# STATEMENT OF RICHARD A. STONE, M.D., ACTING UNDER SECRETARY FOR HEALTH VETERANS HEALTH ADMINISTRATION DEPARTMENT OF VETERANS AFFAIRS BEFORE THE

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

## February 19, 2021

Good afternoon Madam Chair, Ranking Member Carter and members of the subcommittee. I am pleased to be here today to discuss the Department of Veterans Affairs' (VA) response to the Coronavirus Disease 2019 (COVID-19), the pandemic's effects on delivery of Veterans' health care and how we have successfully launched the vaccination process for our Veterans and employees. I am accompanied by Dr. Kameron Matthews, Assistant Under Secretary for Clinical Service.

Before discussing the actions taken during this pandemic, I would like to take this opportunity to thank you for the support of Congress, in particular the \$19.6 billion you provided through the Coronavirus Aid, Relief and Economic Security (CARES) Act. Without this support, we would not have successfully put into action all the necessary arrangements to assist our Veterans. I also want to acknowledge the 9,366 Veterans we lost to this disease – each one of those losses is a tragedy for their families and the Veteran community. We are also saddened that 130 VA employees have lost their lives as a result of COVID-19. These included front line health care workers, information technology staff and facility support staff. In addition, I want to thank our VA health care staff who continue to show up to fight this battle every day and who have helped keep our Nation's Veterans and their communities safer.

### **Veterans Health Administration Operations**

The Veterans Health Administration (VHA) is proud to be leading the response to the COVID-19 pandemic alongside our Federal partners. Once it became evident COVID-19 was not contained in the U.S. and was spreading widely, the national response required greater focus on meeting the health care demand. VHA's response to COVID-19 demonstrated the strength and agility of an integrated health care system geographically distributed across the U.S. and operating as a single enterprise. Building on this strength, VHA has played a leading role in the national response, a role significantly enhanced by the improvements to our readiness capabilities made possible by the CARES Act funding. The resources and hiring flexibility you provided us enabled VHA to hire 55,000 clinical and administrative staff across the health care system to ensure stability and continued delivery of care.

The CARES Act resources provided for Veterans' COVID-19-related health care in VA medical facilities as well as in the community. The funding supported all levels of

our COVID-19 response, from procurement of test kits and specialized equipment, to the overtime and travel costs for our staff rotating into hot zones. With additional support for our emergency management response, VA added over 2,500 medical/surgical and Intensive Care Unit beds. As COVID-19 incidences varied by jurisdiction, and despite global shortages of personal protective equipment (PPE), critical equipment and consumable items, VHA was able to sustain operations in locations experiencing high demand by cross-leveling staff, PPE and ventilators from areas with low levels of disease. COVID-19 has shown the Nation VA's capabilities.

VA's agility in adjusting to emergent pandemic conditions is further exemplified by our success in expanding access to and use of telehealth. These capabilities proved an essential – and popular - tool to maintaining Veterans' health during quarantine. Between February and December 2020, Clinical Video Telehealth or Video to Home telehealth visits for primary care grew nearly 885%.

The CARES Act funding also proved essential to addressing the unique economic and health care needs of Veterans who are homeless or at risk of becoming homeless. VA allocated \$971 million in CARES Act funding to provide emergency housing, including in hotels, and homelessness prevention assistance to mitigate the expected wave of evictions and potential homelessness that would result from extensive unemployment. Over 23,000 hotel/motel placements occurred From March 2020 through January 2021, to reduce risk of COVID-19 exposure for vulnerable Veterans.

Additionally, CARES Act funding enabled VA to waive per diem rate limits in the Grant Per-Diem program during the crisis. This empowered grantees to provide needed emergency housing and supportive services for Veterans who need to be isolated for their safety or the safety of others. During fiscal year (FY) 2020, VA approved 450 per diem rate increase requests tied to 9,200 transitional housing beds and 7 service centers. An additional capital grant funding opportunity will allow existing grantees to develop individualized housing settings to more safely serve homeless Veterans in transitional housing. VA also purchased disposable smartphones with unlimited data plans to ensure that Veterans in VA homeless programs remain connected with caregivers and support and could access telehealth. As of February 2021, 28,101 phones have been disseminated to VA medical centers for distribution to homeless Veterans.

#### **Fourth Mission**

To date, VA has accepted 124 mission assignments from the Federal Emergency Management Agency (FEMA) to protect Veterans and non-Veterans alike in 47 states, the District of Columbia, Puerto Rico and Tribal governments. Additionally, VA has entered into eight Interagency Agreements for Indian Health Service, Navajo Nation and Hopi Tribe support. VA deployed over 2,000 staff members to non-VA facilities to share our successful strategies to keep patients safe. VA shared medical equipment with health care facilities that were stressed and took nearly 500 non-Veteran patients into VA facilities. We protected our most vulnerable Veterans providing support to over

1,100 State Veterans Homes and 980 community nursing homes. VHA entered 2020 with considerable experience deploying personnel in support of state requests to FEMA, largely through our past cooperation addressing hurricanes and other natural disasters. During VHA's response to the COVID-19 pandemic; however, VA's role in mission assignments grew to an unprecedented scale and scope. VA has supported these mission assignments with direct patient clinical care, testing, education and training. The assignments vary in skill sets, geographic locations and length of time for the support as we work collaboratively with FEMA and the states and territories to meet emergent needs.

#### **VA COVID-19 Vaccine**

Before the vaccine became available, VA put together a team composed of key departments within VHA: National Center for Health Promotion & Disease Prevention, Office of Healthcare Transformation, as well as Ethics and Logistics, to name a few. Roughly 200 people were involved in COVID-19 vaccine response planning. As a result of this extraordinary team and their hard work, we have successfully administered over one million doses to Veterans, employees, and other recipients.

In just six weeks, VA has vaccinated well over 80% of our frontline health care team with at least one dose. In total, VHA has administered over 1.3 million doses to just over one million Veterans; 474,000 doses to VA employees; and over 8,900 doses to other Federal agency partners, mostly the Department of Homeland Security. These numbers will continue to grow over the next few weeks. VA is currently providing vaccines at more than 215 sites nationally, with plans to expand to additional sites as the vaccine supply increases.

VA received an increase of about 16,000 doses per week and recently received an additional 200,000 doses that have been distributed as well. We anticipate using all of those as they arrive, and our current vaccination plan has the capacity for delivering between 300,000 and 600,000 doses each week, so we are built for and ready to accommodate and deliver larger quantities when they are manufactured.

#### **VHA Path Forward**

Our Moving Forward Plan Key Principles include High Reliability Organization (HRO) principles and values; prioritizing, expanding and maximizing virtual care; gradually expanding capacity by assessing the environment of care and ensuring safety; and Veteran-centric patient flow with physical distancing. As an HRO, VA prioritizes the safety of our Veterans and staff, and their safety will continue to guide our decision-making. Before any clinical care is delivered, safe infrastructure and support must be in place. VA will continue to maximize virtual care options to promote physical distancing and provide increased access to care regardless of geographic location. These services have been a valuable link between Veterans and providers during this challenging time and will continue to provide Veterans with high-quality care from the safety and convenience of their homes. VA will further optimize virtual modalities of delivery for

specialty care and surgical services, when clinically appropriate, and when care is not required face-to-face.

# **Future Requirements**

VA is on track to fully execute the remaining CARES Act funding of \$10.9 billion in coming months. VA carefully planned its CARES Act spending to ensure that funds would sustain operation through September 30, 2021, when the funding expires. However, the rapidly changing nature of the pandemic response has highlighted the need for additional funding. The resources included in the American Rescue Plan will sustain the VA COVID-19 response beyond the expiration of the CARES Act funding into FY 2022.

#### Conclusion

VA is committed to providing high-quality benefits delivery and health care to all Veterans during these unprecedented times. VA continues to monitor conditions to determine the safest and most beneficial actions that we can take to protect both Veterans and our employees while continuing to provide the health care, benefits and services during this pandemic. Your continued support is essential to VA fulfilling this mission.