Written Testimony of Lt. Gen. Patricia D. Horoho, USA, Retired Chief Executive Officer, OptumServe

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Introduction

Chairman Pappas, Chairwoman Brownley, Ranking Members Bergman, and Dr. Dunn, members of the Subcommittees, I am Patty Horoho, Chief Executive Officer of OptumServe, and I am honored to be here today to provide an update on our operations in connection to the implementation of the U.S. Department of Veterans Affairs (VA) Community Care Network in Regions 1, 2, and 3.

On behalf of the more than 325,000 men and women of UnitedHealth Group who work every day to help people live healthier lives and to make the health system work better for everyone, thank you for the opportunity to discuss our partnership with the VA, Veterans and their families, providers, and each of you to ensure that our Nation's Veterans have timely access to the best care available, whether inside the VA health care system or in their local community. Together, we are committed to serve those who have served this great Nation.

In short, Optum is on track with our phased implementation plan:

- Thousands of Veterans are actively utilizing our high quality and broad Community Care Network;
- Providers are promptly getting paid for the care they deliver to Veterans;
- Our customer service channels are quickly answering questions from VA Staff and community providers; and
- Using data and utilization patterns, we are continuously building and adapting our network and operations to meet the needs of Veterans and the VA.

Who We Serve: Our Deep Partnership with Veterans and Federal Agencies

I was pleased to join Chairwoman Brownley, Dr. Dunn, and Members of the House Veterans Affairs Subcommittee on Health last fall to update them on our progress in serving our Nation's heroes through the Community Care Network. We appreciate the opportunities we have had to spend time with many Members of Congress and their staffs as part of our implementation of this important effort, and to introduce or reintroduce them to our organization.

OptumServe is the Federal health services business of UnitedHealth Group. We bring together the unique capabilities of the entire Company with broad and deep experience in health care services, technology, data analytics, and consulting. We partner with the

U.S. Departments of Veterans Affairs, Defense, Health and Human Services, and other Agencies to help modernize the U.S. health system, and improve the health and well-being of those they serve.

OptumServe is honored to support health programs that touch virtually every point in a military service member's or Veteran's journey. It starts when an American son or daughter raises their right hand to take the oath, to ensuring a reservist is medically ready for deployment, to a disability exam when a service member transitions from active duty to Veteran status, and, now, to the Veteran receiving care through the VA from a community provider.

Our leadership team at OptumServe is comprised of Veterans from every branch of service, and 50% of our Community Care program office staff are Veterans.

Optum's Role in the VA Community Care Network

Optum is proud to serve as the third-party administrator (TPA) for the VA Community Care Network in Regions 1, 2, and 3, which includes 36 States, the District of Columbia, the U.S. Virgin Islands, and Puerto Rico.



VA Community Care Network Regions Where Optum is the TPA

Under these contracts, Optum is responsible for:

Community care network of providers. Optum is leveraging its broad network
and relationships across UnitedHealth Group, and beyond, to provide a robust
provider network representing the full breadth of health and wellness services for
the VA. We build upon this foundation by contracting with preferred providers
requested by our partners within the VA as well as providers who reach out to us
directly informing us of their desire to serve the Veteran population.

- Claims processing. Optum is responsible for promptly processing claims from providers who care for Veterans as part of the VA Community Care Network. This function is critical to ensuring we sustain the high quality provider network we are building.
- Call center for VA staff and providers. VA staff and providers can contact the Optum call center to get questions answered about authorizations, claims, and other issues.
- A portal for providers, VA staff and Veterans. Optum operates an online portal
 where users can find additional resources including claims, explanation of
 benefits (EOBs), and referral information. Individuals can access the portal at
 www.vacommunitycare.com. Our portal is uniquely built for our users' needs,
 outlined in the chart below:

Portal Features	Veterans	Providers	VA Staff
View Eligibility/Enrollment	~	~	
View Referrals	~	-	
View EOBs	~		
List of in-network pharmacies	~	~	~
Access provider training/resource guides, deployment schedules		~	
Access claim information	-		
Submit claims	[~	
Ability to Assist Veterans	[

Community Care Experience Teams. These Optum teams provide on-the-ground support and resources to VA Medical Centers and staff. One team is aligned to each region, and each team has a team leader, a nurse, a business analyst, and one Veteran Experience Officer (VEO) assigned to each Veteran Integrated Service Network (VISN) within the region. While not a requirement, these teams allow Optum to remain better connected with local VISN and VAMC leadership, and each of the VAMC community care offices in order to better meet the needs of the VA at the local level.

Early on, we recognized the need to incorporate the voice of the Veteran to ensure we were well-positioned to meet their needs.

We have spent considerable time with our VA partners and within Optum to better understand the processes and potential areas of the Veteran experience that could be improved. Through a process that identifies each step of the Veteran's experience (called journey mapping), we gained valuable insights into the process of getting care, and how the process could work better for Veterans, VA staff, and community providers.

As part of this effort, one year before we were awarded these contracts, we conducted one-on-one interviews with 125 Veterans in their homes and places of work across five States, and completed a national survey of 5,500 Veterans, representative of the Veteran population. This enabled us to gain a deeper understanding of the experience and mindset of Veterans, and how Veteran status impacts health and health-seeking behaviors.

We have used these insights to prioritize and take action. This is critically important because the experience a Veteran has while seeking and receiving care is often perceived to be as important as the quality of the care they receive. From the very first contact, the experience of care has to be positive, both for our Veterans and for providers.

Performance to Date: Meeting & Exceeding Our Commitments

Optum is on track with our phased implementation plan.

We completed the initial roll-out of Region 1 on December 10, 2019, and today we are currently operating the Community Care Network and billing operations in areas across all three regions. We are on schedule to achieve full health care delivery in all regions by June 2020.¹

At every stage of our year-long implementation, we have dedicated staff either on the ground, virtually or both, to train and assist VA Medical Center staff as questions arise. We also use a command center approach in close collaboration with the VA to monitor the progress of each deployment.

The command center allows Optum and the VA to jointly ensure consistent and frequent communication with the VAMC sites to manage issues, and provide continued education and feedback to ensure the system tools and provider network are performing as intended, often making necessary adjustments in real time.

The transition for each area to Optum as the TPA is deliberate and collaborative, with open lines of communication from the leadership level to local VAMC employees:

- Deployment preparation consists of twice monthly meetings with the VA Office of Community Care and the transitioning sites to ensure site-level and Optum provider network readiness. This includes reviewing detailed maps and analysis down to the county and zip code level, consulting with historical referral data and past volume to identify future network needs;
- Approximately 45 days prior to a go-live date, we have initial planning meetings with VAMC leadership. The network is reviewed again and validated, and issues or gaps in network are discussed;

¹ A full deployment schedule can be found on <u>Optum's Community Care Network portal</u> at <u>www.vacommunitycare.com</u>.

- Approximately 14 days from the go-live date, our advance teams increase the intensity of training and communications. Network progress is reviewed with VA;
- During the go-live week, we host a joint command center in partnership with the VA that monitors progress in real time, and we also provide site-level support teams consisting of both Optum and VA staff at the local level. We provide additional coaching and retraining of VA staff on handling referrals as needed; and
- At the end of the go-live week, we provide formal exit briefs for each of the VISNs and then provide ongoing supplemental support, including frequent touchpoints with the sites, to ensure each VAMC is able to successfully transition to CCN and operate independently.

But our work doesn't stop after Optum fully deploys in an area or region. Working with local VA staff and providers, we continue to adjust operations, and refine and add providers to the network.

With this, I would highlight a few specific areas of our transition to date:

■ Building a High-Quality Provider Network

Central to the Community Care Network is a robust network of quality credentialed health care providers from which VA medical staff and Veterans are able to choose.

Our approach to building the Community Care Network is twofold: We begin by leveraging the 1.3 million providers in the national UnitedHealthcare and Optum networks. And, we also recruit those community providers who have a history of working closely with VA Medical Centers and Veterans in order to give these providers an opportunity to continue to care for Veterans in their community by joining our new network. We are committed to including qualified providers in our network who want to see Veterans.

Our on-boarding process for providers helps to ensure that VA CCN providers are both competent and qualified to provide the services within their practice specialty, which is a new requirement under the Community Care Network. For the first time in VA Community Care, all providers in the Community Care Network are now credentialed in accordance with nationally recognized standards set forth by the National Committee for Quality Assurance (NCQA), or the appropriate accrediting body, or credentialed consistent with Federal or State regulations. We also obtain primary-source verification of the provider's education, board certification, license, professional background, malpractice history, and other pertinent data.

In Region 1 where we have recently completed the transition, Optum has built a network that includes 178,000 health systems and providers² across 309,000 care sites.³

We recognize that network management is a dynamic process and networks evolve over time – as they routinely do in health care markets outside of those served by Government. When we complete a transition, our work continues. We continuously refine and build the network to meet the needs of the VA and Veterans. We add providers based on utilization, data, analytics, and interest of providers who want to be involved in Veterans' care.

For instance, even though we have fully deployed in Region 1, we continue to add new providers to the network. Since December 10th, when our deployment was complete, our network has grown by an additional 25%. This represents 35,000 additional unique health systems and providers over 62,000 sites of care now available to the VA in just Region 1.⁴

Our networks will continue to evolve and adapt to meet the needs of Veterans. This will continue in every area in which we are privileged to serve Veterans.

■ Ensuring Prompt Payments for Providers

In addition to delivering a high-quality provider network, we also recognize the need to implement a world-class experience for community providers. Central to achieving this goal is ensuring providers receive accurate, prompt payment for the health services they deliver. This is critical to the success of our network and vital to building trust between providers and our organization.

With our contract partners, we have built a system that is easy to use and familiar to provider practices. By reducing administrative burdens, we are making it easier for providers to get paid accurately, and on time. Simply put, after a provider cares for a Veteran, they bill Optum, and Optum pays the bill.

As of February 4th, Optum has processed more than 150,000 claims, and has paid claims in an average of 11.9 days with 99.93% of clean claims being paid within 30 days.⁵

Beyond the data, providers have been expressing appreciation for making the billing and payment system easy to use to quickly get paid for the services they provide. As a restless organization, we continuously evaluate how we do business. We take in

² "Health systems and providers" is a count of unique National Provider Identification (NPI) numbers that includes an individual physician practice, a hospital system, or a group of affiliated practices that may operate one or multiple sites of care.

³ Data extracted on 2/4/2020.

⁴ Data extracted on 2/4/2020.

⁵ Across all regions where Optum is live.

feedback from all our stakeholders and strive to optimize our processes and to communicate more.

And when questions do arise, as they do with any new program, we work closely with providers to quickly resolve these issues.

■ Communicating with Providers With Clear, Actionable Information

Optum utilizes a number of different channels to communicate with providers. It begins during the initial contracting phase, and it is sustained through when they are a confirmed network provider. Key touchpoints, among others, include:

- Sending letters to providers currently in the UnitedHealthcare and Optum networks on the opportunity to participate in the Community Care Network and action necessary;
- Calls and letters to providers not already participating with UnitedHealthcare or Optum with the opportunity to participate in the Community Care Network and action necessary;
- Calls, letters, and in-person meetings for targeted health systems and providers with large footprints in local and regional areas;
- Personally reaching out through letters, calls, and meetings with providers identified by VA and others as high-priority to recruit into the Community Care Network:
- Following recruitment and credentialing, we provide a number of trainings on how the new Community Care Network works. This is done through in-person meetings, webinars, provider expos, and virtual town halls;
- Just prior to the go-live date in a particular area, Optum contacts providers again and provides information on where and how to submit a claim; and
- Regular updates, educational material and on-demand videos are also available on our provider portal at www.vacommunitycare.com.

And, if a provider has a concern that needs to be addressed, our goal is to resolve that issue as quickly as possible through our customer service channels.

We are restless in our desire to do more. We are committed to identify new and effective methods to communicate with providers.

■ Providing Timely Customer Service to Community Providers and VA Staff

A knowledgeable and responsive customer service operation is essential when VA staff or providers have questions about the new Community Care Network. Our dedicated team is available to answer questions about authorizations, claims and other issues.

Through February 4th, we have received more than 35,000 calls to our customer service center, with an average speed to answer of 3.6 seconds and 99% of calls are answered within 30 seconds. And, our customer service staff has resolved more than 99% of issues from providers and VA staff during the first call.

We will continue to focus on providing quality customer service to providers and VA staff who need assistance.

Conclusion

We appreciate the opportunity to address the Subcommittees today to outline Optum's role in assisting the VA with its mission to provide world-class health care to our Nation's Veterans.

We also appreciate the leadership of these Subcommittees, Congress, and the VA, in envisioning a program that provides a phased approach to implementation in order to ensure a successful transition for VA staff, contractors, providers, and most importantly, for Veterans.

We understand that health care is local and this phased approach enables us to work closely with the VA, VA Medical Centers, and others to deploy our network and capabilities, and ensures success based on the readiness of particular sites, while accounting for relevant local factors.

Leading our collaborative efforts to care for our Nation's Veterans is the privilege and responsibility of a lifetime. As a Veteran; retired Soldier; former Army Surgeon General and Commanding General of the U.S. Army Medical Command; wife of a Veteran: daughter of a Veteran who served honorably in World War II, Korea, and Vietnam; and now the proud mother of an Army Infantry Airborne Officer; I assure you we are fully committed to the success of the VA Community Care Network and OptumServe's role in ensuring access to care for our Nation's Veterans. We are vested in this mission and know that mission failure is not an option.

Thank you for the opportunity to be here today. I look forward to your questions.

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