

# U.S. Sen. Baldwin: Joins Sen. Dems in calling on VA to develop COVID-19 testing strategy at facilities nationwide

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WASHINGTON, D.C. – U.S. Senator Tammy Baldwin (D-WI) joined 17 Senate colleagues, led by Senator Michael Bennet (D-CO), in calling on the Department of Veterans Affairs (VA) to ramp up Coronavirus Disease 2019 (COVID-19) testing at VA facilities nationwide and establish a framework for a large-scale strategy for national testing.

*“In support of a nationwide testing strategy, VA can be a great asset in achieving the kind of testing scale-up necessary to safely open the economy successfully and stave off or address a second wave. As the largest integrated health care system in the country, overseeing more than 1,200 health care facilities across the United States, the Veterans Health Administration (VHA) is well-positioned to help our nation amplify our testing strategy,”* **wrote the senators in the letter sent to VA Secretary Robert Wilkie.**

A proactive national strategy by the VA would, for example, expand, centralize, and coordinate the ordering and distribution of critical supplies and testing kits to all VA facilities nationwide. This expansion would not only increase VA capacity to provide relief for the veteran community, it would also free up precious resources at non-VA hospitals to focus on caring for civilians.

In the letter, the senators outline recommendations for producing a testing strategy, including making testing kits available at all VA facilities, including non-hospitals; testing both symptomatic and asymptomatic veterans; providing more

detailed testing data on VA's website; and developing a plan to provide a sufficient workforce to carry out the strategy, as well as equipping them with proper supplies and equipment, including personal protective equipment.

In addition to Baldwin and Bennet, the letter was signed by Senators Chris Coons (D-DE), Elizabeth Warren (D-MA), Debbie Stabenow (D-MI), Edward J. Markey (D-MA), Gary Peters (D-MI), Angus King (I-ME), Tina Smith (D-MN), Mark Warner (D-VA), Jeanne Shaheen (D-NH), Patty Murray (D-WA), Chris Van Hollen (D-MD), Jack Reed (D-RI), Kamala Harris (D-CA), Amy Klobuchar (D-MN), Tom Carper (D-DE), and Jeff Merkley (D-OR).

The full letter is available [here](#) and below. An online version of this release is available [here](#).

Dear Secretary Wilkie:

We write to ask the Department of Veterans Affairs (VA), which has the nation's largest health care system, to play a proactive role in supporting an expansive nationwide testing program for the Coronavirus Disease 2019 (COVID-19). VA should establish a national plan across VA to facilitate testing for the veteran community and VA health care providers, as one element of the national strategic testing plan required by the Paycheck Protection Program and Health Care Enhancement Act. As part of a larger national strategy, a VA effort focused on expansive testing is critical to achieving widespread testing across the nation.

State, local, tribal, and national leaders, as well as public health experts continue to reiterate that substantially more testing is needed for a safe, successful reopening of the economy. According to a report that the Edmond J. Safra Center for Ethics at Harvard University recently published, in order for the economy to begin to reopen safely we must dramatically increase testing and accompanying surveillance and tracing efforts. The authors of this report - which include 45 economists, social scientists, lawyers, and ethicists - suggest that we need to conduct up to 20 million tests every day across the nation by late July and fund at least 100,000 additional contact tracing workers to be prepared for stay-at-home orders to be lifted. Infectious disease epidemiologists have argued that the test-positivity rate is a critical factor in determining whether the testing level is sufficient, with the positivity rate tracking more closely to disease prevalence due to broader testing. According to the COVID Tracking Project, the United States currently has a test-

positivity rate of close to 20%. Globally, epidemiologists suggest the rate should be lower than 10%. For example, New Zealand, South Korea, and Germany have test-positivity rates of roughly 2%, 3%, and 6%, respectively. The United States should aim for a comparable rate. We have stated repeatedly that expansive nationwide testing is needed immediately.

In support of a nationwide testing strategy, VA can be a great asset in achieving the kind of testing scale-up necessary to safely open the economy successfully and stave off or address a second wave. As the largest integrated health care system in the country, overseeing more than 1,200 health care facilities across the United States, the Veterans Health Administration (VHA) is well-positioned to help our nation amplify our testing strategy. The VHA should ensure all veterans who need a test can obtain one, both those who are symptomatic and those who are asymptomatic but believe they have been exposed to COVID-19. A proactive national VA plan would include a description of the Agency's need for a centralized and prioritized process, dependent on expanded use of the Defense Production Act (DPA) by the federal government, for ordering supplies and testing kits and distribution of the testing kits beyond regional hospitals. This expansion would not only provide relief for the veteran community, but would also allow for non-VA hospitals to focus on caring for civilians and providing relief.

According to the Department's website, as of Tuesday, May 5, VA has seen 9,691 cumulative cases of COVID-19 and experienced 582 inpatient deaths and 23 staff deaths. VA has conducted approximately 107,000 tests. This consolidated national statistic does not allow for a localized understanding of the test-positivity rate. Given that VA is only offering tests for veterans at larger facilities, the rate likely disproportionately represents more densely populated areas.

In order to contribute to support testing at the federal level, and consequently the state and local level, we recommend VA produce a testing strategy that includes the following:

- All VA facilities, not only large hospitals, should have access to testing kits. VA Community-based Outpatient Clinics (CBOC) do not have testing capabilities currently. In many rural areas, CBOCs serve as primary care facilities for many veterans, and providing testing at these clinics will also alleviate strain on often smaller, rural hospitals. VA should also include Vet Centers and State Veterans Homes in this initiative, as appropriate.
- Allow symptomatic and asymptomatic veterans who need testing to gain

access to molecular, antigen, and/or serological tests. VA's Central Office continues to maintain a testing policy that instructs only veterans who are experiencing COVID-19 symptoms to seek testing, which no longer aligns with CDC guidelines. Emerging research suggests that asymptomatic individuals may be able to transmit the virus, necessitating proactive testing.

- Provide de-identified and disaggregated testing data on the VA's website. VA currently lists the total national tests conducted and total number positive test returns, and breaks down the positive cases and deaths by state and facility. It does not provide the number of tests per facility so it is not possible to calculate the test-positivity rates by week, regional, state, or facility. It should do so. This will allow public health officials to use this information to better understand the state of the pandemic in those areas. VA should also publish testing data by week and disaggregated by race, ethnicity, age, sex, disability status, and other factors.
- Plan to ensure a sufficient and appropriate workforce to administer tests and support isolation and quarantine for veterans and service providers, including adequate supplies of personal protective equipment for health care workers.

A VA plan must work in conjunction with a national testing strategy and rapid and widespread increase in availability of testing in the private sector. VA's existing national health care infrastructure has the ability to alleviate some of the testing burden faced by non-VA medical facilities while also ensuring VA leads in achieving widespread testing.

We recommend VA consider the measures detailed above and in so doing set the stage for the rest of the nation to do the same.

Sincerely,