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# United States Senate

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April 15, 2024

The Honorable Denis R. McDonough  
Secretary of Veterans Affairs  
810 Vermont Avenue, NW  
Washington, DC 20420

Dear Mr. Secretary,

We write today to express our frustration and disappointment in the Department of Veterans Affairs (VA) Veterans Health Administration's (VHA) recent decisions regarding staffing strategy. In press release after press release, VHA touted many successes in 2023— hiring and retaining the most staff in recent memory, unprecedented enrollment growth due to eligibility expansions, and providing the most clinical appointments ever, among others. Therefore, our Committee was surprised to learn that VHA was implementing a policy of “zero growth” in the remainder of fiscal year (FY) 2024 to keep staffing numbers flat compared to the previous FY and further plans to cut nearly 10,000 full-time equivalent employees (FTE) based on the President's FY 2025 budget request. This letter follows weeks of conflicting communications from the Department to Congress and the field, resulting in widespread confusion and turning what the Department deemed a “strategic pause” into a “strategic mess.”

Our Committee has requested the Department's plans and goals related to this change in approach. Both the Committee and the field have requested detailed guidance and insight into how this change should be implemented. We have also requested information regarding how and why the Department made this drastic decision. The responses to all of these requests have been insufficient at best. Without further clarification and openness, we are concerned that such a significant shift in policy could not only have long-term impacts on the Department's ability to deliver timely, high-quality care but also negatively impact its ability to recruit and retain health care professionals.

VA's decision to move forward with a “zero growth” staffing strategy appears shortsighted in light of the record-breaking increases in veteran health care enrollment and eligibility expansions. The Department has yet to produce data showing that current staffing levels and strategy have improved patient access to care delivered within VA facilities to justify cutting nearly all its workforce growth from Quarter 1 of FY 2024. When asked how VHA plans to offer care at current levels despite unprecedented growth, leadership cited the recent Access Sprints initiative to provide the soonest and best care to veterans in a modality that is easy for them to access.<sup>1</sup> However, during a briefing with Committee staff, VA could not confirm whether or not this initiative to improve access for new patients was successful and sustainable.

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<sup>1</sup> [VA increases access to health care for thousands of Veterans through nationwide access sprints](#) (VA.GOV)

There are still countless veterans across the country experiencing long wait times, and VA's internal system to assess the performance of VA medical centers continues to show a pattern of "meaningful decline" with respect to average wait times for primary care, specialty care, and mental health care. It is unclear how VA's "zero growth" strategy comports with this reality.

Furthermore, VA has been unable to articulate how the "zero growth" strategy will impact VA's community care utilization in the coming years. VA's reliance on community care has grown significantly over the last decade, a trend that VA leaders have expressed significant concerns with. In FY 2023, nearly 40% of the total VHA workload was delivered in the community despite a robust and growing workforce. The FY 2025 request for community care funding continues this spending trend. It is critical that the Committee have a thorough understanding of the impact that "zero growth" in FY 2024 through attrition and cuts of nearly 10,000 FTE in FY 2025 will have on community care utilization in the coming years and what actions the Department is taking to prepare for that.

During briefings with VHA officials, we were assured that special programs and critical needs staff and locations would be exempt from hiring limitations, but that has not been the case. We have heard concerns from veterans, employees, labor partners, and Veterans Service Organizations that various locations nationwide are rescinding employment offers for mental health providers, stalling hiring processes for HUD-VASH case managers, and limiting Patient Aligned Care Teams from filling base hiring needs, and more. We were informed just this month that the Department had only recently begun soliciting information from the field regarding plans to align with this sustainment strategy – soliciting from field locations that still do not have adequate guidance from the Department on what this should look like. While the Department's assurances regarding staffing cap exemptions are faltering, there seems to be no set structure for oversight of each facility's plan nor mitigation procedures if the Department is not meeting its overall goals. This does not set staff or medical facilities up for success in delivering on VA's primary mission of providing timely access to high-quality care to veterans.

For the Department to be truly impactful and successful, VA must have a sustainable plan to deliver timely and high-quality care, which includes recruiting and retaining sufficient numbers of health care staff. We urge you to re-evaluate staffing goals for FY 2024 and FY 2025 and be more forthcoming moving forward on the Department's hiring needs and goals. VA should seek to craft a thoughtful strategy in coordination with Congress and local facilities that prioritizes providing care to the increasing numbers of our nation's veterans who are seeking and in need of the health care services they have not only earned but deserve. Any further pursuit of changes to staffing strategies should be accompanied by more robust and forthright communication and transparency with the field and Congress. We request your response to the following related inquiries no later than May 1, 2024:

1. Please provide a detailed account of how the Department decided to institute a strategic hiring pause in VHA.
2. What is the Department's current staffing strategy?
  - a. How is the Department enforcing this strategy uniformly across all facilities?
  - b. What tactics does the Department plan to employ if its staffing goals are not being met?

- c. How does the Department plan to enforce exemptions in this strategy such as those promised for mental health providers, special programs, and facilities that continue to struggle filling baseline staffing needs?
3. How does the Department reconcile its current Human Resources staffing goal (approximately 408,000 FTE) with the 383,186 FTE listed in the FY 2025 budget request?
4. Please provide data and explanations illustrating how access sprints and current staffing levels have directly contributed to improved access to care for veterans since this time last year.


As the Department's workforce numbers and strategy are a critical piece of Congress' oversight in its service to American veterans and tax-payers, we also request that the Department provide monthly briefings to the Committee on this topic.

Sincerely,



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Jon Tester  
Chairman  
Senate Committee on Veterans' Affairs



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Jerry Moran  
Ranking Member  
Senate Committee on Veterans' Affairs