9%
17	CENTRAL TX VETERANS HCS: Austin	PCT	201	53%	20%	22%	4%
17	CENTRAL TX VETERANS HCS: Temple	PCT	291	58%	28%	12%	1%
17	CENTRAL TX VETERANS HCS: Waco	PCT	112	73%	21%	6%	0%
17	NORTH TX HCS: Dallas	PCT	236	61%	34%	3%	1%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	31%	7%	60%	2%
18	EL PASO VETERANS HCS	PCT	145	34%	8%	52%	6%
18	NEW MEXICO HCS: Albuquerque	PCT	476	41%	1%	50%	7%
18	PHOENIX	PCT	136	84%	4%	10%	3%
18	SOUTHERN AZ HCS: Tucson	PCT	162	76%	5%	15%	4%
19	CHEYENNE	PCT	18	83%	6%	11%	0%
19	GRAND JUNCTION	PCT	99	93%	0%	3%	4%
19	SALT LAKE CITY HCS	PCT	56	80%	2%	14%	4%
19	SOUTHERN CO HCS: Pueblo	PCT	214	55%	6%	34%	6%
20	BOISE	PCT	82	93%	2%	2%	2%
20	PORTLAND	PCT	288	83%	5%	4%	8%
20	PUGET SOUND HCS: American Lake	PCT	186	60%	28%	4%	8%
20	PUGET SOUND HCS: Seattle	PCT	158	74%	16%	3%	8%
20	SPOKANE	PCT	222	90%	3%	2%	5%
21	HONOLULU	PCT	35	37%	17%	9%	37%
21	NORTHERN CA HCS	PCT	151	72%	11%	10%	7%
21	PALO ALTO HCS: San Jose	PCT	63	46%	6%	41%	6%
21	SAN FRANCISCO	PCT	115	82%	6%	4%	8%
21	SAN FRANCISCO	SUPT	46	30%	50%	13%	7%
22	GREATER LOS ANGELES HCS: East LA	PCT	79	28%	22%	46%	5%
22	GREATER LOS ANGELES HCS: West LA	PCT	190	31%	51%	11%	8%
22	LOMA LINDA	PCT	55	58%	24%	16%	2%
22	LOMA LINDA	WSDTT	35	74%	17%	6%	3%
22	SAN DIEGO HCS CA	PCT	236	64%	19%	7%	10%
22	SOUTHERN NV HCS: Las Vegas	PCT	391	74%	14%	7%	5%
23	BLACK HILLS HCS: Fort Meade	SUPT	124	88%	0%	1%	11%
23	CENTRAL IA HCS: Knoxville	PCT	110	91%	9%	0%	0%
23	IOWA CITY	PCT	151	93%	4%	1%	2%
23	MINNEAPOLIS	PCT	166	89%	7%	1%	4%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	88	95%	2%	2%	0%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	87	78%	16%	3%	2%
23	SIOUX FALLS	PCT	15	87%	7%	0%	7%
TOTAL			12,944				
MEAN			120	68%	21%	8%	3%
S.D.			94	23%	20%	14%	4%

Table 2-12. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2002.

VISN	N	World War II	Korea	Vietnam	Persian Gulf
1	627	8%	5%	63%	11%
2	221	9%	3%	76%	7%
3	652	8%	5%	73%	7%
4	247	4%	4%	74%	6%
5	294	11%	5%	69%	9%
6	624	5%	3%	77%	11%
7	734	1%	4%	83%	11%
8	607	6%	7%	73%	8%
9	432	4%	4%	84%	7%
10	674	7%	6%	72%	9%
11	335	6%	3%	78%	6%
12	218	0%	0%	70%	12%
15	517	8%	2%	77%	9%
16	1,292	5%	4%	79%	9%
17	1,091	3%	3%	77%	12%
18	919	6%	6%	72%	10%
19	387	5%	6%	76%	12%
20	936	3%	3%	72%	15%
21	410	7%	5%	78%	7%
22	986	6%	5%	73%	9%
23	741	7%	4%	71%	10%
TOTAL	12,944				
MEAN	616	6%	4%	75%	9%
S.D	302	3%	1%	5%	2%

Table 2-13. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	World War II	Korea	Vietnam	Persian Gulf
1	BOSTON HCS: Boston	PCT	85	5%	6%	75%	5%
1	BOSTON HCS: Boston	WSDTT	67	3%	3%	15%	36%
1	BOSTON HCS: Brockton	PCT	60	12%	5%	75%	2%
1	BOSTON HCS: Brockton	SUPT	42	12%	2%	86%	2%
1	CONNECTICUT HCS: West Haven	PCT	93	9%	10%	66%	12%
1	CONNECTICUT HCS: West Haven	SUPT	44	0%	0%	75%	14%
1	MANCHESTER	PCT	49	6%	4%	69%	10%
1	PROVIDENCE	PCT	139	13%	6%	57%	8%
1	WHITE RIVER JUNCTION	PCT	48	2%	6%	71%	17%
2	CANANDAIGUA	PCT	78	12%	0%	74%	3%
2	SYRACUSE	PCT	122	6%	5%	78%	8%
2	WESTERN NY HCS: Batavia	PCT	21	14%	0%	67%	14%
3	BRONX	PCT	66	14%	3%	68%	8%
3	HUDSON VALLEY HCS: Castle Point	PCT	82	7%	1%	79%	9%
3	NEW JERSEY HCS: East Orange	PCT	171	8%	6%	70%	5%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	197	5%	9%	75%	11%
3	NEW YORK HARBOR HCS: New York	PCT	136	11%	2%	71%	5%
4	COATESVILLE	PCT	46	7%	0%	83%	7%
4	PHILADELPHIA	PCT	108	5%	6%	66%	7%
4	PITTSBURGH HCS: Highland Drive	PCT	50	6%	6%	82%	4%
4	PITTSBURGH HCS: Highland Drive	SUPT	43	0%	0%	77%	5%
5	MARYLAND HCS: Baltimore	PCT	127	21%	6%	54%	6%
5	MARYLAND HCS: Perry Point	PCT	19	0%	0%	79%	11%
5	WASHINGTON DC	PCT	148	4%	5%	80%	11%
6	ASHEVILLE	PCT	57	28%	7%	63%	2%
6	DURHAM	PCT	171	2%	2%	78%	11%
6	FAYETTEVILLE NC	PCT	113	1%	6%	83%	17%
6	HAMPTON	PCT	175	2%	3%	74%	14%
6	SALISBURY	PCT	108	10%	2%	82%	6%
7	ATLANTA	PCT	117	3%	3%	83%	12%
7	AUGUSTA	PCT	84	1%	7%	85%	12%
7	BIRMINGHAM	PCT	67	0%	6%	87%	9%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	145	1%	3%	81%	15%
7	CHARLESTON	PCT	101	1%	3%	79%	9%
7	DUBLIN	PCT	220	1%	3%	84%	9%
8	BAY PINES	SUPT	264	7%	6%	76%	6%
8	MIAMI	PCT	88	7%	2%	73%	10%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	166	4%	5%	72%	7%
8	SAN JUAN	PCT	39	5%	23%	74%	13%
8	TAMPA	PCT	50	10%	10%	62%	6%
9	HUNTINGTON	PCT	102	2%	2%	84%	4%
9	LEXINGTON	PCT	32	3%	9%	84%	3%
9	LOUISVILLE	PCT	52	0%	0%	92%	8%
9	MEMPHIS	PCT	116	10%	8%	78%	3%
9	MOUNTAIN HOME	PCT	130	1%	3%	84%	13%
10	BRECKSVILLE	PCT	248	9%	7%	78%	4%
10	BRECKSVILLE	WSDTT	29	0%	3%	28%	59%
10	CHILLICOTHE	PCT	179	8%	6%	77%	4%
10	CINCINNATI	PCT	111	3%	4%	55%	20%
10	COLUMBUS	PCT	85	6%	4%	78%	6%
10	DAYTON	PCT	22	5%	5%	77%	9%
11	ANN ARBOR HCS	PCT	107	8%	3%	77%	5%
11	BATTLE CREEK	PCT	57	4%	4%	86%	4%
11	DANVILLE	PCT	130	6%	4%	78%	7%
11	NORTHERN IN HCS: Fort Wayne	PCT	16	0%	6%	56%	13%
11	NORTHERN IN HCS: Marion	PCT	25	0%	0%	84%	8%

Table 2-13. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	World War II	Korea	Vietnam	Persian Gulf
12	CHICAGO HCS: West Side	PCT	104	0%	0%	91%	3%
12	HINES	PCT	47	2%	2%	85%	6%
12	MADISON	WSDTT	67	0%	0%	25%	30%
15	EASTERN KS HCS: Topeka	PCT	62	2%	0%	79%	21%
15	KANSAS CITY	PCT	165	10%	3%	73%	6%
15	POPLAR BLUFF	PCT	33	15%	0%	82%	3%
15	ST. LOUIS	PCT	165	7%	3%	83%	8%
15	WICHITA	PCT	92	10%	2%	67%	9%
16	CENTRAL AR VETERANS HCS:No.Little Rock	PCT	622	6%	5%	82%	6%
16	FAYETTEVILLE AR	PCT	92	5%	7%	88%	4%
16	GULF COAST VETERANS HCS: Biloxi	PCT	101	8%	9%	71%	8%
16	HOUSTON	PCT	297	1%	1%	79%	10%
16	JACKSON	PCT	31	6%	6%	74%	10%
16	NEW ORLEANS	PCT	38	13%	8%	68%	13%
16	NEW ORLEANS	WSDTT	33	0%	0%	27%	39%
16	OKLAHOMA CITY	PCT	78	0%	5%	83%	12%
17	CENTRAL TX VETERANS HCS: Austin	PCT	201	2%	2%	78%	11%
17	CENTRAL TX VETERANS HCS: Temple	PCT	291	2%	2%	66%	20%
17	CENTRAL TX VETERANS HCS: Waco	PCT	112	4%	6%	79%	12%
17	NORTH TX HCS: Dallas	PCT	236	6%	6%	75%	9%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	2%	2%	88%	8%
18	EL PASO VETERANS HCS	PCT	145	10%	12%	72%	14%
18	NEW MEXICO HCS: Albuquerque	PCT	476	6%	6%	69%	9%
18	PHOENIX	PCT	136	7%	4%	79%	7%
18	SOUTHERN AZ HCS: Tucson	PCT	162	2%	4%	75%	12%
19	CHEYENNE	PCT	18	0%	6%	56%	22%
19	GRAND JUNCTION	PCT	99	5%	3%	79%	10%
19	SALT LAKE CITY HCS	PCT	56	0%	4%	91%	9%
19	SOUTHERN CO HCS: Pueblo	PCT	214	7%	7%	72%	13%
20	BOISE	PCT	82	5%	0%	76%	1%
20	PORTLAND	PCT	288	1%	4%	71%	12%
20	PUGET SOUND HCS: American Lake	PCT	186	1%	3%	67%	29%
20	PUGET SOUND HCS: Seattle	PCT	158	4%	4%	70%	16%
20	SPOKANE	PCT	222	4%	1%	77%	10%
21	HONOLULU	PCT	35	6%	14%	71%	14%
21	NORTHERN CA HCS	PCT	151	9%	5%	79%	5%
21	PALO ALTO HCS: San Jose	PCT	63	10%	3%	73%	6%
21	SAN FRANCISCO	PCT	115	6%	5%	75%	8%
21	SAN FRANCISCO	SUPT	46	0%	0%	96%	2%
22	GREATER LOS ANGELES HCS: East LA	PCT	79	9%	4%	81%	6%
22	GREATER LOS ANGELES HCS: West LA	PCT	190	3%	2%	67%	6%
22	LOMA LINDA	PCT	55	0%	2%	96%	2%
22	LOMA LINDA	WSDTT	35	0%	0%	29%	51%
22	SAN DIEGO HCS CA	PCT	236	7%	5%	71%	13%
22	SOUTHERN NV HCS: Las Vegas	PCT	391	8%	7%	77%	7%
23	BLACK HILLS HCS: Fort Meade	SUPT	124	11%	11%	57%	5%
23	CENTRAL IA HCS: Knoxville	PCT	110	5%	4%	88%	3%
23	IOWA CITY	PCT	151	5%	5%	75%	9%
23	MINNEAPOLIS	PCT	166	3%	1%	73%	13%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	88	18%	1%	53%	16%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	87	7%	1%	74%	18%
23	SIOUX FALLS	PCT	15	7%	0%	73%	7%
TOTAL			12,944				
MEAN			120	5%	4%	73%	11%
S.D.			94	5%	3%	14%	9%

Table 2-14. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2002.

VISN	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner of War	Service Connected
1	627	69%	4%	2%	57%
2	221	80%	4%	2%	56%
3	652	85%	4%	3%	53%
4	247	81%	9%	4%	56%
5	294	78%	8%	9%	48%
6	624	85%	6%	4%	53%
7	734	89%	8%	2%	54%
8	607	79%	9%	2%	57%
9	432	91%	8%	1%	58%
10	674	84%	6%	2%	48%
11	335	87%	6%	2%	46%
12	218	67%	9%	0%	56%
15	517	87%	11%	2%	50%
16	1,292	87%	12%	2%	65%
17	1,091	81%	5%	1%	60%
18	919	78%	5%	4%	64%
19	387	82%	9%	2%	60%
20	936	73%	7%	2%	62%
21	410	86%	10%	3%	57%
22	986	78%	8%	3%	55%
23	741	73%	6%	2%	62%
TOTAL	12,944				
MEAN	616	81%	7%	3%	56%
S.D	302	6%	2%	2%	5%

Table 2-15. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner of War	Service Connected
1	BOSTON HCS: Boston	PCT	85	72%	1%	0%	66%
1	BOSTON HCS: Boston	WSDTT	67	6%	0%	0%	48%
1	BOSTON HCS: Brockton	PCT	60	93%	0%	3%	60%
1	BOSTON HCS: Brockton	SUPT	42	98%	0%	0%	69%
1	CONNECTICUT HCS: West Haven	PCT	93	68%	10%	10%	53%
1	CONNECTICUT HCS: West Haven	SUPT	44	82%	16%	0%	50%
1	MANCHESTER	PCT	49	80%	8%	0%	61%
1	PROVIDENCE	PCT	139	68%	4%	1%	51%
1	WHITE RIVER JUNCTION	PCT	48	81%	2%	0%	73%
2	CANANDAIGUA	PCT	78	77%	1%	1%	53%
2	SYRACUSE	PCT	122	80%	4%	2%	61%
2	WESTERN NY HCS: Batavia	PCT	21	86%	10%	5%	38%
3	BRONX	PCT	66	94%	3%	12%	68%
3	HUDSON VALLEY HCS: Castle Point	PCT	82	84%	20%	0%	65%
3	NEW JERSEY HCS: East Orange	PCT	171	80%	1%	2%	51%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	197	89%	2%	3%	47%
3	NEW YORK HARBOR HCS: New York	PCT	136	80%	5%	1%	47%
4	COATESVILLE	PCT	46	91%	13%	2%	85%
4	PHILADELPHIA	PCT	108	72%	10%	4%	55%
4	PITTSBURGH HCS: Highland Drive	PCT	50	94%	10%	8%	50%
4	PITTSBURGH HCS: Highland Drive	SUPT	43	79%	2%	0%	37%
5	MARYLAND HCS: Baltimore	PCT	127	61%	3%	19%	57%
5	MARYLAND HCS: Perry Point	PCT	19	58%	5%	0%	42%
5	WASHINGTON DC	PCT	148	94%	12%	1%	41%
6	ASHEVILLE	PCT	57	98%	11%	11%	75%
6	DURHAM	PCT	171	75%	0%	0%	44%
6	FAYETTEVILLE NC	PCT	113	96%	12%	0%	70%
6	HAMPTON	PCT	175	78%	4%	5%	49%
6	SALISBURY	PCT	108	92%	8%	7%	44%
7	ATLANTA	PCT	117	89%	8%	3%	58%
7	AUGUSTA	PCT	84	93%	6%	1%	56%
7	BIRMINGHAM	PCT	67	87%	6%	0%	49%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	145	92%	10%	0%	57%
7	CHARLESTON	PCT	101	83%	7%	8%	49%
7	DUBLIN	PCT	220	90%	10%	2%	52%
8	BAY PINES	SUPT	264	81%	6%	3%	55%
8	MIAMI	PCT	88	84%	2%	0%	58%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	166	75%	15%	1%	55%
8	SAN JUAN	PCT	39	79%	15%	3%	74%
8	TAMPA	PCT	50	80%	14%	4%	66%
9	HUNTINGTON	PCT	102	78%	6%	0%	77%
9	LEXINGTON	PCT	32	91%	0%	0%	59%
9	LOUISVILLE	PCT	52	96%	19%	4%	62%
9	MEMPHIS	PCT	116	94%	3%	3%	48%
9	MOUNTAIN HOME	PCT	130	95%	12%	0%	48%
10	BRECKSVILLE	PCT	248	92%	11%	2%	51%
10	BRECKSVILLE	WSDTT	29	3%	0%	0%	45%
10	CHILLICOTHE	PCT	179	92%	0%	0%	45%
10	CINCINNATI	PCT	111	75%	7%	5%	44%
10	COLUMBUS	PCT	85	87%	4%	4%	47%
10	DAYTON	PCT	22	91%	9%	5%	59%
11	ANN ARBOR HCS	PCT	107	83%	7%	2%	42%
11	BATTLE CREEK	PCT	57	95%	7%	0%	51%
11	DANVILLE	PCT	130	88%	2%	4%	49%
11	NORTHERN IN HCS: Fort Wayne	PCT	16	75%	6%	0%	44%
11	NORTHERN IN HCS: Marion	PCT	25	84%	12%	4%	36%

Table 2-15. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner of War	Service Connected
12	CHICAGO HCS: West Side	PCT	104	93%	11%	0%	50%
12	HINES	PCT	47	98%	19%	2%	45%
12	MADISON	WSDTT	67	4%	0%	0%	73%
15	EASTERN KS HCS: Topeka	PCT	62	87%	19%	0%	50%
15	KANSAS CITY	PCT	165	84%	2%	2%	45%
15	POPLAR BLUFF	PCT	33	97%	3%	0%	88%
15	ST. LOUIS	PCT	165	94%	23%	4%	52%
15	WICHITA	PCT	92	78%	1%	0%	41%
16	CENTRAL AR VETERANS HCS:No.Little Rock	PCT	622	93%	17%	2%	80%
16	FAYETTEVILLE AR	PCT	92	95%	1%	0%	51%
16	GULF COAST VETERANS HCS: Biloxi	PCT	101	92%	17%	0%	60%
16	HOUSTON	PCT	297	78%	9%	1%	45%
16	JACKSON	PCT	31	84%	3%	6%	74%
16	NEW ORLEANS	PCT	38	79%	8%	0%	50%
16	NEW ORLEANS	WSDTT	33	6%	3%	0%	67%
16	OKLAHOMA CITY	PCT	78	91%	6%	6%	55%
17	CENTRAL TX VETERANS HCS: Austin	PCT	201	79%	0%	3%	68%
17	CENTRAL TX VETERANS HCS: Temple	PCT	291	69%	4%	1%	56%
17	CENTRAL TX VETERANS HCS: Waco	PCT	112	89%	20%	1%	55%
17	NORTH TX HCS: Dallas	PCT	236	84%	0%	0%	52%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	92%	6%	0%	68%
18	EL PASO VETERANS HCS	PCT	145	84%	8%	3%	71%
18	NEW MEXICO HCS: Albuquerque	PCT	476	74%	4%	5%	65%
18	PHOENIX	PCT	136	84%	1%	1%	57%
18	SOUTHERN AZ HCS: Tucson	PCT	162	80%	6%	4%	57%
19	CHEYENNE	PCT	18	67%	17%	6%	72%
19	GRAND JUNCTION	PCT	99	80%	6%	1%	72%
19	SALT LAKE CITY HCS	PCT	56	91%	13%	4%	50%
19	SOUTHERN CO HCS: Pueblo	PCT	214	82%	8%	1%	56%
20	BOISE	PCT	82	77%	4%	2%	66%
20	PORTLAND	PCT	288	63%	11%	1%	59%
20	PUGET SOUND HCS: American Lake	PCT	186	72%	6%	1%	62%
20	PUGET SOUND HCS: Seattle	PCT	158	71%	4%	3%	59%
20	SPOKANE	PCT	222	85%	5%	3%	66%
21	HONOLULU	PCT	35	94%	6%	0%	54%
21	NORTHERN CA HCS	PCT	151	88%	11%	4%	66%
21	PALO ALTO HCS: San Jose	PCT	63	78%	2%	3%	38%
21	SAN FRANCISCO	PCT	115	85%	9%	3%	57%
21	SAN FRANCISCO	SUPT	46	85%	24%	0%	57%
22	GREATER LOS ANGELES HCS: East LA	PCT	79	92%	16%	5%	52%
22	GREATER LOS ANGELES HCS: West LA	PCT	190	60%	9%	1%	36%
22	LOMA LINDA	PCT	55	98%	22%	4%	51%
22	LOMA LINDA	WSDTT	35	6%	0%	0%	51%
22	SAN DIEGO HCS CA	PCT	236	80%	13%	3%	61%
22	SOUTHERN NV HCS: Las Vegas	PCT	391	86%	2%	3%	62%
23	BLACK HILLS HCS: Fort Meade	SUPT	124	52%	4%	2%	45%
23	CENTRAL IA HCS: Knoxville	PCT	110	95%	2%	2%	85%
23	IOWA CITY	PCT	151	77%	8%	1%	56%
23	MINNEAPOLIS	PCT	166	73%	7%	1%	64%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	88	70%	1%	1%	57%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	87	75%	13%	8%	68%
23	SIOUX FALLS	PCT	15	40%	0%	7%	67%
TOTAL			12,944				
MEAN			120	79%	7%	2%	57%
S.D.			94	19%	6%	3%	11%

Table 2-16. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2002.

VISN	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Disorder
1	613	56%	58%	9%	11%
2	216	80%	42%	7%	5%
3	580	46%	40%	7%	5%
4	245	65%	31%	5%	6%
5	275	59%	52%	4%	6%
6	613	74%	35%	3%	4%
7	726	75%	32%	7%	4%
8	594	75%	35%	6%	11%
9	430	83%	53%	3%	8%
10	669	48%	37%	6%	5%
11	333	65%	47%	8%	10%
12	216	67%	39%	8%	23%
15	507	62%	50%	8%	12%
16	1,282	78%	57%	8%	8%
17	1,087	74%	45%	8%	5%
18	859	66%	38%	4%	8%
19	378	64%	46%	7%	12%
20	903	73%	60%	10%	13%
21	395	57%	54%	5%	7%
22	956	76%	42%	9%	2%
23	729	62%	57%	6%	12%
TOTAL	12,606				
MEAN	600	67%	45%	7%	8%
S.D	274	10%	9%	2%	5%

Table 2-17. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Personality Disorder
1	BOSTON HCS: Boston	PCT	83	63%	53%	11%	11%
1	BOSTON HCS: Boston	WSDTT	66	70%	90%	17%	13%
1	BOSTON HCS: Brockton	PCT	60	57%	13%	10%	3%
1	BOSTON HCS: Brockton	SUPT	41	41%	5%	5%	40%
1	CONNECTICUT HCS: West Haven	PCT	89	44%	55%	10%	5%
1	CONNECTICUT HCS: West Haven	SUPT	43	56%	44%	17%	14%
1	MANCHESTER	PCT	49	71%	88%	4%	6%
1	PROVIDENCE	PCT	134	51%	75%	6%	6%
1	WHITE RIVER JUNCTION	PCT	48	56%	65%	6%	13%
2	CANANDAIGUA	PCT	77	71%	39%	14%	4%
2	SYRACUSE	PCT	118	86%	48%	2%	7%
2	WESTERN NY HCS: Batavia	PCT	21	71%	33%	5%	5%
3	BRONX	PCT	65	46%	36%	5%	12%
3	HUDSON VALLEY HCS: Castle Point	PCT	82	73%	96%	44%	1%
3	NEW JERSEY HCS: East Orange	PCT	103	36%	52%	9%	4%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	197	42%	27%	4%	3%
3	NEW YORK HARBOR HCS: New York	PCT	133	42%	33%	11%	7%
4	COATESVILLE	PCT	46	76%	13%	0%	4%
4	PHILADELPHIA	PCT	106	67%	40%	7%	5%
4	PITTSBURGH HCS: Highland Drive	PCT	50	40%	30%	2%	6%
4	PITTSBURGH HCS: Highland Drive	SUPT	43	77%	33%	7%	9%
5	MARYLAND HCS: Baltimore	PCT	114	67%	36%	2%	9%
5	MARYLAND HCS: Perry Point	PCT	19	63%	28%	16%	26%
5	WASHINGTON DC	PCT	142	51%	67%	4%	0%
6	ASHEVILLE	PCT	57	98%	37%	0%	2%
6	DURHAM	PCT	171	64%	66%	5%	2%
6	FAYETTEVILLE NC	PCT	111	94%	28%	2%	4%
6	HAMPTON	PCT	167	61%	22%	4%	6%
6	SALISBURY	PCT	107	79%	13%	1%	6%
7	ATLANTA	PCT	114	65%	18%	3%	0%
7	AUGUSTA	PCT	83	63%	75%	5%	1%
7	BIRMINGHAM	PCT	67	84%	45%	9%	3%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	144	78%	6%	8%	0%
7	CHARLESTON	PCT	98	57%	61%	10%	4%
7	DUBLIN	PCT	220	89%	25%	8%	11%
8	BAY PINES	SUPT	258	73%	28%	7%	9%
8	MIAMI	PCT	86	77%	36%	7%	5%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	162	73%	36%	5%	17%
8	SAN JUAN	PCT	39	85%	23%	3%	0%
8	TAMPA	PCT	49	78%	73%	4%	22%
9	HUNTINGTON	PCT	102	92%	34%	0%	8%
9	LEXINGTON	PCT	31	71%	0%	0%	6%
9	LOUISVILLE	PCT	52	94%	4%	0%	2%
9	MEMPHIS	PCT	116	84%	79%	6%	8%
9	MOUNTAIN HOME	PCT	129	73%	76%	4%	11%
10	BRECKSVILLE	PCT	245	58%	42%	6%	8%
10	BRECKSVILLE	WSDTT	29	76%	68%	11%	31%
10	CHILLICOTHE	PCT	179	20%	0%	0%	0%
10	CINCINNATI	PCT	110	47%	73%	15%	3%
10	COLUMBUS	PCT	85	62%	27%	2%	1%
10	DAYTON	PCT	21	71%	95%	14%	0%
11	ANN ARBOR HCS	PCT	105	68%	72%	11%	17%
11	BATTLE CREEK	PCT	57	65%	7%	2%	0%
11	DANVILLE	PCT	130	62%	55%	9%	8%
11	NORTHERN IN HCS: Fort Wayne	PCT	16	50%	25%	0%	19%
11	NORTHERN IN HCS: Marion	PCT	25	76%	8%	4%	0%

Table 2-17. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Personality Disorder
12	CHICAGO HCS: West Side	PCT	103	61%	25%	6%	4%
12	HINES	PCT	47	68%	30%	2%	55%
12	MADISON	WSDTT	66	74%	69%	18%	31%
15	EASTERN KS HCS: Topeka	PCT	61	90%	53%	22%	10%
15	KANSAS CITY	PCT	165	61%	90%	10%	22%
15	POPLAR BLUFF	PCT	33	91%	39%	0%	0%
15	ST. LOUIS	PCT	157	57%	3%	0%	1%
15	WICHITA	PCT	91	44%	66%	10%	21%
16	CENTRAL AR VETERANS HCS:No.Little Rock	PCT	619	90%	49%	10%	5%
16	FAYETTEVILLE AR	PCT	91	69%	42%	3%	5%
16	GULF COAST VETERANS HCS: Biloxi	PCT	98	55%	65%	15%	12%
16	HOUSTON	PCT	297	71%	76%	3%	16%
16	JACKSON	PCT	29	72%	19%	0%	3%
16	NEW ORLEANS	PCT	38	66%	68%	3%	5%
16	NEW ORLEANS	WSDTT	32	84%	91%	15%	6%
16	OKLAHOMA CITY	PCT	78	58%	63%	6%	1%
17	CENTRAL TX VETERANS HCS: Austin	PCT	200	72%	31%	7%	3%
17	CENTRAL TX VETERANS HCS: Temple	PCT	291	76%	41%	11%	9%
17	CENTRAL TX VETERANS HCS: Waco	PCT	109	74%	41%	12%	9%
17	NORTH TX HCS: Dallas	PCT	236	89%	65%	8%	1%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	61%	46%	4%	2%
18	EL PASO VETERANS HCS	PCT	142	63%	34%	3%	6%
18	NEW MEXICO HCS: Albuquerque	PCT	452	65%	41%	6%	12%
18	PHOENIX	PCT	105	75%	65%	6%	4%
18	SOUTHERN AZ HCS: Tucson	PCT	160	65%	12%	1%	2%
19	CHEYENNE	PCT	18	83%	56%	17%	11%
19	GRAND JUNCTION	PCT	96	79%	92%	12%	37%
19	SALT LAKE CITY HCS	PCT	55	40%	39%	6%	2%
19	SOUTHERN CO HCS: Pueblo	PCT	209	62%	25%	4%	4%
20	BOISE	PCT	77	78%	54%	14%	15%
20	PORTLAND	PCT	266	80%	61%	20%	16%
20	PUGET SOUND HCS: American Lake	PCT	184	61%	45%	8%	4%
20	PUGET SOUND HCS: Seattle	PCT	154	69%	61%	8%	4%
20	SPOKANE	PCT	222	75%	72%	5%	22%
21	HONOLULU	PCT	35	43%	42%	0%	14%
21	NORTHERN CA HCS	PCT	144	63%	67%	7%	5%
21	PALO ALTO HCS: San Jose	PCT	61	51%	52%	7%	5%
21	SAN FRANCISCO	PCT	110	53%	50%	2%	5%
21	SAN FRANCISCO	SUPT	45	69%	28%	7%	17%
22	GREATER LOS ANGELES HCS: East LA	PCT	78	51%	69%	6%	9%
22	GREATER LOS ANGELES HCS: West LA	PCT	179	72%	42%	21%	2%
22	LOMA LINDA	PCT	53	94%	35%	4%	0%
22	LOMA LINDA	WSDTT	35	80%	74%	29%	14%
22	SAN DIEGO HCS CA	PCT	220	65%	52%	9%	1%
22	SOUTHERN NV HCS: Las Vegas	PCT	391	85%	29%	4%	0%
23	BLACK HILLS HCS: Fort Meade	SUPT	123	30%	32%	4%	4%
23	CENTRAL IA HCS: Knoxville	PCT	110	91%	18%	3%	8%
23	IOWA CITY	PCT	150	71%	55%	8%	20%
23	MINNEAPOLIS	PCT	159	53%	81%	3%	11%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	88	63%	76%	10%	3%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	86	69%	78%	9%	26%
23	SIOUX FALLS	PCT	13	62%	64%	7%	0%
TOTAL			12,606				
MEAN			117	67%	47%	7%	9%
S.D.			93	15%	24%	7%	9%

Table 2-18. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2002.

VISN	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
1	627	70%	7%	15%	8%
2	221	75%	7%	14%	4%
3	652	79%	3%	15%	2%
4	247	66%	6%	24%	4%
5	294	92%	1%	5%	0%
6	624	84%	7%	7%	2%
7	734	80%	10%	9%	1%
8	607	94%	2%	2%	1%
9	432	68%	8%	22%	1%
10	674	73%	2%	15%	11%
11	335	68%	4%	19%	9%
12	218	71%	3%	24%	2%
15	517	79%	8%	10%	3%
16	1,292	84%	5%	9%	2%
17	1,091	94%	3%	3%	1%
18	919	83%	4%	11%	2%
19	387	49%	4%	43%	4%
20	936	79%	4%	11%	3%
21	410	56%	7%	30%	7%
22	986	82%	5%	7%	3%
23	741	65%	3%	10%	22%
TOTAL	12,944				
MEAN	616	76%	5%	15%	4%
S.D	302	12%	2%	10%	5%

Table 2-19. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
1	BOSTON HCS: Boston	PCT	85	51%	8%	34%	7%
1	BOSTON HCS: Boston	WSDTT	67	76%	4%	12%	7%
1	BOSTON HCS: Brockton	PCT	60	38%	17%	8%	37%
1	BOSTON HCS: Brockton	SUPT	42	67%	5%	5%	21%
1	CONNECTICUT HCS: West Haven	PCT	93	71%	12%	15%	2%
1	CONNECTICUT HCS: West Haven	SUPT	44	57%	9%	30%	5%
1	MANCHESTER	PCT	49	82%	2%	12%	4%
1	PROVIDENCE	PCT	139	92%	2%	6%	0%
1	WHITE RIVER JUNCTION	PCT	48	79%	2%	19%	0%
2	CANANDAIGUA	PCT	78	65%	15%	14%	5%
2	SYRACUSE	PCT	122	84%	2%	11%	2%
2	WESTERN NY HCS: Batavia	PCT	21	57%	5%	29%	10%
3	BRONX	PCT	66	88%	3%	6%	3%
3	HUDSON VALLEY HCS: Castle Point	PCT	82	79%	2%	16%	2%
3	NEW JERSEY HCS: East Orange	PCT	171	89%	0%	11%	0%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	197	69%	7%	23%	2%
3	NEW YORK HARBOR HCS: New York	PCT	136	78%	4%	14%	4%
4	COATESVILLE	PCT	46	67%	0%	30%	2%
4	PHILADELPHIA	PCT	108	73%	7%	16%	4%
4	PITTSBURGH HCS: Highland Drive	PCT	50	24%	12%	52%	8%
4	PITTSBURGH HCS: Highland Drive	SUPT	43	93%	0%	7%	0%
5	MARYLAND HCS: Baltimore	PCT	127	90%	0%	7%	1%
5	MARYLAND HCS: Perry Point	PCT	19	68%	0%	32%	0%
5	WASHINGTON DC	PCT	148	97%	3%	0%	0%
6	ASHEVILLE	PCT	57	95%	0%	4%	2%
6	DURHAM	PCT	171	67%	16%	13%	4%
6	FAYETTEVILLE NC	PCT	113	81%	6%	11%	3%
6	HAMPTON	PCT	175	94%	5%	1%	1%
6	SALISBURY	PCT	108	94%	1%	5%	0%
7	ATLANTA	PCT	117	99%	1%	0%	0%
7	AUGUSTA	PCT	84	63%	18%	17%	2%
7	BIRMINGHAM	PCT	67	69%	1%	28%	1%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	145	83%	6%	10%	1%
7	CHARLESTON	PCT	101	91%	5%	3%	0%
7	DUBLIN	PCT	220	71%	20%	7%	1%
8	BAY PINES	SUPT	264	95%	4%	1%	0%
8	MIAMI	PCT	88	97%	2%	0%	1%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	166	96%	1%	2%	1%
8	SAN JUAN	PCT	39	97%	3%	0%	0%
8	TAMPA	PCT	50	76%	2%	18%	4%
9	HUNTINGTON	PCT	102	14%	4%	78%	1%
9	LEXINGTON	PCT	32	84%	6%	9%	0%
9	LOUISVILLE	PCT	52	100%	0%	0%	0%
9	MEMPHIS	PCT	116	78%	17%	3%	2%
9	MOUNTAIN HOME	PCT	130	84%	8%	5%	2%
10	BRECKSVILLE	PCT	248	69%	0%	28%	2%
10	BRECKSVILLE	WSDTT	29	79%	3%	17%	0%
10	CHILLICOTHE	PCT	179	70%	0%	1%	29%
10	CINCINNATI	PCT	111	68%	5%	16%	12%
10	COLUMBUS	PCT	85	89%	7%	4%	0%
10	DAYTON	PCT	22	82%	0%	18%	0%
11	ANN ARBOR HCS	PCT	107	77%	8%	13%	2%
11	BATTLE CREEK	PCT	57	65%	0%	23%	12%
11	DANVILLE	PCT	130	58%	2%	24%	16%
11	NORTHERN IN HCS: Fort Wayne	PCT	16	75%	6%	13%	6%
11	NORTHERN IN HCS: Marion	PCT	25	88%	0%	12%	0%

Table 2-19. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
12	CHICAGO HCS: West Side	PCT	104	56%	3%	41%	0%
12	HINES	PCT	47	68%	6%	17%	9%
12	MADISON	WSDTT	67	96%	0%	3%	1%
15	EASTERN KS HCS: Topeka	PCT	62	97%	2%	2%	0%
15	KANSAS CITY	PCT	165	73%	11%	13%	3%
15	POPLAR BLUFF	PCT	33	97%	0%	3%	0%
15	ST. LOUIS	PCT	165	87%	9%	2%	1%
15	WICHITA	PCT	92	57%	7%	25%	11%
16	CENTRAL AR VETERANS HCS:No.Little Rock	PCT	622	90%	6%	3%	1%
16	FAYETTEVILLE AR	PCT	92	97%	0%	2%	1%
16	GULF COAST VETERANS HCS: Biloxi	PCT	101	64%	16%	13%	7%
16	HOUSTON	PCT	297	84%	2%	13%	0%
16	JACKSON	PCT	31	65%	6%	26%	0%
16	NEW ORLEANS	PCT	38	89%	0%	5%	5%
16	NEW ORLEANS	WSDTT	33	82%	3%	9%	6%
16	OKLAHOMA CITY	PCT	78	56%	1%	36%	6%
17	CENTRAL TX VETERANS HCS: Austin	PCT	201	89%	6%	4%	0%
17	CENTRAL TX VETERANS HCS: Temple	PCT	291	98%	1%	1%	0%
17	CENTRAL TX VETERANS HCS: Waco	PCT	112	98%	0%	0%	1%
17	NORTH TX HCS: Dallas	PCT	236	94%	0%	3%	2%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	92%	4%	3%	1%
18	EL PASO VETERANS HCS	PCT	145	52%	2%	43%	3%
18	NEW MEXICO HCS: Albuquerque	PCT	476	91%	6%	1%	1%
18	PHOENIX	PCT	136	74%	0%	21%	1%
18	SOUTHERN AZ HCS: Tucson	PCT	162	94%	1%	3%	2%
19	CHEYENNE	PCT	18	89%	0%	11%	0%
19	GRAND JUNCTION	PCT	99	14%	1%	85%	0%
19	SALT LAKE CITY HCS	PCT	56	63%	5%	25%	7%
19	SOUTHERN CO HCS: Pueblo	PCT	214	58%	5%	31%	6%
20	BOISE	PCT	82	94%	0%	2%	4%
20	PORTLAND	PCT	288	74%	9%	8%	1%
20	PUGET SOUND HCS: American Lake	PCT	186	88%	1%	8%	3%
20	PUGET SOUND HCS: Seattle	PCT	158	79%	2%	16%	3%
20	SPOKANE	PCT	222	74%	5%	18%	3%
21	HONOLULU	PCT	35	80%	6%	9%	3%
21	NORTHERN CA HCS	PCT	151	43%	7%	45%	5%
21	PALO ALTO HCS: San Jose	PCT	63	75%	5%	11%	8%
21	SAN FRANCISCO	PCT	115	49%	10%	28%	11%
21	SAN FRANCISCO	SUPT	46	70%	4%	24%	2%
22	GREATER LOS ANGELES HCS: East LA	PCT	79	49%	8%	32%	10%
22	GREATER LOS ANGELES HCS: West LA	PCT	190	79%	1%	12%	4%
22	LOMA LINDA	PCT	55	87%	5%	5%	2%
22	LOMA LINDA	WSDTT	35	97%	0%	3%	0%
22	SAN DIEGO HCS CA	PCT	236	70%	14%	5%	6%
22	SOUTHERN NV HCS: Las Vegas	PCT	391	96%	2%	2%	0%
23	BLACK HILLS HCS: Fort Meade	SUPT	124	33%	2%	6%	59%
23	CENTRAL IA HCS: Knoxville	PCT	110	37%	0%	6%	56%
23	IOWA CITY	PCT	151	69%	3%	15%	13%
23	MINNEAPOLIS	PCT	166	86%	2%	7%	4%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	88	74%	7%	17%	2%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	87	92%	3%	5%	0%
23	SIOUX FALLS	PCT	15	60%	0%	33%	0%
TOTAL			12,944				
MEAN			120	76%	4%	14%	5%
S.D.			94	18%	5%	15%	9%

Table 2-20. Medical Status, Incarcertation, Sexual and Noncombat Trauma Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2002.

VISN	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	PTSD Due to Sexual Trauma	PTSD Due to Noncombat Nonsexual Trauma
1	615	69%	10%	9%	9%
2	219	73%	8%	6%	9%
3	644	79%	9%	1%	5%
4	246	76%	12%	11%	12%
5	280	81%	14%	4%	3%
6	614	79%	16%	3%	15%
7	729	75%	21%	3%	6%
8	603	79%	14%	3%	6%
9	427	83%	12%	2%	6%
10	671	87%	10%	13%	14%
11	334	70%	15%	3%	6%
12	217	76%	17%	32%	8%
15	506	80%	20%	2%	4%
16	1,266	82%	17%	4%	6%
17	1,086	79%	20%	5%	8%
18	871	74%	6%	9%	10%
19	384	83%	17%	6%	4%
20	908	78%	17%	11%	15%
21	401	73%	17%	5%	9%
22	943	81%	21%	6%	17%
23	731	74%	14%	7%	12%
TOTAL	12,695				
MEAN	605	78%	15%	7%	9%
S.D	293	5%	4%	7%	4%

Table 2-21. Medical Status, Incarceration, Sexual and Noncombat Trauma Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	PTSD Due to Sexual Trauma	PTSD Due to Noncombat Nonsexual Trauma
1	BOSTON HCS: Boston	PCT	84	68%	15%	6%	12%
1	BOSTON HCS: Boston	WSDTT	67	49%	1%	52%	22%
1	BOSTON HCS: Brockton	PCT	58	84%	10%	2%	3%
1	BOSTON HCS: Brockton	SUPT	42	81%	19%	0%	0%
1	CONNECTICUT HCS: West Haven	PCT	91	76%	10%	2%	8%
1	CONNECTICUT HCS: West Haven	SUPT	43	65%	18%	0%	9%
1	MANCHESTER	PCT	48	50%	4%	4%	14%
1	PROVIDENCE	PCT	135	76%	8%	6%	6%
1	WHITE RIVER JUNCTION	PCT	47	57%	4%	2%	13%
2	CANANDAIGUA	PCT	78	69%	10%	4%	9%
2	SYRACUSE	PCT	120	77%	8%	5%	8%
2	WESTERN NY HCS: Batavia	PCT	21	62%	0%	19%	14%
3	BRONX	PCT	64	89%	8%	2%	2%
3	HUDSON VALLEY HCS: Castle Point	PCT	82	84%	13%	2%	16%
3	NEW JERSEY HCS: East Orange	PCT	167	75%	8%	0%	1%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	196	83%	8%	0%	4%
3	NEW YORK HARBOR HCS: New York	PCT	135	70%	8%	4%	8%
4	COATESVILLE	PCT	45	76%	13%	26%	26%
4	PHILADELPHIA	PCT	108	74%	7%	14%	8%
4	PITTSBURGH HCS: Highland Drive	PCT	50	72%	8%	0%	2%
4	PITTSBURGH HCS: Highland Drive	SUPT	43	86%	28%	2%	19%
5	MARYLAND HCS: Baltimore	PCT	116	84%	7%	8%	5%
5	MARYLAND HCS: Perry Point	PCT	19	74%	21%	11%	11%
5	WASHINGTON DC	PCT	145	79%	18%	1%	1%
6	ASHEVILLE	PCT	56	82%	2%	0%	0%
6	DURHAM	PCT	170	71%	27%	4%	27%
6	FAYETTEVILLE NC	PCT	110	85%	10%	1%	0%
6	HAMPTON	PCT	170	82%	19%	2%	22%
6	SALISBURY	PCT	108	81%	10%	6%	9%
7	ATLANTA	PCT	115	88%	26%	0%	2%
7	AUGUSTA	PCT	84	67%	26%	2%	8%
7	BIRMINGHAM	PCT	67	88%	16%	4%	7%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	145	72%	21%	1%	6%
7	CHARLESTON	PCT	99	82%	10%	4%	5%
7	DUBLIN	PCT	219	67%	22%	5%	9%
8	BAY PINES	SUPT	262	84%	17%	2%	7%
8	MIAMI	PCT	88	78%	17%	9%	8%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	164	69%	10%	2%	4%
8	SAN JUAN	PCT	39	77%	5%	3%	10%
8	TAMPA	PCT	50	86%	8%	8%	6%
9	HUNTINGTON	PCT	100	88%	9%	3%	3%
9	LEXINGTON	PCT	32	91%	0%	3%	3%
9	LOUISVILLE	PCT	52	50%	13%	0%	0%
9	MEMPHIS	PCT	116	78%	18%	2%	2%
9	MOUNTAIN HOME	PCT	127	96%	12%	1%	14%
10	BRECKSVILLE	PCT	247	87%	17%	1%	3%
10	BRECKSVILLE	WSDTT	29	69%	7%	76%	31%
10	CHILLICOTHE	PCT	178	96%	1%	1%	8%
10	CINCINNATI	PCT	110	79%	14%	9%	12%
10	COLUMBUS	PCT	85	85%	6%	58%	56%
10	DAYTON	PCT	22	91%	18%	18%	18%
11	ANN ARBOR HCS	PCT	106	77%	13%	5%	10%
11	BATTLE CREEK	PCT	57	70%	18%	4%	0%
11	DANVILLE	PCT	130	58%	10%	2%	3%
11	NORTHERN IN HCS: Fort Wayne	PCT	16	94%	50%	6%	19%
11	NORTHERN IN HCS: Marion	PCT	25	92%	20%	0%	4%

Table 2-21. Medical Status, Incarceration, Sexual and Noncombat Trauma Among Veterans in Specialized Outpatient PTSD Programs: FY 2002.

VISN	FACILITY	PROGRAM	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	PTSD Due to Sexual Trauma	PTSD Due to Noncombat Nonsexual Trauma
12	CHICAGO HCS: West Side	PCT	104	76%	31%	3%	4%
12	HINES	PCT	47	79%	6%	2%	4%
12	MADISON	WSDTT	66	73%	4%	97%	16%
15	EASTERN KS HCS: Topeka	PCT	60	72%	19%	2%	8%
15	KANSAS CITY	PCT	165	95%	21%	2%	5%
15	POPLAR BLUFF	PCT	33	85%	9%	3%	0%
15	ST. LOUIS	PCT	158	74%	15%	2%	1%
15	WICHITA	PCT	90	67%	32%	2%	5%
16	CENTRAL AR VETERANS HCS:No.Little Rock	PCT	617	88%	17%	3%	6%
16	FAYETTEVILLE AR	PCT	81	86%	10%	2%	0%
16	GULF COAST VETERANS HCS: Biloxi	PCT	97	86%	14%	5%	8%
16	HOUSTON	PCT	293	73%	21%	3%	5%
16	JACKSON	PCT	31	68%	3%	3%	0%
16	NEW ORLEANS	PCT	37	86%	13%	0%	3%
16	NEW ORLEANS	WSDTT	32	72%	0%	53%	50%
16	OKLAHOMA CITY	PCT	78	71%	27%	1%	1%
17	CENTRAL TX VETERANS HCS: Austin	PCT	199	78%	21%	9%	6%
17	CENTRAL TX VETERANS HCS: Temple	PCT	291	80%	31%	10%	6%
17	CENTRAL TX VETERANS HCS: Waco	PCT	111	69%	16%	3%	19%
17	NORTH TX HCS: Dallas	PCT	236	81%	21%	0%	7%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	249	82%	9%	2%	7%
18	EL PASO VETERANS HCS	PCT	143	85%	10%	16%	10%
18	NEW MEXICO HCS: Albuquerque	PCT	466	72%	4%	9%	9%
18	PHOENIX	PCT	102	91%	2%	1%	1%
18	SOUTHERN AZ HCS: Tucson	PCT	160	60%	10%	10%	17%
19	CHEYENNE	PCT	18	89%	28%	33%	6%
19	GRAND JUNCTION	PCT	99	88%	15%	2%	1%
19	SALT LAKE CITY HCS	PCT	54	85%	20%	5%	5%
19	SOUTHERN CO HCS: Pueblo	PCT	213	79%	17%	5%	5%
20	BOISE	PCT	80	84%	7%	10%	5%
20	PORTLAND	PCT	268	73%	24%	10%	21%
20	PUGET SOUND HCS: American Lake	PCT	186	81%	15%	15%	17%
20	PUGET SOUND HCS: Seattle	PCT	152	76%	20%	9%	19%
20	SPOKANE	PCT	222	83%	12%	10%	7%
21	HONOLULU	PCT	35	77%	11%	0%	3%
21	NORTHERN CA HCS	PCT	148	79%	15%	1%	3%
21	PALO ALTO HCS: San Jose	PCT	59	71%	13%	13%	14%
21	SAN FRANCISCO	PCT	113	67%	11%	7%	16%
21	SAN FRANCISCO	SUPT	46	67%	50%	9%	11%
22	GREATER LOS ANGELES HCS: East LA	PCT	77	75%	23%	5%	5%
22	GREATER LOS ANGELES HCS: West LA	PCT	177	74%	38%	6%	26%
22	LOMA LINDA	PCT	54	80%	27%	5%	5%
22	LOMA LINDA	WSDTT	35	63%	0%	51%	24%
22	SAN DIEGO HCS CA	PCT	210	83%	25%	4%	27%
22	SOUTHERN NV HCS: Las Vegas	PCT	390	85%	10%	3%	11%
23	BLACK HILLS HCS: Fort Meade	SUPT	122	69%	16%	1%	8%
23	CENTRAL IA HCS: Knoxville	PCT	110	78%	28%	1%	5%
23	IOWA CITY	PCT	151	80%	11%	10%	15%
23	MINNEAPOLIS	PCT	163	63%	7%	8%	7%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	88	75%	7%	7%	17%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	87	87%	22%	10%	25%
23	SIOUX FALLS	PCT	10	70%	0%	23%	7%
TOTAL			12,695				
MEAN			118	77%	15%	9%	10%
S.D.			93	10%	9%	15%	9%

PART III: PROGRAMMATIC CAPACITY

Part III presents tables for the workload, staffing and costs for FY 2002 of both the Specialized Outpatient PTSD Programs (SOPPs) and the Specialized Intensive PTSD Programs (SIPPs). In addition, the changes from FY 1996, FY 1997, and FY1998 are presented for selected variables. Tracking of changes in administrative operation annually permits an examination of the shifting of programmatic capacity due to the reallocation of resources and/or the restructuring of clinical services. The data are presented at the VISN and individual program levels for the SOPPs, and at the VISN and facility levels for the SIPPs. Because programmatic changes continue to take place for a large number of SIPPs, it is difficult to present representative data for individual SIPPs over time. For this reason, we have shifted our approach to presenting aggregated data representing all intensive programs at a facility for workload, staffing, and costs.

Specialized PTSD Programs

Program types comprising the SOPPs are the PTSD Clinical Team (PCT), the Substance Use and PTSD Team (SUPT) and the Women's Stress Disorder Treatment Team (WSDTT). These program types are organized around the model of an ambulatory clinic. Veterans typically come in for services with an upper limit of approximately two times a week for one or two clinical contacts each time.

For SIPPs, program types include the Evaluation and Brief Treatment Unit (EBTPU), the PTSD Domiciliary (PTSD Dom) (replaced the PTSD and Substance Abuse Unit/PSU), the PTSD Residential Rehabilitation Program (PRRP), the Specialized Inpatient PTSD Unit (SIPU), and the Women's Trauma Recovery Program (WTRP). Also included, as an intensive program, is the PTSD Day Hospital (DH). PTSD Day Hospitals are outpatient in nature but involve coming in for services either on a daily basis or several times a week in which the clinical contacts are of four to eight hours duration.

Sources of Data

At the end of each fiscal year, the Northeast Program Evaluation Center (NEPEC) conducts a survey of all VA facilities with specialized PTSD programs asking for information concerning the workload, the FTEE and the expenditures for each program. This survey is called the *Specialized PTSD Programs Annual Report*. In FY 1997 the Annual Report was expanded to include a comprehensive assessment of all nursing staff as part of the total FTEE accounting for each intensive program. For this reason,
FY 1997 is generally used as the base year for all differences computed for intensive programs. The only exception to this procedure is when FY 1997 data are not reported. For those situations, FY 1998 data are used, as noted in the affected tables. For outpatient programs, differences are calculated between FY 1996 and FY 2002.

For SOPPs, the number of veterans seen, the number of veterans treated and the number of outpatient visits are derived from the stop code data that are obtained from the Austin Data

Processing Center in Austin, Texas. Veterans *seen* include all veterans receiving services, while veterans *treated* include only those seen more than once. *New veterans treated* are those who were not seen in the previous fiscal year. For SIPPs, the number of veterans admitted and the number of bed days are obtained from the Annual Report.

Workload for SOPPs

Workload data for the SOPPs are presented by VISN in Table 3-1 and by individual program in Table 3-2. Differences from FY 1996 to FY 2002 are presented for number of visits, number of veterans seen, number of veterans treated and the percent of new veterans treated. Table 3-1 presents the unique number of veterans seen, the unique number of veterans treated, and the unique number of new veterans by VISN and nationally for FY 2002. In the past, these data were presented in years prior to 2001 as the sum of the individual programs. This allowed for a duplicated count of veterans. For FY 2001 and beyond, it was decided that these data would be presented as unduplicated counts of veterans, which are determined for the VA as a total system as "ALL VA", and as totals for the columns in the tables as "SUM". The number of visits, the number of veterans seen, and the number of veterans treated represent *Gross Output*. *Productivity* is represented by two indices. One index is the number of visits per filled FTEE. This index is relevant to the standard of 1000 visits per FTEE that was the operative standard in VA prior to the adoption of the Special Emphasis Program (SEP) goals as specified in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. The other index, the number of veterans treated per filled FTEE, is relevant to the SEP goal of 75 veterans treated per FTEE. VISNs and individual programs not meeting these targets are boxed/highlighted in the tables. Nationally for FY 2002, the total number of visits for ALL VA was 629,403, the total number of veterans seen was 67,449, and the total number of veterans treated was 51,016. The percent of veterans treated who were new was 35% (see Table 3-1).

Workload for SIPPs

Workload data for the SIPPs can be found by VISN in Table 3-3 and by individual VA facility in Table 3-4. For each VA facility, the total number of admissions (episodes) to all programs and the total days of treatment represent g*ross output*. *Efficiency* is represented by the length of program or the number of days of treatment per admission. It is calculated as the ratio of days of treatment to admissions for all intensive programs except PTSD Days Hospitals, for which length of program is reported from the Annual Report as “Anticipated Length of Treatment”. Total days of treatment, for programs other then PTSD Day Hospitals, is equal to the bed days of care reported on the Annual Report. For PTSD Day Hospitals, days of treatment are represented by the number of stop code visits accrued for the fiscal year. Total days of treatment for PTSD Day Hospitals is generally less than the actual number of days spent in the program. This is due to the fact that PTSD Day Hospitals do not provide treatment seven days a week. Differences are presented for each variable. Across all VISNs for FY 2002, the total number of admissions was 4,650 and the total number of days of treatment was 176,500 (see Table 3-3).

Staffing of the SOPPs

Staffing of the SOPPs, represented as filled FTEE, and the change in staffing levels between FY 1996 and FY 2002 are presented by VISN in Table 3-5 and by individual program in Table 3-6. Filled FTEE is calculated from the data supplied from the Annual Report. [See Appendix C.] A total of 535.47 FTEE were filled for FY 2002. There was substantial shifting within individual programs resulting in a significant increase of 114.05 FTEE in staffing levels nationally.

Staffing of the SIPPs

Staffing of the SIPPs and the change in staffing levels are presented by VISN in Table 3-7 and by individual VA facility in Table 3-8. Overall, there were 333.66 FTEE filled for FY 2002. In FY 2002 there were a number of programmatic changes within the SIPPs. Several VA facilities reconfigured inpatient units to PRRPs, PTSD Doms and PTSD Day Hospitals. Adjustments in staffing levels accompanied these changes. Because of this movement within the system, SIPP FTEE experienced a substantial drop of 262.74 FTEE throughout all VA over the period from FY 1997 through FY 2002.

Costs of the SOPPS

The direct costs for the SOPPs are presented in Table 3-9 by VISN and in Table 3-10 by individual program. Direct costs are calculated by using filled FTEE and expenditure data supplied from the Annual Report. [See Appendix C.] The *cost-efficiency* of the programs is represented by two indices: cost per visit and cost per capita. The former is calculated as the ratio of direct costs to number of visits, and the latter is calculated as the ratio of direct costs to number of veterans treated. In addition, differences between FY 2002 and FY 1996 are presented for cost per visit, cost per capita and direct costs. Nationwide in FY 2002, the SOPPs treated a total of 51,016 veterans with 629,403 visits at an overall direct cost of $48,781,991. The average cost per visit was $78, a decrease of $3, and the average cost per capita was $954, a decrease of $222.

Costs of the SIPPS

The direct costs for the SIPPs are presented by VISN in Table 3-11 and by individual VA facility in Table 3-12. The *cost-efficiency* of the programs is represented by two indices: cost per diem and cost per capita. The former is calculated as the ratio of direct costs to number of days of treatment, and the latter is calculated as the ratio of direct costs to number of veterans admitted. The differences in costs are also calculated. Nationwide in FY 2002, the SIPPs admitted a total of 4650 veterans with 176,500 days of treatment at an overall direct cost of $23,271,352. The average cost per diem was $132, a decrease of $19, and the average cost per capita was $5,005 a decrease of $755.

Table 3-1. Workload for Specialized Outpatient PTSD Programs, FY 2002, by VISN.†

VISN	FY 2002			DIFF: FY 2002 - FY 1996			FY 2002			FY 2002		DIFF: FY 2002 - 1996
	# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/ VETS TREATED (%)	# NEW VETS TREATED/ VETS TREATED (%)
1	48,690	4,231	3,286	13,427	956	905	34.50	1,411	95	837	25%	-14%
2	10,649	1,065	797	3,398	542	379	11.09	960	72	349	44%	20%
3	40,605	2,969	2,340	19,408	1,554	1,275	24.43	1,662	96	662	28%	-12%
4	22,965	2,874	2,174	1,985	784	799	24.24	947	90	739	34%	-1%
5	20,497	2,259	1,425	7,494	1,240	676	13.15	1,558	108	646	45%	-12%
6	23,781	3,318	2,541	8,669	1,495	1,127	16.54	1,438	154	1,016	40%	-2%
7	39,869	4,339	2,991	23,035	2,719	1,814	36.82	1,083	81	1,228	41%	-2%
8	24,911	3,177	2,492	7,194	1,485	1,303	24.86	1,002	100	634	25%	-13%
9	15,175	2,575	1,896	2,250	908	651	16.60	914	114	684	36%	-16%
10	28,068	3,044	2,007	22,586	2,352	1,447	36.99	759	54	670	33%	-5%
11	17,558	2,084	1,511	6,666	578	461	17.93	979	84	511	34%	2%
12	12,322	1,014	800	693	133	121	13.98	882	57	265	33%	-18%
15	30,221	2,738	2,157	11,578	1,245	1,022	22.29	1,356	97	527	24%	-11%
16	74,253	8,230	6,686	35,262	4,102	3,671	57.61	1,289	116	2,534	38%	5%
17	28,349	2,969	2,210	8,082	1,300	893	21.08	1,345	105	789	36%	-18%
18	29,913	3,629	2,764	7,552	1,371	1,136	25.11	1,191	110	844	31%	-11%
19	16,722	2,574	1,867	4,986	1,346	943	13.46	1,242	139	898	48%	7%
20	50,279	5,252	4,037	28,353	3,249	2,560	40.44	1,243	100	1,440	36%	-9%
21	31,720	2,691	1,880	11,853	1,097	638	24.11	1,316	78	539	29%	-20%
22	34,341	3,731	2,812	19,484	2,747	2,100	27.10	1,267	104	1,200	43%	4%
23	28,515	2,975	2,465	-2,617	333	508	33.15	860	74	710	29%	-8%
SUM	629,403	67,738	51,138	241,338	31,536	24,429	535.47	1,175	96	17,722	35%	-6%
ALL VA	629,403	67,449	51,016	241,338	31,626	24,479	535.47	1,175	95	17,697	35%	-6%

† A boxed/shaded cell signifies a VISN whose Specialized Outpatient Treatment does not meet the standard of 1000 visits per filled FTEE, and/or does not meet the goal of 75 veterans treated per filled FTEE.

Table 3.2 Workload for Specialized Outpatient PTSD Programs, by Individual Program, FY 2002.

			FY 2002			DIFF: FY 2002 - FY 1996			FY 2002			FY 2002		DIFF: FY 2002 - FY 1996
VISN	FACILITY	PROGRAM	# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/#VETS TREATED (%)	# NEW VETS TREATED/# VETS TREATED (%)
1	BOSTON (MA) HCS: Boston	PCT	5,481	604	372	1,728	233	66	4.10	1,338	91	139	37%	-26%
1	BOSTON (MA) HCS: Boston	WSDTT	4,058	243	217	1,204	-44	64	3.40	1,193	64	76	35%	-30%
1	BOSTON (MA) HCS: Brockton	PCT	4,531	604	445	1,027	283	191	3.46	1,310	129	111	25%	-33%
1	BOSTON (MA) HCS: Brockton	SUPT	2,504	323	155	-1,753	-369	-277	2.05	1,221	76	47	30%	-26%
1	CONNECTICUT HCS: West Haven*	PCT	10,122	778	649	10,122	778	649	5.78	1,752	112	133	20%	NA
1	CONNECTICUT HCS: West Haven	SUPT	3,608	314	268	604	27	74	5.30	680	51	50	19%	-21%
1	MANCHESTER, NH	PCT	2,913	217	186	-10	-12	4	2.46	1,184	76	47	25%	-30%
1	PROVIDENCE, RI	PCT	12,225	1,025	859	5,286	439	383	4.98	2,457	173	177	21%	-18%
1	TOGUS, ME**	PCT	0	0	0	-4,110	-487	-364	0.00	NA	NA	0	NA	NA
1	WHITE RIVER JUNCTION, VT	PCT	3,248	451	348	-671	-76	-45	2.98	1,092	117	91	26%	-9%
2	CANANDAIGUA, NY	PCT	5,615	474	369	1,685	216	151	5.60	1,003	66	85	23%	-5%
2	SYRACUSE, NY*	PCT	1,979	259	197	1,979	259	197	2.48	799	80	186	94%	NA
2	WESTERN NY HCS: Batavia	PCT	3,055	356	242	-266	79	-63	3.02	1,011	80	80	33%	-23%
3	BRONX, NY	PCT	12,183	539	463	5,367	264	252	7.85	1,552	59	130	28%	-10%
3	HUDSON VALLEY (NY) HCS: Castle Point*	PCT	641	148	87	641	148	87	1.03	625	85	87	100%	NA
3	NEW JERSEY HCS: East Orange	PCT	4,772	492	345	3,307	349	232	4.80	994	72	121	35%	-65%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	9,963	1,007	778	-1,002	355	287	4.75	2,097	164	169	22%	-14%
3	NEW YORK HARBOR HCS: New York	PCT	13,046	808	681	11,095	486	438	6.00	2,174	114	157	23%	-20%
4	CLARKSBURG, WV**	PCT	0	0	0	-4,235	-538	-366	0.00	NA	NA	0	NA	NA
4	COATESVILLE, PA	PCT	4,922	494	365	-149	15	-6	6.90	713	53	148	41%	-2%
4	PHILADELPHIA, PA	PCT	7,916	1,162	887	2,999	379	402	7.83	1,012	113	316	36%	-5%
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	6,498	887	679	1,902	355	222	6.67	975	102	188	28%	-8%
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	3,629	369	259	1,468	164	84	2.85	1,273	91	90	35%	0%
5	MARYLAND HCS: Baltimore	PCT	5,492	554	422	1,563	145	145	3.81	1,442	111	160	38%	-15%
5	MARYLAND HCS: Perry Point	PCT	4,660	542	415	2,120	309	227	3.00	1,553	138	240	58%	-42%
5	WASHINGTON, DC	PCT	10,345	1,229	629	3,811	870	337	6.35	1,630	99	263	42%	-5%
6	ASHEVILLE, NC	PCT	3,542	293	258	2,274	111	149	2.15	1,647	120	178	69%	-24%
6	DURHAM, NC	PCT	4,402	994	804	625	385	312	4.82	913	167	306	38%	-15%
6	FAYETTEVILLE, NC*	PCT	3,877	335	257	3,877	335	257	1.92	2,019	134	176	68%	NA
6	HAMPTON, VA	PCT	8,152	1,051	817	1,922	452	310	4.58	1,778	178	239	29%	-8%
6	SALISBURY, NC	PCT	3,808	666	408	-29	258	106	3.07	1,242	133	118	29%	-6%
7	ATLANTA, GA	PCT	7,390	678	452	3,329	361	247	3.23	2,285	140	191	42%	-21%
7	AUGUSTA, GA*	PCT	10,651	988	805	10,651	988	805	13.26	804	61	448	56%	0%
7	BIRMINGHAM, AL	PCT	3,279	775	476	275	320	146	3.86	850	123	130	27%	-22%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	5,426	507	319	2,600	235	101	3.60	1,507	89	149	47%	-7%
7	CHARLESTON, SC	PCT	3,637	509	358	526	165	75	3.20	1,137	112	94	26%	-13%
7	DUBLIN, GA*	PCT	7,443	539	368	7,443	539	368	6.85	1,086	54	172	47%	NA
7	TUSCALOOSA, AL	PCT	2,043	409	244	-1,789	-74	-114	2.82	724	87	55	23%	-42%
8	BAY PINES, FL	SUPT	8,878	1,236	1,008	5,642	885	790	8.08	1,099	125	226	22%	-38%
8	MIAMI, FL	PCT	5,503	479	372	2,270	254	223	3.75	1,467	99	94	25%	-6%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	4,460	503	384	1,934	284	210	5.03	886	76	171	45%	-11%
8	SAN JUAN, PR	PCT	3,447	518	406	-292	-17	29	4.00	862	102	44	11%	-18%
8	TAMPA, FL	PCT	2,623	456	330	-2,360	133	78	4.00	656	83	100	30%	-21%
9	HUNTINGTON, WV*	PCT	1,033	404	159	1,033	404	159	3.87	267	41	158	99%	NA
9	LEXINGTON, KY	PCT	2,884	284	257	1,834	70	97	3.50	824	73	124	48%	-52%
9	LOUISVILLE, KY	PCT	1,072	312	224	-639	28	15	2.05	523	109	78	35%	-48%
9	MEMPHIS, TN	PCT	4,470	599	476	315	212	174	2.60	1,721	183	170	36%	-10%
9	MIDDLE TN HCS: Murfreesboro**	PCT	0	0	0	-1,741	-210	-172	0.00	NA	NA	0	NA	NA
9	MIDDLE TN HCS: Nashville**	PCT	0	0	0	-597	-88	-78	0.00	NA	NA	0	NA	NA
9	MOUNTAIN HOME, TN	PCT	5,716	977	780	2,045	397	353	4.58	1,247	170	154	20%	-28%

Table 3.2 Workload for Specialized Outpatient PTSD Programs, by Individual Program, FY 2002.

			FY 2002			DIFF: FY 2002 - FY 1996			FY 2002			FY 2002		DIFF: FY 2002 - FY 1996
VISN	FACILITY	PROGRAM	# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/#VETS TREATED (%)	# NEW VETS TREATED/# VETS TREATED (%)
10	BRECKSVILLE, OH*	PCT	12,513	907	583	12,513	907	583	11.52	1,086	51	179	31%	NA
10	BRECKSVILLE, OH	WSDTT	1,458	184	100	-301	-21	-56	3.04	479	33	39	39%	-23%
10	CHILLICOTHE, OH	PCT	3,757	751	569	34	260	142	4.17	900	136	132	23%	-15%
10	CINCINNATI, OH*	PCT	5,976	620	435	5,976	620	435	12.30	486	35	192	44%	NA
10	COLUMBUS, OH*	PCT	2,198	327	177	2,198	327	177	3.45	637	51	66	37%	NA
10	DAYTON, OH*	PCT	2,166	383	224	2,166	383	224	2.51	864	89	92	41%	NA
11	ANN ARBOR (MI) HCS	PCT	3,651	300	207	1,204	63	40	3.00	1,217	69	79	38%	-1%
11	BATTLE CREEK, MI	PCT	6,301	811	598	3,038	259	268	4.60	1,369	130	172	29%	-13%
11	DANVILLE, IL	PCT	2,801	452	298	271	134	32	3.00	934	99	88	30%	-16%
11	NORTHERN IN HCS: Fort Wayne*	PCT	910	169	112	910	169	112	3.80	239	29	93	83%	NA
11	NORTHERN IN HCS: Marion	PCT	3,895	403	330	1,243	45	42	3.52	1,107	94	86	26%	-1%
12	CHICAGO (IL) HCS: West Side	PCT	8,876	516	441	1,732	-131	166	6.58	1,350	67	112	25%	-11%
12	HINES, IL	PCT	2,180	344	240	-769	108	37	3.00	727	80	52	22%	-23%
12	IRON MOUNTAIN, MI**	PCT	0	0	0	-1,536	-291	-204	0.00	NA	NA	0	NA	NA
12	MADISON, WI*	WSDTT	1,266	155	119	1,266	155	119	4.40	288	27	101	85%	NA
15	EASTERN KS HCS: Topeka	PCT	8,194	555	463	311	104	53	7.00	1,171	66	69	15%	-25%
15	KANSAS CITY, MO	PCT	5,269	631	508	2,132	320	279	4.00	1,317	127	137	27%	-24%
15	POPLAR BLUFF, MO*	PCT	2,081	321	273	2,081	321	273	2.08	1,000	131	78	29%	NA
15	ST. LOUIS, MO	PCT	9,678	873	645	6,394	539	362	5.20	1,861	124	144	22%	-29%
15	WICHITA, KS	PCT	4,999	367	272	660	36	27	4.01	1,246	68	100	37%	3%
16	CENTRAL AR VETERANS HCS (Little Rock)	PCT	5,683	1,530	1,167	5,683	1,530	1,167	6.88	826	170	1,137	97%	0%
16	FAYETTEVILLE, AR	PCT	3,374	909	618	960	411	237	2.70	1,250	229	148	24%	-13%
16	GULF COAST (MS) VETERANS HCS (Biloxi	PCT	6,659	628	553	2,241	27	127	5.70	1,167	97	114	21%	-11%
16	HOUSTON, TX	PCT	18,290	1,845	1,606	9,185	1,031	968	19.30	948	83	494	31%	-9%
16	JACKSON, MS	PCT	5,356	900	786	1,602	456	471	5.31	1,009	148	149	19%	-26%
16	NEW ORLEANS, LA	PCT	23,402	1,842	1,443	12,436	439	490	10.32	2,268	140	360	25%	-17%
16	NEW ORLEANS, LA	WSDTT	611	78	59	-946	-188	-94	2.39	256	25	14	24%	-23%
16	OKLAHOMA CITY, OK	PCT	10,878	576	490	4,101	107	99	5.02	2,167	98	125	26%	-23%
17	CENTRAL TX VETERANS HCS: Austin*	PCT	1,996	314	217	1,996	314	217	3.20	623	68	135	62%	NA
17	CENTRAL TX VETERANS HCS: Temple	PCT	4,155	543	365	1,354	385	233	2.14	1,939	170	150	41%	-56%
17	CENTRAL TX VETERANS HCS: Waco	PCT	5,417	365	288	228	13	-25	3.42	1,583	84	67	23%	-77%
17	NORTH TX HCS: Dallas	PCT	7,095	594	387	914	92	20	6.00	1,183	65	121	31%	-16%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	9,686	1,259	1,013	3,590	639	498	6.31	1,534	160	329	32%	-1%
18	EL PASO (TX) VETERANS HCS	PCT	5,916	720	502	-1,092	-34	-11	5.00	1,183	100	128	25%	-21%
18	NEW MEXICO HCS (Albuquerque)	PCT	12,439	1,634	1,262	5,625	1,116	853	12.60	987	100	474	38%	-18%
18	PHOENIX, AZ	PCT	7,331	592	492	2,739	166	162	5.00	1,466	98	85	17%	-35%
18	SOUTHERN AZ HCS (Tucson)	PCT	4,227	691	513	280	201	147	2.51	1,687	205	158	31%	-13%
19	CHEYENNE, WY	PCT	1,427	221	161	-1,134	-117	-116	1.97	725	82	75	47%	12%
19	DENVER, CO**	PCT	0	0	0	-3,389	-336	-243	0.00	NA	NA	0	NA	NA
19	GRAND JUNCTION, CO	PCT	1,737	516	328	588	370	233	3.35	518	98	96	29%	-71%
19	PUEBLO, CO*	PCT	5,117	699	487	5,117	699	487	1.00	5,117	487	469	96%	NA
19	SALT LAKE CITY (UT) HCS	PCT	8,441	1,140	891	3,804	747	585	7.14	1,182	125	258	29%	-17%
20	BOISE, ID	PCT	2,490	363	239	-2,213	-166	-145	5.25	474	46	67	28%	-15%
20	PORTLAND, OR	PCT	9,377	1,289	886	5,907	1,011	588	7.42	1,263	119	398	45%	-2%
20	PUGET SOUND (WA) HCS: Seattle	PCT	33,442	3,179	2,593	19,689	1,742	1,506	24.66	1,356	105	762	29%	-26%
20	SPOKANE, WA*	PCT	4,970	534	395	4,970	534	395	3.11	1,599	127	224	57%	NA
21	HONOLULU, HI	PCT	6,650	465	349	2,818	83	70	4.96	1,341	70	105	30%	-15%
21	NORTHERN CA HCS: (Sacramento)	PCT	1,131	224	97	-1,390	-189	-218	2.60	435	37	34	35%	-57%
21	PALO ALTO (CA) HCS: San Jose	PCT	9,194	691	518	5,802	402	282	3.20	2,873	162	148	29%	-33%
21	SAN FRANCISCO, CA	PCT***	11,116	1,151	807	4,824	401	196	9.00	1,235	90	209	26%	-32%
21	SAN FRANCISCO, CA	SUPT	3,629	194	125	-201	10	-11	4.35	835	29	52	42%	-5%

Table 3.2 Workload for Specialized Outpatient PTSD Programs, by Individual Program, FY 2002.

			FY 2002			DIFF: FY 2002 - FY 1996			FY 2002			FY 2002		DIFF: FY 2002 - FY 1996
VISN	FACILITY	PROGRAM	# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/#VETS TREATED (%)	# NEW VETS TREATED/# VETS TREATED (%)
22	GREATER LOS ANGELES (CA) HCS: East L	PCT	6,126	624	492	899	113	121	3.90	1,571	126	85	17%	-18%
22	GREATER LOS ANGELES (CA) HCS: West L	PCT	3,559	634	420	3,559	634	420	9.57	372	44	157	37%	NA
22	LOMA LINDA, CA	PCT	3,051	237	176	40	-16	-17	2.25	1,356	78	54	31%	-10%
22	LOMA LINDA, CA	WSDTT	1,760	258	184	-306	109	71	2.55	690	72	53	29%	-15%
22	SAN DIEGO (CA) HCS CA	PCT	14,615	1,466	1,175	10,062	921	746	5.08	2,880	232	483	41%	-12%
22	SOUTHERN NV HCS (Las Vegas)*	PCT	5,230	549	385	5,230	549	385	3.76	1,393	103	368	96%	NA
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	4,863	381	324	748	106	116	4.80	1,013	68	86	27%	-11%
23	CENTRAL IA HCS: Knoxville*	PCT	2,370	147	128	2,370	147	128	1.39	1,708	92	30	23%	NA
23	CENTRAL IA HCS: Knoxville*†	SUPT	0	0	0	-4,387	-290	-254	0.00	NA	NA	0	NA	NA
23	IOWA CITY, IA	PCT	3,870	628	510	42	-14	81	4.75	815	107	138	27%	-5%
23	MINNEAPOLIS, MN	PCT	9,574	981	804	2,146	354	324	12.92	741	62	209	26%	-14%
23	NE-WESTERN IA HCS: Lincoln	PCT	2,536	317	236	292	148	96	2.83	898	84	124	53%	10%
23	NE-WESTERN IA HCS: Omaha	PCT	3,847	363	320	1,265	155	153	5.00	770	64	99	31%	-13%
23	SIOUX FALLS, SD	PCT	1,455	170	151	595	44	60	1.47	992	103	25	17%	-23%
23	ST. CLOUD, MN**	PCT	0	0	0	-5,688	-545	-421	0.00	NA	NA	0	NA	NA
SUM			629,403	68,901	51,815	241,338	29,672	22,299	535.47	1,175	97	17,873	34%	-0.14%
ALL VA			629,403	67,449	51,016	241,338	31,626	24,479	535.47	1,175	95	17,697	35%	-0.18%

† A boxed/highlighted cell signifies a program whose Specialized Outpatient Treatment does not meet the standard of 1000 visits per filled FTEE, and/or does not meet the goal of 75 veterans per treated filled FTEE.
* Program was not open in FY 1996. ** Program was closed for all of FY 2002. ***For this program, the number of visits was underreported in the Austin data base for this fiscal year.
NA = not Applicable.

Table 3-3. Workload for Specialized Intensive PTSD Programs, by VISN, FY 2002.

	FY 2002			DIFFERENCE: FY 2002 - FY1997		
VISN	# OF ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM	# OF ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM
1	350	13816	39	-70	-1039	4
2	268	3692	14	28	-256	-3
3	401	13487	34	-122	-5474	-3
4	256	14294	56	-120	-1331	14
5	191	17043	89	-35	7156	45
6	235	8576	36	-2	-449	-2
7	80	1775	22	-731	-17792	-2
8	177	8246	47	40	395	-11
10	182	4479	25	-35	-6810	-27
11	376	9242	25	82	643	-5
12	360	18611	52	-43	2153	11
15	110	7722	70	-1	-3228	-28
16	432	12932	30	60	341	-4
17	104	6089	59	-25	-1026	3
18 *	88	1506	17	88	1506	NA
19	132	3142	24	-53	-5638	-24
20	550	13171	24	-152	-7293	-5
21	275	15501	56	-93	-3529	5
22	0	0	NA	-82	-4703	NA
23	83	3176	38	-98	-6349	-14
ALL VA	4650	176500	38	-1364	-52723	0

Note: No Specialized Intensive Program was open in VISN 9 for these fiscal years. No program in VISN 22 was open in FY 2002.

Note: VISNs 13 & 14 consolidated as VISN 23 in FY 2002.

NA = Not Applicable

* No Specialized Intensive PTSD program in this VISN was open in the base year.

Table 3-4. Workload for Specialized Intensive PTSD Programs, by VA Facility, FY 2002.

		FY 2002			DIFFERENCE: FY 2002 - FY 1997		
VISN	FACILITY	# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM (days)†	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM (days)†
1	CONNECTICUT HCS: West Haven	33	3404	103	-13	-30	28
1	NORTHAMPTON, MA	87	5539	64	-22	-1461	-1
1	TOGUS, ME*	163	3960	15	-28	147	-1
1	WHITE RIVER JUNCTION, VT*	67	913	15	-7	305	-5
2	WESTERN NY HCS: Batavia	268	3692	14	28	-256	-3
3	BRONX, NY**	NA	NA	NA	NA	NA	NA
3	HUDSON VALLEY (NY) HCS: Montrose	226	6195	27	46	-472	-10
3	NEW JERSEY HCS: Lyons	175	7292	42	-22	-2030	-6
4	CLARKSBURG, WV	82	3364	41	-62	1582	29
4	COATESVILLE, PA	174	10930	63	-58	-2913	3
5	MARTINSBURG, WV	118	15473	131	-5	6619	59
5	MARYLAND HCS: Baltimore	73	1570	22	-30	537	11
6	SALEM, VA	128	4001	31	11	-87	-4
6	SALISBURY, NC	107	4575	43	-13	-362	2
7	AUGUSTA, GA**	NA	NA	NA	NA	NA	NA
7	CENTRAL AL VETERANS HCS: Tuskegee**	NA	NA	NA	NA	NA	NA
7	TUSCALOOSA, AL*	80	1775	30	-90	-3753	-9
8	BAY PINES, FL	103	3637	35	27	101	-11
8	MIAMI, FL	74	4609	62	13	294	-8
10	BRECKSVILLE, OH	39	NR	NC	-9	NR	NC
10	CINCINNATI, OH	83	1615	49	-23	-2021	15
10	DAYTON, OH	60	2864	90	-3	-1429	22
11	BATTLE CREEK, MI	376	9242	25	82	643	-5
12	MILWAUKEE, WI	26	7001	269	8	1877	-15
12	NORTH CHICAGO, IL	265	8329	31	-10	306	2
12	TOMAH, WI	69	3281	48	-41	-30	17
15	EASTERN KS HCS: Topeka	110	7722	70	-1	-3228	-28
16	CENTRAL AR VETERANS HCS (Little Rock)	232	6469	28	84	-1294	-25
16	JACKSON, MS	120	3743	31	-5	1418	13
16	NEW ORLEANS, LA	80	2720	34	-19	217	9
17	CENTRAL TX VETERANS HCS: Waco	104	6089	59	-25	-1026	3

Table 3-4. Workload for Specialized Intensive PTSD Programs, by VA Facility, FY 2002.

		FY 2002			DIFFERENCE: FY 2002 - FY 1997		
VISN	FACILITY	# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM (days)†	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM (days)†
18	SOUTHERN AZ HCS (Tucson)***	88	1506	17	88	1506	NC
19	DENVER, CO	132	3142	38	21	-2469	-13
19	SHERIDAN, WY**	NA	NA	NA	NA	NA	NA
20	ALASKA HCS (Anchorage)**	NA	NA	NA	NA	NA	NA
20	BOISE, ID	15	463	31	-9	-425	-6
20	PUGET SOUND (WA) HCS: American Lake	152	5803	38	-80	-2776	1
20	PUGET SOUND (WA) HCS: Seattle	268	3680	14	-19	-351	0
20	ROSEBURG (OR) HCS	115	3225	28	-6	-91	1
21	HILO, HI	48	2957	62	-42	-968	18
21	PALO ALTO (CA) HCS: Menlo Park	227	12544	55	-51	-2561	1
22	GREATER LOS ANGELES (CA) HCS: West LA*	NA	NA	NA	NA	NA	NA
23	BLACK HILLS (SD) HCS: Hot Springs***	34	1469	43	34	1469	NC
23	CENTRAL IA HCS: Des Moines	49	1707	35	-17	-673	-1
23	CENTRAL IA HCS: Knoxville**	NA	NA	NA	NA	NA	NA
23	MINNEAPOLIS, MN**	NA	NA	NA	NA	NA	NA
ALL VA		4650	176500	38	-1364	-52723	0

NA=Not Applicable. NR = Not Reported or data were reported incorrectly. NC = Not Calculated because data were either missing or inaccurate.

† "Length of Program" for the PTSD Day Hospitals is reported from the Annual Report For PTSD Specialized Programs as "Anticipated Length of Treatment".

* For this facility FY 1998 data were used as baseline for computing differences because FY 1997 data were missing for one or more components.

** No Specialized Intensive PTSD program at this facility was open in FY 2002.

*** No Specialized Intensive PTSD program at this facility was open in the base year.

Table 3.5. FTEE for Specialized Outpatient PTSD Programs, by VISN, FY 2002.

VISN	FILLED FTEE FY 2002	DIFFERENCE: FILLED FTEE FY 2002 - FY 1996
1	34.50	-2.06
2	11.09	2.89
3	24.43	3.76
4	24.24	-1.14
5	13.15	0.75
6	16.54	1.51
7	36.82	17.03
8	24.86	3.31
9	16.60	-6.68
10	36.99	29.44
11	17.93	1.46
12	13.98	1.93
15	22.29	6.59
16	57.61	22.30
17	21.08	1.34
18	25.11	4.02
19	13.46	0.34
20	40.44	17.78
21	24.11	-0.12
22	27.10	10.68
23	33.15	-1.07
ALL VA	535.47	114.05

Note: VISNs 13 & 14 consolidated as VISN 23 in FY 2002.

Table 3.6. FTEE for Specialized Outpatient PTSD Programs, by Individual Program, FY 2002.

VISN	FACILITY	PROGRAM	FILLED FTEE FY 2002	DIFFERENCE: FILLED FTEE FY 2002 - FY 1996
1	BOSTON (MA) HCS: Boston	PCT	4.10	0.18
1	BOSTON (MA) HCS: Boston	WSDTT	3.40	-2.25
1	BOSTON (MA) HCS: Brockton	PCT	3.46	-0.12
1	BOSTON (MA) HCS: Brockton	SUPT	2.05	-2.10
1	CONNECTICUT HCS: West Haven*	PCT	5.78	5.78
1	CONNECTICUT HCS: West Haven	SUPT	5.30	1.30
1	MANCHESTER, NH	PCT	2.46	-0.04
1	PROVIDENCE, RI	PCT	4.98	-0.78
1	TOGUS, ME**	PCT	0.00	-3.10
1	WHITE RIVER JUNCTION, VT	PCT	2.98	-0.94
2	CANANDAIGUA, NY	PCT	5.60	1.40
2	SYRACUSE, NY*	PCT	2.48	2.48
2	WESTERN NY HCS: Batavia	PCT	3.02	-0.98
3	BRONX, NY	PCT	7.85	4.25
3	HUDSON VALLEY (NY) HCS: Castle Point*	PCT	1.03	1.03
3	NEW JERSEY HCS: East Orange	PCT	4.80	0.96
3	NEW YORK HARBOR HCS: Brooklyn	PCT	4.75	-2.48
3	NEW YORK HARBOR HCS: New York	PCT	6.00	0.00
4	CLARKSBURG, WV**	PCT	0.00	-3.72
4	COATESVILLE, PA	PCT	6.90	1.89
4	PHILADELPHIA, PA	PCT	7.83	2.68
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	6.67	0.17
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	2.85	-2.15
5	MARYLAND HCS: Baltimore	PCT	3.81	0.95
5	MARYLAND HCS: Perry Point	PCT	3.00	0.40
5	WASHINGTON, DC	PCT	6.35	-0.59
6	ASHEVILLE, NC	PCT	2.15	0.05
6	DURHAM, NC	PCT	4.82	0.53
6	FAYETTEVILLE, NC*	PCT	1.92	1.92
6	HAMPTON, VA	PCT	4.58	0.30
6	SALISBURY, NC	PCT	3.07	-1.29
7	ATLANTA, GA	PCT	3.23	-0.67
7	AUGUSTA, GA*	PCT	13.26	13.26
7	BIRMINGHAM, AL	PCT	3.86	-0.04
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	3.60	-0.27
7	CHARLESTON, SC	PCT	3.20	-0.92
7	DUBLIN, GA*	PCT	6.85	6.85
7	TUSCALOOSA, AL	PCT	2.82	-1.18
8	BAY PINES, FL	SUPT	8.08	3.08
8	MIAMI, FL	PCT	3.75	-0.25
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	5.03	0.32
8	SAN JUAN, PR	PCT	4.00	0.00
8	TAMPA, FL	PCT	4.00	0.16
9	HUNTINGTON, WV*	PCT	3.87	3.87
9	LEXINGTON, KY	PCT	3.50	-0.31
9	LOUISVILLE, KY	PCT	2.05	-2.95
9	MEMPHIS, TN	PCT	2.60	-1.40
9	MIDDLE TN HCS: Murfreesboro**	PCT	0.00	-4.00
9	MIDDLE TN HCS: Nashville**	PCT	0.00	-2.47
9	MOUNTAIN HOME, TN	PCT	4.58	0.58
10	BRECKSVILLE, OH*	PCT	11.52	11.52
10	BRECKSVILLE, OH	WSDTT	3.04	-0.71
10	CHILLICOTHE, OH	PCT	4.17	0.37
10	CINCINNATI, OH*	PCT	12.30	12.30
10	COLUMBUS, OH*	PCT	3.45	3.45
10	DAYTON, OH*	PCT	2.51	2.51
11	ANN ARBOR (MI) HCS	PCT	3.00	-1.70
11	BATTLE CREEK, MI	PCT	4.60	0.35
11	DANVILLE, IL	PCT	3.00	-0.52
11	NORTHERN IN HCS: Fort Wayne*	PCT	3.80	3.80
11	NORTHERN IN HCS: Marion	PCT	3.52	-0.48
12	CHICAGO (IL) HCS: West Side	PCT	6.58	0.88
12	HINES, IL	PCT	3.00	-1.20

Table 3.6. FTEE for Specialized Outpatient PTSD Programs, by Individual Program, FY 2002.

VISN	FACILITY	PROGRAM	FILLED FTEE FY 2002	DIFFERENCE: FILLED FTEE FY 2002 - FY 1996
12	IRON MOUNTAIN, MI**	PCT	0.00	-2.15
12	MADISON, WI*	WSDTT	4.40	4.40
15	EASTERN KS HCS: Topeka	PCT	7.00	1.79
15	KANSAS CITY, MO	PCT	4.00	0.01
15	POPLAR BLUFF, MO	PCT	2.08	2.08
15	ST. LOUIS, MO	PCT	5.20	1.20
15	WICHITA, KS	PCT	4.01	1.51
16	CENTRAL AR VETERANS HCS (Little Rock)*	PCT	6.88	6.88
16	FAYETTEVILLE, AR	PCT	2.70	-1.10
16	GULF COAST (MS) VETERANS HCS (Biloxi)	PCT	5.70	1.70
16	HOUSTON, TX	PCT	19.30	13.39
16	JACKSON, MS	PCT	5.31	1.01
16	NEW ORLEANS, LA	PCT	10.32	1.82
16	NEW ORLEANS, LA	WSDTT	2.39	-1.91
16	OKLAHOMA CITY, OK	PCT	5.02	0.52
17	CENTRAL TX VETERANS HCS: Austin*	PCT	3.20	3.20
17	CENTRAL TX VETERANS HCS: Temple	PCT	2.14	-1.02
17	CENTRAL TX VETERANS HCS: Waco	PCT	3.42	-1.06
17	NORTH TX HCS: Dallas	PCT	6.00	-0.30
17	SOUTH TX VETERANS HCS: San Antonio	PCT	6.31	0.51
18	EL PASO (TX) VETERANS HCS	PCT	5.00	1.00
18	NEW MEXICO HCS (Albuquerque)	PCT	12.60	5.75
18	PHOENIX, AZ	PCT	5.00	-1.37
18	SOUTHERN AZ HCS (Tucson)	PCT	2.51	-1.36
19	CHEYENNE, WY	PCT	1.97	-1.55
19	DENVER, CO**	PCT	0.00	-3.75
19	GRAND JUNCTION, CO	PCT	3.35	1.63
19	PUEBLO, CO*	PCT	1.00	1.00
19	SALT LAKE CITY (UT) HCS	PCT	7.14	3.01
20	BOISE, ID	PCT	5.25	-0.75
20	PORTLAND, OR	PCT	7.42	3.25
20	PUGET SOUND (WA) HCS: Seattle	PCT	24.66	12.17
20	SPOKANE, WA*	PCT	3.11	3.11
21	HONOLULU, HI	PCT	4.96	-0.16
21	NORTHERN CA HCS: (Sacramento)	PCT	2.60	-0.73
21	PALO ALTO (CA) HCS: San Jose	PCT	3.20	-0.20
21	SAN FRANCISCO, CA	PCT	9.00	1.62
21	SAN FRANCISCO, CA	SUPT	4.35	-0.65
22	GREATER LOS ANGELES (CA) HCS: East LA	PCT	3.90	-1.10
22	GREATER LOS ANGELES (CA) HCS: West LA*	PCT	9.57	9.57
22	LOMA LINDA, CA	PCT	2.25	-1.75
22	LOMA LINDA, CA	WSDTT	2.55	-1.04
22	SAN DIEGO (CA) HCS CA	PCT	5.08	1.25
22	SOUTHERN NV HCS (Las Vegas)*	PCT	3.76	3.76
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	4.80	-0.20
23	CENTRAL IA HCS: Knoxville*	PCT	1.39	1.39
23	CENTRAL IA HCS: Knoxville**	SUPT	0.00	-4.50
23	IOWA CITY, IA	PCT	4.75	0.50
23	MINNEAPOLIS, MN	PCT	12.92	7.02
23	NE-WESTERN IA HCS: Lincoln	PCT	2.83	-0.09
23	NE-WESTERN IA HCS: Omaha	PCT	5.00	1.00
23	SIOUX FALLS, SD	PCT	1.47	-1.89
23	ST. CLOUD, MN**	PCT	0.00	-4.29
ALL VA			535.47	114.05

Note: VISNs 13 & 14 consolidated as VISN 23 in FY 2002.

* Program was not open in FY 1996.

** The Specialized Outpatient PTSD program at this facility was closed for all of FY 2002.

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Table 3-7. FTEE for Specialized Intensive PTSD Programs, by VISN, FY 2002.

VISN	FILLED FTEE FY 2002	DIFFERENCE: FILLED FTEE FY 2002 - FY 1997
1	15.81	-3.91
2	10.55	-17.39
3	26.69	-18.81
4	30.64	-1.36
5	9.11	-1.61
6	29.93	-5.00
7	3.34	-64.28
8	12.97	-13.64
10	15.24	-10.80
11	15.57	-7.81
12	23.57	-6.33
15	16.53	-0.25
16	19.71	-31.01
17	16.74	0.29
18*	4.14	4.14
19	6.76	-31.15
20	28.89	-15.65
21	41.13	-19.01
22	0.00	-7.89
23	6.34	-11.25
ALL VA	333.66	-262.74

Note: No Specialized Intensive Program was open in VISN 9 for these fiscal years. No program in VISN 22 was open in FY 2002.
Note: VISNs 13 & 14 consolidated as VISN 23 in FY 2002.
* No Specialized Intensive PTSD program in this VISN was open in the base year.

Table 3-8. FTEE for Specialized Intensive PTSD Programs, by VA Facility, FY 2002.

VISN		FILLED FTEE FY 2002	DIFFERENCE: FILLED FTEE FY 2002 - FY 1997
1	CONNECTICUT HCS: West Haven	3.70	-1.16
1	NORTHAMPTON, MA	7.28	2.75
1	TOGUS, ME*	3.10	-3.08
1	WHITE RIVER JUNCTION, VT*	1.73	-2.42
2	WESTERN NY HCS: Batavia	10.55	-17.39
3	BRONX, NY**	0.00	-11.90
3	HUDSON VALLEY (NY) HCS: Montrose	13.00	-2.03
3	NEW JERSEY HCS: Lyons	13.69	-4.89
4	CLARKSBURG, WV	11.68	3.37
4	COATESVILLE, PA	18.97	-4.73
5	MARTINSBURG, WV	5.64	-1.24
5	MARYLAND HCS: Baltimore	3.48	-0.37
6	SALEM, VA	15.78	-0.73
6	SALISBURY, NC	14.16	-4.27
7	AUGUSTA, GA**	0.00	-36.29
7	CENTRAL AL VETERANS HCS: Tuskegee**	0.00	-20.94
7	TUSCALOOSA, AL*	3.34	-7.05
8	BAY PINES, FL	6.69	-3.17
8	MIAMI, FL	6.28	-10.47
10	BRECKSVILLE, OH	3.54	0.74
10	CINCINNATI, OH	5.32	-9.18
10	DAYTON, OH	6.38	-2.36
11	BATTLE CREEK, MI	15.57	-7.81
12	MILWAUKEE, WI	3.40	-0.69
12	NORTH CHICAGO, IL	15.07	-0.96
12	TOMAH, WI	5.10	-4.68
15	EASTERN KS HCS: Topeka	16.53	-0.25
16	CENTRAL AR VETERANS HCS (Little Rock)	12.69	-18.71
16	JACKSON, MS	2.72	-3.25
16	NEW ORLEANS, LA	4.29	-9.06
17	CENTRAL TX VETERANS HCS: Waco	16.74	0.29
18	SOUTHERN AZ HCS (Tucson)***	4.14	4.14
19	DENVER, CO	6.76	-25.17
19	SHERIDAN, WY**	0.00	-5.98
20	ALASKA HCS (Anchorage)**	0.00	-3.38
20	BOISE, ID	2.43	-1.73
20	PUGET SOUND (WA) HCS: American Lake	9.10	0.94
20	PUGET SOUND (WA) HCS: Seattle	12.17	-3.18
20	ROSEBURG (OR) HCS	5.19	-8.31
21	HILO, HI	12.96	-2.10
21	PALO ALTO (CA) HCS: Menlo Park	28.18	-16.90
22	GREATER LOS ANGELES (CA) HCS: West LA**	0.00	-7.89
23	BLACK HILLS (SD) HCS: Hot Springs***	3.47	3.47
23	CENTRAL IA HCS: Des Moines	2.87	-1.54
23	CENTRAL IA HCS: Knoxville**	0.00	-8.81
23	MINNEAPOLIS, MN**	0.00	-4.38
ALL VA		333.66	-262.74

* For this facility FY 1998 data were used as baseline for computing differences because FY 1997 data were missing for one or more components.

** No Specialized Intensive PTSD program at this facility was open in FY 2002.

*** No Specialized Intensive PTSD program at this facility was open in the base year.

Table 3-9. Costs for Outpatient Specialized PTSD Programs, by VISN, FY 2002.†

VISN	FY 2002					DIFF: FY 2002 -FY 1996		
	# VISITS	# VETERANS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
1	48,690	3,286	$3,275,073	$67	$997	$534,249	-$10	-$154
2	10,649	797	$970,476	$91	$1,218	$407,274	$13	-$130
3	40,605	2,340	$2,360,269	$58	$1,009	$725,338	-$19	-$526
4	22,965	2,174	$2,481,865	$108	$1,142	$611,099	$19	-$219
5	20,497	1,425	$985,197	$48	$691	$266,434	-$7	-$268
6	23,781	2,541	$1,527,295	$64	$601	$489,427	-$4	-$133
7	39,869	2,991	$3,337,960	$84	$1,116	$1,880,988	-$3	-$122
8	24,911	2,492	$2,277,600	$91	$914	$728,229	$4	-$389
9	15,175	1,896	$1,558,374	$103	$822	-$131,170	-$28	-$535
10	28,068	2,007	$3,287,847	$117	$1,638	$2,764,842	$22	$704
11	17,558	1,511	$1,544,918	$88	$1,022	$459,067	-$12	-$12
12	12,322	800	$1,258,096	$102	$1,573	$375,986	$26	$273
15	30,221	2,157	$1,952,618	$65	$905	$719,546	-$2	-$181
16	74,253	6,686	$5,406,499	$73	$809	$2,713,904	$4	-$84
17	28,349	2,210	$1,846,761	$65	$836	$342,010	-$9	-$307
18	29,913	2,764	$2,287,819	$76	$828	$744,763	$7	-$120
19	16,722	1,867	$1,394,533	$83	$747	$367,683	-$4	-$364
20	50,279	4,037	$3,333,860	$66	$826	$1,697,104	-$8	-$282
21	31,720	1,880	$2,550,180	$80	$1,356	$523,331	-$22	-$275
22	34,341	2,812	$2,379,890	$69	$846	$1,055,783	-$20	-$1,013
23	28,515	2,465	$2,764,860	$97	$1,122	$95,713	$11	-$242
ALL VA	629,403	51,016	$48,781,991	$78	$956	$17,371,601	-$3	-$220

† Direct Costs are All Other Dollars plus total Personal Dollars.

Table 3.10 Costs for Specialized Outpatient PTSD Programs, by Individual Program, FY 2002.†

			FY 2002					DIFF: FY 2002 - FY 1996		
VISN	FACILITY	PROGRAM	# VISITS	# VETS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
1	BOSTON (MA) HCS: Boston	PCT	5,481	372	$409,957	$75	$1,102	-$12,261	-$38	-$278
1	BOSTON (MA) HCS: Boston	WSDTT	4,058	217	$298,326	$74	$1,375	$15,089	-$26	-$476
1	BOSTON (MA) HCS: Brockton	PCT	4,531	445	$300,031	$66	$674	$56,060	-$3	-$286
1	BOSTON (MA) HCS: Brockton	SUPT	2,504	155	$176,771	$71	$1,140	-$152,743	-$7	$378
1	CONNECTICUT HCS: West Haven*	PCT	10,122	649	$554,469	$55	$854	$554,469	NA	NA
1	CONNECTICUT HCS: West Haven	SUPT	3,608	268	$543,850	$151	$2,029	$193,437	$34	$223
1	MANCHESTER, NH	PCT	2,913	186	$192,779	$66	$1,036	$17,494	$6	$73
1	PROVIDENCE, RI	PCT	12,225	859	$525,868	$43	$612	$104,909	-$18	-$272
1	TOGUS, ME**	PCT	0	0	$0	NA	NA	-$212,964	NA	NA
1	WHITE RIVER JUNCTION, VT	PCT	3,248	348	$273,022	$84	$785	-$29,241	$7	$15
2	CANANDAIGUA, NY	PCT	5,615	369	$527,607	$94	$1,430	$262,774	$27	$215
2	SYRACUSE, NY*	PCT	1,979	197	$192,641	$97	$978	$192,641	NA	NA
2	WESTERN NY HCS: Batavia	PCT	3,055	242	$250,228	$82	$1,034	-$48,141	-$8	$56
3	BRONX, NY	PCT	12,183	463	$774,700	$64	$1,673	$469,408	$19	$226
3	HUDSON VALLEY (NY) HCS: Castle Point*	PCT	641	87	$70,548	$110	$811	$70,548	NA	NA
3	NEW JERSEY HCS: East Orange	PCT	4,772	345	$471,228	$99	$1,366	$147,481	-$122	-$1,499
3	NEW YORK HARBOR HCS: Brooklyn	PCT	9,963	778	$433,149	$43	$557	-$82,527	-$4	-$494
3	NEW YORK HARBOR HCS: New York	PCT	13,046	681	$610,644	$47	$897	$120,428	-$204	-$1,121
4	CLARKSBURG, WV**	PCT	0	0	$0	NA	NA	-$250,539	NA	NA
4	COATESVILLE, PA	PCT	4,922	365	$691,955	$141	$1,896	$292,840	$62	$820
4	PHILADELPHIA, PA	PCT	7,916	887	$920,225	$116	$1,037	$518,175	$34	$208
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	6,498	679	$629,419	$97	$927	$176,239	-$2	-$65
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	3,629	259	$240,266	$66	$928	-$125,616	-$103	-$1,163
5	MARYLAND HCS: Baltimore	PCT	5,492	422	$269,097	$49	$638	$51,888	-$6	-$146
5	MARYLAND HCS: Perry Point	PCT	4,660	415	$285,030	$61	$687	$107,989	-$9	-$255
5	WASHINGTON, DC	PCT	10,345	629	$431,070	$42	$685	$106,557	-$8	-$426
6	ASHEVILLE, NC	PCT	3,542	258	$191,592	$54	$743	$60,815	-$49	-$457
6	DURHAM, NC	PCT	4,402	804	$383,191	$87	$477	$99,248	$12	-$101
6	FAYETTEVILLE, NC*	PCT	3,877	257	$137,986	$36	$537	$137,986	NA	NA
6	HAMPTON, VA	PCT	8,152	817	$435,478	$53	$533	$178,079	$12	$25
6	SALISBURY, NC	PCT	3,808	408	$379,048	$100	$929	$13,299	$4	-$282
7	ATLANTA, GA	PCT	7,390	452	$316,603	$43	$700	$26,728	-$29	-$714
7	AUGUSTA, GA*	PCT	10,651	805	$1,238,910	$116	$1,539	$1,238,910	NA	NA
7	BIRMINGHAM, AL	PCT	3,279	476	$380,916	$116	$800	$90,198	$19	-$81
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	5,426	319	$270,694	$50	$849	$56,540	-$26	-$134
7	CHARLESTON, SC	PCT	3,637	358	$389,510	$107	$1,088	$53,837	-$1	-$98
7	DUBLIN, GA*	PCT	7,443	368	$502,346	$67	$1,365	$502,346	NA	NA
7	TUSCALOOSA, AL	PCT	2,043	244	$238,983	$117	$979	-$87,569	$32	$67
8	BAY PINES, FL	SUPT	8,878	1,008	$711,352	$80	$706	$353,659	-$30	-$935
8	MIAMI, FL	PCT	5,503	372	$389,029	$71	$1,046	$57,814	-$32	-$1,177
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	4,460	384	$443,643	$99	$1,155	$136,833	-$22	-$608
8	SAN JUAN, PR	PCT	3,447	406	$381,122	$111	$939	$96,215	$34	$183
8	TAMPA, FL	PCT	2,623	330	$352,454	$134	$1,068	$83,708	$80	$2

Table 3.10 Costs for Specialized Outpatient PTSD Programs, by Individual Program, FY 2002.†

			FY 2002					DIFF: FY 2002 - FY 1996		
VISN	FACILITY	PROGRAM	# VISITS	# VETS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
9	HUNTINGTON, WV*	PCT	1,033	159	$338,188	$327	$2,127	$338,188	NA	NA
9	LEXINGTON, KY	PCT	2,884	257	$308,432	$107	$1,200	$38,875	-$150	-$485
9	LOUISVILLE, KY	PCT	1,072	224	$163,324	$152	$729	-$130,066	-$19	-$675
9	MEMPHIS, TN	PCT	4,470	476	$263,083	$59	$553	-$50,831	-$17	-$487
9	MIDDLE TN HCS: Murfreesboro**	PCT	0	0	$0	NA	NA	-$279,384	NA	NA
9	MIDDLE TN HCS: Nashville**	PCT	0	0	$0	NA	NA	-$212,864	NA	NA
9	MOUNTAIN HOME, TN	PCT	5,716	780	$485,347	$85	$622	$164,912	-$2	-$128
10	BRECKSVILLE, OH*	PCT	12,513	583	$1,032,455	$83	$1,771	$1,032,455	NA	NA
10	BRECKSVILLE, OH	WSDTT	1,458	100	$268,034	$184	$2,680	$46,045	$58	$1,257
10	CHILLICOTHE, OH	PCT	3,757	569	$415,062	$110	$729	$114,046	$30	$25
10	CINCINNATI, OH*	PCT	5,976	435	$1,026,992	$172	$2,361	$1,026,992	NA	NA
10	COLUMBUS, OH*	PCT	2,198	177	$372,733	$170	$2,106	$372,733	NA	NA
10	DAYTON, OH*	PCT	2,166	224	$172,570	$80	$770	$172,570	NA	NA
11	ANN ARBOR (MI) HCS	PCT	3,651	207	$272,426	$75	$1,316	-$38,681	-$53	-$547
11	BATTLE CREEK, MI	PCT	6,301	598	$399,054	$63	$667	$71,693	-$37	-$325
11	DANVILLE, IL	PCT	2,801	298	$212,507	$76	$713	$27,562	$3	$18
11	NORTHERN IN HCS: Fort Wayne*	PCT	910	112	$362,419	$398	$3,236	$362,419	NA	NA
11	NORTHERN IN HCS: Marion	PCT	3,895	330	$298,512	$77	$905	$36,074	-$22	-$7
12	CHICAGO (IL) HCS: West Side	PCT	8,876	441	$647,768	$73	$1,469	$229,187	$14	-$53
12	HINES, IL	PCT	2,180	240	$298,323	$137	$1,243	-$33,873	$24	-$393
12	IRON MOUNTAIN, MI**	PCT	0	0	$0	NA	NA	-$131,333	NA	NA
12	MADISON, WI*	WSDTT	1,266	119	$312,006	$246	$2,622	$312,006	NA	NA
15	EASTERN KS HCS: Topeka	PCT	8,194	463	$614,445	$75	$1,327	$196,617	$22	$308
15	KANSAS CITY, MO	PCT	5,269	508	$385,811	$73	$759	$58,792	-$31	-$669
15	POPLAR BLUFF, MO*	PCT	2,081	273	$184,857	$89	$677	$184,857	NA	NA
15	ST. LOUIS, MO	PCT	9,678	645	$503,518	$52	$781	$198,502	-$41	-$297
15	WICHITA, KS	PCT	4,999	272	$263,987	$53	$971	$80,778	$11	$223
16	CENTRAL AR VETERANS HCS (Little Rock	PCT	5,683	1,167	$555,146	$98	$476	$555,146	NA	NA
16	FAYETTEVILLE, AR	PCT	3,374	618	$289,213	$86	$468	-$16,463	-$41	-$334
16	GULF COAST (MS) VETERANS HCS (Biloxi	PCT	6,659	553	$523,819	$79	$947	$251,819	$17	$309
16	HOUSTON, TX	PCT	18,290	1,606	$2,030,633	$111	$1,264	$1,565,357	$60	$535
16	JACKSON, MS	PCT	5,356	786	$483,743	$90	$615	$126,375	-$5	-$519
16	NEW ORLEANS, LA	PCT	23,402	1,443	$852,940	$36	$591	$254,331	-$18	-$37
16	NEW ORLEANS, LA	WSDTT	611	59	$203,996	$334	$3,458	-$152,487	$105	$1,128
16	OKLAHOMA CITY, OK	PCT	10,878	490	$467,008	$43	$953	$129,825	-$7	$91
17	CENTRAL TX VETERANS HCS: Austin*	PCT	1,996	217	$230,017	$115	$1,060	$230,017	NA	NA
17	CENTRAL TX VETERANS HCS: Temple	PCT	4,155	365	$212,021	$51	$581	-$141,000	-$75	-$2,094
17	CENTRAL TX VETERANS HCS: Waco	PCT	5,417	288	$185,170	$34	$643	-$80,055	-$17	-$204
17	NORTH TX HCS: Dallas	PCT	7,095	387	$622,666	$88	$1,609	$134,145	$9	$278
17	SOUTH TX VETERANS HCS: San Antonio	PCT	9,686	1,013	$596,886	$62	$589	$198,902	-$4	-$184
18	EL PASO (TX) VETERANS HCS	PCT	5,916	502	$444,381	$75	$885	$147,526	$33	$307
18	NEW MEXICO HCS (Albuquerque)	PCT	12,439	1,262	$1,150,875	$93	$912	$664,635	$21	-$277
18	PHOENIX, AZ	PCT	7,331	492	$436,873	$60	$888	-$7,040	-$37	-$457
18	SOUTHERN AZ HCS (Tucson)	PCT	4,227	513	$255,690	$60	$498	-$60,359	-$20	-$365

Table 3.10 Costs for Specialized Outpatient PTSD Programs, by Individual Program, FY 2002.†

			FY 2002					DIFF: FY 2002 - FY 1996		
VISN	FACILITY	PROGRAM	# VISITS	# VETS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
19	CHEYENNE, WY	PCT	1,427	161	$171,913	$120	$1,068	-$82,234	$21	$150
19	DENVER, CO**	PCT	0	0	$0	NA	NA	-$284,084	NA	NA
19	GRAND JUNCTION, CO	PCT	1,737	328	$363,743	$209	$1,109	$189,919	$58	-$721
19	PUEBLO, CO*	PCT	5,117	487	$91,994	$18	$189	$91,994	NA	NA
19	SALT LAKE CITY (UT) HCS	PCT	8,441	891	$766,884	$91	$861	$452,089	$23	-$168
20	BOISE, ID	PCT	2,490	239	$466,800	$187	$1,953	$18,450	$92	$786
20	PORTLAND, OR	PCT	9,377	886	$672,481	$72	$759	$333,277	-$26	-$379
20	PUGET SOUND (WA) HCS: Seattle	PCT	33,442	2,593	$1,961,104	$59	$756	$1,111,902	-$3	-$25
20	SPOKANE, WA*	PCT	4,970	395	$233,475	$47	$591	$233,475	NA	NA
21	HONOLULU, HI	PCT	6,650	349	$490,848	$74	$1,406	$146,332	-$16	$172
21	NORTHERN CA HCS: (Sacramento)	PCT	1,131	97	$226,524	$200	$2,335	$15,476	$117	$1,665
21	PALO ALTO (CA) HCS: San Jose	PCT	9,194	518	$210,087	$23	$406	-$86,877	-$65	-$853
21	SAN FRANCISCO, CA***	PCT	11,116	807	$1,270,499	$114	$1,574	$471,294	-$13	$266
21	SAN FRANCISCO, CA	SUPT	3,629	125	$352,221	$97	$2,818	-$22,895	-$1	$60
22	GREATER LOS ANGELES (CA) HCS: East L	PCT	6,126	492	$398,288	$65	$810	-$2,379	-$12	-$270
22	GREATER LOS ANGELES (CA) HCS: West I	PCT	3,559	420	$813,166	$228	$1,936	$813,166	NA	NA
22	LOMA LINDA, CA	PCT	3,051	176	$163,277	$54	$928	-$165,888	-$56	-$778
22	LOMA LINDA, CA	WSDTT	1,760	184	$254,945	$145	$1,386	-$2,656	$20	-$894
22	SAN DIEGO (CA) HCS CA	PCT	14,615	1,175	$439,962	$30	$374	$103,287	-$44	-$410
22	SOUTHERN NV HCS (Las Vegas)*	PCT	5,230	385	$310,252	$59	$806	$310,252	NA	NA
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	4,863	324	$389,221	$80	$1,201	$60,959	$0	-$377
23	CENTRAL IA HCS: Knoxville*	PCT	2,370	128	$95,526	$40	$746	$95,526	NA	NA
23	CENTRAL IA HCS: Knoxville**	SUPT	0	0	$0	NA	NA	-$411,045	NA	NA
23	IOWA CITY, IA	PCT	3,870	510	$455,876	$118	$894	$119,937	$30	$111
23	MINNEAPOLIS, MN	PCT	9,574	804	$1,063,662	$111	$1,323	$546,059	$41	$245
23	NE-WESTERN IA HCS: Lincoln	PCT	2,536	236	$257,590	$102	$1,091	-$48,060	-$35	-$1,092
23	NE-WESTERN IA HCS: Omaha	PCT	3,847	320	$376,609	$98	$1,177	$98,392	-$10	-$489
23	SIOUX FALLS, SD	PCT	1,455	151	$126,378	$87	$837	-$60,486	-$130	-$1,217
23	ST. CLOUD, MN**	PCT	0	0	$0	NA	NA	-$305,567	NA	NA
ALL VA			629,403	51,016	$48,781,991	$78	$956	$17,371,601	-$3	-$108

† Direct Costs are All Other Dollars plus total Personal Dollars.

* Program was not open in FY 1996. ** Program was closed for all of FY 2002. ***For this program, the number of visits was underreported in the Austin database for this fiscal year.

NA = Not Applicable.

Table 3-11. Costs for Specialized Intensive PTSD Programs, by VISN, FY 2002.

	FY 2002					DIFFERENCE: FY 2002 - FY1997		
VISN	# OF DAYS OF TREATMENT	# OF ADMISSIONS	DIRECT COSTS†	COST PER DIEM	COST PER CAPITA	DIRECT COSTS†	COST PER DIEM	COST PER CAPITA
1	13816	350	$1,198,871	$87	$3,425	-$71,479	$1	$401
2	3692	268	$656,749	$178	$2,451	-$607,003	-$142	-$2,815
3	13487	401	$1,861,878	$138	$4,643	-$1,034,934	-$15	-$896
4	14294	256	$1,945,283	$136	$7,599	$130,202	$20	$2,771
5	17043	191	$689,446	$40	$3,610	-$6,410	-$30	$531
6	8576	235	$1,929,130	$225	$8,209	-$25,672	$8	-$39
7	1775	80	$227,814	$128	$2,848	-$3,662,491	-$70	-$1,949
8	8246	177	$1,080,152	$131	$6,103	-$451,731	-$64	-$5,079
10	4479	182	$1,032,367	$230	$5,672	-$441,961	$100	-$1,122
11	9242	376	$1,065,745	$115	$2,834	-$247,912	-$37	-$1,634
12	18611	360	$1,651,398	$89	$4,587	-$2,579	-$12	$483
15	7722	110	$1,218,716	$158	$11,079	$297,236	$74	$2,778
16	12932	432	$1,335,544	$103	$3,092	-$1,838,739	-$149	-$5,441
17	6089	104	$1,034,417	$170	$9,946	$208,981	$54	$3,548
18 *	1506	88	$314,327	$209	$3,572	$314,327	NA	NA
19	3142	132	$531,353	$169	$4,025	-$1,458,563	-$58	-$6,731
20	13171	550	$2,079,485	$158	$3,781	-$729,075	$21	-$220
21	15501	275	$3,020,085	$195	$10,982	-$442,380	$13	$1,573
22	0	0	$0	NA	NA	-$656,952	NA	NA
23	3176	83	$398,592	$126	$4,802	-$636,792	$17	-$918
ALL VA	176500	4650	$23,271,352	$132	$5,005	-$11,363,927	-$19	-$755

Note: No Specialized Intensive Program was open in VISN 9 for these fiscal years. No program in VISN 22 was open in FY 2002.

Note: VISNs 13 & 14 consolidated as VISN 23 in FY 2002.

NA = Not Applicable

* No Specialized Intensive PTSD program in this VISN was open in the base year.

Table 3-12. Costs for Specialized Intensive PTSD Programs, by VA Facility, FY 2002. †

			FY 2002				DIFFERENCE: FY 2002 - FY 1997		
VISN	FACILITY	#Of DAYS OF TREATMENT	# Of ADMISSIONS	DIRECT COSTS†	COST PER DIEM	COST PER CAPITA	DIRECT COSTS †	COST PER DIEM	COST PER CAPITA
1	CONNECTICUT HCS: West Haven	3404	33	$275,677	$81	$8,354	$10,656	$4	$2,593
1	NORTHAMPTON, MA	5539	87	$537,161	$97	$6,174	$283,115	$61	$3,844
1	TOGUS, ME*	3960	163	$246,691	$62	$1,513	-$180,538	-$50	-$723
1	WHITE RIVER JUNCTION, VT*	913	67	$139,342	$153	$2,080	-$184,713	-$380	-$2,299
2	WESTERN NY HCS: Batavia	3692	268	$656,749	$178	$2,451	-$607,003	-$142	-$2,815
3	BRONX, NY**	0	0	$0	NA	NA	-$752,094	NA	NA
3	HUDSON VALLEY (NY) HCS: Montrose	6195	226	$927,608	$150	$4,104	$9,748	$12	-$995
3	NEW JERSEY HCS: Lyons	7292	175	$934,270	$128	$5,339	-$292,588	-$3	-$889
4	CLARKSBURG, WV	3364	82	$672,357	$200	$8,199	$185,599	-$73	$4,819
4	COATESVILLE, PA	10930	174	$1,272,926	$116	$7,316	-$55,397	$21	$1,590
5	MARTINSBURG, WV	15473	118	$383,128	$25	$3,247	-$22,362	-$21	-$50
5	MARYLAND HCS: Baltimore	1570	73	$306,319	$195	$4,196	$15,952	-$86	$1,377
6	SALEM, VA	4001	128	$995,272	$249	$7,776	$112,126	$33	$227
6	SALISBURY, NC	4575	107	$933,858	$204	$8,728	-$137,798	-$13	-$203
7	AUGUSTA, GA**	0	0	$0	NA	NA	-$2,224,614	NA	NA
7	CENTRAL AL VETERANS HCS: Tuskegee**	0	0	$0	NA	NA	-$993,109	NA	NA
7	TUSCALOOSA, AL*	1775	80	$227,814	$128	$2,848	-$444,768	$7	-$1,109
8	BAY PINES, FL	3637	103	$538,816	$148	$5,231	-$40,855	-$16	-$2,396
8	MIAMI, FL	4609	74	$541,336	$117	$7,315	-$410,876	-$103	-$8,295
10	BRECKSVILLE, OH	NR	39	$296,900	NA	$7,613	$81,575	NC	$3,127
10	CINCINNATI, OH	1615	83	$334,882	$207	$4,035	-$488,029	-$19	-$3,729
10	DAYTON, OH	2864	60	$400,585	$140	$6,676	-$35,508	$38	-$246
11	BATTLE CREEK, MI	9242	376	$1,065,745	$115	$2,834	-$247,912	-$37	-$1,634
12	MILWAUKEE, WI	7001	26	$208,671	$30	$8,026	-$41,392	-$19	-$5,867
12	NORTH CHICAGO, IL	8329	265	$1,113,267	$134	$4,201	$192,074	$19	$851
12	TOMAH, WI	3281	69	$329,461	$100	$4,775	-$153,260	-$45	$386
15	EASTERN KS HCS: Topeka	7722	110	$1,218,716	$158	$11,079	$297,236	$74	$2,778
16	CENTRAL AR VETERANS HCS (Little Rock)	6469	232	$773,264	$120	$3,333	-$1,156,953	-$129	-$9,709
16	JACKSON, MS	3743	120	$226,456	$61	$1,887	-$177,974	-$113	-$1,348
16	NEW ORLEANS, LA	2720	80	$335,824	$123	$4,198	-$503,812	-$212	-$4,283
17	CENTRAL TX VETERANS HCS: Waco	6089	104	$1,034,417	$170	$9,946	$208,981	$54	$3,548
18	SOUTHERN AZ HCS (Tucson)***	1506	88	$314,327	$209	$3,572	$314,327	NA	NA
19	DENVER, CO	3142	132	$531,353	$169	$4,025	-$1,084,567	-$119	-$10,532
19	SHERIDAN, WY**	0	0	$0	NA	NA	-$373,996	NA	NA
20	ALASKA HCS (Anchorage)**	0	0	$0	NA	NA	-$286,628	NA	NA
20	BOISE, ID	463	15	$227,501	$491	$15,167	-$139,118	$79	-$109
20	PUGET SOUND (WA) HCS: American Lake	5803	152	$542,991	$94	$3,572	$106,172	$43	$1,689
20	PUGET SOUND (WA) HCS: Seattle	3680	268	$954,685	$259	$3,562	-$21,399	$17	$161
20	ROSEBURG (OR) HCS	3225	115	$354,307	$110	$3,081	-$388,103	-$114	-$3,055

Table 3-12. Costs for Specialized Intensive PTSD Programs, by VA Facility, FY 2002. †

			FY 2002				DIFFERENCE: FY 2002 - FY 1997		
VISN	FACILITY	#Of DAYS OF TREATMENT	# Of ADMISSIONS	DIRECT COSTS†	COST PER DIEM	COST PER CAPITA	DIRECT COSTS †	COST PER DIEM	COST PER CAPITA
21	HILO, HI	2957	48	$818,504	$277	$17,052	$57,494	$83	$8,597
21	PALO ALTO (CA) HCS: Menlo Park	12544	227	$2,201,581	$176	$9,699	-$499,874	-$3	-$19
22	GREATER LOS ANGELES (CA) HCS: West LA**	0	0	$0	NA	NA	-$656,952	NA	NA
23	BLACK HILLS (SD) HCS: Hot Springs***	1469	34	$216,221	$147	$6,359	$216,221	NA	NA
23	CENTRAL IA HCS: Des Moines	1707	49	$182,371	$107	$3,722	-$142,993	-$30	-$1,208
23	CENTRAL IA HCS: Knoxville**	0	0	$0	NA	NA	-$398,541	NA	NA
23	MINNEAPOLIS, MN**	0	0	$0	NA	NA	-$311,479	NA	NA
ALL VA		176500	4650	$23,271,352	$132	$5,005	-$11,363,927	-$19	-$755

† Direct Costs are All Other Dollars plus total Personal Dollars.

NA=Not Applicable. NR = Not Reported or data were reported incorrectly. NC = Not Calculated because data were either missing or inaccurate.

* For this facility FY 1998 data were used as baseline for computing differences because FY 1997 data were missing for one or more components.

** No Specialized Intensive PTSD program at this facility was open in FY 2002.

*** No Specialized Intensive PTSD program at this facility was open in the base year.

PART IV: OUTCOME MONITORING OF SPECIALIZED INTENSIVE PTSD PROGRAMS

System-wide monitoring of health care outcomes has become an increasingly prominent feature of health care delivery in America, and will eventually constitute a cornerstone of the operation of the Department of Veterans Affairs health care system (Kizer, 1995, 1996; Veterans Health Administration, 1996). As our health care system has undergone a period of accelerating and unprecedented change, public officials, health care professionals, and the public have demanded objective evidence of the continuing quality and value of the care provided. Although controversial, health care "report cards" have been developed (and made public) by an increasing number of health care systems. The treatment of veterans suffering from Posttraumatic Stress Disorder (PTSD) due to their military experience is one of the highest VA priorities. In an earlier report (Fontana & Rosenheck, 1997b), we described our development of a report card for the treatment outcomes of the specialized intensive PTSD programs (SIPPs), as specified in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. Readers who are interested in the technical aspects of the development of the report card should consult this earlier report (Fontana & Rosenheck, 1997b).

VISNs have been very active since FY 1996 in opening, closing and redesigning their intensive PTSD programs. At the same time, there has been increased interest in VA in comparing performance during the most recent fiscal year to a reference year. We use FY 1996 as the reference year for all outcome indices except Work. Due to a change in the assessment of Work from dollars earned to days worked, the earliest that we have data available for the latter measure is FY 1998. FY 1998, therefore, becomes the reference year for days worked. Similarly, we began collecting data concerning veterans' satisfaction with their treatment in FY 1997. That fiscal year, therefore, becomes the reference year for satisfaction.

The changes in program design have made it infeasible for us to continue to compare performance across fiscal years at the program level. Beginning with the Long Journey Home VII report (Fontana, Rosenheck et al., 1999), therefore, we shifted our presentation of performance data from the program level to the station level. We continue to present performance data at the VISN level, however, as in the past. There was a reorganization of VISNs in FY 2002 such that VISNs 13 and 14 were consolidated and their designation changed to VISN 23. This reorganization is represented in this report with the replacement of listings for VISNs 13 and 14 with a listing for VISN 23.

In response to requests from the field, we continue to present the baseline and follow-up means in addition to the risk-adjusted follow-up means for the current fiscal year for each station and VISN. We hope that this expanded presentation of the outcome data to include baseline and follow-up means enhances their utility for program planning.

In the sections that follow we describe the: (1) programs and time-period surveyed, (2) the stations surveyed and the adequacy of the data collected, (3) conditioning of the data to remove unwanted artifacts, (4) methods of risk-adjustment, (5) definition of the specific

measures of outcome and the significance of these outcomes nationwide, (6) patient satisfaction with specialized PTSD treatment nationwide, (7) identification of stations whose outcomes or satisfaction are significantly better or worse than average, (8) deriving a report card for outcomes by synthesizing several indices into a single index, and (9) limitations to the monitoring methodology and data.

Programs and Time-Period Surveyed

The monitoring protocol covers all *intensive* specialized PTSD programs: inpatient, residential and day hospitals (outpatient). The types of residential and inpatient programs that are included are the Evaluation and Brief Treatment PTSD Units (EBTPUs), PTSD Residential Rehabilitation Programs (PRRPs), PTSD Domiciliary Programs (PDPs) and Specialized Inpatient PTSD Units (SIPUs), including a Women's Trauma Recovery Program. More detailed descriptions of these programs can be found in previous NEPEC reports (Fontana, Rosenheck et al., 1993, 1995). Another change that we instituted in the Long Journey Home VII and subsequent reports is the definition of the time-period surveyed. In order to represent performance most accurately within a given fiscal year, we define the relevant performance to consist of clinical *outcomes* that occurred during the index fiscal year. The veterans comprising the sample for this report, therefore, are those whose four-month follow-up assessment after discharge was due during FY 2002. In all, there were 3,603 veterans who were enrolled in the monitoring protocol and were due for follow-up during FY 2002. Of these, 2,823 (78%) were actually followed-up.

Stations Surveyed and Adequacy of Data Collection

A total of 38 stations were surveyed. Confidence in conclusions drawn from our analyses rests upon the representativeness of the data upon which they are based. Representativeness is determined by the percentage of veterans who are followed up. The Special Emphasis Program goal for representativeness is a minimum of a 50% follow-up (VHA Directive 96-051, Program Measure #1). The number due for follow-up, the number actually followed up, and the percentage followed up are presented in Table 4-1 for each station. Data from the 37 stations meeting the minimum goal of 50% were retained for analyses of outcomes and satisfaction. These data included 3,390 veterans, 2,718 of which were followed up (80%). Data from the station failing to meet the SEP goal were deemed to be inadequate for providing representative conclusions and were not included in the analyses. For informational purposes, raw means for the outcome measures, unadjusted for risk factors or baseline levels, are presented in Table D-1 of Appendix D for the station submitting inadequate data.

Conditioning the Data

Several procedures are in place to ensure that the data are maximally complete and accurate. The first step for a program new to the monitoring protocol is to designate one person (an evaluation director) who has overall responsibility for the implementation and ongoing operation of the protocol by program staff, and another person (a data manager) who has daily responsibility for the data collection and the submission of data to NEPEC. Each of these persons is sent a written manual describing the evaluation procedures, and the manual is reviewed with them orally by a member of the NEPEC staff. When data are submitted to NEPEC, they are put through a series of computerized screens for accuracy of answers and for timeliness of submission. Letters explaining errors and identifying overdue forms are mailed to the data manager of each program each week. NEPEC staff edits the data with the correct information as they are returned by the field staff. In order to maximize the quality and quantity of data, NEPEC staff follow up these letters with telephone calls to data managers and evaluation directors as needed. In cases where problems in participation in the monitoring protocol persist, letters detailing the problems are sent to medical center and/or VISN authorities requesting their assistance.

Correcting for Regression to the Mean

Once the data have been made maximally complete and accurate, one other step is necessary to condition them for analysis. Regression to the mean is one of the artifacts potentially affecting longitudinal data. Regression to the mean refers to the fact that scores at time 1 are often found to be closer to the mean at time 2, due to the less than perfect test-retest reliability of the measuring instrument. In situations where people start out more deviantly than the norm (as is most often the case with psychiatric patients entering treatment), some of the movement toward the norm over time may be due to regression to the mean rather than to the treatment programs themselves. Data can be examined to determine if substantial regression to the mean has occurred by correlating the scores at time 1 with the change from time 1 to time 2. If the correlation is statistically significant, substantial regression to the mean has occurred (cf., Speer, 1992). Examination of the monitoring data in this manner reveal that they are affected by regression to the mean. We remove the component of change attributable to regression to the mean, therefore, by transforming raw scores into Atrue scores≅ using the method of Jacobson & Truax (1991). True scores are derived by adjusting raw scores for the test-retest reliability of the measuring instrument according to the formula

$$T_j = Rel(X_j) + (1 - Rel)M$$

where T represents the true score, Rel is the test-retest reliability, X is the raw score, and M is the mean.

Values for the test-retest reliabilities were obtained from an earlier study of specialized

outpatient treatment for PTSD (Fontana & Rosenheck, 1996b). In that study, a stabilization period of symptoms and social functioning was observed beginning four months after the initiation of treatment. The correlations across a four-month interval during this period of no change in the levels of symptoms or social functioning were used as the test-retest reliabilities. All analyses were performed on true scores, thereby maximizing the sensitivity of the analyses to programmatically induced change.

Determining the Quality of Outcomes

VHA Directive 96-051 specifies outcome goals for PTSD, substance abuse, and work in Population Measures 1, 2 and 3. We have introduced some technical modifications to the determination of whether these goals are met so that the methods used are consistent with the methods used elsewhere in the National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 1998; Kasprow et al., 1997; Seibyl et al., 1997). In addition, we have added violence as Population Measure 6, because it is the single most important disruption to social functioning. These changes have been instituted with the approval of the Clinical Quality Improvement Specialist in the Office of Performance and Quality, VA Headquarters.

As with the vast majority of medical conditions, absolute outcome standards have not been established for the treatment of PTSD. In the absence of such standards, we use the performance of the median VISN and median station nationwide as the reference point for evaluating the performance of the other VISNs and stations. For each clinical outcome and patient satisfaction, the risk-adjusted value for the median VISN or station is adopted as the reference point. The SEP goal for each measure of clinical outcome is that the outcome not be significantly worse than that of the median, or reference, VISN or station.

Risk Adjustment

A major challenge for all outcome monitoring efforts is posed by the inevitable differences among veterans treated at various stations at the time of admission. Such differences in sociodemographic and clinical characteristics can have a substantial influence on the amount of change that occurs during treatment. In addition, our inspection of prior data suggested that differences in the conditions under which data are collected at follow-up might affect outcomes differentially across stations. As of January 8, 1999 we modified our follow-up instrument so as to include questions concerning the conditions under which the data were collected. We found that if the follow-up data were collected by clinicians associated with the programs either in face-to-face contact or over the telephone, veterans' reports of their outcomes and their satisfaction were significantly higher than if the data were collected by mail or by face-to-face contact or telephone by nonclinicians who were associated with the programs. We recommend, therefore, that follow-up data ***not*** be collected by clinicians who are associated with the programs.

As a result of these influences, outcomes should not be compared simply and directly *across* VISNs or stations without adjusting for these influences. The procedure for doing this is commonly referred to as risk adjustment (Iezzoni, 1995). Thus, the average outcome and satisfaction at each individual VISN or station is compared to that of the median VISN or station, after statistical adjustment for differences in patient characteristics at admission and conditions of follow-up data collection using multivariate methods. The significance levels for individual VISNs or stations performing significantly better or worse than their respective median counterparts are identified for each outcome measure and satisfaction.

Data Analytic Strategy

The first step in the analytic process is to evaluate the significance of the change from baseline to follow-up for each of the outcome indices for each station. Paired-comparison t-tests are performed on the true-scored data to determine the significance of these changes. The means themselves and the significance of the differences between admission and four-month follow-up are presented in Tables 4-2 through 4-13.

The next step is to regress the scores at four-months follow-up on the scores at admission to produce a set of residual outcome scores. These residual scores represent outcomes adjusted for admission levels. Residual scores for each of the six outcome variables are then correlated with 25 different sociodemographic and clinical characteristics at the time of admission and with an index ordering the conditions of data collection at follow-up.

In the data set for this report, ten characteristics were found to be correlated significantly ($p<.05$) with the residual scores for two or more of the outcome variables and, therefore, were retained for use as risk-adjusters in subsequent analyses. These characteristics are veterans' African American or Latino ethnicity, marital status, education, war zone service, receipt of hostile or friendly fire, service connection for PTSD, number of comorbid psychiatric disorders, prior history of hospitalization for psychiatric disorder or substance abuse, and the follow-up data having been collected by a clinician associated with the program. Eight characteristics were found to be correlated significantly with the satisfaction ratings and were retained for use as risk-adjusters for analyses involving satisfaction: age, African American ethnicity, distance of residence from the program, war zone service, service connection for PTSD, prior history of hospitalization for psychiatric disorder or substance abuse, prescription of medications at admission, and the follow-up data having been collected by a clinician associated with the program.

The third step in the analyses is to use analysis of covariance to generate risk-adjusted follow-up means for VISNs and stations for each clinical outcome and patient satisfaction. True-scored follow-up means, adjusted for risk factors, are presented for the six outcome indices for each VISN and station in Tables 4-2 through 4-13.

Then multiple regression analysis is employed to compare the outcomes and satisfaction

for all VISNs or stations to that of the median VISN or station for each outcome and satisfaction. This analysis produced a regression coefficient for each VISN or station, representing the number of scale points that that VISN or station deviated from its median counterpart after risk adjustment. The scale points for clinical outcomes and satisfaction are presented in the metrics of the instruments used to measure them. The regression coefficients are presented for outcomes in Tables 4-2 through 4-13 and for satisfaction in Tables 4-16 and 4-17 as the "Deviation of the Mean from the Median." Significance levels represent the probability that each deviation could have occurred by chance. For ease of identification, those VISNs and stations whose outcomes or satisfaction were significantly worse than that of their median counterpart are marked by an "X". As noted above, outcomes which were significantly worse than that of the median for the Short Mississippi Scale (Tables 4-2 and 4-3), the ASI Composite for Alcohol Abuse (Tables 4-6 and
4-7), the ASI Composite for Drug Abuse (Tables 4-8 and 4-9), or for Work (Tables 4-12 and 4-13) do not meet the goals for Population Measures 1, 2 and/or 3 in VHA Directive 96-051 as modified above.

Conducting the monitoring protocol over several years has enabled us to perform another analysis on outcomes for the first time. We now have data for a sufficient number of years that we can track outcomes to present the patterns of change from 1997 through 2002. These patterns are graphed in Figures 1-3.

Measures of Outcome

The baseline data for outcomes monitoring are collected by a self-report questionnaire at the time of admission to specialized PTSD treatment, and follow-up data by a parallel questionnaire four months after discharge. (Details of the monitoring protocol, the quality control procedures at NEPEC, and copies of the data collection forms can be found in Fontana and Rosenheck, 1997b.) Outcome is defined as the *change* in symptoms and functioning from the month preceding admission to the month preceding the four-month follow-up and is assessed in five domains: 1) PTSD symptoms, 2) alcohol abuse, 3) drug abuse, 4) violence, and 5) work.

PTSD Symptoms

Due to their particular significance in these specialized programs, PTSD symptoms are measured by two instruments: the Short Form of the Mississippi Scale for Combat-Related PTSD that has been validated in a large sample of outpatients (Fontana & Rosenheck, 1994) and a four-item PTSD Scale that has been specially constructed for program monitoring to assess: 1) intrusive thoughts, flashbacks or nightmares, 2) avoidance of reminders of the war, 3) feelings of numbness or emotional distance from other people, and 4) sleep disturbances, irritability or hyperarousal (Cronbach alpha=0.67). For the SIPPs nationally, there was significant improvement in PTSD ($p<.0001$) as measured by both instruments. The true-scored Short Mississippi Scale decreased by 1.54 points (3.82%) from 40.29 to 33.75; and the true-scored PTSD Scale decreased by 1.01 points (6.00%) from 16.84 to 15.83. Both decreases are

significant at p<.0001. The average length of stay in the SIPPs nationally was 43.60 days (sd=35.53). Neither of these changes in PTSD symptoms were correlated significantly (p<.05) with length of stay: r=.01 for the Short Mississippi Scale and r=.02 for the PTSD Scale.

Alcohol Abuse and Drug Abuse

Alcohol abuse and drug abuse are measured by the composite indices from the Addiction Severity Index (McLellan et al., 1985), a widely used and well-validated measure of substance abuse outcomes. Nationally, there was a significant decrease in alcohol abuse (p<.0001) and drug abuse (p>.0001). The true-scored alcohol abuse composite decreased by .02 points (16.67%) from .12 to .10; while the true-scored drug abuse composite decreased by .01 points (20%) from .05 to .04. Neither change in substance abuse was correlated significantly with length of stay: r=.02 for alcohol abuse and r=.02 for drug abuse.

Violence

Violence is measured by four items that were adapted from the National Vietnam Veterans Readjustment Study (Kulka et al., 1990): 1) destruction of property, 2) threatening someone with physical violence without a weapon, 3) threatening someone with a weapon, and 4) physically fighting with someone (Cronbach alpha=0.71). Nationally, the true-scored violence scale decreased significantly (p<.0001) by .64 points (42.38%) from 1.51 to 0.87. The decrease in violence was not correlated significantly with length of stay (r=-.01).

Work

Work is measured as the number of days employed for pay during the 30 days preceding the interview. Nationally, there was a significant *decrease* in true-scored work outcomes (p<.0001). The true-scored number of days worked during the past 30 days decreased by 1.14 (36.31%) from 3.14 to 2.00 days. The decrease in days worked was not correlated significantly with length of stay (r=-.03).

Patterns of Change over Time

Outcomes were represented by the differences in clinical status between follow-up four months after discharge and admission. For each outcome measure, the change in this difference was evaluated across time by including as covariates the admission level of the measure as well as all background factors that were found to be related significantly to fiscal year. The changes in outcome scores from FY 1997 through FY 2002 are presented in Figures 1-3. The scales on the vertical (Y) axes show that the outcomes are quite modest in absolute terms, although for each measure there is a statistically significant difference among outcomes across the years. It should be noted that a negative outcome score for measures of PTSD, substance use, and violence indicates a reduction in symptoms and is therefore desirable; while a negative outcome score for work indicates a reduction in days of employment and is therefore undesirable.

Figure 1 presents the changes in PTSD symptoms. For both the Mississippi and NEPEC measures, there was a small but significant decline in the size of the amelioration of PTSD symptom severity over the years, with the greatest shift occurring between 1999 and 2000. The changes in alcohol and drug use can be seen in Figure 2. There is a significant and largely consistent trend (with the exception of 1998) for an increasing improvement in drug use from 1997 through 2002. There was a substantial decline in outcomes for alcohol use in 1999 and 2000 that was reversed in 2001 and 2002. This reversal appears to have continued the trend toward improvement in outcomes that was suggested in 1997 and 1998. The outcomes for violence have shown a steady improvement over the years, with a small decline in improvement in 2000. This decline was reversed in 2001 and 2002. Outcomes for work decreased significantly from 1997 through 2002, with a stabilization of outcomes beginning in 1999.

Fig. 1. Changes in PTSD Scores: 1997-2002

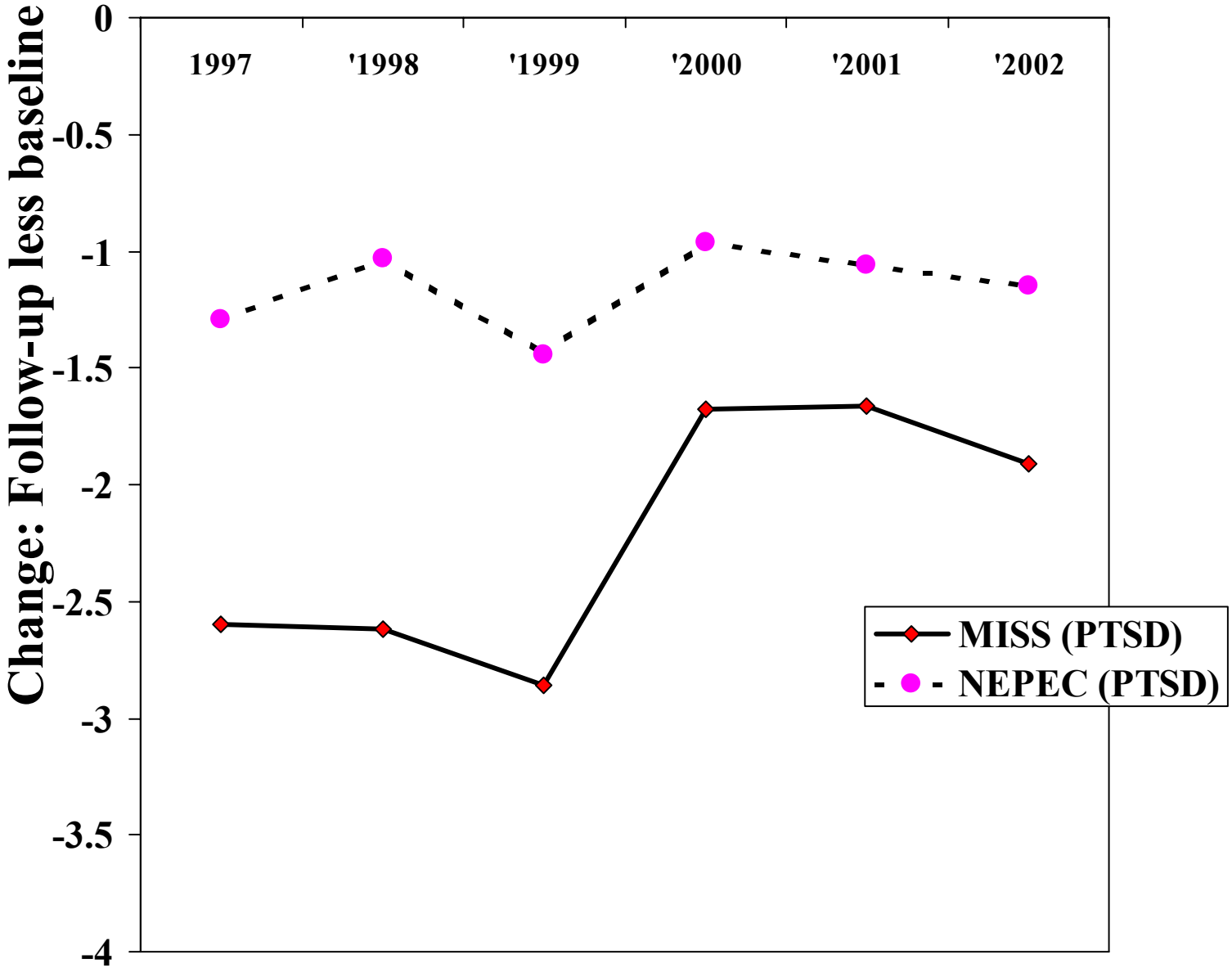


Fig. 2. Changes in ASI Scores: 1997-2002

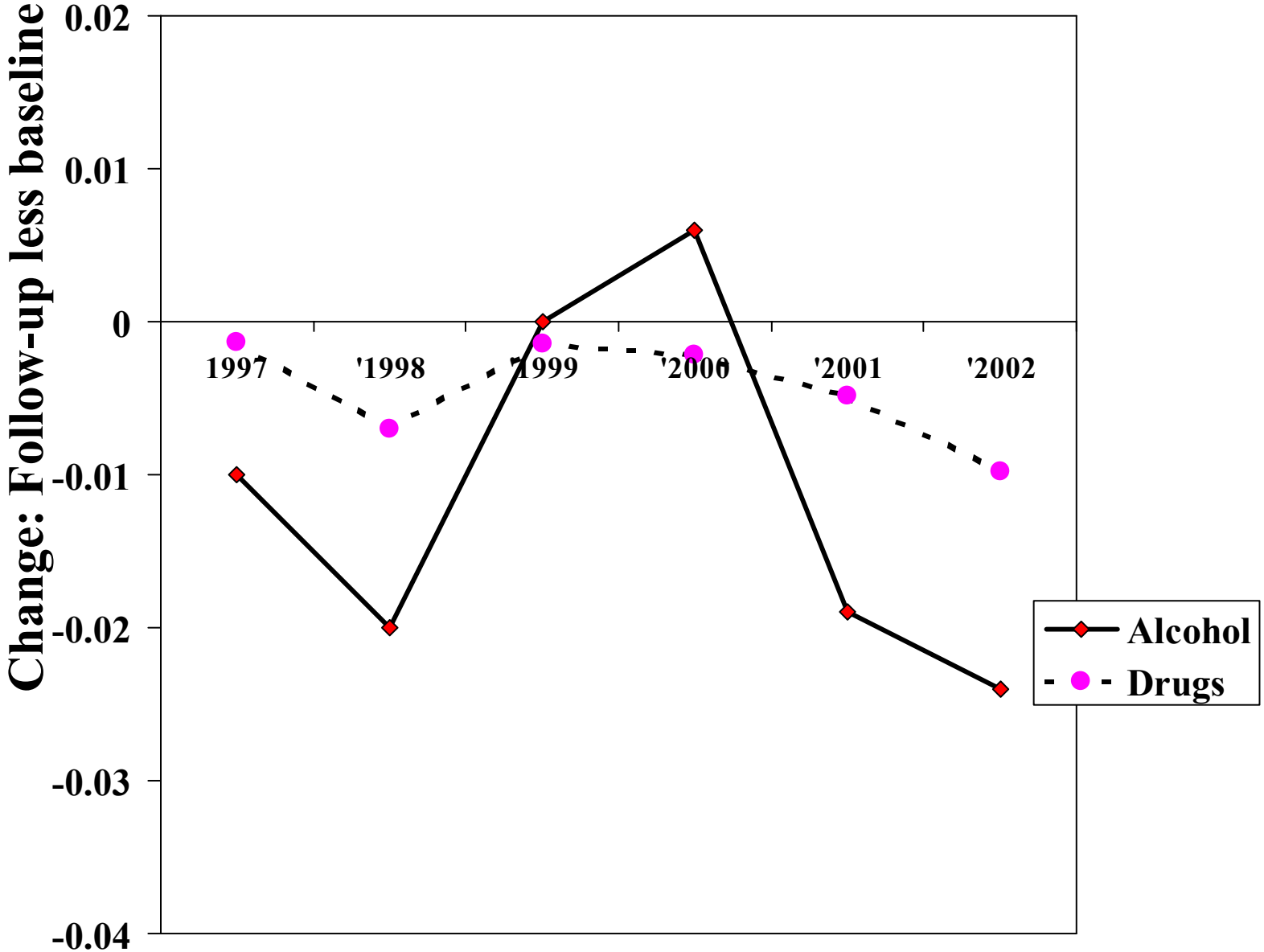
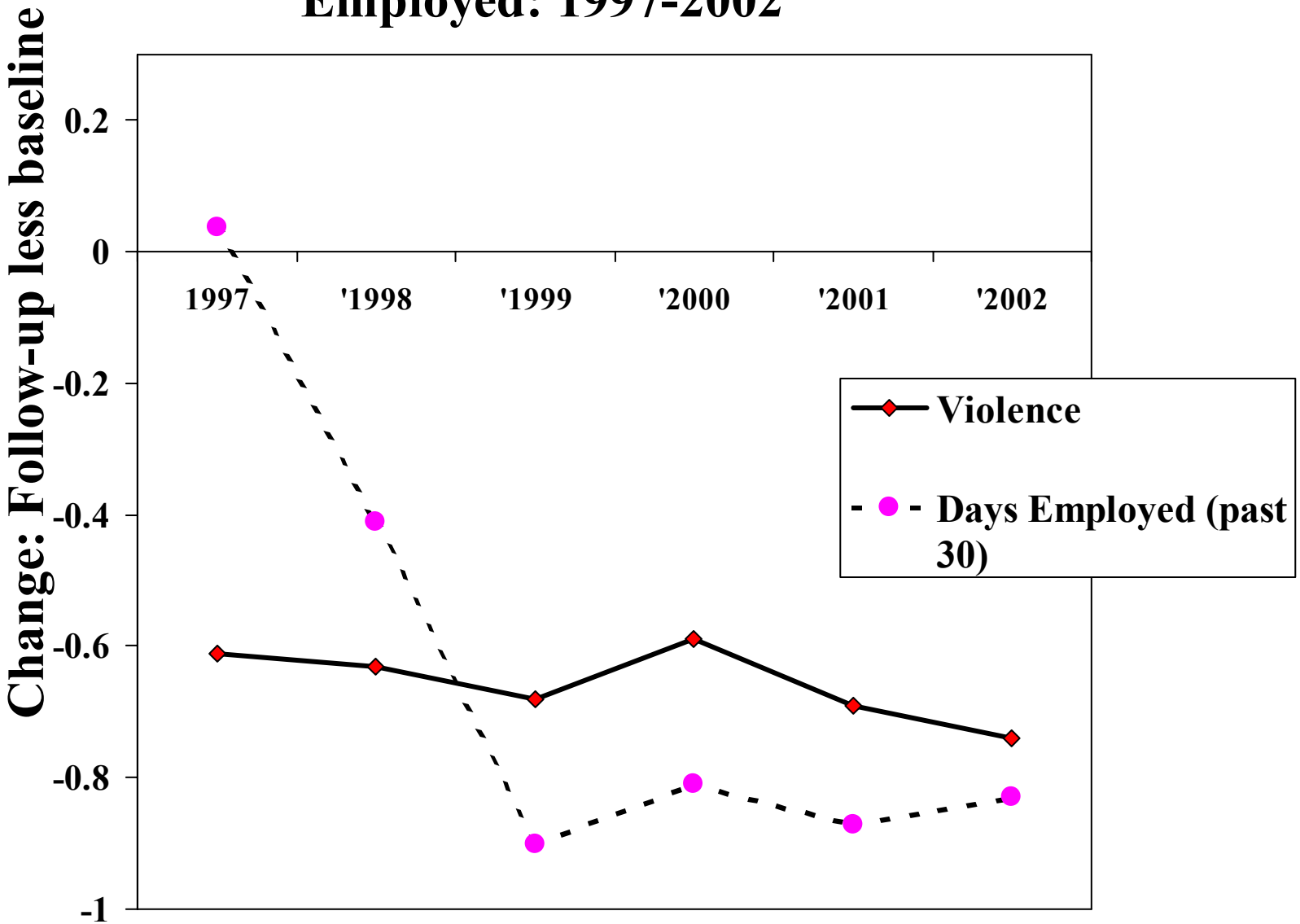


Fig. 3. Changes in Violence Scores and Days Employed: 1997-2002



Satisfaction with Services

The follow-up questionnaire was modified in June 1996 to permit the monitoring of veterans' satisfaction with the clinical services received. Four items, scored on 4-point and 5-point Likert scales, cohered as a highly internally consistent cluster (Cronbach alpha=.84). These items, based on the work of Attkisson et al. (1983), asked the veterans how satisfied they were with the care they received from the specialized PTSD program, how they would rate the care they received from the specialized PTSD program, whether they would choose to go to the specialized PTSD program again if they needed treatment, and whether they would recommend the specialized PTSD program to other veterans if they needed treatment. Satisfaction scores can range from 4 to 18. A mid-point score of 11 represents equally satisfied and dissatisfied ratings. Nationally, veterans gave the SIPPs a rating of 15.66, indicating that overall they were satisfied with services. Satisfaction was correlated marginally ($p<.06$) with length of stay ($r=.04$).

Satisfaction is an important dimension of quality of care in its own right. Only 10% of the explained variance in satisfaction ratings can be attributed to improved outcomes (Fontana & Rosenheck, 1999). Satisfaction and outcomes, therefore, should be considered as largely separate dimensions of quality of care.

A Report Card for Outcomes

Although performance assessment of PTSD treatment clearly requires consideration of multiple outcome domains, the complex results do not allow summary assessment of the performance of each station. The six outcome variables are therefore combined into a single index, analogous to the cumulative grade-point average, on a report card of outcome performance. To accomplish this synthesis, we had to resolve two questions: 1) how to combine the regression coefficients when they were derived from variables that were measured with different metrics, and 2) what weight to give the regression coefficients for the different variables in combining them.

We resolved the first problem by using the *standardized* regression coefficients for deviations from the median VISN or station. This converts the different metrics for each variable into the common metric of standard scores. In addition, this method has the advantage of taking the actual sample sizes and variabilities of the individual VISNs and stations into account. Additionally, we reversed the sign of the coefficient for Work so that the direction was the same as for symptoms, substance abuse and violence.

We resolved the second problem by giving the combined value of the two PTSD symptom outcomes equal weight to the combined value of the other four outcomes. This weighting was decided upon after consultation with national experts in PTSD treatment and VHA headquarters. There was a consensus that while a diverse range of outcomes was desirable, the specialized nature of these programs as PTSD programs warranted a heavier emphasis on the outcomes for PTSD symptoms than for other outcomes.

The standardized coefficients for the Short Mississippi Scale and the NEPEC PTSD Scale were thus summed and averaged, as were the standardized coefficients for Alcohol Abuse, Drug Abuse, Violence and Work. These two averages were summed to produce the Standardized Combined Mean for all the outcomes. Finally, the Standardized Combined Mean was ranked, with the lowest ranks assigned to VISNs and stations with the best outcomes and the highest ranks assigned to those with the worst outcomes. The ranks constitute a report card of the goodness of VISNs' and stations' outcome performance represented as a single index. These data can be found in Tables 4-14 and 4-15.

A Report Card for Satisfaction

The mean risk-adjusted satisfaction ratings are presented in Table 4-16 by VISN and in Table 4-17 for stations. Comparison of each VISN and station to its median counterpart yields deviation scores with associated significance levels. The deviation scores represent the number of satisfaction scale points that the satisfaction rating for each VISN or station differs from the satisfaction rating of the median VISN or station. VISNs and stations are ranked by their standardized deviation from the median from highest to lowest to provide an index comparable to the single index for outcomes. These data are presented in Tables 4-16 and 4-17.

Limitations to the Monitoring Methodology

Several limitations of the data presented here deserve comment and consideration. First, it must be acknowledged that although this report presents one of the largest outcome assessment efforts of its type, the numbers of cases and the follow-up rates from some individual stations are smaller than optimal, even among those included in the comparisons as having submitted adequate data. Although the number of stations not reporting adequate data has declined from last year, there is still one station that did not submit sufficient data to be included in the comparisons. It should be noted, however, that this station fell just below the standard for adequacy. We are hopeful that data collection will continue to improve as VHA leadership emphasizes the value of the information available through the monitoring effort to the maintenance and improvement of the quality of clinical services in the new VA.

Second, it must be acknowledged that statistical risk adjustment, although widely used, is imperfect, and can never be as effective as random assignment in establishing equivalent groups. Since it will never be possible to randomly assign patients living in different localities to health care facilities (VA or otherwise), however, clinical performance evaluation must continue to develop within the limits of available risk adjustment technologies.

Third, instrumentation in large-scale outcome assessment efforts must be economical, and, in the area of psychiatric assessment, must typically rely on self-report data that are subject to misrepresentation. Some clinicians have expressed the specific concern that patients may

underreport their improvement out of fear that reporting improvement will jeopardize their compensation status. The instruments used in the current effort have well-established psychometric properties and were selected because of their consistency with results that were found using more extensive assessment batteries in smaller scale studies (Fontana & Rosenheck, 1996a). Moreover, we conducted a study of the effects of compensation-seeking on treatment outcomes and found that there was no evidence of such effects among outpatients and among inpatients in programs of short to moderate lengths of stay (Fontana & Rosenheck, 1998). Only in long-stay programs (averaging 100 days) was there evidence of a significant compensation-seeking bias on outcomes. This compensation-seeking effect, along with generally poorer outcomes and poorer ratings of satisfaction, led us to suggest consideration of avoiding the implementation of long-stay programs.

Fourth, as noted above, only limited data are available on the nature of services delivered during intensive treatment, and no information is available on the quality of aftercare services. While this information might help to account for weaker outcomes at some stations, it would not alter the basic assessment of outcomes presented in this report. For a responsible, patient-oriented treatment agency, inpatient care cannot be divorced from outpatient care even if the care is delivered through a different health care system. At this stage in the development of methods for outcomes monitoring, we do not yet have the tools to both identify problems and present definitive solutions. At this time, comparative outcome data can only suggest broad directions for improvement. Treatment modification and development must be based on clinical and administrative experience, and on familiarity with the patients and operating circumstances confronting each station.

Further Analyses and the Commitment to Quality

We plan to conduct further analyses to determine the possible role of various treatment factors in contributing to superior outcomes. Primary among them are length of stay, size of program and use of medications. This past fiscal year, we completed our evaluation of the outcomes of the Women's Stress Disorder Treatment Teams (Fontana & Rosenheck, 2002). Also, in collaboration with the National Center for PTSD, we are developing monitoring instruments for assessing the outcomes of specialized outpatient PTSD programs.

Providing effective treatment of military-related PTSD is a major priority for the Veterans Health Administration. Although techniques of outcomes monitoring and assessment are in an early stage of development, the implementation of a nationwide effort to assess outcomes of intensive treatment of PTSD is a major accomplishment for VA, and reflects a commitment in the new VA to maintaining high levels of quality, accountability, and health care value.

Table 4-1. Adequacy of Data

VISN	Station	# Follow-Ups Due in FY'02	# Follow-Ups Due that were Obtained	% Follow-Ups Due that were Obtained*	
1	Northampton	58	50	86	
1	Togus	89	61	69	
1	West Haven	38	33	87	
1	White River Junction	65	42	65	
2	Batavia (Buffalo)	92	86	93	
3	Lyons	117	102	87	
3	Montrose	130	107	82	
4	Clarksburg	59	44	75	
4	Coatesville	213	105	49	X
5	Baltimore	71	38	54	
5	Martinsburg	117	78	67	
6	Salem	83	81	98	
6	Salisbury	101	83	82	
7	Tuscaloosa**	191	182	95	
8	Bay Pines	75	67	89	
8	Miami	69	65	94	
9					
10	Brecksville (Cleveland)	35	33	94	
10	Cincinnati	68	60	88	
10	Dayton	52	28	54	
11	Battle Creek	187	126	67	
12	Milwaukee	20	10	50	
12	North Chicago	185	121	65	
12	Tomah	52	34	65	
15	Topeka	101	75	74	
16	Jackson	69	51	74	
16	New Orleans	61	61	100	
16	North Little Rock	238	226	95	
17	Waco	81	64	79	
18	Tucson	47	31	66	
19	Denver	121	118	98	
20	American Lake (Tacoma)	121	75	62	
20	Boise	19	11	58	
20	Roseburg	60	36	60	
20	Seattle	231	197	85	
21	Hilo	58	51	88	
21	Palo Alto	176	141	80	
22					
23	Des Moines	41	41	100	
23	Hot Springs	12	9	75	
ALL VA		3603	2823	78	

* Program Measure #1 for PTSD in VHA Directive 10-96-051. X indicates that SEP goal was not met and that data were not adequate for representative comparison with other stations.

** Program was closed before the end of FY 2002.

Table 4-2. Means for PTSD (Short Miss.) by VISN

VISN	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll. - Adm.*		FY'96 Adj. Foll. Mean	FY'02 Adj. Foll. Mean	FY'02 - FY'96 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**		Sig. Level
1	40.00	39.52	-0.48		40.92	39.31	-1.61	0.36		
2#	40.91	39.65	-1.26	*	37.93	38.95	1.02	0.00		
3	39.77	36.95	-2.82	*	36.56	37.32	0.76	-1.63		0.01
4	41.50	42.95	1.45	*	37.35	41.95	4.60	3.00	X	0.0003
5	41.53	40.13	-1.40	*	40.31	39.33	-0.98	0.38		
6	40.62	38.98	-1.64	*	39.59	38.78	-0.81	-0.17		
7	40.36	39.43	-0.93	*	41.09	39.41	-1.68	0.46		
8	40.12	39.49	-0.63		40.70	39.49	-1.21	0.54		
9					42.09					
10	40.84	38.76	-2.08	*	40.07	38.50	-1.57	-0.45		
11	40.48	40.37	-0.11		38.10	40.11	2.01	1.16	X	0.05
12	40.63	39.81	-0.82		39.92	39.38	-0.54	0.43		
15	39.52	36.55	-2.97	*	38.13	38.14	0.01	-0.81		
16	40.67	39.54	-1.13	*	40.01	39.41	-0.60	0.46		
17	39.65	38.20	-1.45	*	37.35	38.57	1.22	-0.38		
18	38.64	37.87	-0.77		40.54	38.45	-2.09	-0.50		
19	43.25	41.32	-1.93	*	38.84	40.26	1.42	1.31	X	0.03
20	39.68	36.39	-3.29	*	38.87	36.58	-2.29	-2.37		0.0001
21	38.20	37.22	-0.98	*	38.89	38.46	-0.43	-0.49		
22					35.27					
23	40.04	36.44	-3.60	*	38.39	36.80	-1.59	-2.15		0.02
ALL VA	40.29	38.75	-1.54	*	39.01	38.75	-0.26			

# Indicates the median VISN for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-3. Means for PTSD (Short Miss.) by Station

VISN	Station	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll.- Adm.*		FY'96 Adj. Foll. Mean	FY'02 Adj. Foll. Mean	FY'02 - FY'96 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**		Sig. Level
1	Northampton	39.57	39.15	-0.42		40.14	38.51	-1.63	-0.08		
1	Togus	39.89	38.72	-1.17	*	41.07	38.52	-2.55	-0.07		
1	West Haven	40.41	40.12	-0.29		41.00	40.77	-0.23	2.18	X	0.03
1	White River Junction	40.36	40.63	0.27		41.49	40.27	-1.22	1.68		
2	Batavia (Buffalo)	40.91	39.65	-1.26	*	37.83	38.95	1.12	0.36		
3	Bronx					38.94					
3	Lyons	39.59	36.89	-2.70	*	35.27	37.47	2.20	-1.12		
3	Montrose	39.94	37.00	-2.94	*	38.24	37.21	-1.03	-1.38		0.04
4	Clarksburg	41.50	42.95	1.45	*	33.10	41.90	8.80	3.31	X	0.0001
4	Coatesville					41.13					
5	Baltimore	40.92	40.04	-0.88		40.40	39.51	-0.89	0.92		
5	Martinsburg	41.84	40.18	-1.66	*	40.44	39.27	-1.17	0.68		
6	Salem	40.52	39.14	-1.38	*	40.73	39.27	-1.46	0.68		
6	Salisbury	40.70	38.82	-1.88	*	37.29	38.38	1.09	-0.21		
7	Augusta					42.03					
7	Tuscaloosa	40.36	39.43	-0.93	*		39.39		0.80		
7	Tuskegee					39.38					
8	Bay Pines	40.68	38.76	-1.92	*	41.93	38.52	-3.41	-0.07		
8	Miami	39.54	40.24	0.70		39.40	40.42	1.02	1.83	X	0.02
9	Louisville					41.92					
10	Brecksville (Cleveland)	40.78	37.52	-3.26	*	39.26	37.24	-2.02	-1.35		
10	Cincinnati	40.95	38.94	-2.01	*	40.77	38.50	-2.27	-0.09		
10	Dayton	40.70	39.82	-0.88		39.16	40.01	0.85	1.42		
11	Battle Creek	40.48	40.37	-0.11		38.11	40.16	2.05	1.57	X	0.02
12	Milwaukee	38.19	37.22	-0.97		36.70	38.19	1.49	-0.40		
12	North Chicago	40.65	39.89	-0.76		39.34	39.44	0.10	0.85		
12	Tomah	41.25	40.29	-0.96		41.45	39.49	-1.96	0.90		
15	Topeka	39.52	36.55	-2.97	*	38.18	38.22	0.04	-0.37		
16	Jackson	41.07	40.20	-0.87		40.94	39.81	-1.13	1.22		
16	New Orleans	41.28	37.98	-3.30	*	39.98	37.49	-2.49	-1.10		
16	North Little Rock	40.42	39.82	-0.60		39.74	39.82	0.08	1.23	X	0.02
17	Temple					39.55					
17	Waco	39.65	38.20	-1.45	*	36.71	38.64	1.93	0.05		
18	Phoenix					40.59					
18	Tucson	38.64	37.87	-0.77			38.40		-0.19		
19	Denver	43.25	41.32	-1.93	*	38.33	40.33	2.00	1.74	X	0.007
19	Sheridan					39.47					
20	American Lake	40.69	39.57	-1.12	*	40.44	39.23	-1.21	0.64		
20	Anchorage					34.55					
20	Boise	41.16	35.97	-5.19	*	42.46	34.93	-7.53	-3.66		0.02
20	Portland					39.75					
20	Roseburg	39.30	38.43	-0.87		35.25	38.55	3.30	-0.04		
20	Seattle	39.27	34.84	-4.43	*	39.96	35.23	-4.73	-3.36		0.0001
21	Hilo	39.17	37.54	-1.63	*	39.92	37.97	-1.95	-0.62		
21#	Palo Alto	37.85	37.11	-0.74		38.44	38.59	0.15	0.00		
21	San Francisco					41.13					
22	West Los Angeles					35.38					
23	Minneapolis					41.44					
23	Knoxville					41.90					
23	Des Moines	40.72	36.68	-4.04	*	31.82	36.81	4.99	-1.78		0.05
23	Hot Springs	36.95	35.35	-1.60			36.94		-1.65		
ALL VA		40.29	38.75	-1.54	*	39.01	38.75	-0.26			

# Indicates the median station for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-4. Means for PTSD (NEPEC Scale) by VISN

VISN	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll. - Adm.*		FY'96 Adj. Foll. Mean	FY'02Adj. Foll. Mean	FY'02 - FY'96 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**		Sig. Level
1	16.66	15.88	-0.78		16.86	15.94	-0.92	-0.05		
2	17.09	16.33	-0.76	*	16.29	16.06	-0.23	0.07		
3	16.83	15.00	-1.83	*	15.31	15.07	-0.24	-0.92		0.0001
4	17.06	16.90	-0.16	*	15.86	16.73	0.87	0.74		
5	16.98	15.98	-1.00	*	16.68	15.81	-0.87	-0.18		
6	16.76	15.55	-1.21	*	15.98	15.58	-0.40	-0.41		0.05
7	16.79	15.99	-0.80	*	17.14	16.10	-1.04	0.11		
8	17.05	16.40	-0.65		16.96	16.26	-0.70	0.27		
9					17.66					
10	16.78	15.85	-0.93	*	16.53	15.85	-0.68	-0.14		
11	16.64	16.40	-0.24		15.95	16.40	0.45	0.41		
12	16.94	16.24	-0.70		16.39	16.10	-0.29	0.11		
15	16.81	14.64	-2.17	*	15.73	15.03	-0.70	-0.96		0.001
16#	16.94	16.05	-0.89	*	16.60	15.99	-0.61	0.00		
17	16.99	16.30	-0.69	*	15.60	16.23	0.63	0.24		
18	17.27	16.15	-1.12		16.63	15.91	-0.72	-0.08		
19	17.35	16.89	-0.46	*	16.30	16.89	0.59	0.90	X	0.0001
20	16.79	15.04	-1.75	*	16.13	15.01	-1.12	-0.98		0.0001
21	16.32	15.54	-0.78	*	16.29	15.84	-0.45	-0.15		
22					13.91					
23	16.64	16.11		*	15.43	16.25	0.82	0.26		
ALL VA	16.84	15.83	-1.01	*	16.15	15.84	-0.31			

# Indicates the median VISN for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-5. Means for PTSD (NEPEC Scale) by Station

VISN	Station	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll.- Adm.*		FY'96 Adj. Foll. Mean	FY'02 Adj. Foll. Mean	FY'02 - FY'96 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**		Sig. Level
1	Northampton	16.56	15.87	-0.69		17.12	15.81	-1.31	-0.17		
1	Togus	16.48	15.21	-1.27	*	16.87	15.34	-1.53	-0.64		
1	West Haven	17.02	16.66	-0.36		16.76	16.90	0.14	0.92		
1	White River Junction	16.78	16.27	-0.51		16.92	16.23	-0.69	0.25		
2	Batavia (Buffalo)	17.09	16.33	-0.76	*	16.27	16.07	-0.20	0.09		
3	Bronx					15.81					
3	Lyons	16.75	15.50	-1.25	*	15.04	15.69	0.65	-0.29		
3	Montrose	16.90	14.52	-2.38	*	15.59	14.51	-1.08	-1.47		0.0004
4	Clarksburg	17.06	16.90	-0.16	*	14.80	16.73	1.93	0.75		
4	Coatesville					16.80					
5	Baltimore	17.13	15.78	-1.35		16.70	15.51	-1.19	-0.47		
5	Martinsburg	16.90	16.09	-0.81	*	16.76	15.97	-0.79	-0.01		
6	Salem	16.84	15.31	-1.53	*	16.06	15.42	-0.64	-0.56		
6	Salisbury	16.68	15.78	-0.90	*	15.84	15.78	-0.06	-0.20		
7	Augusta					17.57					
7	Tuscaloosa	16.79	15.99	-0.80	*		16.12		0.14		
7	Tuskegee					16.41					
8	Bay Pines	17.16	16.25	-0.91	*	16.94	16.11	-0.83	0.13		
8	Miami	16.94	16.57	-0.37		16.94	16.38	-0.56	0.40		
9	Louisville					17.59					
10#	Brecksville (Cleveland)	16.70	15.99	-0.71	*	15.96	15.98	0.02	0.00		
10	Cincinnati	16.70	15.56	-1.14	*	16.92	15.57	-1.35	-0.41		
10	Dayton	17.02	16.30	-0.72		16.18	16.31	0.13	0.33		
11	Battle Creek	16.64	16.40	-0.24		15.96	16.43	0.47	0.45		
12	Milwaukee	15.55	15.02	-0.53		13.97	15.69	1.72	-0.29		
12	North Chicago	16.94	16.31	-0.63		16.42	16.15	-0.27	0.17		
12	Tomah	17.36	16.34	-1.02		17.00	16.03	-0.97	0.05		
15	Topeka	16.81	14.64	-2.17	*	15.74	15.09	-0.65	-0.89		0.05
16	Jackson	16.98	16.31	-0.67		16.82	16.26	-0.56	0.28		
16	New Orleans	16.97	15.41	-1.56	*	17.09	15.29	-1.80	-0.69		
16	North Little Rock	16.93	16.17	-0.76		16.33	16.10	-0.23	0.12		
17	Temple					16.08					
17	Waco	16.99	16.30	-0.69	*	15.45	16.27	0.82	0.29		
18	Phoenix					16.66					
18	Tucson	17.27	16.15	-1.12			15.87		-0.11		
19	Denver	17.35	16.89	-0.46	*	16.36	16.96	0.60	0.98	X	0.03
19	Sheridan					16.13					
20	American Lake	16.79	16.31	-0.48	*	16.43	16.24	-0.19	0.26		
20	Anchorage					15.24					
20	Boise	17.18	15.32	-1.86	*	16.95	14.84	-2.11	-1.14		
20	Portland					16.54					
20	Roseburg	16.81	16.12	-0.69		14.66	16.10	1.44	0.12		
20	Seattle	16.76	14.34	-2.42	*	16.62	14.29	-2.33	-1.69		0.0001
21	Hilo	16.39	15.56	-0.83	*	15.84	15.71	-0.13	-0.27		
21	Palo Alto	16.30	15.54	-0.76		16.18	15.85	-0.33	-0.13		
21	San Francisco					16.94					
22	West Los Angeles					13.92					
23	Minneapolis					16.87					
23	Knoxville					17.15					
23	Des Moines	16.76	16.45	-0.31	*	12.27	16.57	4.30	0.59		
23	Hot Springs	16.09	14.56	-1.53			14.88		-1.10		
ALL VA		16.84	15.83	-1.01	*	16.15	15.84	-0.31			

# Indicates the median station for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-6. Means for Alcohol Abuse (ASI) by VISN

VISN	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll. - Adm.*		FY'96 Adj. Foll. Mean	FY'02 Adj. Foll. Mean	FY'02 - FY'96 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**		Sig. Level
1	0.13	0.09	-0.04	*	0.17	0.09	-0.08	-0.01		
2	0.13	0.11	-0.02		0.18	0.11	-0.07	0.01		
3	0.16	0.10	-0.06	*	0.14	0.09	-0.05	-0.01		0.05
4	0.10	0.09	-0.01		0.17	0.10	-0.07	0.00		
5	0.11	0.10	-0.01		0.16	0.11	-0.05	0.01		
6#	0.10	0.10	0.00		0.15	0.10	-0.05	0.00		
7	0.10	0.07	-0.03	*	0.16	0.07	-0.09	-0.03		0.0001
8	0.12	0.07	-0.05	*	0.17	0.10	-0.07	0.00		
9					0.15					
10	0.11	0.09	-0.02	*	0.18	0.10	-0.08	0.00		
11	0.16	0.12	-0.04	*	0.17	0.11	-0.06	0.01		
12	0.14	0.11	-0.03	*	0.16	0.11	-0.05	0.01		
15	0.16	0.12	-0.04	*	0.16	0.12	-0.04	0.02		
16	0.11	0.10	-0.01	*	0.17	0.10	-0.07	0.00		
17	0.11	0.10	-0.01		0.15	0.10	-0.05	0.00		
18	0.10	0.11	0.01		0.17	0.12	-0.05	0.02		
19	0.11	0.12	0.01		0.16	0.12	-0.04	0.02	X	0.03
20	0.13	0.09	-0.04	*	0.16	0.09	-0.07	-0.01		
21	0.12	0.12	0.00		0.20	0.12	-0.08	0.02		
22					0.14					
23	0.13	0.10	-0.03		0.18	0.10	-0.08	0.00		
ALL VA	0.12	0.10	-0.02	*	0.16	0.11	-0.05			

# Indicates the median VISN for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-7. Means for Alcohol Abuse (ASI) by Station

VISN	Station	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll.- Adm.*		FY'96 Adj. Foll. Mean	FY'02 Adj. Foll. Mean	FY'02 - FY'96 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**		Sig. Level
1	Northampton	0.11	0.08	-0.03	*	0.15	0.08	-0.07	-0.02		
1	Togus	0.14	0.09	-0.05	*	0.17	0.09	-0.08	-0.01		
1	West Haven	0.13	0.11	-0.02		0.19	0.12	-0.07	0.02		
1	White River Junction	0.12	0.10	-0.02		0.18	0.09	-0.09	-0.01		
2	Batavia (Buffalo)	0.13	0.11	-0.02		0.18	0.11	-0.07	0.01		
3	Bronx					0.17					
3	Lyons	0.11	0.10	-0.01		0.13	0.10	-0.03	0.00		
3	Montrose	0.20	0.10	-0.10	*	0.13	0.08	-0.05	-0.02		
4	Clarksburg	0.10	0.09	-0.01		0.14	0.10	-0.04	0.00		
4	Coatesville					0.20					
5	Baltimore	0.13	0.12	-0.01		0.17	0.11	-0.06	0.01		
5	Martinsburg	0.10	0.10	0.00		0.16	0.10	-0.06	0.00		
6#	Salem	0.10	0.09	-0.01	*	0.14	0.10	-0.04	0.00		
6	Salisbury	0.10	0.10	0.00		0.17	0.11	-0.06	0.01		
7	Augusta					0.16					
7	Tuscaloosa	0.10	0.07	-0.03	*		0.07		-0.03		0.004
7	Tuskegee					0.16					
8	Bay Pines	0.11	0.09	-0.02	*	0.17	0.09	-0.08	-0.01		
8	Miami	0.12	0.11	-0.01		0.17	0.11	-0.06	0.01		
9	Louisville					0.14					
10	Brecksville (Cleveland)	0.13	0.08	-0.05	*	0.16	0.08	-0.08	-0.02		
10	Cincinnati	0.09	0.10	0.01		0.19	0.10	-0.09	0.00		
10	Dayton	0.16	0.11	-0.05	*	0.18	0.10	-0.08	0.00		
11	Battle Creek	0.16	0.12	-0.04	*	0.17	0.11	-0.06	0.01		
12	Milwaukee	0.31	0.13	-0.18	*	0.11	0.05	-0.06	-0.05		0.05
12	North Chicago	0.11	0.10	-0.01		0.16	0.10	-0.06	0.00		
12	Tomah	0.19	0.16	-0.03		0.17	0.15	-0.02	0.05	X	0.002
15	Topeka	0.16	0.12	-0.04	*	0.16	0.12	-0.04	0.02		
16	Jackson	0.10	0.08	-0.02		0.17	0.08	-0.09	-0.02		
16	New Orleans	0.09	0.06	-0.03	*	0.15	0.07	-0.08	-0.03		0.004
16	North Little Rock	0.13	0.12	-0.01		0.18	0.12	-0.06	0.02		
17	Temple					0.14					
17	Waco	0.11	0.10	-0.01		0.15	0.10	-0.05	0.00		
18	Phoenix					0.17					
18	Tucson	0.10	0.11	0.01			0.12		0.02		
19	Denver	0.11	0.12	0.01		0.16	0.13	-0.03	0.03	X	0.03
19	Sheridan					0.15					
20	American Lake	0.17	0.11	-0.06	*	0.16	0.10	-0.06	0.00		
20	Anchorage					0.18					
20	Boise	0.12	0.11	-0.01		0.16	0.11	-0.05	0.01		
20	Portland					0.14					
20	Roseburg	0.09	0.08	-0.01		0.16	0.09	-0.07	-0.01		
20	Seattle	0.12	0.09	-0.03	*	0.17	0.09	-0.08	-0.01		
21	Hilo	0.14	0.15	0.01		0.25	0.14	-0.11	0.04	X	0.001
21	Palo Alto	0.12	0.11	-0.01		0.19	0.11	-0.08	0.01		
21	San Francisco					0.22					
22	West Los Angeles					0.14					
23	Minneapolis					0.18					
23	Knoxville					0.18					
23	Des Moines	0.13	0.11	-0.02		0.18	0.11	-0.07	0.01		
23	Hot Springs	0.11	0.07	-0.04			0.07		-0.03		
ALL VA		0.12	0.10	-0.02	*	0.16	0.11	-0.05			

# Indicates the median station for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-8. Means for Drug Abuse (ASI) by VISN

VISN	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll. - Adm.*		FY'96 Adj. Foll. Mean	FY'02 Adj. Foll. Mean	FY'02 - FY'96 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**		Sig. Level
1	0.05	0.04	-0.01	*	0.07	0.04	-0.03	0.00		
2#	0.05	0.04	-0.01		0.08	0.04	-0.04	0.00		
3	0.07	0.04	-0.03	*	0.06	0.04	-0.02	0.00		
4	0.10	0.09	-0.01		0.08	0.04	-0.04	0.00		
5	0.04	0.04	0.00		0.07	0.04	-0.03	0.00		
6	0.04	0.04	0.00		0.06	0.04	-0.02	0.00		
7	0.03	0.03	0.00		0.07	0.03	-0.04	-0.01		0.004
8	0.04	0.04	0.00		0.07	0.04	-0.03	0.00		
9					0.05			-0.04		
10	0.04	0.04	0.00		0.07	0.04	-0.03	0.00		
11	0.06	0.05	-0.01		0.07	0.05	-0.02	0.01	X	0.05
12	0.06	0.05	-0.01	*	0.07	0.04	-0.03	0.00		
15	0.06	0.05	-0.01	*	0.06	0.04	-0.02	0.00		
16	0.04	0.03	-0.01	*	0.07	0.03	-0.04	-0.01		0.0001
17	0.05	0.04	-0.01		0.06	0.04	-0.02	0.00		
18	0.04	0.05	0.01		0.07	0.05	-0.02	0.01		
19	0.05	0.04	-0.01	*	0.07	0.04	-0.03	0.00		
20	0.05	0.04	-0.01	*	0.07	0.04	-0.03	0.00		
21	0.05	0.05	0.00		0.09	0.04	-0.05	0.00		
22					0.07					
23	0.04	0.05	0.01		0.08	0.05	-0.03	0.01		
ALL VA	0.05	0.04	-0.01	*	0.07	0.04	-0.03			

# Indicates the median VISN for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-9. Means for Drug Abuse (ASI) by Station

VISN	Station	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll.- Adm.*		FY'96 Adj. Foll. Mean	FY'02 Adj. Foll. Mean	FY'02 - FY'96 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**		Sig. Level
1	Northampton	0.04	0.04	0.00	*	0.06	0.04	-0.02	0.00		
1	Togus	0.05	0.03	-0.02	*	0.07	0.03	-0.04	-0.01		
1	West Haven	0.06	0.05	-0.01		0.08	0.05	-0.03	0.01		
1	White River Junction	0.04	0.04	0.00		0.07	0.05	-0.02	0.01		
2	Batavia (Buffalo)	0.05	0.04	-0.01		0.08	0.04	-0.04	0.00		
3	Bronx					0.08					
3	Lyons	0.05	0.04	-0.01		0.06	0.04	-0.02	0.00		
3	Montrose	0.10	0.04	-0.06	*	0.06	0.03	-0.03	-0.01		0.05
									-0.04		
4	Clarksburg	0.03	0.03	0.00		0.06	0.04	-0.02	0.00		
4	Coatesville					0.09					
5	Baltimore	0.05	0.05	0.00		0.07	0.04	-0.03	0.00		
5	Martinsburg	0.04	0.04	0.00		0.07	0.04	-0.03	0.00		
6#	Salem	0.04	0.04	0.00		0.06	0.04	-0.02	0.00		
6	Salisbury	0.04	0.04	0.00		0.07	0.04	-0.03	0.00		
7	Augusta					0.07					
7	Tuscaloosa	0.03	0.03	0.00			0.03		-0.01		0.03
7	Tuskegee					0.07					
8	Bay Pines	0.04	0.03	-0.01		0.07	0.03	-0.04	-0.01		
8	Miami	0.05	0.05	0.00		0.07	0.04	-0.03	0.00		
9	Louisville					0.05					
10	Brecksville (Cleveland)	0.06	0.03	-0.03		0.07	0.03	-0.04	-0.01		
10	Cincinnati	0.03	0.03	0.00		0.07	0.04	-0.03	0.00		
10	Dayton	0.05	0.04	-0.01		0.08	0.04	-0.04	0.00		
11	Battle Creek	0.06	0.05	-0.01		0.07	0.05	-0.02	0.01	X	0.004
12	Milwaukee	0.17	0.07	-0.10	*	0.05	0.04	-0.01	0.00		
12	North Chicago	0.05	0.04	-0.01		0.07	0.04	-0.03	0.00		
12	Tomah	0.07	0.06	-0.01		0.06	0.06	0.00	0.02	X	0.003
15	Topeka	0.06	0.05	-0.01	*	0.06	0.04	-0.02	0.00		
16	Jackson	0.04	0.02	-0.02		0.07	0.03	-0.04	-0.01		0.02
16	New Orleans	0.03	0.02	-0.01	*	0.07	0.02	-0.05	-0.02		0.0005
16	North Little Rock	0.04	0.03	-0.01	*	0.08	0.03	-0.05	-0.01		0.0003
17	Temple					0.06					
17	Waco	0.05	0.04	-0.01		0.06	0.04	-0.02	0.00		
18	Phoenix					0.07					
18	Tucson	0.04	0.05	0.01			0.05		0.01		
19	Denver	0.05	0.04	-0.01	*	0.07	0.04	-0.03	0.00		
19	Sheridan					0.06					
20	American Lake	0.06	0.05	-0.01	*	0.07	0.04	-0.03	0.00		
20	Anchorage					0.07					
20	Boise	0.03	0.03	0.00		0.08	0.03	-0.05	-0.01		
20	Portland					0.06					
20	Roseburg	0.09	0.08	-0.01		0.07	0.04	-0.03	0.00		
20	Seattle	0.05	0.04	-0.01	*	0.07	0.04	-0.03	0.00		
21	Hilo	0.14	0.15	0.01		0.06	0.06	0.00	0.02	X	0.0002
21#	Palo Alto	0.05	0.04	-0.01		0.09	0.04	-0.05	0.00		
21	San Francisco					0.10					
22	West Los Angeles					0.07					
23	Minneapolis					0.08					
23	Knoxville					0.08					
23	Des Moines	0.05	0.05	0.00		0.08	0.05	-0.03	0.01	X	0.004
23	Hot Springs	0.04	0.05	0.01			0.03		-0.01		
ALL VA		0.05	0.04	-0.01	*	0.07	0.04	-0.03			

# Indicates the median station for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-10. Means for Violence by VISN

VISN	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll. - Adm.*		FY'96 Adj. Foll. Mean	FY'02 Adj. Foll. Mean	FY'02 - FY'96 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**		Sig. Level
1	1.37	0.84	-0.53	*	1.37	0.89	-0.48	0.00		
2	1.66	0.80	-0.86	*	1.23	0.73	-0.50	-0.16		
3	1.43	0.58	-0.85	*	0.96	0.58	-0.38	-0.31		0.0001
4	1.39	1.43	0.04		1.30	1.43	0.13	0.54	X	0.0001
5	1.83	1.00	-0.83	*	1.30	0.86	-0.44	-0.03		
6	1.59	0.81	-0.78	*	1.19	0.77	-0.42	-0.12		
7	1.83	1.10	-0.73	*	1.16	0.99	-0.17	0.10		
8	1.50	0.92	-0.58	*	1.39	0.91	-0.48	0.02		
9					1.61					
10	1.67	1.00	-0.67	*	1.44	0.96	-0.48	0.07		
11	1.61	1.11	-0.50	*	1.17	1.05	-0.12	0.16	X	0.02
12	1.61	0.94	-0.67	*	1.29	0.87	-0.42	-0.02		
15	1.38	0.83	-0.55	*	1.13	1.04	-0.09	0.15		
16#	1.54	0.89	-0.65	*	1.23	0.89	-0.34	0.00		
17	1.33	0.92	-0.41	*	1.07	0.97	-0.10	0.08		
18	1.22	0.69	-0.53		1.45	0.77	-0.68	-0.12		
19	1.77	0.87	-0.90	*	1.23	0.87	-0.36	-0.02		
20	1.29	0.74	-0.55	*	1.20	0.79	-0.41	-0.10		
21	1.24	0.79	-0.45	*	1.25	0.89	-0.36	0.00		
22					0.81					
23	1.40	0.51	-0.89		1.30	0.59	-0.71	-0.30		0.007
ALL VA	1.51	0.87	-0.64	*	1.23	0.87	-0.36			

# Indicates the median VISN for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-11. Means for Violence by Station

VISN	Station	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll.- Adm.*		FY'96 Adj. Foll. Mean	FY'02 Adj. Foll. Mean	FY'02 - FY'96 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**		Sig. Level
1	Northampton	1.31	0.80	-0.51	*	1.38	0.83	-0.55	-0.05		
1	Togus	1.39	0.91	-0.48	*	1.44	0.94	-0.50	0.06		
1	West Haven	1.38	0.70	-0.68	*	1.25	0.82	-0.43	-0.06		
1	White River Junction	1.61	0.90	-0.71	*	1.57	0.95	-0.62	0.07		
2	Batavia (Buffalo)	1.66	0.80	-0.86	*	1.23	0.74	-0.49	-0.14		
3	Bronx					1.39					
3	Lyons	1.39	0.64	-0.75	*	0.80	0.64	-0.16	-0.24		0.02
3	Montrose	1.46	0.53	-0.93	*	1.08	0.53	-0.55	-0.35		0.0006
4	Clarksburg	1.39	1.43	0.04		0.90	1.44	0.54	0.56	X	0.0001
4	Coatesville					1.67					
5	Baltimore	1.90	1.19	-0.71	*	1.44	1.04	-0.40	0.16		
5	Martinsburg	1.79	0.89	-0.90	*	1.25	0.76	-0.49	-0.12		
6	Salem	1.55	0.74	-0.81	*	1.30	0.76	-0.54	-0.12		
6	Salisbury	1.63	0.87	-0.76	*	1.01	0.78	-0.23	-0.10		
7	Augusta					1.03					
7	Tuscaloosa	1.83	1.10	-0.73	*		1.00		0.12		
7	Tuskegee					1.41					
8	Bay Pines	1.60	0.86	-0.74	*	1.48	0.84	-0.64	-0.04		
8	Miami	1.40	0.98	-0.42	*	1.30	0.96	-0.34	0.08		
9	Louisville					1.61					
10	Brecksville (Cleveland)	1.77	1.21	-0.56	*	1.35	1.12	-0.23	0.24		
10	Cincinnati	1.59	0.83	-0.76	*	1.51	0.80	-0.71	-0.08		
10	Dayton	1.71	1.12	-0.59	*	1.39	1.12	-0.27	0.24		
11	Battle Creek	1.61	1.11	-0.50	*	1.17	1.06	-0.11	0.18	X	0.04
12	Milwaukee	1.38	0.95	-0.43		0.61	0.93	0.32	0.05		
12	North Chicago	1.61	0.92	-0.69	*	1.29	0.86	-0.43	-0.02		
12	Tomah	1.68	0.99	-0.69	*	1.46	0.93	-0.53	0.05		
15	Topeka	1.38	0.83	-0.55	*	1.13	1.03	-0.10	0.15		
16	Jackson	1.60	1.13	-0.47	*	1.47	1.12	-0.35	0.24	X	0.04
16	New Orleans	1.51	0.64	-0.87	*	1.10	0.63	-0.47	-0.25		0.03
16	North Little Rock	1.53	0.90	-0.63	*	1.21	0.90	-0.31	0.02		
17	Temple					0.95					
17	Waco	1.33	0.92	-0.41	*	1.10	0.98	-0.12	0.10		
18	Phoenix					1.45					
18	Tucson	1.22	0.69	-0.53	*		0.76		-0.12		
19#	Denver	1.77	0.87	-0.90	*	1.17	0.88	-0.29	0.00		
19	Sheridan					1.33					
20	American Lake	1.38	0.97	-0.41	*	1.12	1.00	-0.12	0.12		
20	Anchorage					1.10					
20	Boise	1.42	0.72	-0.70	*	1.27	0.70	-0.57	-0.18		
20	Portland					1.33					
20	Roseburg	1.46	0.81	-0.65	*	1.17	0.79	-0.38	-0.09		
20	Seattle	1.22	0.64	-0.58	*	1.20	0.71	-0.49	-0.17		0.05
21	Hilo	1.61	0.90	-0.71	*	1.39	0.88	-0.51	0.00		
21	Palo Alto	1.11	0.75	-0.36	*	1.24	0.88	-0.36	0.00		
21	San Francisco					1.27					
22	West Los Angeles					0.81					
23	Minneapolis					1.60					
23	Knoxville					1.51					
23	Des Moines	1.48	0.54	-0.94	*	0.78	0.61	-0.17	-0.27		0.04
23	Hot Springs	1.04	0.38	-0.66	*		0.52		-0.36		
ALL VA		1.51	0.87	-0.64	*	1.23	0.87	-0.36			

# Indicates the median station for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-12. Means for Work (Days) by VISN

VISN	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll. - Adm.*		FY'98 Adj. Foll. Mean	FY'02 Adj. Foll. Mean	FY'02 - FY'98 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	3.33	1.90	-1.43	*	2.82	1.78	-1.04	-0.13	
2	3.33	1.56	-1.77	*	2.02	1.81	-0.21	-0.10	
3	3.05	1.49	-1.56	*	7.54	1.45	-6.09	-0.46	
4	4.00	2.76	-1.24	*	2.15	2.49	0.34	0.58	
5#	2.41	1.60	-0.81		3.14	1.91	-1.23	0.00	
6	2.69	0.76	-1.93	*	1.59	0.97	-0.62	-0.94	
7	5.41	3.97	-1.44	*	1.92	2.92	1.00	1.01	
8	2.91	0.94	-1.97	*	2.70	0.99	-1.71	-0.92	
9									
10	2.36	2.20	-0.16		4.12	2.46	-1.66	0.55	
11	2.19	2.26	0.07		2.76	2.56	-0.20	0.65	
12	2.41	1.20	-1.21	*	1.62	1.47	-0.15	-0.44	
15	4.02	0.65	-3.37	*	2.34	0.41	-1.93	-1.50	
16	3.29	2.73	-0.56		2.12	2.71	0.59	0.80	
17	4.44	2.26	-2.18	*	2.09	1.95	-0.14	0.04	
18	1.52	0.89	-0.63						
19	3.32	1.60	-1.72	*	2.61	1.60	-1.01	-0.31	
20	2.77	2.20	-0.57		2.69	2.34	-0.35	0.43	
21	3.26	2.26	-1.00		1.96	2.16	0.20	0.25	
22					3.70				
23	2.50	2.72	0.22		0.59	3.08	2.49	1.17	
ALL VA	3.14	2.00	-1.14	*	2.79	2.00	-0.79		

# Indicates the median VISN for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median VISN; SEP goal was not met.
No VISN was significantly worse than the median VISN for FY 2002.

Table 4-13. Means for Work (Days) by Station

VISN	Station	FY'02 Adm. Mean	FY'02 Foll. Mean	FY'02 Diff. Foll.- Adm.*		FY'98 Adj. Foll. Mean	FY'02 Adj. Foll. Mean	FY'02 - FY'98 Difference	Dev. of FY'02 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	5.00	1.53	-3.47	*	2.57	0.48	-2.09	-1.28	
1	Togus	2.32	2.19	-0.13			2.48		0.72	
1	West Haven	3.08	2.77	-0.31		3.35	2.89	-0.46	1.13	
1	White River Junction	2.97	1.23	-1.74	*		1.37		-0.39	
2#	Batavia (Buffalo)	3.33	1.56	-1.77	*	1.88	1.76	-0.12	0.00	
3	Bronx					2.62				
3	Lyons	3.45	1.68	-1.77		11.22	1.73	-9.49	-0.03	
3	Montrose	2.68	1.31	-1.37	*	4.61	1.27	-3.34	-0.49	
4	Clarksburg	4.00	2.78	-1.22	*	2.40	2.44	0.04	0.68	
4	Coatesville					2.02				
5	Baltimore	3.04	1.49	-1.55		3.11	1.57	-1.54	-0.19	
5	Martinsburg	2.08	1.66	-0.42		3.01	2.08	-0.93	0.32	
6	Salem	1.96	0.74	-1.22	*	2.09	1.32	-0.77	-0.44	
6	Salisbury	3.38	0.77	-2.61	*	1.10	0.62	-0.48	-1.14	
7	Augusta					1.42				
7	Tuscaloosa	5.41	3.97	-1.44	*	2.25	2.90		1.14	
7	Tuskegee					2.16				
8	Bay Pines	3.11	0.87	-2.24	*	2.86	0.88	-1.98	-0.88	
8	Miami	2.69	1.01	-1.68	*	2.48	1.14	-1.34	-0.62	
9	Louisville									
10	Brecksville (Cleveland)	1.80	2.55	0.75		6.43	3.05	-3.38	1.29	
10	Cincinnati	2.81	1.85	-0.96		2.95	1.91	-1.04	0.15	
10	Dayton	2.05	2.53	0.48		3.82	2.93	-0.89	1.17	
11	Battle Creek	2.19	2.26	0.07		2.85	2.54	-0.31	0.78	
12	Milwaukee	3.09	0.53	-2.56			-0.08		-1.84	
12	North Chicago	1.93	1.23	-0.70		1.40	1.65	0.25	-0.11	
12	Tomah	3.93	1.28	-2.65	*	2.16	1.05	-1.11	-0.71	
15	Topeka	4.02	0.65	-3.37	*	2.26	0.50	-1.76	-1.26	
16	Jackson	2.44	1.45	-0.99		0.91	1.67	0.76	-0.09	
16	New Orleans	1.90	1.78	-0.12		2.05	2.38	0.33	0.62	
16	North Little Rock	3.86	3.28	-0.58		2.35	3.05	0.70	1.29	0.05
17	Temple									
17	Waco	4.44	2.26	-2.18	*	2.12	1.94	-0.18	0.18	
18	Phoenix									
18	Tucson	1.52	0.89	-0.63			1.50		-0.26	
19	Denver	3.32	1.60	-1.72	*		1.63		-0.13	
19	Sheridan					2.69				
20	American Lake	2.93	1.48	-1.45		2.27	1.55	-0.72	-0.21	
20	Anchorage					9.58				
20	Boise	3.56	2.56	-1.00		1.12	2.85	1.73	1.09	
20	Portland									
20	Roseburg	2.92	1.82	-1.10		3.36	1.92	-1.44	0.16	
20	Seattle	2.63	2.53	-0.10		2.13	2.69	0.56	0.93	
21	Hilo	4.62	1.74	-2.88	*	2.47	1.44	-1.03	-0.32	
21	Palo Alto	2.77	2.44	-0.33		1.82	2.45	0.63	0.69	
21	San Francisco									
22	West Los Angeles					3.76				
23	Minneapolis					0.59				
23	Knoxville									
23	Des Moines	2.97	1.87	-1.10			2.18		0.42	
23	Hot Springs	1.52	0.89	-0.63			7.72		5.96	0.002
ALL VA		3.14	2.00	-1.14	*	2.79	2.00	-0.79		

# Indicates the median station for FY 2002.

* Significant at p<.05.

** X indicates that outcome for FY 2002 was significantly worse (p<.05) than the median station; SEP goal was not met.
No station was significantly worse than the median station for FY 2002.

Table 4-14. Outcomes Report Card by VISN

VISN	Stand. Miss.	Stand. NEPEC	Stand. Alc.	Stand. Drug	Stand. Viol.	Stand. Work (rev.)	Stand. PTSD M	Stand. Other M	Stand. Comb. M	***Rank Comb. M***
1	0.02	-0.01	-0.04	-0.01	0.00	0.01	0.005	-0.010	-0.005	***9***
2	0.00	0.01	0.01	0.00	-0.04	0.00	0.005	-0.008	-0.003	***11.0***
3	-0.08	-0.10	-0.04	-0.04	-0.11	0.02	-0.090	-0.043	-0.133	***2***
4	0.07	0.04	-0.01	-0.01	0.10	-0.01	0.055	0.018	0.073	***18***
5	0.01	-0.02	0.01	0.01	-0.01	0.00	-0.005	0.003	-0.003	***11.0***
6	-0.01	-0.04	0.00	0.00	-0.04	0.04	-0.025	0.000	-0.025	***6.0***
7	0.02	0.01	-0.10	-0.07	0.04	-0.05	0.015	-0.045	-0.030	***3.5***
8	0.02	0.02	-0.01	-0.02	0.01	0.04	0.020	0.005	0.025	***15***
10	-0.02	-0.01	-0.02	-0.02	0.02	-0.02	-0.015	-0.010	-0.025	***6.0***
11	0.04	0.04	0.01	0.06	0.05	-0.02	0.040	0.025	0.065	***17***
12	0.02	0.01	0.02	0.03	0.00	0.02	0.015	0.018	0.033	***16***
15	-0.02	-0.07	0.03	0.02	0.03	0.04	-0.045	0.030	-0.015	***8***
16	0.03	0.00	0.01	-0.14	0.00	-0.05	0.015	-0.045	-0.030	***3.5***
17	-0.01	0.02	-0.01	-0.01	0.02	0.00	0.005	0.000	0.005	***14***
18	-0.01	0.00	0.02	0.02	-0.02	0.01	-0.005	0.008	0.003	***13***
19	0.05	0.08	0.06	0.00	0.00	0.01	0.065	0.018	0.083	***19***
20	-0.14	-0.14	-0.05	-0.01	-0.04	-0.03	-0.140	-0.033	-0.173	***1***
21	-0.02	-0.02	0.05	0.03	0.00	-0.01	-0.020	0.018	-0.003	***11.0***
23	-0.05	0.02	0.00	0.04	-0.05	-0.03	-0.015	-0.010	-0.025	***6.0***
MEAN	0.00	-0.01	0.00	-0.01	0.00	0.00	-0.01	0.00	-0.01	
STD	0.05	0.05	0.04	0.04	0.04	0.03	0.05	0.02	0.06	

Table 4-15. Outcomes Report Card by Station

VISN	Station	Stand. Miss.	Stand. NEPEC	Stand. Alc.	Stand. Drug	Stand. Viol.	Stand. Work (rev.)	Stand. PTSD M	Stand. Other M	Stand. Comb. M	***Rank Comb. M***
1	Northampton	0.00	-0.01	-0.04	-0.01	-0.01	0.03	-0.005	-0.008	-0.013	***11***
1	Togus	0.00	-0.04	-0.03	-0.03	0.01	-0.02	-0.020	-0.018	-0.038	***7***
1	West Haven	0.04	0.04	0.02	0.03	-0.01	-0.02	0.040	0.005	0.045	***32***
1	White River Junction	0.04	0.01	-0.01	0.02	0.01	0.01	0.025	0.008	0.033	***30***
2	Batavia (Buffalo)	0.01	0.01	0.01	0.01	-0.03	0.00	0.010	-0.003	0.008	***22***
3	Lyons	-0.04	-0.02	-0.01	-0.01	-0.06	0.00	-0.030	-0.020	-0.050	***5***
3	Montrose	-0.05	-0.12	-0.05	-0.05	-0.09	0.02	-0.085	-0.043	-0.128	***2***
4	Clarksburg	0.07	0.04	-0.01	-0.01	0.10	-0.02	0.055	0.015	0.070	***35***
5	Baltimore	0.02	-0.02	0.02	0.02	0.03	0.00	0.000	0.018	0.018	***25.5***
5	Martinsburg	0.02	0.00	0.00	0.00	-0.02	-0.01	0.010	-0.008	0.003	***19.5***
6	Salem	0.02	-0.04	0.00	0.03	-0.03	0.01	-0.010	0.003	-0.008	***14.5***
6	Salisbury	-0.01	-0.01	0.01	-0.01	-0.02	0.04	-0.010	0.005	-0.005	***16***
7	Tuscaloosa	0.04	0.01	-0.10	-0.06	0.04	-0.05	0.025	-0.043	-0.018	***10***
8	Bay Pines	0.00	0.01	-0.03	-0.04	-0.01	0.02	0.005	-0.015	-0.010	***12.5***
8	Miami	0.05	0.03	0.02	0.02	0.02	0.02	0.040	0.020	0.060	***34***
10	Brecksville (Cleveland)	-0.03	0.00	-0.04	-0.03	0.04	-0.03	-0.015	-0.015	-0.030	***8***
10	Cincinnati	0.00	-0.03	0.01	-0.01	-0.02	0.00	-0.015	-0.005	-0.020	***9***
10	Dayton	0.03	0.01	0.00	0.01	0.04	-0.02	0.020	0.008	0.028	***29***
11	Battle Creek	0.06	0.04	0.01	0.07	0.05	-0.03	0.050	0.025	0.075	***36***
12	Milwaukee	0.00	-0.01	-0.04	0.00	0.00	0.02	-0.005	-0.005	-0.010	***12.5***
12	North Chicago	0.03	0.01	0.00	0.02	-0.01	0.00	0.020	0.003	0.023	***27.5***
12	Tomah	0.02	0.00	0.07	0.06	0.01	0.01	0.010	0.038	0.048	***33***
15	Topeka	-0.01	-0.06	0.04	0.03	0.03	0.04	-0.035	0.035	0.000	***17.5***
16	Jackson	0.03	0.02	-0.03	-0.05	0.05	0.00	0.025	-0.008	0.018	***25.5***
16	New Orleans	-0.03	-0.04	-0.07	-0.08	-0.05	-0.02	-0.035	-0.055	-0.090	***3***
16	North Little Rock	0.06	0.01	0.07	-0.10	0.01	-0.06	0.035	-0.020	0.015	***23.5***
17	Waco	0.00	0.02	0.00	0.00	0.02	0.00	0.010	0.005	0.015	***23.5***
18	Tucson	0.00	-0.01	0.02	0.03	-0.02	0.01	-0.005	0.010	0.005	***21***
19	Denver	0.06	0.09	0.07	0.02	0.00	0.00	0.075	0.023	0.098	***37***
20	American Lake (Tacoma)	0.02	0.02	0.00	0.02	0.03	0.01	0.020	0.015	0.035	***31***
20	Boise	-0.04	-0.03	0.01	-0.02	-0.02	-0.01	-0.035	-0.010	-0.045	***6***
20	Roseburg	0.00	0.01	-0.02	0.02	-0.01	0.00	0.005	-0.003	0.003	***19.5***
20	Seattle	-0.16	-0.19	-0.05	-0.02	-0.06	-0.04	-0.175	-0.043	-0.218	***1***
21	Hilo	-0.02	-0.02	0.08	0.08	0.00	0.01	-0.020	0.043	0.023	***27.5***
21	Palo Alto	0.00	-0.01	0.02	0.00	0.00	-0.03	-0.005	-0.003	-0.008	***14.5***
23	Des Moines	-0.04	0.03	0.01	0.06	-0.04	-0.01	-0.005	0.005	0.000	***17.5***
23	Hot Springs	-0.02	-0.03	-0.02	-0.01	-0.03	-0.06	-0.025	-0.030	-0.055	***4***
MEAN		0.00	-0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
STD		0.04	0.05	0.04	0.04	0.04	0.02	0.04	0.02	0.06	

Table 4-16. Satisfaction with Treatment by VISN

VISN	FY 1997 Adj. Mean	FY 2002 Adj. Mean	FY'02 - FY'97	Deviation of FY'02 Mean from the Median Mean*		Significance Level	***Rank***
1	16.01	16.16	0.15	0.41			***7***
2		16.57		0.82		0.02	***3***
3	16.48	15.50	-0.98	-0.25			***13***
4	16.62	16.37	-0.25	0.62			***4***
5	15.68	15.42	-0.26	-0.33			***15***
6	17.23	17.15	-0.08	1.40		0.0001	***1***
7	15.29	13.62	-1.67	-2.13	X	0.0001	***19***
8	15.67	15.82	0.15	0.07			***9***
9							
10	15.07	15.10	0.03	-0.65	X	0.04	***18***
11#	15.63	15.75	0.12	0.00			***10***
12	15.76	16.27	0.51	0.52			***5***
15	17.27	16.14	-1.13	0.39			***8***
16	16.16	15.59	-0.57	-0.16			***11***
17	15.18	15.48	0.30	-0.27			***14***
18		17.12		1.37		0.007	***2***
19	15.18	16.18	1.00	0.43			***6***
20	14.74	15.26	0.52	-0.49			***16***
21	14.84	15.56	0.72	-0.19			***12***
22							
23	15.15	15.23		-0.52			***17***
ALL VA	15.69	15.66	-0.03				

# Indicates the median VISN for FY 2002.
* X indicates that satisfaction for FY 2002 was significantly worse ($p<.05$) than for the median VISN.

Table 4-17. Satisfaction with Treatment by Station

VISN	Station	FY 1997 Adj. Mean	FY 2002 Adj. Mean	FY'02-FY'97	Deviation of FY'02 Mean from the Median Mean*		Significance Level	***Rank***
1	Northampton	17.44	16.95	-0.49	1.31		0.005	***4***
1	Togus		15.54		-0.10			***22***
1	West Haven	16.03	16.60	0.57	0.96		0.05	***8***
1	White River Junction		16.15		0.51			***14***
2	Batavia (Buffalo)		16.57		0.93		0.005	***9***
3	Bronx	15.84						
3	Lyons	17.80	15.39	-2.41	-0.25			***26***
3	Montrose	15.41	15.60	0.19	-0.04			***21***
4	Clarksburg	16.52	16.37	-0.15	0.73			***11***
4	Coatesville							
5	Baltimore	14.33	16.34	2.01	0.70			***12***
5	Martinsburg	16.63	14.92	-1.71	-0.72	X	0.05	***32***
6	Salem	17.26	17.51	0.25	1.87		0.001	***1***
6	Salisbury	17.12	16.87	-0.25	1.23		0.0002	***6***
7	Augusta	15.25						
7	Tuscaloosa	15.06	13.64	-1.42	-2.00	X	0.0001	***37***
7	Tuskegee	15.67						
8	Bay Pines	15.05	15.81	0.76	0.17			***18***
8	Miami	16.39	15.86	-0.53	0.22			***16.5***
10	Brecksville (Cleveland)	14.75	15.33	0.58	-0.31			***27.5***
10	Cincinnati	14.92	14.84	-0.08	-0.80	X	0.03	***33***
10	Dayton	15.60	15.44	-0.16	-0.20			***24***
11	Battle Creek	15.59	15.75	0.16	0.11			***19***
12	Milwaukee		14.72		-0.92			***35***
12	North Chicago	16.19	16.94	0.75	1.30		0.0001	***5***
12	Tomah	15.05	14.33	-0.72	-1.31	X	0.004	***36***
15	Topeka	17.47	15.86	-1.61	0.22			***16.5***
16	Jackson		15.24		-0.40			***30***
16	New Orleans	16.49	16.56	0.07	0.92		0.02	***10***
16	North Little Rock	15.93	15.42	-0.51	-0.22			***25***
17	Waco	15.07	15.47	0.40	-0.17			***23***
18	Tucson		17.12		1.48		0.003	***2***
19	Denver		16.20		0.56			***13***
19	Sheridan	15.30						
20	American Lake (Tacoma)	13.91	15.27	1.36	-0.37	X		***29***
20	Boise	17.11	16.86	-0.25	1.22			***7***
20	Roseburg	16.14	17.00	0.86	1.36		0.002	***3***
20	Seattle	13.74	14.83	1.09	-0.81	X	0.002	***34***
21#	Palo Alto	14.84	15.64	0.80	0.00			***20***
21	Hilo	14.99	15.33	0.34	-0.31			***27.5***
23	Minneapolis	12.42						
23	Des Moines		15.09		-0.55			***31***
23	Hot Springs		15.92		0.28			***15***
ALL VA		15.69	15.66	-0.03				

# Indicates the median station for FY 2002.
* X indicates that satisfaction for FY 2002 was significantly worse (p<.05) than for the median station.

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Appendix A

Changes in Treatment of PTSD in the Department of Veterans Affairs, FY 1995 and FY 2002

Changes in Treatment of PTSD in the Department of Veterans Affairs, FY 1995 and FY 2002[1]

Since 1995 there has been a period of major change in the Veterans Health Administration (VHA). Tables presented in this report primarily focus on changes during the past year. The tables presented in this appendix, in contrast, illustrate changes in the years since the VA reorganization was implemented.

Table A1 shows changes from FY 1995-FY 2002 in the number of programs operating in each VISN. Altogether there was a net loss of 1 SUPT, 20 SIPUs, and 11 EBTPUs; and a net gain of 3 PTSD Doms, 20 PCTs, 7 PRRPs, 7 PTSD Day Hospitals, and 1 specialized intensive PTSD program with a substance abuse component.

Table A2 presents summary workload data on the work of specialized PTSD outpatient clinics: the PTSD Clinical Team (PCT) program, the Substance Use PTSD Team (SUPT) program, and the Women=s Stress Disorder Treatment Team (WSDTT) program. Overall these programs saw 117.1% more patients in FY 2002 than in FY 1995, and the intensity of contact increased by 88.5%.

Table A3 presents data on changes from FY 1995-FY 2002 in beds occupied during the end-of-the-year national census. There was a 64.3% decline in the total number of general psychiatry beds in VA; a 36.6% decrease in the number of beds used for PTSD treatment; and a 44.4% decline in length of stay. There was a 12.7% increase in the total number of domiciliary and PRRP beds in VA; a 167.8% increase in the number of beds used for PTSD treatment; and a 54.7% decline in length of stay.

Tables A4 and A5 present data on the change in the number and percent of patients receiving inpatient and residential treatment for PTSD. VA provided a total of 7,081 episodes of inpatient treatment for PTSD in FY 2002 compared to 14,849 in FY 1995, a 52.3% decrease. The average length of stay declined from 37.8 days in FY 1995 to 16.2 days in FY 2002, a 57.2% reduction. VA provided a total of 3,736 episodes of domiciliary and PRRP treatment for PTSD in FY 2002 compared to 715 in FY 1995, a 422.5% increase. The average length of stay declined from 117.7 days in FY 1995 to 57.5 days in FY 2002, a 50.9 % reduction.

[1] FY 1995 data not do not include PRRP care.

Table A1. VA SPECIALIZED PTSD PROGRAMS BY VISN: FY 1995, FY 2002 and FY 1995-2002 change.

Fiscal Year 2002

VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VISN*
1	6	2	1	0	2	0	1	1	0	0	13
2	3	0	0	0	0	0	1	0	0	0	4
3	5	0	0	0	0	2	0	0	0	0	7
4	3	1	0	0	0	0	2	0	0	0	6
5	3	0	0	0	0	1	1	0	0	0	5
6	5	0	0	0	0	0	0	2	0	0	7
7	7	0	0	0	1	0	0	0	0	0	8
8	4	1	0	0	0	1	1	0	0	0	7
9	5	0	0	0	0	0	0	0	0	0	5
10	5	0	1	0	3	0	0	0	0	1	10
11	5	0	0	0	0	0	1	0	0	0	6
12	2	0	1	0	0	1	2	0	0	0	6
15	5	0	0	0	0	0	0	1	0	0	6
16	7	0	1	1	0	1	2	0	0	0	12
17	5	0	0	0	0	0	1	0	0	0	6
18	4	0	0	1	0	0	0	0	0	0	5
19	4	0	0	0	1	0	0	0	0	0	5
20	4	0	0	2	0	1	0	1	0	0	8
21	4	1	0	0	0	0	2	0	1	0	8
22	5	0	1	0	0	0	0	0	0	0	6
23	7	1	0	0	0	0	2	0	0	0	10
ALL VA	98	6	5	4	7	7	16	5	1	1	150
AVERAGE	5	0	0	0	0	0	1	0	0	0	7
SD	1	1	0	1	1	1	1	1	0	0	2

Fiscal Year 1995

VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PSU/PTSD Dom	PRRP	SIPU	WTRP	OTHER	SUM VISN
1	6	2	1	2	0	0	1	3	0	0	15
2	2	0	0	1	0	0	0	0	0	0	3
3	4	0	0	1	0	1	0	2	0	0	8
4	4	1	0	1	0	0	0	1	0	0	7
5	3	0	0	1	0	0	1	0	0	0	5
6	5	0	0	0	0	0	0	2	0	0	7
7	5	0	0	0	0	0	0	3	0	0	8
8	4	1	0	0	0	0	0	2	0	0	7
9	6	0	0	0	0	0	0	0	0	0	6
10	1	0	1	1	0	0	1	1	0	0	5
11	4	0	0	0	0	0	0	2	0	0	6
12	3	0	0	0	0	1	0	2	0	0	6
15	4	0	0	0	0	0	0	1	0	0	5
16	5	1	1	2	0	1	0	1	0	0	11
17	4	0	0	1	0	0	1	1	0	0	7
18	4	0	0	0	0	0	0	1	0	0	5
19	4	0	0	1	0	0	1	1	0	0	7
20	3	1	0	3	0	0	3	1	0	0	11
21	4	1	0	1	0	1	0	0	1	0	8
22	3	0	1	0	0	0	1	1	0	0	6
23	6	2	0	2	0	0	1	0	0	0	11
ALL VA	78	7	4	15	0	4	9	25	1	0	143
MEAN	4	0	0	1	0	0	0	1	0	0	7
SD	1	1	0	1	0	0	1	1	0	0	3

Change in number of programs

VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PSU/PTSD Dom	PRRP	SIPU	WTRP	OTHER	SUM VISN
1	0	0	0	-2	2	0	0	-2	0	0	-2
2	1	0	0	-1	0	0	1	0	0	0	1
3	1	0	0	-1	0	1	0	-2	0	0	-1
4	-1	0	0	-1	0	0	2	-1	0	0	-1
5	0	0	0	-1	0	1	0	0	0	0	0
6	0	0	0	0	0	0	0	0	0	0	0
7	2	0	0	0	1	0	0	-3	0	0	0
8	0	0	0	0	0	1	1	-2	0	0	0
9	-1	0	0	0	0	0	0	0	0	0	-1
10	4	0	0	-1	3	0	-1	-1	0	1	5
11	1	0	0	0	0	0	1	-2	0	0	0
12	-1	0	1	0	0	0	2	-2	0	0	0
15	1	0	0	0	0	0	0	0	0	0	1
16	2	-1	0	-1	0	0	2	-1	0	0	1
17	1	0	0	-1	0	0	0	-1	0	0	-1
18	0	0	0	1	0	0	0	-1	0	0	0
19	0	0	0	-1	1	0	-1	-1	0	0	-2
20	1	-1	0	-1	0	1	-3	0	0	0	-3
21	0	0	0	-1	0	-1	2	0	0	0	0
22	2	0	0	0	0	0	-1	-1	0	0	0
23	1	-1	0	-2	0	0	1	0	0	0	-1
ALL VA	20	-1	1	-11	7	3	7	-20	0	1	7

Note: VISNs 13 & 14 combined to form VISN 23 in FY 2002. In order to compute the difference between years, data preceding FY 2002 for VISNs 13 & 14 were combined as VISN 23.

Table A-2. INTENSITY DATA: SOPPs by VISN: FY 1995, FY 2002, and FY1995-2002 change.

VISN	FY 1995			FY 2002			% Change: FY 1995-2000		
	SOPPs WORKLOAD			SOPPs WORKLOAD			SOPPs WORKLOAD		
	# Vets Seen	Visits	Vis/Vet	# Vets Seen	Visits	Vis/Vet*	Veterans	Visits	Vis/Vet
1	2,983	32,579	10.92	4,231	48,690	11.51	41.8%	49.5%	5.4%
2	570	7,083	12.43	1,065	10,649	10.00	86.8%	50.3%	-19.5%
3	1,142	17,745	15.54	2,969	40,605	13.68	160.0%	128.8%	-12.0%
4	2,125	22,253	10.47	2,874	22,965	7.99	35.2%	3.2%	-23.7%
5	758	10,866	14.34	2,259	20,497	9.07	198.0%	88.6%	-36.7%
6	1,600	15,951	9.97	3,318	23,781	7.17	107.4%	49.1%	-28.1%
7	1,231	12,687	10.31	4,339	39,869	9.19	252.5%	214.3%	-10.8%
8	1,835	16,984	9.26	3,177	24,911	7.84	73.1%	46.7%	-15.3%
9	1,163	5,307	4.56	2,575	15,175	5.89	121.4%	185.9%	29.1%
10	531	2,652	4.99	3,044	28,068	9.22	473.3%	958.4%	84.6%
11	1,480	10,818	7.31	2,084	17,558	8.43	40.8%	62.3%	15.3%
12	679	7,733	11.39	1,014	12,322	12.15	49.3%	59.3%	6.7%
15	1,332	17,460	13.11	2,738	30,221	11.04	105.6%	73.1%	-15.8%
16	3,826	36,276	9.48	8,230	74,253	9.02	115.1%	104.7%	-4.8%
17	1,231	15,789	12.83	2,969	28,349	9.55	141.2%	79.5%	-25.6%
18	1,815	18,648	10.27	3,629	29,913	8.24	99.9%	60.4%	-19.8%
19	1,062	10,339	9.74	2,574	16,722	6.50	142.4%	61.7%	-33.3%
20	1,545	20,290	13.13	5,252	50,279	9.57	239.9%	147.8%	-27.1%
21	1,197	14,456	12.08	2,691	31,720	11.79	124.8%	119.4%	-2.4%
22	917	11,315	12.34	3,731	34,341	9.20	306.9%	203.5%	-25.4%
23	2,341	26,642	11.38	2,975	28,515	9.58	27.1%	7.0%	-15.8%
ALL VA	31,074	333,873	10.74	67,449	629,403	9.33	117.1%	88.5%	-13.2%
AVERAGE	1,493	15,899	10.75	3,226	29,972	9.36	140.1%	131.1%	-8.3%
SD	787	8,254	2.66	1,506	14,835	1.90	104.4%	193.6%	26.3%
CV	0.53	0.52	0.25	0.47	0.49	0.20	0.75	1.48	-3.15

Note: VISNs 13 & 14 combined to form VISN 23 in FY 2002. In order to compute the difference between years, data preceding FY 2002 for VISNs 13 & 14 were combined as VISN 23.

Table A3. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 1995, FY 2002, and FY 1995-2002change, Annual VA Census.

	FY 1995								FY 2002								% Change: FY 1995-2002							
	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment†				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
VISN	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	Dom. and PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	Dom. and PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	Dom. and PRRP Beds	PTSD Pts.	Pct. PTSD	LOS
1	796	66	8.3%	47.1	82	2	2.4%	95.5	246	30	12.2%	7.8	228	18	7.9%	56.8	-69.1%	-54.5%	46.9%	-83.4%	178.0%	800.0%	223.7%	-40.5%
2	311	16	5.1%	13.3	324	1	0.3%	282.0	77	1	1.3%	0.0	282	13	4.6%	15.7	-75.2%	-93.8%	-74.5%	-100.0%	-13.0%	1200.0%	1393.6%	-94.4%
3	857	47	5.5%	47.2	173	2	1.2%	149.0	177	3	1.7%	17.3	369	46	12.5%	52.7	-79.3%	-93.6%	-69.2%	-63.3%	113.3%	2200.0%	978.3%	-64.6%
4	582	78	13.4%	27.5	170	0	0.0%	0.0	199	6	3.0%	5.0	425	39	9.2%	32.9	-65.8%	-92.3%	-77.5%	-81.8%	150.0%			
5	287	9	3.1%	27.1	284	51	18.0%	118.8	124	5	4.0%	11.6	423	62	14.7%	101.6	-56.8%	-44.4%	30.1%	-57.2%	48.9%	21.6%	-18.4%	-14.5%
6	412	28	6.8%	29.6	254	7	2.8%	64.6	222	40	18.0%	11.3	203	1	0.5%	123.0	-46.1%	42.9%	165.0%	-61.8%	-20.1%	-85.7%	-82.1%	90.5%
7	794	156	19.6%	19.0	229	7	3.1%	203.9	172	7	4.1%	7.4	142	38	26.8%	25.8	-78.3%	-95.5%	-79.2%	-60.9%	-38.0%	442.9%	775.5%	-87.3%
8	380	54	14.2%	35.4	141	1	0.7%	365.0	108	6	5.6%	10.8	209	38	18.2%	44.2	-71.6%	-88.9%	-60.9%	-69.4%	48.2%	3700.0%	2463.6%	-87.9%
9	334	12	3.6%	15.0	443	4	0.9%	215.0	175	8	4.6%	19.6	334	7	2.1%	88.3	-47.6%	-33.3%	27.0%	30.8%	-24.6%	75.0%	132.1%	-58.9%
10	301	19	6.3%	23.5	415	22	5.3%	44.8	92	4	4.3%	9.8	314	19	6.1%	46.7	-69.4%	-78.9%	-31.0%	-58.5%	-24.3%	-13.6%	14.1%	4.2%
11	779	47	6.0%	22.0					218	4	1.8%	12.8	115	26	22.6%	22.1	-72.0%	-91.5%	-69.4%	-42.0%				
12	606	44	7.3%	36.0	412	15	3.6%	156.1	132	7	5.3%	30.9	548	45	8.2%	48.3	-78.2%	-84.1%	-27.4%	-14.3%	33.0%	200.0%	125.5%	-69.1%
15	371	47	12.7%	49.3	181	0	0.0%		170	34	20.0%	40.5	239	6	2.5%	159.8	-54.2%	-27.7%	57.5%	-17.8%	32.0%			
16	487	43	8.8%	15.1	243	12	4.9%	112.6	270	6	2.2%	12.3	254	37	14.6%	25.9	-44.6%	-86.0%	-74.7%	-18.3%	4.5%	208.3%	195.0%	-77.0%
17	183	17	9.3%	14.2	677	17	2.5%	102.1	241	13	5.4%	63.2	709	48	6.8%	75.8	31.7%	-23.5%	-42.0%	344.7%	4.7%	182.4%	169.6%	-25.8%
18	164	36	22.0%	20.8	125	2	1.6%	199.0	75	8	10.7%	4.9	120	1	0.8%	74.0	-54.3%	-77.8%	-51.5%	-76.6%	-4.0%	-50.0%	-47.9%	-62.8%
19	252	44	17.5%	48.3					112	9	8.0%	13.1	32	6	18.8%	20.7	-55.6%	-79.5%	-54.1%	-72.9%				
20	182	55	30.2%	21.3	908	29	3.2%	228.7	110	24	21.8%	12.5	642	29	4.5%	104.1	-39.6%	-56.4%	-27.8%	-41.3%	-29.3%	0.0%	41.4%	-54.5%
21	243	91	37.4%	88.7	45	0	0.0%		99	3	3.0%	10.7	149	39	26.2%	42.3	-59.3%	-96.7%	-91.9%	-88.0%	231.1%			
22	347	30	8.6%	27.2	208	18	8.7%	94.3	150	9	6.0%	33.0	242	22	9.1%	81.5	-56.8%	-70.0%	-30.2%	21.3%	16.3%	22.2%	5.1%	-13.6%
23	390	26	6.7%	36.8	318	24	7.5%	66.6	67	2	3.0%	4.5	366	33	9.0%	57.7	-82.8%	-92.3%	-55.2%	-87.8%	15.1%	37.5%	19.5%	-13.4%
ALL VA	9,058	965	10.7%	35.1	5,632	214	3.8%	124.8	3,236	229	7.1%	19.5	6,345	573	9.0%	56.5	-64.3%	-76.3%	-33.6%	-44.4%	12.7%	167.8%	137.7%	-54.7%
AVERAGE	412	44	11.8%	32.0	295	11	3.3%	135.1	154	11	7.0%	16.1	302	27	10.7%	61.9	-57.1%	-66.3%	-26.7%	-30.5%	39.3%	593.5%	424.6%	-43.8%
S.D.	220	33	8.6%	18.0	210	13	4.2%	97.8	61	11	6.1%	14.7	174	17	8.0%	37.6	23.6%	34.2%	61.6%	92.6%	76.0%	1021.6%	684.4%	46.0%
C.V.	0.53	0.74	0.73	0.56	0.71	1.23	1.27	0.72	0.40	1.02	0.88	0.91	0.58	0.64	0.74	0.61	-0.41	-0.52	-2.30	-3.03	1.93	1.72	1.61	-1.05

† Only includes domiciliary beds.
Note: VISNs 13 & 14 combined to form VISN 23 in FY 2002. In order to compute the difference between years, data preceding FY 2002 for VISNs 13 & 14 were combined as VISN 23.

Table A4. Patients treated for PTSD in general psychiatry inpatient beds and domiciliary and PRRP beds by VISN: FY 1995, FY 2002, and FY 1995-2002 change.

	General Psychiatry Inpatient Care												Domiciliary and PRRP Care											
	FY 1995				FY 2002				Change				FY 1995†				FY 2002				Change			
	Episodes of Care	*Unique Veterans*	*Bed Days/ Episode*	Bed Days/ Vet/Year	*Episodes of Care*	*Unique Veterans*	*Bed Days/ Episode*	Bed Days/ Vet/Year	*Episodes of Care*	*Unique Veterans*	*Bed Days/ Episode*	Bed Days/ Vet/Year	*Episodes of Care*	*Unique Veterans*	*Bed Days/ Episode*	*Bed Days/ Vet/Year*	*Episodes of Care*	*Unique Veterans*	*Bed Days/ Episode*	Bed Days/ Vet/Year	*Episodes of Care*	*Unique Veterans*	*Bed Days/ Episode*	Bed Days/ Vet/Year
1	1,299	906	25.7	37.2	737	551	15.6	20.9	-43.3%	-39.2%	-39.2%	-43.8%	1	1	53.0	53.0	35	34	71.1	73.2	3400.0%	3300.0%	34.2%	38.2%
2	415	295	20.3	28.6	110	89	8.8	10.8	-73.5%	-69.8%	-56.8%	-62.1%	11	11	142.8	142.8	276	218	14.4	18.3	2409.1%	1881.8%	-89.9%	-87.2%
3	699	552	38.1	47.7	212	180	12.0	14.2	-69.7%	-67.4%	-68.4%	-70.3%	22	22	124.0	124.0	349	336	63.5	65.9	1486.4%	1427.3%	-48.8%	-46.8%
4	839	597	33.5	47.1	245	213	10.2	11.8	-70.8%	-64.3%	-69.5%	-75.0%	11	10	113.6	125.0	251	247	58.7	59.6	2181.8%	2370.0%	-48.4%	-52.3%
5	184	135	19.4	24.8	179	158	9.1	10.3	-2.7%	17.0%	-53.1%	-58.5%	145	139	117.9	123.0	168	164	108.4	111.0	15.9%	18.0%	-8.1%	-9.7%
6	1,179	691	13.9	24.3	1,037	727	14.1	20.1	-12.0%	5.2%	1.3%	-17.4%	34	30	88.2	100.0	8	8	18.3	18.3	-76.5%	-73.3%	-79.3%	-81.8%
7	2,031	1,404	31.5	45.5	623	493	9.4	11.9	-69.3%	-64.9%	-70.2%	-73.9%	19	17	114.4	127.9	260	219	30.2	35.8	1268.4%	1188.2%	-73.6%	-72.0%
8	776	589	27.4	36.7	280	224	6.1	7.7	-63.9%	-62.0%	-77.6%	-79.1%	4	4	90.0	90.0	197	189	58.6	61.1	4825.0%	4625.0%	-34.8%	-32.1%
9	460	318	13.7	18.5	341	277	9.0	11.1	-25.9%	-12.9%	-34.1%	-40.0%	14	13	173.4	186.8	7	7	67.3	67.3	-50.0%	-46.2%	-61.2%	-64.0%
10	321	251	22.0	28.8	173	138	9.9	12.4	-46.1%	-45.0%	-55.2%	-57.1%	93	91	70.8	72.4	175	171	52.0	53.2	88.2%	87.9%	-26.6%	-26.5%
11	684	490	25.1	35.1	160	131	10.8	13.2	-76.6%	-73.3%	-56.9%	-62.4%					376	289	25.5	33.1				
12	591	416	32.9	46.2	233	184	11.3	14.3	-60.6%	-55.8%	-65.8%	-69.2%	13	12	146.2	158.4	350	316	48.1	53.2	2592.3%	2533.3%	-67.1%	-66.4%
15	746	493	30.8	46.0	430	354	27.6	33.5	-42.4%	-28.2%	-10.5%	-27.2%	3	3	268.7	268.7	12	12	114.3	114.3	300.0%	300.0%	-57.5%	-57.5%
16	891	704	22.8	28.6	266	236	9.9	11.1	-70.1%	-66.5%	-56.7%	-61.1%	31	31	104.6	104.6	379	372	34.2	34.8	1122.6%	1100.0%	-67.3%	-66.7%
17	587	403	15.1	22.7	382	299	11.1	14.2	-34.9%	-25.8%	-26.6%	-37.6%	38	36	143.1	151.0	123	113	85.3	92.9	223.7%	213.9%	-40.4%	-38.5%
18	380	299	24.9	34.5	250	220	10.3	11.7	-34.2%	-26.4%	-58.7%	-66.2%	4	4	70.0	70.0	2	2	76.0	76.0	-50.0%	-50.0%	8.6%	8.6%
19	513	367	38.3	52.4	352	297	9.1	10.7	-31.4%	-19.1%	-76.3%	-79.5%					55	53	36.1	37.5				
20	856	669	24.0	31.8	728	621	13.9	16.4	-15.0%	-7.2%	-41.9%	-48.6%	55	51	157.9	170.2	211	199	77.6	82.3	283.6%	290.2%	-50.8%	-51.6%
21	599	482	53.0	63.5	161	141	9.3	10.6	-73.1%	-70.7%	-82.5%	-83.3%	0	0	0.0		261	252	57.1	59.1				
22	358	288	25.0	30.7	182	157	11.4	13.2	-49.2%	-45.5%	-54.6%	-57.1%	71	71	141.3	141.3	69	68	143.5	145.6	-2.8%	-4.2%	1.6%	3.1%
23	441	317	42.8	60.9	94	79	5.2	6.2	-78.7%	-75.1%	-87.9%	-89.9%	146	142	184.5	192.5	172	159	56.6	61.3				
All VA	14,849	10,666	27.2	37.8	7,081	5,949	13.6	16.2	-52.3%	-44.2%	-50.0%	-57.2%	715	682	112.2	117.7	3,736	3,376	52.2	57.7	422.5%	395.0%	-53.5%	-50.9%
AVG.	675	485	26.4	36.0	342	275	11.1	13.6	-48.2%	-41.1%	-52.7%	-58.5%	36	34	115.2	120.1	178	163	61.7	64.5	1177.5%	1127.2%	-41.7%	-41.4%
S.D.	412	280	8.9	10.9	244	179	4.5	5.7	22.4%	26.9%	21.4%	17.5%	39	38	52.9	54.4	130	117	32.4	32.1	1411.5%	1353.7%	32.9%	33.5%
C.V.	0.61	0.58	0.34	0.30	0.72	0.65	0.40	0.42	-0.47	-0.65	-0.41	-0.30	1.10	1.11	0.46	0.45	0.73	0.72	0.52	0.50	1.20	1.20	-0.79	-0.81

† Only includes domiciliary beds.
Note: VISNs 13 & 14 combined to form VISN 23 in FY 2002. In order to compute the difference between years, data preceding FY 2002 for VISNs 13 & 14 were combined as VISN 23.

Table A5. Percent treated for PTSD by VISN: FY 1995, FY 2002, and FY 1995-2002 change.

VISN	Inpatient General Psychiatry						Domiciliary and PRRP					
	FY 1995 Percent Tx. for PTSD		FY 2002 Percent Tx. for PTSD		% Change: FY 1995-2002 Percent Tx. for PTSD		FY 1995† Percent Tx. for PTSD		FY 2002 Percent Tx. for PTSD		% Change: FY 1995-2002 Percent Tx. for PTSD	
	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans
1	18.1%	20.3%	14.6%	16.4%	-19.4%	-19.0%	0.5%	0.5%	9.4%	11.0%	1682.4%	1909.8%
2	13.7%	15.9%	5.0%	6.0%	-63.5%	-62.3%	2.4%	2.6%	14.1%	14.2%	495.4%	447.2%
3	10.9%	13.8%	5.8%	7.1%	-47.0%	-48.2%	5.2%	5.4%	18.4%	19.7%	254.0%	268.0%
4	13.1%	16.4%	6.5%	7.9%	-50.6%	-52.1%	1.8%	1.6%	8.2%	8.7%	366.4%	439.3%
5	6.5%	7.6%	4.7%	6.4%	-27.6%	-16.3%	35.5%	35.1%	12.3%	13.2%	-65.4%	-62.5%
6	16.4%	16.3%	14.8%	16.1%	-9.6%	-1.3%	4.2%	4.1%	0.9%	1.0%	-77.8%	-74.8%
7	24.1%	26.7%	13.1%	14.5%	-45.8%	-45.8%	4.3%	4.2%	23.5%	23.1%	450.1%	454.1%
8	9.7%	11.1%	4.7%	5.5%	-51.6%	-50.4%	1.2%	1.3%	15.6%	16.5%	1205.2%	1208.1%
9	8.8%	9.1%	6.7%	7.7%	-24.0%	-15.7%	2.0%	2.1%	0.6%	0.7%	-68.4%	-67.0%
10	8.4%	10.1%	4.8%	5.5%	-43.0%	-45.8%	6.0%	6.4%	5.3%	5.7%	-12.0%	-10.8%
11	12.1%	13.3%	4.1%	4.7%	-65.9%	-64.5%			34.5%	31.5%		
12	10.6%	12.6%	5.8%	7.1%	-45.0%	-43.6%	1.9%	1.9%	13.5%	14.1%	594.4%	657.3%
15	12.6%	13.6%	8.5%	10.3%	-32.4%	-24.6%	1.0%	1.1%	3.3%	3.6%	220.5%	239.8%
16	11.8%	13.2%	3.6%	4.5%	-69.8%	-66.2%	3.9%	4.1%	23.7%	24.8%	508.8%	511.0%
17	11.1%	12.7%	8.5%	9.9%	-23.4%	-22.4%	3.7%	4.0%	3.7%	3.8%	0.6%	-4.0%
18	10.1%	12.3%	9.0%	11.2%	-11.2%	-8.7%	0.8%	1.0%	0.3%	0.3%	-63.7%	-66.5%
19	19.6%	22.4%	13.6%	16.4%	-30.5%	-26.6%			27.7%	29.5%		
20	21.0%	24.8%	20.2%	23.5%	-3.6%	-5.2%	4.1%	4.2%	10.4%	10.5%	155.0%	152.1%
21	14.1%	18.5%	5.0%	7.0%	-64.2%	-62.3%	0.0%	0.0%	30.0%	32.0%		
22	5.8%	7.6%	4.5%	5.4%	-22.0%	-28.5%	9.4%	9.5%	10.6%	10.6%	12.7%	12.0%
23	16.1%	17.8%	2.7%	3.3%	-83.2%	-81.3%	38.8%	39.0%	6.6%	6.5%	-83.1%	-83.3%
All VA	12.9%	14.8%	7.9%	10.0%	-38.7%	-32.7%	5.8%	6.0%	11.4%	11.9%	97.2%	98.9%
Avg.	12.5%	14.4%	7.9%	9.3%	-39.6%	-37.4%	6.0%	6.1%	13.0%	13.4%	298.5%	317.3%
S.D.	4.7%	5.3%	4.7%	5.2%	20.9%	21.8%	9.3%	9.3%	10.1%	10.1%	456.3%	496.0%
C.V.	0.37	0.37	0.59	0.56	-0.53	-0.58	1.54	1.52	0.77	0.75	1.53	1.56

† Only includes domiciliary beds.
Note: VISNs 13 & 14 combined to form VISN 23 in FY 2002. In order to compute the difference between years, data preceding FY 2002 for VISNs 13 & 14 were combined as VISN 23.

Appendix B

Summary of Special Emphasis Program Goals

This Appendix recapitulates the goals for special emphasis programs for PTSD as presented in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. We have modified Population Measures 1 - 3 and Program Measure 2 and added Population Measure 6 with the approval of the Clinical Quality Improvement Specialist, Office of Performance and Quality, VA Headquarters. Population Measures 4 and 5 and Program Measures 1 and 3 remain unchanged. Population Measures 1, 2, 3 and 6 specify outcome goals for PTSD, substance abuse, work and violence. We have introduced technical modifications to the meeting of these goals so that the methods used are consistent with the methods used elsewhere in the National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 1998; Kasprow et al., 1997; Seibyl et al., 1997).

Population Measure 1 as modified is:

Change in PTSD symptoms on the short form of the Mississippi Scale from admission to follow-up 4 months after discharge.
Goal: Program not significantly worse than the median program.

Our experience in monitoring outcomes suggests that alcohol abuse and drug abuse should be considered separately. Outcomes for the two are not related highly to each other, despite them both being forms of substance abuse; combining them masks some differences among programs. Therefore, **Population Measure 2** is modified by splitting it into two Measures, as follows:

Change in alcohol abuse symptoms as measured by the Alcohol Abuse Composite of the Addiction Severity Index from admission to follow-up 4 months after discharge.
Goal: Program not significantly worse than the median program.

Change in drug abuse symptoms as measured by the Drug Abuse Composite of the Addiction Severity Index from admission to follow-up 4 months after discharge.
Goal: Program not significantly worse than the median program.

Population Measure 3 as modified is:

Change in occupational functioning as measured by the number of days employed or the number of dollars earned from work during the past 30 days from admission to follow-up 4 months after discharge.
Goal: Program not significantly worse than the median program.

Population Measure 4, unmodified, is:

Proportion of veterans in need of PTSD care treated for PTSD in VA outpatient mental health clinics in each year.
Goal: Fifty-five percent.

Population Measure 5, unmodified, is:

Proportion of veterans who receive a psychiatric outpatient visit within 30 days of discharge from an inpatient program.
Goal: Greater than 51%.

Population Measure 6, newly added, is:

Change in violence as measured by the Violence Scale as modified from the National Vietnam Veterans Readjustment Study from admission to follow-up 4 months after discharge.
Goal: Program not significantly worse than the median program.

Program Measure 1, unmodified, is:

Proportion of veterans successfully contacted for outcome assessment after discharge from an inpatient PTSD program.
Goal: 50%.

Program Measure 2 has been changed from "Number of patients seen..." to "Number of patients treated..." It is possible for programs to screen a large number of veterans with one contact each, without providing meaningful treatment in the process. The criterion for treatment to consist of more than one contact provides a lenient definition of treatment and, at the same time, eliminates the potential reward for focusing on performing a large number of screening contacts with limited benefit to the veterans involved. Program Measure 2 now is:
Number of patients treated (that is, seen more than once) per filled FTEE in the outpatient PTSD program (including facility contributed FTEE).
Goal: 75 patients/filled FTEE.

Program Measure 3, unmodified, is:

Number of hospital days for patients in the 6 months after discharge from an inpatient PTSD program.
Goal: Less than 13.5 days.

Appendix C

Specialized PTSD Programs Annual Report: Calculation of Filled FTEE and Direct Cost

Calculation of ***FILLED FTEE*** and ***DIRECT COST***

Appendix C is a description of the procedure for calculating ***FILLED FTEE*** (tables 3-1, 3-2, 3-5, 3-6, 3-7, and 3-8) and ***DIRECT COST*** (Part I, tables 4 and 5; tables 3-9, 3-10, 3-11, 3-12) for Specialized PTSD Programs.

Filled FTEE and Direct Cost are calculated from data supplied from the *Specialized PTSD Programs Annual Report.* These data include the following items from Parts 2 and 5 on the Annual Report form: Part 2 - "Total Recurring All Other Funds Expended up to $9999.00"; Part 5, item c - "Start and End Dates", which are used to determine time worked for the VA facility; Part 5, item d - "Number of Hours Worked Per Pay Period for the Facility"; Part 5, item e - "Actual Salary Plus Benefits Paid for Work at the Facility for this Fiscal Year"; Part 5, item f, "Start and End Dates", which are used to determine time worked for the program; and Part 5, item g - "Total Number of Hours Committed Per Week to the Program".

Steps for calculating ***FILLED FTEE***:

1. Using the program Start Date and End Date (item "f", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) determine the total number of days worked during the fiscal year for the program. Divide the total number of days by 364 to determine the ***Portion of the Fiscal Year Worked for the Program.***

2. Divide the Number of Hours Committed Per Week to the Program (item "g", for *each* of the completed sections numbered 1-48, in Part 5 of the Annual Report) by 40 to determine the ***Portion of A Full FTEE Worked for the Program During The Fiscal Year***.

3. Multiply the Portion of the Fiscal Year Worked for the Program by the Portion of A Full FTEE Worked for the Program During The Fiscal Year to determine the ***Filled Program FTEE*** for each individual staff member.

4. For Specialized Outpatient PTSD Programs, sum the Filled Program FTEE for each staff member within a program to determine the total ***FILLED FTEE***, for each program (tables 3-1, 3-2, 3-5 and 3-6).

4. For Specialized Intensive PTSD Programs, sum the Filled Program FTEE for each staff member across programs at a facility to determine the total ***FILLED FTEE***, for each facility (tables 3-3, 3-4, 3-7 and 3-8).

Steps for calculating ***DIRECT COST***:

1. Using the facility Start Date and End Date (item "c", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) determine the total number of days worked during the fiscal year for the facility. Divide the total number of days by 364 to determine the ***Portion of the Fiscal Year Worked for the Facility***.

2. Divide the Number of Hours Worked Per Pay Period for the Facility (item "d", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) by 80 to determine the ***Portion of A Full FTEE Worked for the Facility During the Fiscal Year***.

3. Multiply the Portion of the Fiscal Year Worked for the Facility by the Portion of A Full FTEE Worked for the Facility During The Fiscal Year to determine the ***Filled Facility FTEE*** for each individual staff member.

4. Multiply the Actual Salary Plus Benefits Paid by the factor [1/Filled Facility FTEE] to determine the ***Full-time Equivalent Salary & Benefits for working at the facility*** for each individual staff member.

5. Multiply the Full-time Equivalent Salary & Benefits by the Filled Program FTEE to determine ***Actual Salary & Benefits for the Program*** for each individual staff member.

6. For Specialized Outpatient PTSD Programs, sum the Actual Salary & Benefits for the Program for each staff member reported in the Annual Report and the Total Recurring All Other Funds to determine Total Program Dollars or ***DIRECT COST***, by program (tables 3-9 and 3-10).

7. For Specialized Intensive PTSD Programs, sum the Actual Salary & Benefits for the Program for each staff member reported in the Annual Report and the Total Recurring All Other Funds to determine Total Program Dollars, for each program. Then sum the Total Program Dollars for each program at a facility to determine the ***DIRECT COST***, for the facility (tables 3-11 and 3-12).

Appendix D

Programs with Inadequate Data

Table D-1. Unadjusted Means for Station with Inadequate Data

VISN	Station	# Followed Up	Short Mississippi Scale		NEPEC PTSD Scale		ASI Alcohol Composite		ASI Drug Composite		Violence Scale		Work (Days)	
			Admission	Follow-Up	Admission	Follow-Up	Admission	Follow-up	Admission	Follow-Up	Admission	Follow-Up	Admission	Follow-Up
4	Coatesville	105	39.40	36.18	16.19	15.12	0.24	0.19	0.11	0.06	2.01	0.81	3.98	3.19
TOTAL		105												

Appendix E

Treatment of PTSD Inside and Outside of Specialized Programs

Appendix E presents information regarding differentiation of treatment in different types of settings in VA, as specified in VHA Directive 2000-004, "Definition of Levels of Specialization in Post-Traumatic Stress Disorder (PTSD) Services". This directive delineates the types of outpatient PTSD services available in VA, both inside and outside of specialized programs.

Table E1 presents the total number of unique veterans with a primary diagnosis of PTSD who received outpatient PTSD treatment in the VA system for FY 2002, by VISN. These veterans are separated first by all veterans who received any treatment from a Specialized Outpatient PTSD Program (59,431). Of the remaining veterans, those who received any treatment from a PTSD Specialist (13,428) were counted. Then, of the remaining veterans, those who received any treatment from a mental health program (110,711) were counted. Those remaining are the veterans who received treatment only from a non-mental health program (19,292). Across these groups, each veteran with a primary diagnosis of PTSD who received specialized outpatient treatment in VA is counted only once.

Table E-2 presents the total number of veterans who, regardless of primary diagnosis, received outpatient individual and group treatment from PTSD specialists by VISN, and the number of visits those veterans received, for FY 2002.

Table E3 presents the number of unique veterans who, regardless of primary diagnosis, received outpatient individual and group treatment from PTSD Specialists by facility, and the number of visits those veterans received, for FY 2002. Table E3 also indicates if a Specialized Outpatient PTSD Program (PCT, SUPT or WSDTT) was operating at each of those facilities during FY 2002.

Department of Veterans Affairs
Veterans Health Administration
Washington, DC 20420

VHA DIRECTIVE 2000-004

February 22, 2000

DEFINITION OF LEVELS OF SPECIALIZATION IN POST-TRAUMATIC STRESS DISORDER (PTSD) SERVICES

1. PURPOSE: This Veterans Health Administration (VHA) Directive provides working definitions to assist in clearly identifying VHA strategy in providing both specialized and general Post-traumatic Stress Disorder (PTSD) services.

2. BACKGROUND

a. Public Law 104-262, the Veterans Healthcare Eligibility Reform Act of 1996, §1706(b)(1), requires VHA to maintain its capacity to provide for the specialized treatment and rehabilitation needs of disabled veterans (including those with ... mental illness) within distinct programs or facilities...that are dedicated to the specialized needs of those veterans..."

b. The "Report to Congress on Maintaining Capacity to Provide for the Specialized Treatment and Rehabilitation Needs of Disabled Veterans," dated May 1, 1997, defines the overall group of disabled mentally ill veterans into two main groups: those diagnosed with a serious mental illness (SMI) and those diagnosed with PTSD. This Directive addresses the latter group.

c. In order to obtain a wider range of views in formulating a VHA-wide approach, on March 25, 1999, the Office of the Under Secretary appointed a Seriously and Chronically Mentally Ill (SCMI) Strategic Implementation Committee composed of four Clinical Managers, a medical center Director, a Mental Health Care Line Director, the National Director of the Northeast Program Evaluation Center (NEPEC), a representative of Vietnam Veterans Association, and a representative of the Mental Health Strategic Healthcare Group.

d. This Directive differentiates among general, specialty, and special program designation within the Mental Health service area. The Directive identifies distinctions of each and the accountability expected from a designated special program. Described here are the definitions of each and the general levels of expertise of the staff providing care in each area. To assist in clearly identifying VHA strategy in providing PTSD services, this Directive specifically applies the general principles agreed upon to PTSD services.

3. POLICY: It is VHA policy to use the definitions in subparagraph 4.a. to distinguish specialized PTSD programs from general PTSD care at all facilities and to use the appropriate Treating Specialty Codes and Decision Support System (DSS) Identifiers, as described, to record workload starting in Fiscal Year (FY) 2000.

4. ACTIONS

a. **Definitions.** The following definitions are to be used by all facilities:

THIS VHA DIRECTIVE EXPIRES FEBRUARY 28, 2005

(1) **Specialized PTSD Treatment Programs.** To qualify as a Specialized PTSD Treatment Program, the program must:

(a) Have a designated program leader who has the responsibility and authority to lead and manage the team as well as to provide clinical evaluations of care.

(b) Be composed of providers (more than a single provider) in one location who are experts in the care of PTSD, with their expertise acquired through education, training, and supervision of care. These providers form a team whose team members spend the preponderance of their time caring for veterans with PTSD needing specialized services. To ensure that a veteran who is enrolled in the special program has continuous access to a team provider, the team must be of sufficient size to cover for staff absences.

NOTE: Specialized PTSD Programs may have, in addition, team members who are at remote access points and/or facilities. These members should be maintaining an active consultative relationship with the core team members, sharing in the discussion of patients and continuing education activities.

(c) Be visibly identified by patients as a program. To enable this identification, the core team members should be located in close proximity to each other.

(d) Participate in the mandated national program evaluation for specialized PTSD treatment programs.

(e) Enter data into designated bed section codes and clinics with special DSS identifiers. These include:

1. Patient Treatment File (PTF) Treating Specialty Codes 26, 38, 79, 88 and 91; and

2. The following DSS Identifiers:

a. 519 (Substance Use Disorder and/or PTSD teams),

b. 525 (Women's Stress Disorder Teams),

c. 540 (PCT Post-traumatic Stress, Individual),

d. 561 (PCT-Post-traumatic Stress, Group),

e. 580 (PTSD Day Hospital), and

f. 581 (PTSD Day Treatment).

NOTE: For Specialized PTSD inpatient programs that include a significant outpatient clinical team (e.g., over one Full-time Employee Equivalent (FTEE)), the outpatient component should

use DSS Identifiers for PCTs (540 and 561) to record outpatient visits. In addition, the outpatient component needs to participate in the national program evaluation for specialized PTSD treatment programs as a PCT.

(2) **Specialty PTSD Care Outside of a Specialized Program.** Specialty PTSD care outside of a specialized program is identified by:

(a) A provider recognized as a specialist, through designation in the provider's clinical privileges, scope of practice statement, or core competencies as set forth in the medical staff by-laws and/or general personnel practices, or through specific designation as a specialist by the care line director or service chief. The provider is required to demonstrate annual continuing education activities in the diagnosis and treatment of PTSD.

(b) The provider maintaining accepted levels of expertise for the specialty care of patients with PTSD. ***NOTE:*** *The usual review established by the medical staff bylaws and facility will be utilized to certify continued practice. The clinician must see an adequate number of cases to maintain expertise; the adequate number of cases to be determined by the care line director or service chief.*

(c) PTSD specialists, not associated with a specialized PTSD treatment program, entering outpatient workload into clinics with the following DSS identifiers:

1. 516 (PTSD, Group),

2. 562 (PTSD, Individual),

3. 524 (Active Duty Sex Trauma), and

4. 589 (Non-active Duty Sex Trauma).

(3) **General Mental Health Care.** General Mental Health Care is defined as:

(a) Care provided by Mental Health practitioners who are not specially, or extensively, trained in PTSD treatment or whose focus of care is generalized. These clinicians:

1. Provide routine screening and treatment to patients with PTSD in milder forms and/or who have other co-existing mental illness.

2. Identify care provided for PTSD by recording PTSD as the diagnosis on the encounter form.

3. Utilize PTSD specialty consultation or referral for exacerbation of PTSD symptoms not resolved with general interventions or where clinically indicated.

(b) Care by non-Mental Health practitioners. These clinicians:

1. Provide care for PTSD and its symptomatic manifestations as part of general or primary care practice.

2. Identify care provided for PTSD by recording PTSD as the diagnosis on the encounter form.

3. Utilize PTSD specialty consultation or referral for exacerbation of PTSD symptoms not resolved with general interventions or where clinically indicated.

b. **Responsibilities.** Responsibilities are defined as follows:

(1) **Facility or Care Line Actions.** The facility Director, or designee, is responsible for:

(a) Identifying and reviewing specialist skills, through designation in the specialist's clinical privileges, scope of practice statement or core competencies as set forth in the medical staff bylaws and/or general personnel practices, or through specific designation by their care line director or service chief as a specialist, required to demonstrate annual continuing education activities in the diagnosis and treatment for PTSD. ***NOTE:*** *This designation must meet usual standards of practice and review criteria.*

(b) Using National DSS identifiers and bed section conventions to designate specialized PTSD programs and specialty PTSD care.

(c) Providing complete nationally-adopted monitoring information for specialized programs in a timely manner.

(2) **Monitoring by NEPEC.** The NEPEC is responsible for:

(a) Producing periodic reports on the structure, process, and outcome of PTSD services.

(b) Providing population-based data on the availability and access to specialized PTSD Programs, PTSD Specialty Care, and PTSD general care.

1. The population estimates for assessment of the availability and access to specialized PTSD programs will be calculated as follows:

a. Numerators. Numerators are the number of unique veterans in specialized PTSD programs (any designated PTSD specialized program) weighted for intensity of such services.

b. Denominators. Denominators are the number of veterans in the network who are service-connected for PTSD.

2. Reports will be generated that characterize access to PTSD specialty care, and where data is available, contract services for PTSD.

(3) **Veterans Integrated Services Network (VISN) Actions.** The VISN Director, or designee, is responsible for:

(a) Providing PTSD services based on an assessment of population-based need.

(b) Establishing strategies to provide Network enrollees access to PTSD specialized programs.

NOTE: *If access to specialized PTSD programs is to be provided outside the geographic VISN boundaries or contractually, a written plan and formal contract relationship is to be developed and reviewed by the VHA Mental Health Strategic Healthcare Group.*

5. REFERENCES: VHA Program Guide 1103.3, June 3, 1999, pages 26-30, 61-65.

6. FOLLOW-UP RESPONSIBILITY: The Chief Consultant, Mental Health Strategic Healthcare Group (116) is responsible for the contents of this Directive.

7. RESCISSION: None. This VHA Directive expires February 28, 2005.

S/ Melinda Murphy for
Thomas L. Garthwaite, M.D.
Deputy Under Secretary for Health

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Table E-1. VA PTSD Outpatient Treatment by Specialized Programs, PTSD Specialists, Mental Health and Non-Mental Health Stops, by VISN, FY 2002.

VISN	Specialized Outpatient PTSD Programs*	PTSD Specialists**	Mental Health Non-Specialized Stops***	Non-Mental Health Stops****
	#Unique Veterans	#Unique Veterans	#Unique Veterans	#Unique Veterans
1	4114	347	7970	1425
2	945	875	3711	529
3	2965	911	4982	579
4	2426	671	6839	1043
5	1762	182	3047	373
6	3072	344	6604	1059
7	3863	2182	7653	1039
8	2892	1023	8682	1067
9	2262	297	5417	744
10	3509	301	2607	623
11	1856	504	2984	487
12	938	1584	3201	590
15	2472	209	4139	834
16	6756	988	7876	1595
17	2515	298	5440	1356
18	3260	616	4544	1145
19	1649	137	3824	989
20	4379	476	6885	1229
21	2383	321	7037	1267
22	3309	591	5543	996
23	2380	661	2889	436
SUM	59,707	13,518	111,874	19,405
All VA	59,431	13,428	110,711	19,292

*Specialized Outpatient PTSD Program (SOPP) visits are defined by the following outpatient file stop codes: PCT individual 540 and PCT group 561, SUPT individual and group 519, and WSDTT 525.

**PTSD Specialist visits are defined by outpatient file stop codes 516 for group and 561 for individual visits.

***Mental Health Non-Specialized stops: General psychiatry outpatient visits are defined by outpatient file stop codes 501-506; 509-512; 515-516, 520-521, 524, 529, 531-533, 535, 541, 550-554, 557-566; 573-578; 580-590).

****Any outpatient stop code other than those specified in the groups above.

Table E-2. VA PTSD Outpatient Treatment by PTSD Specialists, by VISN, FY 2002*.

VISN	VISITS	#UNIQUE VETERANS	#Visits/ Veteran
1	4384	680	6.4
2	8331	975	8.5
3	19762	1194	16.6
4	8513	1396	6.1
5	1912	441	4.3
6	3612	518	7.0
7	25833	2935	8.8
8	12548	1531	8.2
9	3078	497	6.2
10	3486	574	6.1
11	9012	773	11.7
12	20857	1784	11.7
15	2230	257	8.7
16	7892	1152	6.9
17	4454	357	12.5
18	5413	877	6.2
19	2657	203	13.1
20	6107	537	11.4
21	2805	488	5.7
22	21435	1234	17.4
23	11313	808	14.0
TOTAL	185,634	19,211	
MEAN	8,840	915	9.7
STD	7,232	633	3.7

*Entries in the Austin Outpatient File from Stop Codes 516 (group visits) and 562 (individual visits) comprise the data in this table.

Table E-3. VA PTSD Outpatient Treatment by PTSD Specialists, by Facility, FY 2002.*

VISN	STA. CODE	FACILITY**	VISITS	#UNIQUE VETERANS	#Visits/ Veteran	Specialized Outpatient PTSD Programs Open in FY 2002
1	518	BEDFORD	1768	64	27.6	
1	523BZ	BOSTON (OPC)	895	140	6.4	
1	523A5	BROCKTON VAMC	46	25	1.8	PCT, SUPT
1	689	CT HCS: WEST HAVEN	650	299	2.2	PCT, SUPT
1	608	MANCHESTER	58	19	3.1	PCT
1	631	NORTHAMPTON	525	90	5.8	
1	650	PROVIDENCE	313	12	26.1	PCT
1	402	TOGUS	114	21	5.4	
2	528A4	BATAVIA DIVISION	806	82	9.8	PCT
2	528A8	HCS UPSTATE NY V2 ALBANY	4231	333	12.7	
2	528A6	HCS UPSTATE NY V2 BATH	1938	390	5.0	
2	528A7	HCS UPSTATE NY V2 SYRACUSE	394	119	3.3	PCT
2	528	UPSTATE N.Y. HCS	962	64	15.0	
3	561BZ	BRICK	2528	111	22.8	
3	526	BRONX	1060	144	7.4	PCT
3	630A4	BROOKLYN DIVISION	1561	95	16.4	PCT
3	620A4	CASTLE POINT DIVISION	291	57	5.1	PCT
3	561A4	LYONS	222	207	1.1	
3	620	MONTROSE	9580	409	23.4	
3	620GA	NEW CITY (ROCKLAND) CBOC	358	14	25.6	
3	632	NORTHPORT	4162	190	21.9	
4	529	BUTLER	331	16	20.7	
4	540	CLARKSBURG	2415	326	7.4	
4	562	ERIE	164	68	2.4	
4	642GA	FORT DIX (CBC)	434	32	13.6	
4	503	JAMES E. VAN ZANDT VAMC	1172	52	22.5	
4	595	LEBANON	1669	217	7.7	
4	642	PHILADELPHIA	1446	181	8.0	PCT
4	542GA	SPRINGFIELD (CBC)	279	80	3.5	
4	693GB	WILLIAMSPORT (CBC)	590	413	1.4	
5	512	BALTIMORE	1272	307	4.1	PCT
5	613	MARTINSBURG	514	86	6.0	
5	512A5	PERRY POINT	124	49	2.5	PCT
6	637	ASHEVILLE-OTEEN	2485	386	6.4	PCT
6	658	SALEM	1114	123	9.1	
7	508	ATLANTA	72	13	5.5	PCT
7	544	COLUMBIA SC	12914	1182	10.9	
7	619GA	COLUMBUS OPC	766	138	5.6	
7	521GB	DECATUR CBOC AL	338	25	13.5	
7	521GC	FLORENCE CBOC	606	26	23.3	
7	521GD	GADSDEN CBOC	802	42	19.1	
7	544BZ	GREENVILLE,SC-soc	1703	167	10.2	
7	521GA	HUNTSVILLE CBOC	682	45	15.2	
7	509A0	LENWOOD/Augusta	146	47	3.1	PCT
7	534GB	MYRTLE BEACH CBOC	540	62	8.7	
7	679	TUSCALOOSA	5127	1096	4.7	PCT***
7	619A4	TUSKEGEE	2137	184	11.6	PCT
8	516	BAY PINES	939	202	4.6	SUPT
8	673GA	BREVARD CBOC	1017	43	23.7	
8	573BZ	DAYTONA BEACH-soc	1523	103	14.8	
8	546GB	KEY WEST (CBC)	109	11	9.9	
8	546	MIAMI	62	60	1.0	PCT
8	673BY	ORLANDO-soc	52	10	5.2	
8	673BZ	PORT RICHEY-soc	1044	80	13.1	
8	672	SAN JUAN	61	11	5.5	PCT
8	673	TAMPA	946	166	5.7	PCT
8	548	W PALM BEACH	6793	850	8.0	

VISN	STA. CODE	FACILITY**	VISITS	#UNIQUE VETERANS	#Visits/ Veteran	Specialized Outpatient PTSD Programs Open in FY 2002
9	581	HUNTINGTON	469	76	6.2	PCT
9	626BY	KNOXVILLE(SOC)	98	16	6.1	
9	596	LEXINGTON-LEESTOWN	211	80	2.6	PCT
9	603	LOUISVILLE	298	147	2.0	PCT
9	614	MEMPHIS	128	25	5.1	PCT
9	626	NASHVILLE	1246	69	18.1	
9	581GA	PRESTONSBURG	110	45	2.4	
9	626A4	VA TENNESSEE VALLEY HCS	505	39	12.9	
10	539	CINCINNATI	28	16	1.8	PCT
10	757	COLUMBUS-IOC	1122	290	3.9	PCT
10	552	DAYTON	2158	259	8.3	PCT
10	552GC	RICHMOND CBOC IN	174	14	12.4	
11	515	BATTLE CREEK	1770	316	5.6	PCT
11	515BY	GRAND RAPIDS-soc	535	60	8.9	
11	583	INDIANAPOLIS-10TH ST	5101	303	16.8	
11	610	NORTHERN INDIANA HCS	42	2	21.0	PCT
11	655	SAGINAW	1562	111	14.1	
12	676PA	676PA	1367	118	11.6	
12	695BY	APPLETON	508	28	18.1	
12	537A4	CHICAGO (LAKESIDE)	383	14	27.4	
12	537BY	CROWN POINT	64	7	9.1	
12	578	HINES	737	86	8.6	PCT
12	585	IRON MOUNTAIN	711	39	18.2	
12	676GC	LACROSSE CBOC WI	746	82	9.1	
12	607	MADISON	253	50	5.1	WSDTT
12	695	MILWAUKEE	5157	328	15.7	
12	556	NORTH CHICAGO	7726	746	10.4	
12	676	TOMAH	2467	331	7.5	
12	537	VA CHICAGO HCS	271	20	13.6	PCT
12	676GA	WAUSAU CBOC WI	467	69	6.8	
15	657GJ	EVANSVILLE CBOC IN	246	25	9.8	
15	657A0	ST LOUIS-Jeff Bks.	536	46	11.7	PCT
15	589A4	TRUMAN VH COLUMBIA MO	671	46	14.6	
15	589	VAMC HEARTLAND-W KANSAS MC	48	47	1.0	PCT
15	657A5	VAMC MARION DIV MARION IL	711	82	8.7	
16	502	ALEXANDRIA	512	48	10.7	
16	564	FAYETTEVILLE AR	781	324	2.4	PCT
16	635GA	LAWTON (CBC)	175	21	8.3	
16	580BZ	LUFKIN	332	16	20.8	
16	564BY	MT. VERNON-soc	1392	305	4.6	
16	623	MUSKOGEE	401	43	9.3	
16	629	NEW ORLEANS	70	25	2.8	PCT, WSDTT
16	520BZ	PENSACOLA-soc	83	28	3.0	
16	667	SHREVEPORT	2556	190	13.5	
16	623BY	TULSA-soc	1590	165	9.6	
17	549A4	BONHAM VAMC	584	89	6.6	
17	674GB	BROWNWOOD CBOC	62	9	6.9	
17	549	DALLAS	191	16	11.9	PCT
17	549BY	FORT WORTH	1888	114	16.6	
17	671A4	KERRVILLE	861	34	25.3	
17	674GA	PALESTINE CBOC	630	65	9.7	
17	671GB	VICTORIA (OCS)	209	8	26.1	
17	674A4	WACO	28	23	1.2	PCT
18	504	AMARILLO HCS	388	142	2.7	
18	501GA	ARTESIA (CBC)	236	28	8.4	
18	756	EL PASO HCS	1128	233	4.8	PCT
18	756GA	LAS CRUCES	1257	150	8.4	
18	504BY	LUBBOCK,TX-soc	1141	203	5.6	
18	644	PHOENIX	816	84	9.7	PCT

VISN	STA. CODE	FACILITY**	VISITS	#UNIQUE VETERANS	#Visits/ Veteran	Specialized Outpatient PTSD Programs Open in FY 2002
18	501HB	RATON (ORC)	84	16	5.3	
18	644GB	SHOW LOW CBOC	231	18	12.8	
18	501GC	SILVER CITY	52	14	3.7	
18	678	SOUTHERN ARIZONA HCS	52	45	1.2	PCT
18	519	WEST TEXAS HCS	28	9	3.1	
19	436	FORT HARRISON	130	7	18.6	
19	554GD	PUEBLO CBOC CO	2149	141	15.2	PCT
19	666GC	RIVERTON COBC	98	20	4.9	
19	660	SALT LAKE CITY HTHCARE	91	17	5.4	PCT
19	666	SHERIDAN	189	19	9.9	
20	663A4	AMERICAN LAKE	20	15	1.3	PCT
20	653GA	BANDON	583	54	10.8	
20	531	BOISE	76	4	19.0	PCT
20	653GB	BROOKINGS CBOC	350	23	15.2	
20	653BY	EUGENE-soc	727	109	6.7	
20	687GA	RICHLAND CBOC	153	23	6.7	
20	653	ROSEBURG	3398	226	15.0	
20	668	SPOKANE WA	57	16	3.6	PCT
20	687	WALLA WALLA	737	79	9.3	
21	570	CENTRAL CALIFORNIA HCS	921	121	7.6	
21	662GC	EUREKA CBOC	451	147	3.1	
21	459GB	HILO	470	123	3.8	
21	612GH	MCCLELLAN CBOC MARTINEZ CA	128	20	6.4	
21	654	RENO	253	17	14.9	
21	612A4	SACRAMENTO VAMC	581	63	9.2	PCT
22	691	GREATER LA HCS	14542	711	20.5	PCT
22	593	LAS VEGAS	578	69	8.4	PCT
22	605	LOMA LINDA	516	51	10.1	PCT, WSDTT
22	600GC	LONG BEACH CBOC	172	71	2.4	
22	691GB	SANTA BARBARA CBOC	68	14	4.9	
22	691A4	SUPULVEDA OPC (DIV)	2048	121	16.9	
22	600	VA LONG BEACH HCS CA	3509	219	16.0	
23	656GA	BRAINERD CBOC	965	89	10.8	
23	437	FARGO	67	6	11.2	
23	568HJ	ROSEBUD IHS HOSPITAL	48	11	4.4	
23	656	ST CLOUD	7112	309	23.0	
23	636GC	VA CBOC MASON CITY IA	423	51	8.3	
23	636A6	VA CPHN DES MOINES IA	1403	131	10.7	
23	636A4	VA CPHN GRAND ISLAND	1216	220	5.5	
23	636	VA NEB-WESTERN IA HCS	68	11	6.2	PCT
TOTAL			185,531	19,609		
MEAN			1,189	126	9.5	
STD			2,076	179	6.6	

*Entries in the Austin Outpatient File from Stop Codes 516 (group visits) and 562 (individual visits) comprise the data in this table.

**Facilities with less than 20 total PTSD Specialist visits are not listed.

***Tuscaloosa PCT was open for half of fiscal year 2002.

Appendix F

Acronyms and Abbreviations Used in the Text

Acronyms and Abbreviations

ASI	Addiction Severity Index
BD	Bed Days
CDR	Cost Distribution Report
C.V.; CV	Coefficient of Variation
DC; D/C	Discharge
DD214	Dept. of Defense Form #214
DH	Day Hospital
Dx (Dx=d)	Diagnosis (Diagnosed)
EBTPU	Evaluation and Brief Treatment PTSD Unit
FTEE	Full Time Employee Equivalent
FY	Fiscal Year
INDVDLS	Individuals
LOS	Length of Stay
M	Mean
MH	Mental Health
N	Number
NEPEC	Northeast Program Evaluation Center
PCT	PTSD Clinical Team
PDP, PTSD Dom	PTSD Domiciliary Program
PRRP	PTSD Residential Rehabilitation Program
PSF	PTSD Status Form
PSU	PTSD Substance Abuse Unit
PTF	Patient Treatment File
PTSD	Posttraumatic Stress Disorder
PTSS	Posttraumatic Stress Syndrome
RCS	Readjustment Counseling Service
SA	Substance Abuse
SC	Service Connected
S.D.; SD; STD	Standard Deviation
SEP	Special Emphasis Program
SIPP	Specialized Intensive PTSD Program
SIPU	Specialized Inpatient PTSD Unit
SOPP	Specialized Outpatient PTSD Program
SUPT	Substance Use PTSD Team
Tx	Treatment
VA	Dept. of Veterans Affairs
VAMC	Dept. of Veterans Affairs Medical Center
VHA	Veterans Health Administration
VISN	Veterans Integrated Service Network
WSDTT	Women's Stress Disorder Treatment Team
WSI-1	War Stress Interview - Part 1
WTRP	Women's Trauma Recovery Program