STATEMENT OF
DR. STEVEN LIEBERMAN, ACTING DEPUTY UNDERSECRETARY FOR HEALTH
VETERANS HEALTH ADMINISTRATION (VHA)
DEPARTMENT OF VETERANS AFFAIRS (VA)
BEFORE THE
SUBCOMMITTEE ON MILITARY CONSTRUCTION,
VETERANS AFFAIRS, AND RELATED AGENCIES
COMMITTEE ON APPROPRIATIONS
UNITED STATES SENATE

"VA TELEHEALTH PROGRAM: LEVERAGING RECENT INVESTMENTS TO BUILD FUTURE CAPACITY"

APRIL 28, 2021

Good afternoon Chairman Heinrich, Senator Boozman and distinguished Members of the Subcommittee. I appreciate the opportunity to discuss VA's telehealth activities during the Coronavirus Disease 2019 (COVID-19) pandemic. I am accompanied today by Dr. Kevin Galpin, Executive Director, Telehealth Services, VHA, and Jack Galvin, Associate Deputy Assistant Secretary, Development, Security and Operations, Office of Information and Technology (OIT).

Introduction

VA strives to enhance the accessibility, capacity, quality and experience of VA health care through the implementation of virtual care technologies that are effectively integrated into the lives of VA staff and the Veterans they serve. During the unprecedented challenge of the COVID-19 pandemic, VA is proud of the dedication and resilience of our workforce who have remained steadfast with their commitment to provide excellence to the Veterans who entrust us with their care. For many years, virtual care has been a critical component of VA's health care delivery system, and this has never been a more important modality for care than during the pandemic.

VA has long been considered a national leader in telehealth, and expansion is an essential part of VA's strategy to increase Veteran access to health care. VA's early commitment to the innovative application of technology to engage patients remotely (e.g., through My Health***e***Vet—VA's personal health record; mobile and other connected applications; and an extensive and multi-faceted telehealth program) provided a solid foundation for an agile and effective response to the COVID-19 pandemic. The Department moved immediately to meet Veterans where they are and to ensure continued care delivery, including the increase of the telehealth capacity to unprecedented levels.

In response to the pandemic, VHA worked closely with OIT to address and stay ahead of the anticipated increase in demand for virtual care. OIT stabilized the existing environment by monitoring and addressing potential issues; enhanced the capability by improving telehealth visit performance and quality; and expanded access to telehealth by tripling the concurrent use capacity of VA's platform for clinical video telehealth known as VA Video Connect (VVC). VA achieved over a 1900% increase in video visits from VA to home, going from 10,645 visits the first week of March 2020 to 220,790 visits at the end of

February 2021. In May 2020, VA recorded its first day with 2 million minutes of VVC visits. Now that this system has expanded to our VA Commercial Cloud (commonly known as Care2 Cloud), the Department continues to scale capacity to meet the exponential increase in demand for telehealth appointments.

Another key example of technology directly supporting VA's clinical demands during the pandemic has been the expansion of VA's Tele Critical Care program, increasing Veteran virtual access to critical care specialists in intensive care units (ICU) across the system. Since the onset of the pandemic, VA has deployed 265 mobile Tele-Critical Care carts to 97 VA Medical Centers (VAMC). Along with the VAMCs that already had Tele-Critical Care technologies in place, every VA facility with Intensive Care beds is now capable of receiving virtual access to critical care specialists.

VA appreciates the support of Congress regarding telehealth, especially through the recent Coronavirus Aid, Relief and Economic Security Act and the American Rescue Plan Act, which provided the additional funding VA needed to invest in enhancing and expanding the systems and technology used to care for Veterans. Recent legislation such as Section 151 of the VA Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSION) Act of 2018, enables VA-employed health care professionals with an active, current, full and unrestricted license, registration, or certification in any state to care for Veterans regardless of where the health care professional or Veteran is located, if the covered health care professional is using telemedicine to provide treatment to the individual. The MISSION Act has been a pivotal advancement for this mode of care delivered to Veterans. These actions have provided significant benefit, addressing what had been barriers to the continued rapid expansion of telehealth.

Population Covered

VA leverages technology to augment care for Veterans within VA health care facilities, in Veterans' homes and anywhere there is access to an internet-connected computer, mobile phone, or tablet. VA's connected care footprint was significant prior to the COVID-19 pandemic and has grown even more remarkably since the onset of the pandemic.

VA's online patient portal, My Health*e*Vet, is accessible through VA's modernized web presence at www.VA.gov and had over 5.5 million registered users at the conclusion of fiscal year (FY) 2020, as compared to 5.1 million users in FY 2019. This represents 8% growth. VA's video telehealth program was utilized by more than 1.3 million Veterans in FY 2020, a growth of more than 175% over FY 2019. Telehealth services are available at over a thousand VA sites of care, and care is delivered through video telehealth in more than 50 specialties: including mental health care, primary care, specialty care and rehabilitation services.

Type of Services Provided

Telehealth can enhance the Veteran experience and the delivery of health care for Veterans in their homes and communities; at VA clinics; and as they access hospital-based

and emergency services.

For Veterans at home, telehealth capabilities can help Veterans better manage their own health and enhance access to VA health care services irrespective of a Veteran's location in the country. Examples of VA's expansion in this type of Veteran engagement include delivery of care remotely through video visits through the VVC application; connecting with Veterans in their communities through the Accessing Telehealth Through Local Area Stations (ATLAS) initiative; supporting Veterans with chronic conditions through the Remote Patient Monitoring-Home Telehealth Program; and providing Veterans with the technology they need to connect with VA through the Veteran tablet loaner initiative. VA also continues to leverage web-based and mobile tools like My HealtheVet and VA's mobile applications to support Veterans as they self-manage their own health at home. Through these efforts, Veterans and their caregivers can access the information they need to help manage their health and can access their providers, mental health specialists, nurses and other health care professionals using real time video or asynchronous communication from their homes or home communities. Veterans can also receive remote health care monitoring and care coordination services, and tailored education about their chronic conditions.

VA continues its expansion of clinic-based telehealth services. Initiatives in this category enable VA to provide more accessible services at clinic locations, build clinical capacity in underserved areas and connect Veterans with the right clinical expert for their personal circumstance and condition. In addition, clinics are often the location where Veterans learn about services available to them from home. Examples of expansion in the clinic-based telehealth include the growth of regional clinical resource hubs for primary care, mental health and specialty care. The Clinical Resource Hubs (CRH) are Veterans Integrated Services Network (VISN) level resources that provide Primary Care, Mental Health, and specialty services to Veterans in underserved areas and sites that are experiencing staffing gaps. These sites that receive CRH services are often referred to as spoke sites. Other examples of expansion include the development and expansion of targeted specialty telehealth initiatives such as tele-dermatology, tele-sleep medicine, and tele-oncology and the expansion of a national expert consultation center model.

VA is also enhancing the quality of hospital and emergency services through the adoption of telehealth technologies. Technology can help provide Veterans timely access to the health care professional services they need in acute care and emergency situations, even when the specialty provider is not immediately available locally. Examples of this type of care include programs such as Tele-Stroke, which ensures Veterans presenting to participating VA emergency rooms with symptoms suggestive of a stroke can receive an urgent neurology assessment by a remote stroke specialist who can provide evidence-based recommendations for treatment to the in-person team. Another example is VA's Tele-Critical Care program, which ensures critically ill Veterans in VA ICUs have real time access to board certified intensivists and to experienced critical care nurses. A further example is the telehealth emergency management program, which provides remote clinical services following a declared emergency (e.g. hurricane, natural disaster, pandemic). During the COVID-19 pandemic, both tele-critical care and telehealth emergency management have been an important part of VA's response.

Finally, in support of the expansion of telehealth in all settings (home, clinic, hospital), VA is investing in the necessary technology and supporting infrastructure as a foundation for these services. This investment includes the development and maintenance of mobile health and telehealth applications that are used by VA staff and Veterans alike to support care delivery at a distance, as well as VA's My Health*e*Vet patient portal. Other key investments include necessary training, implementation support, program office staffing, equipment maintenance and modernization, communications, evaluation/research, and provider and Veteran-facing help desk support.

VA Video Connect

VVC is VA's video telehealth platform that allows Veterans, their families and caregivers to meet virtually with their VA care teams on any computer, tablet, or mobile device with an internet connection and web camera. VVC is one of the largest and most successful digital health platforms in the Nation and helps VA provide close to 30,000 virtual appointments to Veterans at home each day. Daily video visits to home or other locations that the Veteran chooses have increased from around 2,000 a day since February 2020 to more than 47,500 a day in mid-February 2021. This rapid increase in video appointments was necessary to maintain safe clinical services in the setting of the COVID-19 pandemic and was made possible by the expansion and reengineering of select portions of VA's information technology infrastructure, as well as by rapid adoption of VVC by VA health care professionals.

To further increase Veteran connectedness, VA is taking strides to bridge the digital divide for Veterans who lack the technology or broadband internet connectivity required to participate in VA telehealth. More than 99,000 cellular-enabled tablets and 20,000 cellular phones have been distributed to Veterans to help them connect to their VA services. Additionally, major wireless carriers such as Verizon, T-Mobile, SafeLink by Tracfone and AT&T have partnered with VA to support Veterans' access to VA telehealth services through the Zero Rating program, allowing Veterans, their families and caregivers to use VA Video Connect without incurring data fees, with some limitations, while on their networks.

Further, VA has implemented a national digital divide consult through which VA social workers assist qualifying Veterans apply for federal subsidies for their needed technology.

Specific Connected Care/Telehealth COVID-19 Efforts

In an effort to expand video-to-the-home services for all Veterans, VA has used remote patient monitoring services to help monitor higher risk Veterans who need to be isolated or quarantined at home. Additionally, VA has leveraged video telehealth on inpatient hospital wards to enhance infection control among Veterans in isolation rooms; supported increased utilization of VA's online capabilities on VA.gov and My Health*e*Vet; and launched specific text-messaging interventions to support Veterans who are concerned about COVID-19 and those who are isolating at home after possible exposure.

In addition, VA has extended the use of video telehealth in intensive care units to provide remote intensive care consultation at sites that may have limited or overwhelmed

intensive care specialty resources; and focused efforts of the Office of Veterans Access to Care and Office of Connected Care on maximizing telehealth into Specialty Care Services at health care facilities to improve capacity and productivity moving forward.

Recent Trends

Health care is increasingly becoming consumer and technology driven. VA must continue to provide Veterans access to a modern technology-enhanced health care system. These efforts must include continued advancement of internet-enabled virtual care and telehealth technologies; integration of advanced analytics into these products; and incorporation of these solutions into VA's new electronic health record platform.
VA continues to see high levels of Veteran engagement with connected technologies and anticipates continued acceleration of the use of these technologies, integrated into routine care delivery, as we lead the way forward following the COVID-19 pandemic.

The VA patient portal, My HealtheVet, leads the industry in customer satisfaction scores and in the percentages of patients who use the portal. And, it has seen consistently increasing utilization, with a dramatic incline since the beginning of the COVID-19 pandemic. On the portal, VA processed over 12 million prescription refill requests and managed over 15 million secure messages between Veterans and their health care teams from October 2020 to March 2021. In the context of the COVID-19 pandemic, compared to the same period in FY 2020, this represents an approximately 10% increase in prescription refill requests and a 51% increase in secure messages initiated by VA patients and their health care teams.

Utilization of video telehealth services had also been increasing at a rapid rate prior to the pandemic and shifted to exponential growth during the pandemic. The use of VA telehealth services overall in FY 2019 increased more than 14% over FY 2018. The recently established Clinical Resource Hub Program, which currently provides primary care and mental health care, is adding specialty care to support underserved locations as yet another example of expansion. Statistics from the program's early success show that tele-mental health hubs served 257 spoke sites and provided over 174,000 visits to more than 39,000 Veterans. Additionally, video to the home or a non-VA location had also been increasing prior to the pandemic, with more than 99,000 Veterans engaging in a video health care session at home or at another offsite location in FY 2019. This represents a 246% growth over the prior year.

Conclusion

Caring for veterans is our mission. We are committed to providing high-quality health care to all Veterans in our care, especially during these unprecedented times. VA is grateful for your continued support, as it is essential to providing this care for Veterans and their families.