

Below is the article referenced by Representative Dodson in this morning's meeting of the Veterans and Military Committee; and also a note from Bill Turner concerning his follow-up meeting.

Note from Bill Turner.

The VA Heartland Network (Veterans Integrated Systems Network 15 (VISN 15) ) director came to our office and briefed me on the Asset and Infrastructure Review (AIR) recommendations that were published yesterday afternoon. He provided a laydown on the proposed changes to our three VA Medical Centers as well as other recommended changes for Community Based Outpatient Clinics and smaller centers around our state. A couple of the major changes will include converting the Emergency Departments at both the Leavenworth and Topeka VA Med Centers to Urgent Care Centers while also establishing a new outpatient facility and modernizing the Residential Rehabilitation Treatment Program, both at the Leavenworth VAMC.

Article

## [Veterans](#)

# **Dozens of VA medical centers slated for closure, total rebuilds under new infrastructure plan**

By [Leo Shane III](#)

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The Chillicothe Veterans Affairs Medical Center in Ohio is one of 17 recommended for closure under a new department infrastructure plan released Monday. (VA photo)

Thirty-five Veterans Affairs Medical Centers in 21 different states would be closed or completely reconstructed under [a nearly \\$2 trillion infrastructure overhaul](#) unveiled by department leadership on Monday.

In addition, 14 new major VA hospitals would be built along with [140 multi-specialty community-based outpatient clinics](#). The plan in total would add 80 new medical buildings to the department's existing inventory of more than 1,200 across the country.

The proposals represent a massive restructuring of VA's footprint in America in coming years and could impact millions of veterans seeking medical care and hundreds of thousands of VA employees.

But, the plan must also get approval from both an independent commission of veterans advocates and Congress before moving ahead, leaving any potential changes years away.

By [Leo Shane III](#)

Last week, ahead of the plan's release, VA Secretary Denis McDonough touted the changes as a critical rethinking of where VA facilities are located and how the department delivers care to veterans.

"We will be shifting toward new infrastructure or different infrastructure that accounts for how healthcare has changed, matches the needs of that market, and strengthens our research and education missions," he said. "Most of all, we'll ensure that veterans who live in [any] location have access to the world-class care they need when they need it."

Congress mandated a reassessment of VA's nationwide infrastructure in 2018 as part of a review styled after the military base closing rounds of the 1980s and 1990s.

Under the plan suggested by McDonough, 17 medical centers in twelve states would be completely closed.

They include three sites in New York state (Castle Point, Manhattan and Brooklyn), and two sites each in Pennsylvania (Philadelphia and Coatesville), Virginia (Hampton and Salem) and South Dakota (Fort Meade and Hot Springs).

Other facilities recommended for closure include:

- the Central Western Massachusetts VAMC;
- the Dublin VAMC in Georgia;
- the Chillicothe VAMC in Ohio;
- the Fort Wayne VAMC in Indiana;
- the Battle Creek VAMC in Michigan;
- the Alexandria VAMC in Louisiana;
- the Muskogee VAMC in Oklahoma;
- and the Palo Alto Livermore VAMC in California.

Seven of the 17 sites recommended for closing are located in the northeast, where the number of veterans (and the overall population) has declined in recent decades.

Services at those sites would be replaced by smaller inpatient and outpatient clinics to be built in those areas, or by construction of new VA medical centers in nearby communities.

The plan calls for construction of two new major medical sites in Virginia (Newport News and Norfolk) and Georgia (Macon and Gwinnett County) and a new New Jersey facility in Camden to offset the loss of some of the New York sites.

The new construction list includes:

- a medical center in King of Prussia, Penn.;

- a medical center in Huntsville, Ala.;
- a medical center in Summerville, S.C.;
- a medical center in Grand Rapids, Mich.;
- a medical center in Colorado Springs, Colo.;
- a medical center in Everett, Wash.;
- a medical center in Anthem, Ari.;
- and a medical center in Rapid City, S.D.

A total of eighteen medical centers would be rebuilt, either on their existing land or at a nearby new location. Three New York state centers are on that list (Albany, Buffalo and St. Albans) as are several other major metropolitan areas: Miami, Atlanta, Phoenix, Indianapolis, San Antonio and Washington, D.C.

Other replacement sites include:

- Bedford VAMC in Massachusetts;
- Wilkes-Barre VAMC in Pennsylvania;
- Beckley VAMC in West Virginia;
- Roanoke VAMC in Virginia;
- Durham VAMC in North Carolina;
- Tuskegee VAMC in Alabama;
- Hines VAMC in Illinois;
- Shreveport VAMC in Louisiana;
- and Reno VAMC in Nevada.

McDonough has said in recent weeks that the plan will not displace any VA workers or patients in the short-term, and that efforts will be made to minimize disruptions over the long-term.

The plan also calls for numerous improvements to VA staff pay and benefits as a way to strengthen retention efforts, thereby improving care throughout the system.

VA officials said the full recommendations would cost about \$98 billion more over the next 30 years than simply maintaining the department's current infrastructure, and about \$41 billion more than modernization efforts projected to be needed over that time frame.