

Submission from Concerned Veteran (3/6/25)

To Whom it may concern I am writing to express my deep concern regarding the Department of Veterans Affairs' decision to lay off tens of thousands of VA workers and the direct impact this will have on the quality of care veterans receive. As a disabled veteran who served 21 years on active duty in the United States Air Force, including five deployments—one of which was to Afghanistan—I have personally relied on the VA for my healthcare. I receive the majority of my care through VA facilities in Shiloh, Illinois, and St. Louis, MO and I am already seeing the consequences of these staffing cuts.

The VA healthcare system is a lifeline for millions of veterans, many of whom, like myself, depend on it for essential medical treatment. Reducing the workforce in such large numbers will inevitably lead to longer wait times, reduced access to specialized care, and an overall decline in the quality of services provided to those who have sacrificed so much for this nation. Veterans should not have to struggle to receive the care they have earned. I urge you to take immediate action to stop these layoffs and ensure that the VA remains fully staffed to meet the needs of those who served. Our country made a promise to its veterans, and we must uphold that promise by protecting and improving the healthcare system we rely on. Thank you for your time and attention to this critical issue. I look forward to your response and to seeing what steps you will take to address this matter.

Sincerely,
[*respondent*]

Submission from Concerned Veteran (3/8/25)

Ranking Member and colleagues, I am very concerned about the proposal to reduce manning at the VA. I have 3 main concerns.

1. The Secretary has said that a portion of the savings will be used to help Veterans. Where is the rest of the savings going? Is the plan to cut millions from Veterans' care and benefits so that savings can be realized in other programs, with a small percentage reinvested in the VA? I use the CBOC in Washington PA. I don't see how that clinic will stay open if the VA loses 17% of its workforce.
2. The 2019 staffing numbers seems completely arbitrary and not based on any analysis. The VBA completed 1 million claims faster than ever - reductions without analysis will not be effective in making the VA more efficient.
3. Centralized decisions - As we have seen with the GSA terminating thousands of leases and then realizing the need to reinstate some, as well as the VA terminating hundreds of contracts then reinstating them because no analysis had been done, it seems like centralized decisions from Washington will have 2nd and 3rd order effects that were not planned for or analyzed when these cuts are made. The original decision that affected the translation contract would have made the processing of claims for thousands of overseas veterans who receive care on the economy impossible. Thankfully it was not cancelled. Healthcare isn't something you get a do-over with like you can GSA leases - you can't come back 3 months after a tumor was missed and tell the Veteran, "Our apologies, we hired more radiologists back on staff now. Sorry about the metastasis."

It is also confusing why VA employees were exempted from the Delayed Resignation Program if the plan was to fire them via reduction in force at a later time. The US government already hurt Vietnam Veterans when they came back, and only started to make amends after Nehmer etc. I urge you to exercise your oversight and power of the purse and make sure that Veterans' benefits and healthcare are not adversely affected by a premature decision to cut an arbitrary number of employees from the VA. NB, I'm a 20 year Army Veteran with 5 deployments, including Syria, Iraq, and Afghanistan.

Submission from Concerned Veteran (3/14/25)

I am a female, United States Navy Veteran concerned with the indiscriminate cuts the current administration is yielding against our VA system. In 1993 I entered a contractual agreement with the American people: I will, at whatever cost, protect our constitutional rights against all enemies foreign and domestic and in return the American citizens will provide any needed care, educational benefits and home loan assistance I may require. Both parties understood the VA would uphold the American people's contractual responsibility for my lifetime no matter the cost nor administration. The unsubstantiated personnel cuts in the VA puts the VA, thereby the American people, in danger of breach of contract. The Veterans Administration requires adequate personnel to assist the 18.1 million Veterans who have proudly and honorably served this country. Failure for the US government to fulfill the American people's promise to our Veterans will be shameful and detrimental. The VA needs to fight as diligently as my 17 year-old self was willing to in order to protect the US Veterans.

Submission from Concerned Veteran (3/15/25)

First, I would like to thank you for representing veterans everywhere. I am currently serving in my 21st year in active duty in the USAF and have directly deployed in support of 6 named conflicts. I am 3rd generation Air Force with combined 75 years of service to this country.

My call to action is twofold, my wife has dedicated the last 11 months serving veterans at the local VA hospital just to be illegally terminated. Why is a department who has historically marketed to preferred hiring of military spouses lying on termination documentation when she has had nothing but outstanding reviews from her supervision? All while being hired under executive order 13832, why is Tracey Therit and secretary Doug Collins not being investigated for falsifying Government documentation? Secondly, I call to action the investigation into the scrubbing of Arlington National cemetery's websites. There is grave concern that history is being erased against Black, Hispanic, and Women veterans via the website. If a sub group is being erased, shouldn't all subgroups be eliminated to prevent bigotry.

Submission from Concerned VA Former Employee (3/17/25)

Dear Members of the Senate House Committee on Veterans Affairs, I hope this email finds you well. My name is [REDACTED], and I am writing to express my concerns regarding the planned layoff of 80000 VA employees and how it will affect our veterans' care.

I hope my email is not perceived negatively because I agree that change is needed and costs need to be controlled. I am a registered nurse with 37 years of experience. I worked in the private sector for 30 years before accepting a position at the Iowa City, IA VA in 2016 and transferred to the Harry S Truman VA Columbia, MO in 2017. I met the minimum requirement to retire 01/25 which I did retire. I didn't retire due to the issues presently occurring but the inability to make changes that were in the best interest of our veterans.

I can only speak to what I experienced and witnessed at the Harry S Truman VA. When I transferred to the HSTVA Columbia, MO my position was in the post-anesthesia care unit (PACU) where I possess a strong background in perioperative nursing. I was surprised by the staffing levels and even more surprised that my co-workers thought they were understaffed. I spent a large portion of my career working at two academic hospitals and by those standards, the PACU was overstaffed I can't stress enough that if your committee would consider the following ideas that would cut costs and not cut as many positions. !

1. Use certified medical assistants in all of the clinics. Certified medical assistants can do vital signs, review medications, and request medical records. Currently, HSTVA uses LPN & RNs to do this
2. Use the registered nurses to educate patients to include medications & preparation for surgery etc
3. Is it necessary to pay an RN an associate chief of nursing wages to (\$160000 yr) to supervise sterile processing and redesign (Sigma belt). I was with the HSTVA for almost 7 years and I would see an announcement about someone receiving a black belt for a project that was not implemented I was detailed to assist with establishing a pre-op clinic @ HSTVA in 2021. The reason for the need for a pre-op clinic was due to the cancellation of surgical cases and mortality & morbidity rates. An SOP was written and agreed upon but was never truly implemented.

I have examples of the issues please contact me. I'm asking on behalf of our Veterans that if you would redesign the clinical side of the VA hospitals would be a big cost savings.

Submission from Concerned Individual (3/17/25)

Good morning, I am very concerned about the impact on veteran healthcare and benefits with changes/firings made by DOGE since January and future firings. The Secretary of the VA has announced that up to 80,000 workers may be laid off. He also states this will NOT negatively impact healthcare and services for veterans.

However, he does not explain how this will be possible. How can there be fewer workers and services not be impacted, unless we are to believe all 80,000 of these workers did nothing? The veteran who submits a service-related disability claim needs workers to examine the claim and process it through the system. If there are fewer of these workers, how does this impact the timeline? If he says we will only layoff people like clerks and not doctors, who but the doctors now have to do the clerical work the clerks used to do, thus taking time away from their clinical duties?

Why is this huge change happening BEFORE making plans about how to improve processes? These healthcare services are too important to mess around with and hope for the best or "break it and fix later." I would like someone with power (our elected officials) to demand answers about how services will be preserved IN DETAIL. Veterans deserve answers.

With respect,
[*respondent*]