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United States House of Representatives
House Committee on Veterans' Affairs
Subcommittee on Technology Modernization
Beyond the City Limits: Delivering for Rural Veterans
Chez Veterans Center
908 West Nevada Street
Urbana IL, 61801
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Thank you, Mr. Chairman. Chairman Barrett, Ranking Member Budzinski, and distinguished members of the subcommittee, thank you for the opportunity to testify today on behalf of the Illinois Department of Commerce and Economic Opportunity and the Illinois Office of Broadband. I am here to speak about the critical intersection of telehealth access for rural veterans, and the impact of the digital divide on their health and well-being.

When we talk about the digital divide in 2025, we are talking about a disparity in access to fast, affordable, and robust internet, as well as to the devices, tools, and skills that allow people to connect to critical supports throughout their lives. Vulnerable populations often find themselves on the wrong side of this divide, and veterans are one of them, with only 67% of Illinois veterans having and using broadband access¹. Veterans are also often part of more than one vulnerable population, as 56% are over the age of 60 and 26%, over 4 million people, live in rural areas².

Rural residents have their own challenges where internet connectivity is concerned. The FCC estimates that 28% of rural residents lack broadband access. 57% of rural locations in Illinois alone are entirely unserved or underserved, receiving internet speeds below the FCC's minimum recommendation of 100/20 Mbps. This recommendation is indeed the bare minimum, and is often only adequate for one user at a time to do everyday tasks like video conferencing, streaming, and emailing. The inability to complete these tasks from home disadvantages rural veterans especially when trying to access telemedicine resources.

The VA provides vital care centers and hospitals across the country, but when we look at veterans who live in rural areas, they live an average of 45 miles to be seen in person at a center³. As veterans are twice as likely as nonveterans to suffer from two or more chronic health conditions⁴, frequent checkups and appointments are especially important. Telehealth resources began to be promoted heavily just before the pandemic to alleviate challenges with transportation and provider availability, but adoption rates in rural areas suffered because of the lack of broadband access. When considering additional complications, such as subscription affordability, device ownership, and varying degrees of digital literacy and skill, especially in the more than half of veterans over 60, the problem is laid out in stark relief⁵.

Illinois has already worked diligently to increase broadband access for rural residents through the Connect Illinois broadband infrastructure grant. Connect Illinois allows internet service providers to build high speed fiber infrastructure in rural areas that often have low population or subscriber density or are isolated from other middle mile internet infrastructure. As of today, three state and federally funded rounds of this program have



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connected approximately 7,500 households, with 46,000 total to be connected in the next three years. A fourth round is being funded by the federal Broadband, Access, Equity and Deployment (BEAD) program, and stands to connect over 165,000 Illinois residents and almost 5 million other households across the country without adequate connectivity.

While the BEAD program is in progress, there is another program that can fund veteran serving organizations on the ground and help to provide rural veterans with device access, digital skill building, one on one troubleshooting support, and more. That program is the Digital Equity Act. This program was poised to provide \$2.75 billion dollars to states to support programming and subgrants to direct service organizations, with veterans being targeted as one of the vulnerable populations most affected by the digital divide. Illinois was to receive more than \$23 million to equip households and residents with the skills, resources, and tools needed to use high-speed internet.

Illinois received over 260 subgrant applications from around the state, with the full ask totaling over \$100 million, far above the available funds, illustrating the incredible scale of the need of community organizations. Some of those proposed programs include:

- Supporting telehealth and resource access for recently separated women veterans in the rural west central region
- Veteran focused digital literacy classes and ongoing tech support to a rural library in the north central region
- A mobile digital skill building hub in the southeast visiting community organizations like the American Legion and other veteran serving organizations
- Secure community telehealth rooms in the southwest for those who can't yet connect from their homes
- Low cost or free refurbished laptops and tablets for veterans across the state

Unfortunately, the Digital Equity Act and its \$2.75 billion dollars of appropriated funding were terminated by executive order on May 9, 2025. Without those funds, these proposed programs and many others are left without funding and most will not be realized, leaving veterans unserved.

Expanding access to broadband and telehealth resources is key to the health and well-being of rural veterans, not only in Illinois but across the nation. Thank you for the opportunity to speak with you today, and I welcome questions at this time.



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¹Illinois State Digital Equity Plan, 125.

<https://dceo.illinois.gov/content/dam/soi/en/web/dceo/broadband/documents/illinois-state-digital-equity-plan-without-appendix.pdf>

² VA Open Data, Retrieved 7/20/2025

³Buzza C, Ono SS, Turvey C, Wittrock S, Noble M, Reddy G, Kaboli PJ, Reisinger HS. Distance is relative: unpacking a principal barrier in rural healthcare. *J Gen Intern Med.* 2011 Nov;26 Suppl 2(Suppl 2):648-54. doi: 10.1007/s11606-011-1762-1. PMID: 21989617; PMCID: PMC3191222.

⁴Boersma P, Cohen R, et al. Multiple Chronic Conditions Among Veterans and Nonveterans: United States, 2015-2018. *National Health Statistics Reports.* 2021 Feb 23; 153. doi: <https://www.cdc.gov/nchs/data/nhsr/nhsr153-508.pdf>

⁵Leung LB, Yoo C, Chu K, O'Shea A, Jackson NJ, Heyworth L, Der-Martirosian C. Rates of Primary Care and Integrated Mental Health Telemedicine Visits Between Rural and Urban Veterans Affairs Beneficiaries Before and After the Onset of the COVID-19 Pandemic. *JAMA Netw Open.* 2023 Mar 1;6(3):e231864. doi: 10.1001/jamanetworkopen.2023.1864. PMID: 36881410; PMCID: PMC9993180.