## Deanna Larson Testimony – Field Hearing, Subcommittee on Communications, Technology, Innovation, and the Internet

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Hello, I am Deanna Larson, CEO of Avera eCARE, based in Sioux Falls, S.D.

We often think of broadband expansion in terms of needing to reach rural homes in underserved areas, creating equal access for doing online business and communication.

Yet in the realm of health care it's more than equal access – it's a matter of saving lives.

Twenty percent of Americans live and work in rural communities. Just like their urban counterparts, they experience cancer, heart disease, stroke, severe injuries and so on. In today's specialized health care system, people either must drive hundreds of miles, or forego the care they need.

Staffing each rural community with a full array of specialists is not feasible. There aren't enough specialists to go around, and each rural area does not offer the population needed to support these practices.

To bridge these gaps, Avera has developed a far-reaching telemedicine program that is looked to as a model worldwide. To our knowledge, no one else is doing what we're doing with the secure, interactive video capabilities that exist.

Avera recently celebrated 25 years of telemedicine. It began with consults with specialists in the city of Sioux Falls, with patients located in the rural community of Flandreau, S.D.

This one pilot back in 1993 demonstrated how we could successfully extend specialty care across the miles.

Today at Avera eCARE, we're not only doing this with medical specialty visits, but also in emergency care, pharmacy, ICU, long-term care and senior living communities, behavioral health, hospitalists, school health, correctional health and more.

Avera eCARE has become the world's most extensive telehealth network, reaching a total of 320 communities with 650 telemedicine services being offered across the 22-state footprint.

Our Emergency program, in which local teams can access immediate, around-the-clock support from emergency specialists, supports 15 percent of our nation's critical access hospitals.

I began by saying this is a matter of saving lives.

Because medicine is so advanced, it's impossible for one person to "do it all." There are many situations in which the right interventions at the right time make all the difference.

## For example:

 Through eCARE ICU, around-the-clock monitoring is an extra set of eyes to watch for negative trends. Timely intervention can turn things around, whether that's at 2 in the afternoon or 2 in the morning.

- Through eCARE Pharmacy, we prevent potentially deadly medication errors or adverse drug events.
- Through eCARE Emergency, we support local teams faced with life-threatening events such as stroke, heart attack or trauma.
- We're offering specialty and emergency support in medically underserved areas, including Indian reservation communities, to improve the disparities in access to vital health care services. These disparities result in greater risk of death due to cancer, diabetes and suicide.

Everyone is concerned about rising health care costs, and telemedicine is a promising solution.

Health care costs mount when patients suffer complications and escalation of illness that could have been prevented by timely intervention earlier in the disease process.

With the right physicians in the right specialties available to the patient virtually, we provide early intervention in a variety of settings: hospitals, clinics, long-term care facilities, assisted living communities and more. Addressing the urgent needs of patients when they first become ill reduces overflow into the tertiary facility.

We allow patients to stay close to home for care whenever possible by acting as an extension of their home care team.

We find that in over 80% of cases – when telemedicine is available – an expensive transfer is not necessary. More than \$3,800 is saved for each patient transfer avoided.

We also know that recruitment and retention of medical professionals, especially at rural sites, is an ongoing challenge for maintaining quality health services and local economies.

The practice of medicine is demanding. The repeating cadence of seeing patients all day, then doing rounds and being on call all night results in loss of life balance and ultimately, burnout.

eCARE offers providers collegiality and the support of a team, wherever they practice. We're providing a blueprint for how this can be accomplished anywhere.

We believe telehealth is the future of medicine. That's why we're training medical students – future physicians and advanced practice providers – how to deliver care in this way.

Without broadband, we wouldn't have these services that now exist. Without expanded broadband, we would leave some areas of our country without the advantage of these potentially lifesaving, moneysaving and career-saving services.

For these reasons, I'm proud to give testimony today in support of expanded broadband and the funding to provide it.