

Commenter TP: Pine Ridge public meeting transcript

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PUBLIC MEETING:
DRAFT ENVIRONMENTAL IMPACT STATEMENT
FOR RECONFIGURATION OF
VA BLACK HILLS HEALTH CARE SYSTEM

DATE: December 2, 2015 at 1:35 p.m.
PLACE: Pine Ridge School
101 Thorpe Circle
Pine Ridge, South Dakota

PRESENTER: Ms. Mary Peters
Labat Environmental

Reported By: Jacqueline K. Perli
Registered Professional Reporter
Black Hills Reporting
1601 Mt. Rushmore Rd., Ste. 3280
Rapid City, SD 57701
605.721.2600

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Note: The verbal comments made at the public meetings were preceded by a presentation summarizing the Draft EIS.

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1 FRANK MARSHALL: Are you going to reset the
 2 five minutes?
 3 MS. PETERS: I will. I'm going to make sure
 4 you have five minutes.
 5 FRANK MARSHALL: Thank you. Good afternoon,
 6 people. My name is Frank Marshall, and I'm the
 7 former Tribal Veterans Service Officer for the
 8 Oglala Sioux Tribe. I've been involved with
 9 this program since they dropped the bomb on us
 10 on December 21st, 2012, and I've been very
 11 active in it. I still am, and I will continue
 12 to be so until the last page is turned.
 13 Now, I have questions here today because my
 14 involvement in this was determined by the VA not
 15 being entirely truthful on the information they
 16 presented to us to get this EIS going.
 17 The geographics used were not really
 18 truthful. And if they are still using those
 19 demographics, they are still telling a lie. And
 20 that's another thing. They haven't been -- I
 21 asked the VA two weeks before they dropped the
 22 bomb on us, and they weren't going to close,
 23 they said.
 24 Now, here comes the next week, this
 25 announcement that they are going to close it.

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TP-1

TP-2

TP-1: The EIS analysis is not confined to a 30-mile radius of Hot Springs. Data used in the EIS relating to the Veteran population corresponds to the entire BHHCS catchment area, and includes the latest data for the Oglala Sioux Tribe and the other Native American Tribes within the catchment area

TP-2: VA apologizes if any past statements and actions - which were made with good intentions - have caused undue hardship. However, it is not within the scope of this EIS to address and resolve those here. Rather, the focus should be on the set of alternatives proposed for evaluation in the EIS. The new preferred alternative A-2 would make health care, especially specialty care, more accessible at VA expense and save Veterans long distance travel. VA would continue to provide outpatient primary care at Hot Springs and would expand the purchased care program to include potentially hundreds of secondary and tertiary (hospitals) providers located closer to where Veterans live. See also group responses in Sections E.3.1 and E.3.3 of the Appendix E relating to distance travelled and purchased care option.

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1 They started at Hot Springs. They come here the
 2 next day. What a Christmas present, huh? It
 3 was told that the VA is headed north. Put the
 4 hardship on us in trying to get up there.

5 And what are they going to give us in
 6 return? Are they still going to have health
 7 care? Yes, but we are going to have to pay more
 8 for it. It added travel expense and time
 9 involved in getting to our health care. What
 10 are they going to give us in return, to help us
 11 to get there to our health care.

12 If they are still using the demographics of
 13 the 30-mile radius from Hot Springs, they are
 14 leaving out the 8- to 10,000 of us on the
 15 outside of that 30-mile radius.

16 Do we have a say in this matter? Are they
 17 just going to dump us and forget about us and
 18 just use your veterans within that 30-mile
 19 radius? Think about this, guys. Do they care
 20 about us enough to get our opinion on this?

21 I'm thankful that I'm being allowed to speak
 22 today, but that's not our main concern. Our
 23 elderly veterans who have a fixed income and
 24 would have trouble getting to the VA just here
 25 in Hot Springs now have got to turn around and

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TP-3

TP-1

TP-4

TP-5

TP-3: See group response in Section E.3.1 of Appendix E relating to distance travelled.

TP-4: Public input is very important, and VA's outreach efforts for this EIS extended beyond a 30-mile radius to include the entire BHHCS service area. This includes the Oglala Sioux Tribe and all other Tribes in the catchment area. Section 6.3 describes the specific consultation activities VA conducted with the Tribes to specifically identify their concerns and get their input regarding the proposals being evaluated in the EIS.

TP-5: See related response to TP-2 and group response in Section E.3.1 of Appendix E relating to distance travelled.

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1 travel all the way to Rapid or Fort Meade.
 2 That's a slap in the face for those older
 3 guys and the fixed-income people. I'm getting
 4 into that category now, so I can say more about
 5 it.
 6 Anyway, I thank you all for coming, and I
 7 thank the VA for being here, allowing us time to
 8 make our presentation. I'm talking too fast. I
 9 wanted to use the whole five minutes. Anyway,
 10 you heard the gist of what I wanted to present
 11 today.
 12 And the EIS, it says, Draft, up there in the
 13 beginning. My definition of drafts, a draft is
 14 something that can be altered or amended. So we
 15 still have time to make some changes in there
 16 with the benefits in some way.
 17 If they were still going to move, we need
 18 to have some exchange there. We need to get
 19 some guarantees that we're going to help -- get
 20 some help from the VA to get to our health care.
 21 And we want to strive to make that.
 22 And I thank the Save the VA committee from
 23 Hot Springs for all the work they did in
 24 opposing this closure. And we, from the tribe,
 25 and I can't speak for Rosebud or Eagle Butte,

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TP-6

TP-7

TP-6: The DEIS stage of the NEPA process indicates that a decision has not yet been made. However, the limited scope of the EIS does not include changes related to health care benefits for Veterans.

TP-7: VA recognizes the challenges Veterans may face in accessing the care they need when the service might be located far away. See related response to TP-2 and group response in Section E.3.1 of Appendix E relating to distance travelled.

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1 but I think they are all against it for the same
2 reasons I'm speaking about.

3 They are all being added travel time and
4 expense to get to their health care by this VA
5 doing what they are trying to do. So we're not
6 going to give up. We still have time to get
7 these done. I think they are not going to close
8 for another year and a half or so anyway, if
9 they do close. So we still have time to get
10 stuff done, and we'll keep working to do that.

11 And I thank you for allowing me to speak up
12 here. Thank you very much.

13 MS. PETERS: Thank you. Denver American
14 Horse.

15 DENVER AMERICAN HORSE: Hello. (Speaking in
16 Native language.)

17 My name is Denver American Horse, and I am
18 the County Veterans Service Officer for Oglala
19 Lakota County. I work at seven districts out of
20 the nine. Wanblee, Bennett/Jackson, and Allen,
21 and Bennett County. So I work with the seven
22 districts out of the nine on this reservation.

23 And back in October we had counted the
24 veterans that we currently have, the living
25 veterans that we have are -- the number that we

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TP-8

TP-8: Your opposition to the closure of Hot Springs is noted and included in the public record for this EIS.

TP-9: Thank you for the information on living veterans in your districts. The Veteran population data used in the EIS includes the current data for all the Tribes in the service area.

TP-9

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1 currently have is 1,387. 1,387 living veterans
2 on the Pine Ridge Reservation. And of course,
3 that number could go up and down.

4 We recently lost several veterans within the
5 last four days, week, and there are some
6 veterans out there that we have not contacted
7 yet, but they are coming in through the veterans
8 count program on Monday.

9 On Monday I was able to visit with the --
10 one of the newly discharged veterans who came
11 back on November 15th, and so I was able to get
12 him enrolled in our health care system, was able
13 to get the bonus application sent for him, and
14 we are currently working with another item or
15 two.

16 So we do have veterans coming in fairly
17 regularly, and that is a good thing. My
18 colleague, Ms. Jerlene Arredondo, Oglala Sioux
19 Tribal Veterans Service Officer, and she's with
20 us here. If you'd raise your hand. Jerlene,
21 she's here. We work together.

22 And my personal story for the VA campus in
23 the Domiciliary is that I was fortunate enough
24 to have spent nine months in the Domiciliary
25 and -- from August 1988 to May of 1989.

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TP-10: Thank you for sharing your positive treatment experience at the domiciliary in Hot Springs. Your support to continue operating at the Hot Springs campus is noted and is part of the public record for this EIS.

TP-10

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1 And with the help of the Domiciliary, I was
 2 able to get counseling, and I was able to get --
 3 get on the good, right road, the path of
 4 sobriety.
 5 So the Domiciliary is a valuable place for
 6 all of us, those of us who need it. And it
 7 continues to be a resource that is much needed
 8 by all of us.
 9 We currently go to board meetings in
 10 Hot Springs. As it is, Hot Springs is a trial
 11 for some of us with mileage. And Fort Meade,
 12 the distance as it is, it is a hardship on some
 13 of our older veterans.
 14 As Mr. Marshall indicated, we are on a fixed
 15 income, and so generally we always need some
 16 assistance to get to our appointments.
 17 I would like to add that a lot of us do not
 18 particularly like being on the interstate,
 19 especially the older veterans, and so that in
 20 itself is a hardship.
 21 I do want to thank all of you here today,
 22 and I want to say welcome to everybody. In
 23 closing, I would like to say that I had -- I had
 24 suggested that if Secretary McDonald decides to
 25 close the VA in Hot Springs, I had suggested

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TP-11

TP-12

TP-11: VA recognizes the challenges Veterans face in accessing the care they need when the service might be located far away. See related response to TP-2 and group response in Section E.3.1 of Appendix E relating to distance travelled.

TP-12: Your comment is noted. The public has a right to file an injunction or seek judicial review.

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1 that the tribe file an injunction.

2 And I am already doing my homework, possibly

3 filing an ethics violation. I'm not sure how

4 that will fly, but I'm currently looking at

5 that. So thank you for giving me time to make

6 some comments. (Speaking in Native language.)

7 MS. PETERS: Thank you. Robert Two Bulls.

8 Do you want to come up or you want me to bring

9 the microphone back to you?

10 ROBERT TWO BULLS: My name is Robert

11 Two Bulls. I live about 50 miles north of here

12 on Cuny Red Table. And currently this morning

13 we drove up, this morning when we drove up, my

14 daughter and myself, and only to attend this

15 meeting because, you know, I have great concerns

16 about Lakota elders.

17 I'm concerned about Lakota veterans across

18 the reservation because I think most of them,

19 maybe all of them, are going through what I'm

20 going through. You know, some of us in the

21 category of -- they put us in a category. My

22 category is that I'm not eligible for, you know,

23 that traveling pay. So I'm involved with this

24 co-pay. And I've been going through that for

25 many years now.

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TP-13

TP-13: VA recognizes the challenges Veterans may face in accessing the care they need when the service might be located far away. See related response to TP-2 and group response in Section E.3.1 of Appendix E relating to distance travelled.

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1 And what I have to say is that veterans
2 across the reservation, you know, like I say,
3 from Wanblee to, you know, coming to east of
4 here, Oglala, Red Shirt Table, you know, I'm
5 sure these guys have a hard time going to these
6 places like Fort Meade.

7 And you know, it's really hard for them to
8 make that trip to Fort Meade. For me, I have to
9 go to Rapid City and on to Fort Meade, I maybe
10 have a two-hour drive, two-and-a-half-hour
11 drive.

12 And then I think it's a dangerous place to
13 go, a dangerous place to drive because right now
14 they say 80 miles an hour. You know, trucks
15 going by there at 80 miles an hour, my old car
16 is just barely going down the interstate. And I
17 wonder how many veterans go through that. I bet
18 many, many of them.

19 And that's why, you know, this place was
20 advertised in the paper, and I think that's a
21 reason a lot of them didn't come. They probably
22 think, What the heck, you know. They are going
23 to do it anyway. I think that's what I feel.

24 You know, we marched -- we march and we got
25 together with other Indians and Lakotas, same

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TP-13

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1 way in Hot Springs, and we marched. And at that
 2 time we said, No, don't close this hospital.
 3 And yet, you know, two years, three years
 4 later, they approved that. Everything is going
 5 good to them. And yet we're here again trying
 6 to say, No, enough is enough. But we go on from
 7 here. Maybe three, four days later, it's going
 8 to be approved.
 9 You know, sometimes I always think about VA
 10 treating us like cattle. You know, Lakota
 11 people have always, you know, respected their
 12 elders. And to me, when I was in the hospital
 13 in Sturgis, no one came to visit. My wife, of
 14 course, come. Maybe my daughters come. No one
 15 else.
 16 And yet, you know, when I was working
 17 with -- in Utah, the Utah tribe, I got sick, I
 18 was in the hospital, seemed like everybody comes
 19 every day. And that's the way Lakotas always --
 20 that's their way of doing things. They respect
 21 one that's, you know, in the hospital. Respect
 22 those that have died. And all get together, eat
 23 together, weep together. And that's going to
 24 stop that.
 25 I don't think the VA, they understand. All

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TP-14

TP-14: Thank you for your comment. VA recognizes your opposition to closing the hospital at Hot Springs and it is now part of the public record for this EIS. The VA cares deeply about our Veterans and about delivering the best possible care to them, which we think the proposed reconfiguration will allow. Comments related to past VA management statements or actions are not addressed as they are not relevant to the scope of this EIS.

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1 they understand, to me, is, you know, saving
2 taxpayers money, I think. I think that's what
3 they are doing.

4 And the hospital in Hot Springs is in good
5 shape. I always go there. I've been going
6 there ever since I got out of the service. And
7 they always treat me good. Of course, I have to
8 pay my own gasoline and all that stuff, all my
9 meals there. And not -- they say I'm not a
10 disabled veteran.

11 Anyway, excuse me. I have lung problems.
12 Excuse me. Because I was involved at the atomic
13 veteran, I was an atomic veteran, and I was in
14 Utah there in the 1950s. And because of that, I
15 have -- put in for disability, and they rejected
16 me three times.

17 And here I am, you know, I'm 80 years old
18 and have to pay my way through the VA. Once in
19 a while, they pay my hospital bill. That's once
20 in a while. And to me, I think this is just
21 another, what they call a formality. Formality.
22 Just a way, We're going to do this, and I don't
23 care what veterans say, we're still going to do
24 it. You mark my word.

25 MS. PETERS: Thank you. George.

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1 GEORGE WILSON: My name is George --
 2 MS. PETERS: Sorry. George.
 3 GEORGE WILSON: My name is George Wilson. I
 4 live in Pine Ridge. I'm a veteran. I don't
 5 represent any organization, but I have a lot of
 6 friends that asked me to speak.
 7 My first main concern is, Rapid City is
 8 notorious for racism against our people. Now
 9 they've thrown beer on our children, they've
 10 abused our elders, they've done so many things,
 11 the community of Rapid City, and I think it's
 12 important for the VA and for the EIS process to
 13 take into account the documented facts that
 14 racism still exists in Rapid City. And I, for
 15 one, don't want to go there. I only go there
 16 when I have to.
 17 The police are more vigilant. Our people
 18 get more tickets, more traffic citations.
 19 There's a recent study on that. That wasn't in
 20 the EIS.
 21 We have a long history with Hot Springs, and
 22 it's always been -- we've always been treated
 23 equally and with dignity and respect when we go
 24 to Hot Springs. And that's by the business
 25 community, by the people that live there, as

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TP-15

TP-15: VA recognizes that larger cities like Rapid City may have more challenges for Native American Veterans to face than in Hot Springs. However, VA believes that it offers significant advantages to help ensure successful treatment for Veterans as part of the RRTP. Regarding staffing, many of the staff currently in Hot Springs may choose to work in one of the new VA facilities in Rapid City. In addition, the preferred alternative A-2 includes a CBOC in Hot Springs and expanded options for community providers closer to where Veterans live such that additional travel may not be necessary. See also related response to TP-2 and group response in Section E.3.1 of Appendix E relating to distance travelled.

TP-16

TP16: VA is proud of the level of quality and treatment our Hot Springs facility and staff have provided to Veterans over the years; we appreciate your confirmation of this fact. Under the preferred alternative A-2, VA would continue to provide primary care and specialty services on the Hot Springs campus. See related response to TP-15 above and group response in Section E.3.1 of Appendix E relating to distance travelled.

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1 well as the providers. We won't get that in
 2 Rapid, I guarantee you.
 3 The overt racism will create problems for
 4 our veterans that will refuse or will not want
 5 to go there for services. They'll just, you
 6 know, deny their health care.
 7 And also, like what the other gentleman
 8 said, the travel assistance is -- many of us
 9 don't receive any travel because we're over
 10 income. How that can be when you're on poverty,
 11 Social Security and stuff, but we don't receive
 12 help for that.
 13 Rapid City, you're just doubling, and in
 14 some cases tripling, the amount of travel that
 15 our people have to do to get to the health care.
 16 I want to make that an emphasis that it's
 17 going to be much more expensive for us to get
 18 our needs met. A lot of us rely on family and
 19 friends to take us to our appointments, and
 20 that's a hardship on them as well. Some of us
 21 can't drive.
 22 And I wanted to mention that the data used
 23 by the Veterans Administration on the EIS is
 24 highly suspect. They've -- they've thrown out
 25 numbers on there that we don't have any way to

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TP-15

TP-17

TP-18

TP-17: VA recognizes the challenges Veterans may face in accessing the care they need when the service might be located far away. See related response to TP-2 and group response in Section E.3.1 of Appendix E relating to distance travelled.

TP-18: VA used the most up-to-date information available. The agency is responsible for Veterans health care nationwide and continually compiles data from all facilities about volumes and services. Exhibit 1 in Chapter 1 has been updated and expanded to include more current Veteran population data. However, VA is unable to update the cost information provided in the EIS due to current appropriation restrictions

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1 challenge.

2 You know, the Veterans Administration, I'm

3 sure, spent hundreds of thousands of dollars on

4 contract consultants such as Mary here and her

5 organization. Well, us veterans that are

6 opposing this plan, we haven't been given one

7 little bit of help, you know, to hire our own

8 consultants to challenge the premise and some of

9 the data used by the VA.

10 And I think that's highly inequitable, you

11 know, that they have all these million --

12 resources, and we don't have anything, and we're

13 fighting back. It's like the old David and

14 Goliath thing, you know. And we have a sneaking

15 feeling it's not going to turn out the same.

16 The other thing that I think is the -- one

17 of the EIS claims that there's no adverse

18 impacts geographically on minorities. I don't

19 know how they could even come to that

20 conclusion. You know, everybody on the

21 Pine Ridge Indian Reservation, most of the

22 veterans are poor, you know, living month to

23 month.

24 And to say that there's no adverse impact

25 financially or any other way isn't true. But we

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TP-19

TP-19: NEPA public involvement process includes opportunities for the public to provide important input into the EIS and comment on premise and data, for free, at various stages of the project, including the Draft EIS. VA recognizes that the Draft EIS is a very lengthy document and contains a significant amount of information and data to be reviewed. The Agency makes every effort to provide sufficient time for public review, typically 60 days. We note that because of the holidays last year and other factors (including additional consultations related to the Section 106 process for historic resources), the public comment period was extended several times such that the public was provided almost 8 months to review the document by the time the comment period closed on June 20, 2016.

TP-20

TP-20: The scope of this EIS is limited to analyzing the impacts from the alternatives for the physical facilities from which health care services are offered within the BHHCS catchment area. No facilities are proposed on the reservations so there would be no disproportionate impacts to Native Americans from construction activities.

The concerns relating to minorities and low income populations from operation are more tied to the change in health care services being proposed which are not subject to NEPA review and analysis in this EIS. Nonetheless, VA notes that outpatient primary care health care services would continue to be provided in Hot Springs (on the existing campus under Preferred Alternative A-2). Veterans' inpatient, long-term care, surgical and urgent care services previously provided in Hot Springs would be discontinued but Veterans would have other options available to purchase care (at VA expense) from non-VA health care providers which, in most cases, would provide care closer to where Veterans live.

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1 have no way to refute that. We don't have
 2 expensive consultants to help us come to these
 3 conclusions.
 4 So I think the EIS was -- the deck is
 5 stacked against us, upon us. You know, we just
 6 don't have the resources, the facilities, the
 7 expertise to really do justice to our cause to
 8 save the VA in Hot Springs.
 9 And I want to say, too, that the number that
 10 Denver mentioned, the 1,387 living veterans, I
 11 think that's extremely low from my -- from my
 12 information. I don't -- I think we -- it would
 13 help us to have better numbers, you know, and
 14 also to include Rosebud and Lower Brule and
 15 Fort Thompson and all the other reservations.
 16 And that's all I have to say. Thank you.
 17 MS. PETERS: Thank you, George.
 18 Edward Starr.
 19 EDWARD STARR: My name is Edward Starr.
 20 (Speaking in Native language.) I went to
 21 Vietnam in '60, and one thing I realized over
 22 there was that when the -- the people that we
 23 were shooting at, they were the same color as
 24 me. So I was -- that scared me. Because we
 25 had -- all my buddies were all over there, too.

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TP -
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TP-20 Response cont'd.

See also related response to TP-2 and group response in E.3.1 of Appendix E related to distance travelled. In some instances, such as for treatment at the RRTP in Rapid City, some Veterans (including Native American Veterans) would have to travel further, however, the travel is expected to be infrequent given the longer-term stay requirements of the RRTP. .

TP-21: Thank you for your additional information related to population data for the Native American Tribes. The Veteran population data used in the EIS includes current data for all the Tribes in the service area.

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1 And there were a lot of other soldiers that
2 were like me. They didn't want to get shot,
3 mistaken for a Vietnamese or something like
4 that.

5 So with that, what I encountered after
6 coming back to the States, and that message to
7 us. My buddies, take up (inaudible). That's
8 one thing I didn't know how to -- I forgot what
9 I was going to...

10 After I came back, I -- that was after
11 high school. I went to 'Nam and I came back. I
12 wanted to find out what -- why that happened,
13 why were we fighting, to me, those that looked
14 like me, myself.

15 So I went to school and I finished college.
16 I went on and found out a lot of things about
17 the crisis. And it was all about the finite
18 resources that we have on this earth, on the
19 land.

20 And there are people that want to profit off
21 of that. And so, as Lakota people, we were
22 stewards of this land. We were supposed to be
23 here to take care of the environment and make
24 sure the trees are in place, and the hills, and
25 that they can provide the oxygen, make sure we

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have clean water.

And one thing about the hills, you know, they were taken away from us in shortly after the '68 treaty. And to me, that was broken. Somebody broke the treaty. The United Nations has ruled that when the treaty is broken, all that was agreed has to go back to its original -- original -- originality.

So that would mean that, if this is true, that all the treaty land will revert back to the Lakota. But they say the Black Hills are a kind of hills, a lot of sacred sites up there. The Cascade, that Wind Cave, the Harney Peak, and Devil's Tower, and a whole lot more.

And there's a big -- big dinosaur up there, too. And also I call it the lizard, because in the center of -- that's near the center of the Black Hills. And those are from the stars.

So the Lakota, we need to protect these hills and anybody in it. Doesn't matter if they are black, white, because those are hills that are sacred. And we need to -- as a veteran, that's what I would like to keep.

And I got sick one time, and I had mental health about ten years. And then just recently

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TP-22: VA appreciates the all efforts of the Lakota to protect the Black Hills. Your support for keeping the Hot Springs campus open is noted and is part of the public record for this EIS. See related response to TP-2 and group response in Section E.3.1 of Appendix E relating to distance travelled.

TP-22

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1 I had back surgery, and I had heart problems.
 2 All these were taken care of by the VA. They
 3 provided my health, and I'm grateful for that.
 4 And we want that to stay in Hot Springs,
 5 stay where it's at, because it's too far to go
 6 to another place.
 7 I went to -- they sent me to Sioux Falls one
 8 time because of my heart, but that was, for me,
 9 that was too far. Okay.
 10 Well, thank you for listening. (Speaking in
 11 Native language.)
 12 MS. PETERS: Daniel.
 13 DANIEL BEARRUNNER: Okay. My name is
 14 Daniel Bearrunner. I am a -- I am the Chairman
 15 of the Oglala Lakota Veterans Association here
 16 in Pine Ridge, also a Iraqi war combat veteran.
 17 Our organization currently is staffed by
 18 just local volunteers that come in and volunteer
 19 their time to help us, as the veterans have
 20 done. One of our biggest concerns is getting
 21 our veterans to Rapid City and dealing currently
 22 with PTSD issues, suicide prevention programs.
 23 And we've been getting a lot of assistance
 24 from other entities other than the tribe itself
 25 and trying to make things work to assist our

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TP-22

TP-23

TP-23: VA recognizes the challenges Veterans may face in accessing the care they need when the service might be located far away. See related response to TP-2 and group response in Section E.3.1 of Appendix E relating to distance travelled.

VA also recognizes that Veterans health care needs require continuity of service and can benefit greatly from integration with other organizations (especially Veteran Service Organizations), Federal, state and community-based partners. While a dedicated system of health and social services for Veterans remains the core means for meeting Veterans care needs, the Veterans Access, Choice and Accountability Act of 2014 has introduced new possibilities for serving Veterans. Today, the VA is committed to a model of service that operates around the Veteran's needs, not VHAs, and to transforming VHA health services from being provider-centric to being Veteran-centric. VA believes an important element to this transformation is fostering new relationships with non-VA care and service providers and other national, state and local organizations whose services can benefit Veterans. It introduces new opportunities to provide care beyond the physical limits of VHA facilities, to allow Veterans safe, timely, efficient and coordinated services outside of VA

Commenter TP: Pine Ridge public meeting transcript

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1 veterans.

2 So I've been reaching out and doing a lot of

3 work with our veterans and -- without any kind

4 of assistance from anybody, from the government

5 or from our own tribe.

6 Anyhow, I was -- I came across these

7 resolutions the other day, and I just, for the

8 record, wanted to make sure that we got that out

9 there because I have a resolution from the

10 Oglala Sioux Tribe, I have a resolution from the

11 Black Hills Sioux Nation Treaty Council, and I

12 have a resolution from the Cheyenne River

13 Sioux Tribe.

14 And basically they all are opposed to the

15 closure or relocation of the VA facilities

16 currently in Hot Springs.

17 I was able to attend the -- one of the

18 hearings a while back in Hot Springs where there

19 was a huge turnout, and we had a delegation of

20 some representatives from Florida, Kristi Noem

21 was present, and it went pretty well, you know.

22 We said what we had to say and expressed our

23 concerns, and I believe that the delegation that

24 showed up here, the Minority Senate Affairs or

25 wherever they were from, agreed that we strongly

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TP-24

TP-24: Opposition to the closure or relocation of the Hot Springs Medical Center by the Oglala Sioux Tribe, the Black Hills Sioux Nation Treaty Council, and the Cheyenne River Sioux tribe is noted and now part of the public record for this EIS.

Commenter TP: Pine Ridge public meeting transcript

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1 opposed the relocation or closure of
 2 Hot Springs.
 3 And it is -- I don't see anything wrong with
 4 it, you know. We go there, we get our health,
 5 and you know, if it's broken, you know, why are
 6 we trying to fix it? Why are we creating all
 7 these controversies?
 8 I understand. I see all the boards here, I
 9 read all of them, and they talk about, you know,
 10 the reasons for closure and summary of why all
 11 this is going to happen. However, I just -- you
 12 know, I'm -- I myself am strongly opposed
 13 against it. And I have to look out for our
 14 veterans, our people, our elders.
 15 And especially, we have a lot of combat
 16 veterans. We have a lot of veterans, peacetime
 17 veterans from Vietnam, World War II, Korean War
 18 still alive. And they can't even get to
 19 their -- they can't even get to their
 20 appointments, you know.
 21 We're struggling. Our tribe is struggling,
 22 you know, and they are just creating more
 23 difficulty for our veterans. And this is not
 24 just our veterans here on Pine Ridge. It's
 25 veterans across the border in Gordon, in

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TP-25

TP-25: VA recognizes the challenges Veterans may face in accessing the care they need when the service might be located far away. See related responses to TP-2 and TP-23 and group response in Section E.3.1 of Appendix E related to distance travelled.

Commenter TP: Pine Ridge public meeting transcript

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1 Rushville, Scottsbluff.
 2 You have to go all the way to Hot Springs.
 3 Now they've got to go all the way to Fort Meade.
 4 And now we have veterans coming back, and
 5 they've got -- they -- they created more
 6 controversy because now we have to file these
 7 tribal claims. And these guys won't see a
 8 tribal claim for, like, two, three weeks now,
 9 from what I understand.
 10 I just stopped going. I don't even go there
 11 anymore. I don't receive any kind of help from
 12 the VA in Rapid City. I guess I went there
 13 for -- a few years ago. I went there for, like,
 14 a whole year, and not one person there told me
 15 about travel pay. I never knew anything about
 16 travel pay, you know.
 17 So I went back and I asked, and they were
 18 like, Oh, you never -- you were never advised of
 19 your -- your travel pay or anything like that?
 20 You fill out this paperwork. I said, No. I've
 21 been coming, you know, here for a whole year.
 22 So I was kind of shocked because after every
 23 appointment in Rapid City, the representative
 24 would come into the office and talk to me. How
 25 did it go? How did they treat you? How did

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TP-26

TP-26: While issues related to eligibility for, and reimbursement of, travel expenses are beyond the limited scope of this EIS, VA understands and appreciates the challenges and difficulties of driving and/or obtaining transport to health care services that might be far away and is trying to address these issues in the proposed reconfiguration. See related responses to TP-2 and TP-23 and general response in Section E.3.1 of Appendix E related to distance travelled.

Commenter TP: Pine Ridge public meeting transcript

1 this go? Not once did she say anything about
 2 travel pay. You know, we were allowed to
 3 struggle.
 4 Now the tribe has -- some are able to help
 5 you get up there, but how is the veteran going
 6 to get home, you know? They can assist you with
 7 some gas to get you to Fort Meade. But now with
 8 the controversy over the travel, these guys
 9 aren't able to get home, you know. So that's a
 10 just another problem for our veterans, and I'm
 11 deeply concerned about that.
 12 But you know, we talk about treaty rights
 13 and we talk about treaties. And I was reading
 14 the resolution from the Oglala Sioux Tribe
 15 talking about whereas, the Oglala Sioux veterans
 16 living on the Pine Ridge Indian Reservation will
 17 have to go much further to obtain certain
 18 services from the Veterans Administration if
 19 these services are not available at Hot Springs,
 20 and this will cause undue and unwarranted and
 21 increased mental, physical, financial hardship
 22 on veterans and their families;
 23 Whereas, because the federal government owes
 24 all veterans extensive health care services as a
 25 result of obligations for all veteran services

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TP-26

TP-27

TP-27: VA recognizes the challenges Veterans may face in accessing the care they need when the service might be located far away. See related responses to TP-2 and TP-23 and group response in Section E.3.1 of Appendix E related to distance travelled.

Commenter TP: Pine Ridge public meeting transcript

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1 that were provided to the United States, as well
 2 as treaty obligations as ratified by Congress in
 3 Article VI of the United States Constitution and
 4 to include moral obligations owed by the federal
 5 government to all tribal members, unfortunately,
 6 the health care services provided to tribal
 7 members, including veterans, are chronically and
 8 grossly underfunded annually, and;

9 Whereas, the VA Black Hills Health Care
 10 Facility is commonly seen as the best place for
 11 many Oglala Sioux Tribal veterans to get the
 12 best health care that the United States is
 13 willing to provide them, and is used by many
 14 veterans living on the Pine Ridge Indian
 15 Reservation.

16 This pretty much goes the same for the Black
 17 Hills Sioux Nation Treaty Council. Treaty
 18 Council members from the Rosebud -- Rosebud,
 19 Crow Creek, Cheyenne River, Lower Brule,
 20 Standing Rock, and Yankton. All these members
 21 oppose the closure or the moving from Hot
 22 Springs.

23 And that's -- that's just something that we
 24 have to express, and I'm glad that we were given
 25 the opportunity to express our concerns, and I

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TP-28

TP-28: Native American Veterans would have the choice, under all alternatives, to use either a VA or IHS system for their care as the result of a national Memorandum of Understanding that has been established between VA and Indian Health Services. They would also still be able to receive primary care through the new CBOC in Hot Springs (see revised Section 2.2 of Final EIS).

Opposition of the closing the Hot Springs Medical Center by the Black Hills Sioux Nation Treaty Council, Rosebud, Crow Creek, Cheyenne River, Lower Brule, Standing Rock and Yankton is noted.

Commenter TP: Pine Ridge public meeting transcript

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thank you very much.

MS. PETERS: That's all the names we have that signed up. We have a few more minutes, if anyone has any other comments on the draft EIS that they want to make. If not, we'll be here for a little while longer, if you want to just look at the boards or chat with us.

Otherwise, again, we appreciate you coming out this afternoon, listening to us. And we appreciate hearing your comments, and they will all be addressed in the final EIS. Thank you.

(The proceeding concluded at 2:27 p.m.)

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Commenter TR: Rapid City public meeting transcript

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PUBLIC MEETING:
DRAFT ENVIRONMENTAL IMPACT STATEMENT
FOR RECONFIGURATION OF
VA BLACK HILLS HEALTH CARE SYSTEM

DATE: November 30, 2015 at 5:33 p.m
PLACE: Best Western Ramkota Hotel
2111 N. LaCrosse Street
Rapid City, South Dakota

PRESENTER: Ms. Mary Peters
Labat Environmental

Reported By: Jacqueline K. Perli
Registered Professional Reporter
Black Hills Reporting
1601 Mt. Rushmore Rd., Ste. 3280
Rapid City, SD 57701
605.721.2600

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Note: The verbal comments made at the public meetings were preceded by a presentation summarizing the Draft EIS.

Commenter TP: Pine Ridge public meeting transcript	
<p>17</p> <p>1 So with that, our first speaker will be</p> <p>2 Donald Ackerman, Terry Hanson, and Ken Orrock.</p> <p>3 And then I will -- as one speaker gets finished,</p> <p>4 I'll call another one.</p> <p>5 AUDIENCE MEMBER: Before you start the</p> <p>6 speakers, I have a question on one of your</p> <p>7 slides. Would that be okay?</p> <p>8 MS. PETERS: Oh, go ahead, ask it.</p> <p>9 AUDIENCE MEMBER: Can you go back to the</p> <p>10 slide where it was talking about how the</p> <p>11 comments may potentially change. Yeah, modify</p> <p>12 alternatives. As I understand this slide, it's</p> <p>13 talking about modifying alternatives. But under</p> <p>14 this process, is it possible that the VA will</p> <p>15 choose a different alternative based on the</p> <p>16 comments that are submitted? Is that also an</p> <p>17 option, or is it simply modifying the, you know,</p> <p>18 the existing ones but the VA will stay with</p> <p>19 those alternatives?</p> <p>20 MS. PETERS: Right now, alternative A is the</p> <p>21 VA's preferred alternative but that can change.</p> <p>22 AUDIENCE MEMBER: Okay. Thank you.</p> <p>23 MS. PETERS: Uh-huh. Okay. So again,</p> <p>24 Donald, Terry, and Ken.</p> <p>25 KEN ORROCK: I'm going to let the commander</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-1: Yes, is it possible that VA will choose a different alternative and, in fact, is what has occurred. The Final EIS identifies a new preferred alternative (now referred to as Alternative A-2) that is a variation on the preferred alternative identified in the Draft EIS (Alternative A). It includes renovating Building 12 on the existing Hot Springs campus to provide a modern new CBOC, and allows the VA to maintain a presence on the existing campus. Alternative A-2 was added at the request of the historic property consulting parties (under Section 106 process) and members of the public. The basis for VA's final decision will be fully described in the Record of Decision.</p> <p style="text-align: center;">TR-1</p>

Commenter TP: Pine Ridge public meeting transcript

18

1 speak and I'll speak after him.
2 MS. PETERS: If you'd give me just one
3 second, please.
4 Okay.
5 TERRY HANSON: My name is Terry -- can you
6 hear me?
7 My name is Terry Hanson. I'm the Commander
8 of the South Dakota Department of American
9 Legion. I'd like to say thank you first for
10 extending the period to February 5th. And as
11 far as that goes, we stand positive on what we
12 can do. We can work together and make this
13 work.
14 And the best thing about extending this
15 period is, we can actually give this forward to
16 our national organization. It gives them more
17 time to digest this EIS, and there will be a
18 statement forthcoming. Thank you.
19 MS. PETERS: Ken.
20 KEN ORROCK: Jacque knows to how to throw
21 things at me if I talk too long.
22 MS. PETERS: Would you turn around and talk
23 to --
24 KEN ORROCK: First, I'd just like to make a
25 comment how important this is. This gentleman

BLACK HILLS REPORTING 605.721.2600

Commenter TP: Pine Ridge public meeting transcript	
<p>19</p> <p>1 sitting here was standing watch on 2 December 7, 1941, and I was standing watch on 3 September 11th of 2001.</p> <p>4 Across 70 years, generations of veterans 5 were concerned enough to be here tonight, and I 6 think that's important to mention. So, please, 7 accept my thanks for saving the world.</p> <p>8 I had the privilege of representing the 9 American Legion as the consulting party to the 10 EIS. A couple of quick comments and ask that 11 these be included in the Environmental Impact 12 Statement.</p> <p>13 First of all, what is the timeline for the 14 implementation of alternative A? It is very 15 significant, the difference in the environmental 16 impact, if the CBOC in Hot Springs is not opened 17 at the same time the facilities in Hot Springs 18 are closed down and I am no longer able to 19 accept services down there as a veteran who 20 doctors at the Hot Springs VA.</p> <p>21 Same with the timeline for the building and 22 the opening of the MSOC in Rapid City. I think 23 that the environmental impact is significantly 24 different if we're not going to open those 25 facilities simultaneously with the closure and</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-2: The discussion of each alternative in Chapter 2 of the Draft EIS included a 5-year implementation timeline/table for each alternative. This has been replaced with a shorter and more direct discussion for each alternative related to the continuity of health services during the estimated 2 plus year construction period (depending on the alternative). As clarified in the Final EIS, no services at the existing facilities would close until the new facilities were fully operational; therefore, there is no need to address a change in service in the EIS. Section 2.3.1 of the Final EIS has also been expanded to include a description and construction timeline for the new preferred alternative A-2 (will be same as Alternative A); it further clarifies that RRTP services will not be interrupted during the transition phase (i.e., they were inadvertently left out of the existing facility for Years 1 and 2 in the Draft EIS).</p> <p>TR-3: Regarding the timeline for the MSOC in Rapid City, see response to TR-2 above. The existing CBOC would operate until the opening of the new MSOC, with no delays in service. This has also been clarified in Section 2.3 of the Final EIS.</p>

Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: right;">20</p> <p>1 the ending of provisions allowing veterans to 2 receive services at Hot Springs.</p> <p>3 And if we're going to have a delay of months 4 or even years, the Environmental Impact Study 5 doesn't effectively address that.</p> <p>6 The American Legion does not at this time 7 fully agree with the data that's been used for 8 the Environmental Impact Study, and there's been 9 no agreement amongst any of the parties that the 10 data is accurate.</p> <p>11 There was no accepted number as close to 12 these, such as the number of veterans served in 13 the catchment area that service at the VA in Hot 14 Springs, or the number of Native American 15 veterans that use the facility.</p> <p>16 None of these numbers were agreed upon, and 17 the VA's numbers alone were taken and used. And 18 I believe that's done a disservice to this 19 process.</p> <p>20 As the commander said, the American Legion 21 will be making a formal comment during the 22 comment period. But I would state that in a 23 meeting with Secretary McDonald in Baltimore in 24 August of this year, myself, Paul Evanson, the 25 new Executive Committeeman from the American</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-4: Regarding data concerns expressed by many commenters, including the American Legion, VA has used the most up-to-date information available. The agency is responsible for Veterans health care nationwide and continually compiles data from all facilities about volume and services. Exhibit 1 in Chapter 1 has been updated and expanded to include more current Veteran population data. However, VA is unable to update the cost information provided in the EIS due to current appropriation restrictions.</p> <p style="text-align: center;">TR-4</p>

Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: center;">21</p> <p>1 Legion, Ralph Bozella from Colorado, the 2 National Veterans Affairs and Rehabilitation 3 Commission Chairman, met with Secretary McDonald 4 privately specifically on the issue of the Hot 5 Springs VA.</p> <p>6 And I would tell all of you that Secretary 7 McDonald promised to come to Hot Springs and 8 hold a public hearing and to listen to the 9 concerns of South Dakota veterans and to do all 10 this before he makes a decision.</p> <p>11 And we would ask to hold Secretary McDonald 12 to his promise, that he does come here and does 13 here the voices of the South Dakota veterans and 14 the veterans of Nebraska, Colorado, Wyoming, all 15 of which receive services from this facility.</p> <p>16 So as we continue to review this 17 800-some-odd-page document and fake input for 18 it, we'd like those comments to be taken and 19 answered.</p> <p>20 As far as what is the timeline for 21 implementation if alternative A, the VA's 22 preferred alternative, is adopted. Because the 23 significance of the impact on the environment 24 and on the human environment will differ greatly 25 if the VA is not prepared to immediately start</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-5: Your comment is noted and part of public record for this EIS. While final travel plans are subject to change, as of this time, the Secretary does intend to travel to South Dakota prior to making a final decision.</p> <p style="text-align: center;">TR-5</p>

Commenter TP: Pine Ridge public meeting transcript	
<p>22</p> <p>1 providing services on the termination of the</p> <p>2 operations on the Hot Springs campus.</p> <p>3 So, thank you very much, and thank you on</p> <p>4 behalf of the 22,000 members of the American</p> <p>5 Legion of South Dakota for coming out on this</p> <p>6 cold night. And again, thank you, sir, for your</p> <p>7 service.</p> <p>8 MS. PETERS: After Don it's going to be</p> <p>9 Jerry Lolley and then Stan Lieberman.</p> <p>10 DON ACKERMAN: I have three questions that</p> <p>11 have to be answered. If you want to answer them</p> <p>12 now, by law they need to be answered. My first</p> <p>13 question is, who is paying for this hall? Who</p> <p>14 is paying the bill on this hall?</p> <p>15 MS. PETERS: It's part of our contract.</p> <p>16 DON ACKERMAN: Okay. That's my first</p> <p>17 question. Second question, who is paying for</p> <p>18 the VA employees in this room? There's a lot of</p> <p>19 them, and I believe we have at least one person</p> <p>20 here from Washington. There's a law that says</p> <p>21 you could not use 2015 funds for this EIS. And</p> <p>22 if you're from Washington and you're in this</p> <p>23 room, you better not be being paid because it's</p> <p>24 against the law. You understand that?</p> <p>25 (**See Footnote at end of document.)</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-6: As indicated during the actual public meeting in Rapid City, Labat paid for the public meeting space and all the other facilities used for public meetings on the EIS (i.e., scoping and comments on the Draft EIS). Such costs were included in the original contract between Labat and VA, set up in 2014 when the period of performance began.</p> <p>TR-7: VA funding for this fixed price project was allocated in 2014. This money has been budgeted to cover expenses during the entire period of performance of the EIS contract, including ongoing efforts in 2016.</p>

Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: right;">23</p> <p>1 I'm going to make a couple comments and I'll</p> <p>2 quit. According to the report that you provided</p> <p>3 to the <i>Rapid City Journal</i>, what they presented,</p> <p>4 they said that you made this decision on A based</p> <p>5 on cost.</p> <p>6 And I know other issues, but you said in the</p> <p>7 <i>Rapid City Journal</i> by cost.</p> <p>8 During the EIS period there was a</p> <p>9 Congressional hearing, field hearing at</p> <p>10 Hot Springs, South Dakota. In that hearing,</p> <p>11 Secretary McDonald stated that he has billions</p> <p>12 of dollars to rehab a facility that's an</p> <p>13 environmental -- that's a national landmark.</p> <p>14 The cost for the VA to do any of the</p> <p>15 rehabilitation of that facility is zero. That</p> <p>16 is not what your report says. You have failed</p> <p>17 to put correct data in your report. There's no</p> <p>18 cost to the VA to rehab the facility in</p> <p>19 Hot Springs, South Dakota. That is just one of</p> <p>20 many inconsistencies in your report.</p> <p>21 And I would challenge anybody in the VA</p> <p>22 that's sitting here today to tell me that</p> <p>23 Secretary McDonald -- excuse me, that</p> <p>24 Representative Miller lied. You didn't put it</p> <p>25 in your report.</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-8: VA's identification of Alternative A as the preferred alternative in the Draft EIS, and A-2 as the preferred alternative in the Final EIS is not based on cost. Nor does naming an alternative as a preferred alternative indicate that a decision has been made. The final decision will be made by the Secretary and it will be based on multiple factors, of which, cost is only one. The full rationale will be explained in the Record of Decision.</p> <p>TR-9: Statements related to VA budget and funding availability are not within the limited scope of this EIS to address. Also, VA's decision regarding the proposed reconfiguration will not be based on cost alone.</p>

Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: right;">25</p> <p>1 that the retired community in Rapid City would</p> <p>2 enroll for VA Health Care.</p> <p>3 Well, it was successful. But to staff the</p> <p>4 clinic in Rapid City, we pulled staff out of</p> <p>5 Hot Springs and Fort Meade.</p> <p>6 As more work was put in to the Rapid City</p> <p>7 clinic, the amount of work that the doctors and</p> <p>8 the nurses and the staff at Hot Springs and at</p> <p>9 Fort Meade, the amount of work that they had to</p> <p>10 do for the veteran community started to decline.</p> <p>11 Therefore, their proficiencies and their</p> <p>12 skills in certain areas started to decline</p> <p>13 because they weren't being used.</p> <p>14 The EIS in my opinion is missing at least</p> <p>15 one alternative, or a modification to F, if you</p> <p>16 will. And that alternative would be to close</p> <p>17 the clinic in Hot Springs [sic], because the</p> <p>18 folks that live here don't have to travel.</p> <p>19 Even the 60 miles to Hot Springs is less</p> <p>20 than what most of our brothers and sisters that</p> <p>21 are from eastern Wyoming, the Panhandle of</p> <p>22 Nebraska, the southeast corner of Montana, all</p> <p>23 come to the VA Black Hills for health care.</p> <p>24 The farthest Rapid City veterans would have</p> <p>25 to travel for health care would be to Hot</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-12: The EIS discusses recruitment and retention of qualified clinical staff and maintaining clinical competencies in Chapter 1. See also group response in Table E-2 of Appendix E relating to past decline in services and how it is handled in the Final EIS. VA notes that under the proposed reconfiguration, no current employee would lose their job, although some may require a change in job responsibility; some Hot Springs staff may also choose to work at the new MSOC in Rapid City.</p> <p>TR-13: The proposed reconfiguration calls for replacing the existing CBOC in Rapid City with an MSOC with expanded services. It also includes continued outpatient primary care services in Hot Springs. Both locations would have some level of health care services and serve geographically different Veteran populations.</p>

Commenter TP: Pine Ridge public meeting transcript

26

1 Springs, and that's only 60 miles.

2 So I think the alternatives are either short
3 in number, or F maybe could be modified to take
4 the CBOC out of Rapid City.

5 MS. PETERS: Stan. Stan Lieberman, is that
6 you? Do you want to --

7 MR. LIEBERMAN: I'm not mad at anybody. And
8 I already met a couple from Hot Springs, and I
9 want to welcome you people from Hot Springs. My
10 son got back from Vietnam and he was in pretty
11 bad shape. We drove him down to Hot Springs,
12 got excellent care there. He was there for
13 several days.

14 And it is a long drive from Rapid City to
15 Hot Springs. Somebody on television the other
16 night said it's a long drive from Hot Springs to
17 Rapid City. I don't want to see the hospital
18 close at Hot Springs.

19 I've had a great deal of wonderful treatment
20 with the VA. I've been getting my prescriptions
21 from the VA for years. I call up on the
22 telephone, the next day in my mailbox is my
23 prescription.

24 I've been up to Fort Meade for some
25 treatment. They meet you at the door, the

BLACK HILLS REPORTING 605.721.2600

TR-14: Your support to keep the hospital at Hot Springs open is noted and included as part of public record for this EIS. Note that under the expanded purchase care program now available to eligible Veterans in the BHHCS, Veterans will be able to choose among several community providers in the service area.

TR-14

Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: center;">27</p> <p>1 doctor's there, and five minutes, I'm getting 2 X-rayed.</p> <p>3 And let's talk about Rapid City. 4 Rapid City, what we have here, what we have here 5 is very good with what they have. The people 6 that work at the clinic here are the funniest 7 people. The doctor there is a buddy of mine, 8 and it's a pleasure to go there.</p> <p>9 However, before -- when you do get there, 10 they can give you shots, they can take your 11 blood pressure, they can check urinalysis, and 12 they can give you some advice probably.</p> <p>13 But they don't -- they do not have 14 ultrasound, they do not have X-ray, they do not 15 have CAT Scan, and they are only open from 9:00 16 to 4:00, monday through Friday. And the biggest 17 problem of all, they do not have beds, and VA 18 has hospital beds.</p> <p>19 We have 12,000 veterans in Pennington County 20 and you're -- I'm very fortunate, I've got 21 Medicare. I go to the hospital. I get 22 first-class treatment, no problem.</p> <p>23 But a young veteran, if he has an emergency, 24 we have an excellent hospital here. You can go 25 to Regional, they'll give him first-class</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-15: Thank you for your comment. Under the proposal, the existing health services in Rapid City would be further expanded to include an MSOC as described in Table 2-1 of the EIS. It also includes access to services at Rapid City Regional, and other community providers, which are made available to eligible Veterans under the expanded purchased care (i.e., care in the community) program.</p> <p>TR-16: VA appreciates your positive feedback on the health care services offered in Rapid City. The proposed reconfiguration does not include a new VA hospital in Rapid City - none of the alternatives do. Under the care in the community program that is part of all the alternatives, eligible Veterans could have access, at VA's expense, to Rapid City Regional hospital - a full service hospital - as well as hundreds of other community providers throughout the catchment area. Chapter 2 of the EIS has been revised to expand on this element of the proposal.</p>

Commenter TP: Pine Ridge public meeting transcript	
<p>28</p> <p>1 treatment. But he has no insurance possibly,</p> <p>2 has no money, and still they give him good</p> <p>3 treatment.</p> <p>4 I guess my Medicare comes along, and my</p> <p>5 supplement on my insurance helps pay for the</p> <p>6 young veteran. Jeb Bush said today we're at</p> <p>7 war, and if we're at war, we're going to have a</p> <p>8 lot more veterans coming in.</p> <p>9 So naturally, I'm in support very much and I</p> <p>10 hope I live -- I'm 98 years old. I hope I live</p> <p>11 to see a new hospital, veterans hospital in</p> <p>12 Rapid City.</p> <p>13 One more comment. <i>Rapid City Journal</i>, and I</p> <p>14 agree with them, said that a Congressional group</p> <p>15 do not support a VA hospital in Rapid City.</p> <p>16 Thank you very, very much.</p> <p>17 MS. PETERS: Qusi. After Qusi it will be</p> <p>18 Pat and Amy.</p> <p>19 QUSI AL-HAJ: That's what I get for not</p> <p>20 reading the list. I thought it was a sign-up</p> <p>21 list, but I'll ask the question anyway.</p> <p>22 So, my name is Qusi AlHaj. I work for</p> <p>23 Senator Thune in Rapid City. The question I</p> <p>24 have is the following: To what extent does your</p> <p>25 company go to verify the integrity of the data</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-17: There are no plans to construct a VA hospital in Rapid City.</p> <p>TR-18: Labat relied on data provided by the VA relating to the Veteran population within the BHHCS catchment area (e.g., total population, state and county of residence, patients served, type of care received, etc.). Labat then further organized and grouped the data to develop the tables in the EIS. There was no need for independent verification since VA is the Agency responsible for compiling Veterans' health care data and BHHCS had already conducted its own internal quality control reviews. Data sources are identified in the text where appropriate, and full citations are included in EIS Chapter 8.0 (References Cited), broken out by chapter. All references are part of the administrative record.</p> <p>According to the CEQ NEPA regulations at 40 CFR 1506.5(c), it is the responsibility of the Agency to independently evaluate the EIS and take responsibility for its scope and contents.</p> <p>TR-17</p> <p>TR-18</p>

Commenter TP: Pine Ridge public meeting transcript

29

1 that you have? Because, you know, your whole
2 proposal is based on the assumption that the
3 numbers you were given are accurate. So, what's
4 the process?

5 You may answer it now or perhaps just take
6 it as a part of the record, because that's
7 really at the core of this EIS. If you're
8 working off false numbers, which is -- that's
9 been the contention all along, is that the
10 numbers just do not add up, then obviously any
11 decision that you make will be false.

12 AUDIENCE MEMBER: Speak up.

13 MS. PETERS: I will give a quick reply to
14 that. If you look at the reference section, for
15 each of the sections in the EIS, all of the
16 references are listed.

17 AUDIENCE MEMBER: Can you use your
18 microphone.

19 QUSI AL-HAJ: So you say the reference,
20 that's the source, that's where the numbers came
21 from. But does the part of what you do in the
22 EIS process, do you verify these numbers? To
23 what extent do you go back to basically make
24 sure you're working off good solid numbers?

25 MS. PETERS: By referencing the references.

BLACK HILLS REPORTING 605.721.2600

Commenter TP: Pine Ridge public meeting transcript

30

1 QUSI AL-HAJ: Okay. Thank you.

2 MS. PETERS: Pat and Amy. Those are the

3 last two that have signed up to speak. And we

4 have plenty of time, then we'll open the floor

5 after Pat and Amy.

6 PATRICK RUSSELL: My name is Patrick

7 Russell. I am the president of the American

8 Federation of Government Employees representing

9 the employees at the Hot Springs VA Medical

10 Center. And I am the Co-chair of the Save the

11 VA committee in Hot Springs.

12 I've gone through portions of the

13 Environmental Impact Statement, and I'm very

14 concerned and wondering how the people came up

15 with some of the numbers that we have in there.

16 For instance, in the Environmental Impact

17 Statement for the Save the VA proposal, it

18 suggests that there must be a new facility built

19 to accommodate 82 patients. They got this

20 number from the Save the VA proposal that said

21 the renovation of the Domiciliary could be done

22 to accommodate up to 200 patients.

23 The consultants, Jones, Lang and Lasalle

24 made a determination that they could only

25 accommodate 118 patients in the Domiciliary,

BLACK HILLS REPORTING 605.721.2600

TR-19

TR-19: VA has reviewed the Save the VA comments relating to errors in the assumptions developed for the analysis of the Save the VA Alternative E in the Draft EIS. VA agrees with the requested corrections and the cost estimate and analysis of Alternative E has been revised in the EIS as appropriate (Sections 2.3.5 and Chapter 4). See also group response in Table E-2 of Appendix E (Alternatives, Alternative E and Cost of Alternatives).

Commenter TP: Pine Ridge public meeting transcript

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1 therefore a new facility would have to be built
2 for 82 patients.

3 And I'm wondering if Jones, Lang and Lasalle
4 ever contacted anybody from the Save the VA
5 committee to clarify what the proposal was,
6 rather than making the assumptions that the Save
7 the VA proposal called for building another
8 facility.

9 Another error that I saw was the use of the
10 quarters at the Hot Springs campus for learning
11 centers, for educational learning centers.
12 There were to be four different areas of 600
13 square feet a piece that would be put in to the
14 quarters that are currently on the campus.

15 Again, Jones, Lang and Lasalle and the VA
16 made the assumption that there was not enough
17 room in these quarters to accommodate the
18 learning center. Therefore, another facility
19 would have to be built to accommodate the
20 learning center.

21 None of these were in the Save the VA
22 proposal. These were assumptions made by the
23 consultant, JLL.

24 Also in the Save the VA proposal, what we
25 called for was continuing a center of excellence

BLACK HILLS REPORTING 605.721.2600

Commenter TP: Pine Ridge public meeting transcript

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1 for post traumatic stress disorder, plus
 2 inpatient hospital, to bring back some of the
 3 services, like surgery and outpatient clinics,
 4 which have been lost over the years.
 5 The VA said that it would require 633
 6 employees to staff the facility. Now, if you
 7 look at the numbers historically at the
 8 Hot Springs VA Medical Center, when they had 500
 9 patients in the Domiciliary, 265 patients in the
 10 hospital, the largest number of employees they
 11 ever had was 490.
 12 But yet the VA says that to do what we are
 13 currently doing with 370 people, will now
 14 require 633. There is nothing in the
 15 Environmental Impact Statement that clarifies
 16 how they came up with these numbers.
 17 And that is what is so frustrating and
 18 confusing. Because the answers aren't in the
 19 EIS, they aren't in the references, and they
 20 aren't in the main body.
 21 And to me, the consultants Jones, Lang and
 22 Lasalle have made these determinations in
 23 conjunction with the Veterans Administration to
 24 put out to the public data which I believe has
 25 not been substantiated.

BLACK HILLS REPORTING 605.721.2600

TR-20

TR-20: VA has reviewed the Save the VA comments relating to several errors in the assumptions developed for the analysis of the Save the VA Alternative E in the Draft EIS. VA agrees with the requested corrections and has reduced the total staffing levels in the analysis of impacts of Alternative E in Chapter 4 of the Final EIS. See also group response in Table E-2 of Appendix E (Alternatives, Alternative E and Cost of Alternatives).

Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: center;">33</p> <p>1 And I think the public should be taking a</p> <p>2 hard look at any of the statements and</p> <p>3 conclusions that have been put out in this draft</p> <p>4 Environmental Impact Statement.</p> <p>5 And I would also urge the public to start</p> <p>6 making public comments and get those comments in</p> <p>7 by February 5th, or you're going to lose a</p> <p>8 resource that our rural veterans need for their</p> <p>9 health care. Thank you.</p> <p>10 AMY COLE: Hi. I'm Amy Cole from the</p> <p>11 National Trust for Historic Preservation</p> <p>12 Operation, and I have a couple things I would</p> <p>13 like to say. And then we will, of course, be</p> <p>14 submitting more detailed comments as well.</p> <p>15 So, we are first of all concerned that the</p> <p>16 alternatives that keep the existing Battle</p> <p>17 Mountain Sanitarium open and serving veterans</p> <p>18 are all described as not meeting the purpose and</p> <p>19 need.</p> <p>20 This seems to us to be an unreasonably</p> <p>21 narrow range of alternatives. Plus, it is not</p> <p>22 plainly stated why alternatives C and E don't in</p> <p>23 fact meet the purpose and need.</p> <p>24 It's also not clear why the Hot Springs CBOC</p> <p>25 and RRTP proposals described in alternatives A</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-21: See group response in E.3.2 in Appendix E relating to ability of alternatives to meet purpose and need and the range of alternatives evaluated in the EIS. Section 2.3 of the Final EIS has also been revised to clarify the extent to which each alternative meets purpose and need.</p> <p>TR-22: See response to TA-3; see revised Sections 2.3.3 and 2.3.5 in the Final EIS relating to ability of Alternatives C and E, respectively, to meet purpose and need.</p> <p>TR-23: VA identified a range of alternatives that offered varying combinations of new construction or lease for new health care facilities in Hot Springs and Rapid City, in combination with a supplemental alternative for reuse of existing campus); as well as alternatives offered by the public including renovation and reuse of existing campus, and a new hybrid alternative that included partial reuse of the Hot Springs campus (e.g., Building 12) and new construction in Rapid City.</p> <p>TR-21 TR-22 TR-23</p> <p>VA agrees that the buildings that comprise the area where veterans are medically treated on the Hot Springs campus can be renovated to meet ADA/ABA standards and provide modern quality medical care. See additional response in Table E-2 of Appendix E (Category Purpose and Need, Accessibility and Needed Renovations). However, there are still advantages to new design and construction and a change to a more urban setting for the RRTP. This is explained further in Chapter 1 of the Final EIS (Section 1.2.2.3). See also group response in Table E-2 of Appendix E (Alternatives, Alternative G) relating to reuse options under Alternative G.</p>

Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: right;">35</p> <p>1 affected by a project like this one.</p> <p>2 Thank you for your consideration. And we</p> <p>3 will again submit more detailed comments by the</p> <p>4 February deadline.</p> <p>5 MS. PETERS: Those were the only names on</p> <p>6 the speaker list. We've got some time, we'll</p> <p>7 open the floor if anyone else wants to make a</p> <p>8 public comment.</p> <p>9 DON ACKERMAN: I've calmed down some.</p> <p>10 When you look at the numbers in your report,</p> <p>11 and you look at the IG report on the VA, the IG</p> <p>12 report on the VA says the very best, the very</p> <p>13 best that the VA has done on their estimates on</p> <p>14 new facilities is a 66 percent cost overrun.</p> <p>15 Now we don't want to talk about Denver,</p> <p>16 which is a 400 percent cost overrun. The data</p> <p>17 and the people who provided the data, the VA</p> <p>18 knows is wrong.</p> <p>19 The IG report reported that their data is</p> <p>20 always wrong by a minimum of 66 percent. So you</p> <p>21 cannot use your numbers. We already have a</p> <p>22 comment that the data on the Save the VA, just</p> <p>23 an example, the Save the VA report was deflated</p> <p>24 or inflated to make it larger.</p> <p>25 And obviously the VA has always deflated</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-25: VA's past experience related to construction projects and project overruns are not relevant to the BHHCS proposal and are not within the scope of this EIS. Overruns can result from a number of unexpected factors, and cost issues associated with one project do not affect VA's ability to effectively estimate and execute other construction projects within budget. That said, the VA has revisited the cost estimates for each of the alternatives and made some additional revisions in the EIS based on public comment (e.g., corrected assumptions for Alternative E and provided more detailed breakout of cost data) and to incorporate costing for the new preferred alternative (A-2). However, VA is unable to update the cost information provided in the EIS due to current appropriation restrictions.</p>

Commenter TP: Pine Ridge public meeting transcript

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1 their numbers. And it's proven by an IG report.
2 Am I right? Did you read the report?
3 VAs are really good when they have doctors
4 taking care of patients. VAs are really bad
5 when they try to figure out how to build a new
6 facility. And that's what the report said.
7 The entire -- the information that we
8 received by a zip code use of the facilities in
9 the Black Hills Health Care, state when you say
10 that there's more veterans that are in
11 Rapid City, they are not the most veterans that
12 use the facilities.
13 You're comparing apples and oranges. And
14 you have -- we have it in writing now, because
15 the report we got was from the VA. And the
16 majority of the people that use the facilities
17 are not from Rapid City. The need to put it in
18 Rapid City is not there.
19 Everybody has to travel further when you
20 look at the data. That's a fact. It's simple.
21 You look at the zip code data. And I'm really
22 surprised that the VA does not provide you that,
23 because you could have made a real honest
24 assessment rather than just putting down what
25 they said.

BLACK HILLS REPORTING 605.721.2600

TR-26

TR-26: VA used the most up-to-date information available. The agency is responsible for Veterans health care nationwide and continually compiles data from all facilities about volume and services. Exhibit 1 in Chapter 1 has been updated and expanded to include more current and comparable Veteran population data.

Commenter TP: Pine Ridge public meeting transcript

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1 I could stand up here all day, and my report
 2 is a long report, and I'm not going to bore the
 3 people in Rapid City. I'm glad you're here. I
 4 really am. You need to understand this has
 5 never been Hot Springs against anybody else.
 6 This is our facility. "Our" meaning the
 7 veterans.

8 If this -- if this young gentleman doesn't
 9 mind traveling 60 miles --

10 AUDIENCE MEMBER: 70.

11 DON ACKERMAN: 70. 70 miles to come down
 12 and sit with me in a chair and talk, then I
 13 think that's great. Because I know the guys
 14 from Chadron, Scottsbluff are getting real tired
 15 of running that 120 miles, especially when they
 16 are going in for a colonoscopy. Try that one
 17 time. That's a long trip.

18 And they all are traveling right by
 19 Hot Springs. None of the data you provided is
 20 your purpose and need. And we'll provide that
 21 in our -- I'm a consultant, by the way, for the
 22 veterans. We'll provide the information, as
 23 consultants.

24 But my fear is, So what? You can do what
 25 you want to do, right, VA? You don't care. You

BLACK HILLS REPORTING 605.721.2600

TR-27

TR-27: VA is using the NEPA process to make an informed decision regarding the physical facilities it offers to provide health care for Veterans. This includes obtaining input from the public and analyzing the potential environmental consequences of the action. VA's goal is and will continue to be to provide safe, accessible, quality care to our Veterans.

Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: right;">38</p> <p>1 don't care what the people want and you do not</p> <p>2 care what the veterans want. It doesn't mean</p> <p>3 anything to you. You're going to push forward</p> <p>4 and do exactly what you want even though it's</p> <p>5 wrong. Thank you.</p> <p>6 MS. PETERS: Going, going, gone. One more?</p> <p>7 Anybody else want to speak?</p> <p>8 Okay.</p> <p>9 JEFF MAHER: My name is Jeff Maher. I'm</p> <p>10 with Senator Rounds' office here in Rapid City.</p> <p>11 And the question that I have is, we watched this</p> <p>12 process. The 106 process was intertwined</p> <p>13 throughout this entire walk as we went through</p> <p>14 it.</p> <p>15 And so, I'm a little puzzled because the 106</p> <p>16 Section is not yet completed, if I understand</p> <p>17 that correctly. There's still some meetings</p> <p>18 going on in that. So how do we come out with a</p> <p>19 recommendation without fully considering the</p> <p>20 historical impact, if we haven't reached that</p> <p>21 point yet where that's all been fully</p> <p>22 considered?</p> <p>23 Because we have heard -- and I guess my</p> <p>24 question would be is, do we know what the costs</p> <p>25 of maintaining these buildings to historical</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TR-28: see group response in Table E-2 of Appendix E (Integration of NHPA Section 106 Process) relating to the NEPA/NHPA process.</p> <p>TR-29: Measures to resolve adverse effects such as the long-term preservation plan and the marketing strategy are designed to be flexible enough to accommodate the realities of closing and possibly vacating the Hot Springs VA campus. VA is aware that these programs may prove expensive and time-consuming if VA decides to vacate the campus in whole or in part prior to identifying a reuse partner or if a reuse partner cannot be identified.</p> <p style="text-align: center;">TR-28</p> <p style="text-align: center;">TR-29</p>

Commenter TP: Pine Ridge public meeting transcript

39

1 requirements is going to be? And I would think
 2 that that would factor heavily into the overall
 3 projected costs.

4 And so, at some point I would hope that
 5 would come out before a decision is made,
 6 because I've heard some large numbers in the
 7 area of \$2 million. I don't know if that's
 8 correct or not. But if we have a \$2 million
 9 factor per year, projected over 30 years as
 10 you're talking about, that's an additional \$60
 11 million to be considered versus one of the
 12 alternatives. So that would be my question.

13 MS. PETERS: Okay. Okay. If there's no one
 14 else that wants to speak. Again, thank you
 15 for -- no one? Okay.

16 Thank you for coming out in the cold. And
 17 tomorrow night, same time in Hot Springs if you
 18 want to join us down there. The doors open at
 19 5:00 at the Red Rock River Resort. And the
 20 meeting will start at 5:30.

21 And I'll even go faster through the summary
 22 of the impacts tomorrow night.

23 (The proceeding concluded at 6:25 p.m.)

24 *****FOOTNOTE: On December 1, 2015 at the Hot Springs
 25 Hearing, a request was made by Mr. Ackerman to make

BLACK HILLS REPORTING 605.721.2600

Commenter TP: Pine Ridge public meeting transcript

40

1 correction to comments he made in this hearing. The
2 transcript of the proceeding cannot be changed as it
3 is a verbatim record. However, the following are
4 comments from the Public Hearing in Hot Springs that
5 he has requested be inserted into this document:

6 DON ACKERMAN: Before you start your clock.
7 I need two corrections for yesterday. Okay.

8 My first correction is, in my testimony I
9 stated Representative McDonald twice, meaning
10 Representative Miller. So replace that on my
11 testimony yesterday, because it was
12 Representative Miller that gave the billion
13 dollars availability to the leadership to revamp
14 that facility.

15 Additionally, I had asked a question of you,
16 and I didn't ask it properly. This is my
17 question to you: Has Labat received any 2015
18 funds for this year?

19 MS. PETERS: No.
20
21
22
23
24
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BLACK HILLS REPORTING 605.721.2600

'TR-30: In response to a direct question to Labat during the actual meeting, Labat indicated that it has not received any 2015 money from the VA. All funds that have been used on this EIS were allocated in 2014.

Commenter TS: Scottsbluff public meeting transcript

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PUBLIC MEETING:
DRAFT ENVIRONMENTAL IMPACT STATEMENT
FOR RECONFIGURATION OF
VA BLACK HILLS HEALTH CARE SYSTEM

DATE: December 3, 2015 at 6:31 p.m

PLACE: Gering Civic Center
1050 M Street
Gering, Nebraska

PRESENTER: Ms. Mary Peters
Labat Environmental

Reported By: Jacqueline K. Perli
Registered Professional Reporter
Black Hills Reporting
1601 Mt. Rushmore Rd., Ste. 3280
Rapid City, SD 57701
605.721.2600

BLACK HILLS REPORTING 605.721.2600

Note: The verbal comments made at the public meetings were preceded by a presentation summarizing the Draft EIS.

Commenter TP: Pine Ridge public meeting transcript

17

1 you.
 2 So the first people -- got a long list.
 3 Homer Charo, William Dennis, and Fred
 4 Dabrovolyay.
 5 FRED DABROVOLAY: Dabrovolyay. Just
 6 pronounce every letter.
 7 MS. PETERS: That's a lot. So Homer,
 8 William, and Fred, if you want to --
 9 AUDIENCE MEMBER: I didn't know what I was
 10 filling out, I guess.
 11 MS. PETERS: That's okay. If you don't want
 12 to speak, you can pass.
 13 You need a microphone back here? Chris, you
 14 want to hold this, please.
 15 HOMER CHARO: Okay. I want to, first of
 16 all, thank all these veterans, men and women
 17 that are vets. Thank you for showing your
 18 interest in this, what's going on here tonight.
 19 One of the first things that made my impact
 20 as I received some of these handouts was one of
 21 the comments, it says on here, The number of
 22 negative comments an agency receives does not
 23 prevent an action from moving forward.
 24 That kind of nullifies anything that I have
 25 to say. But I would like to ask if there's any

BLACK HILLS REPORTING 605.721.2600

TS-1

TS-1: VA recognizes that the majority of public opinion is in opposition to the VA's preferred alternative. VA also understands this is a very emotional issue for Veterans and their families; even though many of their concerns do not relate directly to the scope of this EIS which is limited to impacts from the physical facilities in which health care services would be provided to Veteran. As a result, VA wanted to make it clear to the public that its decision will not be based on public opinion/sentiment/opposition alone, as explained in the handouts. Nor is VA required to select the alternative with the least environmental impacts. NEPA requires only for the Agency to make an informed decision, with the final decision taking into account a number of factors The basis of the final decision will be described in detail in the Record of Decision.

Commenter TP: Pine Ridge public meeting transcript

19

1 back in what's called the world, we fight the
 2 VA. That's why I was wondering if there was any
 3 Hot Springs reps here, because we were sent a
 4 bus to pick me up when I was -- I didn't -- I
 5 wasn't drafted. I joined right before I was
 6 drafted. I went Air Force. But they sent a bus
 7 for me.

8 Now I got to travel further and further.
 9 The last procedure I had, I had to go to
 10 Fort Meade. That's not moving it closer and
 11 closer to me. It's moving it further away.

12 So I'm going to cut my time short. I want
 13 to let some of these other gentlemen and ladies
 14 speak. Thank you for your time.

15 MS. PETERS: So, William?

16 WILLIAM DENNIS: Yes, ma'am.

17 MS. PETERS: And after William, Fred, you
 18 don't want to -- okay. Then it'll be
 19 Rod Maggart and Steve Kaufman. You ready?

20 WILLIAM DENNIS: Yes. Anytime. I'm
 21 William Dennis, and I'm a Vietnam era vet. My
 22 disability is nonservice-connected.

23 Presently here in Scottsbluff we have a
 24 veterans home, we have a veterans clinic, and we
 25 have a veterans service office. The veterans

BLACK HILLS REPORTING 605.721.2600

TS-3: Details as to use of Care Cards and how the purchased care program is implemented is not within the scope of this EIS. The EIS has been revised, however, to include more information on the expanded care in the community program and how this program helps improve geographic access to care for Veterans. See also group response E.3.3 in Appendix E relating to purchased care options, including Veterans Choice.

Commenter TP: Pine Ridge public meeting transcript

20

1 clinic used to have a doctor on staff, and a
 2 staff psychiatrist. We no longer have that. At
 3 best, we have a nurse practitioner and a RN.
 4 If you want to go to the facilities, you
 5 wake up at 5:30 in the morning, you wait at the
 6 VA clubhouse there. You leave, you have to be
 7 on that shuttle at 1:00 to get back here at
 8 7:30. Your whole day is expended on that -- on
 9 that trip getting here.
 10 We -- our programs now need improvement, not
 11 elimination. You know, the services that we
 12 already got here now need improvement. That's
 13 all I've got. Thank you.
 14 MS. PETERS: Thanks. Rod Maggart.
 15 ROD MAGGART: I'd just be repeating what
 16 they said. That's my same complaints.
 17 MS. PETERS: Okay. Steve Kaufman?
 18 Steve Kaufman? Still want to speak? Okay. Ed.
 19 Ed Ramirez? And then I think it's Sal...
 20 SAL FRANCO: Sal Franco.
 21 MS. PETERS: Okay. You're next, Sal, and
 22 then John Brehm.
 23 ED RAMIREZ: Testing one, two, three. Okay.
 24 There we go. My name is Ed Ramirez, Vietnam
 25 veteran era.

BLACK HILLS REPORTING 605.721.2600

TS-4

TS -4: Thank you for your comment. VA is identifying and including this comment in the public record as support for Save the VA Alternative E which calls for expanded services at the Hot Springs campus.

Commenter TP: Pine Ridge public meeting transcript

22

1 When I was going to the VA up at
 2 Hot Springs, I had no problem getting me
 3 medical -- seeking medical outside the VA.
 4 Then, when I moved back down here to the clinic
 5 down here in Scottsbluff, now I've got to go to
 6 the VA clinic, and then I've got to get a
 7 consultation from those folks, and then they've
 8 got to send it to the VA to get approval for me
 9 to see an orthopedic doctor.
 10 So I'm in limbo until the VA gets theirs
 11 back, and then the VA has to do third-party, the
 12 VA Choice Program. So they are the ones that
 13 set up the final approval. And then you're the
 14 one -- the veteran has to wait.
 15 And once all that's been approved, you have
 16 to call the Choice Program to see if all the
 17 paperwork is done. And then you have to wait
 18 for the Choice Program to set up an appointment
 19 for you, and that can take well over 90 days.
 20 I'm telling you from experience.
 21 See, they don't -- this impact, 150 miles,
 22 and now they want to build a new VA at
 23 Rapid City? That's another hour drive. And
 24 then from there, you have to go to Fort Meade.
 25 Who are they fooling? It's been approved

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TS-7

TS-7: First, a decision has not yet been made. Second, while certain services would be removed from the Hot Springs campus under the preferred alternative (e.g., RRTP would go to Rapid City), primary care services would remain. Veterans would be able to receive primary care through an updated CBOC operated by VA - now identified as being in a renovated Building 12 on the existing Hot Springs campus. In addition, Veterans living in Nebraska may be eligible for other types of health care services from local providers closer to home through an expanded purchased care program. See also group response in Section E.3.3 of Appendix E relating to purchased care options under the proposed reconfiguration. The goal is to make health care, especially specialty care, more accessible at VA expense, and save Veterans long distance travel. Chapter 2 of the EIS has been revised to expand on the purchased care program element of the proposal.

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1 already, folks. I'm sorry.
2 Why am I wasting my time? Because I'm mad.
3 It's not fair. We have to get up early in the
4 morning just to get up to Hot Springs at a
5 certain time. And then depending if people have
6 to go on to Rapid City or on to Fort Meade,
7 okay. Me, as a driver, I couldn't care less. I
8 was there for the veterans.

9 But there's been times that I wouldn't get
10 back home, we -- I should say we, all the
11 veterans I drove up there for appointments.
12 There was times I didn't get home until 8:30,
13 9:00 at night. And they want to move it to
14 Rapid City? Bottom line, and a statement,
15 politics.

16 MS. PETERS: You're Sal; right?

17 SAL FRANCO: Yes, ma'am.

18 MS. PETERS: Okay. After -- after Sal, I
19 missed one, well, John, and then Darid -- Darid
20 Berg? Darryl -- David Berg?

21 DAVID BAUER: Bauer.

22 MS. PETERS: Okay. You know who you are.
23 Is that...

24 SAL FRANCO: Okay. I'm Sal Franco, the
25 Commander of Scottsbluff County Chapter 10 of

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<p style="text-align: center;">24</p> <p>1 DAV. I spent 23 years as either Post or 2 District Commander of the VFW. I can only 3 expand somewhat from what my friend Ed was 4 speaking about.</p> <p>5 I, too, went to the Veterans Choice Program. 6 They sent me to Scottsbluff. There are two 7 ophthalmologists at Scottsbluff. Not one of 8 them would take a VA patient. You know where I 9 had my cataract surgery at? Loveland, Colorado, 10 163 miles one way.</p> <p>11 Then when I get it done, I started getting 12 threatened by bill collectors. You're going to 13 be taken to court for nonpayment. Took me three 14 or four phone calls to the Veterans Choice 15 Program before I finally got them people off my 16 case.</p> <p>17 And did that help me? No. But 147, 18 150 miles to Hot Springs, no. Drive 163 to 19 Loveland. Didn't help me any, and made me spend 20 extra time up there. In order to get to the 21 hospital by 8:00 in the morning, I wasn't going 22 to leave here at 4:00 in the morning. I had to 23 spend the night before there. Okay.</p> <p>24 I was in my last two care -- like I said, 25 Loveland for my eyes. The last surgery I had</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TS-8: See group response in Section E.3.3 of Appendix E relating to criticisms of the Veterans Choice Program and options available under the purchased care program.</p> <p style="text-align: center;">TS-8</p>

Commenter TP: Pine Ridge public meeting transcript		
<p>25</p> <p>1 was at Fort Meade. And guess what I see up 2 there to the north of the existing building? 3 They've expanded about maybe the size of this 4 whole building or more to the north of that 5 building already. Okay. Did they tell us about 6 that? Or was that part of the program to 7 eliminate Hot Springs? 8 And too, you want to build a new deal in 9 Rapid City. How is that going to relate to the 10 one they were building in Denver sometime back? 11 Did they ever finish it? All you hear is they 12 are behind on that project. How many millions 13 of dollars are we behind? 14 Which -- because the construction company 15 couldn't benefit from this, who we going to get 16 in Rapid? Says back here they're trying to 17 improve care for the veteran? I'm going to -- 18 what's our representative, Adrian Smith, said 19 that night on TV. They have billions of dollars 20 increase every year in the budget. How does 21 that benefit us out here? It doesn't. 22 They are moving everything farther and 23 farther away and giving us less and less. Oh, 24 yeah, you can go where you want. If you can 25 find a physician in your community that will</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TS-9</p> <p>TS-10</p>	<p>TS-9: Regarding the recent construction at Fort Meade, this is not part of the proposal for Hot Springs. Fort Meade is an integral part of the BHHCS system and offers specialty health care services to Veterans throughout the catchment area. The ongoing construction at Fort Meade will benefit all Veterans serviced by the BHHCS and are being made independently of the proposals evaluated in this EIS, which focus on the physical facilities in which future care would be offered in Hot Springs and Rapid City. Section 1.1.2.1 of the Final EIS has been revised to clarify the scope of Fort Meade. See also group response in Table E-2 of Appendix E relating to Scope of the EIS, Inclusion of Fort Meade.</p> <p>TS-10: Regarding costing and overruns on past VA construction projects, such comments are not relevant to the BHHCS proposal and are not within the scope of this EIS to address. That said, the VA has revisited the cost estimates for each of the alternatives and made some additional revisions in Chapter 2 based on public comment (e.g., incorrect assumptions in Alternative E and more detailed breakout of data). See group response in Table E-2 in Appendix E relating to cost of alternatives. While current estimates are based on the best available information, VA is unable to expend appropriated funds to update this data due to current appropriations law restrictions.</p>

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1 take you.
 2 As I say, they wouldn't take me for my eye
 3 care here in Scottsbluff. I had to leave, go
 4 somewhere else.
 5 No, they are not benefiting you. I don't
 6 know if our comments are even going to be
 7 listened to. They might just go in file 13 and
 8 forget it, but I still got to say what I've got
 9 to say. Thank you.
 10 MS. PETERS: Thank you, Sal. John, that's
 11 you?
 12 JOHN BREHM: Yes.
 13 MS. PETERS: Okay. Then David and
 14 Patricia Shumway.
 15 JOHN BREHM: I'm John Brehm. I'm the
 16 Scottsbluff County Veterans Service Officer, so
 17 many of you know me. What we do is, we go ahead
 18 and we do run a DAV van up to Hot Springs. We
 19 try to go three days a week, but due to the
 20 regulations, the VA has put on new ones, we've
 21 lost some drivers or we're having a hard time
 22 getting them on because they are being so
 23 strict.
 24 We've had drivers that are -- they are
 25 eligible to drive trucks, but they are not

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TS-11

TS-11: VA believes that the proposed reconfiguration will help improve geographic access to health care services and reduce travel time for Veterans. See group response in Section E.3.1 of Appendix E relating to distance travelled.

Driver eligibility requirements, as specified by the VA, are not within the limited scope of this EIS. However, the VA recognizes the important role drivers play in helping Veterans access the care they need in the rural BHHCS service area.

Commenter TP: Pine Ridge public meeting transcript

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1 eligible -- they're not able to drive our DAV
2 van, which is one of the problems we have in
3 just recruiting drivers because of the VA.

4 The next thing is, like Mr. Franco was
5 saying, he had to go to Loveland. It's
6 163 miles. But if he had had it done in the
7 Black Hills Health Care System, he'd had to go
8 all the way to Fort Meade, and see, that's
9 235 miles one way.

10 Now, that -- you know, that -- and what
11 concerns me about that, why I got up here is on
12 this transportation. We really have a problem.
13 We're out here in western Nebraska. Maybe, you
14 know, we're out here in the rural area, which we
15 are. And I understand we chose to live here,
16 but I don't think we should be penalized for
17 that with the transportation.

18 Now, if we try to send -- like, say, we got
19 a 73-year-old guy and wants to go out for
20 cataract surgery. He goes all the way to
21 Fort Meade, he has to go the night before, catch
22 the van from Hot Springs the VA furnishes up to
23 Fort Meade.

24 Has the surgery, comes back, and then the
25 next day goes home. Takes him three days away

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TS-11

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1 from home. Just to make that 150-mile trip is
 2 enough for him. You know, it makes him so tired
 3 and everything like that.

4 So I think if -- if this does go through,
 5 they are going to go into Rapid City or we have
 6 to go to Fort Meade for some of this care, I
 7 mean, I think the VA is going to have to help us
 8 with this transportation system. They are going
 9 to have to be able to work with us. Like,
 10 Mr. Ramirez drove for almost 20 years, around
 11 that, wasn't that, Ed?

12 ED RAMIREZ: 20 years.

13 JOHN BREHM: 20 years. He drove the van for
 14 20 years. So all of a sudden they pull him
 15 because he's a diabetic. He was a diabetic for
 16 the whole time and taking shots for the whole
 17 time. So I just don't understand the system.
 18 They are making it harder and harder.

19 We do it -- it's a long trip. They leave at
 20 6:00 in the morning for Hot Springs, and
 21 sometimes they don't get back until 7:00 if they
 22 have to wait for somebody to get back from Fort
 23 Meade.

24 I just hope that with this impact study -- I
 25 didn't see anything on it, and that's why I got

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TS-12

TS-12: Decisions regarding any current or future VA transportation assistance programs or reimbursement eligibility within the BHHCS services are not subject to NEPA review or within the limited scope of this EIS to address. VA recognizes the critical role the current transportation system plays in providing many Veterans access to the health care and it would continue under all of the proposed alternatives. See also group response in Section E.3.1 of Appendix E relating to distance travelled.

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1 up here to say. Something has to be done to
2 help us with this transportation to get the
3 veterans here in rural Nebraska up to the
4 Black Hills.

5 I see the director up there kind of shaking
6 her head "yes." I hope that's -- I hope she
7 agrees with me on that. And she's a real nice
8 lady. I've met her and talked to her a couple
9 times.

10 Even had her captive audience for about an
11 hour. Veterans Day, she come down. So me and
12 my son hauled her around in his car, so I had a
13 captive audience.

14 But thank you. If anybody has any questions
15 on the transportation, I'll be glad to work with
16 you. Now we're running two days a week up to
17 Hot Springs because we just don't have the
18 drivers.

19 We're hoping we got some that are going to
20 get through. But the VA -- we've had a lot of
21 where the VA has said, Well, we're not -- you
22 can't use them. And it's really a concern.
23 Thank you.

24 MS. PETERS: David Bauer.

25 DAVID BAUER: B-A-U-E-R. Hi. My name is

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Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: right;">30</p> <p>1 David Bauer, and I'm a Vietnam era veteran. And</p> <p>2 I'm also the caregiver for my 94-year-old uncle,</p> <p>3 who's a veteran.</p> <p>4 Just the trip to Hot Springs is hard on him.</p> <p>5 I transferred him down here to this clinic here,</p> <p>6 but the services here were nil compared to</p> <p>7 Hot Springs. So I had to transfer him back up</p> <p>8 there just to get his eyes checked.</p> <p>9 So if I have to take him to Hot Springs --</p> <p>10 or, to Rapid City, that's an extra, another</p> <p>11 two hours of driving, and this drive is hard</p> <p>12 enough on him the way it is.</p> <p>13 So with the move to Rapid City, a lot of us</p> <p>14 are probably going to opt to not have the</p> <p>15 services instead of what should be done for us.</p> <p>16 MS. PETERS: Thank you, David. We've had</p> <p>17 David, John, Patricia, and then after Patricia,</p> <p>18 it's Larry Hobgain. Is Larry still here? And</p> <p>19 then Robert -- Robert Boots. Butts. Okay.</p> <p>20 So is Larry -- no, Larry. Robert, are you</p> <p>21 close by? Which one was Robert? You want me to</p> <p>22 bring the microphone back to you? If Patricia's</p> <p>23 not ready, we'll go with you first.</p> <p>24 PATRICIA SHUMWAY: No, I'm ready. Sorry.</p> <p>25 MS. PETERS: Okay. So -- then I'd like to</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TS-13</p> <p>TS-13: VA understands the challenges and difficulties for many Veterans of driving to health care services that may be far away. VA believes that the proposed reconfiguration and its inclusion of an expanded care in the community program will offer more options to Veterans to receive care closer to where they live. See group response in Section E.3.1 of Appendix E relating to distance travelled.</p>

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1 ask those of you in the room if you could keep
 2 your conversations, side conversations -- it's
 3 kind of echoing up here, and we want to make
 4 sure Jacque gets everything.
 5 PATRICIA SHUMWAY: Hi, there. I'm
 6 Patricia Shumway, and my husband is a
 7 Vietnam era vet. And I just ran to the back
 8 because I thought a gentleman was leaving.
 9 I've -- I've seen four or five people leave,
 10 and I did get the names of a couple people that
 11 said they were against the Hot Springs facility
 12 being moved to Rapid City.
 13 And from what I understand, there won't be
 14 any data taken on everyone attending here as to
 15 whether you're for or against it unless you
 16 speak.
 17 And since that's the case, I'm sure that
 18 there might possibly be a construction person or
 19 someone that wants Rapid City to be the new
 20 site. But if you are for it going to
 21 Rapid City, in the interest of easier counting,
 22 could you please raise your hand.
 23 So it could be public record, there's not a
 24 single person here that wants it to be moved to
 25 Rapid City. And my estimate, I'm not sure how

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TS-14

TS-14: Your concern, as raised in this public meeting transcript, is part of the public record for this EIS. The poll results, as taken informally at the public meeting and also called out in this response, show an unofficial count of 0 for, and approximately 84 against the move to Rapid City. The Final EIS will indicate in Appendix E.3 that the majority of the public providing comments were in opposition to the proposal.

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1 many people are attending here, but I think
 2 there's been about 84 people that are here. And
 3 I'm not counting people I think that are
 4 reporters or standing at the back.

5 I think it was kind of biased, what you were
 6 reporting on some of the stuff. Like you did
 7 mention that Rapid City does have the waste
 8 disposal available for it happening in there,
 9 but you didn't say a word about whether
 10 Hot Springs, the City of Hot Springs does.

11 You did say the agency would like plan A,
 12 for it to be moved. I -- I would rather that it
 13 be -- stay where it is and be refurbished. A
 14 lot of the veterans are from rural places, and
 15 it really would be better if these veterans
 16 didn't have to travel an extra hour north just
 17 to get these services. Thank you very much.

18 MS. PETERS: Thank you, Patricia. We have
 19 Robert, and then after Robert Butts we have
 20 Robert Wells or Mills and then Don Ackerman.

21 ROBERT BUTTS: I'm going to close my eyes
 22 because I'm bashful about talking. Basically
 23 everything that I thought about tonight has
 24 already been said. You know, how long, how many
 25 years has this been going on? I was away from

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TS-15

TS-16

TS-15: The EIS reported consistently about waste disposal availability for both Rapid City and Hot Springs (i.e. Custer Fall River Regional Landfill). See Section 4.12.

TS-16: Your support for keeping the Hot Springs campus opened is noted and included in the public record for this EIS.

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1 the Hot Springs group for five years, and they
 2 were talking about it back then.
 3 Seems like all they want to do is talk.
 4 They need to do something for the people in this
 5 area. It didn't take but one trip to -- when
 6 I -- I just transferred out of Cheyenne, back to
 7 Scottsbluff here. It didn't take but one trip
 8 in there to figure out that this Choice thing,
 9 that they -- they are so proudly pushing is a
 10 joke.
 11 You know, like these guys were saying, Sal,
 12 it's -- it's just a mish-mash. Nobody knows
 13 what they are doing. Nobody does. You know, to
 14 go from Fort Meade to Loveland, that's a joke.
 15 I've been through that part.
 16 They were working on this, like I said, five
 17 years ago. I moved to eastern Nebraska, and
 18 they sent me to Cheyenne. Just prior to that,
 19 they -- they were going to give me a new knee.
 20 And Hot Springs calls and says, We got to send
 21 you to Omaha for a consultation for that.
 22 What's going on? We need that health care
 23 here. It's very simple. I hope there's nobody
 24 here from down there over in Scottsbluff, but my
 25 first impression going back in there was that's

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TS-17

TS-17: Comments about the Choice Program are not relevant to the scope of activities analyzed in the EIS. See group response E.3.3 in this Appendix relating to the Veterans Choice Program in the proposed reconfiguration. Section 2.2 of the Final EIS has also been revised to clarify the purchased care (now referred to as Care in the Community) element of the proposed reconfiguration under all of the alternatives.

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a joke.
AUDIENCE MEMBER: It is.
AUDIENCE MEMBER: Amen.
ROBERT BUTTS: And then they call me and, we forgot to do this. I almost didn't answer the phone because they don't even advertise themselves anymore as the VA. That fellow that called me had some other name on his phone. I almost didn't answer it, but it was an appointment that I wanted.
And so anything -- anyway, I think they need -- they need, and I think everybody here will agree, they have got to get us health, you know. I'm of the age, if I had to go anywhere, if I even go to Hot Springs, I'm at the point if I don't have somebody go with me, I've got to go the day before and spend the night and then go about my appointments. And travel pay don't cover that, I guarantee it.
And so anyway, I guess that repeats about everything everybody else said, but we need to get -- we need to get behind it and get them to do something. You know, even if we have to write a letter to the president. He ain't going to do nothing, but he might hand -- he might

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1 hand it down to somebody that might think about
2 it.

3 Anyway, that's all I've got to say.

4 MS. PETERS: So Robert Mills, Wells, changed
5 his mind. Okay. Don Ackerman. Then after Don,
6 it's --

7 DON ACKERMAN: First, I go to you, Ed. I'm
8 going to tell you something.

9 MS. PETERS: Hang on a second, please.
10 Before you get started, I want to call names.
11 Richard Hilzer will be next after Don, and then
12 Troy Walker, followed by Brian Nielsen.

13 DON ACKERMAN: My name is Don Ackerman. I'm
14 from Hot Springs. I'm the -- I'm a consulting
15 person, and I'm on the consulting parties for
16 this. I represent the veterans. I'm also on
17 the Save the VA.

18 And it's not over. Now, maybe when you were
19 in basic training, you went to that surrender
20 class, but I never went to that. Okay? I never
21 went to that class. So you'll have to fill me
22 in on all this stuff. The war is not over.

23 If you go back there and talk to that
24 gentleman by the door, Adrian Smith says he's
25 going to fight with us and he's going to make it

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1 work.
 2 AUDIENCE MEMBER: Oh, is the Congressman
 3 here?
 4 DON ACKERMAN: Yes, he is.
 5 AUDIENCE MEMBER: I would very much like to
 6 talk to him.
 7 AUDIENCE MEMBER: I'm not the Congressman.
 8 I'm a representative.
 9 DON ACKERMAN: Representative. Right.
 10 Okay. That being said, the second thing I need
 11 to say that's important before I go into -- I'm
 12 going to teach you how to do this right.
 13 The second thing I need to say is, you need
 14 to read these charts. Hidden in these charts,
 15 they are not moving a hospital to Rapid City.
 16 They are moving the Dom. They are not giving
 17 you a hospital in Rapid City. Read those
 18 charts. You're not getting nothing in
 19 Rapid City but a Dom. They are moving the Dom
 20 out of Hot Springs.
 21 AUDIENCE MEMBER: I think you're under the
 22 misconception.
 23 DON ACKERMAN: Sal, you got nothing. Okay.
 24 Now, this is the way you're supposed to do this.
 25 In -- in reference to 1.1.3, they talk about the

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TS-18

TS-18: Thank you for the clarification that the VA is not moving the hospital to Rapid City. Under the proposed reconfiguration, no hospital is being moved or constructed in Rapid City. However, under the expanded care in the community program, Veterans would have more options to receive care from local providers closer to their home. See group responses in Sections E.3.1 and E.3.3 of Appendix E relating to distance travelled and purchased care options.

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1 1.2.2.2.2. Distance traveled. We've got a
2 chart talking about how far you have to go.
3 You're going to go right past Hot Springs, right
4 past Rapid City, and right over to Fort Meade to
5 get your medical care.

6 We are ready to fight with you and make this
7 happen, but if you don't say something, we've
8 got nothing to fight with.

9 I want you to all remember. 2011, they were
10 going to close this place. All right? What
11 year is it now? Anybody got an idea? I don't
12 keep track because I'm retired. It's not 2011.
13 They've taken a lot of away from us, but it's
14 not gone.

15 And I believe at this time, in my heart,
16 we've got them beat, and we can beat them. But
17 I can't beat them if you just give up. You
18 know, I never even got a white flag anywhere,
19 man. I didn't get it.

20 And I'm not picking on you.

21 AUDIENCE MEMBER: Well, no, but you have --

22 MS. PETERS: Finish your comments.

23 DON ACKERMAN: Anyway, and I'll probably
24 come up later when everybody is done, but that
25 being said, you need to address the things like

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I did.
Find the area, address it, and say it's not true. We travel further for health care. You're not making it better for me. You need to talk to our representatives and our Congressmen, because after everything else, there's that other avenue here.
You know, I'm sorry, I fought some really tough dudes. You know those guys back there? They don't scare me. You're afraid of the VA? I am not afraid of the VA. And I can tell you all day the bad things they've done to me since I started this battle. Okay.
But I fear them not. So why are you? We can fight and win this battle. Don't let them take away our services.
And remember, you know, we're all old farts. The people that count are the kids that are over there fighting this war right now. They are the ones, we have to make sure they have facilities when they come back home. And by God, if you quit, it's not going to happen. Thank you.
MS. PETERS: Richard Hilzer. Mr. Hilzer, and then Troy Walker. Is Troy still here? Okay. And then Brian Nielsen after that.

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1 RICK HILZER: My name is Rick Hilzer. Most
 2 of you guys know me by that. I wasn't going to
 3 say anything tonight, but I started listening to
 4 this Choice Program and this and that.
 5 When I first came into the system and came
 6 to the Scottsbluff clinic, it was people from
 7 Hot Springs that came down here three times a
 8 week. We had excellent care.
 9 Julie Watts, I'm pretty sure all of us would
 10 take her back in a heartbeat. But then they
 11 farmed the clinic out. It wasn't as good as it
 12 was before. And they've had various changes
 13 through there, and it's getting worse and worse
 14 and worse as time goes by.
 15 More things are wanted to be shifted here at
 16 home. That's a joke. I spent less time doing
 17 paperwork when I was a first sergeant than I did
 18 trying to get bills paid when it gets shipped
 19 over to the hospital and doctors' offices, and
 20 get back to the Choice Program and the Health
 21 Net program and everything else.
 22 It's a mess. When it used to be you went in
 23 to the emergency room, you told them you was VA,
 24 that was the end of it. Now you tell them you
 25 are VA, first place they go is if you got any

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TS-21

TS-21: Comments about the Choice Program are not relevant to the scope of activities analyzed in the EIS. See group response E.3.3 in this Appendix relating to the Veterans Choice Program in the proposed reconfiguration. Section 2.2 of the Final EIS has also been revised to clarify the purchased care (now referred to as Care in the Community) element of the proposed reconfiguration under all of the alternatives.

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1 type of health insurance, that's where they are
2 going to go. If you've got a supplement, that's
3 where they are going to go.

4 If you want to try and refile that with the
5 VA, you better sit down, because it's going to
6 take about four months to even get started. And
7 then it's going to go through a review board,
8 which I found out is made up of a bunch of
9 nurses. So you're going to end up paying for a
10 lot of stuff.

11 There was something, and I'll be real fast,
12 something about health care. I found this out
13 from Hot Springs. Not from anywhere else. I
14 needed some eye work done, and they asked me if
15 I wanted to go to Scottsbluff. I declined
16 Scottsbluff. I said, Where else can I go?

17 They said, There's an eye institute in
18 Rapid City. And I said, I'll go there.

19 Little did I know they have satellite
20 systems that go -- I think it's to Crawford, to
21 Alliance, to Chadron. My eye surgeries were
22 done at Chadron by board-certified people.

23 So you want to keep that in the back of your
24 mind. You don't need to go to Fort Collins.
25 Chadron is a lot closer. And something -- and I

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1 my name is Troy Walker. I moved back here to
 2 the Panhandle in '98 after I got out of the
 3 military. And even at that time, I started
 4 going to Cheyenne. Now, I didn't like Cheyenne,
 5 because I was treated like cattle. Okay.

6 Now, my father, who was in the Korean War,
 7 he was going up to Hot Springs, and he kept
 8 telling me, Go to Hot Springs, go to
 9 Hot Springs. Well, it wasn't my decision to go
 10 to Hot Springs. I have a rare blood disease
 11 now, and I have to get monthly blood draws at
 12 the CBOC.

13 Now, the problem that I have with the CBOC
 14 now, we're treated like cattle. Every time we
 15 go in there, the employees are so unhappy to
 16 work there. They don't want to see us. You
 17 know, and there is no doctors or, well, they are
 18 only working three days a week. Well, bring
 19 somebody down from Fort Meade, you know. Come
 20 on. The VA has plenty of money.

21 And I have this. I will read it. But I
 22 also want to say the VA Choice Program, when I
 23 tried to use it, I got my own little card. I
 24 got a paper saying that I was able to do this.
 25 But when I tried calling to set up appointments,

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TS-23

TS-24

TS-23: It is not clear which CBOC the commenter is referring to. However, the Scottsbluff CBOC is a contracted facility. The clinic provides primary care services to Veterans five days per week.

TS-24: Comments about the Choice Program are not relevant to the scope of activities analyzed in the EIS. See group response E.3.3 in this Appendix relating to the Veterans Choice Program in the proposed reconfiguration. Section 2.2 of the Final EIS has also been revised to clarify the purchased care (now referred to as Care in the Community) element of the proposed reconfiguration under all of the alternatives.

Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: center;">44</p> <p>1 No, you have a CBOC within 30 miles of you.</p> <p>2 And when the Choice Program came up,</p> <p>3 Alliance got a CBOC, Chadron got a CBOC. So</p> <p>4 basically they opened the CBOCs so the VA Choice</p> <p>5 wouldn't have to spend all the money. Okay?</p> <p>6 Now, it's just common sense. Now, the other</p> <p>7 thing that I want to say is right here. And I</p> <p>8 got all night, I guess. It's what, 3:18. Let's</p> <p>9 see.</p> <p>10 MS. PETERS: Make sure you speak into the</p> <p>11 microphone.</p> <p>12 TROY WALKER: I'll keep it short.</p> <p>13 MS. PETERS: You have to speak into the</p> <p>14 microphone.</p> <p>15 TROY WALKER: Okay. I'm sorry. I'll keep</p> <p>16 this short. The whole situation has gone on for</p> <p>17 too long. Like I said, I came back here in '98.</p> <p>18 I think since 2004 they were talking about</p> <p>19 closing Hot Springs. So obviously, it's fallen</p> <p>20 on deaf ears, because we have had these meetings</p> <p>21 forever, and they're still planning on closing</p> <p>22 it.</p> <p>23 Ten years ago, it was, We want to keep it</p> <p>24 open because it's a historical monument. Now</p> <p>25 they turned it on us. Oh, it's historical, so</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TS-25: The Cheyenne VAMC is a listed NRHP historic district, the Sheridan facility is not. Fort Meade is listed in the NRHP as a historic district.</p> <p>Each historic property is different, not only because of the age of the buildings, but also the configuration of the buildings, the location of the facility, and the services available in the area.</p> <p>VA would be required to follow the ABA and its own agency guidelines under any alternative that retains a VA presence on the VA Hot Springs campus. See group response in Table E-2 of Appendix (Category Purpose and Need) relating to accessibility and needed renovations.</p> <p style="text-align: right;">TS-25</p>

Commenter TP: Pine Ridge public meeting transcript

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1 Have a couple veterans, couple people from
2 Congress and VA representatives, and two little
3 spreadsheets. On one, Hot Springs, what are the
4 benefits? The second one is, Going to
5 Rapid City, what are the benefits? Who's going
6 to prosper from it? Because the veterans here
7 are not prospering from anything, and we -- we
8 don't have a say in anything. And we should.

9 We are the biggest group in the United
10 States. We can band together, and we can do
11 anything that we want. They can't take away
12 those rights. So yeah, that is about it.

13 And I just want to thank everybody here
14 tonight. I want to thank you two ladies. All
15 the veterans and families, I know I appreciate
16 you guys so much. And I know nobody knows me
17 here because I always keep a low profile in this
18 town, so. Have a good night.

19 MS. PETERS: Thank you. Brian, is
20 Brian Nielsen still here? And after Brian will
21 be Richard Hobbs, okay, and then Joy Hobbs and
22 Joe Hiller. Is that --

23 BRIAN NIELSEN: I'm a little dirty. I work
24 for a living.

25 MS. PETERS: That's okay.

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Commenter TP: Pine Ridge public meeting transcript

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1 BRIAN NIELSEN: I keep hearing economic
2 impact. What about the economic impact on us
3 veterans? What about the -- I hear government
4 cutbacks, government budgets. But we get our
5 illegal aliens, our refugees, get everything
6 handed to them. But when it comes to budget
7 cuts, the first thing they do is, they go to the
8 veterans and say, We're going to take that from
9 you because we've got to give it to somebody
10 that's not even an American.

11 That's what pisses me off the most. We
12 earned the right to have full services.
13 Somebody coming into this country we are
14 fighting for and have fought for, and I'm an
15 Iraq veteran, and give it to total strangers and
16 turn their backs on us.

17 We signed on the dotted line agreeing to the
18 contract that we will risk our life. We do our
19 job and we do our job above standards. And when
20 we're done, or I should say when the government
21 is done with us, they turn around and flip us
22 off and walk off. That's -- I thought I'd never
23 see that in America. Citizens are second class.
24 Veterans, we don't even rate. That's all I've
25 got.

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Commenter TP: Pine Ridge public meeting transcript

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1 MS. PETERS: Thank you, Brian. Richard.
2 RICHARD HOBBS: I'm Richard Hobbs. First
3 off, I would like to thank all the veterans that
4 are here and their families, because veterans
5 have to have their support, and that's the
6 family.
7 I'm going to just throw out some things off
8 the top of my head. I've been in VAs across
9 this country, both the wife and I. Out of all
10 the VAs I've been in, Hot Springs has provided
11 the best doggone service that we've ever. I've
12 met more people that have transferred to get out
13 of Cheyenne and go to Hot Springs.
14 When you stop and consider, like this last
15 gentleman said, we're dumped on. 1 percent,
16 1 1/2 percent of the population, max, is the
17 ones that goes in, takes an oath, and goes and
18 does their duty for their country for freedom
19 and everything else.
20 An example of VA services, I've been down in
21 the Phoenix VA, which everybody should know
22 probably has that record of vets dying waiting
23 to get an appointment.
24 I had an early-morning appointment there,
25 folks. I got there, I was one of the first ones

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Commenter TP: Pine Ridge public meeting transcript

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1 there. By the time I got in for my appointment,
2 I was the very last appointment taken in that
3 day.

4 They are combining facilities. And when
5 they combine these facilities and they make them
6 bigger, service gets even less. So if you're
7 not used to getting service now, you better not
8 plan on getting any.

9 But this Black Hills VA, we need to hang on
10 to this. We need to fight for it. Like this
11 other gentleman with the vest, we need to fight
12 for the young vets because, believe me, there's
13 going to be a lot more of them coming home now
14 than the past ones.

15 The gentlemen that are leaving here and
16 walking -- I can only -- I send my blessings to
17 them, but you got veterans that are leaving
18 here. And if you look at them, they are on
19 walkers, they are on canes. They are like me.
20 They limp or just -- not too good here.

21 But we need to take care of the vets. Lord
22 knows, if I could stand somebody up from the
23 grave right now, I'd love to stand Abe Lincoln
24 up here. And I'd love for him to see the
25 current VA administration, especially the

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TS-28

TS-28: Your support for remaining at the Hot Springs Medical Campus is noted and included as part of the public record for this EIS.

Commenter TP: Pine Ridge public meeting transcript

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1 number one secretary in the VA. I can -- I
 2 won't push that issue, but he's already
 3 disgraced himself.
 4 We really need to continue this fight. I
 5 feel lost at times when I think of the VA. The
 6 Choice Card Program, that was sent to me. Then
 7 they send me a -- they send me a notice saying
 8 that, You're not eligible for the Choice Program
 9 because you've got this clinic here.
 10 Well, this clinic here doesn't take care of
 11 my kind of problems or my wife's kind of
 12 problems. Next thing you know, I get the Choice
 13 Cards in the mail. So they are doing everything
 14 backasswards.
 15 But I've got more I could probably say, but
 16 like I say, it's gotten lost in the back of my
 17 skull somewhere. But we've got to keep
 18 fighting, guys. We have to. God bless all the
 19 veterans and their families. Let's keep
 20 fighting for these young vets, especially.
 21 JOY HOBBS: My name is Joy Hobbs. I'm an
 22 Army vet, and I'm on disability. I would like
 23 to say thank you to all the vets for the
 24 service, and God bless you all and your
 25 families. I have a brain injury, so I have to

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TS-29

TS-29: Comments about the Choice Program are not relevant to the scope of activities analyzed in the EIS. See group response E.3.3 in this Appendix relating to the Veterans Choice Program in the proposed reconfiguration. Section 2.2 of the Final EIS has also been revised to clarify the purchased care (now referred to as Care in the Community) element of the proposed reconfiguration under all of the alternatives.

Commenter TP: Pine Ridge public meeting transcript		
<p>51</p> <p>1 write this down or I'll never remember.</p> <p>2 Talking about construction and its impacts,</p> <p>3 what construction is planned for the Hot Springs</p> <p>4 VA? It can only do interior changes anyway.</p> <p>5 They can't touch the exterior.</p> <p>6 Why do they think that it would be such an</p> <p>7 negative impact on the community? It will keep</p> <p>8 the town alive, and it'll keep the local jobs.</p> <p>9 And there are enough people to fill all the jobs</p> <p>10 that they have at the VA. What they are doing</p> <p>11 and what they plan on doing is going to shut</p> <p>12 down the town, too.</p> <p>13 There is a building presently in</p> <p>14 construction, and it doesn't negatively impact</p> <p>15 the town because they know there's going to be</p> <p>16 more money and more jobs coming in.</p> <p>17 Moving to Fort Meade for us is a five-hour</p> <p>18 drive one way, and then we have all-day</p> <p>19 appointments, and then it's a five-hour drive</p> <p>20 back. We can't do that anymore. We have to</p> <p>21 stay overnight. So there's even more money out</p> <p>22 of your pocket if they don't have a room or</p> <p>23 don't give you a room because you're not</p> <p>24 eligible because of whatever reason, and they</p> <p>25 turned us down before.</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TS-30</p> <p>TS-31</p> <p>TS-32</p>	<p>TS-30: No new (outside) construction is included in any of the Alternatives for the Hot Springs campus. Any new CBOC that would be constructed in Hot Springs under Alternatives A through D would be in a new off-campus location. Under the new preferred alternative A-2, as identified in the Final EIS, VA has decided to locate the new CBOC in Building 12 on the existing Hot Springs campus. As such, all construction activities associated with the renovation of Building 12 would be confined to interior work.</p> <p>TS-31: New construction activities can result in positive economic impacts to a community because of new jobs as commenter points out. Operation of the new facilities, however, would include fewer staff in Hot Springs under the proposed reconfiguration. This would result in potential adverse impact on the local community, although the VA will make efforts to minimize this impact to the extent possible. Economic impacts are discussed in Section 4.10 of the EIS, which has been revised to include local community impacts in addition to those identified at the county level. See group response in Table E-2 of Appendix E relating to socioeconomic impacts. In addition, the final EIS also addresses the potential cumulative impacts of a proposed new VHA national pharmacy call center to occupy Buildings 3 and 4 on the existing Hot Springs campus. Such an action would help minimize adverse economic impacts from the proposed reconfiguration.</p> <p>TS-32: The proposed reconfiguration would help make health care more accessible to Veterans in the BHHCS service area. See group response in Section E.3.1 of Appendix E relating to distance travelled. Section 2.1 of the EIS also has been revised to clarify this element of the purchased care program.</p>

Commenter TP: Pine Ridge public meeting transcript	
<p>52</p> <p>1 I have a traumatic brain injury. I can't</p> <p>2 drive alone anymore. I have to have my husband</p> <p>3 with me. And going to Cheyenne, that's a joke,</p> <p>4 because like everybody says, the care is really</p> <p>5 bad. And me -- my daughter is a vet, and she's</p> <p>6 100 percent disability, and she gets her</p> <p>7 appointments canceled. Sometimes she's there</p> <p>8 three times a week because they can't put</p> <p>9 appointments together for us or for anyone so</p> <p>10 you only make one trip instead of three. So</p> <p>11 it's really hard on our budgets now.</p> <p>12 Let's see. Choice Program is a joke.</p> <p>13 Scottsbluff, there's not enough services, so you</p> <p>14 can't get anything done.</p> <p>15 Closer to where the vets are, that's also a</p> <p>16 joke. Hot Springs VA serves vets from Nebraska,</p> <p>17 Wyoming, South Dakota, and the reservation.</p> <p>18 Where are they supposed to go? Keep driving</p> <p>19 further and spending more and more of our own</p> <p>20 money.</p> <p>21 They need to listen to our voices and give</p> <p>22 us the treatment that we served our country for.</p> <p>23 If the decision hadn't been made, and I hope it</p> <p>24 hasn't, we need to fight. Thank you.</p> <p>25 MS. PETERS: Okay. Joe Hiller.</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TS-33: Comments about the Choice Program are not relevant to the scope of activities analyzed in the EIS. See group response E.3.3 in this Appendix relating to the Veterans Choice Program in the proposed reconfiguration. Section 2.2 of the Final EIS has also been revised to clarify the purchased care (now referred to as Care in the Community) element of the proposed reconfiguration under all of the alternatives.</p> <p>TS-34: The proposed reconfiguration would help make health care more accessible to Veterans in the BHHCS service area. See group response in Section E.3.1 of Appendix E relating to distance travelled. Section 2.2 of the Final EIS also has been revised to clarify this element of the purchased care program.</p> <p style="text-align: center;">TS-33</p> <p style="text-align: center;">TS-34</p>

Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: right;">53</p> <p>1 JOE HILLER: Thank you. Thanks, everybody, 2 for being here. God bless our veterans. My son 3 and my daughter, they are both in the Army. I'm 4 retired from the Army, combat disabled. 5 AUDIENCE MEMBER: Ho-ah. 6 JOE HILLER: Yeah. But I also grew up in 7 Hot Springs. That's my hometown. The VA has 8 been deconstructing that facility for probably 9 40 years. Slowly, imperceptibly moving assets 10 from Hot Springs to Fort Meade. Shit happens. 11 A brick at a time, and it's continued a brick at 12 a time. 13 But I won't bitch about that all night long. 14 I have three points to make that deal with the 15 EIS that have been made already by others. 16 This business of travel, saving money, 17 making it easier for vets to get care is 18 baloney. We've all said that. You know, you 19 can look at the numbers, how far we travel now, 20 how much farther we'll have to travel. It just 21 doesn't make any sense to use that as a basis 22 for changing things. 23 Number two, I saw in this EIS summary, 24 executive summary, where the effect on schools 25 could be anywhere from minus 1 percent on</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TS-35: The need to change to the configuration of health care services within the BHHCS service area is clearly laid out in Chapter 1 of the EIS. VA believes the reasons are valid and necessary to help ensure that VA delivers the best possible care for our Veteran, including improving geographic access to health care in the BHHCS service area. See also group response in Section E.3.1 of Appendix E related to distance travelled. Section 2.2 of the Final EIS also has been revised to clarify this element of the purchased care program.</p> <p>TS-36: The socioeconomic impact analysis (Section 4.10) has been updated to address potential adverse impacts to the local community. See group response in Table E-2 of Appendix E relating to socioeconomic impacts. The community services impacts (Section 4.11), such as relating to school enrollment, have also been revisited in the Final EIS but the current analysis was found to be valid.</p> <p style="text-align: center;">TS-35</p> <p style="text-align: center;">TS-36</p>

Commenter TP: Pine Ridge public meeting transcript	
<p style="text-align: right;">54</p> <p>1 enrollment to plus 4.4 percent on enrollment. 2 That's a crock of crap. One in five people in 3 Hot Springs worked at the doggone VA, and their 4 families. That has got to be an error, that it 5 will have only potentially 1 percent negative 6 impact on school enrollment. That's baloney. 7 Somebody is blowing smoke. 8 Closing this VA will kill that town. 9 Absolutely kill it. They've got a soldiers home 10 there, VA there, for over 100 years. Come on. 11 If you look on page 25 in this executive 12 summary and they are talking about socioeconomic 13 impact, my third point talks about the effect on 14 the economies. Alternatives A through D, which 15 are all kind of semi-preferred by the VA, talk 16 about a negligible impact on Rapid City. 17 Folks, if you're from that neighborhood, 18 this is about Rapid City and Hot Springs and 19 Sturgis. Negligible impact on Rapid City to 20 build all this facility and move all these 21 services up to Rapid. 22 Major negative impact on Hot Springs. Major 23 negative impact on Hot Springs. What the hell? 24 We're trying to kill a town here and move 25 services? Look at what Western Sugar did in</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TS-37: The socioeconomic impact analysis (Section 4.10) has been revised in the Final EIS to include additional discussion (qualitative) on local impacts to the community and recognizes the potential for adverse impacts. See group response in Table E-2 of Appendix E relating to socioeconomic impacts.</p> <p>The environmental consequences identified in the EIS are one factor the decision maker will consider when making a final decision. However, NEPA does not require an Agency to select the alternative with the least environmental impact, rather to provide sufficient information on potential impact for the decision maker to make an informed decision.</p> <p style="text-align: center;">TS-37</p>

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1 Torrington. Folks, that's going to happen in
 2 Hot Springs. And oh, by the way, we get to
 3 drive a little farther.

4 So those are my three comments. Travel, I
 5 think the VA's blowing smoke up our skirt when
 6 they say it's going to be cheaper. The effect
 7 on schools, outright bad math. And effect on
 8 economies, it's going to kill Hot Springs, and
 9 it isn't going to affect Rapid City. They say
 10 it by their own. This is going to be a
 11 negligible positive impact in Rapid City's
 12 economy and a major negative impact on
 13 Hot Springs. Thanks.

14 MS. PETERS: I guess we're competing with
 15 Christmas now. So that is the -- Chris, any
 16 more cards for speakers? Okay.

17 Again, we want you to focus your comments on
 18 the draft EIS. A lot of things being said, you
 19 know, are going to be in the record, but if you
 20 had a chance to look at the draft EIS or the
 21 boards, those would be the comments that we're
 22 looking for.

23 A couple of minutes, if anyone hasn't had a
 24 chance to speak. You -- okay. We'll open it
 25 back up for anybody. Sal.

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Commenter TP: Pine Ridge public meeting transcript

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1 SAL FRANCO: I spoke once already, but I'd
2 like to add a couple comments, if I may.
3 I didn't think about it a while ago, and
4 maybe I should have. That board back there says
5 hard to keep Hot Springs open because of lack of
6 staff.
7 Well, Adrian Smith and a couple of Senators
8 in South Dakota had a meeting in Hot Springs
9 about a year ago, was that? I believe. One of
10 the questions was asked, Why is it so hard to
11 keep a physician in the VA facility in
12 Hot Springs?
13 Well, my answer to that is, Would you like
14 to keep working at a facility that had no job
15 security? Not me. I'm going to go someplace
16 where I can get a job and stay there. I'm not
17 going to keep a job that they might come up
18 tomorrow and tell me, Hey, sorry, we're closing
19 the place, you don't have a job.
20 I've lost two of my last physicians in
21 Hot Springs that way. Had one for about a year
22 or so. He's up in Idaho. The other one is
23 working for Fall River hospital there in
24 Hot Springs. They are not with the VA anymore.
25 Why? No job security. Like to point that out.

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TS-38

TS-38: VA has tried to include the primary difficulties in retaining qualified staff at the Hot Springs medical facility in Section 1.2.2.1 of the Final EIS. However, VA recognizes that a concern over job security - associated with the uncertain future of the Hot Springs facility - could be another reason staff choose not to work here. The general point remains the same, however - that staffing has been a problem and is one of the reasons for Agency action.

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1 Torrington, Wyoming, Western Sugar. What's
 2 Cabela's going to do to Sidney? That would be
 3 just as bad for Sidney as closing Hot Springs VA
 4 hospital is going to be for Hot Springs,
 5 South Dakota. But do we care about the town?
 6 No. We want to help somebody else. Thank you.
 7 MS. PETERS: Thanks, Sal. Okay. If there
 8 are no other comments, I want to --
 9 TROY WALKER: I just got one more thing to
 10 say if I can.
 11 MS. PETERS: Okay.
 12 TROY WALKER: Then I'm done. Okay. Okay.
 13 What I'd like to say is, the reason why we
 14 should fight for Hot Springs is because they are
 15 family. When I go there, everybody knows me by
 16 my first name. I'm not cattle. All the
 17 community people, when I go to places to eat,
 18 they know me.
 19 We go -- I go to Fort Meade every once in a
 20 while because I have a neurologist up there.
 21 They don't care. You go to ra -- it's our
 22 second home. If they build a facility in
 23 Rapid City or even expand Fort Meade, it's not
 24 our home.
 25 We have to travel through a congested town,

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TS-39

TS-39: Your support for keeping Hot Springs facility open is noted and included as part of the public record for this EIS.

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1 Rapid City, and for our mental status, that's
2 terrible. We're rural. We decided to stay in a
3 rural area. That's where we want to be.

4 So that's all I have to say. We can do
5 this. We can fight for the VA, and we can keep
6 Hot Springs open. Thank you.

7 MS. PETERS: Thank you, Troy.

8 ED RAMIREZ: I can compete with that
9 trombone.

10 Ladies and Gentlemen, I tell you, I can
11 understand --

12 MS. PETERS: You're not -- you're not
13 competing with the trumpet. Speak into the
14 microphone.

15 ED RAMIREZ: I'm not -- I can understand
16 where he's coming from when he makes the
17 statement that we shouldn't stop fighting. But
18 how can you stop fighting when the war has
19 already been won?

20 For those of you who are not economically
21 inclined, okay, the environmental study, impact
22 study, that's a law. They have to have that.

23 And then when the -- DiStasio or whatever
24 the other director's name was, all those
25 townhouse [sic] meetings, that was because of

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1 the law.
 2 Again, they already know what they are going
 3 to do, the VA. And I'm telling you, folks, in a
 4 couple years, they've got to buy the land. Once
 5 they buy the land, they've got to have another
 6 impact study done.
 7 This is just a cushion to pacify the
 8 veterans and say, Look we're -- we're trying to
 9 help you. We're trying to service you. But we
 10 have to have this impact study. Waste of tax
 11 dollars money for what? For knowledge that we
 12 know that the VA in Hot Springs is going to
 13 close. And that's sad.
 14 MS. PETERS: Okay. So --
 15 DAVE FISHER: Can I make a comment?
 16 MS. PETERS: Gentlemen.
 17 DAVE FISHER: I'm not signed up.
 18 MS. PETERS: That's all right. Just state
 19 your name.
 20 DAVE FISHER: Thank you. I'm Dave Fisher,
 21 and I appreciate the comments tonight. A lot of
 22 good points were made.
 23 I want to stand up and try to say something
 24 positive for what we have. And I really enjoy
 25 working with the people at the clinic here. I

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TS-40

TS-40: Under the new preferred alternative A-2, which is a modified version of Alternative, VA would now maintain a small presence on the Hot Springs campus to operate a new and modern CBOC within a renovated Building 12.

Regarding the potential need for another impact study, the decision to operate the CBOC on the existing Hot Springs campus would require no additional NEPA review. With respect to Rapid City, the EIS includes a bounding analysis and site assumptions - for both Hot Springs and Rapid City - to help it identify potential impacts without a specific site being identified. Another NEPA review would be required for proposed activities in Rapid City ONLY if the site selected included special characteristics that had not been evaluated in this EIS.

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1 think we've got some first-rate doctors, and
2 I've had good care. My health has not been bad.
3 I've been really lucky with health, so the care
4 I've got in the VA system has been preventative,
5 so can't speak to anything serious.

6 But I would say that the system has its
7 problems, and they have a lot of bureaucracy
8 that makes things difficult. I know from family
9 members that work at the VA in Utah that they
10 have money problems, the VA does, and that could
11 be where the changes are coming from.

12 I think the Choice Program could work. I --
13 I had a bit of cancer burned off my nose, and it
14 was no problem. My doctor recommended it at the
15 clinic here in Scottsbluff. And they sent me
16 over to the Regional West and got me an
17 appointment with a doctor that specialized in
18 that, and he did it. There wasn't any big
19 hassle with the paperwork.

20 And I know that's not been the experience of
21 a lot of other people, but I am saying that I
22 think the Choice Program can work, and that
23 has -- that would help our travel quite a lot.

24 That doesn't mean I'm in favor of closing
25 Hot Springs. I think the people relationship up

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TS-41: Thank you for sharing your personal story and for your comment. Your support for keeping Hot Springs facility open is noted and included as part of the public record for this EIS.

TS-41

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1 there is important, and obviously, they have a
 2 very good relationship. Thank you.

3 HOMER CHARO: Can I get the mic, please.

4 MS. PETERS: Yep. I'm going to bring it
 5 back to you.

6 HOMER CHARO: I asked earlier if there were
 7 any VA reps here, and there are two gentlemen
 8 here that I do want to give credit to. We have
 9 Robert Alan Erdman from Morrill County. We have
 10 John Brehm, our VA rep from Scottsbluff County.

11 These guys go to bat for us, you guys. The
 12 trouble is that the VA rubber-stamps everything,
 13 Denied, no good, do it over, send it back.

14 These are the two guys that are fighting for
 15 us continually. They need the recognition, not
 16 to be put in a clump with everybody else that's
 17 in the VA that doesn't give us information, does
 18 not help. These two guys are the ones that go
 19 to bat. Remember them. Thank you.

20 DON ACKERMAN: I promise I'll be very short.

21 MS. PETERS: Okay.

22 DON ACKERMAN: In reference to EIS -- and
 23 this is important. I understand their
 24 viewpoint. That's fine. But I will tell you,
 25 our Congressional representatives have said

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1 this: If you have bad data that you put into
 2 the EIS and you get a bad result, then we will
 3 do something about that.

4 That is what they've said in writing, for
 5 what it's worth. If you think this is bad data,
 6 you have to prove it's bad data. And they said
 7 they would act on it.

8 And if you're afraid to do it yourself, get
 9 the information to me, and I'll forward it in.
 10 The point is, they are asking us to fight the VA
 11 the correct way. There's a lot of ways we could
 12 fight them. The correct way. Put the data in.
 13 If it's bad, you prove it's bad data. If you
 14 put in bad data, you're going to get a bad
 15 result. You know that.

16 So, you know, we could talk all day if it's
 17 going to happen or not. As long as I'm
 18 breathing, that facility will not close. All
 19 right? You got that? That's a fact. That's a
 20 fact.

21 SPEAKER: I just have one statement. You
 22 said that you thought the VA -- or the Choice
 23 Program could work. When we started it, it took
 24 us forever to get any appointments, plus no
 25 local doctors or hospitals take this program.

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TS-42

TS-42: Comments about the Choice Program are not relevant to the scope of activities analyzed in the EIS. See group response E.3.3 in this Appendix relating to the Veterans Choice Program in the proposed reconfiguration. Section 2.2 of the Final EIS has also been revised to clarify the purchased care (now referred to as Care in the Community) element of the proposed reconfiguration under all of the alternatives.

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<p>63</p> <p>1 So you have to go a long ways away in order 2 to get it to work. So you're traveling almost 3 as far.</p> <p>4 PATRICIA SHUMWAY: Hi. I'd just like to 5 reiterate what Don Ackerman from Hot Springs 6 said. He did say that this environmental plan, 7 the entire plan, it did not involve or consider 8 this area, Scottsbluff County. And he mentioned 9 how Scottsbluff County is one of the biggest 10 counties.</p> <p>11 And that's a really big thing that you all 12 might want to put on this form, because he was 13 noting how, if you have bad data, it's bad 14 results.</p> <p>15 And in relation to how this area wasn't 16 included, and I know there's a spot there on 17 these, oh, billboards that says how minorities 18 are not impacted if this was to happen. And I 19 believe the census is something like, and I 20 might be wrong, is it 30, 35 percent? It's a 21 big percentage of Hispanic population that we 22 have in this area.</p> <p>23 And if they are not including Scottsbluff 24 County in this data, how many veterans and 25 veterans-to-be are not being impacted in their</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TS-43: VA acknowledges the omission of Scottsbluff Veterans in the early discussions about the proposed reconfiguration. However it has since been corrected and VA used the most up-to-date information available in the EIS.</p> <p>TS-44: Minority and low income data included and analyzed in the EIS (Sections 3.15 and 4.15) are at the county level (Fall River County) and show total minority population much less than the commenter's figures of 30-35 percent. Additional internet research identifies Hispanic population at less than 5% for Hot Springs (http://www.city-data.com/city/Hot-Springs-South-Dakota.html). These small percentages are consistent with VA's analysis in the EIS which indicates that minorities would not be disproportionately affected from the proposed reconfiguration.</p> <p>Alternatives involving new construction in Hot Springs could benefit minority and low income populations through new construction jobs. In addition, a proposed new VHA national pharmacy call center, to be located in Buildings 3 and 4 on the existing campus, would bring 120 new jobs to the area that would potentially benefit the local population, including minority and low income populations.</p>

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<p style="text-align: center;">64</p> <p>1 results?</p> <p>2 I'm thinking that in the big cities, there</p> <p>3 aren't so many people, older generations and new</p> <p>4 generations, that are signing up for the</p> <p>5 military. People do it because they love our</p> <p>6 country, and they do it because they need a good</p> <p>7 job.</p> <p>8 And I think we're aware that there aren't</p> <p>9 the jobs in rural communities for people, and so</p> <p>10 I think more people are inclined to sign up for</p> <p>11 the military in rural areas. And I really think</p> <p>12 that the data might be skewed.</p> <p>13 I would suggest that if you don't have a</p> <p>14 form for making comments, pick one up. Make</p> <p>15 copies, give it to your friends, your neighbors,</p> <p>16 anyone that does have an opinion either way.</p> <p>17 Thank you very much.</p> <p>18 MS. PETERS: Thanks. One more here?</p> <p>19 SPEAKER: Yes, ma'am. Good evening, Ladies</p> <p>20 and Gentlemen. I tend to talk a little fast, so</p> <p>21 I'll try to slow it down. If I talk a little</p> <p>22 too fast, just let me know. I'll do what I can.</p> <p>23 So I used to go to the Cheyenne VA. I got</p> <p>24 out of the Marines in 2010. Bit of a crippled</p> <p>25 mess. I tried real hard to get back into the</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TS-45: More military recruits could possibly come from rural areas, however, it has no direct relevance to the Veteran population data used in the EIS or on the proposed reconfiguration alternatives.</p> <p style="text-align: center;">TS-45</p>

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1 civilian life. It was really hard.
 2 I tried getting all the help I could from
 3 the Cheyenne VA, and I played phone tag for
 4 years and then finally talked to John. He
 5 helped me get some things -- he helped me get
 6 some things straight. Got me swapped over to
 7 the Black Hills VA.
 8 Part of the reason we're all rural, we
 9 prefer the hospitality. You get to the big --
 10 you get to the big cities, you don't get all the
 11 friendly people. You don't get the people that
 12 care. You get some schmo that says, Oh, just
 13 another guy to do some more paperwork on.
 14 That's all they care about.
 15 We're all Midwesterners. We take care of
 16 our own. You get to the -- they are
 17 Midwesterners up there, too, but it's a
 18 different breed when you get to the big cities.
 19 Thanks to the Black Hills VA, I've been able
 20 to start getting my counseling. I've been able
 21 to start acting like a real person, hide the
 22 rage -- not hide the rage, take care of it.
 23 You know, it's all of you. I haven't had to
 24 use all the services that the VA offers quite
 25 yet. Thankfully, I'm still in fair condition

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TS-46: Thank you for sharing your personal story. Your support for the Hot Springs facility is noted and included as part of the public record for this EIS.

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1 for now. But you, you all stuck at it. Good
 2 fight. Your war was a little harder than mine
 3 was. You got a little more -- quite a few more
 4 injuries than mine, physically or mentally. But
 5 you all stuck a good fight, and you will
 6 continue to do so.

7 A lot of people my age, I notice I'm the
 8 youngest fellow in this room, they see all the
 9 stuff going on, they don't even want to bother.
 10 They don't want to get involved because there's
 11 so much red tape or anything else involved.

12 Budget cuts that affect us all, all of us
 13 that signed that line. And you know, it's
 14 just -- then they're trying to make this move.
 15 It's just going to make it, like you said, go
 16 downhill.

17 This Choice Program, it's got flaws. They
 18 all do. They all do when they are first
 19 starting out, but they are really not going to
 20 get it straight. They try to implement this
 21 program to do this. Not going to do a thing.
 22 Got to get it on track.

23 They are not going to take care of us if we
 24 don't speak up, so we got to make sure we speak
 25 up. I'm doing my best to try to get people my

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TS-47

TS-47: Comments about the Choice Program are not relevant to the scope of activities analyzed in the EIS. See group response E.3.3 in this Appendix relating to the Veterans Choice Program in the proposed reconfiguration. Section 2.2 of the Final EIS has also been revised to clarify the purchased care (now referred to as Care in the Community) element of the proposed reconfiguration under all of the alternatives.

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1 age in so we can help make it better for all of
 2 us, too. Trying to get more involved, trying to
 3 get some other my age involved, too, because
 4 we're all in one big fight. Now we've got to
 5 fight here on the home front, taking care of
 6 ourselves.

7 AUDIENCE MEMBER: I have a question.

8 SPEAKER: Sure.

9 AUDIENCE MEMBER: When you were being
 10 discharged from the military, okay, by chance,
 11 were you given an out-briefing?

12 SPEAKER: Yes.

13 AUDIENCE MEMBER: Were you told about the VA
 14 and what you could or could not possibly be
 15 getting from the VA?

16 SPEAKER: Very little. They had a class
 17 called Citizen Tasks, and it was a very terrible
 18 class. Extremely misinformed. I hit the ground
 19 running once I figured out what was going on.
 20 Came out expecting something completely
 21 different. Information was terribly inaccurate.

22 SPEAKER: Thank you.

23 MS. PETERS: I want to -- one more speaker.
 24 Okay. While she's making her way up here, I
 25 want to encourage all of you to make sure that

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1 you look at the boards, particularly the third
2 one in dealing with services and where they will
3 occur through these proposals so you get a
4 little bit better understanding of that. And
5 then also make sure you get your comment forms
6 for your comments with --

7 MS. MODOVSKY: There's lots of comment forms
8 here.

9 MS. PETERS: Yeah. Take as many comment
10 forms. You don't need to take them home and
11 photocopy them. So you can take as many as you
12 want from that table there, so.

13 KENDRA LARUE: My name is --

14 COURT REPORTER: I'm sorry. I can't hear
15 you.

16 KENDRA LARUE: My name is Kendra Larue. I'm
17 an Air Force veteran. I served 12 years and
18 8 months in the Air Force. I separated mostly
19 to move back home, and just because there's
20 never guarantees for veterans. They are always
21 taking things away from us first.

22 So as a younger person coming back, it's
23 messed up that I don't look to the VA for help,
24 because they don't seem to be responding to give
25 us help.

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<p style="text-align: center;">69</p> <p>1 You know, John Brehm, you're amazing. I</p> <p>2 unfortunately don't qualify for any services</p> <p>3 through the VA, but I work with a lot of</p> <p>4 veterans that should and have trouble with</p> <p>5 getting services through the VA. And the</p> <p>6 Choice, I've heard nothing but bad things about.</p> <p>7 So, that's it.</p> <p>8 DAVID BAUER: I've just got a --</p> <p>9 David Bauer, and I've just got a comment about</p> <p>10 the services at Hot Springs.</p> <p>11 I had an appointment for the 3rd for an MRI,</p> <p>12 but I had my uncle up there the 20th. And so</p> <p>13 they put me in there, and I got it done that day</p> <p>14 instead of another trip. That's the kind of</p> <p>15 services we get from the VA in Hot Springs.</p> <p>16 We are not going to get services like that</p> <p>17 anyplace else. They'll bend over backwards</p> <p>18 to -- if they think we need an X-ray or</p> <p>19 something, it's done that day. Not another</p> <p>20 appointment. That's the kind of services we</p> <p>21 have at Hot Springs.</p> <p>22 MS. PETERS: Again, encourage you to look at</p> <p>23 the boards, grab comment forms. The copy of the</p> <p>24 EIS is in the local library here, and it's also</p> <p>25 online if you choose to look at the different</p> <p style="text-align: center;">BLACK HILLS REPORTING 605.721.2600</p>	<p>TS-48: Comments about the Choice Program are not relevant to the scope of activities analyzed in the EIS. See group response E.3.3 in this Appendix relating to the Veterans Choice Program in the proposed reconfiguration. Section 2.2 of the Final EIS has also been revised to clarify the purchased care (now referred to as Care in the Community) element of the proposed reconfiguration under all of the alternatives.</p> <p>TS-48</p> <p>TS-49: Your support for keeping the Hot Springs facility open is noted and included as part of the public record for this EIS.</p> <p>TS-49</p>