

Veterans Health Administration

Review of
Alleged Mismanagement
of the Ambulette Services
at the New York Harbor
Healthcare System

ACRONYMS

CRB Contract Review Board

eCMS Electronic Contract Management System

FAR Federal Acquisition Regulation

FSS Federal Supply Schedule

GAO Government Accountability Office

GSA General Services Administration

IOP Integrated Oversight Process

NCO Network Contracting Office

NYHHS New York Harbor Healthcare System

OIG Office of Inspector General

RFQ Request for Quotation

SAO Service Area Office

VA Department of Veterans Affairs

VHA Veterans Health Administration

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Highlights: Review of Alleged Mismanagement of the Ambulette Services at the NYHHS

Why We Did This Review

On June 4, 2015, the Office of Inspector General received an allegation that Department of Veterans Affairs (VA) acquisition personnel mismanaged the award of the ambulette services task orders at the New York Harbor Healthcare System (NYHHS). There was also an allegation of contract steering for the re-solicited requirement. Our review focused on determining the merit of the allegations.

What We Found

We substantiated the allegation Veterans Health Administration (VHA) acquisition personnel mismanaged the award of the ambulette services at NYHHS because they improperly awarded two task orders for ambulette services when the contractor's Federal Supply Schedule contract did not offer these services. In addition, the contracting officer's award determination for the re-solicited requirement was not clearly justified. Further, acquisition personnel did not document pertinent contracting actions in VA's Electronic Contract Management System (eCMS). However, we were unable to determine the merits of the allegation that contract steering occurred in the re-solicited requirement.

The award mismanagement occurred because VA's Integrated Oversight Process (IOP) reviews, designed to improve contract quality, were either not completed or not

documented for the two task orders valued at \$20 million. If performed, these reviews may have revealed the contractor did not offer ambulette services. Further, personnel turnover caused confusion as to who should ensure contract documentation was included in eCMS. As a result, acquisition personnel put the VA at risk for protests and payment to protesters for restitution.

What We Recommended

We recommended the Under Secretary for Health implement an oversight process to ensure IOP reviews are completed. We recommended the Head of Contracting Activity, VHA, Service Area Office (SAO) East, develop a mechanism to ensure effective coordination between acquisition personnel when transferring contracting responsibilities and implement a process to ensure eCMS is used to record contracting actions.

Agency Comments

The Under Secretary for Health and the Head of Contracting Activity, VHA, SAO East, concurred with our recommendations and provided action plans for correction action. We consider the plans acceptable and will follow up on their implementation.

LARRY M. REINKEMEYER Assistant Inspector General for Audits and Evaluations

Larry M. Keinkorgen

VA OIG 15-04945-331 August 18, 2016

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INTRODUCTION

Objective

We conducted this review to determine the merit of the allegation that the Department of Veterans Affairs (VA) mismanaged the award of the ambulette services at the New York Harbor Healthcare System (NYHHS). In addition, there was an allegation of contract steering for the re-solicited requirement.

Ambulette Services

Ambulette service is assisted medical transportation for non-emergency medical appointments. The transportation service picks up patients at their residence and transports them to a medical appointment.

On December 20, 2013, Veterans Health Administration (VHA) acquisition personnel at Network Contracting Office (NCO) 3 used the General Service Administration (GSA) Federal Supply Schedule (FSS) to solicit for 24-hour, 7-days-a-week ambulette services at NYHHS. The FSS Program provides Federal agencies with a simplified process for obtaining commercial supplies and services at prices associated with volume buying. NCO 3 awarded Metro Travel Services, Inc. (Metro) the ambulette services task order valued at approximately \$19.7 million (base price and all priced options) on January 25, 2014. Locations included the Manhattan and Brooklyn campuses, the St. Albans Community Living Center, and six outpatient clinics. On February 5, 2014, Virgo Medical Services Inc. (Virgo) filed a protest with the Government Accountability Office (GAO) in regards to Metro's award.¹

After issuing a stop work order to Metro, VHA awarded sole-source bridge² task orders to both Metro (Manhattan campus) and Virgo (Brooklyn and St. Albans campuses) on February 25, 2014, to continue services until the requirement could be re-solicited. On April 23, 2015, Service Area Office (SAO) East acquisition personnel awarded the re-solicited requirement to Metro (Manhattan campus) valued at approximately \$8.6 million and Virgo (Brooklyn and St. Albans campuses) valued at approximately \$9.1 million.

Electronic Contract Management System On June 15, 2012, the Deputy Assistant Secretary for Acquisition and Logistics published the VA Procurement Policy Memorandum (PPM) – Mandatory Usage of VA's Electronic Contract Management System (eCMS). The policy states that eCMS serves as VA's official contract of record and requires staff to use eCMS for all procurement actions valued above \$3,000 so that there is a clear record of contract actions. On November 12, 2014, the Office of Acquisition and Logistics reminded acquisition personnel of the mandated use of this system in its Acquisition Policy Flash! 15-06.

¹ Appendix A provides details on Virgo's GAO protest.

² A sole-source acquisition is a task order or contract that is solicited and negotiated with only one source. A bridge is a temporary extension when supplies or services are still needed after the end of a task order or contract.

RESULTS AND RECOMMENDATIONS

Finding

VHA Mismanaged the Ambulette Services at the New York Harbor Healthcare System

On June 4, 2015, the Office of Inspector General (OIG) received an allegation that VHA mismanaged the award of ambulette services at NYHHS. In addition, there was an allegation of contract steering for the re-solicited requirement. Our review focused on determining the merit of the allegations.

What We Did

We conducted our review from September 2015 through May 2016. To evaluate these allegations, we reviewed the Federal Acquisition Regulation (FAR), VA acquisition policy, and contract documents in eCMS. Furthermore, we interviewed the complainant, NCO 3 acquisition personnel, and SAO East acquisition personnel.

What We Found

We substantiated the allegation that VHA mismanaged the award of the ambulette services at NYHHS. Acquisition personnel improperly awarded two task orders to Metro for ambulette services when Metro's FSS contract did not offer the services VHA was seeking. In addition, the contracting officer's award determination for the re-solicited requirement was not clearly justified and acquisition personnel did not document all pertinent contracting actions in eCMS.

This occurred because VA's Integrated Oversight Process (IOP) reviews were either not completed or not documented for the two improperly awarded task orders. While a review was conducted for the re-solicited requirement, the review did not identify discrepancies specific to the contracting officer's justification for splitting the final task order between both contractors. As a result, acquisition personnel put the VA at risk for protests and payment to protesters for restitution.

We were unable to determine the merits of the allegation that contract steering occurred in the re-solicited requirement. Specifically, the contracting officer awarded both contractors, Metro and Virgo, task orders for ambulette services; therefore, neither contractor had an unfair advantage over the other for the re-solicited requirement.

Improper Task Order Awards

Acquisition personnel improperly awarded Metro the initial task order for ambulette services and the sole-source bridge task order when its FSS contract did not offer the services VHA was seeking on both occasions. FAR Subpart 8.405-2(c) states, "The ordering activity must provide the Request for Quotation (RFQ) . . . to schedule contractors that offer services that will meet the agency's needs." Specifically, Metro was awarded the initial ambulette services task order on January 25, 2014. Locations included

the Manhattan and Brooklyn campuses, the St. Albans Community Living Center, and six outpatient clinics. However, on February 5, 2014, Virgo filed a GAO protest citing that Metro's FSS contract did not offer the services VHA was seeking. GAO discussed the issue with GSA and GSA stated that Metro did not offer the services under its FSS contract. In January 2010, GAO sustained a protest³ where a contractor was ineligible to receive a task order because the required services were outside the scope of the contractor's FSS contract.

Due to the protest, VHA issued a stop work order to Metro on February 21, 2014, and awarded sole-source bridge task orders to Metro (Manhattan campus) and Virgo (Brooklyn and St. Albans campuses) to continue services until the requirement could be re-solicited. However, Metro's FSS contract was not corrected until 4 days after its award of the sole-source bridge task order. Therefore, acquisition personnel improperly awarded Metro two task orders when its FSS contract did not offer the services VHA was seeking. Acquisition personnel did not provide an explanation as to why they awarded the task order to Metro.

Weak Re-Solicited Award Justification

The contracting officer's award determination for the re-solicited requirement was not clearly justified. FAR Subpart 8.405-2(f)(4) and (5) state, "The ordering activity shall document-(4) The evaluation methodology used in selecting the contractor to receive the order" and "(5) The rationale for any tradeoffs [between contractors] in making the selection." However, when the re-solicited requirement was awarded to both Metro and Virgo on April 23, 2015, there was a lack of justification for splitting the contract award between the two contractors. Specifically, the award decision document stated that Metro and Virgo both received equal technical and past performance ratings but that Virgo's offer was higher than Metro's. The award decision document did not provide an explanation as to why Virgo was awarded a portion of the award when Metro's price was lower. FAR Subpart 8.405-1(d)(4) states, "The ordering activity contracting officer shall ensure that all quotes received are fairly considered and award is made in accordance with the basis for selection in the RFQ." Specifically, FAR Subpart 8.405-2(d) states, "The ordering activity shall evaluate all responses received using the evaluation criteria provided to the schedule contractors." The re-solicited requirement identified technical capability, past performance, and price as the factors used to evaluate offers. solicitation stated, "Non-Price factors, when combined, are significantly more important than price." Therefore, the contracting officer should evaluate those three factors to determine the award. Since, according to the award decision document, both Metro and Virgo rated equal in all non-price factors (technical and past performance), price was the remaining factor left to evaluate. However, the award decision document did not indicate that

³ American Security Programs, Inc. (B-402069, B-402069.2)

price was evaluated in accordance with the solicitation. Therefore, the contracting officer's decision to award part of the requirement to the higher priced offeror (Virgo) was not clearly justified.

Missing Contract Documents in eCMS

Acquisition personnel did not document pertinent contracting actions in eCMS. FAR Subpart 4.801(a) states, "The head of each office performing contracting, contract administration, or paying functions shall establish files containing the records of all contractual actions." FAR Subpart 4.801(b)(1) states, "The documentation in the files shall be sufficient to constitute a complete history of the transaction for the purpose of (1) Providing a complete background as a basis for informed decisions at each step in the acquisition process." In addition, FAR Subpart 4.803 provides examples of records normally contained in the contract files. Further, VA requires the use of eCMS as the official contract file. However, there were numerous missing documents in eCMS. For example, VHA's response to GAO, GAO's dismissal memo, the pre-award review, and a signed best value award document were missing for the first ambulette services task order. The rationalization to split ambulette services between two contractors, approval for sole-source justification, pre-award review, and evaluation of price reasonableness were missing for the sole-source bridge task orders. Upon request, acquisition personnel provided VHA's response to GAO and GAO's dismissal memo.

Why This Occurred

This occurred because VA's IOP reviews designed to improve contract quality were either not completed or not documented. Oversight of contract reviews was transferred from VA's Office of Acquisition and Logistics to the heads of each of the contracting activities in June 2009, when VA established the IOP. The IOP promoted quality throughout the acquisition cycle and required each contracting activity to commit the time and resources needed to conduct contract reviews. The IOP also held contracting officers responsible for building quality into the acquisition process. Depending on the type and estimated value of the contract and what was being procured, the process required a peer review or second-level review, Contract Review Team, or Contract Review Board (CRB) to evaluate the contract.

According to the IOP and VHA's Procurement Manual,⁴ a CRB should have been conducted for the first two task orders and the re-solicited requirement. However, there is lack of evidence that a CRB was conducted for the first two task orders. If performed, these pre-award reviews may have revealed Metro did not offer the services VHA was seeking. While a pre-award review for the re-solicited requirement was conducted, the CRB did not identify the same discrepancies revealed during our review. Specifically, the

⁴ Volume Six: Procurement Process, Chapter VIII: Integrated Oversight Process (IOP)/Contract Review Process

CRB did not address the lack of justification for splitting the award between Metro and Virgo.

Further, contracting staff turnover within NCO 3 caused confusion as to who should ensure contract documentation was included in eCMS. When the former supervisory contracting officer left VHA, there was a lack of advance coordination with acquisition personnel to define responsibility for appropriately updating eCMS with required contract documentation. As a result of inadequate oversight, acquisition personnel put VA at risk for protests and payment to protesters for restitution.

Conclusion

We substantiated the allegation that VHA mismanaged the award of the ambulette services at NYHHS. Acquisition personnel improperly awarded two task orders valued at \$20 million for ambulette services because Metro's FSS contract did not offer the services VHA was seeking. Additionally, the contracting officer's award determination for the re-solicited requirement was not clearly justified. We were unable to determine the merits of the allegation that contract steering occurred in the re-solicited requirement. Specifically, the contracting officer awarded both contractors, Metro and Virgo, task orders for ambulette services; therefore, neither contractor had an unfair advantage over the other for the re-solicited task order.

Recommendations

- 1. We recommended the Under Secretary for Health implement an oversight process to ensure Integrated Oversight Process reviews are completed in accordance with established policies.
- 2. We recommended the Head of Contracting Activity, Veterans Health Administration, Service Area Office East, develop a mechanism to ensure effective coordination between acquisition personnel when transferring contracting responsibilities.
- 3. We recommended the Head of Contracting Activity, Veterans Health Administration, Service Area Office East, implement a process to ensure all acquisition personnel record contracting actions in the Electronic Contract Management System.

Management Comments

In response to our draft report, the Under Secretary for Health concurred with Recommendation 1 to implement an oversight process to ensure IOP reviews are completed. The response indicated that VHA has already implemented a new Quality Assurance Plan to ensure the reviews are completed as required. The Head of Contracting Activity, VHA, SAO East, concurred with Recommendation 2 and 3 and provided action plans for corrective action. To address Recommendation 2, SAO East's response noted that a regional tool has been developed to track contract assignments, reassignments, and contract status on a contract-by-contract basis down to

the individual employee. In addition, the tool has been piloted at NCO 4 since early fiscal year 2016 and will be implemented regionally by October 1, 2016. To address Recommendation 3, SAO East's response noted that it employs a rigorous compliance metric reporting to eCMS to ensure the recording of contacting actions. In addition, the metrics are reported bi-weekly and SAO East has a 97.9 percent overall average of actions recorded in eCMS.

OIG Response

We consider the action plans acceptable. However, we will monitor implementation of these action plans and will close the recommendations when we receive sufficient evidence demonstrating the identified issues have been addressed. Appendix C contains the full text of comments from the Under Secretary for Health. Appendix D contains the full text of comments from the Head of Contracting Activity, VHA, SAO East.

Appendix A Background

GAO Protest

Virgo cited three causes for the award to Metro being fundamentally flawed:

- Metro's FSS contract did not offer the services VA was seeking due to the term "ambulette" not being included in the contract.
- VA conducted improper and misleading discussions with Virgo that conflicted with the terms of the solicitation.
- VA's technical evaluation of Metro's proposal was inconsistent with the terms of the solicitation. Therefore, Metro's proposal could not have been technically acceptable.

Based on discussions with GAO, VA took corrective actions and therefore, GAO dismissed the protest on May 6, 2014. VA's corrective actions included withdrawing the award, withdrawing the solicitation, and re-soliciting the requirement. The table reflects the contracting events mentioned in the allegation.

Table. Ambulette Services Timeline of Events

Events	Date
Solicitation Issued by NCO 3 (VA243-14-Q-0125)	December 20, 2013
Awarded Task Order to Metro (VA243-14-F-1491)	January 25, 2014
GAO Protest Submitted by Virgo	February 5, 2014
Stop Work Order Issued to Metro	February 21, 2014
Sole-Source Bridge Task Orders Awarded to Virgo (VA243-14-F-2023)	February 25, 2014
Sole-Source Bridge Task Orders Awarded to Metro (VA243-14-F-2015)	February 25, 2014
Metro's FSS Contract Modified	February 29, 2014
GAO Protest Dismissed	May 6, 2014
Task Order Terminated for Convenience (VA243-14-F-1491)	September 17, 2014
Re-Solicited Requirement (VA240-15-Q-0004)	January 16, 2015
Awarded Task Order to Virgo (VA240-15-F-0011)	April 23, 2015
Awarded Task Order to Metro (VA240-15-F-0012)	April 23, 2015

Source: VA's Electronic Contract Management System, VA personnel, and complainant

Appendix B Scope and Methodology

Scope

We conducted our review from September 2015 through May 2016. The review focused on contracting events mentioned in the ambulette services allegations.

Methodology

To determine the merit of the allegations, we did the following:

- Reviewed FAR and VA acquisition policy
- Obtained and reviewed contract documents, including solicitations, task order awards, the stop work order, GAO protest documentation, modification finalizing the termination for convenience, technical evaluation documents, past performance documents, and award decision documents
- Interviewed the complainant, the NCO 3 acquisition team, and the SAO East acquisition team

Data Reliability

While performing this review, we did not use computer-processed data to support our findings, conclusions, or recommendations.

Government Standards

We conducted this review in accordance with the Council of the Inspectors General on Integrity and Efficiency's *Quality Standards for Inspection and Evaluation*.

Appendix C Management Comments—Under Secretary for Health

Department of Veterans Affairs

Memorandum

Date: June 10, 2016

From: Under Secretary for Health (10)

Subj: Office of Inspector General (OIG) Draft Report, Review of Alleged Mismanagement of the Ambulette Services at the New York Harbor Healthcare System (VAIQ 7702024)

To: Assistant Inspector General for Audits and Evaluations (52)

- Thank you for the opportunity to review the OIG draft report, Review of Alleged
 Mismanagement of the Ambulette Services at the New York Harbor Healthcare System. I
 concur with the report and have no technical comments.
- The attachment contains the Veterans Health Administration's (VHA) action plans for addressing recommendation 1. Comments in response to recommendations 2 and 3 have been provided by the Head of Contract Activity, VHA, Service Area Office East.
- 3. VHA Procurement and Logistics Office (P&LO) supports VHA in purchasing high quality, cost-effective health care products and services. P&LO also works to standardize health care supplies, equipment, and services through aggressive contracting, and by monitoring logistics data. With annual expenditures of more than \$15 billion and a contracting staff of 2,700, VHA P&LO is one of the largest procurement and supply groups within the federal government. The office oversees purchasing and distribution of pharmaceuticals, medical and operational supplies, prosthetics, high-tech medical equipment, and other critical patient care items to VHA health care facilities, which comprise the largest health care delivery system in the United States.
- 4. Continuous improvement is paramount to enhancing the Veteran experience. Consistent with this philosophy, we have a series of initiatives already underway to develop and implement processes and procedures to enhance our ability to serve the medical centers and Veterans.
- 5. VHA is strongly committed to developing long-term solutions that mitigate risks to the timeliness, cost-effectiveness, quality and safety of the VA health care system. VHA is using the input from OIG and other advisory groups to identify root causes and to develop critical actions. As VHA implements corrective measures, we will ensure our actions are meeting the intent of the recommendations. VHA is dedicated to sustained improvement in the high risk areas.

6.	The recommendations in this report apply to high risk areas 1 (ambiguous policies and inconsistent processes) and 2 (inadequate oversight and accountability). VHA actions will make certain that the recently implemented improvements are effective and clarify procedures.
7.	If you have any questions, please email Karen Rasmussen, M.D., Director, Management Review Service at VHA10E1DMRSAction@va.gov.
	(original signed by:)
	DAVID J. SHULKIN, M.D.
	cc: OIG Contract Integrity Division (52AR)
	Attachment

Attachment

VETERANS HEALTH ADMINISTRATION (VHA) Action Plan

OIG Draft Report: Review of Alleged Mismanagement of the Ambulette Services at the New York Harbor Healthcare System

Date of Draft Report: May 17, 2016

Recommendations/ Status Completion Date

Actions

<u>Recommendation 1</u>: We recommend the Under Secretary for Health, implement an oversight process to ensure Integrated Oversight Process reviews are completed in accordance with established policies.

VHA Comments: Concur

This recommendation is related to High Risk Area 1 (ambiguous policies and inconsistent processes) and 2 (inadequate oversight and accountability). VHA is committed to strengthening our oversight and accountability processes and implementing polices consistently.

VHA has been diligently working on redefining, redeveloping and implementing a revised quality assurance program. Attached is the new VHA Quality Assurance Plan that has been implemented to provide oversight process and ensure Integrated Oversight Process Reviews are completed as required.

Status: Completed

^{*} OIG Note: The attachment mentioned above (VHA Quality Assurance Plan) is not included in this report. Copies may be obtained from the OIG Information Officer.

Appendix D Management Comments—Head of Contracting Activity, VHA, SAO East

Department of Veterans Affairs

Memorandum

Date: May 19, 2016

From: Head of Contracting Activity, Veterans Health Administration Service Area Office East

Subj: Review of Alleged Mismanagement of the Ambulette Services at the New York Harbor Healthcare System

To: Assistant Inspector General for Audits and Evaluations (52)

- 1. I concur with the findings and recommendations in the DRAFT Report: Review of Alleged Mismanagement of the Ambulette Services at the New York Harbor Healthcare System.
- 2. The attachment addresses action plans for recommendations 2 and 3. The Under Secretary for Health will provide action plan for recommendation 1.
- f you have any questions regarding our responses and actions to the recommendations in the draft report, please contact me at (412) 822-3486.

(original signed by:)

JOSEPH MALETTA Attachment

cc: Director, Contract Integrity Division (52AR)
Director, Management Review Service (VHA 10E1D MRS)

Attachment

VETERANS HEALTH ADMINISTRATION (VHA) Action Plan

OIG Draft Report: Review of Alleged Mismanagement of the Ambulette Services at the New York Harbor Healthcare System

Date of Draft Report: May 17, 2016

Recommendations/ Status Completion Date

Actions

<u>Recommendation 2</u>: We recommended the Head of Contracting Activity, Veterans Health Administration, Service Area Office East, develop a mechanism to ensure effective coordination between acquisition personnel when transferring contracting responsibilities.

VHA Comments: Concur

This recommendation is related to High Risk Area 2 (inadequate oversight and accountability). VHA Service Area Office (SAO) East is committed to addressing the effectiveness of its acquisition oversight program.

VHA SAO East has developed a regional tool using VA Electronic Contract Management System (eCMS) based data that provides organizational leadership with the automated ability to track contract assignments, reassignments and contract status on a contract-by-contract basis down to the individual employee. The tool has been piloted at Network Contracting Office 4 since early fiscal year (FY) 2016 and will be implemented regionally by October 1, 2016. See attached sample report.

Status Completed **Target Completion Date**

<u>Recommendation 3</u>: We recommend the Head of Contracting Activity, Veterans Health Administration, Service Area Office East, implement a process to ensure all acquisition personnel record contracting actions in the Electronic Contract Management System.

VHA Comments: Concur

This recommendation is related to High Risk Area 1 (ambiguous policies and inconsistent processes). Risk will remain in this area until the VHA contracting and finance systems are linked to provide for a single entry point of data that can be shared in a timely manner between the mandatory contracting and finance systems. VHA SAO East and the other VHA Heads of Contact Activities (HCA) have implemented tracking metrics to try to make corrections to systems that do not communicate with one another.

VHA SAO East employs a rigorous IFCAP reporting to eCMS compliance metric to ensure that all acquisition personnel record contracting actions in eCMS. The metrics are reported bi-weekly to the SAO East HCA. As of May 5, 2016, SAO East had an overall average 97.9 percent actions recorded in IFCAP and eCMS. See attached report.

Status Completed **Target Completion Date**

Appendix E OIG Contact and Staff Acknowledgments

Contact	For more information about this report, please contact the Office of Inspector General at (202) 461-4720.
Acknowledgments	Judith Sterne, Director Christopher Bowers Angela Sneed

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