STATEMENT OF KEVIN GALPIN, MD DIRECTOR, TELEHEALTH SERVICES VETERANS HEALTH ADMINISTRATION BEFORE THE

SENATE COMMITTEE ON APPROPRIATIONS SUBCOMMITTEE ON MILITARY CONSTRUCTION, VETERANS AFFAIRS, AND RELATED AGENCIES

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Good morning Chairman Moran, Ranking Member Schatz, and distinguished members of the Subcommittee. Thank you for the opportunity to discuss the Department of Veterans Affairs' (VA) efforts to expand the services VA provides to Veterans through telehealth. I am joined today by Bill James, Deputy Assistant Secretary for the Enterprise Program Management Office in the Office of Information Technology, and Tandi Nelson-Brooks, Facility Telehealth Coordinator, Pacific Islands Health Care System.

Introduction

VA Telehealth is a modern, Veteran- and family-centered health care delivery model. It leverages information and telecommunication technologies to connect Veterans with their clinicians and allied or ancillary health care professionals, irrespective of the location of the provider or Veteran. It bridges enhanced access and expertise across the geographic distance that would otherwise separate some Veterans, including those in rural areas, from the providers best able to serve them.

Telehealth is mission-critical to the future of VA care. Its potential to expand access and augment services is both vast and compelling. While telehealth is capable of enhancing the health care system in multiple ways, three are specifically essential for the successful operation of our national, integrated VA enterprise.

First, telehealth enhances the capacity of VA clinical services for Veterans in rural and underserved areas. This is accomplished by empowering VA to hire providers in major metropolitan areas, where there is a relative abundance of clinical services, for the purposes of serving Veterans in rural and even frontier communities where medical services may be insufficiently available.

Second, telehealth increases the accessibility of VA care. It brings VA provider services to locations most convenient for Veterans, including for those Veterans with mobility or other health challenges that make travel difficult. Through telehealth, Veterans are able to receive care in their community-based clinic and at home.

Third, telehealth increases quality of care. It enables VA to model its services so that national experts in rare or complex conditions can effectively care for Veterans with those conditions, regardless of the Veterans' location in the country.

VA is committed to increasing access to care for Veterans and has placed special emphasis on those in rural and remote locations. This means transitioning from older systems and a health care delivery model that has been in place for decades to a system that works for Veterans and is focused on contemporary practices in access. VA is empowering Veterans and their caregivers to be in control of their care and make interactions with the health care system a simple and exceptional experience.

VA is recognized as a world leader in the development and use of telehealth technology to ensure excellence in care delivery, and VA aspires to elevate and expand this impact in the coming years. In fiscal year (FY) 2016, of the more than 5.8 million Veterans who used VA care, approximately 12 percent received an element of their care through telehealth. This represented more than 702,000 Veterans, with 45 percent of those Veterans served living in rural areas. In total, this amounted to over 2.17 million telehealth episodes of care.

Brief Description of Telehealth Services

VA leverages three broad categories of telehealth to deliver services to Veterans in over 50 clinical specialties. The first, Clinical Video Telehealth, is defined as the use of real-time interactive video conferencing, with or without virtual examination tools (e.g., digital stethoscopes), to assess, treat, and provide care to Veterans remotely. Clinical Video Telehealth allows clinicians to engage Veterans via video at another medical center, a remote clinic, or in the comfort and convenience of the Veteran's home. It facilitates delivery of a variety of clinical services including primary care, mental health care, specialty care, and pre- and post-surgical care. To the Veteran, it means that instead of having the inconvenience of traveling by road, rail, or air to see a provider, service from their VA provider comes to them. Last FY, more than 307,000 Veterans accessed VA care through over 837,000 Clinical Video Telehealth encounters.

At present, 93 percent of VA's Clinical Video Telehealth occurs between VA facilities. VA Video Connect (VVC) represents the next step for Clinical Video Telehealth and is currently undergoing field testing. VVC provides fast, easy, encrypted, real-time access to VA care and can be used to connect VA providers to a Veteran's personal mobile device, smartphone, tablet, or computer. It allows for video health care visits, such as telemental health visits, where a hands-on physical examination is not required. It also makes it easier to provide services into a Veteran's home, literally putting access to VA health care in the Veteran's pocket. As a recent example, a 70 year-old Veteran was seen by VA Video Connect at home following hospitalization for a stroke that resulted in difficulty walking and compounded his challenges with transportation. VA Video Connect enabled a VA provider to promptly and remotely assess his functional status, his in-home mobility, and to help modify his fall risk from rug or chair placement.

The second broad category of telehealth is Home Telehealth. This is a technology-enabled monitoring program that allows a VA staff member to follow a

Veteran's care and health status on a daily basis through a VA-provided home-based device or service. Clinical data and information is collected securely via landline, cellular telephone network, or through the patient's own mobile device or home computer.

Using Home Telehealth technologies, the VA provider can monitor the Veteran's health status, provide clinical advice, and facilitate patient self-management as an adjunct to the Veteran's traditional in-person health care. The goal of VA's Home Telehealth program is to improve clinical outcomes and access to care while reducing complications, hospitalizations, and clinic or emergency room visits for Veterans who are at high risk due to a chronic disease, such as diabetes. This service can help Veterans continue to live independently and spend less time at medical visits. For example, a Veteran with hypertension might transmit his blood pressure values daily from home, and if they are elevated, a VA Home Telehealth nurse would be able to notify the VA Primary Care team, arrange for a change in medication dosage, and then continue home blood pressure monitoring until the goal blood pressure was reached – leading to more prompt care and better long-term outcomes for the enrolled Veteran.

Over 87,000 Veterans are using Home Telehealth services. VA has found that Veterans easily learn how to use their Home Telehealth devices and are highly satisfied with the service, reporting an 88 percent satisfaction rating in FY 2016. Home Telehealth services also make it possible for Veterans to become more actively involved in their medical care and more knowledgeable about their conditions, providing them the knowledge and skills needed to more effectively self-manage their own health care needs.

The third category of telehealth is Store-and-Forward Telehealth, which is the use of technologies to asynchronously acquire and store clinical information (such as data, image, sound, and video) that is then assessed by a provider at another location, at another time, for clinical evaluation. VA's national Store-and-Forward Telehealth programs deliver such services as dermatology and retinal screening, where a photo or series of photos can be effectively used for diagnosis or triage. Last FY, over 304,000 Veterans accessed VA care through more than 314,000 Store-and-Forward Telehealth encounters.

Examples of Telehealth Use

Mental Health

VA uses information technology and telecommunication modalities to augment care provided by its mental health clinicians to Veterans throughout the United States. VA has found telemental health care to be equally, if not more, effective than in-person appointments. From 2002 through 2016, more than 2.2 million telemental health visits have been provided to over 405,000 unique Veterans.

Telemental health increases the accessibility of VA mental health care by bringing critical health care services closer to the Veteran. It also increases the

capacity of VA to provide needed mental health care services in rural and remote areas by moving service supply from urban areas to rural and other underserved communities where there is system demand. In 2016 and 2017, in order to increase the capacity of VA mental health care in rural communities, VA initiated work on 10 telemental health clinic resource hubs.

VA Telemental Health also serves to bring highly specialized mental health care to patients who otherwise would have to travel great distances to receive such care. VA's National Telemental Health Center (NTMHC) provides Veterans throughout the country with access to the highest level of clinical experts using telemedicine. The NTMHC national experts (in affective, psychotic, anxiety, and substance use disorders) are currently located at the VA Boston Healthcare System, VA Connecticut Healthcare System, Philadelphia VA Medical Center (VAMC), and the Providence VAMC. The NTMHC has provided access and national expert consultation to over 5,000 Veterans for more than 18,500 encounters at over 120 sites throughout the Nation since its inception in 2010.

Primary Care

As part of its core access enhancement strategy, VA also initiated work on eight TelePrimary Care resource hubs in 2016 and 2017. Similar to the telemental health resource hubs, these centers leverage the provider recruitment capabilities in metropolitan areas to provide Veterans with core clinical services in areas where these providers and services are scarce.

VA TelePrimary Care leverages telehealth digital examination equipment along with staff at the Veteran's location to facilitate a remote physical examination. This service is part of a hybrid model in that providers still travel to designated facilities at regular intervals to offer in-person visits to the Veterans when needed. Further, the TelePrimary Care model is multidisciplinary, involving social workers, pharmacists, and mental health providers in addition to the primary care provider.

Rehabilitation

Rehabilitation providers leverage video teleconferencing to increase access to specialty rehabilitation care. From the beginning of the FY through mid-April 2017, close to 33,000 clinical episodes of care occurred using this modality, providing care to over 21,000 unique Veterans. Numerous specialty rehabilitation clinics are offered through telehealth, including clinics focused on amputation care, blind rehabilitation, physical therapy, speech therapy, and traumatic brain injury. Veterans with disabilities, especially in rural areas, benefit greatly from telerehabilitation. Many of these Veterans experience challenges that affect their ability to travel to receive needed care. Telerehabilitation increases access to specialty rehabilitation therapies, which assists in increasing functional gains and social reintegration.

Intensive Care Unit (ICU)

Tele-ICU is a telemedicine program that links ICUs in VAMCs to a central monitoring hub staffed with intensivist physicians and experienced critical care nurses.

Through the use of a camera mounted above each patient's ICU bed, as well as links into the medical record and vitals sign monitors, staff in the Tele-ICU hub not only see all of the pertinent medical data on a Veteran, but they are capable of performing audiovisual exams of the patient; discussing treatment plans with patients, nurses, and families; intervening during emergencies; and generally providing specialist-level care and consultation. The Tele-ICU staff supplement the existing staff physically present in the ICU with the Veteran, adding a layer of quality to existing services.

Store-and-Forward Retinal Imaging

Diabetes can cause problems with the blood vessels in the retina, especially if the condition is poorly controlled. A special camera takes pictures of the retina that are sent to an eye care specialist to review, and a report is returned to the patient's primary care physician who can provide the required treatment. This encounter does not replace a full eye exam, but does mean that those at risk of eye problems from diabetes can be assessed easily and conveniently in a local clinic.

Telesurgery

The diagnosis, coordination of care, and triage of surgical patients can be enhanced by the availability of telesurgical consultation. The use of telehealth can provide intra-operative consultation, patient and staff education, and pre- and post-operative assessment.

Barriers to Expansion

Telehealth removes key barriers that have traditionally separated providers and patients. However, there are several barriers that are still inhibiting the expansion of telehealth for the benefit of Veterans in VA care. VA providers delivering telehealth across state lines have no clear protection from the enforcement of state or local laws, rules, or regulations that otherwise limit the practice of telehealth. VA requests Congressional action to authorize VA providers to furnish care for Veterans using telehealth irrespective of these limitations. Such legislation would specifically invoke Federal supremacy and allow VA to expand the provision of care into Veterans' homes or on their mobile devices, regardless of the provider or patient's location, and leverage technology to create an ever more Veteran-centered experience. Additionally, such authority would reduce the need to lease or build Federal workspace for telehealth providers and would promote more rapid and cost-efficient expansion of services. It would also strengthen VA's ability to recruit the very best health care providers to furnish services to Veterans in locations where resources are limited.

Conclusion

While VA is currently a leader in telehealth, with the support of Congress, VA has the opportunity to shape the future of this critical strategy and ensure Veterans can access convenient, accessible, high-quality care, anywhere in the nation.

Mr. Chairman, this concludes my testimony. We appreciate your support and look forward to responding to any questions you may have.