

Buchanan Federal Government Relations

Congressional Hearing Memorandum

House Committee on Veterans' Affairs Subcommittee on Oversight and Investigations –
“Delivering for Veterans and Caregivers: Year One of the Dole Act”
March 4, 2026

1. **Executive Summary**

The U.S. House Committee on Veterans' Affairs Subcommittee on Oversight and Investigations held a hearing to review the Department of Veterans Affairs' (VA) implementation of the Senator Elizabeth Dole Act, one year after its enactment. The hearing was characterized by a sharp partisan divide regarding the reasons for implementation delays.

Republicans, led by Chairwoman Jennifer Kiggans (R-VA), focused on oversight and accountability, expressing frustration with the VA's slow progress on key provisions, including caregiver support grants, physician pay waivers, and pilots for assisted living and rural care. Democrats, led by Ranking Member Delia Ramirez (D-IL), leveled strong condemnations against VA leadership, accusing the Secretary of intentionally dismantling the VA by cutting thousands of staff positions without the legally required staffing models and failing to use authorities designed to improve recruitment.

Witnesses from the VA acknowledged implementation challenges but highlighted progress on 25 of the 72 sections in the law, citing the legislation's complexity. Testimony from the Government Accountability Office (GAO) underscored long-standing issues with VA's community care staffing and the need for better performance management for caregiver programs. Key topics of debate included the VA's failure to issue grants under the COPE Act for caregiver mental health, the non-use of authorized physician pay waivers, the lack of required staffing models amid significant workforce reductions, and slow movement on assisted living and rural health initiatives.

2. Key Policy Positions and Debates

A. Democratic Position: Condemnation of VA Leadership and Staffing Cuts

Democrats argued that the VA's implementation failures stem from a deliberate effort by the current administration's leadership to weaken the agency, prioritizing privatization over veteran care.

Staffing Models and Cuts: Ranking Member Ramirez criticized the VA for failing to implement Section 146, which requires the development of staffing models, while simultaneously cutting tens of thousands of positions. She stated that over 18,000 of the cut positions had a person in the job in 2025 or 2026, including nearly 3,000 nurses and over 1,000 physicians, directly contradicting the VA's claim that these were old, vacant positions. She noted these cuts were made with "no staffing models in place, as required by the law." In her closing remarks, she reiterated that VA data shows 71% of the 26,000 eliminated positions were filled at some point since January 2025. She later directly challenged Dr. Thomas O'Toole, Acting Assistant Under Secretary for Health for Clinical Services, on the 130 nurses cut from facilities in her Chicago district without the required staffing models in place.

Physician Pay Waivers: Ranking Member Ramirez accused the VA Secretary of misleading Congress by claiming he cannot recruit physicians due to pay, while failing to use the authority granted in Section 142 of the Dole Act to approve pay waivers for 300 physicians. She stated that zero pay waivers have been requested or approved and argued the inaction makes sense only if the "goal is to ensure that the VA fails so that he can further dismantle and maybe even privatize it."

Community Care and Staffing: Rep. Timothy Kennedy (D-NY) described how staffing cuts directly impact veteran care in his district. He stated that roughly 100 healthcare positions were eliminated at the Buffalo VA, including physicians, nurses, psychologists, and social workers. He connected these cuts to a 2024 OIG investigation that found staffing shortages led to dangerous delays in scheduling community care consults, resulting in devastating health outcomes, "including at least one death."

B. Republican Position: Focus on Implementation Delays and Oversight

Republicans framed the issue as one of bureaucratic inefficiency and a lack of urgency at the VA, demanding accountability and adherence to congressional intent.

Caregiver Support: Chairwoman Kiggans expressed dismay that the VA has not followed the intent of her COPE Act, which was included as Section 122 of the Dole Act. She questioned why the VA decided not to issue any grants for caregiver mental health support, despite Congress appropriating \$10 million for the program in FY25 and another \$10 million in FY26.

Physician Pay Waivers: The Chairwoman questioned Dr. O'Toole on the implementation of Section 142, which waives the pay cap for highly skilled medical staff. She stressed the importance of the waivers for recruiting and retaining specialty care physicians who could make significantly more in the private sector.

Rural Healthcare and Assisted Living: Chairwoman Kiggans highlighted that Section 143, covering ambulance costs for veterans in rural areas, has not been fully implemented and is set to sunset in September. She also raised concerns about the rollout of the Section 127 pilot program for assisted living services for aging veterans. Rep. Keith Self (R-TX) questioned how a 43% reduction in reimbursement rates for home health services in rural Texas could improve a veteran's ability to receive care at home.

General Implementation Failures: Rep. Juan Ciscomani (R-AZ), who helped introduce the legislation, expressed impatience with the VA's progress. He stated, "it is important that we take a close look at how the Department is implementing these reforms... Delays can mean waiting longer for care." He pressed the VA on how it prioritizes needs and measures changes in appointment availability.

C. VA and GAO Testimony on Key Implementation Issues

The VA and GAO witnesses provided context on the implementation challenges and status, highlighting areas of both friction and potential collaboration with the committee.

VA's Defense: Dr. Thomas O'Toole testified that the VA has fully implemented 25 of the 72 sections and is working diligently on the remainder. He noted that a lack of dedicated funding for some provisions has been a hurdle.

Physician Pay Waivers: In response to criticism, Dr. O'Toole acknowledged the importance of the Section 142 pay waivers but explained the delay by citing the complexity of selecting only 300 specialists from over 25,000 physicians and the risk of "second and third order consequences" on practice morale. He stated the VA anticipates having criteria to begin awarding the waivers "within the next one to two months."

Caregiver Support: Dr. Mark Koeniger, Acting Assistant Under Secretary for Health and Patient Services, responded to questions about the unused COPE Act grants by highlighting the VA's virtual caregiver support program. He reported that the program has conducted almost 29,000 encounters with over 4,300 unique caregivers, offering an alternative form of mental health support. Sharon Silas, Director of Health for the GAO, noted in her testimony that the GAO's ongoing review of caregiver mental health support has found challenges for caregivers in accessing services.

Community Care and Staffing Models: Ms. Silas testified that the community care program has tripled in size, and administrative processes remain "labor-intensive." She noted that a

GAO recommendation for the VHA to "assess the staffing and resource needed to process community care referrals and schedule appointments" remains open. She later emphasized that staffing models are "incredibly important because it helps to align your resources and staff needs with your program needs."

Assisted Living and Rural Access: Dr. Koeniger stated that for the Section 127 assisted living pilots, the VA is currently developing the necessary "purchasing authority and a fee schedule." Regarding rural transportation, Dr. O'Toole acknowledged the VA is "having some challenges" implementing the provision and stated, "it's something that we would like to be able to work with the committee further."