

The Honorable John Warner
Chairman, Committee on Armed Services
United States Senate
Washington, DC 20510

Dear Mr. Chairman:

In accordance with Title VII of Public Law 107-314, Section 723, we are pleased to submit this letter concerning a joint review of the adequacy of processes and existing authorities for the coordination and sharing of health care resources between the Department of Veterans Affairs (VA) and Department of Defense (DoD) both before and following domestic acts of terrorism or domestic use of weapons of mass destruction.

One existing statutory authority for VA and DoD sharing is 38 USC § 8111A that authorizes VA to furnish health care to members of Armed Forces on active duty during and immediately following a national disaster as declared by the President, the Congress, or the Secretary of Homeland Security under the National Disaster Medical System. It also directs VA to plan with DoD for such contingencies. Since terrorist attacks or use of weapons of mass destruction would constitute national emergencies, the existing authority under Section 8111A and policy governing the provision of health care services during a war, national emergency, subsequent to terrorist attacks or domestic use of weapons of mass destruction are adequate.

The memorandum of understanding (MOU) (December 1982) between VA and DoD establishes procedures and guidelines for planning and implementing provisions of Section 8111A. This MOU contemplates an attack on the United States in paragraph III.B, *"In the event of an attack on the United States (i.e., an attack within the geographic limits), the use of VA health care resources may be affected by other Executive Orders and MOU between VA and other Federal (non-DoD) departments or agencies."* This reference appears to caution that VA health care assets could be less available to DoD to the degree that they are required in other attack response activities.

Public Law 107-314 § 723 (a) also calls for a review of the adequacy of current authorities in providing for the coordination and sharing of health care resources between the two Departments, particularly before the declaration of a national emergency. For instance, VA annually reviews its DoD contingency hospital bed capacity estimates with DoD Health Affairs and provides a Report to Congress on

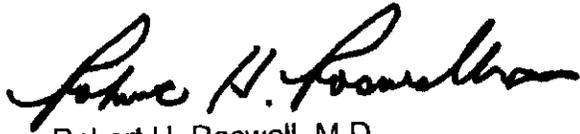
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VA Estimated Bed Capacity in Support of DoD Contingency Planning. We consider that the existing VA and DoD joint sharing agreement MOU to establish inter-agency cooperation and coordination for veterans, active duty military personnel, retirees and their dependents is adequate in situations other than a declared emergency.

We believe this addresses your concerns on the adequacy of processes and existing authorities for the coordination and sharing of health care resources between VA and DoD.

Sincerely,



Robert H. Roswell, M.D.
Under Secretary for Health



William Winkenwerder, Jr., M.D.
Assistant Secretary of Defense
Health Affairs