

**STATEMENT OF  
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SUBCOMMITTEE ON TECHNOLOGY MODERNIZATION  
U.S. HOUSE OF REPRESENTATIVES  
ON  
"IMPROVING ACCESS TO EXTERNAL VA CARE THROUGH ENHANCED  
SCHEDULING TECHNOLOGY"**

**MAY 5, 2025**

Good afternoon, Chairman Barrett, Ranking Member Budzinski, and distinguished Members of the Subcommittee, thank you for the opportunity to testify on VA's work to enhance Veterans' experiences through modern and efficient scheduling technologies. My testimony today will focus on the External Provider Scheduling (EPS) Program, its status, challenges, and future plans for expansion and improvement.

## **Introduction**

Since the enactment of the VA Maintaining Internal Systems and Strengthening Integrated Outside Networks Act of 2018 (P.L. 15-182), VA has significantly expanded Veteran access to health care. The Veterans Community Care Program, launched on June 6, 2019, has been a cornerstone of this effort. As of March 2025, we have provided over 39.6 million community care referrals to more than 5.4 million Veterans. To improve service delivery, VA is focusing on innovations that put Veterans first. EPS is an initiative aimed at improving the Veteran's experience and access to care through enhanced scheduling technology.

Last year, Veterans faced unnecessary delays in accessing community care due to the Biden Administration's decision to pause the implementation plan of the EPS program. This slowdown limited Veterans' ability to quickly and easily schedule appointments with community providers. Recognizing the urgent need to put Veterans first, this Administration, under the leadership of Secretary Collins, reenforced the need of EPS implementation quickly. In just the first 100 days, we have expanded EPS from 16 sites last fall to 34 sites as of today, increasing access, and we are rapidly bringing more facilities and providers online. This renewed commitment reflects VA's belief that Veterans deserve a streamlined, reliable experience when accessing community care. EPS represents a critical step toward ensuring timely access to high-quality health care choices that Veterans deserve.

In addition to expanding EPS in the community care setting, VA recognizes the critical need to provide Veterans with clear, complete, and comparable information about their care options, whether within VA or in the community. To support this goal, VA is exploring EPS capabilities for both VA direct care and Community Care scheduling. This furthers the Secretary's commitment to delivering on the health care choices and transparency promised to Veterans under the VA MISSION Act.

## **Overview of EPS**

EPS allows VA staff to schedule Veterans directly into available community care provider appointment slots through a single user interface, thereby more seamlessly connecting Veterans to appointments with community care providers. This single user interface displays provider availability information in one place and reduces the back-and-forth communication that often contributes to delays in care. By providing detailed information about who, where, how, and when care is available, EPS plays a vital role in helping Veterans make timely and informed decisions about their health care. Early examples demonstrate key benefits of using EPS. Some of these benefits include the following:

- **Enhanced Veteran Experience:** EPS improves access to high-quality care, minimizing the challenges Veterans face when scheduling multiple appointments. It ensures that appointments are made efficiently, taking Veterans' preferences into account. VA Schedulers using the EPS system are booking appointments in less than 10 minutes, compared to up to an hour without EPS.
- **Streamlined Coordination:** Community Care providers and VA staff have real-time updates on rescheduled, cancelled, or completed appointments thereby eliminating the need to call and verify status with the providers or Veteran.
- **Strengthened Partnerships:** The EPS system improves coordination between VA and Community Care providers.

## **Implementation Status**

As of April 18, 2025, EPS has been successfully implemented in 34 VA medical centers (VAMC) with 20 additional VAMCs scheduled to go-live by the end of fiscal year 2025. Since October 2024, EPS has onboarded over 3,300 provider services. This is more than 60% of total provider services since the pilot began in December 2021.

Over 5,200 provider services are active in EPS across over 60 specialties, including primary care, mental/behavioral health, dermatology, optometry, chiropractic care, dental, and orthopedics. EPS continues to onboard new provider services at a rate of over 100 per week, prioritizing based on initial site feedback and referral data.

## **Training**

To realize the full capability of EPS, we have recognized the need for better change management and training. VA developed an online training process enabling VA staff to take the training, as needed. The EPS team provides office hours and immediate live support for users who require assistance.

## Enhancing Provider Collaboration

Implementing EPS has not been without its challenges, particularly in onboarding Community Care providers. Many providers are understandably concerned about how new systems will integrate with their existing workflows and whether additional training or resources will be required. We have addressed these concerns through targeted solutions such as:

- **Efficiency at no cost to providers:** EPS eliminates the need for phone calls and waiting for authorization numbers.
- **Control and compatibility:** Providers retain control over their scheduling system visibility to VA, ensuring no electronic health record information is shared except for appointment availability. This integration is designed to be hassle-free, requiring no additional staff training.
- **Immediate authorization:** Referral authorization numbers are provided at the time of appointment scheduling, simplifying administrative tasks and reducing the workload for provider staff.

These features save providers significant time and allow them to maintain their existing systems without incurring any upfront or ongoing fees, making it both an attractive and practical solution. This approach not only benefits the providers but also puts Veterans first by reducing wait times and eliminating barriers to accessing the health care choices they have earned.

## Conclusion

In conclusion, the EPS Program is no longer an experiment – it is a proven tool that is fundamentally transforming the way Veterans access care. Thanks to the renewed focus and leadership of the Trump Administration, EPS is now reaching more Veterans, at more sites, faster than ever before. We are committed to building on this

momentum, expanding EPS nationally, and continuing to refine the system based on real-world feedback from Veterans, VA staff, and community providers.

By removing barriers, minimizing delays, and putting Veterans at the center of the scheduling process, EPS helps deliver the timely, high-quality care Veterans deserve. We look forward to working with the Subcommittee to ensure continued improvements in the scheduling process and overall care for Veterans. Thank you for the opportunity to testify today. We are prepared to answer any questions you may have.