

Congress of the United States  
House of Representatives  
Washington, DC 20515-3215

September 15, 2003

Honorable Anthony J. Principi  
Secretary  
Department of Veterans Affairs  
810 Vermont Avenue, N.W.  
Washington, D.C. 20420

Dear Secretary Principi:

I am writing to you in strong support of veterans from my district who are concerned, as I am, about the planned transfer of acute care medical services from the Manhattan VA Hospital and the resulting reduction of medical care and services to our veterans. I share the concerns of veterans that the transfer of these medical services, if allowed, will likely result in the closure of Manhattan VA Hospital in the near future.

There are many good reasons why Manhattan VA Hospital should not have its medical programs and services transferred to Brooklyn VA Hospital.

First, it is centrally located and easily accessible to veterans in my district and thousands who travel to this facility from across the entire metropolitan region. Many veterans will find it very difficult to access care at the Brooklyn VA Hospital.

Second, Manhattan VA is located in an area of world class hospitals making it easier to enter into agreements that help to enhance the quality of care for our veterans. It has been stated that few, if any, physicians or medical professionals associated with Manhattan VA Hospital would be willing or able to transfer to Brooklyn VA Hospital or any other facility within the VA Network.

Third, the Manhattan VA Hospital has been designated a center of excellence in six tertiary care specialties of great importance to veterans with specialty programs that are renowned, including programs relating to the treatment of amputees. Given these reasons, I cannot understand how the VA can conclude that the medical and health care needs of veterans, especially those in Manhattan, can best be served by the transfer of acute medical services from the Manhattan VA Hospital to Brooklyn VA Hospital.

Mr. Secretary, this is certainly not the time to reduce services to our veterans, especially medical and health care services. As a veteran, I am very interested in the well being of our veterans. That is why I am working with my colleagues in the House to make sure that we have programs available to provide educational support, job training and business development assistance to help our brave fighting troops when they return home upon completion of their tour of duty. To reduce or eliminate services at Manhattan VA for returning New York veterans may give them the wrong impression that New Yorkers have no appreciation or concern for their heroic service and sacrifices.

Our nation made a commitment to provide support and a high level of quality care to veterans who bravely serve our country ensuring our freedom and democracy. The implementation of the proposal to shift acute medical care from the Manhattan VA Hospital will seriously undermine health care services for veterans in my district and in this region. I call upon you to restore any services or programs that have been transferred as well as to drop all other plans to that may have been made to transfer any acute or tertiary care from Manhattan VA Hospital.

CBR/jc

Sincerely,  
ORIGINAL SIGNED BY  
**Charles B. Rangel**  
Charles B. Rangel  
Member of Congress

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**Nita M. Lowey**  
**Congress of the United States**  
**18th District, New York**

**Capital Asset Realignment for Enhanced Services (CARES)**  
**Commission Public Hearing on Market Plans**  
**Submitted by the Department of Veteran Affairs Networks**

**Testimony of**  
**Congresswoman Nita M. Lowey, NY 18th**  
**September 17, 2003**

I am extremely concerned by the proposal of the CARES Commission to restructure the VA hospital system in New York State. Those concerns were expressed in a letter that Rep. Eliot Engel and I sent on August 6 to Anthony Principi, the Secretary of the Department of Veterans Affairs. We simply cannot break our promise to the heroes who risked their lives in WWII, Korea, Vietnam, and the Gulf War, and the next generation of veterans now serving in Afghanistan and Iraq by implementing these proposed changes.

In speaking to veterans from the 18<sup>th</sup> Congressional District and those in neighboring districts, the most frequent comments I hear are that the proposed relocation of many inpatient services from the Franklin Delano Roosevelt Montrose Campus of the VA Hudson Valley Healthcare System to the Castle Point campus would create an onerous commute for veterans and their families, and greater delays in receiving appointments for medical services. More than 36,000 veterans have received care at the Montrose campus over the past three years. The longer commute would remove spouses, children and other family members from the decision-making and healing process. The longer waits for appointments would cause delayed diagnosis for veterans in need of immediate medical treatment.

The CARES Commission proposes removing all inpatient services from the Montrose campus and cutting back the operating hours to 9 a.m. to 5 p.m. The Montrose hospital, which has provided care for more than 36,000 veterans, has no emergency room, but provides immediate care in its 24-hour "urgent room." During 2001, 3,356 veterans sought medical attention in the urgent room at the Montrose VA hospital. Four hundred thirty-nine were served between the hours of 4 p.m. and 12 a.m. and 86 between the hours of 12 a.m. and 8 a.m. In 2002, 447 of the 3,118 veterans who used the urgent room went to the facility between the hours of 4 a.m. and 12 a.m., 74 were treated in the urgent room between 12 a.m. and 8 a.m. In the last three years, nearly 1,000 veterans

sought urgent care after 5 p.m., the proposed closing time of the reconstructed Montrose hospital. How can we in good conscience extend the travel time for those veterans who need urgent care by forcing them to use the Castle Point facility? I ask the CARES Commission what happens at 3 a.m. when a veteran has chest pains, gastric pains or a relapse of a psychiatric condition? This proposal breaks the promise of quality and accessible healthcare to the men and women who have risked their lives for our country.

I fear that the restructuring of the VA hospitals will push many veterans completely out of the system. The U.S. Department of Veteran Affairs estimates there are 250,000 homeless veterans on a given day. Fifty percent of these veterans suffer from mental illness. Seventy beds of the 291 at the Montrose campus are occupied by veterans with mental illness. The CARES proposal will push these veterans from their hospital beds onto the streets. Instead of cutting vital services, the Department of Veteran Affairs should be searching for solutions to reduce homelessness and substance abuse among our veterans.

We called on our veterans to return to the VA hospital system in 1996 when the hospitals' utilization rates were low, and they responded to the call as American veterans do whenever their country calls on them. After our veterans returned to the VA hospital system, we can not make the VA hospital facilities and the staff inaccessible to our heroes and their families.

When I look at the Montrose Veteran's Hospital, I see far more than a 291-bed hospital providing quality healthcare to individuals who were willing to make the ultimate sacrifice to defend the freedoms our country cherishes. This facility is an invaluable resource for all residents of Southern New York. We have learned many hard lessons since the events of September 11, 2001 – one is that we must always be prepared. The VA hospital at Montrose's close proximity to the Indian Point power facility, the Croton Reservoir and the Kensico Dam would make it a prime medical facility for more than 11 million residents in the event of a terrorist attack on one of these locations.

Not only does the Montrose VA hospital provide a proven health care facility for our veterans and a first response facility in the event of a terrorist act, it is also home to many professional and non-professional union workers. There are currently 625 employees at the Montrose campus and the facility has an operating budget of close to \$140 million. The proposed restructuring would remove a large portion of the operating budget from the local economy. The Castle Point and the Montrose campus share staff, but depending on location, wage rates vary. Will the VA ask individuals from Montrose to work for lower wages at Castle Point or will the VA increase wages for employees located at Castle Point? Will the VA consider the longer commutes employees would be forced to make when they determine the new wage for employees? These dedicated individuals have families they must provide for, and I urge the VA administration to bear in mind the entire picture when considering the proposed restructuring of services. During the shutdown of the United States Government in 1995, union workers held bake sales to raise money so they could travel to work, so that veteran patients would still

receive care. These staff serve our veterans faithfully, and we must not punish them for their commitment.

This country has made a promise to provide accessible quality healthcare to the men and women who have and will serve our country. The CARES Commission's recommendations would be the first step in breaking this promise. Drastically reducing critically-needed services at Montrose would destroy the facility's ability to treat victims of a terrorist attack or natural disaster. And, the dedicated employees at Montrose should not be hit with the double burden of lower wages and more costly commutes if their jobs are transferred to Castle Point.

The CARES Commission's suggestions to remove inpatient services from the Franklin Delano Roosevelt Montrose campus of the Hudson Valley Healthcare System do not make sense. I urge Secretary Principi to keep the services the Montrose VA Hospital provides to veterans and all residents of the Hudson Valley at their current level; surely, a commitment to consistent excellence in service to one's country cannot be rewarded with deficient access to services from that country.