



STATEMENT FOR THE RECORD

HERITAGE HEALTH SOLUTIONS

REGARDING

MISSION READINESS: VA'S PREPAREDNESS FOR NATURAL

DISASTERS DURING A PANDEMIC

BEFORE THE

HOUSE COMMITTEE ON VETERANS' AFFAIRS

SUBCOMMITTEE ON HEALTH

ON

JUNE 3, 2020

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Heritage Health Solutions (Heritage) welcomes the opportunity to submit this Statement for the Record to the House Committee on Veterans' Affairs Subcommittee on Health (Subcommittee). Given the ongoing impacts from the current COVID-19 pandemic and with the beginning of the hurricane and summer fire seasons around the corner, it is timely for the Subcommittee on Health to be examining planning, training and interagency coordination with the Department of Veterans Affairs (VA). It is important that all of us are doing what is necessary to provide veterans with the assistance they may need to handle the pandemic and any future natural disasters.

Having worked with the VA for over a decade, we have had significant experience working with the VA before, during and after disasters and are now also assisting veterans impacted by the COVID-19 pandemic. We appreciate the invitation to share this experience with the members of the Subcommittee.

INTRODUCTION

Heritage is an integrated healthcare solutions' provider located in Coppell, Texas. Heritage has been working with the VA for more than 10 years by providing first and emergent pharmacy services to veterans.

Since 2005, Heritage has provided the VA with a cost effective solution to ensure that veterans have access to urgent and emergent medications when a VA pharmacy is unable to fill a prescription. Most often, the services are used when veterans are unable to reach a VA pharmacy due to the distance from the clinic to the closest VA pharmacy. When a veteran is in need of medications, Heritage is able to work with that veteran to pick up a 10-14 day supply of his or her prescription medications at one of the 65,000 retail pharmacy locations in our pharmacy network. When a veteran receives a prescription from an authorized prescriber, the veteran presents the VA authorized prescription and a voucher at a retail pharmacy and receives his or her medications with no out of pocket expense. This solution provides veterans with immediate access to needed medications while the remaining supply of medication is processed and delivered through the VA's mail order system. These services allow the VA to exercise appropriate controls related to which medications on the VA National Formulary qualify as first and emergent, and only prescriptions from VA authorized prescribers can be filled at the retail locations.

Last year at this time, Heritage submitted testimony for a Subcommittee hearing related to the VA's emergency response and pharmaceutical cache program. In that testimony, we highlighted our work with the VA related to disaster relief and made several recommendations. Today's testimony provides updated details of our disaster response efforts since last year and also provides information related to what we see as impacts to the urgent and emergent pharmacy program – and therefore to veterans - due to the COVID-19 pandemic. In addition, we would like to highlight the impact that the pandemic has had on veterans struggling with substance misuse and abuse challenges.

DISASTER RESPONSE

Since working with the VA across the country for many years, we recognized the need to develop a disaster response plan that would be ready for implementation in the case of a natural or other type of disaster. With this disaster response plan, Heritage works with the VA to provide veterans access to medications during a natural disaster or other disruptions to the pharmaceutical supply chain and distribution system.

There are several ways in which there can be disruptions to the pharmaceutical supply chain and distribution system. In some instances, the infrastructure that exists after a natural disaster is the roadblock to care. When there is disruption in the power supply, pharmacies are unable to keep medications, such as insulin, at the appropriate temperature. When roads are washed away or littered with debris, the pharmacies may be inaccessible. Planning around these types of uncertainties is critical to the success of the disaster response plan. Having a well-managed supply of medication is important. But that is just one part of the solution. The ability to distribute these medications can be impacted in a disaster and appropriate planning needs to be in place to address those types of challenges.

Often, during a natural disaster, veterans are displaced from their homes and are unable to access a VA pharmacy or receive necessary medications from the VA mail order system. It is not uncommon that veterans are forced to quickly evacuate their homes, and they often leave without an adequate supply of medication. When veterans are displaced from their homes for an extended period of time, because the natural disaster prevents them from getting back to their homes, they may be unable to rely on VA's mail order system for their prescription re-fills.

Under these circumstances, it is important that a process be in place to provide veterans with a seamless system to help identify what medications are needed and ensure veterans can gain access to emergent medications such as insulin, inhalers, and antibiotics. Utilizing our disaster response plan allows the VA to ensure that veterans have access to their VA authorized prescriptions at a retail pharmacy during the disaster response.

For example, during our work with the VA after recent disasters, we encountered a situation where an elderly veteran was forced to quickly evacuate his home and he was unable to remember what medications he was taking. We were able to work with the VA, the veteran, and family members to identify the veteran's medications and then provide the family caregiver with information on where to fill a new prescription.

Either upon notification of an impending event by the VA, or Heritage's own vigilance, we start an internal disaster response scenario. Our response includes advising VA leadership on the potential impact of the event, tailoring options to

manage both patient risk and cost control, notification of participating pharmacies, and consistent reporting of utilization back to the VA. The constant flow of communication provides key leaders with the data required to make more informed decisions regarding the appropriate access to medications depending upon the severity and extent of the disaster.

Heritage does not limit our interaction just to the VA in the time of a disaster. Heritage also works with retail pharmacy chains to identify and communicate to the VA which retail pharmacy locations are open in the disaster response area. We provide both email and fax communications to network pharmacies in the area affected by the event. These communications inform the pharmacies of processing instructions, dates the program will be in effect, and other specifications. Processing of refills and extended day supplies are also noted to minimize veteran wait times. With this information, the VA and Heritage are able to direct veterans to locations that are operational and have the needed medication in stock.

While the VA has previously interpreted the Federal Acquisition Regulation as preventing Heritage from advising veterans during a disaster using our own social media platforms, we have assisted the VA with drafting appropriate language to post on their social media feeds. Each VISN responds uniquely and Heritage is committed to meeting the individual needs of each region. It is imperative that veterans, their families or caregivers understand what to do and where to go for assistance during a disaster.

Heritage has activated its disaster response plan many times in recent years to ensure that veterans have access to medications in times of need. Last year was no exception, as we activated the disaster network to support 25 unique VA facilities. This included our responses to flooding in Arkansas, the havoc created by Hurricane Dorian in the Caribbean, Tropical Storm Imelda, Typhoon Hagibis, and the wildfires that severely affected several parts of California. More recently, we have responded to the earthquakes that affected Puerto Rico and the COVID-19 pandemic.

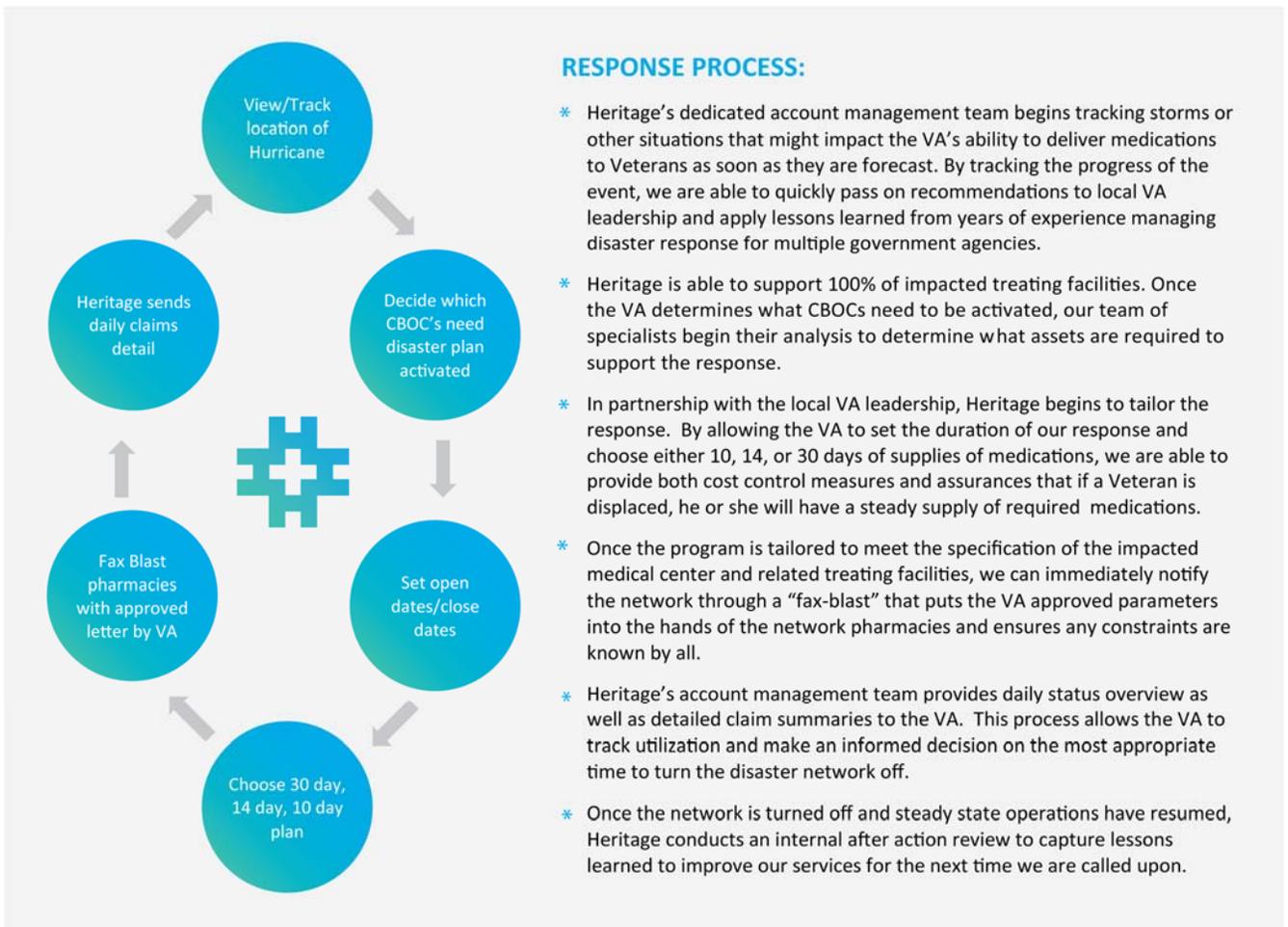
In 2018, Heritage successfully assisted the VA with their responses to Hurricanes Helene (Pacific Islands), Florence and Michael. 2017 was also a very active year for hurricanes with Harvey, Irma, Jose, and Maria devastating many parts of the Gulf Coast, Puerto Rico and the Virgin Islands.

The VA also has also taken advantage of our program in other situations when there have been temporary disruptions to the VA's ability to fill prescriptions for veterans. For example, throughout 2019, we activated the disaster network when a pipe burst at the VAMC in Honolulu, during a clinic relocation in Northern California, and during critical IT infrastructure updates that limited VA pharmacy's ability to fill prescriptions for veterans at multiple locations in Colorado, Ohio, Pennsylvania and Indiana.

Our disaster response plan has been incorporated into the VA’s requirements for the first and emergent pharmacy program, and it currently serves as the basis for the statement of work on many first and emergent prescription program contracts within the VA today.

Disaster response is a critical part of the services that we provide to ensure access to medications for veterans. The disaster network can be implemented within 1-2 hours of receiving the VA’s approval to activate. We are well aware of how disruptive and damaging these kinds of natural disasters can be for those impacted by them, and we are grateful to be a small part of the efforts to assist veterans during these difficult situations.

The following is an example of the response process Heritage implements to respond to natural disasters:



Because each disaster has its own unique set of circumstances, we have identified the following lessons learned and make the following recommendations for Congress and the VA to consider in the future:

- Responsiveness is key. The ability to quickly and effectively activate a disaster network can assist the VA leadership with their strategic messaging efforts to inform veterans of available resources in a timely manner. Development of a step-by-step guide for the VISN's to utilize might be a useful tool to provide the details necessary to effectively plan and respond to disasters.
- As part of our disaster response plan, Heritage provides the VA with 24 hour POC information in case of an emergency. Veterans also have access to 24-hour pharmacies that are part of our national network in order to obtain prescriptions at any time of day or night.
- As part of our disaster response plan, we provide both the VA's mobile medical unit and national retail pharmacies access to a dedicated service line for veterans filling prescriptions. This type of process has improved communications between the retail pharmacy and Heritage and ensured that veterans received immediate access to their medications.
- Increased use of social networking can directly impact the number of calls that our Customer Care Center receives during a disaster. Providing veterans, their family members and other caregivers with a number they can call to assist them in filling a veteran's prescription helps take a concern off their agenda during a high stress event in their lives.
- Assisting veterans with their medication needs can become more complicated in a disaster setting – and even more complicated if a disaster occurs during a pandemic. Having a disaster response plan already developed and ready to be implemented at a moment's notice can reduce both financial and medication compliance risks for both the VA and their patients. The disaster response plan needs to be precise enough to target impacted populations yet flexible enough to shift as an event matures and migrates through the country.

PANDEMIC RESPONSE

Since the onset of the COVID-19 pandemic in February and the resulting state and local responses, we have seen a dramatic reduction in the number of veterans that have been filling urgent and emergent prescriptions. Keeping in mind that these prescriptions are primarily for medications to treat acute medical conditions, it is disturbing to see these kinds of program usage rate declines. The implication is that veterans who would normally see a VA provider and receive a prescription from a local pharmacy for medications that they need to start taking immediately - such as antibiotics, inhalers, and pain medications - are going without them.

We began to see a drop in claim count toward the end of March. The total prescription count for March/April of 2020 is down 42% from the same time period a year ago. April 2020 claim count was down 60% compared to April 2019, and we are seeing the same trend for May. This dramatic drop in the number of prescriptions filled shouldn't be construed to mean that veterans suddenly don't need as many prescriptions. On the contrary, it more likely means that veterans who need acute prescription medications are going without them.

There are several reasons for fewer veterans obtaining medications during this pandemic. One reason is that some community-based outpatient clinics and VA facilities have closed because medical personnel are being sent to assist in VA medical facilities that need COVID-19 support. This lack of access may cause the veteran to try to treat their conditions themselves with over the counter medications – for example, a veteran with a serious ear infection may simply try to take ibuprofen to stop the pain, rather than treat the infection appropriately. Additionally, there is no doubt that some veterans are choosing to delay seeking care because of concerns about leaving their home to travel to a VA facility or local provider. We have seen a dramatic reduction in the number of people visiting hospitals nationwide due to concerns about contracting COVID-19, so these concerns are not unique to veterans, but do result in delayed or lack of care. Regardless of the reason, veterans not receiving the medications they need is a serious concern, and one that requires all of us to work together to remedy.

Heritage has been working closely with the VA to ensure patient safety by providing veterans with access to prescribed medications during the pandemic. We have made recommendations for formulary updates, and added pharmacies and authorized VA providers to the network as needed to ensure access. All of these changes have been expedited during this time of need. We have also shared best practices with VA facilities to ensure the most seamless process for filling prescriptions at retail pharmacies that are convenient to veterans' locations.

We are aware that, during the pandemic, the VA is utilizing telemedicine and that some veterans seeking care today are being routed through the telemedicine system as an alternative to in-person visits with providers. We applaud the VA for expanding the availability of telemedicine to veterans. We have noticed that the drop in prescription volume has been less pronounced in areas where the VA is offering a telemedicine option. During the pandemic, we have worked with some of the VISNs to create a unique process that allows veterans to fill urgent and emergent prescriptions, prescribed by VA telemedicine providers, at local pharmacies. This is clearly enhancing access for veterans, and we commend the VA for implementing this service where they can.

It is important to note that telemedicine visits can add to the challenge of filling prescriptions using the retail pharmacy system depending on the particular situation. In some cases, the provider is working from home and cannot fax prescriptions to a pharmacy, so they must call in prescriptions by phone instead.

This process is more time consuming and prone to error. Additionally, many telemedicine providers located within a VA facility rely on faxing prescriptions rather than utilizing newer technology such as e-prescribing, which is more efficient. Lastly, because the telemedicine program is new, the provider may not be familiar with the urgent and emergent program and instead opt to send the prescription to the VA mail order pharmacy. This results in a delay in care, as it can be several days before the veteran receives their initial prescription through the mail.

Having been a part of the current pandemic response, we would offer the following recommendations:

- Expand the use and availability of telemedicine services as an alternative to in-person visits.
- Educate telemedicine providers on the urgent and emergent program and the process for submitting prescriptions to a local retail pharmacy so that the veteran can get an initial 10-14 day supply of medication without delay or long wait times.
- Expand the Disaster Network to additional VISNs during the pandemic to ensure the broadest possible access to medications for veterans.
- Pursue the adoption of e-prescribing in VA facilities. E-prescribing allows providers to send a prescription to a pharmacy electronically from a computer or handheld device.

IMPACTS OF COVID-19 ON VETERANS WITH SUBSTANCE MISUSE AND ABUSE CHALLENGES

We know that many veterans are struggling during this pandemic. We must adopt new strategies to give them the tools they need to succeed. With the response to the COVID-19 pandemic requiring individuals to stay at home and to avoid personal interactions, we are witnessing a nationwide increase of stress from the loss of a job, loss of money and loss of businesses – while at the same time, we are losing the ability to interact with loved ones. The fear of the unknown of what life will be like on the other side of this crisis can be overwhelming. Many of these people, including veterans, are also struggling with substance misuse and abuse challenges.

In “normal” times, many of these veterans could seek assistance through in-person therapist appointments or 12-step programs such as Alcoholics Anonymous or Narcotics Anonymous. But these are no longer “normal” times and therefore it requires all of us to rethink how we provide services to veterans who struggle with

substance misuse and abuse. As such, the idea of “in person” meetings are less likely to provide the needed support given that attendance will necessarily be diminished.

We applaud the VA for creating the “COVID Coach” mobile app. This tool provides veterans with one place to go to access various programs. The mobile app is a collection of already available resources combined into an easier to use platform. The mobile app appears to have a focus on stress, PTSD, anxiety and mental health and the resources fall into that category. While there is a “resources” button, it simply lists several programs but does not allow for any interaction with the veteran who is using the mobile app, outside of the already current methods (AA, NA, SAMHSA, etc.).

We know that veterans struggling with substance misuse and abuse often also struggle with PTSD and other mental health issues. And far too often, suicide can be the result if there isn't appropriate intervention and assistance. However, we should offer these veterans more than a list of resources when they are trying to deal with these challenges. We should also offer virtual solutions that allow veterans to access innovative, yet confidential, programs that provide support when it is needed it most.

Rather than wait for an individual to ask for help by publicly acknowledging a personal distress, which often doesn't happen before a suicide attempt or suicide, our philosophy is different. We believe that the key to success is by providing the veteran with confidential tools that allow the veteran to learn about addiction; receive useful, real world content; and be connected to a peer coach. Data indicates that only 10% of individuals that struggle with substance misuse or abuse ever try to get help.

The reasons are simple - stigma and fear of abstinence. Stigma is simply the mark of shame or discredit - the fear of losing a job or promotion or loss of a security clearance, for example. At Heritage, we believe in abstinence and abstinence programs. But it can be such a daunting task to start on the journey to abstinence that most people don't take the first step to achieve it. With this pandemic, it is more important than ever that we use innovative methods to help individuals suffering from addiction and not continue to do the same things we've been doing for years. This pandemic is forcing all of us to be creative in dealing with everyday challenges – and addiction is no different.

Because of our passion and extensive personal experience with addiction, we have created the “Heritage Comprehensive Addiction Recovery Education and Support (Heritage CARES)” program to help individuals, including veterans and their families, receive the support they need on their journey towards recovery.

The Heritage CARES program has three core components:

- **youturn** – an innovative learning management online platform that has the

most extensive library of addiction-related video content in the United States. The video content uses real people talking about addiction and does not use actors or avatars. This confidential platform educates users and their families on substance misuse and abuse and the content is available from any device at any time. It allows people to learn and get the help and the advice they need without the fear of reprisal or stigma.

- **Care Management Platform** – an online tool to help assess the platform user’s situation, and then design a plan that best achieves recovery goals
- **Peer Coaching** - allows users to engage with Assertive Community Engagement (A.C.E.) coaches to reach planned recovery goals. Utilizing all available HIPPA compliant platform technologies – including text, email, telephone, etc. – we take an evidence-based approach to behavioral modification and harm reduction.

Whether it is the Heritage CARES program or other programs, now is the time for the VA to continue to investigate new approaches to the issue of addiction. Leveraging technology to support the current programs is more important now, given social distancing requirements. This pandemic, and a related increase in anxiety, stress, and depression, has proven that we can no longer afford to address addiction the same way we’ve done it for years.

Given the increased number of veterans in need of support for substance misuse and abuse during the current pandemic, we make the following recommendations to improve the availability and content of programs to assist these veterans and their families:

- Implement a confidential and comprehensive technology-based substance misuse and abuse program that supplements current in-person support services.
- Undertake broad outreach efforts to reach veterans and their family members struggling with substance misuse and abuse challenges and notify them of new methods to receive technology-based support.

CONCLUSION

Given our many years of working with the VA, we’ve had the opportunity to create and utilize innovative solutions to challenging healthcare issues. As a private sector entity, we have the ability to be agile and can quickly adapt to changing demands and situations – with the current pandemic as an example of this agility.

The professionals at the VA are committed to assisting veterans and Heritage is proud to work alongside the VA and this Subcommittee to play a small part in helping to meet the healthcare needs of this nation’s veterans.

