

STATEMENT OF

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FOR THE RECORD

SENATE COMMITTEE ON VETERAN'S AFFAIRS

WITH RESPECT TO

"VA MISSION Act: Assessing Progress Implementing Title I"

October 21, 2020

Chairman Moran and members of the Committee, on behalf of the Kansas Hospital Association and our member hospitals, it is a pleasure to submit a statement for the record for a Senate Committee on Veterans' Affairs hearing entitled "VA MISSION Act: Assessing Progress Implementing Title I". The Kansas Hospital Association is a voluntary, non-profit organization existing to be the leading advocate and resource for members. KHA membership includes 217 member facilities, of which 122 are full-service, community hospitals. Founded in 1910, KHA's vision is Optimal Health for Kansas.

First and foremost, KHA would like to thank the Committee for their leadership in restructuring the Veteran's Administration program to link community providers with Veterans to ensure the delivery of more timely and high-quality health care in their local communities by creating the VA Community Care Network. When fully transitioned, the VA CCN will modernize the health care delivery system by allowing Veterans more choices for care while at the same time streamlining and developing updated electronic capabilities for health care providers to provide care, bill and receive payment more timely manner.

The focus around my statement will be concerning the educational opportunities and the collaboration efforts that KHA lead for our membership surrounding this transition. Understanding the complexity of this transition, KHA early on took an active role in working with Senator Moran's office, the VA, TriWest, and UnitedHealthcare/Optum to ensure our membership had the opportunity to develop the knowledge and resources needed for the magnitude of this change. While the volume of Veteran patients and the number of hospital staff resources vary widely among our members, the commitment to provide quality health care at the local level for our Veterans does not.

In April of 2019, Dr. Mark Upton, Deputy Assistant Under Secretary for Health for Community Care, Veterans Health Administration, traveled to Wichita, Kansas, to provide an overview of the transition to the VA CCN to a group of our hospital chief financial officers and patient account managers. From that point on, Dr. Upton took the time to work with KHA and groups of our members to understand

the current challenges of the VA program and to request input on what was needed to ensure a successful transition. In March of 2020, Dr. Upton worked with his staff to create an in-person event at two of our local VA Hospitals for the roll out of the VA CCN in Kansas and Missouri. That event was to provide an opportunity for our local healthcare providers to receive timely information regarding the VA CCN and included representatives from not only the VA, but also TriWest and UHC/Optum. The event had to be cancelled due to COVID-19, however, KHA worked these partners to provide a virtual update to our membership in April. At KHA's invitation, Dr. Upton arranged for staff from the VA Office of Community Care to provide a virtual meeting with the American Hospital Association's Allied Accounting and Financial Specialist Group in October, to ensure other State Hospital Associations received the necessary connections to assist their membership in the transition. Furthermore, since we first met in April of 2019, Dr. Upton has taken time to reach out to me to periodically "check in" to see if there were any concerns among our membership.

We have provided our membership with additional opportunities to develop relationships with local VA representatives, TriWest and UHC/Optum through in-person meetings as well as virtual meetings. The responsiveness and collaboration among these three agencies to develop joint educational programs for our membership to provide a better level of understanding of the current and upcoming changes regarding the VA CCN program has been commendable and well received. At any point, I know that KHA and our members have points of contact that can assist with concerns.

As with any transition of this magnitude, there have been challenges. Some of our members have reported concerns in understanding the complexity of the new referral process, with contracting and credentialing, as well with the transition from TriWest to VA CCN. Our members, many of which are very small and rural hospitals, are challenged with limited staff that also must keep up with the changes for many other payers (i.e., Medicare, Blue Cross, Workers Compensation, Medicare Advantage, etc.), which adds to the stress and time restraints needed to fully understand the changes of the VA CCN. In addition, COVID-19 has consumed many resources in all areas of our hospitals, taking priority over many other activities. However, due to the partnerships developed and the willingness on many fronts to work together to make the VA CCN successful, we are hopeful the challenges can be overcome.

There has been much progress made in the past year: electronic resources for education, treatment authorization, and billing; streamlining of processes; and on-line tools and resources to aid the Veterans and the healthcare providers. Some recent comments received from our members include:

- The Veterans need more education regarding their benefits. The Veteran is not issued an "insurance card" or other means of identity to assist them in a better understanding of which program is covering their service. Without proper and consistent education to the Veteran, the responsibility falls on the healthcare providers which places further time restraints on their ability to care for patients.
- Access to the VA Portals. There have been some recent challenges with the VA portals being down, which limits the provider's ability to check eligibility, claim status and authorization.

Our Kansas hospitals want to provide the needed medical care for our Veterans. With the transition to the VA CCN we now have the privilege to "serve" the Veterans at our local hospitals and clinics.