

**U.S. House of Representatives
Committee on Veterans' Affairs
119th Congress – Authorization and Oversight Plan**

In accordance with clause 2 of Rule X, the Committee on Veterans' Affairs submits its Authorization and Oversight Plan for the 119th Congress. The Committee conducts its oversight on a regular basis through all of its five Subcommittees: the Subcommittee on Disability Assistance and Memorial Affairs, the Subcommittee on Economic Opportunity, the Subcommittee on Health, the Subcommittee on Oversight and Investigations, and the Subcommittee on Technology Modernization. Oversight of the issues outlined below is expected to be a shared responsibility among the full Committee and the appropriate Subcommittees.

The Department of Veterans Affairs (VA) administers various functions and programs based on broad statutes related to health care, benefits, and the Department's organization. However, most of these programs operate under specific authorizations or derive their regulations from such authorizations. These are indicated in the applicable subcommittee sections. Programs whose authorizations expire soon are emphasized.

Subcommittee on Disability Assistance and Memorial Affairs

- ***Waste and Improper Benefits Payments*** – In President Biden's Fiscal Year 2025 Budget Request, VA requested hundreds of billions of dollars in mandatory and discretionary spending for veteran and survivor benefits programs. However, VA has historically faced challenges with the responsible stewardship of taxpayer dollars. For years, VA has reported issuing veterans and their families billions of dollars of under- and over-payments of benefits annually. The VA Office of Inspector General (OIG) and the Government Accountability Office (GAO) published numerous reports in recent years on the underlying causes of VA waste and improper payments, including inaccurate claims processing and inadequate controls over veterans' and survivors' compensation and pension programs. The Committee will work with VA to mitigate waste and ensure veterans, and their families receive accurate payments of VA benefits. Additionally, the Committee will work with the Veterans Benefits Administration (VBA) to mitigate unnecessary spending on physical offices, including the 56 VBA regional offices, that may be underutilized as a result of VBA's tele-work policy.
- ***VA Disability Compensation, Pension, and Memorial Affairs Programs*** – Each Congress, the Committee authorizes or reauthorizes VA programs in the jurisdiction of the Subcommittee on Disability Assistance and Memorial Affairs. The Committee will continue to review programs expiring this Congress and determine whether a straightforward reauthorization or an updated reauthorization is necessary. The Committee will also oversee VA's implementation of recently authorized disability compensation, pension, and memorial affairs programs, including by working with VA OIG and GAO to identify and address gaps in such implementation. The Committee will also monitor VA's promulgation of regulatory and sub-regulatory guidance to ensure such guidance comports with Congressional intent. The Committee will work with VA to address barriers to VA's timely and accurate processing of the rising number of claims

resulting from the Sergeant *First Class Heath Robinson Honoring our Promise to Address Comprehensive Toxics Act of 2022* (Pub. L. 117-168) (PACT Act). The PACT Act also authorized a process in which VA may research potential links between military toxic exposures and medical conditions, as well as expand disability compensation benefits for new medical conditions that VA confirms are toxin related. The Committee will work with VA to ensure that this process works as Congress intended. The Committee will also review older programs, including programs that are intended to afford veterans with timely and adequate disability compensation examinations to support their claims for VA benefits.

- ***Claims and Appeals Process*** – The Committee will work with VA to improve its policy guidance, employee training, and quality assurance programs at VBA and the VA Board of Veterans' Appeals (BVA) to ensure that veterans and survivors receive both timely and accurate decisions on their claims for VA benefits. The Committee will also work with VA to modernize policies and processes that impact whether veterans and survivors receive timely and accurate decisions on their claims and appeals for VA benefits. The Committee will work with VA to examine ways that Congress can help further streamline the appeals process at the agency level and the U.S. Court of Appeals for Veterans Claims level to ensure that the claims and appeals process works as efficiently as Congress intended. The Committee will also work with VA to examine ways to protect the due process rights of veterans in receipt of VA compensation and pension benefits and to ensure that veterans and their survivors have representation when navigating the VA claims and appeals process.
- ***Modernizing Technology in VA's Disability Compensation, Pension, and Memorial Affairs Programs*** – Under the PACT Act, VA issued multi-year plans to modernize technology systems that underlie VA's disability compensation, pension, and memorial affairs programs. The Subcommittee on Disability Assistance and Memorial Affairs will collaborate with the Subcommittee on Technology Modernization to oversee VA's modernization efforts. The Committee will work with VA to improve upon VA's modernization plans as appropriate. The Committee will also examine VA's development and implementation of new technology systems, including automation and artificial intelligence technology, to ensure that VA and VA's technology contractors deliver systems that work to efficiently and effectively deliver benefits to veterans and their families. The Committee will also review older technology systems, including those underlying claims and appeals processing, to ensure that older ineffectual systems are either improved or retired.
- ***Cemeteries***– The Committee will continue oversight of the National Cemetery Administration (NCA), Arlington National Cemetery (ANC), and the American Battle Monuments Commission (ABMC). Each agency provides and maintains sacred, hallowed resting places for veterans and fallen servicemembers, and the Committee will work with each respective federal agency to ensure that veterans are afforded dignified burials and that their final resting places are properly maintained. The Committee will oversee VA's construction of new national cemeteries, improvements and expansions of established national cemeteries, and VA's administration of the Veterans Cemetery

Grants Program. The Subcommittee on Disability Assistance and Memorial Affairs has shared jurisdiction with the House Armed Services Committee over Arlington National Cemetery (ANC). The Committee will work with the Department of Defense to ensure full and sustainable operations at ANC, including ANC's Caisson Platoon operations.

- ***Life Insurance*** – On January 5, 2021, President Trump signed Pub. L. 116-315, which required VA to establish a modernized Service-Disabled Veterans Insurance program by January 1, 2023. VA refers to this program as VA Life Insurance (VALife). The Committee will continue overseeing VA's implementation of VALife to ensure that veterans are properly enrolled in the new program and well served. Additionally, the Committee will continue to review whether all of the VA's active life insurance programs meet the needs of servicemembers, veterans, and their families.

Subcommittee on Economic Opportunity

- ***Waste, Fraud, and Abuse programs the subcommittee plans to conduct oversight*** – The Committee is concerned that as VA funding has increased in education and homeless programs, it has become harder for VA to track and prevent waste, fraud, and abuse. The Post-9/11 G.I. Bill has become significantly more expensive for the government because of increased education costs, and more benefits are available to beneficiaries. The Committee will find ways to reduce fraud in the program both by institutions and individuals through oversight by improving how VA tracks these issues and reducing VA from providing incorrect information to individuals and institutions. Additionally, the PACT Act has increased participation in Veteran Readiness for Employment (VR&E). The Committee is aware of individuals who have continuously been in the program for over a decade with VA not reviewing if these individuals should continue to be in the program. Additionally, VR&E is an employment program, yet the Committee believes that VA should focus more on employment rates for participants. The Committee will work with VA to increase checks and balances in VR&E and prevent abuse in the program. The Committee will also review how VA and DOL-VETS conduct oversight and prevent fraud in programs with grantees. Finally, The Committee will ensure that VA and DOL-VETS quickly implement GAO and OIG recommendations to prevent waste and abuse in programs the government has identified as high risk for these activities. ***Please*** include something in this section (e.g., GAO high risk list, VA Vet Centers, GI Bill, VR&E)
- ***Effectiveness of the Transition Assistance Program (TAP)*** – The Committee continues to be concerned about the effectiveness of the TAP program, which is intended to prepare servicemembers for their return to civilian life following active duty. The Departments of Defense (DoD), Veterans Affairs, and Labor (DoL) jointly manage and provide content for the five-day course that focuses on skills needed to obtain gainful employment and provides an understanding of the benefits that are available to them from the VA and DoL. The Committee will conduct oversight hearings to discuss how TAP can be enhanced for transitioning servicemembers and their families. Further, the Committee plans to attend TAP classes and talk to transitioning servicemembers, to review the curriculum that TAP counselors are teaching at the local levels and ensure changes made

to TAP in the *Fiscal Year 2019 National Defense Authorization Act* and the *Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act* are being implemented appropriately. The Committee will also work with the Committee on Armed Services to improve on time servicemember participation in TAP and increase accountability at TAP locations where there is poor TAP performance. Finally, the Committee will work with the Committees on Armed Services and Small Business to address cross-jurisdictional issues as we work to improve the TAP program.

- ***Effectiveness and Outcomes of Education and Training Programs for Returning Veterans*** – The Post-9/11 G.I. Bill has been veterans' most generous education program since the original WWII G.I. Bill. Based on the length of service, the program funds up to full tuition and fees at public institutions of higher learning and about \$28,937 per year at private institutions, as well as provides a monthly living stipend. This stipend is based on the housing allowance paid to servicemembers at the rank of E-5 (with dependents) and the ZIP Code of the institution where the student attends the majority of their classes. The Committee will continue oversight of the implementation of the *Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act*, the *Ensuring the Best Schools for Veterans Act of 2022*, and the *Senator Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act*.

Further, as avenues for learning and training continue to evolve and modernize, the Committee will examine these new programs and how they may fit into the construct and requirements of the Post-9/11 G.I. Bill program.. The Committee will also conduct oversight on Veteran Success on Campus programs, and on the national education call center to ensure G.I. students are receiving the best possible service. In addition, the Committee will examine outcome measures for users of the Post-9/11 G.I. Bill, including graduation rates and job placement data, to ensure the effectiveness of taxpayers' investment in our veterans' education benefits. The Committee will conduct oversight on the role of State Approving Agencies, School Certifying Officials, and education programs to find ways to reduce fraud, streamline receiving benefits, and improve student performance in the Post-9/11 G.I. Bill Program. Finally, the Committee will review VA's role in providing incorrect information and improperly paying benefits to student veterans and schools.

- ***Modernization of G.I. Bill Claims Processing*** – Modernizing the processing of original and supplemental G.I. Bill claims is long overdue. For decades, VA has relied on a myriad of legacy systems to process these claims because previous modernization efforts have failed. The Committee will continue to conduct oversight over the current modernization effort called the Digital G.I. Bill system. An outside contractor is tasked with creating and implementing of this system as a managed service. This system has been delayed by over two years and is \$479 overbudget. The Committee will closely watch the continued rollout of the contractor's new software and work to preserve veterans' ability to have a G.I. Bill claim processed accurately and efficiently. The Committee will conduct oversight on the contractor and work with VA to prevent future timeline delays and budget increases in the modernization effort.

- Veteran Readiness and Employment (VR&E) Program*** – VA’s VR&E program provides education and training benefits for service-connected disabled veterans who face barriers to employment. The program funds all costs related to long and short-term education and training and immediate job placement services. VR&E also manages the Independent Living (IL) program, designed to enable the most severely injured veterans to live as independently as possible, in addition to the Veteran Success on Campus program, which currently stations VR&E staff at institutions of higher learning to assist students with benefits. The Committee continues to be concerned with counselor caseloads, rising job vacancies, and the lack of data related to outcomes for VR&E program participants, as well as the administration of the self-employment track of the VR&E program, which can often result in high costs. The Committee will examine the management and overall effectiveness of the VR&E program for disabled veterans, and VA’s new case management Readiness and Employment System (RES), which plans fully integrate the current CWINRS system into RES by FY 2026.
- Loan Guaranty Service*** – VA’s Loan Guaranty Service provides a loan guaranty benefit to eligible veterans and servicemembers, which enables them to purchase a home at a competitive interest rate, without private mortgage insurance, often without requiring a down payment. This benefit is highly beneficial to veterans, servicemembers, and their families. The Committee plans to conduct oversight on the IT systems in place to process these loans and review how VA uses authorities given to them under the program. The Committee intends to evaluate the impact of high-interest rates and inflation on the veteran homeowner and prospective home buyers and will examine ways to make the product competitive. Finally, the Committee will reform the VA Servicer Purchasing (VASP) Program to ensure VASP is only used for extreme cases of foreclosure, will monitor the impact of recent court cases on veteran buyers, and will find ways to keep the VA home loan competitive in the market. The Loan Guaranty Service also administers grants under the Specially Adapted Housing (SAH) and Special Housing Adaptation (SHA) programs. The Committee will work to find ways to improve this program and ensure VA delivers the best product to veterans.
- Adaptive Sports Program*** – This is a program administered by VA, which provides grants to qualifying organizations that provide adaptive sports activities and opportunities at the local, regional, and national levels, including Paralympic activities, to disabled veterans and servicemembers. This program awarded \$16 million in 2024. The authorization for the Adaptive Sports Program expires on December 31, 2025. The Committee will continue to examine how VA awards grants under this program and the organizations receiving funding, as well as how VA works with local communities and the Paralympic community to promote and enhance adaptive sports programs for disabled veterans and servicemembers.
- Performance of the Jobs for Veterans State Grant Program*** – The Jobs for Veterans State Grant program is administered by VETS and funds the employment of state employees called Disabled Veteran Outreach Program Specialists (DVOP) and Local Veteran Employment Representatives (LVER). This program is dedicated to placing veterans in good-paying jobs. Significant issues surround this program including

inconsistent performance across the states and the lack of evaluation of outcome measures and performance. The Committee will continue to review this program and the performance outcomes of DVOPs and LVERs conduct oversight of the National Veterans' Training Institute (NVTI) and find ways to streamline the program while improving program performance and oversight.

- ***Homeless Veterans*** – The Committee will continue oversight of the services and programs that VA grantees provide to homeless veterans and those veterans who are at risk for homelessness. The Committee will also review VA efforts to permanently house homeless veterans and ensure that those veterans are receiving the wrap-around services they need. The Committee will also ensure that if a veteran leaves permanent housing, VA will work with the veteran to address their needs and rehouse them as quickly as possible. In addition, the Committee will ensure that VA is accurately counting those veterans who have been placed in permanent housing. The Committee will examine the Supportive Services for Veteran Families (SSVF), Housing and Urban Development-Veterans Affairs Supportive Housing (HUD-VASH) programs, and VA's progress toward reducing veteran homelessness and find ways to evaluate the program to improve program outcomes and data collection. The Committee will also review factors leading to veteran homelessness. The Committee will continue to oversee VA's integration efforts to support vulnerable veterans by facilitating access to benefits, care, and services. Finally, the Committee will examine the organizations that are receiving Homeless Veteran Reintegration Program (HVRP) grants, how DOL-VETS is awarding and conducting oversight and program review on HVRP programs, and how HVRP can work better with VA homeless programs.

Subcommittee on Health

- ***Resource Management*** – The Committee is concerned that VA health care including its Veterans Health Administration (VHA) is structured to be susceptible to waste, fraud, and abuse. Since 2015, VA health care has remained on GAO's published "High-Risk List," because of its challenges providing "timely, cost-effective, and quality care." Included in its latest report, from 2023, GAO noted five areas of concern, including "unclear resource needs and allocation priorities." Although, the 2023 report noted some improvement in this area, VA has since failed to manage its resources properly. In FY 2024, VA requested \$12 billion to close a claimed health care budget shortfall expected in FY 2025, only to abruptly revise the request down to \$6.6 billion with little explanation. This situation raises serious questions about VA's budgetary mismanagement as well as VA leaders' honesty regarding funding. The Committee will continue to conduct oversight of what VA leaders knew and neglected to communicate regarding the true size and reasons for the health care shortfall. Further, the Committee will perform necessary oversight to ensure structures and leaders are in place to ensure VA has a firm grasp of its resource needs.
- ***Community Care*** - The Committee remains concerned about inconsistent VA referral practices and veterans' ability to utilize community care when in their best interest. Eligibility for care in the community is determined in part by designated access

standards, as mandated by the *VA Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSION) Act of 2018*. The Committee will closely monitor any adjustments made to access standard definitions. The Committee will conduct oversight of the VA's reorganized Integrated Veteran Care (IVC) office established to supposedly create a seamless system for coordinating VA's direct and community care delivery systems. While the Community Care Networks (CCN) have stabilized and matured, concerns still remain about network adequacy and continuity of care. At the beginning of 2025, VA plans to publish a Request for Proposal (RFP) for the next iteration of the CCN contracts. Oversight of this next generation of CCN continue to be critical to ensure the CCN network is delivered efficiently and effectively, maintaining the integrity of the Veteran Community Care Program (VCCP). While the contract action proceeds, the Committee will continue to monitor veterans' access to care and VA's processes for monitoring the performance of the third-party administrators to build networks of community providers and process payments to these providers. VA's administratively burdensome appointment scheduling process needs reform, and the Committee will continue to conduct oversight to ensure VA improves its administrative efficiency and network adequacy.

In addition, the Committee will monitor VA's efforts to provide veterans greater insight into both accurate VA and community care appointment wait times and availability, so veterans can make informed decisions about where best to seek care and whether to elect telehealth or in-person options. Finally, the Committee will continue to monitor the baseline funding to the Medical Community Care account to ensure funds are being used most appropriately.

Additionally, veterans often face inappropriate billing for emergency care in community settings when VA denies provider claims, resulting in confusion and financial strain. The Committee will work to simplify and modernize these criteria to ensure veterans in crisis receive appropriate care and to facilitate timely and accurate reimbursements to emergency care providers in the community. Efforts will also focus on streamlining VA's billing and reimbursement processes to enhance fiscal responsibility, reduce unnecessary expenditures, and address claims that may be covered by veterans' other health insurance.

- ***Market Assessments and Infrastructure Modernization*** - The Committee will continue oversight of VA's major medical facility construction and leasing program and consider needed actions to address VA's vast and aging capital asset portfolio. The Committee is especially concerned about the continued maintenance requirements of underutilized facilities and the growing need for an expanded footprint in areas of the country experiencing significant veteran population growth. The *MISSION Act* required VA to conduct market assessments, first to inform recommendations for an Asset and Infrastructure Review Commission and subsequently on a continuing basis as a strategic review. As VA continues the process of updating market assessments for the strategic review, the Committee will conduct oversight of these assessments to ensure concerns about the underlying methodology are addressed and appropriate stakeholder involvement occurs. The Committee will explore mechanisms to best incorporate these assessments into and reform the VA Strategic Capital Investment Planning (SCIP)

process to include better systemic metrics that would require realignment or modernization of certain facilities. Furthermore, VA's increased reliance on leasing medical facilities and given the changes made to leasing under the PACT Act, the Committee is eager to examine whether VA is appropriately leveraging their authorities and organizational structures to properly and efficiently lease medical facilities.

- ***Mental Health, Substance Use, and Suicide Prevention*** - The Committee will continue to closely monitor VA's mental health, substance use, and suicide prevention efforts. VA's budget for mental health has increased billions of dollars in the past few years. The Committee will be diligently monitoring VA's newly funded mental health programs, and the effectiveness of existing programs. This oversight effort will also include the expanded eligibility for and operational capacity of the Readjustment Counseling Service. VA has recently been exploring alternative therapies to address mental health conditions and symptoms. The Committee will continue to conduct oversight of VA's clinical trials and alternative therapies. The Committee will closely monitor VA's public-private partnerships for mental health and suicide prevention programs, including the Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program. The Committee will closely monitor and provide recommendations on VA's use of community providers and organizations to deliver mental health, substance use, and suicide prevention services to veterans, when VA cannot provide these services directly and when at-risk veterans are outside VA's reach. Given ongoing issues with veteran suicide data collection, analysis, and reporting from VA, the Committee also will continue to evaluate VA's timeliness and progress on reducing veteran suicide. The Committee also will examine VA's substance use and addiction treatment capacity and programming, with a focus on access and complications of overlapping mental health issues.
- ***Pain and Medication Management, Complementary and Integrative Health*** - The Committee will examine the extent to which VA is appropriately using prescription medications to treat veterans experiencing acute and chronic pain, and the extent to which veterans are offered and able to access complimentary and integrative therapies for pain management. The effective management of pain is a critical issue for the veteran population as data suggests that veterans are a particularly high-risk population for prescription misuse, substance use disorder, accidental overdose, and/or self-inflicted injury. The Committee will scrutinize VA's opioid safety initiative, substance use treatment programs (both at VA and in the community), and access to alternative chronic and acute pain treatments. The Committee will also review VA's policies concerning veteran access to substance use inpatient treatment programs as well as assess the use and efficacy of complementary and integrative health treatments and techniques for veterans with pain or other conditions.
- ***Long-Term Services and Supports*** - The Committee will continue to assess VA's broad array of Long-Term Services and Supports (LTSS) to determine whether veterans have access to the methods of care delivery that best suit their needs. VA has historically relied primarily upon a network of institution-based services consisting of VA Community Living Centers (CLCs), State Veterans Homes (SVHs), and contracted community nursing homes; however, VA must do more to develop a robust network of home and

community-based services (HCBS) to meet the growing demand, and preference, for non-institutional care among its aging veteran population. The Committee will monitor VA's progress in this area and continue supporting authorities in allowing greater access to HCBS. Given the growing numbers of women veterans utilizing VA services, the Committee will review the availability and adequacy of LTSS specific to this population. The Committee will also examine VA's role in monitoring the quality of care and patient safety at SVHs, and VA's role in supporting the cost of care for veteran residents, along with SVH construction, renovation, and maintenance.

- **Caregivers** - Following the VA's notice of proposed rulemaking in December 2024 to amend the Program of Comprehensive Assistance for Family Caregivers the Committee will closely monitor VA's review of public comments, its plan to implement the proposed regulatory changes, and the status of legacy caregivers who remain in limbo as VA attempts to standardize the program. The Committee is also concerned about the focus on this program and the lack of coordination in providing access to other, possibly more appropriate, long-term-care options, and the staffing shortages affecting the program and the ability for caregivers to take respite.
- **Quality Care** - OIG, GAO, and media reports continue to document patient harm incidents within VHA medical facilities. The Committee has also received a large number of Congressional Notifications from VA regarding mistakes made at VA medical centers, many of which have impacted patient care. These have called into question whether current career VHA leadership is carrying out all their credentialing, privileging, and quality management responsibilities. Specifically, the Committee is concerned about whether VHA and its VISNs are doing enough to ensure that their medical facilities are appropriately screening clinicians prior to hire, monitoring providers' clinical competence while they are employed, conducting timely investigations when concerns arise, and reporting serious concerns about provider performance to the National Practitioner Data Bank and state licensing boards, as required by VHA's own policy.
- **Continued Support for Women Veterans** - The over two-million women who have served in the U.S. military comprise the fastest-growing veteran subpopulation within VA. Over 600,000 women veterans are currently enrolled for VA healthcare, and utilization of services continues to expand. In 2020, Congress passed the Deborah Sampson Act, a compilation of comprehensive legislation focusing on women veterans. The Committee must continue its close implementation oversight of this Act as well as new or enhanced services recently made available to women veterans. The Committee's examination of issues impacting women veterans will include, but is not limited to: ensuring a welcoming and inclusive VA, free from sexual harassment and assault; providing equitable access to VA healthcare, such as mammography, gynecology, and obstetrics; research into the impacts of military service on women veterans' physical and mental health; and a greater focus on the special needs of aging women veterans, to include unique health conditions, long-term care, and caregiving.
- **VA Research and University Partnerships** - The Committee will aggressively oversee the totality of VA's medical and prosthetic research program to identify and eliminate

redundancies and ensure the dissemination of best practices and a veteran-centric research focus. VA's Office of Research and Development (ORD) conducts an extensive research program that is tasked with conducting research to advance the healthcare provided by VA and to the nation. VA's Health Services Research and Development Service also operates 19 Centers of Innovation (COIN), built off the work of prior Centers of Excellence, that conduct research on specific issues concerning veteran patients. The Committee will continue to oversee opportunities for innovation, cutting-edge technology, veteran participation in clinical trials, and greater use and support of the Million Veteran Program data for public health research. Use of this data will also require continued oversight to ensure that utilization of veterans' data is protected and secure. The Committee will also aggressively oversee VA's relationships with universities, including their collaboration on research, training programs, and dual appointed employees. VA has academic affiliations with the majority of medical schools and therefore play a large role in training the next generation of medical professionals. It is unclear however whether these training programs are adequately benefiting VA and the veterans they serve through full time employees. The Committee has also heard of a number of dual-appointed employees who prioritize university responsibilities over providing care for veterans. The Committee intends to ensure that VA's research and University Partnerships are solidly in the best interest of veterans.

Subcommittee on Oversight and Investigations

- ***Accountable Workforce*** - Holding more than 400,000 staff accountable has proven difficult for VA. Beginning in 2018, rulings by courts and the Merit Systems Protection Board have limited the Secretary's authority to efficiently hold employees accountable for poor performance or misconduct under 38 U.S. Code § 714. Due to these decisions, VA ceased using the authorities in 38 U.S. Code § 714 in April 2023. Similarly, due to fears of litigation, VA ceased using authorities Congress provided to the VA Secretary in 38 U.S.C. § 713 to efficiently hold senior executives accountable for poor performance or misconduct. The Committee will conduct oversight of VA's disciplinary processes to determine whether poor performing employees and employees who engage in misconduct are appropriately and timely held accountable. The Committee will also determine where laws can be reinforced, and Congressional intent clarified, to manifest a responsible workforce dedicated to VA's mission.
- ***VISN Structure and Functions*** – Veteran Integrated Service Networks (VISN) play a key role in VA Medical Center (VAMC) human resources, budgets, and staffing. All of which the Committee identified as problem areas in the 118th Congress. Through oversight trips and talking with whistleblowers, the Committee found the current VISN structure likely leads to inefficiencies and mismanagement. The Committee will review this structure to determine whether changes are needed to increase VISN awareness of VAMC operations, ensure VISN officials have clear job responsibilities, and ensure VISNs are appropriately handling and allocating resources.
- ***Human Resources*** - VA has centralized its human resources functions at the Central Office and VISN levels. In an effort to create uniformity, VA has hamstrung local VA

directors trying to fill vacancies, slowed down the onboarding process significantly, and increased staff frustration with human resources. The Committee will closely examine VA's staffing, recruitment, and retention programs and take action to correct deficiencies within VA's overly bureaucratic and lengthy hiring processes that hinder VA's ability to efficiently and effectively recruit and retain high-quality employees to treat veteran patients. The Committee will also examine whether VA is appropriately governing its personnel suitability program to ensure its employees can be entrusted with sensitive information and resources and are suitable to care for the nation's veterans.

- ***Budget and Waste*** - VA funding has doubled over the last decade, and staffing has increased by over 40 percent. The Committee will conduct oversight of waste, particularly in contracts, redundancies, and offices that produce little to no value, as part of a broader assessment of whether the VA's rate of growth has exceeded veteran demand, whether new initiatives merit investment, and how to implement a framework for reducing inefficiencies in underperforming areas. VA's annual contract spending has reached more than \$38 billion, and there are nearly as many VA support contractors as federal employees in many offices. The Committee, in concert with budget analysis and bureaucratic reforms, will aggressively investigate the reasons for the proliferation of contractors, the effectiveness of the massive contractor workforce, and whether the value gained matches the dollars spent. The Committee will also review how VA is managing its office space it no longer fully uses due to increased employee telework.
- ***VA Supply Chain*** - During the early days of the COVID-19 pandemic, supply chains around the globe failed. Today, VA's medical supply chain is operational, but VA's efforts to create a more resilient supply chain have been unsuccessful. The Committee will build on its work in the 118th Congress by continuing to conduct oversight of the Executive Branch's effort to bring medical supply inventory for crisis response under the Department of Health and Human Services and VA's role in that effort. The Committee will also continue to ensure VA is following existing statutory requirements for medical supplies made in America including making sure VA is appropriately judicious in its *Buy American Act* and *Make PPE in America Act* waiver processes.

Subcommittee on Technology Modernization

- ***Information Technology (IT) Acquisitions and Management*** – The Committee is concerned about VA's persistent IT management failures. Since 2019, the Government Accountability Office has placed VA acquisition management on its "High Risk List" as an area of VA that is particularly susceptible to waste, fraud, and abuse. The Committee is particularly concerned with VA's IT acquisition and governance with numerous ongoing enterprise IT projects that are overbudget, under-delivering, or have missed their implementation timeline. Committee oversight will focus on VA's requirements development process for IT acquisition and holding the Department, as well as contractors, accountable for appropriately managing the acquisition and development of VA IT systems.

- ***Enterprise Technology Modernization Programs*** – The Committee will continue overseeing the effectiveness of VA’s major programs and projects to modernize technology and business operations.
 - Electronic Health Record Modernization – VA’s Electronic Health Record Modernization program has been attempting to implement the Cerner Millennium electronic health record system since 2018. EHRM’s cost estimate for implementation has increased from \$16.1 billion over 10 years to \$38.9 billion over 13 years. The lifecycle cost exceeds \$50 billion over 25 years. The Committee will continue to engage with VA and Oracle Cerner on the status of individual technical improvements. The Committee’s oversight will focus on assessing how VA is addressing the major system flaws that they have committed to fixing during the program’s pause and assessing whether patient volumes at the six sites that are currently using the Cerner system have returned to pre-Cerner levels. The Committee will conduct in-person oversight visits at VA medical centers to assess their preparation for the transition to Cerner as necessary based on VA’s implementation schedule.
 - Financial Management Business Transformation – VA has been replacing its legacy financial system with the CGI Momentum system, branded as iFAMS, for more than four years. Despite spending more than \$1 billion, the system has only been implemented in the National Cemetery Administration, small parts of the Veterans Benefits Administration, and the VA Central Office. The project’s delays stem from dependencies on other modernization initiatives, unsuccessful attempts to modify and improve inferior modules within the system, and the unwillingness of many organizations within VA to cooperate and implement it. In addition to significant operational and budgetary hurdles, FMBT’s primary contract expires in 2025 further complicating the project’s future. The Committee supports VA’s goal of improving its financial management software given the repeated findings of material weaknesses and significant deficiencies in VA’s financial statement audit that are related to VA’s legacy financial management software. The Committee’s oversight will focus on re-examining the system’s scope and schedule and VA’s prospects for addressing its weaknesses and implementing iFAMS in VHA.
 - Digital G.I. Bill – The Digital G.I. Bill (DGIB) project has completed six of nine planned software releases, automated processing of the majority of claims, and retired several legacy systems. The DGIB project’s original cost estimate has nearly doubled from an initial estimate of between \$1.29 billion and \$1.88 billion to the most recent estimate of \$2.28 billion. The Committee’s oversight will focus on assessing the success of future releases and avoiding additional cost overruns or timeline delays. The Committee’s oversight will also include engaging VA and the contractor to hold them accountable for the project’s success.

- Supply Chain Management Modernization – In 2024, VA abandoned the Supply Chain Modernization (SCM) project to unify the medical and nonmedical supply chains across VA. This was VA’s second attempt to modernize its supply chain software, following the Department’s failed attempt to implement the Department of Defense’s Defense Medical Logistics Standards Support system. VA abandoned the SCM project after Committee oversight identified the projects overly broad objectives, unclear budgeting, and unresolved technical issues. The Committee considered legislation in the 118th Congress authorizing VA to pursue a narrower, targeted supply chain system for its medical center supply chain. The Committee believes that attempting to unify all VA’s medical and non-medical supply chains in one large supply chain software acquisition is overly ambitious and inconsistent with procurement best practices. The Committee’s oversight will focus on assessing VA’s future plans to modernize its supply chain software and ensuring that they are appropriately scaled based on an accurate understanding of the Department’s requirements.
- Veterans Benefits Management System – VA and its contractor began building the Veterans Benefits Management System (VBMS) in 2013 as a custom application that originally computerized the intake and flow of paper benefit claim documents and evolved into a claims management platform. After years of employee complaints regarding the system’s slowness and downtime, VA adopted a new strategy of “decomposing the monolithic application into services” and “containerizing” its application on more modern software platforms in the cloud. The Committee’s oversight will focus on VA’s ongoing efforts to containerize different services within VBMS and their modernization efforts regarding work queue, correspondence, and exam modernization.
- Human Capital Modernization – In 2024, VA decided not to move forward with a nearly \$1 billion project to replace its human capital management software. VA appears to favor a strategy of “modernizing-in-place”, which involves making improvements to the existing system on an incremental basis. The Committee’s oversight will focus on gathering more information on VA’s new approach and assessing the modernization strategies that the Department employs.
- **Cybersecurity** – VA struggles to clear multiple repeat findings in the annual Federal Information Security Modernization Act audit, the annual financial statement audit, and OIG inspections. In addition, an independent cybersecurity assessment of VA was conducted in 2023 per the *Strengthening VA Cybersecurity Act of 2022*. The assessment revealed a number of serious weaknesses in the five high-impact systems that were reviewed and reaffirmed many of the general findings that were reported by OIG. OIT’s cybersecurity approach is based on a “zero trust” model that assumes no user, device, or component should be trusted and emphasizes the need to verify anything and everything attempting to access the network. OIT has told the Committee that they apply zero trust cybersecurity principles through a risk-

based approach where they prioritize mitigating vulnerabilities based on their risk level. VA's cybersecurity budget was one of the few aspects of OIT that received a significant plus up in the fiscal year 2025 budget request, indicating the high priority that VA has placed on improving its cybersecurity posture. The Committee's oversight will focus on making cybersecurity practices more consistent across VA, identifying new vulnerabilities caused by digitizing formerly manual processes, VA's adjudication of vulnerabilities identified by OIG and the 2023 independent cybersecurity assessment, and keeping unapproved IT and medical devices off VA networks. The Committee will also continue to examine VA's inability to identify what is on their networks at facilities and push to ensure that shadow IT is identified, and if possible, mitigated with enterprise solutions.

- ***Community Care Scheduling*** – VA is currently developing software tools allowing VA staff access to providers' scheduling grids and schedule veterans' health care appointments directly with community care providers. The External Provider Scheduling (EPS) project is in its early stages and has only been implemented in a handful of medical facilities. The early results indicate that EPS has the potential to be a significant time-saver for VA staff, allowing them to directly schedule community care appointments at a much higher rate than the legacy process. Scheduling more community care appointments in a day will significantly reduce the wait time for appointment scheduling. The Committee is concerned that EPS may be facing bureaucratic hurdles despite the positive initial results. The Committee will closely monitor VA's management of the EPS program, focusing on its implementation and at VHA medical centers and adoption by community care providers.
- ***Internal Scheduling*** – VA has three early-stage projects to modernize and improve scheduling within VHA facilities. These will take several years to finish and are currently not integrated with each other or the EPS project. VA plans to introduce software updates and additional features to these systems over the next two years. The Committee will monitor the progress of these projects and VA's long-term vision for integrating these projects.
- ***Data Management and Privacy*** – Veterans' data must be protected from loss, theft, and monetization. The Committee's oversight will examine the agreements and safeguards VA has in place with its technology vendors and partners, those vendors and partners' practices, and VA's track record of monitoring their activities and enforcing the safeguards. The Committee will also oversee errors by VA employees that expose veterans' protected data to loss, theft, or monetization.
- ***Artificial Intelligence Adoption*** – VA is rapidly moving towards integrating Large Language Models (LLM) and other AI technologies into various health care and benefits delivery services. The second order and third order effects of AI adoption include serious ethical and data privacy concerns as veteran data becomes a critical tool for developing and training LLMs. The Committee's first priority regarding AI will be protecting veterans' data privacy while simultaneously ensuring that it has an organized and consistent AI adoption strategy.

- ***Information Technology and Office of Information & Technology*** – The Office of Information & Technology (OIT) still struggles to meet the Department’s IT needs. As the Department’s IT footprint continues to grow, OIT officials have repeatedly testified that they lack the skilled workforce necessary to keep pace with their software patching, cybersecurity, and project management responsibilities. This is in spite of the Special Salary Rate (SSR) that OIT implemented in 2023 to improve recruitment and retention. Nonetheless, OIT has made incremental progress in addressing problems with small-scale IT systems, reconstructing or shelving misguided large IT projects, migrating applications to the cloud, and improving system uptime of critical systems and services. The Committee’s oversight will focus on ensuring that OIT is managing and monitoring critical systems, properly managing IT contracts, and spending its budget wisely to balance competing development, staffing, maintenance, and cybersecurity priorities.

Mandatory Spending

In accordance with clause 2(d)(2)(E) of Rule X, the Committee will work to limit unintended consequences of the Cost of War Toxic Exposures Fund, section 805 of P.L. 117-168, the *Honoring our PACT Act of 2022*. According to the Congressional Budget Office, the Toxic Exposures Fund now encompasses programs or activities funded by the following accounts: Medical Community Care, Medical Support and Compliance, Medical Services, Medical and Prosthetic Research, Veterans Electronic Health Care Record, General Operating Expenses (VBA), General Administration, Information Technology, and Board of Veterans’ Appeals. Therefore, portions of these accounts which had been entirely discretionary may now become partially mandatory, and any legislation creating or modifying programs or activities funded by these accounts will receive a mandatory score. The Committee will continue to oversee the use of the Fund by VA to ensure that it supports PACT Act implementation, and the care of veterans exposed to toxic substances. The Committee will also continue to engage with the Budget and Appropriations Committees to assess the long-term impacts of the Fund and resolve any impediments to the Committee’s ability to carry out its legislative responsibilities.

The Committee intends to evaluate VA programs to ensure that the agency and programs are operating cost-effectively and efficiently while fulfilling their statutory mission. This review will ensure compliance with congressional intent, assess program performance, investigate waste, fraud, and abuse, and gather information to support future policymaking.