

**Chairman Jerry Moran Opening Statement
Committee on Appropriations Subcommittee on Military Construction,
Veterans Affairs, and Related Agencies**

**Hearing titled “Telemedicine in the VA: Leveraging Technology to Increase Access,
Improve Health Outcomes & Lower Costs”**

May 4, 2017

(As prepared for delivery)

Welcome to our fourth subcommittee hearing of 2017. The Subcommittee will come to order. Good morning. Thank you all for being here today to discuss the benefits of telehealth for the Department of Veterans Affairs.

Telehealth at VA is a good news story. The Department is a leader in the field of telehealth, and telemedicine has influenced the private sector in positive ways over the past 20 years. We traditionally think of telehealth as a medical provider and patient service, but I am encouraged VA is using this platform to reduce the burden on veterans who drive 300 miles across Kansas, or fly to Oahu, to access VA services beyond healthcare.

Since 2011, the VA “TeleBenefits” program has connected veterans virtually with a claim specialist to assist with questions and submit claims with supporting documents. For about six months, TeleBenefits has been serving veterans who visit the Community Based Outpatient Clinic in Parsons, Kansas, which is the first site to offer TeleBenefits in our state. The VA outreach coordinator, Ms. Tara Cisneros, told the Parsons Sun, “Anything we can do to reach our rural veterans, that’s what I’m aiming for. I just want them to know this service is here.”

This subcommittee is committed to being a voice for veterans and those who serve them, and I share the same goals as Ms. Cisneros.

What our witnesses have to share today should be exciting and interesting. Yet, like most things related to technology, new ideas and platforms are created every day, and the Department should certainly be striving to be even more innovative, more expansive, more connected. I recently learned VA just awarded a \$258 million VA Home Telehealth contract in February to improve veteran access to quality, remote healthcare. This is new information, and I look forward to learning more about how VA intends to use this contract to improve access to care.

Our witnesses from the private sector have stories they will share today about how telehealth has saved significant money and time for health care facilities and patients, and how lives have improved because of direct in-home access providers have to patients through remote devices. Their findings could be extrapolated across the country with potentially great cost savings and cost avoidance.

Telehealth creates a bridge between our rural and urban centers – providers at an urban site can now diagnose and provide a care plan for veterans hundreds of miles away. VA is able to expand the resources of one facility by connecting those providers to providers in another area –

regardless of location. Through telehealth, the Department has the means and flexibility to provide care to veterans who do not have easy access to a VA hospital or access to a VA hospital staffed with the care they need. I look forward today to hearing VA's plan to increase such care in the places that need it most, and I want to hear from those in and outside of the Department about ways we, Congress, can support and further expand the use of this life-changing, and in some cases, life-saving care.

Our panel today has traveled great distances to be with us to discuss this important topic. Thank you all for being here.

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