

STATEMENT OF

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President and Chief Executive Office  
Healthcare Leadership Council

FOR THE RECORD OF THE

Subcommittee on Disability Assistance and Memorial Affairs  
Committee on Veterans' Affairs  
United States House of Representatives

LEGISLATIVE HEARING  
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Chairman Luttrell, Ranking Member Pappas, and Members of the Subcommittee:

The Healthcare Leadership Council supports H.R. 8881 – a bill to amend title 38, United States Code, to permanently authorize the performance of Department of Veterans Affairs disability examinations by non-Department physicians pursuant to contracts, and for other purposes.

HLC is an association of CEOs and C-suite executives from all sectors of healthcare working to shape the future of the U.S. healthcare system. HLC is the exclusive forum for the nation's healthcare industry leaders to lead on major, sector-wide issues, generate innovative solutions to unleash private sector ingenuity, and advocate for policies to improve our nation's healthcare delivery system. Members of HLC – hospitals, academic health centers, health plans, pharmaceutical companies, medical device manufacturers, laboratories, biotech firms, health product distributors/wholesalers, post-acute care providers, homecare providers, group purchasing organizations, and information technology companies – advocate for measures to increase the quality and efficiency of healthcare through a patient-centered approach.

The shortage of healthcare providers is a longstanding issue nationwide. This challenge is often more pronounced for service members and military families residing in remote areas. Therefore, one of the first major expansions of provider licensure occurred when Congress passed the Veterans E-Health and Telemedicine Support (VETS) Act of 2017, which allowed licensed health care professionals of the Department of Veterans Affairs (VA) to practice using telemedicine at any location in any state regardless of where the professional or patient is located if the covered health care professional is using telemedicine to provide VA medical or health services. By removing state medical licensure requirements for U.S. Department of Veterans Affairs (VA) physicians, VA policies allow a federal employee to hold a license in one state and practice in any

jurisdiction. In the first year under VETS, more than 900,000 veterans used telehealth to access services, a 17% increase. Two-thirds of services were for tele-mental health visits. In November 2020, the VA issued an interim final rule further confirming its authority under the VETS Act to allow VA health care professionals to practice their professions “consistent with the scope and requirements of their VA employment, notwithstanding any state license, registration, certification, or other requirements that unduly interfere with their practice.”

Nearly four years after the VETS Act was implemented, workforce shortages and access challenges persist. HLC urges the Subcommittee here and Congress subsequently to enact HR 8881 to build on the improvements made and extend these same flexibilities and practice privileges to all health and medical service providers, but especially to those contractors who serve Veterans and Servicemembers. Our nation’s veterans have benefitted from the flexibilities afforded to them under the VETS Act in accessing VA physicians through telehealth; however we urge the Subcommittee and Congress to leverage additional opportunities to alleviate the barriers that healthcare workforce shortages and underserved geographic locations continue to pose.

This issue of license portability has also been addressed in statute for uniformed personnel, government employees, the Department of Defense’s Military & Family Life Counselors, and the Department of Homeland Security contract healthcare providers. Unfortunately, many healthcare professionals involved in the VA’s medical disability exam program are currently restricted from providing medical services in states where they are not specifically licensed. This restriction can exacerbate the backlog of medical exams, thereby delaying Veterans’ access to their disability benefits.

We know that Congress expanding license portability to more healthcare providers would bring several significant benefits including:

1. **Increased Access to Healthcare:** License portability reduces barriers to providing care in underserved or rural areas where there might be a shortage of healthcare professionals.
2. **Faster Response to Emergencies and Disasters:** During emergencies, such as natural disasters or public health crises, healthcare providers from other states can quickly and efficiently help without delays in license approval processes.
3. **Efficiency and Cost-Effectiveness:** Currently, healthcare providers face administrative burdens and costs associated with obtaining multiple licenses if they want to practice in more than one state. License portability drives down costs by streamlining this process.
4. **Facilitation of Telehealth:** License portability enables healthcare providers to offer services across state lines without the need for multiple licenses, thereby expanding access to telehealth services.

5. **Professional Mobility and Flexibility:** Healthcare professionals often move for personal or professional reasons. License portability supports their mobility by allowing them to continue practicing without interruption or delay due to the need to obtain a new license.
6. **Uniform Standards:** While states maintain the authority to set their own scopes of practice, efforts towards license portability can encourage greater alignment and standardization of licensing requirements across states, which can enhance consistency and quality of care.
7. **Workforce Flexibility:** License portability enables healthcare organizations to recruit and retain qualified professionals from other states, enhancing workforce flexibility and addressing local healthcare needs more effectively and easily.

As the nation moves towards enhancing the mobility of healthcare professionals, it is essential to address barriers that hinder our ability to manage public health crises and the Veterans disability claims backlog. The VA needs a system that facilitates the mobility of healthcare professionals to respond to Veterans needs wherever they arise. This will ensure that Veterans receive timely access to their benefits and healthcare.