

United States Senate

WASHINGTON, DC 20510

March 12, 2020

Richard A. Stone, M.D.
Executive in Charge
Veterans Health Administration
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

Dear Dr. Stone,

Thank you for your response to a February 6, 2020 letter on what steps the Department of Veterans Affairs (VA) is taking to protect the health and safety of veterans and staff during the 2019 Novel Coronavirus (COVID-19) outbreak. Now that VA has recorded ten cases across the U.S., we write to request details regarding VA's approach to coronavirus preparedness and how the Department's response has changed. We recognize that the COVID-19 outbreak is an evolving situation, with a growing impact on the U.S. and global community, and want to ensure that the VA has all of the resources needed to keep veterans, staff, and communities safe. We appreciate your leadership during this emergency response effort and are hopeful that VA can be on the forefront of a successful domestic response to COVID-19.

We request your timely response to the following questions regarding VA's preparedness and response efforts for COVID-19:

Agency Response and Preparedness

- Who at VA is responsible for the Agency's internal response to COVID-19?
- Who within each Veterans Integrated Service Network (VISN) is responsible for VISN response and oversight of facilities within its boundaries?
- Can VA provide a weekly update with data on current medical supply levels, amount of test kits available, number of patients tested for COVID-19 and the status of all test results, current bed occupancy rates, current staffing levels, and number of staff being quarantined and/or tested for COVID-19?

Responsibility for Coordination with Federal, State and local government

- Who at VA is responsible for coordinating the Department's response with Federal, State and local governments?

Emergency Supplies and Respiratory Support

- The Boston Globe reported that in one VISN, "some emergency stockpiles of respirator masks have deteriorated in storage and can't be used." Does VA have a sufficient supply

of working respirator masks (e.g. N-95 masks) for the COVID-19 response? And, have respirator masks across all VISNs, VA Medical Centers (VAMCs) and Community-Based Outpatient Clinics (CBOCs) been checked to determine usability?

- Have all of VA's All Hazards Emergency Caches (AHECs) been checked for both adequate supply and usability of those supplies?
- Should VA exhaust its supplies of respirators and AHECs, what options would the Department have for additional supplies?
- Given the reported strain on respiratory support equipment, including ventilators, on hospitals caring for coronavirus patients abroad, is VA confident that its supply of such equipment is adequate to support its 1) current patient population and 2) a potential surge if VA's responsibilities under the Agency's Fourth Mission are activated?

Supporting State & Federal Response Efforts

- In line with VA's Fourth Mission, has VA been included in discussions on under what circumstances the President or Secretary of Health and Human Services would declare a major disaster or emergency and/or activate the National Disaster Medical System, thereby triggering VA's responsibilities under section 1785, title 38, United States Code?
- Will VA be deploying more health care providers using the Disaster Emergency Personnel System (DEMPs)? How will those deployments be determined?
- How does VA determine when to activate an AHEC and have any AHECs been activated for COVID-19 to-date? Will VA use the AHECs to support federal, state, local, or tribal response efforts? Can the Indian Health Service access essential medicines or supplies from the AHEC?

Patient Screening and Isolation

- Is pre-screening for entry now in place for patients, staff, contractors, and visitors at all VAMCs and health clinics? If not, when will all VA facilities have this capability? What does pre-screening entail?
- Do VA Police and other VA employees conducting the COVID-19 pre-screenings at VA facilities, VAMCs and CBOCs, have the protective equipment and training needed to prevent viral transmission?
- Are samples being tested in-house or sent to State and/or Federal labs? If testing is not being done at VA, are there plans to explore this option? For testing that has already been completed, what is the average length of time for results?
- Should a patient arrive at a VA facility without a negative air pressure isolation room, what follows? What options do rural veterans have who are served by sometimes very small CBOCs? Your letter dated March 4, 2020 noted that VA has 894 isolation beds – with two-thirds already occupied for non-coronavirus issues. What is the Agency's plan to address this potential shortfall?

Caring for the Most Vulnerable Veterans

- Given that COVID-19 has the highest risk of mortality among individuals who are older and/or have co-morbidities, what is VA doing to especially protect older, sicker veterans?

- What COVID-19 preparedness policies are in place for VA's Community Living Centers (CLCs)?
- How is VA communicating and collaborating with State Veterans Homes and Community Nursing Homes, where many veterans receive long-term care?

Communication with Veterans and VSOs


- Is the VA engaging in any efforts, by themselves or in partnership with the VSOs, to ensure that veterans have accurate information on COVID-19, including information on how to avoid scams and how to identify inaccurate information related to the virus, including how it spreads and questionable claims regarding treatments or therapeutics?
- Is VA working with the Department of Defense to disseminate information about COVID-19 to transitioning servicemembers, including through the Transition Assistance Program?

Funding


- It is essential that VA is equipped to continue providing essential health services for veterans, as well as to respond to the Novel Coronavirus. VA did not request or receive additional funding in the coronavirus supplemental funding package. How is VA currently funding the additional workload require to respond and prepare for this unexpected coronavirus?
- What is the Department's plan if VA needs any additional resources for responding to the COVID-19 outbreak?

We are thankful for the dedicated staff across the Department who are working tirelessly to respond to this public health emergency and keep veterans and their communities safe. Thank you for your partnership in serving veterans and protecting the dedicated staff who care for them.

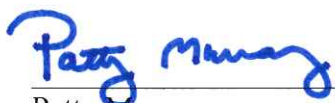
Sincerely,




Jon Tester
United States Senator



Jeffrey A. Merkley
United States Senator



Patty Murray
United States Senator



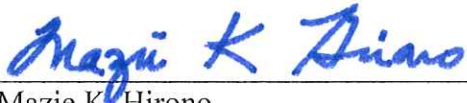
Bernard Sanders
United States Senator



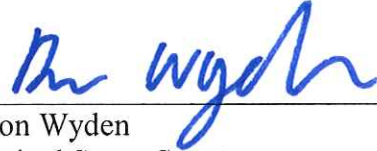
Sherrod Brown
United States Senator



Richard Blumenthal
United States Senator



Mazie Hirono
United States Senator




Ron Wyden
United States Senator



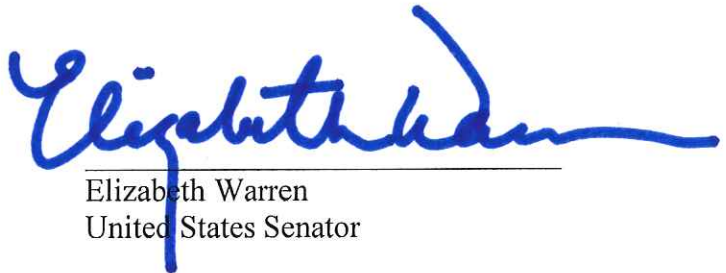
Robert P. Casey, Jr.
United States Senator



Tom Udall
United States Senator



Tammy Baldwin
United States Senator



Elizabeth Warren
United States Senator