

A JOURNEY FROM INNOVATION TO IMPACT:

Hacking the VA Bureaucracy to Improve
Veteran Care and Save Taxpayers Dollars

VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Healthcare Innovation and Learning



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Program Impact

The collective work of VHA IE has been profoundly impactful in improving Veterans care and services and saving taxpayer dollars. In its 13 year history, VHA IE has supported over 1,511 field-based innovations that have reached approximately 22 million unique Veterans, realized approximately \$1.3 billion in current annual cost avoidance or savings, completed replications of national innovation practices that have reached all 170 of our VA medical centers (VAMC), built a VA digital community of practices through the Diffusion Marketplace that host over 285 innovations and promising practices, collaborated with over 101 private sector partners, provided experiential learning to 78 innovation fellows from across VHA, and trained over 30,000 VA frontline staff in innovation competencies. Additionally, the return on investment is high – for every \$1 invested in VHA IE, VHA saves or avoids \$48 in cost.

Aggregate VHA IE Impact:	
\$48	Average Annual Cost Savings & Avoidance Per \$1 Invested
\$1.3B	Average Annual Cost Savings & Avoidance

Table 1 VHA IE Return on Investment from FY 2021-FY 2024

FY	Cost Avoidance	Cost Savings	Net Value Gain	Program Investment*	Return on Investment	ROI per \$ Invested
FY21	\$ 565,963,499	\$ 692,955,889	\$ 1,258,919,388	\$ 47,000,000	\$ 1,203,946,446.55	\$ 25.61
FY22	\$ 543,582,533	\$ 756,438,391	\$ 1,300,020,924	\$ 24,500,000	\$ 1,267,547,982.96	\$ 51.74
FY23	\$ 574,872,667	\$ 756,440,490	\$ 1,331,313,157	\$ 22,500,000	\$ 1,300,840,215.57	\$ 57.81
FY24	\$ 768,628,154	\$ 756,441,647	\$ 1,517,096,860	\$ 30,100,000	\$ 1,486,996,860.00	\$ 56.71
Total Sum			\$ 5,603,397,755	\$ 124,100,000	\$ 5,479,297,755.00	N/A
Average Annual			\$ 1,400,849,439	\$ 31,025,000	\$ 1,369,824,439.87	\$ 47.97

*Program Investment is inclusive of all cost associated with VHA Innovation Ecosystem operations and innovation investment to include VHA IE staff salary, benefits, supplies, training, and travel, medical funds (0152/0160) investment in innovation activities and individuals, and IT funds (DEV/OM) investment in innovation activities.

The innovation coming out of VHA IE has been, and will continue to be, a bright spot of good news for VA. VHA IE’s impacts to direct Veteran care and services, improvements to VHA operational efficiencies, savings for American taxpayers, and collaborations with the private sector to bring new solutions and technologies to VA all align with this Administration’s goal of disrupting the status quo to deliver a better VA for Veterans, caregivers, and their families.

Engagement & Impact



170+
VHA Facilities Engaged
100% VA Medical Centers

30K
Employees Engaged

100+
Private Sector
Collaborations to Date

22M+
Veteran Impacts through
13 Years of VHA IE
Supported Innovations
(Aggregate)

What is VHA Innovation Ecosystem (IE)?

VHA IE is a program within the VHA Office of Healthcare Innovation and Learning which aligns under the VHA Office of Discovery, Education, and Affiliate Networks.

VHA IE Mission: To empower and leverage the collective power of innovation champions from across VA, academia, non-profit, and private sector to operationalize innovation in the nation's largest integrated health care system.

VHA IE's Vision: To be the catalyst for enabling the discovery and spread of mission-driven health care innovation that exceeds expectations, restores hope, and builds trust within the Veteran community.

VHA Innovation Ecosystem's definition of innovation:

Discovery operationalized to deliver value.

Brand new to VA; could originate as a novel idea, research, human-centered design, market research, private sector solution, etc.

Put into practical application within VA operations; not some concept on paper or prototype on a shelf

Positive impact to VA or Veterans can be directly measured

VHA Innovation Ecosystem Pathways to Impact

VHA Innovation Ecosystem empowers and leverages the collective power of innovation champions from a cross VA, academia, non-profit, and private sector to operationalize innovation in the Nation's largest integrated health care system.

VHA IE has several different distinct, but complementary, portfolios and sub-programs that focus on different types of Veteran-facing innovation within the innovation lifecycle:

Internal Innovations Pathways

- **Innovators Network (iNET):** Empowers frontline VA employees to develop and implement solutions embedding innovation across VHA. With 45+ Innovation Specialists at 40+ facilities nationwide, iNET has trained over approximately 15,000 VA employees on innovation competencies, enabled 1,402 early-stage innovation investments, and is supporting 218 active efforts at VA medical centers.
- **Diffusion of Excellence (DoE):** Delivers a repeatable process for rapidly scaling frontline innovations and promising practices across VA. Through competitions such as their annual VHA Shark Tank, which has received over 3,500 submissions from VA medical centers across the nation. DoE has led 107 innovations and promising practices through facilitated



Figure 1 Map of Innovators Network Sites

replication, cumulatively leading to approximately 109 replications diffused across VA, impacting over 9 million Veterans and is currently supporting 10 active replication efforts at VA medical centers nationwide. The [Diffusion Marketplace](#) showcases 285 innovations that are available for adoption from any VA medical center that is interested.

- ***Fellowships and Workforce Transformation:*** Provides experiential learning opportunities to develop the VA health care leaders of tomorrow through focused innovation skill development. The program has supported 78 fellows—34 Innovation Fellows, 44 MIT Catalyst Fellows—and 23 private sector collaborators, and is actively supporting six high-impact efforts in 2025.

External Innovations Pathways

- ***National Centers for Innovation to Impact (NCi2I):*** Translates breakthrough solutions for Veterans at the intersection of research, technology, and clinical care to address some of VHA’s most pressing challenges in collaboration with the private sector. VHA IE has five geographically diverse centers, each with their own innovation specialty, located at either a VA medical center or VISN (Palo Alto, VISN 1, Richmond, Tampa, and VISN 10). NCi2I is actively managing 132 high-impact projects in 2025 to improve Veteran care and services.

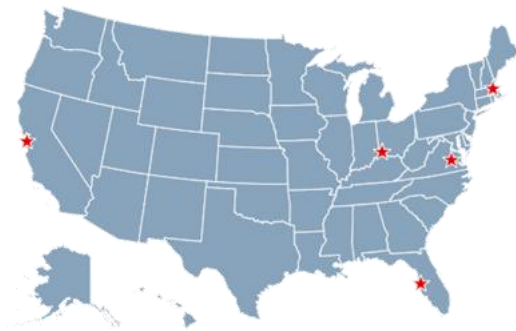


Figure 2 Map of National Centers for Innovation to Impact Locations

- ***Community Engagement (CE):*** Enables VA collaboration with academia, private sector, and nonprofits to rapidly operationalize Veteran-focused innovations. CE collaborates with these entities through VA Pathfinder, Open Innovation, and Veterans Service Organizations (VSO) engagement.

[VA Pathfinder](#), VA's only digital front door for external entities to submit ideas for improving Veterans' health care. Since VA Pathfinder's launch in 2022, 1,542 submissions have been received, and the number of submissions has increased significantly with 50% coming directly from Veterans. Artificial Intelligence tools can be incorporated into the existing Pathfinder processes to more efficiently identify and solve the most pressing issues for Veterans and the private sector. Leveraging VHA IE's Federal laboratory status, CE has successfully executed 101 different no-cost collaborations between the private sector and frontline VA innovators in the field to advance Veteran-facing solutions.

CE attracts non-traditional partners from the private sector through Open Innovation engagements and events. Open Innovation is a strategy used to attract non-traditional partners from academia, industry, and nonprofit communities to join VA in helping to solve some of VHA's most pressing health care challenges. Strategies include federal prize authority to conduct challenges and competitions that focus on VA and Veteran specific topics, hack-a-thons and make-a-thons to codevelop solutions with a broad community of experts, and BAAs to bring solutions into VA for pilots and broader deployment at scale.

VHA IE collaborates with VSOs such as The Big 6 and other Veteran organizations to raise awareness of its current initiatives and explore opportunities for collaboration. The close relationships with VSOs ensure that the "Voice of the Veteran" is incorporated in early-stage projects and that the needs of Veterans are being incorporated into solutions.

VHA Innovation Ecosystem Operating Model

The VHA IE Operating Model provides a process to amplify grassroots and strategic innovation across the organization. It provides a structured and repeatable process for managing innovation across the entire lifecycle. It leverages the collective power of innovation champions from across VA, non-profit, and the private sector to operationalize innovation in the nation's largest integrated health care system.

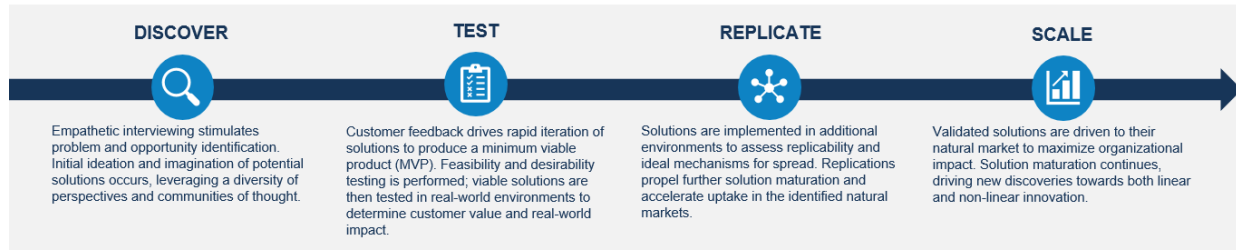


Figure 3 VHA IE Operating Model

VHA's Value Prop: Assets that Uniquely Position VA to Drive Innovation

VA should be the partner of choice to drive collaborative breakthroughs that transform healthcare for Veterans and America at large. VA is uniquely positioned to drive innovation with its assets.

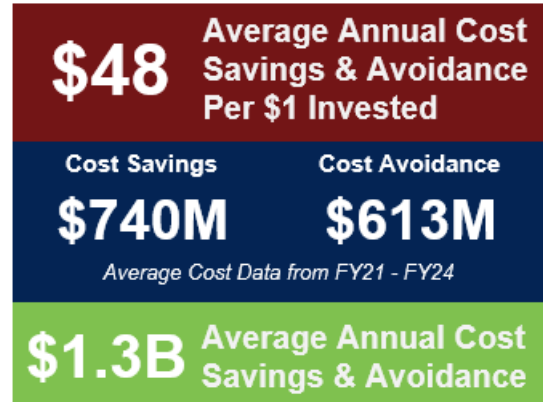


Methodology for Impact Calculations

VHA IE contains a wide range of innovations improving various components of Veteran care and health system operations. Defining and quantifying the impact of the projects relies on methodologies from various disciplines.

Throughout the project impacts sections, the following terms are used:

- **The Percent of Target Market:** Represents the number of VA facilities that have adopted the initiative out of the total eligible VA facilities.
- **Enterprise-wide:** Initiatives that have achieved 100% of their target market (e.g., all 170 VA medical centers, scaled across all Spinal Cord Injury Centers, or deployed across national electronic health record).
- **VA Adoption Sites:** Includes all VHA facilities (assumption) unless specifically defined as “VA Medical Center” or “VHA Outpatient Clinics”.
- **Cost Savings:** Realized amount of current or ongoing spending reduced (e.g., saving costs with a streamlined, automated eyeglass ordering process). Reported as total realized savings or annual realized savings.
- **Cost Avoidance:** Amount of potential future spending mitigated (e.g., amount saved if all intended users used the innovation). Reported as total avoidance or annual avoidance.
- **Veterans Impacted:** Total number of Veterans who have used the service/innovation, or the number of Veterans who could benefit from a developing innovation.



For the purposes of cost savings and cost avoidance calculations, direct cost savings were examined. For instance, the calculations include changes in staff costs or quantify hours saved. However, this evaluation did not include indirect costs savings, which are likely to be even more substantial. For instance, improvements to cancer screen likely increases the immediate cost of services if more individual are screened early and often. However, cancer screenings also lead to earlier cancer stages at diagnosis, which both improve Veteran care, and indirectly reduce the cost of cancer treatment. Because of the complete methodologies needed to accurately calculate these savings, the current evaluation does not include these indirect cost savings.

The direct costs savings, as reported in the following section, are astounding. The data utilized for this evaluation included data extrapolated from VA surveillance data, including the incidence of infections and disease, published VA data on the salaries of clinical and non-clinical staff by region, and staffing level requirements as stipulated by VA policy. Additional data includes the number of Veterans served by innovations as recorded by innovation dashboards, and the costs of innovations and components. For all projects included in this report where cost savings or cost avoidance calculations are presented, the equations used are included.

Figure 4, below, displays the net value gain generated from VHA IE projects. The net value is further broken down to indicate if the value was generated from cost savings or cost avoidance.

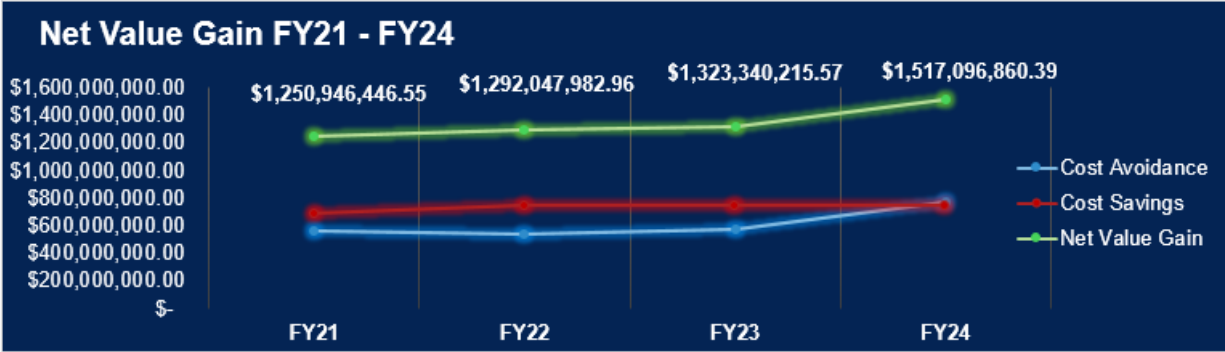


Figure 4: Net Value from VHA IE Projects from FY 2021-FY 2024

Select Innovation Projects & Impact

This section describes several high-impact VHA IE innovations, representing the wide array of projects supported. These projects range in ease of implementation, from implementing a 30-second checklist to weigh the benefits and risks of surgery, to designing an automated system to release time-sensitive laboratory results.

Each VHA IE project is categorized into one of six defined impact categories, with external collaborations further notated. These markers are displayed on each project description.

The innovations also yield a variety of outcomes, from improving Veteran independence in skilled nursing facilities to saving \$22 million annual by discontinuing unnecessary medications. When projects yield direct cost savings or avoidance that can be clearly calculated, the savings is included in the project description. Table 2 lists the cost savings or avoidance for each of the selected projects included in this report from FY21-FY24.

Impact Categories

Access to Care	<i>Reducing barriers to care and delivering care</i>
Saving Veteran Lives	<i>Accelerating VA's efforts to prevent loss of Veteran lives</i>
Changing Veteran Lives	<i>Improving health and well-being for Veterans and their daily lives</i>
Saving Taxpayer Dollars	<i>Efficiently using taxpayer dollars to deliver Veteran care</i>
Streamlining Operations	<i>Optimizing VA productivity and operational efficiencies</i>
Leveraging Emerging Technologies	<i>Exploring next-generation technology for improved Veteran care</i>

External Collaboration

Industry Collaboration	<i>Engaging with private sector to bring the best solutions to VA</i>
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Table 2 VHA IE Projects with Cost Savings or Avoidance from FY 2021-FY 2024

Project	Cost: Savings or Avoidance	FY21	FY22	FY23	FY24
VA Rideshare Program	Avoidance	\$300,195,000.00			
Mobile Prosthetics and Orthotics Care (MoPOC)	Avoidance	\$5,559,025.80	\$10,006,246.44	\$2,223,610.32	
SCOUTS	Avoidance	\$1,596,656.00	\$3,201,216.00	\$2,094,623.00	\$4,454,037.00
VIONE	Avoidance	\$45,361,347.22	\$60,840,547.64	\$82,631,267.92	\$84,204,831.56
Fall Prevention Socks	Avoidance	\$200,233.09	\$222,101.04	\$327,364.61	\$2,483,604.73
FastTrack Pharmacogenomics Results	Avoidance				\$219,966,250.00
HAPPEN	Avoidance	\$213,051,236.44	\$469,312,421.84	\$487,595,801.28	\$457,519,430.90
Physical Therapy in Primary Care	Savings	\$693,000.00	\$693,000.00	\$693,000.00	\$693,000.00
VA Rideshare Program	Savings	\$2,172,500.00			
VHA Uber Health Connect Initiative	Savings		\$65,565,959.00	\$65,565,959.00	\$65,565,959.00
Park a Prescription	Savings	\$22,000,000.00	\$22,000,000.00	\$22,000,000.00	\$22,000,000.00
4-SIGHT	Savings	\$6,920,793.00	\$6,920,793.00	\$6,920,793.00	\$6,920,793.00
FLOW System	Savings		\$89,043.00	\$91,141.44	\$92,299.20
CPRS Booster	Savings	\$547,000,000.00	\$547,000,000.00	\$547,000,000.00	\$547,000,000.00
The Initiative to End Diabetic Limb Loss	Savings	\$106,196,655.00	\$106,196,655.00	\$106,196,655.00	\$106,196,655.00
TOTAL		\$1,250,946,446.55	\$1,292,047,982.96	\$1,323,340,215.57	\$1,517,096,860.39

Expiration Term of Service Sponsorship Program (ETS-SP)

[\(Learn more\)](#)

Access to Care

Industry Collaboration

ORIGIN SITE: Bronx VA Medical Center in collaboration with the VHA National Center for Healthcare Advancement and Partnership

DESCRIPTION: Suicide deaths among U.S. Veterans remain at epidemic levels among post-9/11 Veterans with completed suicide rates among transitioning service members (TSMs) ages 18-34 years averaging 2-3 times higher than non-Veterans of the same age in the 12-months following separation from the military. ETS-SP is an evidence-based approach, public-private collaboration between Bronx VAMC, VHA National Center for Healthcare Advancement and Partnership and non-profit, Onward Ops, that was designed to reduce adverse transition outcomes and suicide risk in new Veterans by implementing VA's public health approach to suicide by: 1) proactively screening TSMs for transition needs and risks prior to separation; 2) using predictive analytics to match TSM risk levels appropriate interventions; 3) facilitating enrollment to VHA health care services through a clinical pathway; and 4) offering enrollment to Onward Ops' transition platform that enables TSMs to access VA-certified peer community-based sponsors, personalized transition resources, and connection to organizations in the Veteran's destination community.

IMPACT: Currently, **120 VAMCs** actively use this resource for over **21,000 New Veterans**, generating over **\$6 million** in Veterans Equitable Resource Allocation reimbursement.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: N/A

QUOTATION: *"I feel like I was being bounced around like a basketball prior to this. You have given me hope and now I do not feel like I have been forgotten."* New Veteran served by ETS-SP, 2025

VHA-Uber Health Connect Initiative

[\(Learn more\)](#)

Access to Care

Industry Collaboration

ORIGIN SITE: Memphis VA Medical Center

DESCRIPTION: Every year, transportation barriers result in 1.8 million missed VA medical appointments, costing VA nearly \$4.4 billion annually and reducing Veterans' overall health outcomes. In collaboration with VHA IE, Veteran Transportation Program, and Uber Health, the VHA-Uber Health Connect Initiative (VUHC), originating at the Memphis VAMC, was created to offer a supplemental transportation option for Veterans and caregivers to get to and from care. VUHC supplements VA's existing Beneficiary Travel Program by offering rideshare services to eligible Veterans through a convenient HIPAA-compliant platform.

IMPACT: The solution is in use at over **110 VAMCs**, completed over **450,000 rides**, and has generated a total **cost savings exceeding \$196 million**.

COST SAVINGS CALCULATIONS: The total cost savings for this program, as measured from January 1, 2022, through March 31, 2024, is \$196.7 million. The cost savings for the top three appointment types included \$57,356,257 for specialty care appointments (104,792 appointments), \$18,348,566 for dialysis appointments (34,182 appointments), and \$18,369,623 for primary care appointments (33,114 appointments). All avoided missed appointments generated \$136,532,662 in cost savings. The program generated an additional \$60,165,215 in cost savings from emergency department and inpatient discharges, where the Veteran was able to return home earlier because of the provided transportation after being medically cleared.

AWARDS & RECOGNITION: 2021 VHA Innovation Ecosystem Fellowship

QUOTATION: *"VUHC is a gamechanger, because I no longer have to rely solely on the community for transportation, allowing me to schedule more appointments."* Veteran in Tampa, Florida

Mailed FIT

Access to Care

[\(Learn more\)](#)

ORIGIN SITE: VHA National Gastroenterology and Hepatology Program

DESCRIPTION: Colorectal cancer (CRC) is the second leading cause of cancer death in the U.S. and 500,000 Veterans are diagnosed each year. Screenings have proven to reduce CRC incidence and mortality, yet hundreds of thousands of Veterans remain unscreened. To expand access to life-saving screening, VHA National Gastroenterology and Hepatology Program launched an effort to mail Fecal Immunochemical Test (FIT) kits—which check for blood in the stool that can't be seen by the naked eye—directly to Veterans so they can complete CRC screening from their homes. This initiative addresses limited access to gastroenterological care and pandemic-related screening disruptions, all while reducing the burden on primary care providers by offering a convenient asynchronous screening option.

IMPACT: This solution is available at **96 VAMCs**, has enrolled over **456,000 Veterans**, and has **increased screening rates by 8%**.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2021 VHA Shark Tank Competition Winner

QUOTATION: *"It's a good way to push people, you know, to get these tests done. I thought it was a good incentive, I should say; a good way to get people more proactive about their health and about colon cancer."*
Veteran in Durham, North Carolina

VA Rideshare Program

Access to Care

[\(Learn more\)](#)

ORIGIN SITE: VA Boston Health Care System; Supported by VHA Innovation Ecosystem's New England Center for Innovation Excellence (VISN 1)

DESCRIPTION: VA is unable to staff and source consistent, reliable transportation for Veterans. Strong evidence shows that non-medical emergency medical transportation increases access, improves health outcomes, and decreases costs. Though VA has provided a variety of transportation services to Veterans for many years, it remains a barrier that results in delayed or missed care, dissatisfied Veterans, adverse outcomes and higher costs to VA. During the COVID-19 pandemic, the VA Rideshare Program ensured that homeless Veterans and Veterans ineligible for Beneficiary Travel had access to transportation for employment, health care, housing, and food security.

IMPACT: The initiative reduced medically unnecessary inpatient stays and missed appointments, **saving \$2.17 million and avoiding \$300 million**, respectively.¹

COST SAVINGS CALCULATIONS: Authorities for this program were authorized under the Federal COVID-19 Public Health Emergency (PHE). The program sunset upon the 5/11/23 expiration of the PHE but was recently reauthorized under the Senator Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act. Through the program, 5,000 rides facilitated same day discharge from the emergency room avoiding unnecessary hospitalizations, 30,000 rides ensured access to food banks, 3,000 rides allowed Veterans to receive immediate shelter and transportation for dialysis services. The program generated \$24.8 million in annual cost savings by reducing the length of time Veterans remained at the hospital once medically cleared for discharge. The costs savings was calculated by taking the cost of additional cost of additional inpatient stays avoided by providing a ride home and subtracting the cost of the ride home. The price was calculated as price per mile by the total number of miles per trip. The program also generated nearly \$900 million in cost avoidance by reducing missed appointments among Veterans. The cost avoidance calculation took the number of missed appointments by the average cost of the appointment. The number of missed appointments included 315,000 appointments where Veterans had no means of transportation to the appointment other than the provided rideshare.

AWARDS & RECOGNITION: 2020 VHA Shark Tank Competition Winner, 2022 VA Center for Development and Civic Engagement Spirit Corporate Recruitment Award, 2021 High Reliability HeRO Award, 2022 ICARE Award, 2023 G2X Disruptive Tech Award

QUOTATION: *"Prior to implementing the rideshare program, some Veterans would be admitted for inpatient treatment and then, at discharge, not be able to find a way home. We'd have to extend their stay with us until transportation services could be arranged for them."* VA Nurse Manager in Orlando, Florida

¹ Authorities for this program were authorized under the Federal COVID-19 Public Health Emergency (PHE). The program sunset upon the 5/11/23 expiration of the PHE but was recently reauthorized under the Senator Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act.

Physical Therapy in Primary Care

Access to Care

[\(Learn more\)](#)

ORIGIN SITE: Tampa VA Medical Center

DESCRIPTION: Traditionally, Veterans experiencing common musculoskeletal or mobility issues have needed to spend weeks visiting numerous specialists before getting an appointment with a physical therapist. Due to these hurdles, only 9-12% of Veterans follow up on their doctors' recommendations to see a physical therapist. VHA's Office of Rehabilitation and Prosthetics Services, in conjunction with the Office of Primary Care, developed a proactive and personalized approach to same-day physical therapy for Veterans through the physical therapy (PT) in Patient Aligned Care Teams program. Now, Veterans can receive all the services they need at one appointment and follow up with virtual visits. Earlier access to PT offloads primary care providers and decreases referrals to specialty care and radiology, improving efficiency and cost savings.

IMPACT: This solution is available at **111 VAMCs** and served **129,000 Veterans** with an **annual cost savings of \$693,000**.

COST SAVINGS CALCULATIONS: This project yields a total annual cost savings of \$692,229. The cost savings calculation includes the money saved through the reduction in radiological scans generated through the program by providing physical therapy in the primary care appointment. This includes reducing MRI scans by 1.8%, reducing CT scans by 2.3%, reducing neurology consults by 1.7%, and reducing orthopedics consults by 5.6%.

AWARDS & RECOGNITION: 2020 VHA Shark Tank Competition Winner, VA Midwest Health Care Network; VHA Office of Rural Health Enterprise-Wide Initiative

QUOTATION: *"I was having an ankle problem, so I went to my primary care doctor. He took me next door to the physical therapist, and she immediately treated me. In three days, I was back to my cherished daily walk with my wife. Without that service it would have been a month before I received treatment and probably longer until I was back in action."* Veteran in Gainesville, Florida

Mobile Prosthetics and Orthotics Care (MoPOC)

Access to Care

[\(Learn more\)](#)

ORIGIN SITE: VA VISN 20 Prosthetics and Sensory Aids Services, 2019-2020 Innovators Network Investment; 2020-2021 VHA Innovation Ecosystem Fellowship

DESCRIPTION: Veterans may require Orthotic & Prosthetic (O&P) care to treat amputation and other mobility-disabilities. They often struggle to receive these services because the simple act of traveling to an appointment is difficult. Rural Veterans have the most difficult time since these services are offered exclusively at VAMCs in large cities. Through MoPOC, VA O&P providers travel to rural VA Community-Based Outpatient Clinics (CBOCs) on a regular weekly schedule and as needed, to Veterans' homes. MoPOC currently provides care at 55 CBOCs. MoPOC providers travel in mobile O&P labs, eliminating the need for costly brick-and-mortar labs, and giving VA the flexibility to provide care wherever it's needed. On average, MoPOC costs less than community care, while reducing Veteran travel and associated expenses. 73% of Veterans served by MoPOC live in rural communities.

IMPACT: This solution is available at **16 VAMCs**, serves **11,221 Veterans**, and results in **\$1.1 million in annual cost avoidance**.

COST SAVINGS CALCULATIONS: This solution generates \$1,100,000 in annual cost avoidance. The cost avoidance calculation accounts for the difference in the cost of providing care through the program compared to the cost of procuring the services through Community Care. According to billing codes, the cost of care provided in the community is \$5,400,394, compared to the cost of \$4,288,588.82 for the MoPOC program. The cost of the program includes the cost of the full-time equivalent (FTE) salary, tools, transportation, and the limb and brace component costs. The cost avoidance calculation does not account for the decrease in transportation cost paid by VA for beneficiary-eligible travel, nor does it account for increases in the quality of care provided through the program.

AWARDS & RECOGNITION: 2022 Dr. Robert L. Jesse Award for Excellence in Innovation; 2021 VHA Office of Rural Health Enterprise-Wide Initiative

QUOTATION: *"My brace has allowed me to be more stable when I'm standing and walking around...she trimmed it down so I can wear it with my dress shoes for church...that was important for me."* Veteran

Supporting Community, Outpatient, Urgent Care and Telehealth Services (SCOUTS)



[\(Learn more\)](#)

ORIGIN SITE: VHA Office of Primary Care

DESCRIPTION: Older or medically complex Veterans visit VA Emergency Departments (ED) more than one million times each year and billions of dollars are spent annually on community emergency care for Veterans. In general, compared to younger patients, older adults experience higher ED admission rates and more frequent ED revisits. SCOUTS is a post emergency department complementary service that utilizes intermediate care technicians (ICTs) to support care transitions by ensuring unmet care needs, geriatric syndromes, and digital divide concerns are addressed in an acute time frame. SCOUTS results in cost avoidance from reduced readmissions and cost savings from reduced community care use per patient.

IMPACT: This solution is adopted at **12 adoption sites**, serves **3,441+ Veterans**, and has resulted in **\$10 million in total cost savings** with another **\$3.2 million in cost avoidance**.

COST SAVINGS CALCULATIONS: The total cost avoidance for this solution to date is \$13,602,273. The cost avoidance calculation compares the actual cost to VA for the Community Care of actual SCOUTS patients compared to propensity match controls in the first year of the SCOUTS pilot (May 2021- 2022). Propensity score control matching methodology, in the case of SCOUTS, identified patients outside of the pilot who had the same characteristics known to impact medical care utilization as those in the pilot. This statistical tool helps to reduce the potential bias that those enrolled in the pilot were simply healthier than their peers. In the study period, the control group had a 30-day admit rate of 26.9%, compared to the SCOUTS admit rate of 11.7%, which represents an absolute decrease of 15.2%. The final cost calculation is the product of observed decreased in hospital admissions by the number of SCOUTS patients by average cost of admission. Based on 15.2% decrease admit rate, estimated 523 admissions avoided for the 3,441 SCOUTS patients through March 31, 2025. Thus 523 admissions avoided at \$19,736/admission and saved \$952.43 per patient on Community Care costs in 30 days of ED visit results in the total net cost savings and avoidance.

FY	Cost Savings/Avoidance	Patients
FY 2021	\$1,596,656	404
FY 2022	\$3,201,216	810
FY 2023	\$2,094,623	530
FY 2024	\$4,454,037	1,127
Total	\$11,346,532	2,871

AWARDS & RECOGNITION: 2023 VHA Shark Tank Competition Winner; 2025 VHA Innovation Ecosystem Fellowship; VHA Office of Rural Health Enterprise-Wide Initiative

QUOTATION: *“Veterans feel they’re worth somebody’s time and are cared for in between appointments. There’s mutual respect and appreciation.”* Albuquerque VA ICT

My Reasons for Living Lockbox

Saving Veteran Lives

[\(Learn more\)](#)

ORIGIN SITE: VA Hudson Valley Healthcare System

DESCRIPTION: Firearm suicide deaths made up 73% of overall Veteran suicides in 2022. Increasing the time and distance between a person with thoughts of suicide and their access to lethal means can reduce their suicide risk and potentially save their life. My Reasons for Living Lockbox is a suicide prevention tool to help Veterans in crisis choose life. High-risk Veterans customize a lockbox, often used for firearm storage, with reminders of their reasons for living—engaging all five senses to create barriers to impulsive actions. The reminders create critical extra seconds that can lead to second thoughts and ultimately save lives. The lockbox is meant to supplement existing suicide prevention and lethal means safety resources provided by VA.

IMPACT: This solution is available at **six VAMCs**, involved **45 Veterans** in the project development, and projects building **200+ lockboxes in 2025**.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2022 Innovators Network Investment

QUOTATION: *“I need a reminder of all the little things that keep me going that turn into the big things that are so important to live for. This Lockbox will save the lives of people like me who struggle to find reasons to keep going.”* Anonymous Veteran

The Surgical Pause

[\(Learn more\)](#)

ORIGIN SITE: Omaha VA Medical Center

DESCRIPTION: Data demonstrates there is no such thing as low risk surgery in high risk, frail patients. one in three frail Veterans die within six months of a minor surgery. There was a need for an easy, standardized tool to inform the selection of high-risk patients considering elective surgery. The Surgical Pause utilizes the Risk Analysis Index (RAI) to screen Veterans for frailty in 30 seconds, flagging high risk Veterans so the surgical team can ensure the proposed treatment plans mitigate known risks and align with the Veterans' life goals. By bringing additional resources to frail patients, the Surgical Pause improves outcomes and ensures Veterans receive the safest, most personalized, and optimized care.

IMPACT: This solution is available at over **50 VAMCs**, takes **30 seconds**, and has been utilized for **230,000 Veterans**.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2019 VHA Shark Tank Competition Winner, 2023 John M. Eisenberg National Level Innovation in Patient Safety and Quality Award; 2023 Under Secretary's Award for Outstanding Achievement in Health Services Research

QUOTATION: *"It's important for surgeons to assess their patients in a systematic way to see if there are risks, determine whether they can be lessened, and ensure that patient expectations are realistic and aligned with their goals."* Surgeon at Pittsburgh VAMC

Veterans Mobile Evaluation Team

[\(Learn more\)](#)

ORIGIN SITE: Long Beach VA Medical Center

DESCRIPTION: Most Veterans who committed suicide were not receiving services at VA. There is a need to assess mental health in the event of a crisis to increase trust and potentially avoid incarceration or involuntary hospitalization. Veterans Mobile Evaluation Team (VMET) assists in responding to calls involving local law enforcement interactions with Veterans in crisis. The team includes a VA mental health clinician and VA police officer and is a first of its kind VA program to help reduce the number of Veteran suicides and increase participation in mental health treatment. Veterans eligible for basic VA care, have access to follow up care and wrap around services.

IMPACT: The solution is available at **eight VA sites**, and to date has served over **1,051 Veterans**, and responded to **8,000+ calls for service**.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2019 VHA Shark Tank Competition Winner

QUOTATION: *“One of our Veterans said the immediate support provided by our team helped him feel valued and understood during his critical moment. The Veteran also noted that the safety plan and resources that we gave him and who we connected them with made a significant difference in his journey towards stability and recovery.”* Central Ohio VA Police Chief

Opioid Overdose Education & Naloxone Distribution

Saving Veteran Lives

[\(Learn more\)](#)

ORIGIN SITE: VA Boston Healthcare System

DESCRIPTION: Veterans are twice as likely to die from accidental overdose compared to non-Veterans. Opioid overdose mortality is preventable with timely and sufficient administration of Naloxone, a safe and effective opioid overdose reversal medication. Opioid Overdose Education and Naloxone Distribution addresses overdose prevention in three elements: (1) proactively educating Veterans on how to prevent, recognize, and respond to an opioid overdose; (2) equipping VA police with intranasal Naloxone; and (3) placing Naloxone in select automated external defibrillator (AED) cabinets in high traffic areas in VAMCs.

IMPACT: This solution is available enterprise-wide, served **650,000 Veterans**, and resulted in **6,400+ Veteran lives** saved through overdose reversal.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2015 VHA Shark Tank Competition Winner; 2020 John M. Eisenberg National Level Innovation in Patient Safety and Quality Award

QUOTATION: *“Had 5 more minutes lapsed without naloxone intervention and the patient more than likely would have died.”* VA Emergency Department Provider after VA Police Officer Saved Veteran in Parking Lot

REACH VET

[\(Learn more\)](#)

ORIGIN SITE: VHA Office of Mental Health & Suicide Prevention

DESCRIPTION: Innovation Investment in collaboration with the former VHA Office of Mental Health and Suicide Prevention, REACH VET is an algorithm that constantly scans CPRS data to predict and identify Veterans with the highest statistical rate of suicide based on social, economic, and physical conditions of a Veteran's environment and clinical data.

IMPACT: REACH VET has **increased outreach attempts to high-risk Veterans by 126%** with **91% successful outreach** and **113% increase in care evaluations** performed.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2017 VHA Innovation Investment

QUOTATION: *"REACH VET represents an innovative program to identify Veterans at risk for negative outcomes. It allows providers to re-evaluate or re-engage Vets in care to address their needs."* Clinical Psychologist in Central Arkansas VA Health Care System

Technology Enabled Respite Homecare Model (TERHM)

[\(Learn more\)](#)

Changing Veteran Lives

Industry Collaboration

ORIGIN SITES: VA Boston Health Care System, Washington DC VA Medical Center, Manchester VA Medical Center, Nashville VA Medical Center, Central Virginia VA Health Care System, and Orlando VA Healthcare System

DESCRIPTION: Across VA, there are 5.5 million Veteran caregivers, of which 70% are spouses or partners. For primary caregivers, the constant demands of caregiving can lead to physical and emotional symptoms of burnout. While VA offers temporary in-home care relief options, many Veterans choose to rely on trusted friends and family members for care, mainly in rural areas with limited resources. TERHM is a proof of concept that uses a CareLinX model to easily connect eligible Veterans and caregivers to lower cost home care services. Programs that offer respite care, like TERHM, provide primary caregivers with the opportunity to take a break and attend to their own needs while someone the Veteran trusts attend to the needs of the Veteran.

IMPACT: This solution is available at **six VAMCs**, is **recommended by Veterans 92%** of the time, and results in an **average wage increase of \$3.52 an hour**.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: Pilot supported by VHA Innovation Ecosystem with Office of Geriatrics and Extended Care

QUOTATION: *“My husband requires around the clock support. Our home health aide comes in everyday from 9 to 5 and we couldn’t do it without her, but there are times when I need more support so that I can rest, care for my own needs, or travel to visit my family across the country. The ability for us to choose another trusted caregiver to help my husband when I’m away gives both of us peace of mind.”* Caregiver of U.S. Navy Veteran

Advanced Environmental Controls (AEC)

[\(Learn more\)](#)

Changing Veteran Lives

ORIGIN SITE: Memphis VA Medical Center

DESCRIPTION: Over 27,000 Veterans receive care for spinal cord injuries (SCI) and related disorders each year. VAMCs with SCI units have unique requirements for Veterans unable to use their hands or voice. To support this need, assistive technology devices called environmental controls units (ECUs) are necessary to improve the independence and quality of life of Veterans with SCI by providing them with the means to better control their hospital surroundings. Given the rugged nature of a hospital environment, many of the industrial grade ECUs are very limited as to what they can control and the control inputs available to the Veteran. This creates a suboptimal experience for the Veteran and VA nursing staff who must always be available for the most basic task (e.g., adjust the bed and lights, control TV, assist with phone calls). AEC retrofitted the most advanced AEC unit on the market for industrial application in a hospital setting. This AEC unit enables Veterans with SCI to perform important tasks independently, using a variety of advanced input technologies, including voice activation, touch screen, sip-and-puff straw, head-tracking, and eye gaze tracking. This innovation was prototyped and refined at Memphis VAMC and then rolled out to every inpatient and long-term bed at 21 of the 25 VHA SCI Centers nationwide. This AEC uses the latest technology to provide control over three times as many tasks as previously installed ECUs, resulting in an enhanced experience for both Veterans and VA nursing staff.

IMPACT: AEC is adopted at **21 of the 25 VA SCI Units**, saving **480 nursing care hours per year per patient**, and generating **\$60.3 million in annual cost savings**.

COST SAVINGS CALCULATIONS: Nurse staff and site leadership report each nurse saving two hours per day due (25% of an eight-hour nursing shift) to the AEC program, leading to an annual cost savings of \$60,307,984 since program implementation. The total cost savings is calculated by assuming a 25%-time savings per shift at a Median Step 1 RN Salary (\$99,889). The resulting dollar amount is then multiplied by the minimum number of nursing shifts required by [VHA Directive 1176](#) for SCI/D Centers by bed type. The estimate full-time equivalent employees (FTEE) required to staff the 830 acute SCI unit beds, and 170 long-term SCI unit beds is 2,415 nursing FTE. This directive mandates that in inpatient acute/sustaining care, nurse staffing must be calculated based on 125 FTEE per 50 operating acute/sustaining beds. This equates to 2.5 FTEE per operating bed, calculated by assuming 585 hours of patient care required per 50 operating beds in a facility. Further, for inpatient staffing (long-term care), minimal nurse staffing must be calculated based on 60 FTEE for 30 operating beds. This equates to 2.0 FTEE per operating bed.

AWARDS & RECOGNITION: 2016 VHA Innovation Investment

QUOTATION: *"The ECU [environmental control unit] offers entertainment and the availability to stay in touch."* Veteran in Acute Care

Self-Leveling Walker

Changing Veteran Lives

[\(Learn more\)](#)

ORIGIN SITE: Cleveland VA Medical Center

DESCRIPTION: Veterans who use walkers often confront curbs, steps, and ramps. Mobility is an important rehabilitation goal, and many Veterans cannot be discharged to their home if they are unable to master the strategies for stair ascent/descent. The Self-Leveling Walker helps fulfill an unmet market need giving patients increased independence to safely negotiate stairs and inclines while also minimizing the cost of home adaptations and extended stays in rehabilitation settings for training. The product was licensed for manufacturing and sales by AliMed and expected to be available in 2025.

IMPACT: This solution **minimizes the cost of home adoptions** for Veterans and is available on the VA Intrapreneurial Product Marketplace.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2017 Innovators Network Investment, 2019 ACT-IAC Innovation in Healthcare Award Winner

QUOTATION: *“The Self-Leveling Walker provides an easy, safe solution. This will allow our Veterans to go home sooner and not require expensive home modifications.”* Physical Therapist from Cleveland VA Medical Center

Veterans Socials

Changing Veteran Lives

[\(Learn more\)](#)

ORIGIN SITE: VA Bedford Healthcare System

DESCRIPTION: Traditional Veteran outreach strategies are limited in their ability to reach all sectors of the Veteran population and stigma about mental health and substance use disorders may prevent many from seeking help. Veterans Socials act as an upstream suicide prevention tool by bolstering social interactions and equipping Veteran communities with the knowledge, tools, and resources necessary to address mental health concerns and make referrals to sources of care, supporting Veterans in their own community. Since 2014, weekly socials have increased between up to 60% each year, and 75%-85% are sustained for over a year. With support from a VA Peer Support Coordinator, all socials are run by Veterans off VA property, giving socials ownership to Veterans.

IMPACT: This solution is a **low-cost, high-impact innovation** with over **100 VAMCs** participating and serving over **1,150 Veterans per month**.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2024 VHA Innovation Ecosystem Fellowship; Supported by VHA Offices of Mental Health and Suicide Prevention, Rural Health, and VA Veterans Experience Office

QUOTATION: *“Research shows that individuals who feel a sense of belonging and closeness to others—those who are socially connected—are physically and mentally healthier.”* Clinical Psychologist, Education Director, and Research Investigator at the VA Bedford Health Care System

Compassionate Contact Corps (CCC)

Changing Veteran Lives

[\(Learn more\)](#)

ORIGIN SITE: Columbus VA Medical Center

DESCRIPTION: Social isolation can affect Veterans and leave them at increased risk for homelessness, mental health challenges, and suicidal ideation. CCC is a social prescription program that offers friendly phone and video visits between trained volunteers and Veterans. Through CCC, volunteers call their matched Veteran once per week to provide compassionate conversation and companionship. This best practice was designed to increase Veterans' social connectedness by pairing them with trained and caring VA volunteers for weekly phone calls that have led to meaningful friendships and connection. The program has been shown to reduce social isolation and improve overall well-being in Veterans.

IMPACT: Over **120 VAMCs** implemented CCC, benefitting **1,000+ Veterans** from over **55,000 hours** supporting Veterans. This innovation has a Veteran approval rating of over 90%.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2024 VHA Innovation Ecosystem Fellowship, 2020 VHA Shark Tank Competition Winner

QUOTATION: *"People aren't meant to be all alone. These calls have been a dream come true."* Veteran, Columbus VA Medical Center

My Life, My Story

Changing Veteran Lives

[\(Learn more\)](#)

ORIGIN SITE: Madison VA Medical Center

DESCRIPTION: Every Veteran has a story. Through My Life, My Story, VA volunteers help Veterans tell theirs. Communication is a key element of patient-centered care, which promotes positive patient, staff, and organizational outcomes. My Life, My Story leverages an opportunity to engage in meaningful discussion with Veterans about their family history, personal background, prior military service, and other life experiences during an intimate interview. Life stories become part of the Veteran's medical record so providers can access, read, and utilize as appropriate.

IMPACT: This project is available at **80 VAMCs**, served over **10,000 Veterans**; over **94% of providers report reading the charted patient stories**.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2016 VHA Shark Tank Competition Winner

QUOTATION: *"I think that this program could completely change the face of the VA. With an interview like this, you're able to get so much more information. A provider can't get that when they talk to you for 10 minutes."* Veteran Participant

DropEase

Changing Veteran Lives

[\(Learn more\)](#)

ORIGIN SITE: Cincinnati VA Medical Center

DESCRIPTION: Many Veterans have manual dexterity issues, resulting in difficulty, avoidance, or abundance when administering eye drops. The DropEase device provides a stable platform for self-administering eyedrops, complete with a handle that is easy to squeeze with weak or shaky hands. The device allows users to set a metered dosage to get the proper amount of medication every time. Standard eyedrop bottles fit into the device. This innovation improves Veteran medication dose accuracy, decreases cost, and enhances self-esteem. DropEase was licensed by Harbor Designs & Manufacturing and expected to begin manufacturing in 2025.

IMPACT: This device costs **\$10-48 to manufacture** with 3D printing or injection molding and is available on VA Intrapreneurial Product Marketplace.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2020 Innovators Network Investment

QUOTATION: *"iNET makes me feel that I am being heard. More importantly, [that] the Veterans are being heard. I asked what the problem was and then strived to find the answer; then take it back to the Vets so they can tell me how to make it better."* Registered Nurse & Eye Clinic Case Manager from Cincinnati VA Medical Center

Hospital Acquired Pneumonia Prevention by Engaging Nurses (HAPPEN)

Saving Taxpayer Dollars

[\(Learn more\)](#)

ORIGIN SITE: Salem VA Medical Center

DESCRIPTION: Non-ventilator associated hospital acquired pneumonia (NV-HAP) is a preventable complication associated with increased morbidity and mortality, need for long term care after discharge, longer length of stay, and high costs (\$58,000 per case among Veterans). HAPPEN reduces NV-HAP cases by offering education and assistance with completing oral care in hospitals and long-term care settings. With consistent oral care, the number of the bacteria in the mouth is reduced. This solution is now available enterprise-wide.

IMPACT: This solution impacted **over 270,000 Veterans** with a total **cost avoidance of \$1.8 billion dollars** since 2021.

COST SAVINGS CALCULATIONS:

HAPPEN yielded \$1,843,811,290 in total cost avoidance to date. The savings is calculated by taking the observed differences in NV-HAP cases in the year prior to implementation and the number of cases observed since

FY	Current Rate	Bed Days of Care	Rate Reduction	Cost Avoidance
FY21	0.19	904,753	4.06	\$213,051,236
FY22	0.13	1,963,979	4.12	\$469,312,421
FY23	0.14	2,045,456	4.11	\$487,595,801
FY24	0.1	1,900,787	4.15	\$457,519,430
FY25 (Q1/Q2)	0.13	905,308	4.12	\$216,332,399
Total				\$1,843,811,290

implementation; the difference is then multiplied by the expected cost per case. Since 2020 to date, the VA national aggregate rates of NV-HAP dropped from 4.25 cases per 1,000 bed days of care to 0.13 cases per 1,000 bed dates of care. The estimated cost per NV-HAP case is \$58,000. This table lists the reported data for each FY as reported by the Office of Nursing Services through the Inpatient Evaluation Center tool.

AWARDS & RECOGNITION: 2017 VHA Shark Tank Winner, 2020 Gears of Government President's Award for Innovation, 2021 VHA National Diffusion Award, 2024 American Academy of Nursing Edge Runner Award

QUOTATION: *"HAPPEN demonstrates the power of VA's engaged frontline nursing workforce to identify an opportunity, develop an evidence-based solution and scale that innovation across the Nation."* Director of Research Evidence Based Practices and Analytics in VA's Office of Nursing Services

VIONE

Saving Taxpayer Dollars

[\(Learn more\)](#)**ORIGIN SITE:** Little Rock VA Medical Center, 2016 VHA Shark Tank Competition Winner**DESCRIPTION:** As medication use increases with age and the presence of multiple chronic health conditions, it's common for adults over the age of 65 to take multiple medications. This can lead to complications, including hospital readmission. VIONE is a simple, user friendly medication management methodology used to reduce polypharmacy and improve patient safety, comfort, and medication adherence consistent with high reliability organizations. VIONE actively supports Veteran health care goals while reducing medication costs and minimizing adverse outcomes.**IMPACT:** The solution is available at **138 VAMCs**, supported over **one million Veterans**, and generated a **total cost avoidance of over \$320 million**.**COST SAVINGS CALCULATIONS:** This project resulted in cost avoidance of \$320 million to date. This number is based on the number of unnecessary medications that would otherwise continue to be provided to the Veteran. The annualized cost avoidance formula calculates the price per day of medication (price per unit by number of units dispensed/number of days supplied) and multiplies it by the number of days that medication was unnecessary. Total cost avoidance does not utilize orders discontinued as "DC/Alternate Med Prescribed" or "Dose Decrease". These discontinuations imply a new order was placed. The new item is likely a lower cost, but no cost avoidance is incorporated into the program total. Thus, this may underestimate total cost avoidance. Medications that are restarted are removed from any further cost avoidance accrual after their restart date. Restarts are checked against any prescription issued for a patient for the same generic drug (not including dosage) within the year following the date of VIONE discontinuation. Cost avoidance is capped at one year (365 days) to avoid ongoing aggregation that may be impacted by other variables over time, and to standardize against other cost saving programs. Cost avoidance reported is calculated up to the day for orders discontinued within the last 365 days. Currently, only chronic, non-antimicrobial, non-supply orders are included in annualized cost avoidance calculations.**AWARDS & RECOGNITION:** 2020 Gears of Government Winner, 2022 HeRO Team Award, 2023 Service to the Citizen Award, 2021 National Diffusion Award; 2022 International Hospital Federation Gold Austco Award**QUOTATION:** *"We recently worked with a Veteran with heart disease who was experiencing nightmares and vivid and disturbing hallucinations after starting a new medication. We worked closely with him and his cardiologist to cut down and eventually stop some of his medications. We saw a dramatic improvement almost immediately. The Veteran was getting a full night's rest, his hallucinations stopped, he was able to move around and speak full sentences."* VIONE Founder

Fall Prevention Socks

Saving Taxpayer Dollars

[\(Learn more\)](#)

ORIGIN SITE: VA Palo Alto Health Care System; Supported by VHA Innovation Ecosystem's National Center for Collaborative Healthcare Innovation (Palo Alto)

DESCRIPTION: Falls are one of the most prevalent, dangerous, and expensive events for Veterans across the continuum of care in VHA. In 2015, the estimated medical costs attributable to fatal and nonfatal falls in the U.S. amounted to approximately \$50 billion. VHA IE's National Center for Collaborative Healthcare Innovation at VA Palo Alto Health Care System is collaborating with a medical company, Palarum, to evaluate the optimal use of the SmartSock, an advanced wearable sensor system designed to prevent falls among hospitalized patients deemed to be at high risk by clinical criteria.

IMPACT: This solution is available at **six VAMCs** for **6,578+ Veterans** and has resulted in **\$3.2 million in cost avoidance by reducing falls by 50%**.

COST SAVINGS CALCULATIONS: The total cost avoidance for this solution is \$3,233,393. Much of the cost avoidance (~80%) occurred in FY24 as additional sites implemented the solution. The cost avoidance calculation is the product of the estimate cost per patient fall and the total estimated falls avoided. To calculate the estimated number of falls avoided, the number of falls observed in the period following implementing of the solution, per 1,000 bed days, was subtracted from the number of falls observed before implementation, per 1,000 bed days. Through this calculation, the number of falls avoided was 91.43. The cost of each fall avoided was estimated to be \$35,365, for a total cost avoidance of \$3,233,421.

AWARDS & RECOGNITION: 2021 VHA Shark Tank Competition Winner

QUOTATION: *"We are focused on providing the best and most advanced health care for our Veterans. Falls are particularly important because they are a major cause of preventable injury and disability around the world that disproportionately impacts older adults. As a result, we have been developing innovative ways to prevent falls and the devastating consequences."* Chief Medical Informatics Officer for VA Palo Alto Health Care System

Data & Analytic Support for Healthcare (DASH)

Saving Taxpayer Dollars

[\(Learn more\)](#)

ORIGIN SITE: Charleston VA Medical Center (South Carolina)

DESCRIPTION: VA Pharmacists and providers can sometimes incorrectly make a prescription benefit determination as either service connected or non-service connected. This results in billing errors, missed revenue opportunities, and customer confusion. DASH is an artificial intelligence algorithm that evaluates prescription benefits to determine if the medication is treating a service-connected condition. DASH is an important application of machine learning to improve the accuracy of prescription benefits auditing.

IMPACT: The tool is in use at **five VAMCs**, has prevented over **100,000 overbilling errors**, and it has generated **\$1 million in revenue for VA**.

COST SAVINGS CALCULATIONS: Since 2017, the solution has generated \$1 million in revenue for VA. If the solution were implemented enterprise-wide, the project is expected to generate \$103,000-\$188,000 average annual revenue per VA medical center, for a total of \$13-24 million total annual revenue.

AWARDS & RECOGNITION: 2017 VHA Shark Tank Competition Winner, 2022 VHA Innovation Ecosystem Fellowship, 2020 Fed-Health IT Innovators Award

QUOTATION: *“DASH gives us much more reach in assessing the fidelity of straight forward Service-Connected Eligibility as it relates to the care the Veterans receive. DASH provides Real Time Service-Connected Relatedness.”* DASH User

Park a Prescription

Streamlining Operations

[\(Learn more\)](#)

ORIGIN SITE: VA Northern California Health Care System

DESCRIPTION: Medication management is a common problem for many Veterans, and the VA pharmacy computer systems do not allow for updates or changes to prescriptions without a fill generated. Park a Prescription utilizes a Veteran-centric approach for managing medications, allowing both Veterans and providers to control the timing of prescription fills with a hold feature. Park a Prescription introduces the concept of a prescription "on file" like what is available in the private sector. Instead of immediately filling all new prescription orders, a recent enhancement allows Veterans to request to have the prescription parked and then ask for it as an original "refill" when ready. This reduces the stockpile effect of the Veterans Health Information Systems and Technology Architecture (VistA) outpatient pharmacy software design. Significant cost savings/avoidance by being able to update a prescription (such as a change in dosage) without incurring an immediate dispensed fill.

IMPACT: This solution is available enterprise-wide, benefitting over **6.5 million enrolled Veterans** and resulting in over **\$22 million in cost avoidance annually**.

COST SAVINGS CALCULATIONS: The annual cost savings of this program is \$22,000,000 annually. The cost savings calculation first identifies the number of unnecessary prescriptions that were filled prior to the program that were either unused or unnecessary. Of 50 million prescriptions filled each year at VA, 1.8% fell into this category. Each of the resulting medications (895,000) were mailed at an average medication cost of \$24.63 dollars, for a total of \$19 million. Further, the costs of labor to fill the medications (\$900,000), and the shipping cost (\$2 million) were factors into the annual cost savings calculation.

AWARDS & RECOGNITION: 2013 VHA Innovation Investment

QUOTATION: *"This was the number one requested feature that we had. It's giving Veterans more to really order and manage their prescriptions. Veterans are really appreciating it because they feel they have direct control. Now, this is the life and death thing in certain cases. So, we took that very seriously and we wanted to make the experience the best we could."* Veteran and Program Manager

VEText

Streamlining Operations

[\(Learn more\)](#)

ORIGIN SITE: VA Loma Linda Healthcare System

DESCRIPTION: When a patient does not show for an appointment, a missed opportunity, or an unutilized appointment, occurs. Missed opportunities contribute to increased wait times, reduced appointment availability, higher costs, poor efficiency, and lower patient satisfaction. VEText is VA's text messaging appointment reminder system to alert Veterans of upcoming health care appointments, allowing them to confirm or cancel quickly. VEText's Open Slot Management feature automatically redirects cancellations via text message to Veterans waiting more than 30 days for an appointment. All sites have adopted and recently, VEText became available at Cerner sites.

IMPACT: Over **nine million Veterans** are enrolled in the system, leading to over **369,000 rebooked appointments**.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2017 Innovators Network Investment

QUOTATION: *"I've trusted and relied on VEText in the past. I know it works because it provides me with the information I need. This is exactly the kind of innovation that I'm seeing more and more of at VA. I believe most Veterans appreciate it."* Coast Guard Veteran from Florida

Light Electronic Action Framework (LEAF)

[\(Learn more\)](#)

Streamlining Operations

ORIGIN SITE: Washington DC VA Medical Center

DESCRIPTION: Many standard administrative and clinic processes are completed by paper, which leads to inefficiencies, delays, and duplicative efforts. With LEAF, non-technical users digitized and improved their business processes by reducing no-value steps and focusing on streamlined customer service. LEAF standardizes and propagates best practices at minimal cost. LEAF is web application managed through the VA Franchise Fund that helps facilities rapidly digitize existing processes to streamline services for VA employees and Veterans. LEAF has also served as an essential tool when natural disasters strike by facilitating information workflows between VA administrators and telehealth providers, enabling them to provide medical attention to those affected by natural disasters quickly, efficiently, and at scale.

IMPACT: This solution is available enterprise-wide, has **30,000 users daily**, and as of 2024, has processed **over 5.2 million requests**.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2016 VHA Shark Tank Competition Winner, 2019 Gears of Government Award Winner, 2022 & 2025 FORUM Awards Winner

QUOTATION: *“We’re here for the patient, not the paper. LEAF recruitment tracker has taken away my need to track recruitment items on individual spreadsheets. It makes us accountable to use the systems we’re supposed to use.”* VA Employee from VA Midsouth Healthcare Network (VISN 9)

4-SIGHT

[\(Learn more\)](#)

ORIGIN SITE: Long Beach VA Medical Center

DESCRIPTION: Eye care is one of the top three busiest services in VA and eyeglasses make up 30% of prosthetic purchases. High demand can lead to waiting for eyeglasses and a negative experience for Veterans. 4-SIGHT is a technology tool that uses automation to improve the speed and efficiency of eyeglass delivery to Veterans. This application automates VistA keystrokes to reduce repetitive eyeglass ordering and purchase card usage by batching orders to be sent to eyeglass vendors. 4-SIGHT has allowed staff to focus on orders that cannot be automated, reducing wait times across all prosthetic ordering.

IMPACT: 4-SIGHT processes over **1.8 million orders** for over **1.4 million Veterans**, saving VA **\$7 million annually**.

COST SAVINGS CALCULATIONS: This innovation yields a total annual cost savings of \$6,920,793. Implementing sites recorded an average annual productivity gain of 1.5 full-time employee after adopting this innovation. The annual cost savings was calculated from the product of the number of implementing VA facilities (106 sites), the annual productivity gains per site, and the annual salary of a GS-6 Step 5 prosthetics representative (\$43,527).

AWARDS & RECOGNITION: 2017 VHA Shark Tank Competition Winner

QUOTATION: *"It allowed our purchasing agents to really devote their time and attention to some of the more detailed and intricate prosthetic purchase orders that come through to be ordered anywhere from power wheelchairs to prosthetic limbs. We were able to essentially work more efficiently and provide better services to our Veterans."* Member of the 4-Sight Team

Workforce Optimization and Float Pool Management

Streamlining Operations

[\(Learn more\)](#)

ORIGINSITE: VA Palo Alto Health Care System, Supported by VHA Innovation Ecosystem's National Center for Collaborative Healthcare Innovation (Palo Alto) and New England Center for Innovation Excellence (VISN 1)

DESCRIPTION: Without access to accurate, timely data, hospitals within the VA health care system can run the risk of either over-staffing or under-staffing which can jeopardize clinical quality, staff engagement, and Veteran satisfaction. Issio Work Optimization is a software solution designed to improve staff scheduling. The platform's predictive analytics capabilities provide advanced foresight to anticipate staffing needs and minimize gaps by leveraging an integrated command center and a dynamic float pool system. In 2024, National Center for Collaborative Healthcare Innovation demonstrated bed availability changes using Issio data at VA Palo Alto Health Care System, finding that availability changes every 15-20 minutes by 10-15%. VA can gain or lose 6,000 beds in an hour.

IMPACT: This solution is FedRAMP authorized, rapidly scalable, and has the potential to save VA \$1 billion if scaled enterprise wide.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: N/A

QUOTATION: "Your work with us is improving our ability to better care for the safety of not only our Veterans, but our staff as well!" VA Palo Alto Associate Director for Patient Care Services

Computerized Patient Record System (CPRS) Booster

Streamlining Operations

[\(Learn more\)](#)

ORIGIN SITE: Minneapolis VA Medical Center

DESCRIPTION: Computer systems used by health care workers are inefficient, contribute to job dissatisfaction and burnout, and detract from face-to-face patient care. Tasks such as renewing a medication can require extensive typing, mouse use, and processing of multiple screens. CPRS Booster is a computer automation platform that dramatically accelerates use of VA computer systems by automating complex, tedious, and redundant multistep actions. With the press of a single keyboard button (usually a function key), CPRS Booster automatically and very rapidly performs tasks that previously required extensive typing, use of a computer mouse, and processing of multiple screens. The platform went live in 2020, allowing enterprise-wide access for adoption. Among a survey of nearly 600 VA employees, 80% identified CPRS Booster as the single most efficient enhancement to CPRS.

IMPACT: CPRS Booster is available **enterprise-wide**, with **80,000 active users**, and an **annual cost savings of \$547 million**.

COST SAVINGS CALCULATIONS: CPRS Booster is implemented enterprise-wide at a total an annual savings of \$547,000,000. The annual savings rate is calculated as the product of total number users multiplied by the hours saved per day and the pay rate. For a more precise calculation, the number of users is broken down into providers (48,000) and non-providers (32,000) and average salaries for both user types (\$125/hourly and \$50/hourly, respectively). Across all users, the average time savings per year is reported as 72 hours, or 0.3 hours daily for all days worked. The annual savings is \$432,000,000 for providers and \$115,200,000 for non-providers for a total annual cost savings of \$547,000,000.

AWARDS & RECOGNITION: 2022 VHA Shark Tank Competition Winner, 2022 Dr. Robert L. Jesse Award for Excellence in Innovation

QUOTATION: *“Your work with us is improving our ability to better care for the safety of not only our Veterans, but our staff as well!”* VA Palo Alto Associate Director for Patient Care Services

FLOW System

[\(Learn more\)](#)

ORIGIN SITE: VA Puget Sound Health Care System

DESCRIPTION: Communication between clinical and purchasing staff lacked consistency leading to delays in processing prosthetic limb care for Veterans with limb loss. VA innovators at Puget Sound designed a custom software to streamline the communication strategy around the prosthetic limb care processes. FLOW system, formerly FLOW3, is a VA-developed software platform improving delivery times of prosthetic limbs to Veterans by greater than 50%. The FLOW System was designed to work alongside VHA's electronic health record system using custom software, including the FLOW Consult Comment application and a web-based application.

IMPACT: This solution is available enterprise-wide, has benefitted **28,000 Veterans**, and has resulted in **cost savings of \$373,039**.

COST SAVINGS CALCULATIONS: Since March 2021, 46,398 new limbs and socket repairs have been prescribed for Veterans since enterprise implementation in March 2021. Each of these prescriptions occurs at a cost savings of \$8.04 per limb. The total cost savings of the program to date is \$373,039.

AWARDS & RECOGNITION: 2017 VHA Shark Tank Competition Winner; 2019 Gears of Government Winner, 2020 FedHealthIT Innovation Award, QUERI Partnered Evaluation Initiative

QUOTATION: *"It's real-time. It's instantaneous. As soon as the limb is delivered, we find out about it through our system and then we get the Veteran back in for follow-up care."* Medical Director at the Tampa VA Medical Center

The Initiative to End Diabetic Limb Loss

[\(Learn more\)](#)

Leveraging Emerging Technologies

Industry Collaboration

ORIGIN SITE: Cincinnati VA Medical Center

DESCRIPTION: Diabetic Foot Ulcers (DFU) can lead to amputations or death for Veterans with diabetes. In 2021, VA treated 75,000 DFUs, which accounted for more than 80% of non-traumatic amputations, costing more than \$3.2 billion. In 2019, VHA IE began collaborating with Podimetrics to co-design a preventative care model aimed at reducing hospital admissions and preventing amputation for Veterans with or at risk of developing DFU. Veterans are encouraged to be proactive in their podiatry care with the Podimetrics SmartMat. The mat uses thermal imaging to measure daily foot temperature, detect diabetic foot ulcers, or other foot disorders five weeks before they appear. Veterans save money with early detection of possible foot conditions and avoid late-stage treatments.

IMPACT: This solution originated at Cincinnati VAMC, has impacted over **16,000 Veterans**, and results in **\$106 million cost savings annually**.

COST SAVINGS CALCULATIONS: This project has an annual total cost savings of \$106 million. The method for calculation the total cost savings involved examining the admissions and outpatient utilization data. For this study, the calculations compared the admissions and outpatient costs for the participants enrolled in the program for the 12 months prior to enrollment to the 12 months after enrollment. Over 10,000+ patients were included in this evaluation. The utilization data source from this evaluation was the Remote Patient Pedal Monitoring Summary Dashboard, managed by the Office of Connected Care. The observed difference is cost in the pre-intervention period and post-intervention was a decrease in admissions cost data totaling \$89,600,033 (73% decrease in admissions cost) and a decrease of outpatient costs at \$16,596,622 per year.

AWARDS & RECOGNITION: 2019 VHA Innovation Ecosystem Fellowship; 2020 VHA Shark Tank Competition Winner

QUOTATION: *“When we shift the approach from treatment to prevention, we empower Veterans, improve outcomes, and save lives.”* Podiatry Chief from Cincinnati VA Medical Center

VHA 3D Printing Network

Leveraging Emerging Technologies

[\(Learn more\)](#)

ORIGIN SITE: VA Puget Sound Health Care System

DESCRIPTION: Most VA hospitals did not have access to three-dimensional (3D) printing technology, and those that did, lacked direction on best practices. With the technology at risk for being under-utilized and Veterans losing a potential benefit, the VHA 3D Printing Network proposed creating a national VA council for 3D printing to oversee a network of VA hospitals using the technology. This practice would provide cutting-edge care to Veterans and extend the impact of 3D printing to all hospitals within the VA network, regardless of in-house printing programs. VHA 3D Printing Network started at the VA Puget Sound Health Care System and has grown into a national program office, VHA Office of Advanced Manufacturing (OAM). OAM acts as a convener to share expertise, solve problems, gather quantitative data, and instill best practices. The network enables sites with 3D printing capabilities to connect with sites wanting to offer these services to Veterans, but do not have the expertise, resources, or physical space.

IMPACT: Currently, **33 VAMCs** are involved in the network with **38 catalogued 3D-Printed Assistive Technology Devices**.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2018 Innovators Network Investment; 2019 VHA Innovation Ecosystem Fellow, 2020 Samuel J. Heyman Service to America Medal, 2020 FedHealthIT Innovation Award, 2020 Gears of Government Award, 2021 Federal Laboratory Consortium Award

QUOTATION: *“The real story of 3D printing is that it is not just a technology, it is an enabler... that in the hands of creative VA staff, 3D printing helps them to deliver care to Veterans that is exceeding expectations, building trust, and restoring hope.”* Deputy Chief, VHA Office of Healthcare Innovation and Learning

Unmanned Aerial Vehicle Program (UAV)

[\(Learn more\)](#)

Leveraging Emerging Technologies

Industry Collaboration

ORIGIN SITE: VA Palo Alto Health Care System, Supported by VHA Innovation Ecosystem's National Center for Collaborative Healthcare Innovation (Palo Alto)

DESCRIPTION: Gaps in real-time aerial surveillance and rapid incident assessment hinder the VA Police Department's ability to proactively secure VA facilities, protect Veterans and staff, and minimize risks without strain on manpower or budget. The UAV Program aims to enhance emergency response capabilities by improving response times and coordination. By leveraging drone technology, the program intends to reduce the personnel required for operations, minimize the escalation of events, and shorten incident duration. Currently, UAVs are utilized in active robberies, hostage situations, active threats, emergency lockdowns, and instances of Veteran elopement. Potential future applications include supporting engineering and facilities repairs, aiding in package delivery, and addressing other VA Police emergencies.

IMPACT: This proof of concept is **available at \$0 to VA** and utilizes six drones currently.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: N/A

QUOTATION: *"During a recent active shooter event, at our neighboring high school, the Palo Alto Police Department reached out to the VA Palo Alto Police to assist with Drone surveillance. The technology helped the Palo Alto Police assess the situation quickly and safely, without putting additional officers in harm's way."*
National Center for Collaborative Healthcare Innovation Deputy Director of Operations

FastTrack Pharmacogenomics Results (PGx)

Leveraging Emerging Technologies

[\(Learn more\)](#)

ORIGIN SITE: VA Palo Alto Health Care System

DESCRIPTION: PGx testing provides clinicians a glimpse into a patient's genetic information and the implications for medication effectiveness. However, for providers require timely result release processes from an automated system. Data Arch (a VA-owned innovation platform) allows PGx results to integrate directly into the patient record system, empowering the clinicians to have timely access to this critical information. PGx mitigates cost by promoting fewer emergency room visits due to adverse drug effects, less waste of dispensed, unused medications, and more automated tools to save staff time. A frontline innovation at VA Palo Alto Health Care System designed the system, which is planned to reach 41 VAMCs by the end of fiscal year 2025.

IMPACT: Over 10,900 providers are engaged with this system, processing **125,000+ orders** and saving an estimated **\$440 million in total cost avoidance** to date.

COST SAVINGS CALCULATIONS: Currently, there is no available VA data on the cost savings of the PGx solution. The estimates for the cost avoidance per Veteran served are extrapolated from a [2023 retrospective study by Jarvis et al.](#)² The study examined the cost savings per Medicare-eligible patients when enrolled in a comprehensive medication management program informed by PgX. Direct medical charges per patients decreased by \$7,000 annually. To accommodate differences in efficacy between the program reviewed in Jarvis et. al. and the current solution, we assumed the current program was at least 50% as effective as the reviewed program, for an estimated costs savings of \$3,500 per Veteran annually. To date, 125,695 Veterans have utilized the program for an estimated total cost avoidance of \$439,932,500. This cost avoidance occurred over FY24 and the first two quarters of FY25.

AWARDS & RECOGNITION: 2023 VHA Innovation Ecosystem Fellowship, 2024 VHA Shark Tank Competition Winner

QUOTATION: "VA has one of the largest deployments of PGx implementation in any health care system. Dr. Relova's work has moved the needle in terms of our ability to integrate PGx test results into routine clinical care." Executive Director of the VA National Pharmacogenomics Program

² Jarvis, J. P., Peter, A. P., Keogh, M., Baldasare, V., Beanland, G. M., Wilkerson, Z. T., Kradel, S., & Shaman, J. A. (2022). Real-World Impact of a Pharmacogenomics-Enriched Comprehensive Medication Management Program. *Journal of Personalized Medicine*, 12(3), 421. <https://doi.org/10.3390/jpm12030421>

XanderGlasses

[\(Learn more\)](#)

Leveraging Emerging Technologies

Industry Collaboration

ORIGIN SITE: VA Augusta Health Care System

DESCRIPTION: VA is the largest purchaser of hearing aids in the United States, with nearly three million Veterans receiving disability benefits for hearing loss or tinnitus. To improve communication for Veterans affected by hearing loss and auditory processing disorders, VHA Innovators Network and XanderGlasses collaborated to address this challenge. Participating VHA Innovators Network sites led discovery interviews and user testing to guide the design of XanderGlasses. The glasses translate speech to text and project accurate real-time captions in the wearer's field of vision, allowing them to look at speakers, absorb visual cues, and refer to captions as needed.

IMPACT: This solution is now available to Veterans nationwide through prosthetics ordering, providing a **low-cost alternative to hearing aids.**

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: 2021 Innovators Network Greenhouse Collaboration

QUOTATION: *"With these glasses it's like you gave me my husband back!"* Veteran Spouse & Caregiver at VA Augusta

VHA Extended Reality (XR) Network

Leveraging Emerging Technologies

[\(Learn more\)](#)

ORIGIN SITE: Western North Carolina VA Health Care System

DESCRIPTION: An original pilot project, virtual reality (VR) for Pain and Anxiety Management addressed a need for non-pharmacological options for pain and anxiety management. Its success further highlighted the need to increase the use of VR and XR technology across VA. Through VHA IE, an XR Community of Practice (COP) was established to provide resources and best practices, which evolved into a nation resource hub known as the VHA XR Network. Currently there are six COPs: General XR, Employee Well-being, Mental Health, Rehabilitation, Pain Management, and Education and Training.

IMPACT: Currently, **13 program offices** are engaged with the network, as well as **31 private sector collaborations**, and over **4,000 Veterans**.

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: Virtual Reality (VR) for Pain and Anxiety: 2020 Innovators Network Investment, 2021 VHA Shark Tank Competition Winner

QUOTATION: *"I didn't even notice my pain while I was doing the XR. It also helped relax me and make it easier for me to talk about things."* Veteran

Project Convergence

[\(Learn more\)](#)

Leveraging Emerging Technologies

Industry Collaboration

ORIGIN SITE: VA Palo Alto Health Care System, Supported by VHA Innovation Ecosystem's National Center for Collaborative Healthcare Innovation (Palo Alto)

DESCRIPTION: 5G technology has offered the opportunity for unprecedented improvements in health care. However, few hospital systems in the U.S. utilize 5G technology. Exploring use cases for 5G required first deploying this technology at a medical center. The National Center for Collaborative Healthcare Innovation, in collaboration with Medivis, Verizon, and Microsoft, led the effort to pilot 5G technology. In 2020, VA Palo Alto Health Care System became one of the first U.S. health care systems to adopt and test 5G technology. One of the first 5G use cases tested, in collaboration with Medivis, was to develop and validate an advanced augmented reality surgical planning technology. This innovative tool utilizes 3D holographic models of the patient's own anatomy to allow surgeons to better plan for technically complex surgeries.

IMPACT: This solution is available **at six VAMCs with 36+ medical use cases** and represents an investment from **industry partners at \$9.2 million.**

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: N/A

QUOTATION: *"This tool provides our surgeons with highly detailed 3D visualizations of a Veteran's anatomy, specifically for cranial and spinal surgeries. This technology significantly enhances precision, making surgeries safer and more effective."* National Center for Collaborative Healthcare Innovation Deputy Director of Operations

Tasso+ In-Home Diagnostic Lab Pilot Program

[\(Learn more\)](#)

Leveraging Emerging Technologies

Industry Collaboration

ORIGIN SITE: VA Puget Sound Health Care System, Supported by VHA Innovation Ecosystem's New England Center for Innovation Excellence (VISN 1)

DESCRIPTION: Veterans are intentionally or unintentionally missing necessary diagnostic lab tests due to access barriers. One of the most prominent barriers is easy and timely access to a VA or community diagnostic lab testing facility, improving health outcomes and impacting Veteran and provider experience. VHA IE's New England Center for Innovation Excellence is supporting VA Puget Sound as they pilot Tasso+, a 510(k) cleared device which offers Veterans the ability to access diagnostic tests in their home. This solution was developed with support from Defense Advanced Research Projects Agency. The goal of this pilot is to evaluate the efficacy of providing Veterans with the option of timely, safe, and accurate laboratory test results from samples obtained by the patient using the Tasso+ device, while also measuring cost avoidance and Veteran satisfaction.

IMPACT: With 300 sample collections and testing capabilities, **results are processed in three to four business days from a five-minute draw time.**

COST SAVINGS CALCULATIONS: N/A

AWARDS & RECOGNITION: N/A

QUOTATION: N/A

Appendix A: VHA IE Academic Publications

Publication Title	Portfolio	Year
Diffusion of Excellence: Accelerating the Spread of Clinical Innovation and Best Practices across the Nation's Largest Health System	Diffusion of Excellence	2019
VHA's Innovation Ecosystem: Operationalizing Innovation in Health Care	VHA Innovation Ecosystem	2020
Implementation and sustainment of diverse practices in a large integrated health system: a mixed methods study	Diffusion of Excellence	2020
Dynamic Diffusion Network: Advancing moral injury care and suicide prevention using an innovative model	Diffusion of Excellence	2020
Merging Implementation Practice and Science to Scale Up Promising Practices: VHA Diffusion of Excellence Program	Diffusion of Excellence	2021
Balancing reality in embedded research and evaluation: Low vs high embeddedness	Diffusion of Excellence	2021
Investing in the Front Line: Leading a Cultural Innovation Revolution	Innovators Network	2021
VHA Innovators Network: Evaluation design, methods and lessons learned through an embedded research approach	Innovators Network	2021
Nonventilator hospital-acquired pneumonia: A call to action	VHA Innovation Ecosystem	2021
How the VA is training the Next-Generation workforce for learning health systems	VHA Innovation Ecosystem	2022
Sustainment of diverse evidence-informed practices disseminated in VHA: initial development and piloting of a pragmatic survey tool	Diffusion of Excellence	2023
Leveraging Organizational Conditions for Innovation: A Typology of Facility Engagement in the VHA Shark Tank-Style Competition	Diffusion of Excellence	2023
Supporting VA Medical Center Directors' Decisions When Adopting Innovative Practices: Development and Implementation of the "QuickView" and "WishList" Tools	Diffusion of Excellence	2023
Diffusion of Excellence: evaluating a system to identify, replicate, and spread promising innovative practices across VHA	Diffusion of Excellence	2024
Understanding pathways from implementation to sustainment: a longitudinal, mixed methods analysis of promising practices implemented in VHA	Diffusion of Excellence	2024
How senior leaders support innovations in large learning health systems: Insights from U.S. VHA national program office leaders	Diffusion of Excellence	2025

Appendix B: VA Intrapreneurial Product Marketplace Patents

Current Patents:

1. Atlas Knee Supporter
2. Cart Sweeper Attachment
3. DropEase
4. Prosthetic Sock Management Tool (PSMT)
5. Rapid On-demand Connection Information Technology (ROCIT)
6. The Belongings Buddy
7. Wareologie Portable Parallel Bars
8. XanderGlasses
9. Hinged Bathtub Bench
10. Self-Leveling Walker (SLW)
11. Habit Camera
12. Thermal Fuse Cover

Pending Patents:

1. Air Pillow on a Roll (APOAR)
2. Kyphotic Wedge
3. Medication Drop Box
4. Point of Care Ultrasound (POCUS) Guide

Appendix C: VHA IE Communications

VHA Innovation Ecosystem Reports and Playbooks	
2024 VHA State of Innovation Report	VHA Innovators Network 2021 Annual Report
2023 VHA State of Innovation Report	VHA Innovators Network 2020 Annual Report
2022 VHA State of Innovation Report	VHA Innovators Network 2019 Annual Report
2021 VHA State of Innovation Report	VSO Engagement Playbook - External
2020 VHA State of Innovation Report	DEAN Annual Report 2020
2019 VHA State of Innovation Report	2018 VHA IE Quarterly Portfolio Report
VHA Innovators Network 2023 Annual Report	VHA IE Collaboration Playbook
VHA Innovators Network 2022 Annual Report	VHA IE Data Playbook
VHA IE Innovator Network Articles	
Frontline employees create innovative solutions - VA News	Face of InnoVAtion: Misoor Goueli - VA News
Innovation and collaboration in VISN 10 - VA News	Spark-Seed-Spread brings new cohort of employees to innovate Veteran care - VA News
VA employees receive awards for improving Veteran care through Innovators Network - VA News	Face of InnoVAtion: Dr. Punit Vaidya - VA News
Putting employee innovative products in the hands of Veterans - VA News	Spark-Seed-Spread brings new cohort of employees to innovate Veteran care - VA News
VA Innovators Network continues to expand - VA News	Face of InnoVAtion: Kim Bielicki - VA News
VA Innovation Collaboration continues through Greenhouse Initiative - VA News	Innovators Network Award finalists drive innovation at VA - VA News
VA is expanding contraception access for male Veterans - VA News	Face of InnoVAtion: Dr. Kushal Shah - VA News
Bootcamp: VA Innovators Network launches new groups of employees - VA News	Faces of InnoVAtion: Chris Slatore - VA News
Innovation Revolutionary: Tranquility garden providing Whole Health care - VA News	Innovation that serves women Veterans - VA News
Augusta VA employee invents device to prevent falls - VA News	Face of InnoVAtion: Ashley Crooks - VA News
Innovation Revolutionary: helping kyphotic Veterans - VA News	The Greenhouse Initiative continues to break boundaries - VA News
Innovation revolutionary: A solution to prosthetic socks management - VA News	Unpacking the Story of Transgender Veterans - VA News
Innovation Revolutionary: Beta Lactam assessments saving lives - VA News	Face of InnoVAtion: Kathryn Beckner - VA News
Veterans benefit from Greenhouse Initiative blossoming this spring - VA News	Face of InnoVAtion: Robert Bankston - VA News
Innovation revolutionary: Dr. Mark Walker - VA News	Two VHA Innovation Ecosystem Innovations bring new tech to Veteran care - VA News
Innovation Revolutionary: Designing accessible blood pressure monitoring - VA News	Face of InnoVAtion: Francesca Zeringue - VA News

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Innovation Revolutionary: Keeping Veterans safe with sterile syringes - VA News	Face of InnoVAtion: Matthew Knight - VA News
Greenhouse initiative bloomed in 2021 - VA News	First Three Innovative iNET Greenhouse Collaborations Underway at VHA - VA News
Face of InnoVAtion: DJ Cole, Richmond VA radiologic technologist - VA News	Face of InnoVAtion: Ronald Major - VA News
Using innovation to better serve Veterans and their families - VA News	Face of Innovation: Kalyn Essex - VA News
VHA Innovators Network Incubator Series unleashes innovation to impact Veteran lives - VA News	The VHA Innovators Network is growing - VA News
Face of InnoVAtion: Dr. Christopher Fowler - VA News	Innovation in preventing diabetic foot ulcers - VA INSIDER
Veterans receive cutting edge virtual reality treatments - VA News	Boundary-breaking Extended Reality Network grows and spreads new opportunities - VA News
Employee input elevates VA as a leading innovative health care workplace - VA News	Patent pending for new physical therapy walking device invented by Augusta woman WJBF
Improving Veterans' inpatient experience through virtual reality - VA News	FINDING SOLUTIONS: Glasses allow hearing impaired to subtitle conversations (wrwd.com)
Virtual reality meets creative arts therapy - VA News	Employees Help Make the VA a Leading Innovative Healthcare Workplace - Daily Nurse
Immersive technology: Defining a new reality for Veteran health care - VA News	Announcing New Innovator Sites - VA INSIDER
Innovation Revolutionary: Using virtual reality to empower employees - VA News	Innovators Network Offering Virtual Innovation Education Sessions - VA INSIDER
Virtual reality collaboration is transforming Veterans' health care - VA News	Year in review: Innovators Network - VA INSIDER
Face of InnoVAtion: Dr. Anne Lord Bailey - VA News	Supporting innovative employee ideas to improve Veteran care - VA INSIDER
Shop Employee Designed Products on New Website - VA INSIDER	Bootcamp rewind: driving innovation forward - VA INSIDER
Innovating for Veterans - VA INSIDER	Virtual workshop for employee innovators opens - VA INSIDER
Fire Up Your Innovation Passion with Ignite - VA INSIDER	Innovation Ecosystem's Incubator Series returns - VA INSIDER
Contraception Education - VA INSIDER	Go-Fish Returns to Sponsor Innovative Ideas - VA INSIDER
VHA IE Diffusion of Excellence Articles	
Assisting Veterans with oral care during hospital stays to prevent pneumonia - VA News	Innovation revolutionary: Diversity and inclusion at the point of care - VA News
One million Veterans helped through VIONE - VA News	Diffusion Academy advances promising practices for third year - VA News
Enhancing access to mental health care for Veterans in crisis - VA News	2021 VHA Shark Tank Competition Finalists Announced - VA News
SAFE-Watch: A suicide prevention safety net - VA News	VA experts collaborate for Veteran health care innovation - VA News
Equipping Veterans with the knowledge to address kidney disease - VA News	Innovation Revolutionary: Giving Veterans tools to take charge of their health - VA News
Gerofit keeps older Veterans active through personalized wellness - VA News	Innovation Revolutionaries: Working with the community to save Veteran lives - VA News

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Connecting Veterans to diabetes care with telehealth innovation - VA News	2021 VHA Shark Tank Competition winners revealed at iEX - VA News
PACT PT: Improving Veteran access to same-day physical therapy - VA News	Sharing health care Innovation, VHA IE Diffusion Marketplace now open to the public - VA News
Improving Veteran access to eyeglasses with automated ordering - VA News	Bringing Innovators Together - VA INSIDER
Two-step solution to improving Veteran colon health - VA News	Sleep Solutions - VA INSIDER
Diffusion of Excellence announces 2023 VHA Shark Tank finalists - VA News	VHA Shark Tank Competition Finalists - VA INSIDER
Age-friendly summit: What matters most to older Veterans - VA News	Announcing the 2023 VHA Shark Tank Competition winners - VA INSIDER
Improving Veterans' sleep with white noise - VA News	2023 Diffusion Summit celebrates innovators - VA INSIDER
Contraception on Demand program expands access to reproductive care - VA News	Building innovation fundamentals with VHA Diffusion of Excellence - VA INSIDER
Casting a surgical safety net to reduce readmissions - VA News	Apply for VHA Innovation Ecosystem Programs today - VA INSIDER
Improving LGBTQ+ Veterans' Whole Health through PRIDE - VA News	Saving lives with better suicide screening - VA INSIDER
Compassionate Contact Corps addresses Veteran loneliness - VA News	VHA's Diffusion Marketplace Showcases Staff Ideas for Innovative Care
Increasing Veteran access to colon cancer screenings - VA News	VA, American Red Cross team up to provide virtual social engagement for Veterans during COVID-19 pandemic
Gulf Coast VA opens Employee Wellbeing Centers - VA News	Surgical Pause: Understanding Veteran frailty - VA News
Innovators receive training to refine Veteran-centric solutions - VA News	
VHA IE National Centers for Innovation to Impact (NCi2I) Articles	
Central Virginia VA puts a spotlight on employee innovation - VA News	VA creates National Center for Collaborative Healthcare Innovation - Health Data Management
Hero's Hope program comforts Veterans in their final days - VA News	VA Launches Predictive Analytics, Clinical Decision Support Center (distilgovhealth.com)
Cincinnati Veterans compete in collaborative fitness challenge - VA News	Press Release: VA pilots first collaborative health care innovation center in Palo Alto
Defibrillation simulator provides life support training - VA News	Veterans Health Administration and Verizon test 5G MEC and drones Verizon
Hackathon harnesses AI for health care innovation - VA News	VA Puget Sound Health Care System's VA Ventures Partners with Advanced Solutions Life Science To Bring 3D
VHA's Cincinnati region launches digital, remote health center - VA News	VA, FDA work together to accelerate medical device innovation, advance care for all Americans - VA News
Trends in heat-related illnesses among Veterans - VA News	VA Ventures: Venturing into the future of Veteran health care - VA News
Advanced technology innovations tackling clinical problems - VA News	VA Palo Alto goes all in with full-spectrum 5G Healthcare IT News
VA employee revolutionizes ridesharing for Veterans - VA News	Verizon, VA ink \$448M deal for mobile devices, emergency tech (fiercehealthcare.com)
How Climate Change Impacts Veteran Health - VA Insider	VA Eyes Long Term Treatments with the Help of Wearables (govcio.com)

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Mixed reality guidance: revolutionizing surgical precision - VA INSIDER	5G Unlocks Health Care Advances at Veterans Affairs
No idea too big or too small - VA INSIDER	New England selected for VA Center of Innovation Excellence Health News conwaydailysun.com
VA pilots first collaborative health care innovation center in Palo Alto - VA News	Mobius delivers first of 50 IBots to VA to determine how machines may help Veterans
Augmented Reality Takes Agencies to Unexpected Places FedTech Magazine	
VHA IE Fellowships and Workforce Transformation Articles	
Tennessee VA revolutionizing how Veterans with limb loss receive care - VA News	Face of InnoVAtion: Lindsay Riegler - VA News
Bringing services closer to Veterans with mobile care - VA News	VHA IE Trailblazers: Bringing Veterans to their VA health care - VA News
Perinatal Veterans Socials foster community at Orlando VA - VA News	VHA IE Trailblazers: Dr. Ravi Rasalingam - VA News
Caring for older Veterans at home after emergency visits - VA News	Bringing partnerships and progress to Veteran health care - VA News
Workshop to expand Social Connection resources for Veterans - VA News	VHA IE Trailblazers: Eli Kaufman is bringing prosthetic and orthotic care home to Veterans - VA News
Innovation to reduce amputations and keep Veterans walking - VA News	VHA IE Trailblazer: Dr. George Akingba is leveraging VA's Innovation Networks to improve surgical care - VA News
New innovation fellows working to improve Veteran health care - VA News	VHA IE Trailblazers: Dr. Arash Harzand is bringing the hospital to Veterans' homes - VA News
Maternal Health Summit: Perinatal care for Veterans - VA News	VA physicians lead innovative changes in Veteran cardiac care - VA News
VHA-Uber Health Connect expands Veterans' access to transportation - VA News	VA and Fitbit help support Veterans' health and wellness during COVID-19 pandemic - VA News
THRIVE: Helping Veterans and employees find happiness - VA News	2024 VHA Innovation Ecosystem Fellowships - VA INSIDER
Innovation Hero: Dr. Jackie Paykel growing a Whole Health approach - VA News	VHA Uber Health Connect Initiative Expands Across VA
VA announces 2022-2023 Innovation Fellows - VA News	Introducing VA's spring 2024 MIT Catalyst fellows - VA INSIDER
Innovation Revolutionary: Inclusion and equity in kidney disease treatment - VA News	Avoiding amputation - VA INSIDER
Innovation Revolutionary: Machine learning provides focused Veteran care - VA News	Fixing 'one-size-fits-all' endoscopes - VA INSIDER
Innovation Revolutionary: Doctor leads remote patient monitoring initiative - VA News	Eight employees join fellowship - VA INSIDER
MIT Catalyst Program welcomes new VHA Innovation Ecosystem Fellows - VA News	VA Debuts New Health Services Transit Program with Uber
A new Cohort of Innovation Fellows are leading VA care into the future - VA News	Prosthetics Care Advancing at VA GovCIO Media & Research
VHA IE Trailblazers: Dr. Raza Hussain - VA News	Innovation Revolutionary: Melissa Tran is innovating Veteran centric perinatal care - VA News
VHA IE Trailblazers: How Dr. Michael Amendola uses 3D printing for Veteran Care - VA News	
VHA IE Community Engagement Articles	
VA announces 2024 State of Innovation Report - VA News	VA launching outreach and care networks for Long COVID - VA News

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Community healing for American Indian/Alaska Native Veterans - VA News	Revolutionizing VHA's Workforce to Innovate for Veterans - VA News
AI technology is helping crisis line responders - VA News	AI Tech Sprint brings outside innovations to VA - VA News
Award recognizes VSO collaboration and late DAV leader - VA News	Piloting AI tools for radiologists to deliver the best care to Veterans - VA News
Creating tech that improves Veteran care - VA News	Recognizing Transformational VA Innovators - VA INSIDER
VA DataX: How data is impacting clinical care for Veterans - VA News	VA Pathfinder Launches New Innovation Experience - VA INSIDER
Pathfinder: Opportunities to improve health care delivery for Veterans - VA News	How VA is leveraging innovation to Be the One The American Legion
DataX: Leveraging data to drive Veteran health care - VA News	The Veterans Cardiac Health and AI Model Predictions (V-CHAMPS) Challenge - precisionFDA Challenge
Mission Daybreak announces 10 winners in suicide prevention grand challenge - VA News	VA to Expand Mental Health Efforts Amid Veterans Suicide Report
Annual report: Innovators working to change and save Veteran lives - VA News	VHA Shark Tank Competition Generates Innovative Health Care Solutions
Early-stage innovators: Submit ideas to Pathfinder - VA News	DHA and Veterans Health Administration Collaborate to Innovate, Improve Patient Care Health.mil
Award winners leading VA Innovation forward - VA News	Total Orbit Acquires License for eScreening Tech from U.S. Veterans Affairs TechLink (techlinkcenter.org)
Mission Daybreak: Showcasing Veteran suicide prevention solutions - VA News	Atlanta VA's new program part of national initiative to stop veteran suicides - The Champion Newspaper
VA collaboration: Algorithm helps identify underlying health risks - VA News	VA taps winners in \$20M challenge to reduce veteran suicides (fiercehealthcare.com)
Finalists selected in \$20M Mission Daybreak grand challenge to reduce Veteran suicide - VA News	These Projects Won \$3 Million from the VA for Suicide Prevention Military.com
High-value digital health care - VA News	VA Announces Winners of \$20M Challenge to Prevent Veteran Suicides - Nextgov/FCW
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The iEX Demos Celebrate Employee-Driven Innovation at VA - VA News
VHA Innovation Experience 2021 breaks boundaries with Veteran-impacting innovation - VA News
11 things you must see at this year's VHA Innovation Experience marquee event - VA News
VA hosts inaugural Digital Health Symposium; Veterans, industry invited to attend - VA News
iEX 2021: Discovering the Future of Health Care Post-Pandemic - VA News
The iEX talks return alongside an exciting keynote - VA News
VHA Innovation Experience kicks off with 10 Breaking Boundaries: Collaboration Challenge winners named - VA News
The competition and collaboration heats up with the first VHA Innovation Experience Virtual Series Event - VA News
Registration open for the 2021 VHA Innovation Experience Virtual Series - VA News