

Congress of the United States
Washington, DC 20515

March 28, 2025

The Honorable Doug Collins
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue NW
Washington, DC 20420

Dear Mr. Secretary,

We are writing to express our deep concern about the President’s Executive Order mandating a return to in-person work and the lack of clarity about how you are planning to implement it within the Veterans Health Administration (VHA)¹. We have heard from countless stakeholders, veterans, and Department of Veterans Affairs (VA) employees that by carrying out President Trump’s blanket return-to-office policy, your administration is damaging veteran and employee trust in VA, disrupting and impeding veterans’ access to care, and creating untenable and inefficient conditions for both veterans and the VA workforce. We ask that you immediately share with us how you are planning to carry out this return-to-office order within VHA, and we call upon you to ensure that the policy includes clear exceptions for situations where it is not feasible or reasonable for employees to be in the office 100% of the time.

Fulfilling VA’s sacred mission of serving and providing for our nation’s veterans requires the most effective and efficient delivery of care and benefits, which can only be accomplished with a high-quality workforce that understands the unique needs of the veteran population. To develop that workforce, VHA has hired thousands of employees into fully remote positions over the last five years, which allowed VA to facilitate the hiring of a highly skilled and diverse workforce that may not be located near VA facilities that can offer space for them to work. This workforce has been providing timely, critical care to veterans in need.

Remote work agreements have allowed VA to hire more mental health providers like psychiatrists, psychologists, and social workers. These mental health providers have been able to provide private counseling and care to veterans in need through telehealth appointments. Return-to-office mandates jeopardize this provision of care. We have also heard an account from a social work supervisor, who—due to space constraints at the facility they were ordered to return to—will be sharing a 100-square-foot *shower* with another supervisor, providing case management for veterans and clinical supervision for other social workers. We’re sure you can agree this sort of arrangement is hardly conducive to delivering the quality-of-care veterans deserve.

¹ See [Executive Order of President Donald J. Trump](#), “Return to In-Person Work” (January 20, 2025); [joint memorandum](#) of the U.S. Office of Management and Budget and the U.S. Office of Personnel Management, “Agency Return to Office Implementation Plans” (January 27, 2025); and [Statement of Acting Secretary Todd Hunter](#), “VA Announces Return to In-Person Work Policy” (February 3, 2025).

In addition, we have heard reports of Clinical Resource Hub (CRH) employees, who have worked remotely since they were hired, being forced to return to offices and work in cubicle farms or in open-floor-plan offices. These VA workers increase access to VHA clinical services for veterans when local facilities have gaps in care or service capabilities, often through telehealth. We cannot expect providers offering primary care, mental health, and specialty care services to be able to deliver care ethically and maintain patient privacy when surrounded by other employees, who may or may not be clinicians, or even VA employees. We have heard some CRH employees are being told to report to buildings where federal employees from other agencies work. This is a clear violation of veterans' privacy and VA's obligation to protect veterans' private health information, and risks violation of the Health Insurance Portability and Accountability Act (HIPAA).

Not only are there clear issues with the President's return-to-office order in terms of the delivery of quality patient care, but the toll it is taking on VA employees is already damaging VA's ability to recruit and retain a strong workforce. For example, thanks to the return to office order, VA employees who do not work near a VA facility are now being forced to choose between making unsustainably long commutes every day or leaving the VA workforce altogether. VA is losing many of the quality providers that remote work has allowed it to hire, which will damage VA's institutional knowledge and expertise, and only further hurt veterans and their access to care.

We understand, as of March 10, 2025, you have already exempted Veterans Crisis Line (VCL) employees from the return-to-office order. The majority of these employees have been working remotely for the last five years. Since the 2022 launch of Dial 988 then Press 1, they have responded to more than 10 million calls, texts, and chats, providing a literal lifeline to veterans in crisis. Your exemption of VCL employees demonstrates to us that you understand there will be negative impacts to veterans' care due to the return-to-office order and that these must be mitigated. VA should not move forward with a haphazard and inconsistent application of this mandate throughout the rest of VHA.

Because of the unmitigated risks that are presented to the quality and accessibility of veterans' healthcare, we believe the return-to-office mandate in its current form is irresponsible and leaves behind millions of veterans who rely on VA employees working remotely for their care and benefits. To that end, we request that, at a minimum, you exempt employees performing the following VHA functions from the return to office order: VISN Clinical Resource Hubs, VISN Clinical Contact Centers, VHA Member Services, and community care coordination. We would also ask that you thoroughly evaluate which additional VHA functions or positions would benefit from a return-to-office exemption, to ensure veterans continue to access timely care.

Additionally, we request answers to the following questions to ensure Congress can effectively evaluate the impacts of the current return-to-office policy on VHA's workforce and ensure that your implementation of the policy does not needlessly impact veterans' access to care.

1. How many VHA employees have had their remote work and telework agreements terminated since February 3, 2025? Please provide a comprehensive list of all employees

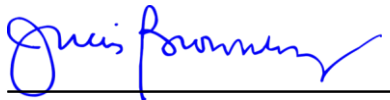
affected by the return-to-office mandate, including those that provide support to clinicians, along with their occupations and dates of their return to in-person work.

2. VA's February 3, 2025, announcement mentioned there will be exceptions for ad hoc or situational telework. Please explain what this includes and which categories of remote employees within VHA will be able to utilize this exception.
3. To which VA-owned facilities or federal buildings are VHA employees who currently work remotely being assigned? What is the capacity of these facilities to handle the influx of remote employees, and are all these locations in sufficient condition for remote work employees to report, or will renovation or reconfiguration be necessary?
4. In instances where facilities do not have sufficient space to ensure a separate, private work area for VHA clinicians, how will VA take steps to comply with federal laws like HIPAA to ensure the privacy of veteran appointments?

We ask that you provide written responses to the above questions no later than April 4, 2025. Additionally, we request that you provide a briefing for our staff no later than April 8, 2025. Should you have any questions about this request, you may contact Ms. Hannah Singer, of the office of Representative Julia Brownley, at hannah.singer@mail.house.gov.

We look forward to your response.

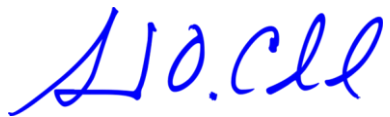
Sincerely,



Julia Brownley
Member of Congress



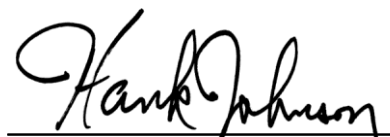
Mark Takano
Member of Congress



Salud Carbajal
Member of Congress



Delia C. Ramirez
Member of Congress



Henry C. "Hank" Johnson, Jr.
Member of Congress



Chrissy Houlahan
Member of Congress



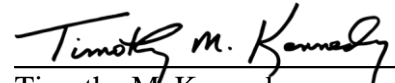
Ilhan Omar
Member of Congress



Rashida Tlaib
Member of Congress



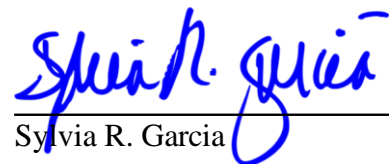
Andre Carson
Member of Congress



Timothy M. Kennedy
Member of Congress



Mike Levin
Member of Congress



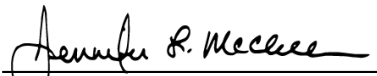
Sylvia R. Garcia
Member of Congress



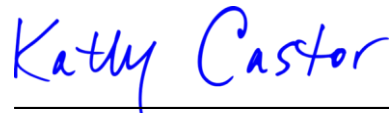
Greg Casar
Member of Congress



Paul D. Tonko
Member of Congress



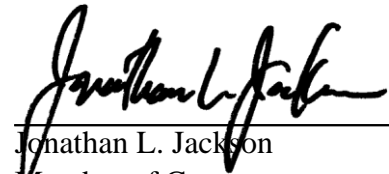
Jennifer L. McClellan
Member of Congress



Kathy Castor
Member of Congress



Gregory W. Meeks
Member of Congress



Jonathan L. Jackson
Member of Congress



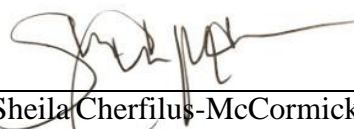
Seth Moulton
Member of Congress



Joe Neguse
Member of Congress



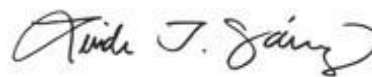
Jim Tokuda
Member of Congress



Sheila Cherfilus-McCormick
Member of Congress



Diana DeGette
Member of Congress



Linda T. Sánchez
Member of Congress



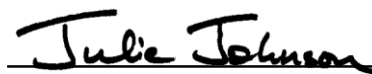
Veronica Escobar
Member of Congress



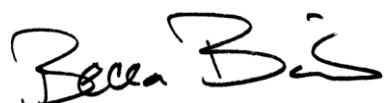
Ted W. Lieu
Member of Congress



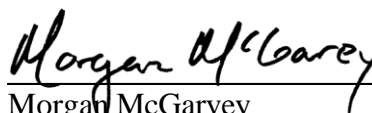
Chris Deluzio
Member of Congress



Julie Johnson
Member of Congress



Becca Balint
Member of Congress



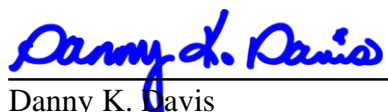
Morgan McGarvey
Member of Congress



Kelly Morrison
Member of Congress



Lauren Underwood
Member of Congress



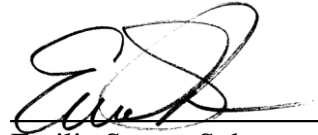
Danny K. Davis
Member of Congress



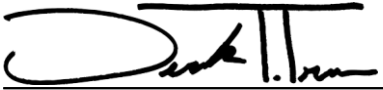
Angie Craig
Member of Congress



Lizzie Fletcher
Member of Congress



Emilia Strong Sykes
Member of Congress



Derek T. Tran
Member of Congress



Sydney Kamlager-Dove
Member of Congress



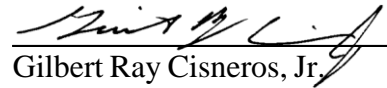
Zoe Lofgren
Member of Congress



Eric Swalwell
Member of Congress



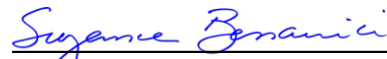
Doris Matsui
Member of Congress



Gilbert Ray Cisneros, Jr.
Member of Congress



Jared Huffman
Member of Congress



Suzanne Bonamici
Member of Congress



Jesús G. "Chuy" García
Member of Congress



Raul Ruiz
Member of Congress



Mary Gay Scanlon
Member of Congress



Herbert C. Conaway, Jr.
Member of Congress

Jahana Hayes

Jahana Hayes

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