

Statement for the Record

of

John Vick Executive Director, Concerned Veterans for America

on

H.R. 472, The Restore VA Accountability Act of 2025

and

H.R. 740, The Veterans' ACCESS Act of 2025

before the

House Veterans Affairs Committee

Legislative Hearing

February 24, 2025

Thank you to Chairman Bost, Ranking Member Takano, and the Members of the Committee for the opportunity to submit this statement on behalf of Concerned Veterans for America (CVA). CVA is a grassroots network of thousands of veterans, family members, and patriotic citizens that advocates for and defends policies to preserve freedom and prosperity for all Americans. Our organization builds engaged communities of veterans, elevating their unique experiences and perspectives to help improve American lives.

CVA is commenting in support of two of the bills under consideration today: H.R. 472, The Restore VA Accountability Act of 2025, and H.R. 740, The Veterans' ACCESS Act of 2025. Both bills address long-standing CVA priorities in empowering veterans to be in greater control over their own health care. Passage of both will help ensure that the VA upholds the previously established will of Congress regarding both VA personnel accountability and veterans' treatment choices.

CVA's History in Veterans' Health Care Reform

Concerned Veterans for America has a thirteen-year track record as a leading advocacy organization for empowering veterans to seek the care that best meets their needs. CVA helped elevate the voices of VA whistleblowers who revealed that veterans had died while waiting for care on secret wait lists during the Phoenix VA scandal of 2014. In the aftermath of Phoenix, CVA also supported early reform efforts like the Veterans Access, Choice, and Accountability Act of 2014, which created the first options for veterans to seek care outside the VA. CVA also helped secure passage of the 2017 VA Accountability and Whistleblower Protection Act to change the perverse incentives that created the Phoenix scandal to begin with.

These early efforts culminated in the VA MISSION Act of 2018, which CVA helped shape and support in Congress. The legislation passed with overwhelming bipartisan support, incorporating many of the recommendations of CVA's 2015 Fixing Veterans' Health Care Task Force—namely by creating the Veterans Community Care Program (VCCP). By consolidating existing choice programs into an easier-to-use VCCP and simplifying access standards, the MISSION Act has been a game-changer for millions of veterans' access to timely and quality care.

Over the past four years, CVA has fought for additional congressional oversight as the Department of Veterans Affairs prioritized its bureaucratic interests over the well-being of veterans it exists to serve. Veterans have suffered because the VA has not properly followed the requirements of the MISSION Act, particularly when it comes to ensuring veterans have access to community care when eligible. This status quo has hurt veterans and must change under the new administration. Fortunately, the Restore VA Accountability Act and the Veterans ACCESS Act offer important opportunities for Congress to course correct.

H.R. 472, The Restore VA Accountability Act of 2025

In their responsibility to care for our veterans, VA employees hold an important public trust. In any organization, personnel incentives can make or break a culture. VA employees who perform their jobs poorly or engage in misconduct need to face rapid accountability to ensure our veterans get the quality care that they have earned and that colleagues performing their roles effectively are not disillusioned.

H.R. 472 would restore previous authorities that the VA Secretary held to discipline, suspend, demote, or terminate subpar VA employees, addressing prior textual issues that led to the law being undermined in a variety of court and administrative decisions. The Restore VA Accountability Act of 2025, sponsored by

¹ "Fixing Veterans Health Care: A Bipartisan Policy Task Force," Concerned Veterans for America, 2015. https://cv4a.org/wp-content/uploads/2016/01/Fixing-Veterans-Healthcare.pdf

Chairman Bost, would reinstate expedited disciplinary procedures and require a greater burden of proof for personnel decisions to be overturned. While the bill would still protect employee's due process rights, it would ensure frivolous appeals do not delay otherwise warranted personnel decisions unless an appeal is supported by substantial evidence. The bill would also eliminate the requirement to institute a performance improvement plan (PIP) prior to disciplinary action being taken. At its worst, the PIP process can allow employees who clearly need to be disciplined to linger prior to formal action being possible.

Finally, the Restore VA Accountability Act more evenly applies accountability standards across the VA workforce. It ensures that expedited disciplinary processes can be employed on Senior Executives, supervisors, and employees alike. The bill requires that Senior Executives, whose greater policymaking authority warrants greater scrutiny, appeal any decisions about them directly to the Secretary rather than through the Merit Systems Protection Board. The need for the Secretary to provide greater accountability for his senior deputies was clear last summer, when the former VA Undersecretary for Health, Shereef Elnahal, improperly awarded \$11 million in bonuses to Senior Executives from funds meant to support PACT Act implementation yet kept his job.²

H.R. 740, The Veterans' ACCESS Act of 2025

The Department of Veterans Affairs has systematically failed to faithfully carry out the VA MISSION Act, particularly during the Biden administration. Passing the Veterans ACCESS Act, sponsored by Chairman Bost, is essential to right this wrong. Evidence obtained via Freedom of Information Act (FOIA) requests reveals that the VA directly undermined the MISSION Act through guidance that contradicted the law's implementing regulations covering community care access.³

VA training documents recommended that schedulers not inform veterans of their community care eligibility unless veterans directly asked for it.⁴ On top of this, VA scheduling scripts instructed employees to actively try to dissuade veterans from choosing community care instead of VHA facilities.⁵ Veterans who knew about and wanted community care nevertheless faced a variety of obstacles for access.

FOIA-obtained VA training documents also revealed that officials added an additional approval layer for community care requests. Despite appearing nowhere in the MISSION Act or its implementing regulations, the VA created a new standard for determining whether a veteran's community care request was "clinically appropriate," which in practice functioned as an additional opportunity to improperly deny referrals despite no legal basis for the VA to do so.⁶

Lastly, FOIA evidence confirms that, in contravention of MISSION Act implementing regulations, the VA uses obsolete "patient indicated date" (PID) wait time criteria—a measurement dating from the earlier 2014 Choice Act.⁷ In practice, PID measurements were usually set by a scheduler sometime after the

² Linda Hersey, "House lawmakers urge VA undersecretary for health to resign amid bonus scandal," *Stars and Stripes*, June 4, 2024. https://luttrell.house.gov/media/in-the-news/house-lawmakers-urge-va-undersecretary-health-resign-amid-bonus-scandal

³ "Records confirm VA's use of inaccurate wait time numbers," *Americans for Prosperity Foundation*, October 1, 2021. https://americansforprosperity.org/blog/records-confirm-va-inaccurate-wait-time-numbers/

⁴ "Unless the patient requests to review their other eligibility, no additional [community care] eligibility is required to be reviewed other than wait time." See: "Standard MISSION Act Guidance: Patient Eligibility and Scheduling Reference Sheet," *Department of Veterans Affairs*, October 28, 2020, pg. 2. https://americansforprosperity.org/wp-content/uploads/2021/09/03-Mission-Act-Guidance-Oct.-2020.pdf

⁵ "Referral Coordination Initiative Implementation Guidebook," Veterans Health Administration, *Department of Veterans Affairs*, March 10, 2021. https://americansforprosperity.org/wp-content/uploads/2021/09/Referral-Coordination-Initiative-Guidebook.pdf#page=62

⁶ VA training flowcharts obtained via FOIA: https://americansforprosperity.org/wp-content/uploads/2022/01/21-06268-F_Responsive_Records_1-Part-1.pdf#page=347

⁷ See examples of VA training materials using PID wait time measurements in: ""More Evidence the VA is Improperly Delaying or Denying Community Care to Eligible Veterans," January 28, 2022, Americans for Prosperity Foundation, https://americansforprosperity.org/blog/vadenying-delaying-care/

veterans' initial appointment request and could dramatically reduce the appearance of wait times for reporting and community care eligibility purposes. This broken wait time system—eerily reminiscent of the conditions that created the Phoenix VA scandal—was criticized by the Government Accountability Office for being too subjective and prone to manipulation.⁸ In practice, the VA has used these incorrect, outdated wait time measurements to artificially deny thousands of veterans access to the community care options they should be legally entitled to.⁹

H.R. 740 addresses these ongoing MISSION Act implementation issues by ensuring that less of the law is up to the VA's administrative whims to carry out. The Veterans' ACCESS Act codifies community care access standards into statute, while still allowing flexibility for Congress to consider periodic recommendations for updating. The bill also requires the VA to notify veterans of their eligibility for community care, and mandates that wait times are calculated from the veteran's date of request for an appointment. Finally, the legislation creates a pilot program allowing veterans to seek mental health care and substance use treatment—for which timely access is paramount—in the community without VA preapproval. This "full choice" pilot would mirror existing practices for urgent care treatment as well as community care referrals in certain TRICARE plans such as TRICARE Select and TRICARE for Life.

Conclusion

Lawmakers have an important opportunity to reassert the will of Congress over a Department of Veterans Affairs that has been far too unaccountable for years. The Restore VA Accountability Act would give the VA Secretary the tools needed to hold poorly performing VA employees to account while respecting due process and cutting down on frivolous delays that undermine veterans' care. The Veterans' ACCESS Act would hold the VA accountable for honoring Congress' promise to offer community care choices to veterans. By codifying the VA MISSION Act's community care access standards, ensuring veterans are aware of their eligibility, and offering crucial additional choices for veterans in need of mental health and substance use treatment, the legislation would reduce opportunities for the VA to misinterpret the law and compel the agency to prioritize veterans' health care outcomes over their bureaucracy. For these reasons, I urge you to support H.R. 472, The Restore VA Accountability Act of 2025, and H.R. 740, The Veterans' ACCESS Act of 2025.

Sincerely,

John Vick

Executive Director

Concerned Veterans for America

⁸ Comptroller General Gene Dodaro to Secretary Denis McDonough, *U.S. Government Accountability Office*, May 10, 2021. https://www.gao.gov/assets/720/714332.pdf

⁹ "Delayed and Denied Care: Transparency and Oversight Needed for VA Wait Times," *Concerned Veterans for America*, February 2022. https://cv4a.org/wp-content/uploads/2022/02/22_298900_VAPolicyBriefingHandout.pdf