

# United States Senate

WASHINGTON, DC 20510

March 14, 2022

Honorable Denis McDonough  
Secretary  
U.S. Department of Veterans Affairs  
810 Vermont Ave., NW  
Washington, DC 20420

Dear Secretary McDonough,

Our veterans deserve the highest quality of health care and it's the Department of Veterans Affairs (VA) that is charged with delivering on this promise. How it does so is guided, in part, by your recommendations to the Asset and Infrastructure Review (AIR) Commission, which is charged with VA facility modernization actions over the next year. This process will shape the way veterans receive care for decades to come and it's essential that we get it right. Unfortunately, the process has fallen short, failed to take into account critical data, and, without intervention, will result in a severe disservice to the veterans living in New Mexico.

We object to the AIR Commission's recommendation to close four Community Based Outpatient Clinics (CBOC) and adjustment of services at several New Mexico VA facilities. The Commission's recommendations were based on assessments that failed to fully account for the projected veteran demand, community care network inadequacy, and lack of access to telehealth services. This is of grave concern, as the integrity and quality of care for New Mexico veterans and their families is directly at risk.

New Mexico's veterans have unique and dynamic needs and demographics. New Mexico has the 9<sup>th</sup> largest percentage of veterans by state population.<sup>1</sup> This veteran population is not concentrated in an urban area, but rather is dispersed across the 5<sup>th</sup> largest geographic state in the country. Of the veterans in New Mexico, 30 percent identify as Hispanic and a growing number are women. Additionally, nearly half of the veterans in New Mexico are over the age of 65, and due to illness and service-related disabilities, many find it difficult to travel long distances for medical care.<sup>2</sup>

Our state faces one of the worst health care shortages in the United States. The Health Resources and Services Administration (HRSA) classifies 32 out of 33 of New Mexico's counties as full or partial primary care Health Professional Shortage Areas (HPSAs).<sup>3</sup> Additionally, the majority of New Mexico's counties are classified as Medically Underserved Areas (MUAs).<sup>4</sup> This is a direct result of our lack of adequate community care networks and health care providers. According to recent data from the New Mexico Department of Workforce Solutions, New Mexico needs a

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<sup>1</sup> <https://www.usatoday.com/story/money/2019/07/04/states-with-the-most-veterans-new-york-alaska/39645251/>

<sup>2</sup> <https://www.dws.state.nm.us/Portals/0/DM/LMI/2020%20Veterans%20Profile.pdf>

<sup>3</sup> <https://data.hrsa.gov/tools/shortage-area/hpsa-find>

<sup>4</sup> <https://data.hrsa.gov/tools/shortage-area/mua-find>

minimum of 6,223 additional Nurses in order for each county to meet the national benchmark.<sup>5</sup> Without redistributing the current workforce, New Mexico would need 328 Primary Care Physicians, 117 Psychiatrists, 238 Nurse Practitioners, 249 Physicians Assistants, 90 Dentists, and 2,510 Paramedics, and EMTs, in order to meet national benchmarks for health care staffing standards.<sup>6</sup> The COVID-19 pandemic has only exacerbated the health care shortages in New Mexico, where providers are moving away from direct patient care due to high levels of stress and burnout.<sup>7</sup>

The AIR Commission did not take into account any of the above data in making its recommendations. Instead, it relied on faulty and limited assessments based on data compiled from December 2018 to November 2020.<sup>8</sup> This data continues to underestimate the severe health care shortages in New Mexico and the exacerbating impacts of COVID-19 on the health care market. The projected demand also did not fully account for expanded eligibility to community care.<sup>9</sup> The VA cannot and should not close CBOCs in New Mexico where there is no adequate community care network. It is our strong belief that there is no adequate community care network to absorb the many veterans who will lose access to integrated VA services at the impacted CBOCs.

Let us also be clear: telehealth services is not a viable substitute for the care provided at CBOCs. New Mexico has the highest percentage of residents in the Southwest United States without adequate broadband internet service. According to the White House, 22 percent of New Mexicans do not have access to adequate broadband infrastructure<sup>10</sup> and nearly 70 percent have to rely on only one Internet Service Provider<sup>11</sup>. Without access to reliable broadband, utilizing telehealth services is not a realistic replacement option for veterans should these CBOCs close. Furthermore, many veterans have limited technological literacy, are elderly, or lack access to a computer, phone or laptop. It is inappropriate to expect that these veterans will have to cover the cost of purchasing these electronics and internet service, all in order to access health care services they have more than earned through their sacrifice for our country.

We understand this is the beginning of a lengthy process by the Department to determine which facilities will ultimately be proposed for closure. We believe that the proposed closures would hurt the service veterans receive and place a strain upon the other VA clinics and local providers in rural New Mexico. Over the coming months, we strongly urge the Department to seek input from Veterans Service Organizations (VSO), medical providers, and communities in northern New Mexico to fully understand the impact of these recommended changes. We also urge the VA to conduct in-person listening sessions and re-assess the data relied on to come to the current

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<sup>5</sup> [https://www.nmms.org/wp-content/uploads/2018/08/NMHCWF\\_2021Report\\_FINAL\\_edist.pdf](https://www.nmms.org/wp-content/uploads/2018/08/NMHCWF_2021Report_FINAL_edist.pdf).

<sup>6</sup> Ibid

<sup>7</sup> <https://www.aamc.org/news-insights/hospitals-innovate-amid-dire-nursing-shortages>

<sup>8</sup> GAO, "Incomplete Information Hinders Usefulness of Market Assessments for VA Facility Realignment", February 2022, <https://www.gao.gov/assets/gao-22-104604.pdf>

<sup>9</sup> Ibid.

<sup>10</sup> <https://www.whitehouse.gov/wp-content/uploads/2021/04/AJP-State-Fact-Sheet-NM.pdf>

<sup>11</sup> <https://apnews.com/article/technology-new-mexico-broadband-internet-coronavirus-pandemic-internet-access-518901acb91c504e1018111368c220be>

recommendations, including re-assessing and re-gathering data on the relevant community care networks and realities of telehealth access.

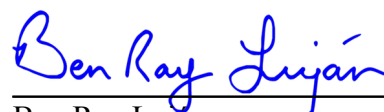
We owe veterans a tremendous debt of gratitude and we are committed to ensuring that New Mexico veterans receive the health care services they have earned.

Sincerely,



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Martin Heinrich  
United States Senator



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Ben Ray Lujan  
United States Senator