

**STATEMENT OF
DR. KAMERON MATTHEWS
ASSISTANT UNDER SECRETARY FOR HEALTH FOR COMMUNITY CARE
VETERANS HEALTH ADMINISTRATION (VHA)
DEPARTMENT OF VETERANS AFFAIRS (VA)
SENATE COMMITTEE ON VETERANS' AFFAIRS
VA TELEHEALTH DURING AND BEYOND COVID-19: CHALLENGES AND
OPPORTUNITIES IN RURAL AMERICA**

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Good Morning Chairman Moran, Ranking member Tester and distinguished Members of the committee. I appreciate the opportunity to discuss VA's telehealth activities during the coronavirus (COVID-19) pandemic. I am accompanied today by Dr. Kevin Galpin, Executive Director, Telehealth Services, Office of Connected Care; Dr. Thomas Klobucar, Executive Director, Office of Rural Health, VHA; and Mr. Eddie Pool, Executive Director, Office of Information and Technology (OIT).

Introduction

VA aims 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.

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 eVet - 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 by increasing 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 has seen over a 1,200% increase in video visits from home going from 10,645 visits the first week of March to 139,854 visits the first full week of July. In May, 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. A key example of technology directly

supporting VA's business aim is the expansion of tele-intensive care unit (ICU) care, increasing virtual access to critical care specialists. Since onset of the pandemic, VA has deployed 244 tele-ICU carts across 91 VA Medical Centers. Along with the medical centers that already had tele-ICU technology, every VA facility with ICU beds is now equipped with 24/7 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, which provided the supplemental 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, which authorized the practice of telemedicine by VA health care providers in any state regardless of the location of the provider or the Veteran, has also been pivotal to advance this mode of care delivery for Veterans. These actions have provided significant benefit, addressing what had been barriers to the continued rapid expansion of telehealth.

Population Covered

Telehealth capability is available to Veterans enrolled in VA health care. 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 telehealth reach was significant prior to the COVID-19 pandemic. VA's online patient portal, My HealtheVet, is accessible through VA's modernized web presence at www.VA.gov and had over 5 million registered users at the conclusion of 2019. VA's video telehealth program was utilized by more than 900,000 Veterans in 2019, 44% of whom lived in rural areas. Telehealth services are available at over a thousand VA sites of care, and care is delivered through video telehealth in more than fifty specialties that includes 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 the accessibility of 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 Advancing Telehealth Through Local Access Stations 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 Health eVet and VA's mobile apps 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 services, coordination of care, and tailored education about their chronic conditions.

VA is also continuing 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 at 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 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 can receive an urgent neurology assessment by a remote stroke specialist, who can provide evidence-based recommendations for stroke treatment to the in-person team. Another example is VA's tele-ICU (Intensive Care Unit) or tele-critical care program, which ensures critically ill Veterans in VA ICUs have urgent access to board certified intensivists and to experienced critical care nurses. One more example is the Telehealth Emergency Management Program, which provides remote clinical services following a declared emergency or disaster (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 eVet 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

VA Video Connect 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. VA Video Connect 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. Week-over-week telehealth video appointments to homes have increased by more than 1,200% since February 2020, increasing from approximately 10,700 appointments a week in early February to nearly 140,000 appointments a week in July. 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 VA Video Connect 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 45,000 cellular-enabled tablets are currently distributed to Veterans across the country; and major wireless carriers such as Verizon, T-Mobile, SafeLink by Tracfone, and Sprint have partnered with VA to support Veterans' access to VA telehealth services. Further, VA is implementing a national digital divide consult. This consult will be used when Veterans could benefit from telehealth technologies but are identified as lacking access to a device or internet connection necessary to participate. Through this consult, VA intends to help Veterans leverage benefits available through VA, other Federal agencies, and the private sector to access what they need to connect remotely with VA services.

Specific Connected Care / Telehealth COVID-19 efforts

In an effort to expand video-to-the-home services for all Veterans, VA has engaged in the following: participated in webinar and social media outreach efforts; expanded telehealth capabilities to Veterans residing in community living centers and State Veterans Homes; used remote patient monitoring services to help monitor higher risk Veterans who need to be isolated or quarantined at home; 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 eVet; launched specific text-messaging interventions to support Veterans who are concerned about COVID-19 and those who are isolating at home after possible exposure; extended the use of video telehealth in intensive care units to provide remote intensive care consultation at sites that may have limited 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 our 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 Health eVet, leads the industry in customer satisfaction scores and in the percentages of patients who use the portal, has seen consistently increasing utilization, with a dramatic incline since the beginning of the COVID-19 pandemic. On the portal, VA processed over 9.37 million prescription refill requests and managed over 9.5 million secure messages between Veterans and their health care teams from January to May 2020. In the context of the COVID-19 pandemic, compared to the same period in 2019, this represents approximately 770,000 additional prescription refill requests and more than 2.11 million additional secure messages initiated by VA patients and their health care team.

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 2019 increased more than 14% over 2018. The recently established Clinical Resource Hub Program, which currently provides primary care, mental health care, and is adding specialty care to support underserved locations is yet another example of expansion. Statistics from the program's early success shows that tele-mental health hubs served 257 spoke sites providing 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 2019. This represents a 246% growth over the prior year.

Support to Rural and Tribal Veterans

In support of the fourth mission, VA offered guidance and support for providers across the Nation to manage the COVID-19 public health emergency, particularly rural providers. VA developed a website specifically for these providers that included information on strong clinic practices and training for clinical staff and information for community providers who served Veterans. In addition, VA provided direct clinical support to Tribal Health Programs through the fourth mission.

VA has continued work in conjunction with Tribal representatives and the Indian Health Service to develop standardized processes for care coordination to ensure that Veterans who require care among the various health care systems receive one coordinated approach in getting the services they need in the environment they choose. VA is planning a tribal consultation on this plan later in the summer and then will work closely with the Tribal representatives to deploy the approved plan.

Approximately 8,000 Veterans received Compensated Work Therapy (CWT) services in June 2020, in comparison to 15,000 Veterans in June 2019. CWT Transitional Work was affected by restrictions imposed on outpatient services in many medical facilities; as outpatient services in medical facilities reopen, CWT participation rates are projected to return to and exceed previous levels of participation.

Conclusion

Veterans' care 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. This concludes my testimony. My colleagues and I are prepared to respond to any questions you may have.