

**Senate Veterans' Affairs Committee Hearing
VA's Response to COVID-19 across the VA Enterprise**

Opening Statement of Chairman Jerry Moran
Wednesday, December 9, 2020

(As Prepared for Delivery)

“Good morning and welcome to this hearing on the Department of Veterans Affairs’ response to the COVID-19 pandemic.

“We have faced many challenges this year due to the pandemic, but our nation is not unfamiliar with adversity.

“Adversity provides an opportunity to evaluate vulnerabilities in our systems, reflect on what’s worked and make improvements for the future. As we discuss the department’s pandemic response thus far today, I hope to hear what you’ve learned in each of these areas.

“VA has faced challenges relating to the administration of both benefits and disability compensation and pension exams, as well as the provision of timely, quality health care. Just like other health providers, VA has had to work through closures due to the virus and difficulties acquiring vital personal protective equipment, or PPE.

“While VA continues to work diligently at the local levels on behalf of our veterans while also fulfilling its Fourth Mission, VA hospitals and clinics still faced difficulty procuring supplies, finding availability for veterans’ appointments and making certain veterans in rural areas had adequate access to health care.

“Many veterans living in rural areas in my state are hours away from any VA facility. Due to this, I am particularly interested in your progress regarding broadband agreements to support the increased utilization of telehealth to reach some of our most vulnerable veterans. We provided you greater latitude in the CARES Act, and I want to make certain you are using that to benefit veterans.

“Dr. Stone, as you know, the challenges related to COVID-19 are not over, and I want to ensure we have a robust and frank conversation today about VHA’s efforts under your leadership to continue caring for our veterans.

“At the beginning of the pandemic, the VA chose to suspend veterans’ access to the Community Care Network under MISSION Act--which the VA did not have the authority to do. While the VA claimed the suspension was done in the "best interest" of veterans, it failed to actually give veterans a say in the decision-making process. This completely contradicts the MISSION Act which specifically places the veteran and their provider at the center of the healthcare decision-making process.

“Another justification the VA gave for the suspension was that providers in the Community Care Networks were not accepting patients, however, during an October hearing before this committee both Optum and TriWest testified they had ample community providers at the time that were willing to treat veterans.

“Today, I want to discuss how the VA can best leverage the Community Care Networks to maintain continuity of care during the crisis as well as better ensure local access to care. While this pandemic--and the demands it has placed on the VA-- was unanticipated, Congress still expects VA to work towards fully implementing the MISSION Act.

“With several vaccines pending FDA emergency use authorization, another critical component of our conversation today is VHA’s preparation for the proper distribution of COVID-19 vaccines in the coming weeks. It is imperative that we work together for a smooth rollout of the vaccines, and I look forward to hearing VA’s detailed strategy to reach veterans nationwide.

“During this pandemic, I have worked with my colleagues to expand authority and resources for veterans experiencing and at risk of homelessness. This population is especially vulnerable to COVID-19 and members of this committee, myself included, would like to learn more about VHA’s recent initiatives to decrease the number of veterans experiencing homelessness.

“Dr. Lawrence, today’s hearing is also an opportunity to discuss the work VBA is now conducting to address the C&P backlog that has accrued due to COVID-19 limitations – both through internal VA exams or as a contractor.

“We have also learned that those exposed to burn pits during military service are likely to be more susceptible to COVID-19; however, claims for these veterans are still denied at an extremely high rate.

“My colleagues and I, along with VSOs, are focused on tackling the many policy issues associated with health care and benefits for veterans who experienced toxic exposures during military service.

“This hearing also allows us the opportunity to examine the many provisions we have passed to ensure the GI Bill continues during this pandemic to make certain veterans and their dependents’ education is not overly disrupted.

“Additionally, I am concerned by the rate of unemployed veterans and veteran spouses, and I look forward to hearing how VA is working with its agency partners across the federal government to mitigate veteran unemployment.

“VA has made great strides this year, but VA has also made some decisions that are concerning as to how they will impact veterans and their families during this stressful and uncertain time.

“Finally, as the presidential inauguration quickly approaches, it marks a period of transition for this coming year. Our country will continue to face the COVID-19 pandemic, a challenge of significant magnitude and consequence, much of which is still unknown, and we must make certain all entities of our federal government can continue working together to solve problems. We must make certain that no matter what the future holds, there won’t be a lapse in care or benefits for our nation’s veterans.”

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