

REPUBLICANS

MIKE BOST, ILLINOIS, CHAIRMAN
 AUMUA AMATA COLEMAN RADEWAGEN, AMERICAN SAMOA
 JACK BERGMAN, MICHIGAN
 NANCY MACE, SOUTH CAROLINA
 MATTHEW M. ROSENDALE, MONTANA
 MARIANNETTE MILLER-MEEKS, IOWA
 GREGORY F. MURPHY, NORTH CAROLINA
 SCOTT FRANKLIN, FLORIDA
 DERRICK VAN ORDEN, WISCONSIN
 MORGAN LUTTRELL, TEXAS
 JUAN CISCOMANI, ARIZONA
 EU CRANE, ARIZONA
 KEITH SELF, TEXAS
 JEN KIGGANS, VIRGINIA

JON CLARK
 STAFF DIRECTOR

DEMOCRATS

MARK TAKANO, CALIFORNIA, RANKING MEMBER
 JULIA BROWNLEY, CALIFORNIA
 MIKE LEVIN, CALIFORNIA
 CHRIS PAPPAS, NEW HAMPSHIRE
 FRANK J. MRVAN, INDIANA
 SHEILA CHERFILUS-MCCORMICK, FLORIDA
 CHRIS DELUZIO, PENNSYLVANIA
 MORGAN MCGARVEY, KENTUCKY
 DELIA RAMIREZ, ILLINOIS
 GREG LANDSMAN, OHIO
 NIKKI BUDZINSKI, ILLINOIS

MATT REEL
 DEMOCRATIC STAFF DIRECTOR

U.S. House of Representatives

COMMITTEE ON VETERANS' AFFAIRS

ONE HUNDRED EIGHTEENTH CONGRESS

364 CANNON HOUSE OFFICE BUILDING

WASHINGTON, DC 20515

<http://veterans.house.gov>

June 25, 2024

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

Dear Secretary McDonough:

The Department of Veterans Affairs (VA) is responsible for ensuring quality care for spinal cord injury and disorder (SCI/D) veterans. According to VA's SCI/D Registry, there are currently 22,721 living SCI/D veterans, 97% of these veterans received VA care in the past 12 months. This high percentage is a testament to the significant level of responsibility VA has in caring for SCI/D veterans.

For this reason, I was honored to recently hold an oversight hearing on VA's care for SCI/D veterans to ensure that VA is meeting this community of veterans' needs.¹ I am incredibly disappointed, however, that you did not send a witness to our recent hearing from the SCI/D System of Care despite my explicit request to do so. This is the third time the department has substituted its judgement for mine and not fulfilled my requests for witnesses. I am disappointed, yet not surprised, that VA's witness' lack of specific knowledge regarding SCI/D programs, has necessitated this letter and the enclosed questions.

Given the Paralyzed Veterans of America's (PVA) and I AM ALS's fulsome participation, the hearing proved that SCI/D veterans have unique needs that require care which can only be provided by specially trained providers. Yet, at the hearing it was revealed that VA's SCI/D units are chronically understaffed. Regardless of whether the provider vacancy rate is 9%, as VA testified, or 30%, as PVA testified, VA Medical Centers' (VAMC) are allegedly pulling providers off the SCI/D units to fill staffing vacancies in other departments. That is unacceptable.

Your staff have told me that your VAMCs have the appropriate number of staff necessary to provide care to veterans. If this is true, it seems misguided that specialized, irreplaceable staff are being pulled away from SCI/D patients to fill gaps that VA Central Office (VACO) believes don't exist.

In addition to staffing, VA needs to look at other ways to reduce burdens on its facilities. Home and community-based services provide opportunities for SCI/D veterans to receive care

¹ *A Call to Action: Meeting the Needs of the Spinal Cord Injury and Disorders (SCI/D) Veteran Community*, June 13, 2024, <https://docs.house.gov/Committee/Calendar/ByEvent.aspx?EventID=117408>.

where they live instead of in a facility. This is why I believe that the passage of *H.R. 8371, the Senator Elizabeth Dole 21st Century Healthcare and Benefits Improvement Act* is critical. This bipartisan bill would provide VA with the authority needed to provide home and community-based services as well as give caregivers access to the necessary support they need to take care of their veteran.

Please provide, no later than **Monday, July 22, 2024**, answers to the enclosed questions, including copies of all responsive documents. When producing documents, please do not alter them in any way, including but not limited to the application of redactions or a watermark. Additionally, digital copies should be provided in a format enabling their printing and copying by the House Committee on Veterans' Affairs. Thank you for your attention to this issue. Please do not hesitate to have your staff contact my staff with questions.

Sincerely,



MIKE BOST
Chairman

Cc: The Honorable Mark Takano, Ranking Member

Enclosure: Supplemental SCI/D Questions

Supplemental SCI/D Questions

1. During FY23 and FY24 how many missed medical appointments for SCI/D veterans are the result of VA transportation issues?
 - a. What is the cost to VA of these missed appointments?
2. Does VA include nursing staff in the 9% vacancy rate for clinical staff in the SCI/D System?
 - a. If not, what is the vacancy rate for nurses in the SCI/D System?
 - b. Are the number of VA providers in SCI/D centers and units in compliance with VHA Directive 1176?
3. Are VA providers screening all SCI/D veterans for mobility intervention and walking aid eligibility?
4. How does VA account for the 13-bed shortage in operational long-term care SCI/D beds (a discrepancy highlighted by VHA Directive 1176 and data provided by VA)?
5. What is VA's budget in FY24 for the Highly Rural Transportation Grant Program?
 - a. How many veterans use this program?
6. How are the tier qualifications determined for VA's Program of Comprehensive Assistance for Family Caregivers?
7. Are all of VA's mobile medical units wheelchair accessible?
8. What oversight and specialized training does Medical Disability Examination Office (MDEO) do to ensure that contracted examiners are competent to perform disability compensation examinations on veterans with complex spinal cord injuries and disorders, and to ensure that contracted examiners do not cause injury during the examination?
9. When a contracted exam facility is exempt from ADA and OSHA requirements under law, what does MDEO do to ensure that contracted exam vendors provide paralyzed and catastrophically disabled veterans accessible disability compensation facilities?
10. Provide a detailed explanation for how MDEO ensures that contract exam vendors identify veterans who require accessible facilities and schedule them accordingly?