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**U.S. House of Representatives**

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ONE HUNDRED NINETEENTH CONGRESS

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February 2, 2026

The Honorable Douglas A. Collins  
Secretary  
U.S. Department of Veterans Affairs  
810 Vermont Avenue, NW  
Washington, DC 20420

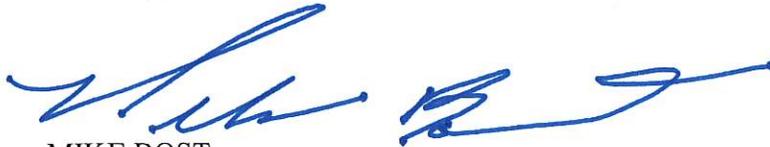
Dear Mr. Secretary:

Thank you for providing witnesses for the House Committee on Veterans' Affairs Oversight hearing titled, "Community Care Network Next Generation: One Trillion Dollars of Oversight" that was held on January 22, 2026.

As a follow-up to the hearing, Representative Abe Hamadeh has requested Mr. Richard Toppings, Assistant Secretary for Management and Chief Financial Officer, respond to the attached questions for the record.

The Committee requests a written response no later than February 26, 2026, so they may be made part of the record. If you have any questions, please let my staff know.

Sincerely,



MIKE BOST  
Chairman  
House Committee on Veterans' Affairs

Cc: The Honorable Mark Takano, Ranking Member, House Committee on Veterans' Affairs

Enclosures: Questions for the Record submitted by Rep. Abe Hamadeh

**Committee on House Veterans Affairs**  
Full Committee Oversight Hearing  
January 22<sup>nd</sup>, 2026

Questions for the Record for "Veterans Community Care Network Request for Proposals"

**Submitted by Rep. HAMADEH**

**Questions for Mr. Richard F. Topping (Assistant Secretary for Management and Chief Financial Officer, U.S. Department of Veterans Affairs) and Ms. Alicia Skolrood (Executive Director, Integrated External Networks, Office of Integrated Veteran Care, Veterans Health Administration):**

1. Please explain the clinical and operational difference, if any, between physical therapy covered under Medicare and medical massage therapy (MMT) provided by qualified professional massage therapists covered under VACCN.<sup>1</sup>
2. <sup>2</sup> Is MMT provided by qualified professional massage therapists, as defined by VA (and the SEOC), a covered benefit under Medicare?
3. Please explain whether Medicare covers and/or pays for MMT by qualified professional massage therapists under CPT 97124 and post-therapy patient education under CPT 98960.
4. Please explain whether VA covers MMT by qualified professional massage therapists under CPT 97124 and post-therapy patient education under CPT 98960. Please explain how the VA and Third-Party Administrators (TPAs) determine payment amounts for providers of MMT, including by citing specific applicable statutes, regulations, or sub regulatory materials.
  - a. Please explain, including by referencing specific applicable statutes, regulations, or sub-regulatory materials, why Medicare Multiple Procedure Payment Reduction (MPPR) rules should apply to the VACCN MMT program when Medicare does not cover MMT by qualified professional massage therapists.
  - b. Please explain why in 2024, VA added patient education CPT 98960 to its revised SEOC and code list, and published a specific payment rate under the VA fee schedule, if it believed that patient education was not separately payable.
  - c. Please explain how the VA and the TPAs determine payment amounts for MMT providers for treatment at a provider's office, provided at a veteran's home, and provided at a VAMC. Explain the rationale for any differences, or the rationale for paying the same rate if there are no differences.
5. Please identify and explain what notices, if any, the VA gave to providers or the TPAs that it intended to, or would, apply Medicare MPPR rules to MMT services and Medicare bundling rules

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<sup>1</sup> provided by qualified professional massage therapists

to education services. If there was notification in writing, to either providers or the TPAs, please provide copies of the relevant documents, including if by email.

6. Please provide data showing the number of qualified professional massage therapists (MTs) by state.
  - a. When providing the data, provide the number of MTs that have left the program since June 1, 2025 and the number of MTs that have been added to the program since June 1, 2025 to determine the net number of MTs by state and by TPA to the present.
  - b. When providing the data, ensure MT numbers are distinct from any other providers under CIH[NW1.1], Whole Health, Pain Management, or any other category into which MTs are placed.
7. What data does VA have on outcomes for MMT relative to opioids, other pain medications, ablations, spinal blocks, and other treatments?
8. One of the flexibilities granted during COVID was allowing the third-party administrators to schedule appointments directly with the veteran, upon them receiving a referral to community care.
9. There has been significant discussion regarding medical massage therapists (MMT) reimbursement rates. For example, many community massage therapists have advocated for the VA to maintain or increase payment rates, arguing that current Medicare-based fee schedules are too low for private practices to sustain.
  - What efforts has the VA taken to resolve a disconnect between VA policy and VA payment regarding MMT provided under the Veterans Community Care Network (VCCN) program?
  - Specifically, could you explain the application of Medicare reimbursement reduction policies, also known as the MPPR?
10. Under President Biden, President Trump's 2018 bipartisan MISSION Act was routinely violated. Mr. Chair, at this time I ask Unanimous Consent to insert [QUOTE] The Most Alarming Aspects of VA Document Review Staff Memo into the hearing record. [Chair: Without Objection]
  - Given the deliberate undermining of the MISSION Act during the Biden administration, how has the Administration overcome these obstacles given the mess you inherited?