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U.S. House of Representatives

COMMITTEE ON VETERANS' AFFAIRS

ONE HUNDRED FIFTEENTH CONGRESS

335 CANNON HOUSE OFFICE BUILDING

WASHINGTON, DC 20515

<http://veterans.house.gov>

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DEMOCRATIC STAFF DIRECTOR

June 7, 2018

Peter O'Rourke
Acting Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

Dear Mr. Acting Secretary:

In reference to the Committee on Veterans' Affairs Subcommittee on Disability Assistance and Memorial Affairs hearing titled, "Honoring Heroes: Memorializing Our Nations Veterans" on June 7, 2018, I submit the enclosed question for the record. I request that you provide your response to the question by the close of business on July 20, 2018.

In preparing your response to the question, please include the full text of the question in bold font. To facilitate the printing of the hearing record, please e-mail your response as a Microsoft Word document to (b)(6) at (b)(6)@mail.house.gov by the close of business on July 20, 2018. If you have any questions please contact him by email or phone at 202-225-(b)(6)

Sincerely,

(b)(6)

Tim Walz
Ranking Member
House Veterans' Affairs Committee

SUBCOMMITTEE ON DISABILITY AND MEMORIAL AFFAIRS
COMMITTEE ON VETERANS' AFFAIRS
UNITED STATES HOUSE OF REPRESENTATIVES
ON
"HONORING HEROES: MEMORIALIZING OUR NATIONS VETERANS"

QUESTION

1. According to the VA's current policy, a national cemetery may be established if there are 80,000 or more unserved veterans within 75 miles of a proposed cemetery site. California's Central Coast tri-counties of Santa Barbara, Ventura, and San Luis Obispo run approximately 180 miles up the coast, and the closest open national cemeteries are in Bakersfield and Riverside, approximately 150 miles away. In 2017, the VA estimated there were more than 80,000 veterans in Ventura, Santa Barbara, and San Luis Obispo Counties. Given the distance and population needs, is establishing a National Veterans Cemetery in Ventura County possible?

**COMMITTEE ON VETERANS' AFFAIRS
U.S. HOUSE OF REPRESENTATIVES
FULL COMMITTEE HEARING
"The VA Accountability and Whistleblower Protection Act: One Year Later"**

July 17, 2018

Questions for the Record from Congressman Walz

Question 1: Please provide a list of all VA employees who are currently on detail outside of the VA. For each employee, please state the following information:

- a. Their VA job description for the most recent role they held at VA prior to being detailed out of the VA,
- b. Their federal employment pay and grade,
- c. The date their current detail began, and
- d. The date their current detail is expected to end.

VA Response: The information requested is set forth in the table below.

| VA Employees on Detail Outside of VA for Fiscal Year 2018 | | | | | |
|---|-------|------|-------------------------|----------------|-----------|
| Employee Name | Grade | Step | Job Title | Effective Date | End Date |
| (b)(6) | 15 | 6 | Chief Financial Officer | 4/1/2018 | 9/28/2018 |

Question 2: Please provide a detailed list of every employee who has departed the Office of the Secretary, including the offices of the Executive Secretary, Protocol Office, the Center for Women Veterans, and the Center for Minority Veterans since March 28, 2018. For each employee, please state the following information:

- e. A detailed description of their role prior to their departure,
- f. Their federal employment pay and grade prior to their departure,
- g. The date of their departure,
- h. The reason for their departure, and
- i. A detailed list of any employment actions, including but not limited to disciplinary actions, that were taken or that the employee was notified of prior to their departure.

VA Response: The information is provided in Attachment 1 and Attachment 2.

Question 3: Recently, the Office of Inspector General (OIG) has been involved in a number of opioid-related healthcare inspections and criminal investigations. One of the most recent cases involved the Providence, RI VA Medical Center and the indictment of a nurse for opioid diversion and tampering by the U.S. Attorney

for the District of Rhode Island. It is my understanding that the OIG was focused on conducting a criminal investigation and did not review administrative practices that may have contributed to the alleged crimes.

Question a: Has the Office of Accountability and Whistleblower Protection (OAWP) decided to consider this case?

VA Response: The Office of Accountability and Whistleblower Protection (OAWP) does not conduct investigations into procedures performed within the pharmacy operations, such investigations are under the purview of the Office of Medical Inspector (OMI). If there are allegations of senior leader discrepancies or misconduct OAWP might conduct a joint investigation with OMI. OAWP does not have any reported disclosures or referrals from OMI related to Providence, Rhode Island to trigger any such investigation.

Question b: Considering GAO's report last year about ineffective pharmacy and controlled substance oversight, has OAWP decided to look into these practices VA-wide?

VA Response: OAWP does not conduct investigations into procedures performed within the pharmacy operations, such investigations are under the purview of the OMI. If there are allegations of senior leader discrepancies or misconduct, OAWP might conduct a joint investigation with OMI.

Question 4: My office has yet to receive the final investigator reports conducted by either the Office of Medical Inspector or the OAWP. In late Spring, VA informed my staff that these reports were in their final stages.

Question a: Can you explain some of the delays, especially regarding the report from OAWP?

VA Response: OAWP does not have any current or pending investigations in Providence. If there were any criminal allegations they would be investigated by VA Office of Inspector General (OIG). To date, VA OIG has not referred any allegations to OAWP or OMI for administrative investigation.

Question b: Can you provide me with a timeline for their release?

VA Response: OAWP does not have any current or pending investigations in Providence. If there were any criminal allegations they would be investigated by VA OIG. To date, VA OIG has not referred any allegations to OAWP or OMI for administrative investigation.

Question 5: It was also my understanding that OAWP was investigating the former Medical Center Director and the Chief of Staff. Can you provide me an

update on their employment status and where they are currently employed, if they are still with the VA?

VA Response: Dr. Suzanne McKenzie was appointed on October 20, 2013, to the medical center director (MCD) position and remains the current MCD. Dr. McKenzie was a person-of-interest in an older case but it was closed with no actions and didn't involve allegations about ineffective pharmacy operations and controlled substance oversight. Dr. Gregory Gillette served as the Chief of Staff from September 2, 2007, to December 31, 2014. Dr. Gregory's current status is unknown; but VA will provide an update as information can be ascertained

Question 6: During the hearing, VA stated that it is in the process of putting in place a requirement that lenders must provide information early in the refinancing process that clearly state the recoupment period for the fees associated with refinancing. Please provide a detailed description of VA's progress on this, including an estimated timeline for when this requirement will be effective.

VA Response: As noted during the hearing, VA's Loan Guaranty Service (LGY) was in the process of developing policy that would instruct lenders to provide information early in the refinance process that would clearly state the recoupment amount and period for fees and charges associated with refinance transactions.

On February 1, 2018, LGY published Circular 26-18-1, *Policy Guidance for VA Interest Rate Reduction Refinance Loans*. Beginning with loans closed on and after April 1, 2018, the policy states lenders should provide the *Veteran's Statement and Lender Certification* (note: lender certification only needed for payment increases of 20 percent or more), as outlined in *VA Lender's Handbook, Chapter 6, section 1d*. Lenders should provide this information to the Veteran with the initial disclosure documents no later than the third business day after receiving the Veteran's application. To verify compliance with the policy, VA implemented system enhancements in May 2018. The automated enhancements capture financial information, specific refinance calculations, and lender certifications.

Public Law 115-174 was signed by the President on May 24, 2018. This law requires lenders to meet a loan seasoning requirement, a net tangible benefit requirement, and a 36-month recoupment period. The VA requirement went into effect May 24, 2018, for new loan applications on or after that date. VA is compiling data to analyze lender compliance with the new legislation. VA continues to analyze the performance of these loans to determine compliance with the law and next actions, to include enhancements to reporting capabilities.

| Organization | Employee Name | Position Title | Pay Plan | Grade | Salary | Departure Date | Departure Nature of Action |
|---------------------------|---------------------------|--------------------------------|----------|-------|-----------|----------------|----------------------------|
| OFF/DEPUTY SECRETARY | (b)(6) | Special Assistant | GS | 13 | 103435.00 | 6/15/2018 | Termination |
| CENTER FOR MINORITY VETS | Ward, Barbara | Director | ES | 00 | 147030.00 | 7/27/2018 | Retirement-Voluntary |
| OFFICE OF THE SECRETARY | Farrisee, Gina Sgro | Executive Director | ES | 00 | 186793.00 | 7/8/2018 | Reassignment |
| OFF/DEPUTY SECRETARY | Devine, Daniel C | Executive Director | ES | 00 | 180487.00 | 7/8/2018 | Reassignment |
| OFFICE OF THE SECRETARY | Shulkin, David J | Secretary Of Va | EX | I | 199700.00 | 3/29/2018 | Termination |
| OFFICE OF THE SECRETARY | (b)(6) | Special Assistant | GS | 13 | 100203.00 | 6/24/2018 | Realignment |
| CENTER FOR WOMEN VETERANS | (b)(6) | Program Managemt Officer | GS | 15 | 164200.00 | 5/13/2018 | Conv to Provisional Appt |
| OFFICE OF THE SECRETARY | (b)(6) | Supervisory Program Specialist | GS | 15 | 148267.00 | 4/15/2018 | Chg to Lower Grade, |
| OFFICE OF THE SECRETARY | (b)(6) | Staff Assistant | GS | 15 | 161746.00 | 7/8/2018 | Reassignment |
| OFFICE OF THE SECRETARY | (b)(6) | Program Support Assistant | GS | 07 | 47504.00 | 5/26/2018 | Termination-Appt in |
| OFFICE OF THE SECRETARY | (b)(6) | Staff Assistant | GS | 13 | 119597.00 | 8/3/2018 | Retirement-Voluntary |
| OFFICE OF THE SECRETARY | (b)(6) | Public Affairs Specialist | GS | 15 | 148267.00 | 4/1/2018 | Realignment |
| OFFICE OF THE SECRETARY | (b)(6) | Program Managemt Officer | GS | 15 | 164200.00 | 6/24/2018 | Realignment |
| OFFICE OF THE SECRETARY | (b)(6) | Deputy Exec Secretary | GS | 14 | 141328.00 | 8/5/2018 | Promotion |
| OFFICE OF THE SECRETARY | (b)(6) | Program Specialist | GS | 13 | 96970.00 | 6/10/2018 | Conv to Provisional Appt |
| OFFICE OF THE SECRETARY | (b)(6) | Public Affairs Specialist | GS | 15 | 161746.00 | 4/1/2018 | Realignment |
| OFFICE OF THE SECRETARY | (b)(6) | Public Affairs Specialist | GS | 15 | 161746.00 | 4/1/2018 | Realignment |
| OFF/DEPUTY SECRETARY | (b)(6) | Deputy Exec Secretary | GS | 14 | 122230.00 | 6/24/2018 | Promotion |
| OFFICE OF THE SECRETARY | (b)(6) | Lead Executive Writer | GS | 15 | 134789.00 | 8/4/2018 | Chg to Lower Grade, |
| OFFICE OF THE SECRETARY | (b)(6) | Government Information Special | GS | 14 | 133689.00 | 3/31/2018 | Retirement-Voluntary |
| OFFICE OF THE SECRETARY | (b)(6) | Management Analyst | GS | 12 | 81548.00 | 7/22/2018 | Reassignment |
| OFFICE OF THE SECRETARY | (b)(6) | Program Specialist | GS | 14 | 129869.00 | 4/30/2018 | Retirement-Voluntary |
| OFFICE OF THE SECRETARY | (b)(6) | Staff Assistant | GS | 13 | 116365.00 | 6/10/2018 | Reassignment |
| OFF/DEPUTY SECRETARY | (b)(6) | Public Affairs Specialist | GS | 15 | 157253.00 | 4/1/2018 | Realignment |
| OFFICE OF THE SECRETARY | Bock, Tonia Y | EXECUTIVE SECRETARY | ES | 00 | 179192.20 | 8/10/2018 | Resignation |
| OFF/DEPUTY SECRETARY | (b)(6) | Hlth Sys Spec /Sa/Dir/ | GS | 14 | 118410.00 | 4/15/2018 | Conv to Term Appt NTE |
| CENTER FOR WOMEN VETERANS | Williams, Kayla M | Director | ES | 00 | 154635.00 | 7/13/2018 | Resignation |
| OFFICE OF THE SECRETARY | (b)(6) | Correspondence Analyst | GS | 11 | 70304.00 | 6/24/2018 | Realignment |
| OFF/DEPUTY SECRETARY | Connell, Lawrence B | Chief Of Staff | ES | 00 | 165300.00 | 7/22/2018 | Reassignment |
| OFFICE OF THE SECRETARY | Leinenkugel, Thomas Jacob | Senior White House Advisor | ES | 00 | 179700.00 | 7/27/2018 | Resignation |
| OFF/DEPUTY SECRETARY | Selnick, Darin Scott | Senior Advisor | ES | 00 | 165000.00 | 3/31/2018 | Resignation |
| OFF/DEPUTY SECRETARY | Bowman, Thomas Gray | Deputy Secretary Of Va | EX | II | 179700.00 | 6/15/2018 | Resignation |
| OFFICE OF THE SECRETARY | Tepper, Michael Todd | Senior Advisor | ES | 00 | 172100.00 | 4/16/2018 | Termination |
| CENTER FOR WOMEN VETERANS | (b)(6) | Program Specialist | GS | 13 | 106668.00 | 7/10/2018 | Term. during prob/trial |

| Name | Nature of Action Date of Other Actions | Nature of Action Code of Other Actions | Nature of Action Description of Other Actions |
|--------------------|--|--|---|
| (b)(6) | 4/15/2018 | 846 | Individual Time Off |
| | 1/7/2018 | 894 | General Adjustment |
| | 10/1/2017 | 893 | Within-range Increase |
| | 4/2/2017 | 846 | Individual Time Off |
| | 1/8/2017 | 894 | General Adjustment |
| | 10/2/2016 | 893 | Within-range Increase |
| | 1/10/2016 | 894 | General Adjustment |
| | 12/27/2015 | 846 | Individual Time Off |
| | 10/2/2015 | 570 | Conv to Exc Appt |
| | 5/31/2015 | 998 | Conversion Row |
| | 4/19/2015 | 792 | Chg in Duty Station |
| | 3/8/2015 | 570 | Conv to Exc Appt |
| | 1/11/2015 | 894 | General Adjustment |
| | 4/6/2014 | 893 | Within-range Increase |
| Ward,Barbara | 1/12/2014 | 894 | Gen Market or Structural |
| | 1/7/2018 | 891 | Performance-based Pay Inc |
| | 1/11/2017 | 999 | Master Record Update |
| | 5/31/2015 | 998 | Conversion Row |
| | 4/5/2015 | 800 | Chg in Data Element |
| | 2/23/2014 | 891 | Performance-based Pay Inc |
| Farrisee,Gina Sgro | 2/9/2014 | 882 | Chg in SCD |
| | 1/7/2018 | 891 | Performance-based Pay Inc |
| | 12/10/2017 | 879 | SES Performance Award |
| | 1/8/2017 | 891 | Performance-based Pay Inc |
| | 5/9/2016 | 543 | Conv to Reins-SES Career |
| | 1/10/2016 | 891 | Performance-based Pay Inc |
| | 5/31/2015 | 998 | Conversion Row |
| | 4/5/2015 | 800 | Chg in Data Element |
| | 1/25/2015 | 891 | Performance-based Pay Inc |
| | 9/10/2013 | 570 | Conv to Exc Appt |
| Devine,Daniel C | 7/29/2013 | 142 | SES Career Appt |
| | 1/7/2018 | 891 | Performance-based Pay Inc |
| | 12/10/2017 | 879 | SES Performance Award |
| | 1/10/2016 | 891 | Performance-based Pay Inc |
| | 5/31/2015 | 998 | Conversion Row |
| | 4/5/2015 | 800 | Chg in Data Element |
| | 1/25/2015 | 891 | Performance-based Pay Inc |
| | 2/23/2014 | 891 | Performance-based Pay Inc |
| | 2/19/2014 | 879 | SES Performance Award |
| | 5/6/2013 | 879 | SES Performance Award |
| Shulkin,David J | 2/14/2017 | 570 | Conv to Exc Appt |
| | 7/13/2015 | 999 | Master Record Update |
| (b)(6) | 6/29/2015 | 170 | Exc Appt |
| | 1/25/2018 | 999 | Master Record Update |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/21/2017 | 840 | Individual Cash Award RB |
| | 11/26/2017 | 893 | Within-range Increase |
| | 4/5/2017 | 999 | Master Record Update |
| | 2/23/2017 | 840 | Individual Cash Award RB |
| | 1/8/2017 | 894 | General Adjustment |
| | 11/27/2016 | 893 | Within-range Increase |
| | 1/10/2016 | 894 | General Adjustment |
| | 12/22/2015 | 846 | Individual Time Off |
| | 11/29/2015 | 702 | Promotion |

| Name | Nature of Action Date of Other Actions | Nature of Action Code of Other Actions | Nature of Action Description of Other Actions |
|--------|--|--|---|
| (b)(6) | 8/9/2015 | 998 | Conversion Row |
| | 6/28/2015 | 893 | Within-range Increase |
| | 1/11/2015 | 894 | General Adjustment |
| | 12/19/2014 | 846 | Individual Time Off |
| | 6/29/2014 | 702 | Promotion |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 12/18/2013 | 846 | Individual Time Off |
| | 9/8/2013 | 893 | Within-range Increase |
| | 5/31/2018 | 999 | Master Record Update |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/22/2017 | 846 | Individual Time Off |
| | 10/1/2017 | 790 | Realignment |
| | 2/24/2017 | 846 | Individual Time Off |
| | 1/8/2017 | 894 | General Adjustment |
| | 9/18/2016 | 893 | Within-range Increase |
| | 1/10/2016 | 894 | General Adjustment |
| | 1/8/2016 | 840 | Individual Cash Award RB |
| | 8/9/2015 | 998 | Conversion Row |
| | 1/11/2015 | 894 | General Adjustment |
| | 12/19/2014 | 840 | Individual Cash Award RB |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 12/18/2013 | 840 | Individual Cash Award RB |
| | 9/22/2013 | 893 | Within-range Increase |
| (b)(6) | 4/28/2018 | 999 | Master Record Update |
| | 1/21/2018 | 840 | Individual Cash Award RB |
| | 1/7/2018 | 894 | General Adjustment |
| | 10/1/2017 | 790 | Realignment |
| | 3/19/2017 | 893 | Within-range Increase |
| | 2/23/2017 | 840 | Individual Cash Award RB |
| | 1/8/2017 | 894 | General Adjustment |
| | 3/20/2016 | 893 | Within-range Increase |
| | 1/10/2016 | 894 | General Adjustment |
| | 1/8/2016 | 840 | Individual Cash Award RB |
| | 8/9/2015 | 998 | Conversion Row |
| | 3/23/2015 | 935 | Supvr/Manager/Probation |
| | 3/22/2015 | 893 | Within-range Increase |
| | 1/11/2015 | 894 | General Adjustment |
| | 12/19/2014 | 840 | Individual Cash Award RB |
| (b)(6) | 3/23/2014 | 702 | Promotion |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 12/18/2013 | 840 | Individual Cash Award RB |
| | 1/21/2018 | 840 | Individual Cash Award RB |
| | 1/7/2018 | 894 | General Adjustment |
| | 10/1/2017 | 790 | Realignment |
| | 6/11/2017 | 893 | Within-range Increase |
| | 2/23/2017 | 840 | Individual Cash Award RB |
| | 1/8/2017 | 894 | General Adjustment |
| | 1/10/2016 | 894 | General Adjustment |
| | 1/8/2016 | 840 | Individual Cash Award RB |
| | 8/9/2015 | 998 | Conversion Row |
| | 6/14/2015 | 893 | Within-range Increase |
| | 1/11/2015 | 894 | General Adjustment |
| | 12/19/2014 | 846 | Individual Time Off |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 12/18/2013 | 840 | Individual Cash Award RB |

| Name | Nature of Action Date of Other Actions | Nature of Action Code of Other Actions | Nature of Action Description of Other Actions |
|--------|--|--|---|
| (b)(6) | 11/3/2013 | 780 | Name Chg from |
| | 6/16/2013 | 893 | Within-range Increase |
| | 2/11/2013 | 840 | Individual Cash Award RB |
| | 5/13/2018 | 893 | Within-range Increase |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/21/2017 | 840 | Individual Cash Award RB |
| | 10/1/2017 | 790 | Realignment |
| | 5/14/2017 | 893 | Within-range Increase |
| | 2/24/2017 | 840 | Individual Cash Award RB |
| | 1/8/2017 | 894 | General Adjustment |
| (b)(6) | 8/12/2016 | 999 | Master Record Update |
| | 1/10/2016 | 894 | General Adjustment |
| | 8/9/2015 | 998 | Conversion Row |
| | 5/17/2015 | 170 | Exc Appt |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/22/2017 | 846 | Individual Time Off |
| | 10/1/2017 | 790 | Realignment |
| | 2/23/2017 | 846 | Individual Time Off |
| | 1/8/2017 | 894 | General Adjustment |
| | 11/27/2016 | 893 | Within-range Increase |
| (b)(6) | 1/10/2016 | 894 | General Adjustment |
| | 12/22/2015 | 846 | Individual Time Off |
| | 8/9/2015 | 998 | Conversion Row |
| | 1/11/2015 | 894 | General Adjustment |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 12/1/2013 | 893 | Within-range Increase |
| | 1/21/2018 | 882 | Chg in SCD |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/22/2017 | 846 | Individual Time Off |
| | 10/20/2017 | 880 | Chg in Tenure Group |
| (b)(6) | 2/24/2017 | 840 | Individual Cash Award RB |
| | 1/8/2017 | 894 | General Adjustment |
| | 10/16/2016 | 893 | Within-range Increase |
| | 1/10/2016 | 894 | General Adjustment |
| | 11/20/2015 | 846 | Individual Time Off |
| | 10/18/2015 | 893 | Within-range Increase |
| | 8/9/2015 | 998 | Conversion Row |
| | 1/11/2015 | 894 | General Adjustment |
| | 12/14/2014 | 922 | Change in Org Cost Center |
| | 10/19/2014 | 893 | Within-range Increase |
| (b)(6) | 1/12/2014 | 894 | Gen Market or Structural |
| | 10/20/2013 | 190 | Provisional Appt NTE |
| | 1/21/2018 | 840 | Individual Cash Award RB |
| | 1/7/2018 | 894 | General Adjustment |
| | 7/23/2017 | 893 | Within-range Increase |
| | 2/23/2017 | 840 | Individual Cash Award RB |
| | 1/8/2017 | 894 | General Adjustment |
| | 1/10/2016 | 894 | General Adjustment |
| | 12/22/2015 | 846 | Individual Time Off |
| | 8/9/2015 | 998 | Conversion Row |
| (b)(6) | 1/11/2015 | 894 | General Adjustment |
| | 12/19/2014 | 840 | Individual Cash Award RB |
| | 7/27/2014 | 893 | Within-range Increase |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 12/18/2013 | 840 | Individual Cash Award RB |

| Name | Nature of Action Date of Other Actions | Nature of Action Code of Other Actions | Nature of Action Description of Other Actions |
|--------|--|--|---|
| (b)(6) | 5/27/2018 | 893 | Within-range Increase |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/21/2017 | 840 | Individual Cash Award RB |
| | 10/1/2017 | 790 | Realignment |
| | 2/23/2017 | 840 | Individual Cash Award RB |
| | 1/8/2017 | 894 | General Adjustment |
| | 3/17/2016 | 999 | Master Record Update |
| | 1/10/2016 | 894 | General Adjustment |
| | 1/8/2016 | 840 | Individual Cash Award RB |
| | 12/6/2015 | 713 | Chg to Lower Grade, |
| | 8/9/2015 | 998 | Conversion Row |
| | 5/31/2015 | 893 | Within-range Increase |
| | 1/11/2015 | 894 | General Adjustment |
| | 12/19/2014 | 840 | Individual Cash Award RB |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 1/2/2014 | 849 | Individual Cash Award NRB |
| | 12/18/2013 | 846 | Individual Time Off |
| (b)(6) | 6/2/2013 | 893 | Within-range Increase |
| | 7/8/2018 | 500 | Conv to Career Appt |
| | 4/15/2018 | 500 | Conv to Career Appt |
| | 2/12/2018 | 846 | Individual Time Off |
| | 2/4/2018 | 922 | Change in Org Cost Center |
| | 1/7/2018 | 894 | General Adjustment |
| | 10/1/2017 | 790 | Realignment |
| | 1/8/2017 | 894 | General Adjustment |
| | 9/23/2016 | 880 | Chg in Tenure Group |
| | 9/18/2016 | 893 | Within-range Increase |
| | 1/10/2016 | 894 | General Adjustment |
| | 1/7/2016 | 846 | Individual Time Off |
| | 9/20/2015 | 893 | Within-range Increase |
| | 8/9/2015 | 998 | Conversion Row |
| | 1/11/2015 | 894 | General Adjustment |
| | 12/5/2014 | 846 | Individual Time Off |
| | 9/21/2014 | 893 | Within-range Increase |
| | 1/12/2014 | 894 | Gen Market or Structural |
| (b)(6) | 9/22/2013 | 101 | Career-Cond Appt |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/22/2017 | 846 | Individual Time Off |
| | 2/24/2017 | 846 | Individual Time Off |
| | 1/8/2017 | 894 | General Adjustment |
| | 1/10/2016 | 894 | General Adjustment |
| | 11/20/2015 | 846 | Individual Time Off |
| | 8/23/2015 | 570 | Conv to Exc Appt |
| | 8/9/2015 | 998 | Conversion Row |
| | 1/11/2015 | 894 | General Adjustment |
| | 8/24/2014 | 590 | Conv to Provisional Appt |
| | 1/12/2014 | 894 | Gen Market or Structural |
| (b)(6) | 1/21/2018 | 893 | Within-range Increase |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/22/2017 | 846 | Individual Time Off |
| | 2/24/2017 | 846 | Individual Time Off |
| | 1/8/2017 | 894 | General Adjustment |
| | 1/24/2016 | 893 | Within-range Increase |
| | 1/10/2016 | 894 | General Adjustment |
| | 11/20/2015 | 846 | Individual Time Off |

| Name | Nature of Action Date of Other Actions | Nature of Action Code of Other Actions | Nature of Action Description of Other Actions |
|--------|--|--|---|
| (b)(6) | 8/9/2015 | 998 | Conversion Row |
| | 1/11/2015 | 894 | General Adjustment |
| | 1/26/2014 | 893 | Within-range Increase |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 11/14/2013 | 849 | Individual Cash Award NRB |
| | 8/4/2018 | 713 | Chg to Lower Grade, |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/22/2017 | 846 | Individual Time Off |
| | 11/11/2017 | 713 | Chg to Lower Grade, |
| | 10/1/2017 | 790 | Realignment |
| | 8/1/2017 | 999 | Master Record Update |
| | 6/25/2017 | 893 | Within-range Increase |
| | 2/23/2017 | 846 | Individual Time Off |
| | 1/8/2017 | 894 | General Adjustment |
| | 6/26/2016 | 893 | Within-range Increase |
| | 1/10/2016 | 894 | General Adjustment |
| | 8/14/2015 | 999 | Master Record Update |
| | 8/9/2015 | 998 | Conversion Row |
| | 6/28/2015 | 130 | Transfer |
| | 6/24/2018 | 703 | Promotion |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/22/2017 | 846 | Individual Time Off |
| | 10/1/2017 | 790 | Realignment |
| | 9/10/2017 | 703 | Promotion |
| | 8/1/2017 | 999 | Master Record Update |
| | 6/25/2017 | 893 | Within-range Increase |
| | 2/23/2017 | 846 | Individual Time Off |
| | 1/8/2017 | 894 | General Adjustment |
| | 6/26/2016 | 893 | Within-range Increase |
| | 1/10/2016 | 894 | General Adjustment |
| | 8/14/2015 | 999 | Master Record Update |
| | 8/9/2015 | 998 | Conversion Row |
| | 6/28/2015 | 130 | Transfer |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/21/2017 | 840 | Individual Cash Award RB |
| | 10/1/2017 | 893 | Within-range Increase |
| | 2/23/2017 | 846 | Individual Time Off |
| | 1/8/2017 | 894 | General Adjustment |
| | 1/10/2016 | 894 | General Adjustment |
| | 1/8/2016 | 840 | Individual Cash Award RB |
| | 10/4/2015 | 893 | Within-range Increase |
| | 8/9/2015 | 998 | Conversion Row |
| | 1/11/2015 | 894 | General Adjustment |
| | 12/19/2014 | 840 | Individual Cash Award RB |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 11/27/2013 | 849 | Individual Cash Award NRB |
| | 10/6/2013 | 893 | Within-range Increase |
| | 9/8/2013 | 721 | Reassignment |
| (b)(6) | 2/4/2018 | 500 | Conv to Career Appt |
| | 1/21/2018 | 590 | Conv to Provisional Appt |
| | 1/7/2018 | 894 | General Adjustment |
| (b)(6) | 10/15/2017 | 893 | Within-range Increase |
| | 10/1/2017 | 790 | Realignment |
| | 1/8/2017 | 894 | General Adjustment |
| | 10/21/2016 | 880 | Chg in Tenure Group |

| Name | Nature of Action Date of Other Actions | Nature of Action Code of Other Actions | Nature of Action Description of Other Actions |
|--------------|--|--|---|
| (b)(6) | 10/16/2016 | 893 | Within-range Increase |
| | 1/10/2016 | 894 | General Adjustment |
| | 11/16/2015 | 840 | Individual Cash Award RB |
| | 10/18/2015 | 893 | Within-range Increase |
| | 8/9/2015 | 998 | Conversion Row |
| | 1/11/2015 | 894 | General Adjustment |
| | 12/5/2014 | 846 | Individual Time Off |
| | 11/2/2014 | 883 | Chg in Vet Pref-RIF |
| | 10/19/2014 | 893 | Within-range Increase |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 10/20/2013 | 101 | Career-Cond Appt |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/21/2017 | 840 | Individual Cash Award RB |
| | 10/1/2017 | 790 | Realignment |
| | 2/24/2017 | 840 | Individual Cash Award RB |
| | 1/8/2017 | 894 | General Adjustment |
| | 8/21/2016 | 790 | Realignment |
| | 7/24/2016 | 893 | Within-range Increase |
| | 1/10/2016 | 894 | General Adjustment |
| | 12/2/2015 | 846 | Individual Time Off |
| | 8/9/2015 | 998 | Conversion Row |
| | 1/11/2015 | 894 | General Adjustment |
| | 12/29/2014 | 846 | Individual Time Off |
| | 7/27/2014 | 702 | Promotion |
| | 6/29/2014 | 893 | Within-range Increase |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 10/31/2013 | 840 | Individual Cash Award RB |
| | 10/20/2013 | 922 | Change in Org Cost Center |
| | 1/21/2018 | 840 | Individual Cash Award RB |
| | 1/7/2018 | 894 | General Adjustment |
| | 10/1/2017 | 790 | Realignment |
| | 2/23/2017 | 840 | Individual Cash Award RB |
| | 1/8/2017 | 894 | General Adjustment |
| | 1/10/2016 | 894 | General Adjustment |
| | 1/8/2016 | 840 | Individual Cash Award RB |
| | 8/9/2015 | 998 | Conversion Row |
| | 1/11/2015 | 894 | General Adjustment |
| | 12/19/2014 | 840 | Individual Cash Award RB |
| | 1/12/2014 | 894 | Gen Market or Structural |
| | 12/18/2013 | 840 | Individual Cash Award RB |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/22/2017 | 846 | Individual Time Off |
| | 8/6/2017 | 893 | Within-range Increase |
| | 2/24/2017 | 846 | Individual Time Off |
| | 1/8/2017 | 894 | General Adjustment |
| | 4/5/2016 | 500 | Conv to Career Appt |
| | 1/10/2016 | 894 | General Adjustment |
| Bock,Tonia Y | 8/9/2015 | 190 | Provisional Appt NTE |
| | 1/7/2018 | 891 | Performance-based Pay Inc |
| | 12/10/2017 | 879 | SES Performance Award |
| | 1/8/2017 | 891 | Performance-based Pay Inc |
| | 12/11/2016 | 879 | SES Performance Award |
| (b)(6) | 3/1/2016 | 999 | Master Record Update |
| | 1/24/2016 | 142 | SES Career Appt |
| | 7/18/2018 | 999 | Master Record Update |

| Name | Nature of Action Date of Other Actions | Nature of Action Code of Other Actions | Nature of Action Description of Other Actions |
|--------------------------------|--|--|---|
| Williams, Kayla M (b)(6) | 5/27/2018 | 893 | Within-range Increase |
| | 1/21/2018 | 840 | Individual Cash Award RB |
| | 1/7/2018 | 894 | General Adjustment |
| | 10/1/2017 | 790 | Realignment |
| | 5/28/2017 | 893 | Within-range Increase |
| | 2/24/2017 | 840 | Individual Cash Award RB |
| | 1/8/2017 | 894 | General Adjustment |
| | 5/29/2016 | 702 | Promotion |
| | 3/6/2016 | 893 | Within-range Increase |
| | 2/21/2016 | 130 | Transfer |
| | 1/7/2018 | 891 | Performance-based Pay Inc |
| | 5/2/2016 | 146 | SES Noncareer Appt |
| | 7/8/2018 | 893 | Within-range Increase |
| | 1/7/2018 | 894 | General Adjustment |
| | 12/21/2017 | 840 | Individual Cash Award RB |
| | 7/9/2017 | 893 | Within-range Increase |
| | 5/20/2017 | 880 | Chg in Tenure Group |
| | 2/24/2017 | 840 | Individual Cash Award RB |
| | 1/8/2017 | 894 | General Adjustment |
| | 7/10/2016 | 702 | Promotion |
| | 6/12/2016 | 998 | Conversion Row |
| | 5/29/2016 | 893 | Within-range Increase |
| | 4/3/2016 | 800 | Chg in Data Element |
| | 1/10/2016 | 894 | General Adjustment |
| | 12/24/2015 | 840 | Individual Cash Award RB |
| Connell, Lawrence B | 4/9/2018 | 546 | Conv to SES Noncareer |
| | 1/7/2018 | 894 | General Adjustment |
| | 9/17/2017 | 515 | Conv to Appt NTE |
| | 5/21/2017 | 760 | Ext of Appt NTE |
| Leinenkugel, Thomas Jacob | 1/20/2017 | 190 | Provisional Appt NTE |
| | 3/22/2017 | 546 | Conv to SES Noncareer |
| | 3/13/2017 | 762 | Ext of SES Limited Appt |
| | 2/27/2017 | 999 | Master Record Update |
| | 2/11/2017 | 762 | Ext of SES Limited Appt |
| Selnick, Darin Scott | 1/20/2017 | 190 | Provisional Appt NTE |
| | 3/23/2017 | 546 | Conv to SES Noncareer |
| | 3/16/2017 | 762 | Ext of SES Limited Appt |
| | 2/14/2017 | 762 | Ext of SES Limited Appt |
| Bowman, Thomas Gray | 1/23/2017 | 190 | Provisional Appt NTE |
| | 10/10/2017 | 999 | Master Record Update |
| | 10/1/2017 | 882 | Chg in SCD |
| Tepper, Michael Todd (b)(6) | 8/4/2017 | 170 | Exc Appt |
| | 12/1/2017 | 148 | SES Ltd Term Appt NTE |
| | 11/27/2017 | 999 | Master Record Update |
| | 2/4/2018 | 501 | Conv to Career-Cond Appt |
| | 2/3/2018 | 999 | Master Record Update |
| | 1/7/2018 | 190 | Provisional Appt NTE |

August 1, 2018

The Honorable Robert Wilkie
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

Dear Mr. Wilkie:

In reference to our Full Committee hearing entitled, “**The VA Accountability and Whistleblower Protection Act: One Year Later**” held on July 17, 2018, I would appreciate it if you could answer the enclosed hearing questions by the close of business on September 14, 2018.

Committee practice permits the hearing record to remain open to permit Members to submit additional questions to the witnesses. Attached are additional questions directed to you.

In preparing your answers to these questions, please provide your answers consecutively and single-spaced and include the full text of the question you are addressing in bold font. To facilitate the printing of the hearing record, please e-mail your response in a **Word document**, to (b)(6) (b)(6)@mail.house.gov by the close of business on September 14, 2018. If you have any questions please contact her at 202-225-(b)(6)

Sincerely,

TIM J. WALZ
Ranking Member
House Veterans Affairs Committee

TW (b)(6)

**COMMITTEE ON VETERANS' AFFAIRS
U.S. HOUSE OF REPRESENTATIVES
FULL COMMITTEE HEARING**

“The VA Accountability and Whistleblower Protection Act: One Year Later”

August 1, 2018

Questions For The Record

1. Please provide a list of all VA employees who are currently on detail outside of the VA. For each employee, please state the following information:
 - a. Their VA job description for the most recent role they held at VA prior to being detailed out of the VA,
 - b. Their federal employment pay and grade,
 - c. The date their current detail began, and
 - d. The date their current detail is expected to end.
2. Please provide a detailed list of every employee who has departed the Office of the Secretary, including the offices of the Executive Secretary, Protocol Office, the Center for Women Veterans, and the Center for Minority Veterans since March 28, 2018. For each employee, please state the following information:
 - a. A detailed description of their role prior to their departure,
 - b. Their federal employment pay and grade prior to their departure,
 - c. The date of their departure,
 - d. The reason for their departure, and
 - e. A detailed list of any employment actions, including but not limited to disciplinary actions, that were taken or that the employee was notified of prior to their departure.
3. Recently, the Office of Inspector General (OIG) has been involved in a number of opioid-related healthcare inspections and criminal investigations. One of the most recent cases involved the Providence, RI VA Medical Center and the indictment of a nurse for opioid diversion and tampering by the U.S. Attorney for the District of Rhode Island. It is my understanding that the OIG was focused on conducting a criminal investigation and did not review administrative practices that may have contributed to the alleged crimes.
 - a. Has the Office of Accountability and Whistleblower Protection (OAWP) decided to consider this case?
 - b. In light of GAO's report last year about ineffective pharmacy and controlled substance oversight, has OAWP decided to look into these practices VA-wide?

4. My office has yet to receive the final investigator reports conducted by either the Office of Medical Inspector or the OAWP. In late Spring, VA informed my staff that these reports were in their final stages.
 - a. Can you explain some of the delays, especially regarding the report from OAWP?
 - b. Can you provide me with a timeline for their release?
5. It was also my understanding that OAWP was investigating the former Medical Center Director and the Chief of Staff. Can you provide me an update on their employment status and where they are currently employed, if they are still with the VA?
6. During the hearing, VA stated that it is in the process of putting in place a requirement that lenders must provide information early in the refinancing process that clearly state the recoupment period for the fees associated with refinancing. Please provide a detailed description of VA's progress on this, including an estimated timeline for when this requirement will be effective.

**U.S. Department of Veterans Affairs
Questions for the Record
Committee on Veterans' Affairs
U.S. House of Representatives
"VA Electronic Health Record Modernization: The Beginning of the Beginning"**

August 1, 2018

Congresswoman Julia Brownley

1. **"During the June 26, 2018 full Committee hearing, VA indicated that it had various enforcement abilities to compel private electronic health record companies to participate in increased data sharing between the VA and community providers, in order to promote interoperability. Please detail for the Committee what those enforcement tools are."**

VA Response: VA's enforcement tools center around the use of contracts. In the contract with Cerner Corporation, VA specified the use of the CommonWell service to act as a Health Information Exchange between the Department of Veterans Affairs (VA), the Department of Defense, and participating community providers that operate on multiple different platforms to enable clinical data sharing. Additionally, VA has structured contracts with community providers to include preferred data standards and transactional elements. VA tools to promote interoperability are supplemented by the national interoperability drivers in Centers for Medicare and Medicaid Services and Office of the National Coordinator for Health Information Technology.

Congressman Scott Peters

To Acting VA Secretary O'Rourke or Mr. Short:

1. **The VA has announced its intent to move to a cloud based system, if so:
 - a. **How is the infrastructure and architecture being supported?****

VA Response: VA has implemented a secure, cloud-based infrastructure and architecture through the creation of the VA Enterprise Cloud (VAEC), a multi-vendor platform for the development and deployment of VA cloud applications. The VAEC is built on top of two leading cloud service providers (CSP)—Amazon Web Services (AWS) Government Cloud and Microsoft Azure Government (MAG)—both of which are government-only cloud platforms. Both AWS and MAG have met stringent Federal security requirements including the High Baseline Requirements under the Federal Risk and Authorization Management Program (FedRAMP). In the future, the VAEC can be expanded to include other cloud platforms.

The VAEC architecture is also designed to support the rapid rollout of cloud-based applications. For example, part of the VAEC architecture includes a toolkit of common, general support services (GSS) which includes capabilities such as user/access authentication and performance monitoring which each application can leverage, speeding and simplifying the migration of existing or development of new applications in the cloud. The VAEC also implements many of the National Institute

U.S. Department of Veterans Affairs
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"VA Electronic Health Record Modernization: The Beginning of the Beginning"

August 1, 2018

of Standards and Technology (NIST), FedRAMP, and VA-required privacy and security controls reducing the time each application should take to obtain a VA Authority to Operate (ATO).

b. What security strategy is being used to implement a security system to secure the data in the cloud?

VA Response: The VAEC Cloud Security Strategy ensures Veteran data are secure by leveraging FedRAMP-authorized solutions. The VAEC implements data safeguards through a layered approach including:

- i. encrypted data transfer,
- ii. encryption at rest within the VAEC GovCloud instances,
- iii. role-based access controls,
- iv. industry best practice security scanning solutions,
- v. audit controls with the CSP for access violations (such as unregistered systems and gateways), and
- vi. password policies.

All VAEC government-focused clouds including AWS and MAG are restricted to Government agency use. For security controls under Agency responsibility, VA follows the Office of Management and Budget and National Institute of Standards and Technology (NIST) mandated guidance. Additionally, all interconnections between the CSPs and VA use dedicated, Government-managed, trusted network connections which are encrypted following federal guidelines. Data security is of paramount importance to VA.

This Cloud Security Strategy uses the VA Enterprise Security Architecture (ESA) Framework that is based on the National Security Agency (NSA) Community Gold Standard Framework Version 2.0. The VA ESA Framework includes four overarching cybersecurity functions: Govern, Protect, Detect, and Respond and Recover. Each function defines cybersecurity capabilities and activities to adequately secure VA's cloud environment. The VA ESA Framework follows and aligns with the NIST Cybersecurity Framework.

VA uses an incremental approach that continuously evolve the required cloud security functions, capabilities, and solutions to address risks and support VA business and information technology (IT) initiatives. The implementation of each capability requires a three-pronged approach that involves people, processes, and technologies. For each capability, VA identifies and assess technologies that can improve the security and resilience of the VA cloud environment.

**U.S. Department of Veterans Affairs
Questions for the Record
Committee on Veterans' Affairs
U.S. House of Representatives
"VA Electronic Health Record Modernization: The Beginning of the Beginning"**

August 1, 2018

- 2. Will the VA continue to support consolidation of its IT footprint to reduce cost? What will Cerner's role be to support this effort as a new prime contractor?**

VA Response: The VA Office of Information Technology (OIT) is ultimately responsible for managing VA's IT footprint. The Office of Electronic Health Record Modernization (OEHRM) only has a small portion of VA's IT footprint focused on the electronic health record (EHR) modernization effort. OEHRM and OIT look forward to collaborating on future acquisitions to ensure a judicious use of resources in support of our Veterans.

The terms and conditions of the Cerner EHR contract call for a replacement, transition, integration, and/or interfacing of existing systems in support of maintaining the continuity of care to our Veterans and other beneficiaries through an electronic health record. During FY 2019, VA will be developing a "pivot" strategy in support of the transition of legacy VistA EHR systems to the new Cerner Millennium solution.

- 3. What steps are being taken now to ensure no PII (personally identifiable information) or medical data is being lost or stolen?**

VA Response: VA protects PII or medical data against loss of theft as follows:

1. Completion of a Privacy Threshold Analysis (PTA) and Privacy Impact Analysis (PIA). The purpose of the PTA/ PIA is to:
 - Ensure handling of information conforms to applicable legal, regulatory, and policy requirements regarding privacy,
 - Determine the risks and effects of collecting, maintaining, and disseminating information in identifiable form in an electronic information system, and
 - Examine and evaluate protections and alternative processes for handling information to mitigate potential privacy risks.
2. Any VA PII or medical data stored in the cloud must be FedRAMP certified at the High level which would enable VA to rapidly adapt from old legacy systems to secure and cost-effective cloud-based technology. FedRAMP certification aligns with the NIST Risk Management Framework covered in NIST Special Publication 800-37. Higher security levels have a higher level of authentication required in order to enter, access, and gain control of these systems resulting in tighter security to protect VA PII and medical data.

**U.S. Department of Veterans Affairs
Questions for the Record
Committee on Veterans' Affairs
U.S. House of Representatives
"VA Electronic Health Record Modernization: The Beginning of the Beginning"**

August 1, 2018

3. The Interconnection Security Agreement and Memorandum of Understanding have been executed. VA utilizes this to document the terms and conditions for sharing VA data by connecting systems in a secure manner and identify and address any security and privacy risks.
4. The contractors involved in the implementation and management of Cerner Millennium are required to complete training on the privacy and security of protected health information (PHI) under the Health Insurance Portability and Accountability Act regulations, as well as the Information Security training, which contains the Rules of Behavior they must sign, acknowledging their responsibilities to protect PHI.

To Acting Secretary VA O'Rourke:

- 1. What is the status of hiring health IT staff needed for this project?**

VA Response: The Department of Veterans Affairs (VA) is working through the classification process with Human Resources Management and Consulting Service. Specifically, VA is finalizing position descriptions for health information technology (IT) positions needed for the Office of Electronic Health Record Modernization (OEHRM) and will then begin the recruitment process. VA plans to hold typical recruitment activities, including career fairs, and plans to utilize direct hire authority for the GS-2210 positions to attract qualified talent.

- a. Is the VA having trouble finding people who have the experience necessary to execute this project?**

VA Response: VA does not believe it will have trouble finding staff with the appropriate knowledge, skills, and abilities once OEHRM is able to directly hire staff. OEHRM is currently working with Human Resources Management and Consulting Service to classify government position descriptions and in the interim, OEHRM is supplementing with the Project Management Office's contracted support to fill critical vacancies as a temporary solution. OEHRM will also be able to hire industry experts via the Intergovernmental Personnel Act (IPA) to ensure the program has the necessary clinical EHR deployment experience.

- b. Can our Committee assist in any way to attract talented people to make sure this project is successful?**

VA Response: VA sincerely appreciates the offer for assistance and believes that if provided with the appropriate level of funding and oversight, this program will be highly successful and ultimately provide better care for our Nation's Veterans. VA will continue to engage with Congress on ways that we can together work to ensure

**U.S. Department of Veterans Affairs
Questions for the Record
Committee on Veterans' Affairs
U.S. House of Representatives
"VA Electronic Health Record Modernization: The Beginning of the Beginning"**

August 1, 2018

that VA can attract and retain the most talented professionals in their fields to contribute to the mission of serving Veterans.

August 1, 2018

The Honorable Robert Wilkie
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

Dear Mr. Wilkie:

In reference to our Full Committee hearing entitled, "VA Electronic Health Record Modernization: The Beginning of the Beginning", I would appreciate it if you could answer the enclosed hearing questions by the close of business on September 7, 2018.

Committee practice permits the hearing record to remain open to permit Members to submit additional questions to the witnesses. Attached are additional questions directed to you.

In preparing your answers to these questions, please provide your answers consecutively and single-spaced and include the full text of the question you are addressing in bold font. To facilitate the printing of the hearing record, please e-mail your response in a **Word document**, to (b)(6) at (b)(6)@mail.house.gov by the close of business on September 7, 2018. If you have any questions please contact her at 202-225-(b)(6)

Sincerely,

TIM J. WALZ
Ranking Member
House Veterans Affairs Committee

TW: (b)(6)

**COMMITTEE ON VETERANS' AFFAIRS
U.S. HOUSE OF REPRESENTATIVES
FULL COMMITTEE HEARING**

"VA Electronic Health Record Modernization: The Beginning of the Beginning"

August 1, 2018

Questions For The Record

Rep. Julia Brownley

1. "During the June 26, 2018 full Committee hearing, VA indicated that it had various enforcement abilities to compel private electronic health record companies to participate in increased data sharing between the VA and community providers, in order to promote interoperability. Please detail for the Committee what those enforcement tools are."

Rep. Scott Peters

To Acting VA Secretary O'Rourke or Mr. Short:

1. The VA has announced its intent to move to a cloud based system, if so: **(OEHRM/OIT)**
 - a. How is the infrastructure and architecture being supported?
 - b. What security strategy is being used to implement a security system to secure the data in the cloud?
2. Will the VA continue to support consolidation of its IT footprint to reduce cost? What will Cerner's role be to support this effort as a new prime contractor? **(OEHRM/OIT)**
3. What steps are being taken now to ensure no PII (personally identifiable information) or medical data is being lost or stolen? **(OEHRM/OIT)**

To Acting Secretary VA O'Rourke:

1. What is the status of hiring health IT staff needed for this project? **(OEHRM)**
 - a. Is the VA having trouble finding people who have the experience necessary to execute this project?
 - b. Can our Committee assist in any way to attract talented people to make sure this project is successful?

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REPUBLICANS
DAVID P. ROE, TENNESSEE, CHAIRMAN

DEMOCRATS
TIM WALTZ, MINNESOTA, RANKING

U.S. House of Representatives

COMMITTEE ON VETERANS' AFFAIRS

ONE HUNDRED FIFTEENTH CONGRESS

335 CANNON HOUSE OFFICE BUILDING

WASHINGTON, DC 20515

<http://veterans.house.gov>

August 8, 2018

The Honorable Robert Wilkie
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue N.W.
Washington, D.C. 20420

Pertinent
to current
news cycle

Dear Secretary Wilkie,

We look forward to working with you to improve the delivery of health care and benefits to our nation's veterans.

However, we are deeply concerned that three private individuals—all members of Mar-a-Lago, President Trump's private Palm Beach, Florida club—who are not accountable to veterans or taxpayers and none of whom have served in the United States military or government, have been placed in decision-making positions in the Department without nomination by the President or Senate confirmation. Reports demonstrate they have been granted the power to significantly influence policies executed by the Department.

Mr. Ike Perlmutter, Chairman and Chief Executive Officer of Marvel Entertainment, LLC., Dr. Bruce Moskowitz, an Internal Medicine specialist, and Mr. Marc Sherman, an attorney without health care industry experience, are reported to have "spoke[n] with VA officials daily" and reviewed "all manner of policy and personnel decisions," made at VA, according to a recent report published by ProPublica.¹ They reportedly "prodded the VA to start new programs" and required VA leaders to "...go down and kiss the ring," with that travel paid for by taxpayers. They allegedly caused VA leaders who disagreed with them to lose their jobs or be passed over for promotions, and reportedly flouted government rules and processes in place to require transparency and accountability.

Some of their actions even support allegations that they may have used their influence for personal gain. Mr. Perlmutter arranged a VA Veterans Day event at the New York Stock Exchange—in which former VA Secretary Shulkin and other VA officials participated—where Marvel Entertainment was promoted. Dr. Moskowitz arranged meetings with VA officials and

¹ Isaac Arnsdorf, *The Shadow Rulers of the VA*, ProPublica (Aug. 7, 2018), <https://www.propublica.org/article/ike-perlmutter-bruce-moskowitz-marc-sherman-shadow-rulers-of-the-va>.

Apple to promote his son's app, and arranged weekly conference calls to arrange for VA to continue the work of his non-profit.

These individuals claim they have "no direct influence over the Department of Veterans Affairs." However, reports and actions taken by these individuals and VA leaders appear to contradict this statement. Therefore, we are opening an investigation into the extent of Mr. Perlmutter, Dr. Moskowitz, and Mr. Sherman's influence over VA officials and the Department.

We request unredacted copies of any and all documents, records, memoranda, and correspondence to include electronic correspondence via email and text messages shared with or between any current or former VA employees (including former VA Secretary David Shulkin and the former acting VA Secretary Peter O'Rourke) and Mr. Perlmutter, Dr. Moskowitz, and Mr. Sherman.

We request unredacted copies of any and all documents, records, memoranda, and correspondence to include electronic correspondence via email and text message in which Mr. Perlmutter, Dr. Moskowitz, or Mr. Sherman, are mentioned or referenced, by current or former VA employees.

We also request copies of any and all records, notes, or minutes of meetings or conference calls in which Mr. Perlmutter, Dr. Moskowitz, or Mr. Sherman participated with VA employees, including any and all meetings with Apple Inc. and Mr. Aaron Moskowitz on the development of an app for locating medical services, and any and all meetings between Dr. Moskowitz, his relatives, and VA officials on development of a medical device registry or organization of the June 4, 2018 summit on device registries.

Please provide all unredacted correspondence, including an unredacted copy of the VA ethics official's opinion approving or disapproving former Secretary Shulkin's participation in the November 7, 2017 event presented by Marvel Entertainment LLC., in which former VA Secretary Shulkin rang the opening bell at the New York Stock Exchange.

Please provide all unredacted documents, records, memoranda, and correspondence to include electronic correspondence via email and text messages related to any current or former VA employee travel to Mar-a-Lago in Palm Beach, Florida. For each current and former VA employee who participated in official travel to Mar-a-Lago, please provide records of the date in which the travel took place; the reason for the visit and all correspondence to include electronic correspondence via email and text messages related to the reason for the visit; the documents, records, and correspondence pertaining to approval of the trip by VA ethics officials, VA Office of General Counsel, or the Office of the Secretary; and the total cost of each trip to the Government.

We also request copies of any and all documents, records, memoranda, and correspondence with or between Mr. Perlmutter, Dr. Moskowitz, and Mr. Sherman and current and former VA employees that have been provided to individuals and organizations via Freedom of Information Act request.

Please provide the Committee with the documents, materials, and lists of attendees by the close of business Friday, August 31, 2018. Provide the documents in electronic, soft-copy format. Do not alter the documents in any way, including but not limited to applications of redactions or a water mark. Only relevant documents and tangible things should be provided as part of the submission. Also provide the contact information for the individual(s) responsible for assembling the submission. This/These individual(s) shall certify and attest to the accuracy of the submission.

The deliverables opened by this request will not be closed until the Committee is sufficiently satisfied with the responses provided, including whether the formatting instructions have been adhered to. The Committee reserves the right to, at its discretion, order an alternative organization of the submission. The Department has a continuing duty to supplement the record by providing relevant documents and tangible things to the Committee until the matter is closed.

If you have any questions, please contact Grace Rodden, Minority Staff Director of the Subcommittee on Oversight and Investigation, at grace.rodden@mail.house.gov or at (202) 225-9756. We look forward to your response.

Sincerely,

(b)(6)

TIM WALZ
Ranking Member
Committee on Veterans' Affairs
U.S. House of Representatives



THE SECRETARY OF VETERANS AFFAIRS
WASHINGTON
September 14, 2018

The Honorable Tim Walz
Ranking Member
Committee on Veterans' Affairs
U.S. House of Representatives
Washington, DC 20515

Dear Congressman Walz:

This is in response to your August 8, 2018, letter to the Department of Veterans Affairs (VA). I want to assure you that VA takes very seriously its responsibilities to comply with the law and its obligation to respond appropriately to Congressional requests for information. The matters about which you inquired in your letter are the subject of ongoing litigation alleging violations of the Federal Advisory Committee Act and, therefore, not appropriate for release at this time.

We greatly appreciate your interest in VA and your continued support for Veterans' programs.

Sincerely,

(b)(6)

Robert L. Wilkie

00114822

U.S. House of Representatives

COMMITTEE ON VETERANS' AFFAIRS

ONE HUNDRED FIFTEENTH CONGRESS

335 CANNON HOUSE OFFICE BUILDING

WASHINGTON, DC 20515

<http://veterans.house.gov>

September 19, 2018

The Honorable Robert Wilkie
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue N.W.
Washington, D.C. 20420

Dear Secretary Wilkie,

I am writing after reviewing the findings of the recent report (#16-04558-249) by the Department of Veterans Affairs (VA) Office of the Inspector General (IG) titled, "VA Policy for Administering Traumatic Brain Injury Examinations (TBI)."

Traumatic Brain Injury is one of the most prevalent wounds of the Iraq and Afghanistan wars. The VA has done pioneering work identifying these often invisible wounds and establishing best practices for providing care. But, the residual effects of TBI often present as cognitive or behavioral disabilities and it is crucial for the health of our veterans that an accurate assessment is made when they apply for disability compensation. Without that accurate assessment, these veterans may be denied critical care or benefits.

First, I appreciate that the VA acknowledged that TBI examinations were conducted by unauthorized personnel, and was forthright with Congress, veterans, and the public in dealing with the problem, and quick took steps to ameliorate the situation. I have been directly involved with this issue since Minnesotans raised concerns to the St. Paul, MN Regional Office and an internal review identified that medical examinations for TBI for veterans filing disability compensation claims in several Midwestern states may have been performed by unqualified examiners. Following the internal St. Paul review, it became clear that the issue was not just a local one, and that it was necessary for my colleagues and I on the House Committee on Veterans' Affairs to insist on a national investigation. I thank the VA for undertaking a national review quickly, seriously, and thoroughly. The result was that over 24,000 veterans nationwide have been deemed eligible for equitable relief. This number includes more than 300 veterans whose claims were adjudicated in St. Paul.

While this is encouraging news because it shows that the VA can identify, locate, and solve systemic disability claims problems with relative haste, I remain concerned that some veterans may have been ultimately overlooked or not aware of the VA's decision to grant them equitable relief. For example, the Inspector General's report identified 570 veterans who were eligible for equitable relief, but were not included in the initial list. I consider it our duty to ensure that every eligible veteran is afforded the opportunity for proper disability claims adjudication, and, where appropriate, equitable relief. While it is good news that VA identified the examination

issue, fixed it, and offered equitable relief, if the affected veterans do not receive the necessary exams and re-adjudication of their claims, we have not accomplished our shared goal of serving veterans. The standard we measure success by must not be the number of veterans granted equitable relief, but rather the number of veterans who receive a fair adjudication of their disability compensation claim. If one veteran does not receive a fair shake, we have failed. Our standard must be 100%. We may never achieve that standard, but that must be our goal. Without the proper follow through on outreach, reexamination, and re-adjudication, the positive work on equitable relief will fall short of our shared goal.

In order to address my concerns, I ask that you provide the Committee with the following information:

- Actions VA is taking to review initial TBI medical examinations by VHA-contracted examiners not included in the population already granted equitable relief to ensure all eligible veterans are identified;
- A description of the process VA is using to review cases of individuals who may not be part of the population that has already received equitable relief, but claim to have received an improper examination;
- The number of veterans that are eligible for equitable relief from whom the VA has not received a request for equitable relief;
- The number of veterans eligible for equitable relief, who have not requested it yet, who have engaged with the VA in the previous year (interacted through healthcare visits, calls, claims, appeals, logged onto the website, etc.);
- The number of veterans eligible for equitable relief, who have not requested it yet, who do not have a current and verifiable phone, e-mail, or physical address on file with the VA (to include VHA, VBA, or NCA databases);
- Actions VA is taking to ensure that the full population of veterans who are eligible for equitable relief are notified;
- Coordination VA has done with other government agencies (like the Social Security Administration or Internal Revenue Service) to identify updated contact information of veterans VA has not received a response from;
- How VA plans to work with Veteran Service Organizations to educate their constituencies about their potential eligibility for equitable relief.

I look forward to receiving the information requested and, as always, I stand ready to assist you in any way to help resolve this issue for our nation's veterans. Thank you for your assistance in this matter, and if you have any questions, please contact (b)(6) House Committee on Veterans' Affairs Disability Assistance and Memorial Affairs Subcommittee Minority Staff Director at (b)(6) @mail.house.gov or (202) 225-(b)(6)

Sincerely,

(b)(6)

Tim Walz
Ranking Member



THE SECRETARY OF VETERANS AFFAIRS
WASHINGTON

November 29, 2018

The Honorable Tim Walz
Ranking Member
Committee on Veterans' Affairs
U.S. House of Representatives
Washington, DC 20515

Dear Congressman Walz:

Thank you for your September 19, 2018, letter to the Department of Veterans Affairs (VA) regarding the findings of the recent report (#16-04558-249) by VA's Office of Inspector General (OIG) titled, "VA Policy for Administering Traumatic Brain Injury Examinations." I would like to take this opportunity to address your concerns.

In July 2016, VA offered re-examinations to 24,588 Veterans who had completed Traumatic Brain Injury (TBI) examinations. During this review, VA considered examinations conducted by Veterans Health Administration (VHA) examiners, VHA-contracted examiners, and Veterans Benefits Administration (VBA)-contracted examiners, when determining the initial population eligible for equitable relief in the form of a new TBI examination. VA has actively reviewed the initial TBI medical examinations conducted by VHA-contracted examiners. For the 570 Veterans identified by OIG who were not referred for, nor granted equitable relief, the examinations were conducted by a VHA-contracted examiner. These Veterans were identified and considered for equitable relief at the same time the original 24,588 Veterans were identified and referred for equitable relief. VA reviewed these claims and confirmed that they appropriately complied with VA policy.

In conjunction with the OIG report, VA also conducted a second review of 25 percent of the 570 identified claims and found that they were either conducted by, or the initial diagnosis was approved by, 1 of the 4 designated specialists (physiatrist, psychiatrist, neurologist, or neurosurgeon). Although none of the 570 cases required referral for equitable relief consideration, VA will continue to utilize the mechanisms in place to continue to identify eligible Veterans and refer any claims appropriate for equitable relief.

VA is working to ensure we reach Veterans who were not part of the already identified population that has received equitable relief. For example, VA has issued guidance to Regional Offices (RO) for cases identified by either an employee or by the Veteran themselves where an examination was not performed by one of the four designated specialists. Once identified and confirmed, these cases are referred to VBA Compensation Service team to process for equitable relief.

The Honorable Tim Walz

Based on this guidance, a total of four claims have been referred to Compensation Service and sent to the Secretary to grant equitable relief in the form of a new examination. VA has granted equitable relief to all Veterans of whom it is aware, based on the eligibility of having an examination that was not performed by one of the four designated specialists.

VA does not have a total number captured for the number of Veterans who are eligible for equitable relief, from whom VA has not received a request for equitable relief, and for those who have not yet requested it but have engaged with VA in the previous year. Currently, VA is unable to track all identified ways in which the Veteran has interacted with the Department. VA is only able to capture an interaction once a Veteran submits a formal request or a claims examiner has identified an error that would require equitable relief.

When addressing the number of individuals eligible for equitable relief, who have not requested it and do not have a current and verifiable phone, email, or physical address on file with VA (to include VHA, VBA, or National Cemetery Administration databases), VA would be required to review every individual's case that did not respond to our outreach efforts to determine if VA has a record of current and verifiable phone, email, or physical address on file with VA.

In order to ensure that VA is notifying the population of Veterans eligible for equitable relief, VA identified the population of Veterans whose initial TBI examinations were completed by a medical examiner other than those prescribed by VA policy, issued a press release, and sent individual outreach letters to over 24,588 Veterans. The outreach letters explained the need for the review and invited the impacted Veterans to undergo a new TBI examination and reopen their previously adjudicated TBI claim within a 1-year period.

Based on the original outreach effort, only 2,618 Veterans responded to VA's outreach letter, and VA reopened their TBI claims. The data include:

- 2,562 Veterans received new TBI examinations and rating decisions
 - 522 Veterans had a change to their TBI disability evaluation
 - 407 Veterans received an increased TBI evaluation and/or an earlier effective date for their TBI condition
 - 115 Veterans received a reduced TBI evaluation
- 56 Veterans have claims that are still pending
- A total of 21,970 of the 24,588 Veterans who received TBI outreach letters did not respond to the TBI letter.

Page 3.

The Honorable Tim Walz

At this time, VA has not coordinated with other Government agencies to identify updated contact information for Veterans from whom VA is pending a response. However, VA has internal existing processes, to include mail forwarding procedures, in place that are comprehensive in order to obtain updated contact information for a Veteran.

VA will continue to provide guidance to ROs on identifying any potential additional eligible Veterans and the procedures to follow if they have been identified. VA will continue to conduct regular outreach and briefings with Veterans Service Organizations on this issue for awareness.

Should you have further questions, please have a member of your staff contact Ms. (b)(6) Congressional Relations Officer, at (202) 461-(b)(6) or by email at (b)(6)@va.gov. A similar response has been sent to Chairman Roe.

Thank you for your continued support of our mission.

Sincerely,

(b)(6)

Robert L. Wilkie

Department of Veterans Affairs (VA)
Questions for the Record
Committee on Veterans' Affairs
U.S. House of Representatives
Legislative Hearing
Exploring VA's Oversight of Contract Disability Examinations
November 15, 2018

Questions for the Record from Congressman Walz

Question 1: I am pleased to see that there is an outside vendor confirming that licensing for the contracted examiners is in order; however, I am concerned that the necessary training is not being tracked appropriately for vendors.

- a. Please explain why we are not currently mandating proof that a contract examiner has actually completed their required training.
- b. Please tell me the solid timelines for VBA implementing substantiated tracing of contract examiner training.

VA Response: According to the contract Performance Work Statement (PWS), vendors must maintain and track all training and certifications for their personnel and their subcontractor(s). The Government may request information regarding training and certification at any time during the period of performance. Currently VBA obtains annual updates for all contract examiners utilized during the fiscal year, which includes the name of the examiner, the training course title, and dates that the contract examiners completed the required mandatory training.

All vendors are required by contract to certify each contract examiner has completed the VA Compensation Examination Certification Curriculum and other examiner specific training prior to the examiner conducting examinations. The vendors provide such certifications to VBA, to include the name of the examiner, the training course title, and dates that the contract examiners completed the required mandatory training.

VBA plans to begin auditing examiner training certifications by obtaining the completion certificates from the training system. Additionally, we are requesting access to vendor training tracking mechanisms so VBA may independently generate compliance training completion and certification reports. VBA expects to complete an initial validation sample of training compliance by the end of January.

As indicated during the hearing, VBA is in the beginning stages of researching and recommending an appropriate platform to deliver the VA Compensation Examination

Certification Program for nationwide vendor training. This platform will allow VBA to assign and deliver training materials, track examiner training and certification, and conduct surveys to gather feedback from examiners.

Question 2: Some of our VSO partners have raised the question if the 20 and 30-day timeliness goals for completion of VA exams are the right measure. They have also raised that changing the goal date may be warranted. Have you evaluated if the 20 and 30-day timeliness goal is the right target?

VA Response: VBA recently awarded new contracts which provides a 20-day timeliness standard for exams conducted within the continental U.S., and 30-day timeliness standard for exams conducted outside the continental U.S. and for Servicemembers prior to discharge. We will continue to evaluate vendor quality and timeliness in relation to this standard.

Question 3: While it is not a topic of this GAO report, we have heard reports that veterans are not always receiving their travel reimbursement checks from vendors. Some veterans report that they do not want to press the vendor for the owed reimbursement because they do not want to risk it effecting their claim. We owe it to the veteran and all tax payers to ensure that reimbursement checks are being appropriately distributed.

a. What processes do you have in place to ensure that vendors are actually providing the travel reimbursement checks?

VA Response: VBA has acquired a third party financial audit contract that utilizes industry standard practices to review all aspects of the financial operations of the contract exam program, to include the Veteran travel reimbursement. Additionally, the Program Office is working with Vendors to ensure that this process and the status of the travel reimbursement check is more transparent for Veterans.

Question 4: Please provide a month-by-month breakdown from January 2016 to November 2018, of the filled FTE positions for Contracting Officer's Representatives (CORs).

a. Please provide the timelines for when the COR positions were posted for hiring and when the hiring actually occurred.

b. Please detail if there were any directives during the January 2016 to November 2018 time period, that prevented the VA from hiring or on boarding the authorized 17 FTE of CORs.

VA Response: Please see the chart below. The staff was officially stood up in March 2016. Please note that for the positions that started in 2016, we have reached out to HR regarding the dates the positions posted. HR has indicated that the information is stored in a previous HR system and is working to retrieve the requested information.

VBA Compensation Service was restructured with an updated Organization Chart, that was signed in November 2017. This new organization chart provided us the ability to hire more staff, many of which were brand new positions that required new position descriptions and HR classification before being announced for recruitment. Following the recruitment process, we were able to onboard additional staff in June 2018.

A total of 14 CORs are authorized. The team is currently comprised of nine CORs and one supervisor. Five additional CORs will be hired in the next month.

| Dates | Total CORs |
|-----------------------------|------------|
| April 2016 | 2 |
| May 2016 | 3 |
| June 2016 – August 2016 | 4 |
| September 2016 | 5 |
| October 2016 - January 2017 | 6 |
| February 2017 - March 2017 | 5 |
| April 2017 - January 2018 | 4 |
| February 2018 - May 2018 | 3 |
| June 2018 - July 2018 | 9 |
| August 2018 | 11 |
| September 2018 - Present | 10 |

| Staff Member (COR) | Position Posted | Hire Date | Current Status |
|--------------------|-----------------|------------|-----------------------------|
| 1* *Supervisor | | 04/01/2016 | Present |
| 2 | Reassigned | 04/03/2016 | Present |
| 3 | | 05/29/2016 | Vacated position 02/06/2017 |
| 4 | | 06/27/2016 | Vacated position 07/21/2018 |
| 5 | | 09/04/2016 | Vacated position 04/21/2017 |
| 6 | | 10/03/2016 | Vacated position 02/18/2018 |
| 7 | 01/26/2018 | 06/10/2018 | Present |
| 8 | 01/26/2018 | 06/24/2018 | Vacated position 09/30/2018 |
| 9 | 01/26/2018 | 06/24/2018 | Present |
| 10 | 01/26/2018 | 06/24/2018 | Present |
| 11 | 01/26/2018 | 06/24/2018 | Present |
| 12 | 01/26/2018 | 06/24/2018 | Present |
| 13 | 01/26/2018 | 07/08/2018 | Present |
| 14 | 01/26/2018 | 08/05/2018 | Present |
| 15 | 01/26/2018 | 08/19/2018 | Present |

Department of Veterans Affairs
December 2018

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U.S. House of Representatives

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WASHINGTON, DC 20515

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Robert Wilkie
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

Dear Mr. Secretary,

In reference to the Committee on Veterans' Affairs Subcommittee on Disability Assistance and Memorial Affairs hearing titled, "Exploring VA's Oversight of Contract Disability Examinations" held on November 15, 2018, I submit the enclosed questions for the record. I request that you provide your responses to the questions by the close of business on January 2, 2019.

In preparing your responses to the questions, please include the full text of the question in bold font. To facilitate the printing of the hearing record, please e-mail your response as a Microsoft Word document to (b)(6) at (b)(6)@mail.house.gov. If you have any questions, please contact him by email or phone at (202) 225-(b)(6)

Sincerely,

(b)(6)

Tim Walz
Ranking Member
House Veterans' Affairs Committee

SUBCOMMITTEE ON DISABILITY AND MEMORIAL AFFAIRS
COMMITTEE ON VETERANS' AFFAIRS
UNITED STATES HOUSE OF REPRESENTATIVES
ON
"EXPLORING VA'S OVERSIGHT OF CONTRACT DISABILITY EXAMINATIONS"

QUESTIONS SUBMITTED BY RANKING MEMBER WALZ

1. I am pleased to see that there is an outside vendor confirming that licensing for the contracted examiners is in order; however, I am concerned that the necessary training is not being tracked appropriately for vendors.
 - a. Please explain why we are not currently mandating proof that a contract examiner has actually completed their required training.
 - b. Please tell me solid timelines for implementing substantiated tracking of contract examiner training.
2. Some of our VSO partners have raised the question if the 20 and 30-day timeliness goals for completion of VA exams are the right measure. They have also raised that changing the goal date may be warranted. Have you evaluated if the 20 and 30-day timeliness goal is the right target?
3. While it is not a topic of this GAO report, we have heard reports that veterans are not always receiving their travel reimbursement checks from vendors. Some veterans report that they do not want to press the vendor for the owed reimbursement because they do not want to risk it affecting their claim. We owe it to the veteran and all tax payers to ensure that reimbursement checks are being appropriately distributed.
 - a. What processes do you have in place to ensure that vendors are actually providing the travel reimbursement checks?
4. Please provide a month-by-month breakdown from January, 2016 to November, 2018, of the filled FTE positions for Contracting Officer's Representatives (CORs).
 - a. Please provide the timelines for when the COR positions were posted for hiring and when the hiring actually occurred.
 - b. Please detail if there were any directives during the January, 2016 to November, 2018 time period, that prevented the VA from hiring or onboarding the authorized 17 FTE of CORs.

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SCOTT PETERS, CALIFORNIA

RAY KELLEY

DEMOCRATIC STAFF DIRECTOR

December 10, 2018

165352

The Honorable Robert Wilkie
Secretary, Department of Veterans Affairs
810 Vermont Avenue NW
Washington, DC 20571

Dear Secretary Wilkie,

I write once again asking for your full compliance with my request for documents and information regarding the sweeping influence of Mr. Ike Perlmutter, Dr. Bruce Moskowitz, and Mr. Marc Sherman over the policy and personnel decisions made by the Department of Veterans Affairs. As a defendant in a Federal lawsuit, the Department has declared these three members of President Trump's exclusive Mar-a-Lago club "asserted influence *over the Department*."¹ The documents made public in response to a Freedom of Information Act (FOIA) request provide further evidence of their power over key Departmental leaders.

The Committee on Veterans' Affairs, veterans, and the American people deserve to know the full nature and extent of this influential relationship between the Department and the three Mar-a-Lago members who ostensibly used their wealth and connections to President Trump and his family to make decisions on behalf of the Department. Weighing in on candidates to lead the Veterans Health Administration,² involvement in the procurement of an electronic health record from Cerner Corporation, and organizing meetings and summits between VA and commercial entities were all efforts in which the three Mar-a-Lago club members seemingly took part. The documents show you used official travel in part to meet with these individuals at Mar-a-Lago on or about April 20, 2018,³ presumably due to their significant influence over Department leadership positions, writing after the meeting that you were "honored" to visit with them.⁴

Top Department officials apparently treated the three Mar-a-Lago members as having decision-making authority. Email correspondence shows Mar-a-Lago was promised development

¹ Memorandum of Points and Authorities in Support of Defendant's Motion to Dismiss at 21.

<https://democracyforward.org/wp-content/uploads/2018/08/DOJ-Reply-to-VoteVets-Complaint-11-16-18.pdf>

² Department of Veterans Affairs, FOIA Service, VA Senior Leadership Emails

https://www.oprn.va.gov/foia/foia_library.aspx (under heading "Senior Leadership Emails/Travel") [hereinafter VA Senior Leadership Documents], [PORemailsto9618Redacted](#).

³ VA Senior Leadership Documents, Robert Wilkie West Palm Beach, FL – 04.17-20.2018 Redacted

⁴ VA Senior Leadership Documents, RLW emails up to 6-5-18 Redacted

of “a project plan and...timeline for action”⁵ when the Department was directed by Mar-a-Lago to stand up an “emergency committee” on mental health care delivery.⁶ Mar-a-Lago members rejected advice provided by Department experts—arranging calls and naming themselves to an “executive committee” to direct Department development of technology with Apple Inc.⁷ that could personally enrich Dr. Moskowitz and his family⁸— and organized a Department-led medical device registry summit in which Dr. Moskowitz’s family and foundation participated.⁹ The three Mar-a-Lago members— despite having no military or government experience, let alone experience delivering health care to veterans— were even granted access to review the confidential contract between the Department and Cerner Corporation for the Department’s electronic health record.¹⁰ This was more than three months before Congress received access and more than two months prior to contract signing.¹¹

The lack of transparency on behalf of the Department and the Trump Administration is utterly unacceptable. It has been four months since I sent my August 8, 2018 request for un-redacted documents. The documents released under FOIA are heavily redacted and satisfy one small portion of my request—only partially revealing the extent of the Mar-a-Lago members’ power to shape Department policy and functions.

I will continue to pursue this matter for the remainder of the 115th Congress, and I can assure you my colleagues will consider this investigation a priority in the 116th Congress. Veterans and taxpayers deserve to know who is responsible for making policy decisions that affect the millions of veterans served by the Department, and trust that individuals who make decisions for personal enrichment, or poor decisions that waste taxpayer dollars or negatively affect the delivery of veterans’ health care and benefits are held to account.

Please provide a complete response to my August 8, 2018 request no later than Thursday, December 20, 2018. If you have any questions, please contact (b)(6) minority General Counsel, at (b)(6) @mail.house.gov or at (202) 225-(b)(6) I look forward to your response.

Sincerely,

(b)(6)

Tim Walz

⁵ VA Senior Leadership Documents, POR emails to 5-3-18 Redacted at 36.

⁶ *Id.* at 36-37.

⁷ VA Senior Leadership Documents, DS TB CS to 6-22-18 Redacted

⁸ *Id.* At 158- 159.

⁹ VA Senior Leadership Documents, Emails JHB to 6-22-18.1 Redacted

¹⁰ VA Senior Leadership Documents, Emails POR to 6-22-18 Redacted at 1- 5, 26- 40

¹¹ *Id.*

MEMORANDUM OF AGREEMENT

Between

United States Department of Veterans Affairs

And

Cohen Veterans Network, Inc.

I. PURPOSE:

This Memorandum of Agreement (“MoA”) is entered into between the U.S. Department of Veterans Affairs, Veterans Health Administration (“VA” or “Department”), 810 Vermont Avenue NW, Washington, DC 20420, and the Cohen Veterans Network, Inc. (“CVN”), 72 Cummings Point Road, Stamford, CT 06902. VA and CVN shall be collectively referred to as the “Parties.”

This MoA sets forth a structure in which the Parties will work in a mutually beneficial manner to advance and improve Veterans’ mental health and wellbeing and expand and promote community collaboration to increase all Veterans’ access to mental health resources.

II. AUTHORITY:

VA enters this MoA pursuant to its authority under 38 U.S. Code § 523 to coordinate provision of benefits and services (and information about such benefits and services) with appropriate programs (and information about such programs) conducted by State and local governmental agencies and by private entities at the State and local level in order improve Veterans’ mental health and access to mental health resources.

III. BACKGROUND:

Cohen Veterans Network, Inc. website: www.cohenveteransnetwork.org

CVN was established in 2015 to improve the quality of life for post-9/11 Veterans and their families by focusing on improving mental health outcomes and access to mental health care especially for affected Veterans facing post-traumatic stress and related challenges. CVN accomplishes this through directly providing mental healthcare through a national network of Cohen Military Family Clinics for Veterans and family members dealing with post-traumatic stress and other mental health conditions. The Cohen Military Family Clinics (“MFCs”) provide a compassionate, individually-tailored, and holistic approach to outpatient mental health treatment for Veterans and their family members. CVN defines a Veteran as any individual who has served in the Armed Services (including the National Guard and Reserves) in any capacity, regardless of role or discharge status.

Department of Veterans Affairs

VA's mission is to fulfill President Lincoln's promise, "[t]o care for him who shall have borne the battle and for his widow, and his orphan" by serving and honoring the men and women who are America's Veterans in accordance with Federal law. The Department's key priorities for fiscal year 2017 include prioritizing Veteran suicide prevention for Veteran Health Administration ("VHA") users and those Veterans not receiving care from VHA; advancing this mission through public and private partnerships, improving Veterans' experience with VA and improving Veterans' access to healthcare. The Department has identified these primary goals and has set priority milestones across the Department in the Veterans Benefits Administration (VBA), VHA, and the National Cemetery Administration.

IV. RESPONSIBILITIES:

U.S. Department of Veterans Affairs:

- a. VHA Office of Mental Health and Suicide Prevention will participate in regular conference calls and meet with CVN staff to discuss potential mental health educational initiatives, consumer marketing and public health messaging.
- b. VHA Office of Mental Health and Suicide Prevention will share publicly-available VA-developed education resources with CVN staff and MFC providers, to include: military cultural competence training, Coaching in to Care Program, Make the Connection, S.A.V.E. training, information about existing VA resources around issues identified as priorities for both VA and CVN such as Veterans Crisis Line information, opioid overdose education, suicide prevention education and mental health stigma reduction.
- c. VA will work with CVN as CVN seeks to identify future locations for MFCs in regions believed to have underserved Veterans in need of mental health care services.
- d. VA will provide publicly available, de-identified data about the number of Veterans seeking mental health care and the number of Veterans living in specific geographic locations to CVN.
- e. VA will provide VA Form 10-5345 Request for and Authorization to Release Medical Records or Health Information to MFCs to improve the coordination of care for Veterans receiving care from the MFCs and VA.
- f. VHA Office of Mental Health and Suicide Prevention will work to foster VA Suicide Prevention Coordinator participation with the MFCs to broaden the reach of suicide prevention in the non-VHA served Veteran community. Veterans Crisis Line material and cooperation in agreed upon outreach events and information about clinical resources will be made available to CVN and the CVN MFCs.
- g. VHA Office of Mental Health and Suicide Prevention will provide CVN staff with publicly available information regarding VBA navigation tools, contacts and resources.
- h. VA will provide access to CVN staff to select training resources, as appropriate, through the VA learning management system, TRAIN.
- i. Consultation on the treatment of Veterans with Post Traumatic Stress Disorder (PTSD) through the VA National Center for PTSD is available to CVN staff by

contacting the phone consultation line at 1-866-948-7880 or visiting the website:
<https://www.ptsd.va.gov/consult>

- j. CVN and VA staff will collaborate towards the advancement of the field of evidence-based psychotherapy (EBP) research, practice, implementation, and dissemination through cross-organizational participation in conferences, summits and meetings where relevant to improve the care provided to Veterans.

Cohen Veterans Network, Inc.:

- a. CVN will participate in regular conference calls and meet with VA Office for Suicide Prevention and VHA Office of Mental Health and Suicide Prevention to share CVN priorities and discuss potential mental health educational initiatives, direct to consumer marketing and public health messaging of importance and relating to the Veteran population.
- b. CVN will collaborate with VHA Office of Mental Health and Suicide Prevention to develop and implement one or more mental health educational initiatives and conduct awareness activities for Veterans around issues identified as priorities by CVN and VA.
- c. CVN will widely distribute, including via website links from CVN website, as applicable, VA developed education resources and information to include: military cultural competence training, Coaching in to Care Program, Make the Connection, S.A.V.E. training, Veterans Crisis Line information, opioid overdose education, suicide prevention education and mental health stigma reduction to their employees, volunteers and clients served.
- d. CVN will collaborate, as appropriate, with VHA Office of Mental Health and Suicide Prevention to make publicly available VA-developed educational resources for health care providers, such as military culture training, Suicide Prevention Safety Plan training or S.A.V.E. training or others to their CVN staff and MFC employees.
- e. CVN will share quarterly the publicly available number of Veterans served within their nationwide network of clinics and whether they are eligible for VHA care.
- f. CVN and VA staff will collaborate towards the advancement of the field of EBP research, practice, implementation, and dissemination through cross-organizational participation in conferences, summits and meetings where relevant to improve the care provided to Veterans.

V. OBJECTIVES:

The Department and CVN have a shared goal to improve Veterans' health and well-being and enhance Veteran access to mental health services. This cooperative relationship will be mutually beneficial as the Parties work together through a set of objectives to achieve this goal. This MoA sets forth a framework of cooperation between the Parties to achieve the following objectives:

- 1. Collaborate to expand the reach and awareness of mental health educational tools and web based resources to Veterans in need of mental health resources.
- 2. Collaborate to ensure CVN, MFC and VA staff benefit from publicly available VA MFC and CVN clinical and administrative information.

3. Exchange publicly available data, as requested and approved, on Veterans served by MFCs and VA.

VI. OUTCOMES:

The Department and CVN seek to enhance services to Veterans and their families through this cooperative relationship. The ability to quantitatively and qualitatively capture objective performance through metrics that demonstrate the impact of this relationship is critical. Therefore, the Parties agree to use the following metrics to capture and record progress on the stated objectives through related outcomes:

1. Annual number of users accessing VA web-mental health resources, such as Make the Connection.net, Veteranscrisisline.net or community provider toolkit, from the CVN and MFC websites.
2. Annual number of CVN and MFC employees trained using VA curriculum.
 - a. For example, VA Office of Mental Health and Suicide Prevention provided the Suicide Risk Assessment and Suicide Prevention Safety Plan Guide for Clinicians. The number of MFC employees using that resource or trained by VA to use the resource should be reported.
3. Number of community awareness programs conducted for Veterans' groups with VA and CVN staff are in attendance, reported quarterly.
 - a. This can be tracked by both VA and CVN.
4. Number of Veterans & Service Members in attendance at events organized by CVN with VA staff in attendance, reported quarterly.
 - a. This can be tracked by both VA and CVN.
5. Number of Veterans served by MFCs for direct care and whether they are enrolled with the VHA or receive benefits from VBA, reported quarterly.

VII. POINTS OF CONTACT:

DEPARTMENT OF VETERANS AFFAIRS

(b)(6) Ph.D.

Asst. Dep. Dir, Mental Health Operations
(10NC5) Veterans Health Administration
810 Vermont Ave, NW
Washington, D.C 20420

202-461-(b)(6)

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COHEN VETERANS NETWORK, Inc.

Anthony M. Hassan, Ed.D, LCSW
CEO & President, Cohen Veterans Network,
Inc.

72 Cummings Point Road
Stamford, CT 06902

(203) 569-(b)(6)

(b)(6)CohenVeteransNetwork.org

VIII. LIMITATIONS:

- a. For the purposes of this MoA, a cooperative relationship is a voluntary, collaborative, working relationship between VA and CVN. The term cooperative relationship does not imply or intend that VA or CVN is liable for either party's obligations. This MoA shall not be construed to create a partnership, joint venture, agency, employment, or any other relationship between VA and CVN.

- b. CVN shall have no obligation under this MoA to participate, develop or implement any specific programs.
- c. CVN will not use this MoA to sell or promote any products or services, except that CVN may promote educational and outreach activities described in Section IV.
- d. No payment shall be due to either party for services provided under this MoA.
- e. All exchanges or releases of data made pursuant to this agreement will be made in accordance with applicable law and regulations, including the Privacy Act and the HIPAA Privacy Rule.
- f. No Protected Health Information will be used or disclosed for marketing purposes.
- g. CVN will not use the name of the VA or any of its components, except in factual publicity and with prior written approval of VA. Factual publicity includes announcements of dates, times, locations, purposes, agendas, and speakers, involved with awareness activities or events described in Section III. Such factual publicity shall not imply that the involvement of VA serves as an endorsement of the general policies, activities, or products of CVN. CVN may use VA's logo, seals, flags, and other symbols only pursuant to a written determination by VA that the proposed use by CVN advances the aims, purposes and mission of the Department. VA approval is not guaranteed.
- h. VA will not use, and has obtained no ownership interests in CVN or other CVN names, logos, and/or trademarks (the Marks) or any materials or programs developed under this MoA. VA will obtain CVN prior written approval to use the Marks, which will not be unreasonably withheld in the event the use is for mutually-agreed upon publicity.
- i. This MoA is not intended to be an exclusive arrangement. The relationship established in this MoA in no way limits VA or CVN from establishing similar relationships with any other entity.
- j. This MoA does not represent any endorsement by VA of the general policies, or activities of CVN.
- k. Any publicity released by either party concerning this MoA, the services or supports provided within, or any resulting outcomes, will be subject to prior approval of the other party. If either party does not respond with its approval or non-approval within five days after receiving proposed publicity from the other party, approval shall be deemed given.
- l. Each party shall bear its own costs, risks, and liabilities incurred by it arising out of its obligations and efforts under this MoA. The liability, if any, of the United States for injury or loss of property, or personal injury or death shall be governed exclusively by the provisions of the Federal Tort Claims Act.

- m. This MoA may not be transferred by any party, in whole or in part, without the expressed prior written consent of the other party, which shall not be unreasonably withheld.
- n. Parties acknowledge and agree that, except for publicly-available materials and information, any materials shared under this MoA are strictly confidential and proprietary to the disclosing party and shall, subject to applicable law, be kept confidential.

IX. DURATION, AMENDMENT, REVIEW, AND CANCELLATION:

This MoA is effective when signed by the Parties and will remain in effect until cancelled in writing by either party or for three (3) years, whichever comes first. Amendments must be bilaterally executed in writing, signed by authorized representatives of both entities.

This MoA may only be cancelled upon written notice sent from an authorized representative of the cancelling party of not less than 30 days before the cancellation date to the authorized representative of the other party. In no case will any oral cancellation or cancellation attempted outside of these stated requirements be effective. This agreement is cancellable at will, without liability for any costs, direct or indirect.

X. ENTIRE AGREEMENT

This MoA represents the entire agreement between the Parties on this matter, and supersedes any and all prior understandings, agreements, representations or undertakings. This MoA is not subject to amendment, change or modification except by written agreement signed by authorized representatives of each party. Any amendments to this MoA shall specifically refer to this MoA.

XI. APPROVALS:

U.S. Department of Veterans Affairs
Veterans Health Administration

By: (b)(6)
Carolyn M. Clancy, M.D.
Executive in Charge, Office of
the Under Secretary for Health

Date: 10/16/17

Cohen Veterans Network, Inc.

By: (b)(6)
Anthony M. Hassan, Ed.D, LCSW
CEO & President, CVN

Date: 10/17/2017



Mental Health Management System

| Key | | |
|-----|----------------------------|---------------------|
| | SD >= 1 | Desired Direction |
| | 0.5 < SD < 1 | Desired Direction |
| | 0.5 < SD < 1 | Undesired Direction |
| | SD >= 1 | Undesired Direction |
| ◆ | Out of range per directive | |

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| Facility | MH COMPOSITE | | | POPULATION ACCESS | | | CARE CONTINUITY | | | EXPERIENCE OF CARE | | |
|---|----------------------------|-----------|------------|--------------------------|-----------|------------|-----------------------------------|-----------|------------|-----------------------------|-----------|------------|
| | MH Domain Composite (MHQ1; | | | Population Coverage SAIL | | | Continuity of Care SAIL Composite | | | Experiences of MH Care SAIL | | |
| Click to view data distribution details | FY16 Qtr4 | FY17 Qtr2 | Std. Diff. | FY16 Qtr4 | FY17 Qtr2 | Std. Diff. | FY16 Qtr4 | FY17 Qtr2 | Std. Diff. | FY16 Qtr4 | FY17 Qtr2 | Std. Diff. |
| Mean | 0.00 | 0.12 | -- | 0.00 | -0.02 | -- | 0.00 | 0.27 | -- | 0.00 | 0.02 | -- |
| Standard Deviation | 1.00 | 1.00 | -- | 1.00 | 0.98 | -- | 1.00 | 1.03 | -- | 1.00 | 1.00 | -- |
| (1V01) (402) Togus | -0.43 | -0.76 | -0.33 | -1.69 | -1.26 | 0.43 | 0.30 | -0.35 | -0.64 | 0.46 | -0.05 | -0.50 |
| (1V01) (405) White River Junction | 1.88 | 1.83 | -0.06 | 0.08 | 0.16 | 0.08 | 2.58 | 2.42 | -0.16 | 1.45 | 1.42 | -0.03 |
| (1V01) (518) Bedford | 1.77 | 1.39 | -0.38 | 2.57 | 2.22 | -0.36 | 0.38 | 0.02 | -0.35 | 0.91 | 0.80 | -0.11 |
| (1V01) (523) VA Boston HCS | 1.46 | 1.60 | 0.14 | 1.33 | 1.22 | -0.11 | 1.04 | 1.16 | 0.12 | 0.82 | 1.11 | 0.30 |
| (1V01) (608) Manchester | -0.24 | 0.19 | 0.43 | -1.25 | -1.05 | 0.21 | -0.32 | 0.89 | 1.20 | 1.05 | 0.57 | -0.48 |
| (1V01) (631) VA Central Western Massachusetts | 1.38 | 1.61 | 0.23 | 0.23 | 0.50 | 0.27 | 1.79 | 1.83 | 0.04 | 1.00 | 1.19 | 0.19 |
| (1V01) (650) Providence | 1.77 | 2.01 | 0.24 | 1.15 | 1.28 | 0.13 | 1.42 | 1.90 | 0.47 | 1.29 | 1.21 | -0.07 |
| (1V01) (689) VA Connecticut HCS | 1.24 | 1.42 | 0.17 | 1.22 | 1.23 | 0.01 | 1.14 | 1.21 | 0.08 | 0.36 | 0.66 | 0.30 |
| (1V02) (526) Bronx | 1.25 | 1.15 | -0.09 | 2.66 | 2.50 | -0.16 | -0.58 | -0.59 | -0.01 | 0.65 | 0.61 | -0.04 |
| (1V02) (528) Albany | 0.87 | 0.59 | -0.28 | 0.05 | -0.13 | -0.18 | 0.47 | 0.56 | 0.10 | 1.38 | 0.86 | -0.53 |
| (1V02) (528) Bath | 1.99 | 2.03 | 0.04 | 2.20 | 2.37 | 0.17 | 0.78 | 0.69 | -0.09 | 1.37 | 1.39 | 0.02 |
| (1V02) (528) Canandaigua | 1.84 | 2.04 | 0.20 | 2.06 | 2.11 | 0.05 | 1.08 | 1.15 | 0.06 | 0.89 | 1.21 | 0.32 |
| (1V02) (528) Syracuse | -0.35 | 0.37 | 0.71 | -0.73 | -0.59 | 0.13 | -1.09 | 0.12 | 1.19 | 1.06 | 1.28 | 0.22 |
| (1V02) (528) Western New York | 0.70 | 1.02 | 0.32 | 0.91 | 0.89 | -0.02 | 0.42 | 0.83 | 0.40 | 0.21 | 0.51 | 0.30 |
| (1V02) (561) New Jersey HCS | -0.53 | -0.15 | 0.38 | 0.40 | 0.41 | 0.01 | -1.40 | -0.40 | 0.99 | -0.15 | -0.33 | -0.19 |
| (1V02) (620) VA Hudson Valley HCS | 1.53 | 1.57 | 0.05 | 1.84 | 1.57 | -0.27 | 0.89 | 1.29 | 0.40 | 0.61 | 0.58 | -0.03 |
| (1V02) (630) New York Harbor HCS | 0.79 | 0.80 | 0.01 | 0.77 | 0.82 | 0.04 | 0.19 | 0.19 | 0.00 | 0.76 | 0.74 | -0.02 |
| (1V02) (632) Northport | 0.77 | 0.86 | 0.09 | 0.32 | 0.33 | 0.01 | 0.89 | 1.07 | 0.18 | 0.48 | 0.48 | 0.00 |
| (1V04) (460) Wilmington | 0.59 | 0.58 | -0.02 | 1.04 | 0.98 | -0.07 | 1.45 | 1.33 | -0.12 | -1.20 | -1.05 | 0.15 |
| (1V04) (503) Altoona | 0.18 | 0.21 | 0.03 | -0.23 | 0.06 | 0.30 | 0.26 | 0.06 | -0.20 | 0.36 | 0.33 | -0.03 |
| (1V04) (529) Butler | 1.60 | 1.41 | -0.19 | 0.56 | 0.20 | -0.36 | 0.71 | 1.23 | 0.51 | 2.21 | 1.64 | -0.57 |
| (1V04) (542) Coatesville | 1.43 | 2.06 | 0.63 | 2.47 | 2.50 | 0.02 | 0.27 | 1.41 | 1.12 | 0.37 | 0.59 | 0.22 |
| (1V04) (562) Erie | 3.03 | 3.48 | 0.45 | 2.08 | 2.29 | 0.21 | 1.28 | 2.27 | 0.98 | 3.27 | 3.05 | -0.22 |
| (1V04) (595) Lebanon | 0.12 | 0.16 | 0.03 | -0.19 | -0.24 | -0.05 | 0.35 | 0.41 | 0.06 | 0.11 | 0.17 | 0.06 |
| (1V04) (642) Philadelphia | 0.12 | -0.03 | -0.16 | -0.01 | -0.08 | -0.07 | 0.42 | 0.03 | -0.39 | -0.14 | -0.03 | 0.12 |
| (1V04) (646) Pittsburgh | 1.21 | 1.15 | -0.05 | 0.13 | 0.16 | 0.04 | 0.64 | 0.56 | -0.08 | 1.87 | 1.80 | -0.06 |
| (1V04) (693) Wilkes-Barre | -1.06 | -1.37 | -0.31 | -0.85 | -0.58 | 0.27 | -0.13 | -1.01 | -0.86 | -1.34 | -1.41 | -0.07 |
| (1V05) (512) Baltimore HCS | -0.41 | -0.15 | 0.25 | 0.75 | 0.93 | 0.18 | -1.19 | -0.81 | 0.38 | -0.45 | -0.45 | -0.01 |
| (1V05) (517) Beckley | 0.77 | 1.53 | 0.76 | 0.10 | 0.08 | -0.02 | 0.24 | 1.67 | 1.41 | 1.34 | 1.59 | 0.25 |
| (1V05) (540) Clarksburg | 0.76 | 0.74 | -0.02 | -0.63 | -0.64 | 0.00 | 2.46 | 2.15 | -0.31 | -0.17 | 0.11 | 0.27 |
| (1V05) (581) Huntington | 1.17 | 1.45 | 0.27 | 0.52 | 0.59 | 0.06 | 0.88 | 1.01 | 0.13 | 1.17 | 1.57 | 0.40 |
| (1V05) (613) Martinsburg | -0.90 | -0.18 | 0.73 | 0.57 | 0.44 | -0.13 | -1.41 | 0.06 | 1.45 | -1.14 | -0.89 | 0.24 |
| (1V05) (688) Washington | -1.05 | -0.76 | 0.29 | -0.30 | -0.70 | -0.41 | -1.26 | 0.23 | 1.47 | -0.74 | -1.19 | -0.45 |
| (1V06) (558) Durham | 0.09 | -0.14 | -0.22 | -0.88 | -0.76 | 0.11 | 0.20 | -0.02 | -0.22 | 0.87 | 0.49 | -0.38 |
| (1V06) (565) Fayetteville | -1.50 | -1.21 | 0.29 | -1.14 | -0.95 | 0.19 | -0.51 | 0.17 | 0.67 | -1.62 | -1.86 | -0.24 |
| (1V06) (590) Hampton | -0.79 | -0.27 | 0.52 | -0.11 | -0.09 | 0.01 | -0.60 | 0.55 | 1.13 | -1.03 | -1.05 | -0.02 |
| (1V06) (637) Asheville | 0.42 | 0.52 | 0.10 | -0.46 | -0.37 | 0.09 | 0.69 | 0.77 | 0.08 | 0.69 | 0.74 | 0.05 |
| (1V06) (652) Richmond | -0.63 | -0.48 | 0.15 | -0.68 | -0.48 | 0.20 | -0.77 | -0.61 | 0.16 | 0.07 | 0.04 | -0.02 |
| (1V06) (658) Salem | 0.85 | 0.73 | -0.12 | 0.17 | 0.10 | -0.07 | 0.48 | 0.29 | -0.19 | 1.21 | 1.21 | 0.00 |
| (1V06) (659) Salisbury | -0.79 | -0.81 | -0.02 | -0.20 | -0.14 | 0.06 | -0.24 | -0.18 | 0.06 | -1.29 | -1.45 | -0.16 |
| (2V07) (508) Atlanta | -0.20 | 0.51 | 0.71 | 0.78 | 0.88 | 0.10 | -0.83 | 0.01 | 0.83 | -0.38 | 0.22 | 0.61 |
| (2V07) (509) Augusta | -1.09 | -0.72 | 0.37 | -0.52 | -0.45 | 0.07 | -1.05 | -0.34 | 0.69 | -0.82 | -0.78 | 0.04 |
| (2V07) (521) Birmingham | -0.18 | 0.18 | 0.35 | 1.12 | 1.01 | -0.12 | -1.43 | -0.58 | 0.83 | -0.08 | -0.03 | 0.04 |
| (2V07) (534) Charleston | 1.40 | 1.51 | 0.11 | -0.56 | -0.57 | -0.02 | 1.90 | 2.21 | 0.31 | 1.73 | 1.67 | -0.06 |
| (2V07) (544) Columbia | -0.96 | -0.34 | 0.63 | -1.34 | -1.39 | -0.06 | -0.25 | 1.01 | 1.24 | -0.53 | -0.36 | 0.17 |
| (2V07) (557) Dublin | -1.45 | -1.26 | 0.19 | -0.20 | -0.37 | -0.17 | -1.43 | -1.04 | 0.39 | -1.54 | -1.36 | 0.18 |
| (2V07) (619) Central Alabama Veterans HCS | -2.34 | -2.44 | -0.10 | -1.54 | -1.47 | 0.07 | -1.65 | -1.92 | -0.27 | -1.92 | -1.94 | -0.01 |
| (2V07) (679) Tuscaloosa | 1.01 | 0.99 | -0.02 | 2.15 | 2.29 | 0.14 | 0.98 | 1.18 | 0.20 | -0.92 | -1.31 | -0.39 |
| (2V08) (516) Bay Pines | -0.26 | -0.28 | -0.02 | -0.46 | -0.54 | -0.08 | 0.05 | 0.39 | 0.33 | -0.15 | -0.45 | -0.30 |
| (2V08) (546) Miami | 0.86 | 0.77 | -0.10 | 0.58 | 0.51 | -0.07 | 0.81 | 0.81 | 0.00 | 0.50 | 0.35 | -0.15 |
| (2V08) (548) West Palm Beach | 1.42 | 0.75 | -0.66 | 1.06 | 0.98 | -0.08 | 1.58 | 0.69 | -0.88 | 0.45 | -0.02 | -0.48 |
| (2V08) (573) Gainesville | -0.22 | -0.26 | -0.04 | -0.73 | -0.91 | -0.19 | -0.07 | 0.20 | 0.27 | 0.32 | 0.13 | -0.18 |
| (2V08) (672) San Juan | -0.37 | -0.01 | 0.36 | 1.23 | 1.38 | 0.15 | -0.86 | 0.27 | 1.12 | -1.18 | -1.67 | -0.49 |
| (2V08) (673) Tampa | 0.83 | 1.04 | 0.21 | -0.04 | -0.24 | -0.20 | -0.18 | 0.45 | 0.62 | 2.03 | 2.06 | 0.03 |



Mental Health Management System

| Key | | |
|-----|----------------------------|---------------------|
| | SD >= 1 | Desired Direction |
| | 0.5 < SD < 1 | Desired Direction |
| | 0.5 < SD < 1 | Undesired Direction |
| | SD >= 1 | Undesired Direction |
| ◆ | Out of range per directive | |

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| | | | | | | | | | | | | |
|---|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| (2V08) (675) Orlando | -0.78 | -0.74 | 0.04 | 0.16 | 0.15 | -0.01 | -1.03 | -0.76 | 0.27 | -0.83 | -1.00 | -0.17 |
| (2V09) (596) Lexington | 0.03 | 0.60 | 0.57 | 0.26 | 0.19 | -0.06 | -0.24 | 0.85 | 1.07 | 0.05 | 0.28 | 0.23 |
| (2V09) (603) Louisville | 1.36 | 1.18 | -0.19 | 1.08 | 0.86 | -0.22 | 0.77 | 0.63 | -0.14 | 1.13 | 1.08 | -0.05 |
| (2V09) (614) Memphis | -1.48 | -1.31 | 0.17 | -1.40 | -1.40 | -0.01 | -1.55 | -0.91 | 0.63 | -0.28 | -0.54 | -0.25 |
| (2V09) (621) Mountain Home | 0.05 | -0.18 | -0.23 | -0.67 | -0.83 | -0.16 | 0.12 | 0.05 | -0.07 | 0.67 | 0.38 | -0.29 |
| (2V09) (626) Middle Tennessee HCS | -1.70 | -1.31 | 0.39 | -1.48 | -1.31 | 0.18 | -0.38 | 0.34 | 0.71 | -1.86 | -1.91 | -0.04 |
| (3V10) (506) Ann Arbor | 0.25 | 0.35 | 0.11 | -0.47 | -0.35 | 0.12 | 0.34 | 0.31 | -0.03 | 0.67 | 0.82 | 0.15 |
| (3V10) (515) Battle Creek | 0.43 | -0.13 | -0.56 | 0.58 | 0.47 | -0.11 | 0.14 | -0.80 | -0.93 | 0.22 | 0.05 | -0.17 |
| (3V10) (538) Chillicothe | 1.40 | 1.38 | -0.02 | 2.69 | 2.06 | -0.63 | 0.14 | 0.36 | 0.21 | 0.23 | 0.61 | 0.38 |
| (3V10) (539) Cincinnati | 1.25 | 1.24 | -0.01 | 1.86 | 1.80 | -0.07 | -0.14 | -0.16 | -0.02 | 1.02 | 1.07 | 0.06 |
| (3V10) (541) Cleveland | 1.39 | 1.61 | 0.22 | 1.87 | 1.85 | -0.01 | -0.44 | -0.14 | 0.30 | 1.63 | 1.82 | 0.19 |
| (3V10) (552) Dayton | -0.50 | -0.28 | 0.22 | 0.56 | 0.53 | -0.02 | -0.48 | -0.34 | 0.13 | -1.17 | -0.80 | 0.37 |
| (3V10) (553) Detroit | -1.34 | -1.16 | 0.19 | -1.15 | -1.04 | 0.11 | -0.54 | -0.46 | 0.08 | -1.24 | -1.03 | 0.21 |
| (3V10) (583) Indianapolis | -0.55 | -0.22 | 0.33 | 0.01 | 0.11 | 0.10 | 0.11 | 0.48 | 0.36 | -1.34 | -1.08 | 0.26 |
| (3V10) (610) Northern Indiana HCS | 0.17 | 0.74 | 0.57 | -0.20 | -0.12 | 0.08 | 0.83 | 1.80 | 0.95 | -0.25 | -0.05 | 0.20 |
| (3V10) (655) Saginaw | 0.91 | 0.75 | -0.15 | -0.35 | -0.47 | -0.12 | 1.58 | 1.74 | 0.16 | 0.75 | 0.38 | -0.38 |
| (3V10) (757) Columbus | 0.57 | 0.29 | -0.29 | -0.16 | -0.33 | -0.17 | 0.80 | 0.13 | -0.65 | 0.62 | 0.83 | 0.21 |
| (3V12) (537) Jesse Brown VAMC (Chicago) | 0.29 | 0.49 | 0.20 | 1.23 | 1.27 | 0.04 | -0.10 | 0.32 | 0.42 | -0.49 | -0.52 | -0.03 |
| (3V12) (550) Danville | -0.52 | -0.04 | 0.48 | -0.52 | -0.44 | 0.08 | -0.28 | 0.69 | 0.96 | -0.33 | -0.34 | -0.01 |
| (3V12) (556) Captain James A Lovell | 0.47 | 0.65 | 0.19 | 0.68 | 0.59 | -0.09 | -0.01 | 0.56 | 0.56 | 0.35 | 0.28 | -0.08 |
| (3V12) (578) Hines | 0.79 | 0.79 | 0.00 | 0.54 | 0.53 | 0.00 | -0.26 | -0.05 | 0.21 | 1.46 | 1.25 | -0.20 |
| (3V12) (585) Iron Mountain | 0.36 | 0.58 | 0.22 | 0.95 | 0.06 | -0.90 | -0.38 | 0.91 | 1.27 | 0.21 | 0.29 | 0.08 |
| (3V12) (607) Madison | 1.33 | 1.53 | 0.20 | 0.67 | 0.67 | 0.01 | 1.32 | 1.67 | 0.35 | 0.92 | 1.00 | 0.07 |
| (3V12) (676) Tomah | 0.05 | 0.20 | 0.15 | -0.12 | -0.37 | -0.25 | 0.82 | 1.29 | 0.47 | -0.60 | -0.49 | 0.11 |
| (3V12) (695) Milwaukee | -0.15 | 0.44 | 0.58 | 0.51 | 0.59 | 0.08 | -0.36 | 0.59 | 0.94 | -0.47 | -0.23 | 0.24 |
| (3V15) (589) Columbia | 0.52 | 1.26 | 0.74 | -0.16 | -0.30 | -0.15 | 0.85 | 2.29 | 1.42 | 0.45 | 0.77 | 0.32 |
| (3V15) (589) Eastern KS HCS | 1.17 | 0.80 | -0.36 | 0.88 | 0.69 | -0.18 | 1.03 | 0.50 | -0.52 | 0.65 | 0.56 | -0.09 |
| (3V15) (589) Kansas City | 0.45 | 0.20 | -0.24 | -0.13 | -0.19 | -0.07 | 1.13 | 0.92 | -0.20 | -0.02 | -0.29 | -0.26 |
| (3V15) (589) Wichita | 0.25 | -0.88 | -1.13 | -0.81 | -0.84 | -0.03 | 1.26 | -0.94 | -2.17 | 0.10 | -0.13 | -0.23 |
| (3V15) (657) Marion | -0.26 | 0.15 | 0.42 | -0.94 | -0.87 | 0.07 | 0.38 | 1.10 | 0.71 | -0.02 | 0.11 | 0.13 |
| (3V15) (657) Poplar Bluff | -0.64 | -0.56 | 0.08 | -0.04 | 0.24 | 0.29 | 0.08 | 0.13 | 0.05 | -1.43 | -1.59 | -0.17 |
| (3V15) (657) St. Louis | -0.61 | -0.53 | 0.08 | -0.47 | -0.63 | -0.17 | -0.55 | -0.68 | -0.13 | -0.32 | 0.14 | 0.46 |
| (3V23) (437) Fargo | -1.20 | -0.43 | 0.77 | -1.49 | -1.81 | -0.33 | -1.36 | 0.57 | 1.91 | 0.23 | 0.30 | 0.07 |
| (3V23) (438) Sioux Falls | -0.45 | -0.80 | -0.35 | -2.09 | -2.06 | 0.03 | 1.26 | 0.23 | -1.01 | -0.15 | 0.08 | 0.23 |
| (3V23) (568) Black Hills HCS | 0.46 | 0.83 | 0.38 | 0.73 | 0.77 | 0.04 | -0.60 | -0.08 | 0.51 | 0.87 | 1.14 | 0.27 |
| (3V23) (618) Minneapolis | 1.13 | 1.36 | 0.22 | -0.27 | -0.20 | 0.07 | 1.25 | 1.58 | 0.33 | 1.50 | 1.59 | 0.09 |
| (3V23) (636) Central Iowa | 0.39 | 0.25 | -0.14 | -0.05 | -0.07 | -0.01 | 1.03 | 0.58 | -0.45 | -0.13 | 0.04 | 0.16 |
| (3V23) (636) Iowa City | 0.39 | -0.11 | -0.50 | -0.80 | -0.92 | -0.13 | 0.66 | -0.53 | -1.16 | 0.99 | 1.20 | 0.21 |
| (3V23) (636) Nebraska-W Iowa | -0.31 | 0.02 | 0.34 | -1.60 | -1.50 | 0.09 | 0.22 | 0.60 | 0.37 | 0.69 | 0.96 | 0.26 |
| (3V23) (656) St. Cloud | 1.49 | 1.69 | 0.20 | 0.08 | 0.07 | 0.00 | 2.70 | 2.94 | 0.23 | 0.47 | 0.68 | 0.21 |
| (4V16) (502) Alexandria | -0.48 | -0.95 | -0.47 | -0.14 | -0.21 | -0.07 | -1.02 | -1.46 | -0.43 | 0.11 | -0.41 | -0.52 |
| (4V16) (520) Gulf Coast HCS | -2.02 | -2.02 | 0.00 | -0.71 | -0.92 | -0.21 | -1.97 | -1.94 | 0.04 | -1.73 | -1.57 | 0.16 |
| (4V16) (564) Fayetteville | 1.08 | 0.33 | -0.75 | 0.11 | -0.24 | -0.36 | 1.48 | 0.33 | -1.13 | 0.78 | 0.63 | -0.14 |
| (4V16) (580) Houston | -1.16 | -0.49 | 0.67 | -0.06 | -0.03 | 0.03 | -1.11 | 0.13 | 1.23 | -1.36 | -1.17 | 0.19 |
| (4V16) (586) Jackson | -0.84 | -0.61 | 0.23 | -0.13 | -0.18 | -0.05 | -1.81 | -1.35 | 0.46 | 0.10 | 0.19 | 0.09 |
| (4V16) (598) Little Rock | 0.11 | 0.17 | 0.06 | 0.03 | 0.10 | 0.08 | 0.70 | 0.94 | 0.24 | -0.48 | -0.67 | -0.19 |
| (4V16) (629) New Orleans | -0.24 | -0.47 | -0.23 | 0.73 | 0.59 | -0.15 | -1.34 | -1.62 | -0.27 | 0.09 | 0.01 | -0.08 |
| (4V16) (667) Shreveport | -0.47 | -0.44 | 0.04 | -0.73 | -0.99 | -0.27 | -0.77 | -0.58 | 0.19 | 0.46 | 0.61 | 0.15 |
| (4V17) (504) Amarillo | 1.11 | 1.37 | 0.26 | 0.54 | 0.64 | 0.11 | 1.39 | 1.78 | 0.39 | 0.50 | 0.57 | 0.07 |
| (4V17) (519) Big Spring | -1.17 | -1.81 | -0.64 | -1.69 | -1.79 | -0.10 | -0.90 | -1.89 | -0.97 | 0.04 | -0.27 | -0.31 |
| (4V17) (549) Dallas | -0.19 | 0.43 | 0.61 | -0.42 | -0.25 | 0.18 | 0.40 | 1.57 | 1.15 | -0.39 | -0.39 | 0.00 |
| (4V17) (671) San Antonio | -1.11 | -0.88 | 0.23 | -0.91 | -0.79 | 0.12 | -1.22 | -0.93 | 0.28 | -0.29 | -0.20 | 0.09 |
| (4V17) (674) Temple | -0.62 | 0.16 | 0.79 | 0.63 | 0.77 | 0.14 | -0.31 | 1.28 | 1.57 | -1.69 | -1.69 | 0.00 |
| (4V17) (740) VA Texas Valley Coastal Bend | -0.45 | 0.93 | 1.38 | -0.03 | 0.20 | 0.24 | -0.29 | 2.18 | 2.44 | -0.67 | -0.34 | 0.32 |
| (4V17) (756) El Paso | -1.59 | -2.48 | -0.90 | 0.78 | 0.95 | 0.17 | -1.34 | -3.05 | -1.69 | -2.90 | -3.32 | -0.42 |
| (4V19) (436) Montana | -2.20 | -1.39 | 0.81 | -2.06 | -2.30 | -0.25 | -1.99 | -0.34 | 1.63 | -0.77 | -0.40 | 0.36 |
| (4V19) (442) Cheyenne | 0.32 | -0.19 | -0.51 | -0.92 | -1.04 | -0.12 | 1.76 | 0.49 | -1.25 | -0.14 | 0.13 | 0.26 |
| (4V19) (554) Denver | -1.39 | -1.22 | 0.18 | -0.55 | -0.45 | 0.10 | -1.08 | -0.87 | 0.21 | -1.42 | -1.34 | 0.07 |
| (4V19) (575) Grand Junction | -0.42 | 0.73 | 1.15 | -1.07 | -1.11 | -0.04 | -0.33 | 2.23 | 2.52 | 0.48 | 0.48 | 0.00 |



Mental Health Management System

| Key | | |
|-----|----------------------------|---------------------|
| | SD >= 1 | Desired Direction |
| | 0.5 < SD < 1 | Desired Direction |
| | 0.5 < SD < 1 | Undesired Direction |
| | SD >= 1 | Undesired Direction |
| ◆ | Out of range per directive | |

[Home](#) [About](#) [Help Desk](#) [Trend Data](#) [Definitions](#) [Print View Report](#)

| | | | | | | | | | | | | |
|----------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| (4V19) (623) Muskogee | -0.72 | -1.16 | -0.44 | 0.29 | -0.07 | -0.37 | -0.85 | -0.95 | -0.09 | -1.01 | -1.51 | -0.50 |
| (4V19) (635) Oklahoma City | -0.61 | -0.38 | 0.24 | -1.18 | -0.98 | 0.21 | -0.07 | 0.40 | 0.47 | -0.08 | -0.24 | -0.16 |
| (4V19) (660) Salt Lake City | -0.25 | -0.40 | -0.15 | -0.44 | -0.57 | -0.14 | 0.06 | -0.04 | -0.09 | -0.16 | -0.26 | -0.10 |
| (4V19) (666) Sheridan | 0.22 | -0.02 | -0.24 | 0.58 | 0.25 | -0.33 | -0.21 | -0.25 | -0.04 | 0.11 | -0.05 | -0.16 |
| (5V20) (463) Anchorage | -0.57 | -0.49 | 0.08 | 0.13 | -0.06 | -0.19 | -2.38 | -1.91 | 0.47 | 1.00 | 0.90 | -0.10 |
| (5V20) (531) Boise | 0.34 | 0.64 | 0.31 | -0.78 | -0.81 | -0.03 | 1.62 | 1.92 | 0.29 | -0.11 | 0.30 | 0.41 |
| (5V20) (648) Portland | -0.55 | -0.58 | -0.03 | -1.70 | -1.82 | -0.13 | 0.55 | 0.55 | 0.00 | -0.06 | -0.01 | 0.05 |
| (5V20) (653) Roseburg | -1.10 | -0.01 | 1.09 | -0.65 | -0.44 | 0.21 | -0.14 | 0.48 | 0.61 | -1.62 | -0.05 | 1.57 |
| (5V20) (663) VA Puget Sound | 0.17 | 0.47 | 0.30 | 0.16 | 0.20 | 0.04 | -0.13 | 0.34 | 0.46 | 0.35 | 0.49 | 0.14 |
| (5V20) (668) Spokane | -0.44 | -0.65 | -0.21 | -1.82 | -1.62 | 0.20 | -0.52 | -1.09 | -0.56 | 1.38 | 1.28 | -0.10 |
| (5V20) (687) Walla Walla | -0.37 | -1.10 | -0.73 | -0.63 | -0.72 | -0.09 | 0.10 | -1.12 | -1.20 | -0.27 | -0.57 | -0.30 |
| (5V20) (692) White City | -1.04 | -0.79 | 0.25 | 0.60 | 0.64 | 0.04 | -1.01 | -0.51 | 0.50 | -1.86 | -1.86 | 0.01 |
| (5V21) (459) Honolulu | -1.24 | -0.91 | 0.33 | -0.37 | -0.35 | 0.02 | -1.20 | -0.22 | 0.97 | -1.15 | -1.42 | -0.28 |
| (5V21) (570) Fresno | -0.98 | -0.77 | 0.21 | -0.89 | -0.88 | 0.01 | -1.02 | -0.86 | 0.16 | -0.23 | 0.06 | 0.29 |
| (5V21) (593) Las Vegas | -0.38 | -0.47 | -0.09 | 0.45 | 0.17 | -0.28 | -0.25 | -0.35 | -0.10 | -1.04 | -0.86 | 0.18 |
| (5V21) (612) N. California | -0.58 | -0.68 | -0.10 | -0.96 | -0.77 | 0.20 | -0.68 | -0.81 | -0.12 | 0.36 | 0.09 | -0.28 |
| (5V21) (640) Palo Alto | -0.85 | -0.76 | 0.09 | 0.23 | 0.27 | 0.04 | -1.05 | -1.10 | -0.05 | -1.05 | -0.83 | 0.22 |
| (5V21) (654) Reno | -0.54 | 0.14 | 0.68 | -0.82 | -0.94 | -0.12 | -0.73 | 0.88 | 1.58 | 0.37 | 0.36 | -0.01 |
| (5V21) (662) San Francisco | 0.23 | 0.26 | 0.03 | 0.50 | 0.68 | 0.19 | 0.27 | -0.07 | -0.33 | -0.26 | -0.05 | 0.21 |
| (5V22) (501) New Mexico | -1.06 | -0.68 | 0.38 | -0.19 | -0.31 | -0.11 | -0.46 | 0.32 | 0.77 | -1.67 | -1.50 | 0.17 |
| (5V22) (600) Long Beach | -0.09 | -0.30 | -0.21 | -0.59 | -0.55 | 0.04 | 0.87 | 0.14 | -0.72 | -0.47 | -0.25 | 0.22 |
| (5V22) (605) Loma Linda | -1.54 | -1.57 | -0.03 | -0.99 | -1.16 | -0.17 | -0.85 | -0.71 | 0.14 | -1.52 | -1.55 | -0.03 |
| (5V22) (644) Phoenix | -0.85 | -1.06 | -0.21 | -0.55 | -0.55 | 0.00 | -0.56 | -0.86 | -0.29 | -0.75 | -0.92 | -0.17 |
| (5V22) (649) Northern Arizona | -1.05 | -0.99 | 0.06 | -0.46 | -0.59 | -0.12 | -1.01 | -0.67 | 0.33 | -0.82 | -0.91 | -0.08 |
| (5V22) (664) San Diego | -1.35 | -0.94 | 0.41 | -1.08 | -1.07 | 0.01 | -0.99 | -0.60 | 0.38 | -0.87 | -0.37 | 0.50 |
| (5V22) (678) Southern Arizona | -0.56 | -0.24 | 0.33 | -0.75 | -0.90 | -0.16 | -0.68 | 0.41 | 1.08 | 0.20 | -0.03 | -0.23 |
| (5V22) (691) Greater Los Angeles | -0.72 | -0.47 | 0.25 | 0.19 | 0.22 | 0.03 | -0.79 | -0.34 | 0.44 | -0.97 | -0.90 | 0.06 |

U.S. House of Representatives

COMMITTEE ON VETERANS' AFFAIRS

ONE HUNDRED FIFTEENTH CONGRESS

335 CANNON HOUSE OFFICE BUILDING

WASHINGTON, DC 20515

<http://veterans.house.gov>

March 5, 2018

The Honorable David J. Shulkin, M.D.
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue N.W.
Washington, D.C. 20420

Dear Secretary Shulkin,

We continue to support your goal of reducing the rate of veteran suicides and increasing access to mental health care for veterans. As you are aware, preventing veteran suicide has been a top priority for our Committees and we stand ready to support your continued efforts with your top clinical priority. However, the February 27, 2018 announcement that the Department of Veterans Affairs (VA) and Cohen Veterans Network (CVN) were entering into a partnership raises some concerns and questions you must address.

We seek to understand the nature and extent of this partnership and whether CVN will be provided compensation for this partnership with VA. We wish to know why CVN was selected for a partnership versus other provider organizations and veterans' charities. Furthermore, we request a briefing on the VA programs and offices responsible for implementing the goals of the partnership, and, as necessary, an explanation of VA's legal authority to enter into a sole-source contract or agreement with CVN. Funding sources and the estimated cost of this partnership should also be included in the brief.

Organizations contracting with VA must follow all federal contracting requirements including compliance with the Office of Federal Contracting Compliance Programs, Title VII of the Civil Rights Act of 1964, and federal labor laws including the Equal Pay Act, and must disclose any employment and labor law violations. Simply put, CVN must be transparent about its organization and compliance with federal law in order to ensure VA's effort to rebuild veterans' and family members' trust continues unimpeded.

So that we can better understand this partnership, please provide documents establishing the partnership as well as answers to the following questions:

1. What is the nature and extent of VA's partnership with CVN beyond the goals outlined in the announcement?

2. Does CVN seek remuneration under this partnership, or request remuneration during the partnership's negotiation, and has VA contemplated entering into a contractual relationship with CVN at any time in the future?
3. If this relationship with CVN is contractual or quasi-contractual, what is the scope of the relationship and what services would CVN provide VA?
4. What statutory and regulatory authorities permit VA to enter into a sole-source contract or agreement with CVN under the partnership, and has a sole-source justification been identified? Please provide this justification.
5. The announcement states that CVN and VA would "discuss potential locations for Cohen Clinics in regions believed to have underserved veterans in need." As part of this initiative, would CVN be provided information not available to the public or information not available to other health care providers or other organizations? Please provide any and all documents and information shared with CVN as part of this discussion, and in the same format in which it was provided to CVN.
6. If CVN will be a provider of mental health care to veterans, will CVN provide care under the Choice Program or under a different program or authority for the provision of community care? Please describe how VA will serve as the coordinator of care for veterans considering CVN states they do "not share any confidential patient information with the VA." Please describe how VA guarantees the quality of care CVN provides.
7. This partnership was not provided in VA's FY19 budget request. What is this partnership's projected cost to VA over 10 years?
8. What is the VA funding source for this partnership?
9. Two members of CVN's Board of Directors, Steven Cohen and Douglas Haynes, are defendants named in a February 2018 gender discrimination lawsuit at Point72 Asset Management. The complaint alleges offensive behavior towards women was encouraged and perpetrated by senior firm leadership, including Mr. Cohen and Mr. Haynes. Their presence on the CVN Board could lead to the conclusion that discrimination in CVN's organization and against veterans and family members may also be tolerated. As the fastest growing subset of veterans, women veterans need mental health providers they can trust. How do you vet the individuals in leadership positions at organizations with which VA partners?
10. Does the announcement of the VA-CVN partnership allow for the October 2017 Memorandum of Agreement (MOA) between CVN and VA to be construed as the agreement outlining the partnership, or would subsequent partnership documents supersede the MOA? If the MOA outlines the framework of the partnership, why did VA wait four months to announce this partnership? What actions have been taken under the agreement to date?

11. Were other health care organizations considered for this partnership? Why was CVN chosen as a VA partner? Please provide documents containing the criteria and justification for this decision, including the consideration of other health care organizations for the partnership.

Please provide a response by Friday, March 16, 2018. If you have any questions, please contact

(b)(6) Minority Staff Director of the Subcommittee on Oversight and Investigation, at
(b)(6) @mail.house.gov or at (202) 224-(b)(6) or (b)(6) Counsel, at
(b)(6) @vetaff.senate.gov or at (202) 224-(b)(6) We look forward to your response.

Sincerely,

(b)(6)

TIM WALZ
Ranking Member
Committee on Veterans' Affairs
U.S. House of Representatives

(b)(6)

JON TESTER
Ranking Member
Committee on Veterans' Affairs
U.S. Senate

CAPITOL OFFICE:
2313 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-2472

MANKATO OFFICE:
527½ SOUTH FRONT STREET
MANKATO, MN 56001
(507)388-2149

ROCHESTER OFFICE:
1202½ 7TH STREET NW,
SUITE 211
ROCHESTER, MN 55901
(507) 388-2149

TOLL FREE#:
(877) 846-9259



TIMOTHY J. WALZ
CONGRESS OF THE UNITED STATES
FIRST DISTRICT, MINNESOTA
WWW.WALZ.HOUSE.GOV

AGRICULTURE COMMITTEE
VETERANS' AFFAIRS COMMITTEE
RANKING MEMBER

April 19, 2018

Director Patrick Kelly
Minneapolis VA Health Care System
One Veterans Drive
Minneapolis, MN 55417

Director Kelly,

I am writing on behalf of (b)(6); (b)(2)

(b)(6)

(b)(6); (b)(2)

Please direct your response to (b)(6) in my Mankato office. He can be reached at (507) 388-
(b)(6) or (b)(6) [mail.house.gov](mailto:(b)(6)@mail.house.gov). Again, thank you for your time and attention to this request.

Sincerely,

(b)(6)

Tim Walz
MEMBER OF CONGRESS



PRIVACY RELEASE FORM
Office of Representative Tim Walz
First District, Minnesota

The Privacy Act of 1974 requires written consent from the constituent before information can be obtained from a government agency's records. By law, we cannot intervene on the constituent's behalf without his or her express authorization in writing.

NOTE: Members of Congress are empowered to help constituents interact with federal agencies and, in some instances, other entities. Although Members and their staff cannot force an agency to expedite your case or act in your favor, they can frequently intervene to facilitate the processes involved, encourage an agency to give your case consideration and, in some instances, advocate for a favorable outcome.

Full Name _____ (b)(6); (b)(2) _____
Address _____
City, State, Zip _____
Social Security Number (leave blank for immigration cases) _____ (b)(6); (b)(2) _____
Date of Birth _____ (b)(6); (b)(2) _____
Phone (List primary number) _____ (b)(6); (b)(2) _____
Email _____

I prefer to be contacted by: ☐ Mail ☒ Phone ☒ Email

Have you contacted other elected officials regarding this issue? If so, please list here:

Have you designated others to speak with us? If so, please list name(s) and number(s) here:

*I authorize Congressman Tim Walz and his staff to grant and obtain personal records, files and information about me pertaining to my request for assistance. I understand that I may revoke this authorization at any time.
I certify, under penalty of perjury, that 1) I provided or authorized all of the information in this privacy release and any document submitted with it; 2) I reviewed and understand all of the information contained in my privacy release and submitted with it; and 3) all of this information is complete, true, and correct.*

Signature _____ (b)(6); (b)(2) _____ **Date** 04/06/2018
Signature of primary constituent receiving assistance - Third party signatures are not accepted

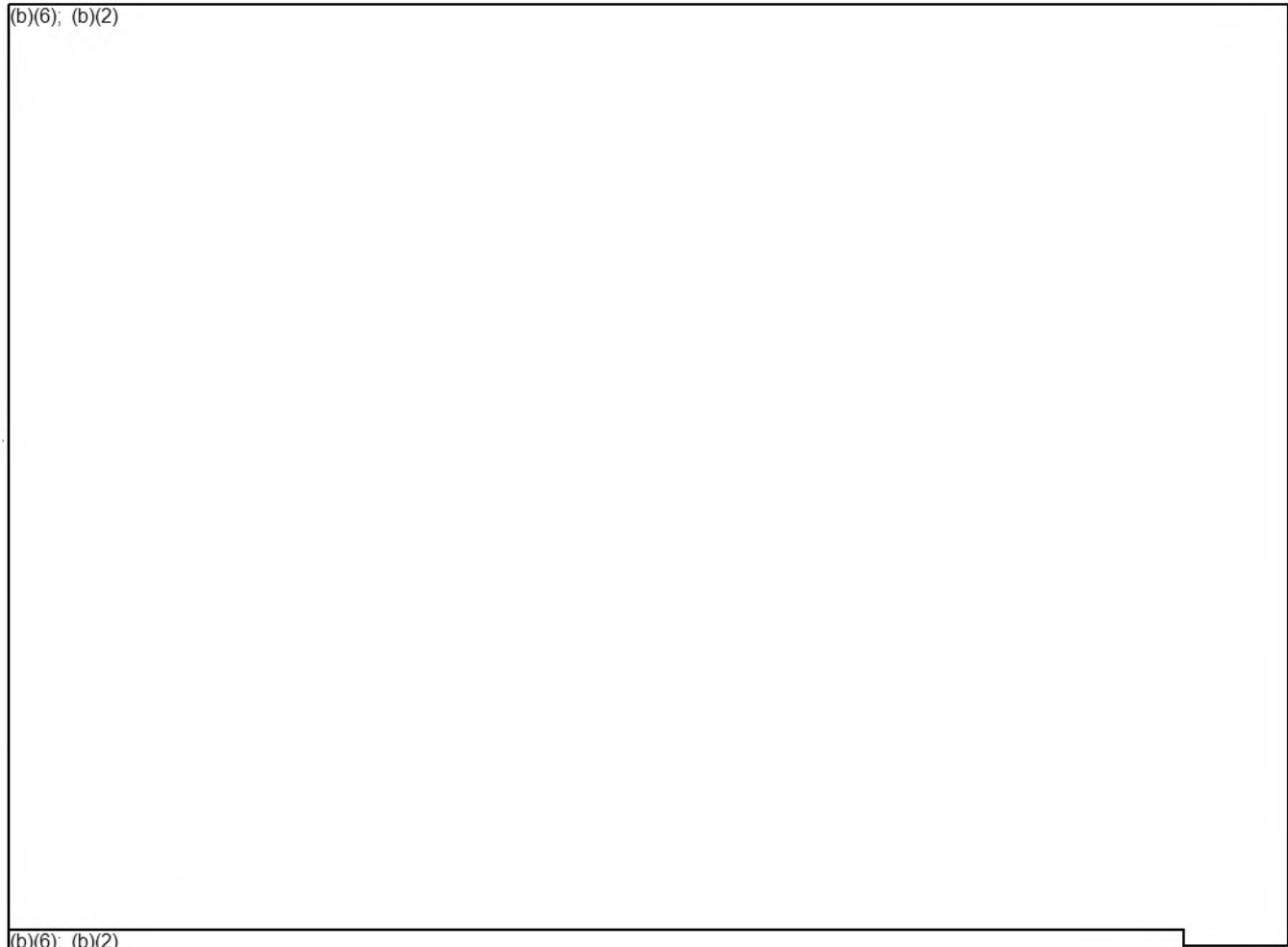
Please complete this form in its entirety before returning it to the appropriate office:
Rochester: 1202 ½ 7th Street NW, Suite 211, Rochester, MN 55901 or Fax: (507) 206-0650
Mankato: 527 ½ South Front Street, Mankato, MN 56001 or Fax: (507) 388-3174

(b)(6); (b)(2)

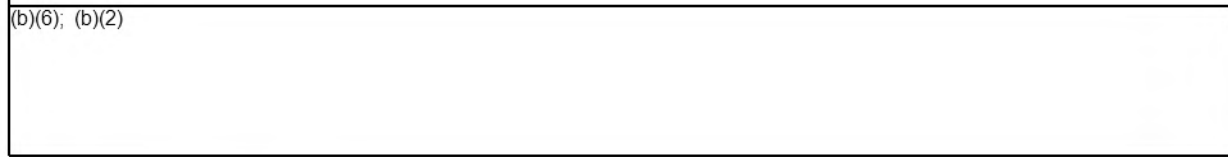
April 2, 2018

(b)(6); (b)(2)

(b)(6); (b)(2)

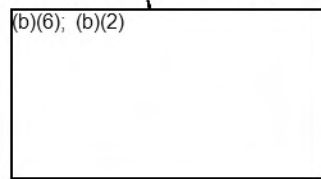


(b)(6); (b)(2)



Respectfully submitted,

(b)(6); (b)(2)



Appendix 1



**DEPARTMENT OF VETERANS AFFAIRS
Medical Center
One Veterans Drive
Minneapolis MN 55417**

In Reply Refer To:

September 9, 1996

Immigration and Naturalization Service
Nebraska Service Center
850 "S" Street
Lincoln, NE 68508-3898

H-1B PETITION FOR (b)(6); (b)(2)

(b)(6); (b)(2)

(b)(6); (b)(2)

(b)(6); (b)(2)

Sincerely,

(b)(6); (b)(2)

Appendix 2



DEPARTMENT OF VETERANS AFFAIRS
Medical Center
One Veterans Drive
Minneapolis, MN 55417



Brain Sciences Center

In reply refer to: 618/118

(b)(6); (b)(2)

Tel: (612)-725-(b)(6)
Fax: (612)-725-(b)(6)
Email: (b)(6); jmaroon.tc@va.gov

June 16, 1997

U.S. Immigration and Naturalization Service
Nebraska Service Center
850 "S" Street
Lincoln, NE 68508-3898

NATIONAL INTEREST WAIVER PETITION FOR (b)(6); (b)(2)

(b)(6); (b)(2)

Immigration & Naturalization Service
Re: (b)(6); (b)(2)
June 16, 1997
Page 2

(b)(6); (b)(2)

(b)(6); (b)(2)

Immigration & Naturalization Service

Re: (b)(6); (b)(2)

June 16, 1997

Page 3

(b)(6); (b)(2)

General Background of the Minneapolis VAMC

(b)(6); (b)(2)

(b)(6); (b)(2)

(b)(6); (b)(2)

(b)(6); (b)(2)

Immigration & Naturalization Service
Re (b)(6); (b)(2)
June 16, 1997
Page 4

(b)(6); (b)(2)

Qualifications of (b)(6); (b)(2)

(b)(6); (b)(2)

Immigration & Naturalization Service

Re: (b)(6); (b)(2)

June 16, 1997

Page 5

(b)(6); (b)(2)

Nature and Significance

(b)(6); (b)(2)

(b)(6); (b)(2)

Immigration & Naturalization Service

Re: (b)(6); (b)(2)

June 16, 1997

Page 6


(b)(6); (b)(2)

Sincerely,

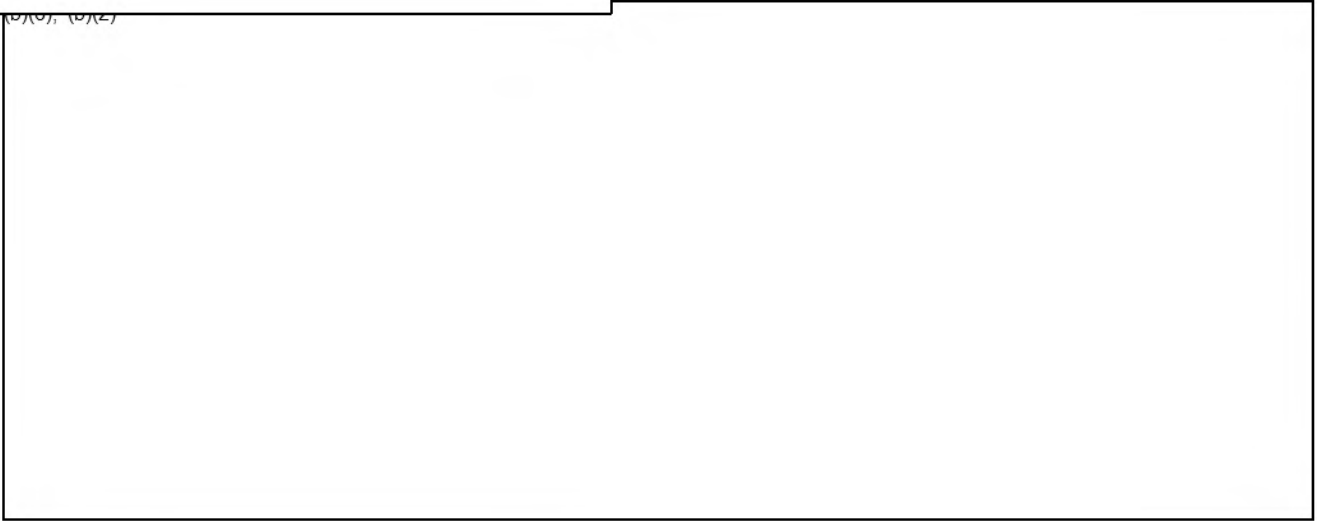
(b)(6); (b)(2)

Appendix 3


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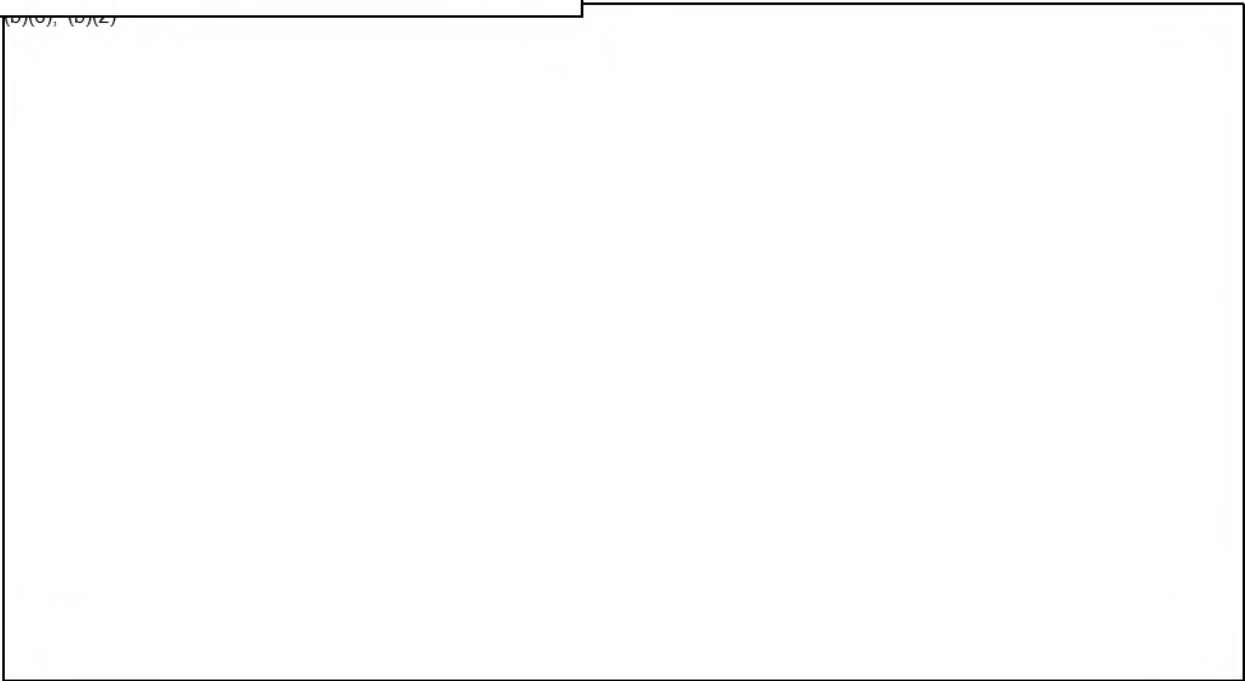
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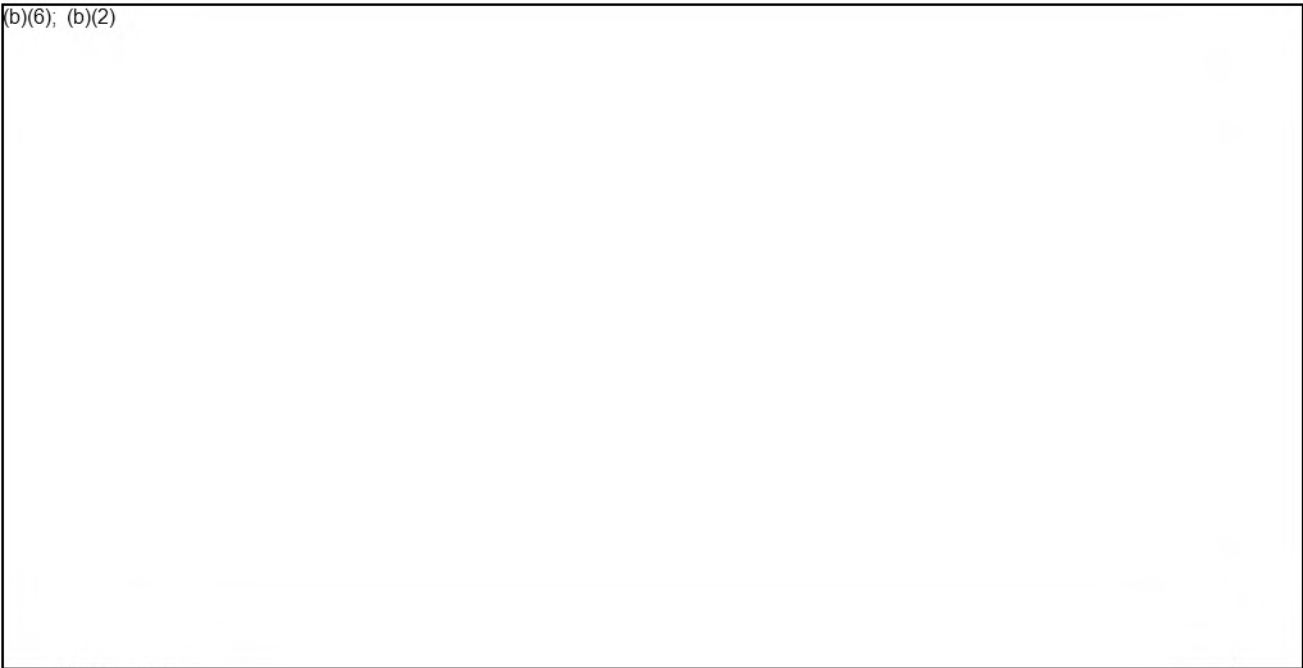
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Appendix 4

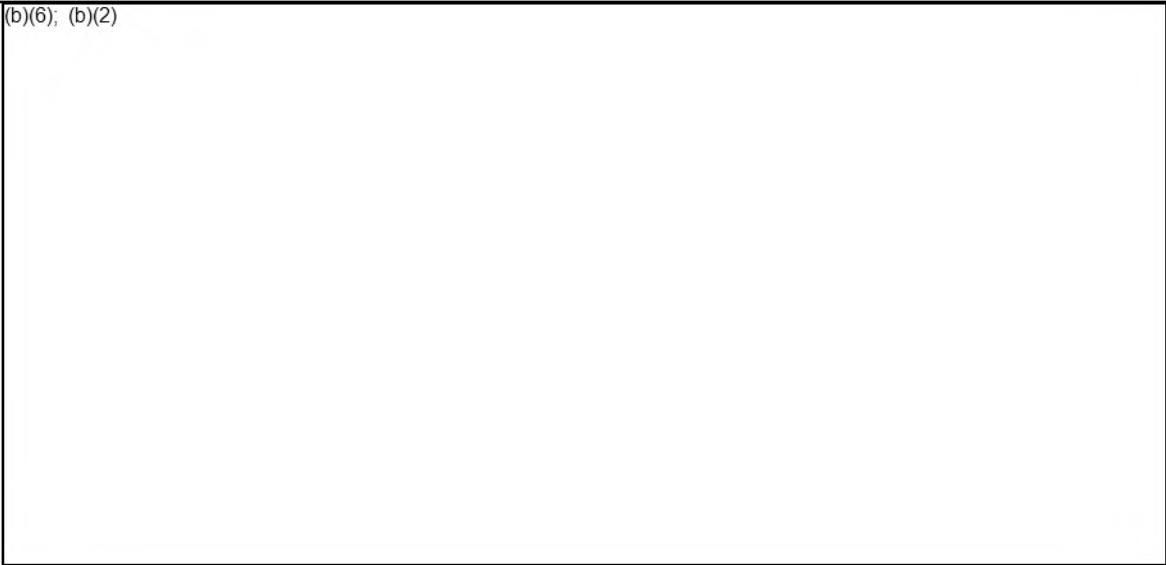
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(b)(6); (b)(2)



Appendix 5



(b)(6); (b)(2)

gumn.edu>

Discussion today

1 message

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U.S. House of Representatives

COMMITTEE ON VETERANS' AFFAIRS

ONE HUNDRED FIFTEENTH CONGRESS

335 CANNON HOUSE OFFICE BUILDING

WASHINGTON, DC 20515

<http://veterans.house.gov>

April 20, 2018

The Honorable Wilbur Ross
Secretary
Department of Commerce
1401 Constitution Avenue, NW
Washington, D.C. 20230

Dear Secretary Ross:

We write to request that you include a question related to military service in the upcoming 2020 Decennial Census questionnaire (2020 Census).

Previously, the Census included a question about veteran status on every decennial census from 1840 through 2000. This information is vitally important to Congress, the Department of Veterans Affairs (VA), and the other federal and state agencies that provide services to our veterans. Including a question asking if the respondent has served in the United States military on the 2020 Census will help to fully account for all living veterans so that these institutions have the most up to date and accurate information in order to deploy resources effectively and efficiently.

Census data feeds into and helps drive the predictive models and services that assist the Department of Veterans Affairs in policy, decision making, and funding models, as well as state agencies that provide services to veterans. The Census Bureau even highlights the importance and value of this data on its website, citing the data's use in VA healthcare, home loan, employment, and cemetery programs.¹

Currently, the United States is experiencing a significant shift in its veteran population. The RAND Corporation has predicted a 19% decrease in the veteran population from the years 2015 to 2025 (barring policy changes or large scale conflicts), as well as a geographic shift in where veterans will be concentrated, with populations increasing in urban areas.² These changes, combined with continued policy reforms, are going to have an enormous impact on how the VA provides services for veterans. As Congress continues to assess the structure, authorities, and needs of the VA, this data, which can only be provided by the Census, is also necessary to our Committee, the VA, and our community partners.

¹ Census Bureau, U.S. Department of Commerce *Why We Ask Questions About Veteran Status* (<https://www.census.gov/acs/www/about/why-we-ask-each-question/veterans/>)

² RAND Corporation, *Current and Projected Characteristics and Unique Health Care Needs of the Patient Population Served by the Department of Veterans Affairs*, 2015 (https://www.rand.org/pubs/research_reports/RR1165z1.html).

We urge you to ensure that the 2020 Census form includes a question similar to the following:

Has this person ever served in the U.S. Armed Forces, Reserve Components, or National Guard?

In addition, we urge you to also consider including the following questions, similar to those found on previous versions of the American Community Survey:

Did this person serve on active duty in the U.S. Armed Forces? If so, when?

In total, how many years of active-duty military service has this person had?
How many years of Reserve or National Guard military service has this person had?

Does this person have a VA service-connected disability rating?

What is this person's service-connected disability rating?

Thank you for your consideration. We are hopeful you will accommodate this request in order to help us better care for our veterans.

Sincerely,

(b)(6)

Tim Walz
Ranking Member
House Committee on Veterans' Affairs

Mark Takano
Member of Congress

(b)(6)

Julia Brownley
Member of Congress

Ann McLane Kuster
Member of Congress

(b)(6)

Beto O'Rourke
Member of Congress

Kathleen Rice
Member of Congress

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J. Luis Correa
Member of Congress

Conor Lamb
Member of Congress

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Elizabeth Esty
Member of Congress

Scott H. Peters
Member of Congress

cc: The Honorable Robert Wilkie, Acting Secretary, Department of Veterans Affairs

Question for the Record
Representative Tim Walz
House Veterans' Affairs Committee
Honoring Heroes: Memorializing Our Nations' Veterans
June 7, 2018

Question 1: According to the VA's current policy, a national cemetery may be established if there are 80,000 or more unserved veterans within 75 miles of a proposed cemetery site. California's Central Coast tri-counties of Santa Barbara, Ventura, and San Luis Obispo run approximately 180 miles up the coast, and the closest national cemeteries are in Bakersfield and Riverside, approximately 150 miles away. In 2017, the VA estimated there were more than 80,000 veterans in Ventura, Santa Barbara, and San Luis Obispo Counties. Given the distance and population needs, is establishing a Nationals Veterans Cemetery in Ventura County possible?

VA Response: VA and the National Cemetery Administration are committed to honoring the military service and contributions of our Nation's Veterans. The Department's policy is to establish new national cemeteries in areas where at least 80,000 Veterans residing within a 75-mile radius of a proposed location do not have reasonable access to a burial option in either a VA national or a VA funded state Veterans cemetery.

Based on the latest veteran population data, in 2018, VA estimates there are approximately 80,000 veterans currently residing in Ventura, Santa Barbara, and San Luis Obispo Counties. However, approximately 40,000 of these Veterans already have access to an existing national or state Veterans cemetery within 75 miles of their residence. Veterans residing in the County of Ventura and parts of the Counties of Santa Barbara and San Luis Obispo are in the service area of Bakersfield National Cemetery, which is projected to remain open beyond 2060. Additionally, an expansion project underway at the Los Angeles National Cemetery will re-open that cemetery in late 2019 to columbarium interments, enhancing access for Veterans in that area, including Ventura County, through 2060. Given that there are approximately 40,000 Veterans remaining in the three counties under consideration that do not have access to a Veterans cemetery within 75 miles of their residence, this area does not meet VA's policy threshold for establishing a new national cemetery. VA would be happy to work with the State of California to establish a state veterans cemetery in the area through VA's Veterans Cemetery Grants Program to provide additional burial options for California Veterans.